ACTIVATE LEARNING

Activate Learning

Safety Manual & General Information





This Manual supports the College Health and Safety Policy.
This Manual describes procedures related to health and safety, and general information, pertaining to Activate Learning operations on its college campus and off-campus centres. Specific local safety rules for laboratories, workshops and services within each building must be used in conjunction with this Manual.

Contents

Preface

Staff are to refrain from producing hard copies of this manual due to any changes that may be required and, although an amendment record sheet has been provided, there is some potential for one or more hard copies not to have been updated to the most recent amendment state at any given time.

To that end, the on-line version available on the Policies and Procedures SharePoint page will be considered definitive.

Please notify the Group Health & Safety Manager (contact details below) as soon as possible of any changes that may be necessary to the guidance contained in this Manual.

Immediately preceding the detailed contents of this Manual, there is a summary of Key Emergency Actions (including a list of useful telephone numbers), which may be used as guidance in the event of any one or more situations dictating a rapid reaction by members of staff. More detailed consideration of the implications of a potentially hazardous situation will be found in the body of the Manual, and the relevant text should be reviewed as soon as possible after the immediate crisis has been managed, including guidance regarding accident reporting.

A very positive attitude to health and safety and a strong health and safety culture exists within Activate Learning and its college campuses. The strength of the arrangements described in this Manual depends on a continued willingness on the part of all colleagues to enter into that spirit and comment constructively on the health and safety strategy for the whole College. To that end, the College Compliance & Risk Committee welcomes constructive criticism of the arrangements described in this Manual and the Group Health & Safety Manager is always available to speak with colleagues about general and specific matters.

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Last reviewed/updated: 24th March 2025

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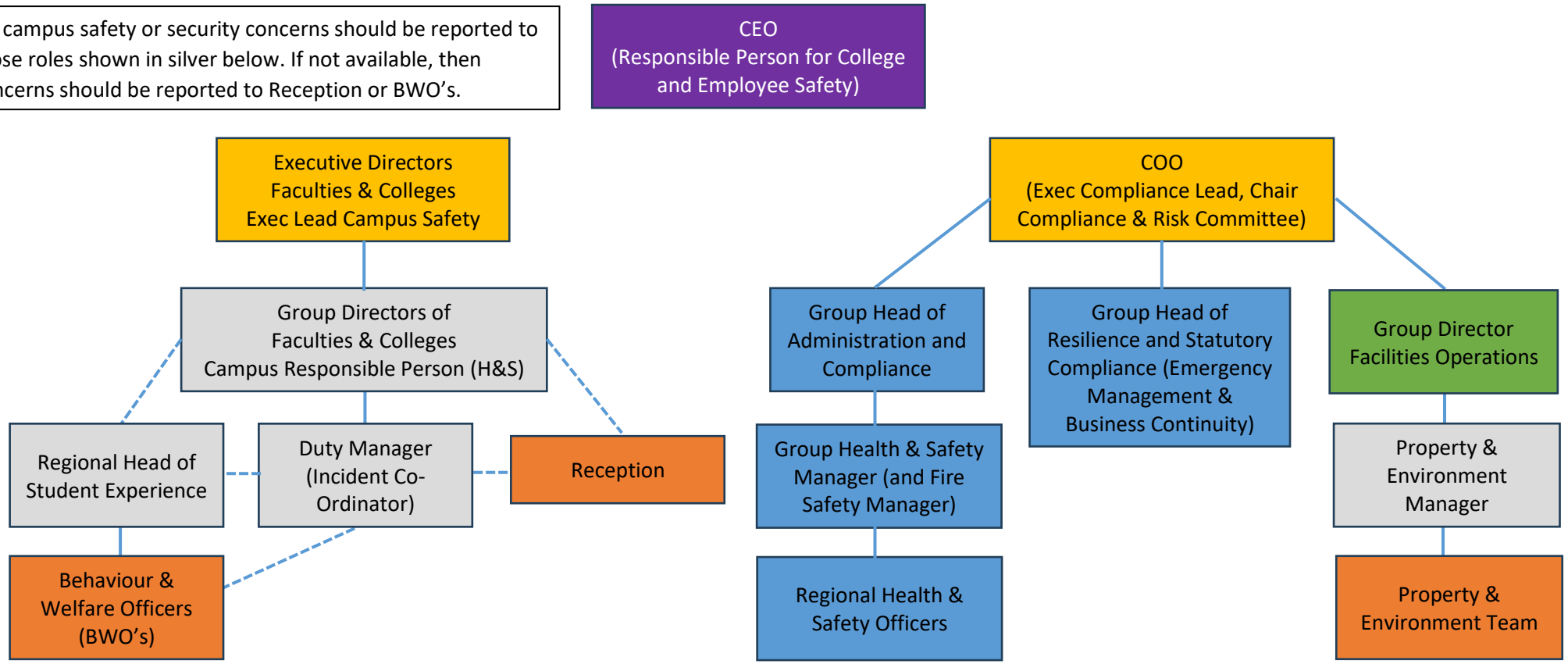
Health & Safety on College Campuses.
Who has responsibilities, and to whom should I report a problem

On campus safety or security concerns should be reported to those roles shown in silver below. If not available, then concerns should be reported to Reception or BWO's.



Key:

- Gold Team – Strategic Management Team
- Silver Team - Campus Incident Management Team
- Bronze Team - Emergency Response Team
- Group Advisory roles
- Tactical Lead for Legionella and Asbestos Management and College Infrastructure Security

Record of Amendments

AMENDMENT NUMBER	DATE OF ISSUE	AMENDED BY	DATE AMENDED

Significant Changes
(New document, March 2025)

A comprehensive review of the Health and Safety Manual has been conducted by numerous key stakeholders including members of the Health and Safety Team, the Compliance Manager, Property & Environment Managers, Group Head of Resilience and Statutory Compliance and the Chief Operating Officer (COO). Hyperlinks and other cross-references have been tested (and, where necessary, updated).

Any significant changes resulting in future amendments will be detailed in this section.

Document Control

VERSION 1 – March 2025 – Submitted to members of the Compliance & Risk Committee, TU H&S representatives, members of the Health and Safety Team, the Compliance Manager and Property & Environment Managers for comments and amendments.

Health & Safety Records Retention Schedule

Introduction

The College recognises that the efficient management of its records is necessary to support its core functions, to contribute to the effective management of the institution and to comply with its legal and regulatory obligations. Good records management is also important for the purposes of accountability, for sources of evidence, for business continuity and for understanding the College's organisation and procedures.

The purpose of the College's records management procedures is to provide a framework for the creation, management and disposition of records within the College. The College's Data Protection manual provides helpful information about the appropriate disposal of records, irrespective of format. It is advised that the above-mentioned documents are read in conjunction with this Guidance.

Aim of Guidance

Health & Safety Records Retention Schedule within the Data Protection Manual focuses on records relating to the management of occupational health and safety within the College as a whole, and within individual departments. It is based on Section 25 of JISC's* Records Retention Schedule for Higher Education Institutes, which deals with records for health and safety management.

Key Definitions

- **A record –** defined as recorded information, in any form, created or received by the College that facilitates its business, and which is thereafter retained for a set period to provide evidence of its transactions or activities. Records may occur in all types of formats or medium, including electronic media.
- **Records Management –** is a means of systematically managing the creation, receipt, maintenance, use and disposal/destruction of records.

What help is available?

The Data Protection Team provides advice, guidance and training related to data protection, records management and freedom of information issues. The team's SharePoint site contains a wide range of guidance documents on records management topics. If the advice that is sought cannot be located on that site, please contact the team directly at dpo@activatelearning.ac.uk.

Section 1. Performance Measurement & Review

1.0. Procedure Statement

Activate Learning is committed to ensuring a safe and healthy environment for staff, students, visitors, contractors and others invited to the premises. To comply with the Health and Safety at Work etc Act 1974 and the Management of Health and Safety at Work Regulations 1999, the College will adopt appropriate arrangements for the effective planning, organisation, control, monitoring and review of preventative and protective measures which are implicit for the management of health and safety.

The College is committed to ensuring a healthy and safe environment for staff, students, visitors, contractors and others invited onto the premises. To this end, the College will:

- Through proactive measurement against health and safety standards conduct health and safety monitoring,
- Carry out regular health and safety monitoring of the workplace and College activities,
- Produce an action plan based on the outcome of monitoring from 2024/2025 to develop the safety management system further and identify where additional resources are required or assistance is to be targeted.
- Conduct an annual review of performance against the College Health and Safety Policy

1.1. Introduction

This procedure is to ensure that:

- Departments are monitored regularly to identify any unsafe practices.
- Departments are monitored regularly to ensure compliance with legislation, best practice and policy.
- Where departments are displaying unsafe practices or are non-compliant, they are recorded, control measures assessed, and remedial measures implemented.
- As a last resort, high risk unsafe or non-compliant activities are stopped until rectified.
- Managers and Directors are made aware of the issues.
- Maintain Activate Learning's reputation
- Provide a robust management and decision-making framework.

1.2. Measurement and Review

The Health & Safety Manager will maintain a programme of monitoring of Faculties and Group Service Departments annually. The monitoring will take different forms based on the expected outcome and the best method for the workplace. The types of monitoring (as defined by the HSE)[1] that will take place are as follows:

- **Safety Tours** - general unscheduled inspections of the workplace (walk-abouts, visits to depts. / activities) to monitor cleanliness and safety housekeeping, and to talk with staff.
- **Safety Sampling** - systematic sampling of particular dangerous activities, processes or areas (spot-checks on activities, ad-hoc review of dept. risk assessments etc.),
- **Safety Surveys** - general inspections of particular dangerous activities, processes or areas (the standard formal inspection).
- **Incident Investigation Inspections** - carried out after an incident causing a fatality or injury (an accident), a near miss which could have resulted in an injury, or a case of ill health and has been reported to the health and safety enforcing authority.

[1] Inspections of the workplace

Formal inspections (also referred to as safety surveys) will be conducted using a 'scored' checklist appropriate to the type of workplace being inspected. Departments which do not achieve the minimum overall compliance benchmark (currently 85%) OR those deemed high risk from a risk-based approach will undergo an additional inspection. The inspection may identify major and minor non-compliances and make recommendations for corrective action, which will be forwarded to the appropriate Group Director.

In addition to the internal monitoring, the College will undergo an external audit during 2024/2025 Academic Year.

The Health & Safety Manager and Group Head of Administration and Compliance will produce a detailed annual report to the Corporation, analysing current performance, identifying major and minor non-conformances and making recommendations for corrective action.

The College H&S Risk Register and results from inspections will form the basis for the Health & Safety Action Plan and identify the resources necessary to fulfil the health and safety function at the College

1.3. Health and Safety Monitoring

There are many different types of monitoring, but they can generally be categorised as either 'active' or 'reactive':

- Active methods monitor the design, development, installation and operation of management arrangements. These tend to be preventive in nature, for example:
    - routine inspections of premises, plant and equipment by staff
    - health surveillance to prevent harm to health
    - planned function check regimes for key pieces of plant
- Reactive methods monitor evidence of poor health and safety practice but can also identify better practices that may be transferred to other parts of a business, for example:
    - investigating accidents and incidents
    - monitoring cases of ill health and sickness absence records

The Health & Safety Officers will undertake regular inspections of departments and, on a rolling basis, geographic areas of each College campus.

On completion of each inspection, a report will be produced detailing any remedial actions and recommended control measures and sent to the Curriculum Manager (CM) / Head of Dept and copied to the relevant Group Director.

The Health & Safety Officers will follow up on the remedial actions to determine if the recommended control measures/actions have been implemented. Where actions have not been completed, a report will be sent to the relevant Group Director with a summary provided at each Campus H&S Committee Meeting.

1.4. Health and Safety Action Plan

The Health & Safety Manager, will at each H&S Committee meeting review the Action Plan against agreed targets and objectives, identify any new concerns arising and provide further advice.

1.5. Health and Safety Policy

The Health & Safety Manager will make recommendations to the Group Head of Resilience and Statutory Compliance for revisions to the Health and Safety Policy following recommendations from the inspection reviews and whether the responsibilities and arrangements set down within the Health and Safety Policy and associated manual are being implemented.

The Health and Safety Policy will be reviewed by the Group Head of Resilience and Statutory Compliance in liaison with the Compliance and Risk Committee and other key stakeholders, to ensure that the policy reflects the current activities, organisational structure and legislation.

1.6. Roles and Responsibilities

1.6.1. Group Directors of Faculty/Group Services

To ensure their teams co-operate with the Health & Safety Manager in ensuring the inspections are completed and to ensure that time and resources are allocated to Faculty and Group Service managers to enable them to complete the task. Plans for corrective action are included within Faculty and Group Service meetings reviews.

1.6.2. Health & Safety Manager

The Health & Safety Manager will:

- Produce an annual Action Plan following a review of the results from the inspection and audit programme and ensure that recommendations are converted into SMART plans, a copy of which is sent to all Group Director's, as appropriate,
- Raise campus related non-compliance with the Chair of the Campus H&S Committee,
- Make recommendations to the Group Head of Resilience and Statutory Compliance and the COO for revision to the Health and Safety Policy.

1.6.3. Health & Safety Officers

The Health & Safety Officers will:

- Be responsible for co-ordinating the inspections with the CM's and Group Service managers as appropriate.
- Notify CM's and Group Service managers as appropriate, of any remedial actions and recommended control measures identified from their inspections.
- Raise non-compliances at the Campus H&S Committees.

1.6.4. Curriculum/College Managers

CM's, Heads of Departments and other relevant College Managers are to ensure compliance with the College Health and Safety policy and associated manual, as such these responsibilities include:

- To co-operate with the Health and Safety team,
- To ensure adequate time is set aside for the completion of the inspections and allocation of time for interviewing staff members,
- To disseminate information from the inspection (good and bad practice) to staff within their area of responsibility,
- To ensure that corrective actions received from the Health & Safety Officers following the review are implemented and communicated to staff within their area of responsibility.

1.6.5. Staff

All staff are to adhere to the requirements of the College Health and Safety policy and associated manual to cooperate with key responsible personnel to enable them to comply with their Health and Safety duties.

1.7. Inspection Checklist

Inspections may involve assessment of documents, procedures, interviews of people and observations within each Faculty/Department. A report will be produced following each inspection which will include observations on best practice and recommendations to improve and maintain the local and College Health and Safety Management system. The inspection will ascertain and evaluate the compliance and effectiveness of health and safety operational procedures within the Faculty/Department.

Benchmarking will be used to identify areas of unacceptable levels compliance and increased/ongoing high levels of risk.

Each area of Faculty or Group Services dept will have a specific inspection checklist based on HSG65[2] Health and Safety Management recommendations.

Guidance notes will be made available to each CM and relevant Dept Manager to assist in preparing for any future inspection.

[2] Managing for health and safety (HSG65)

1.8. Inspection Report

The inspection report will detail an average overall compliance percentage for the Faculty/Department. It will detail significant findings and recommendations in areas where compliance levels require improvement, and it will prioritise the findings based on level of risk and include timescales for corrective action.

1.9. Benchmarking

The purpose of benchmarking is to generate improvements in the following areas of Health and Safety performance:

- Reduce incidents/accidents/ill health
- Improve compliance with the College Health and Safety Management System

For each Faculty/Department the overall compliance percentage concluded in each inspection will be retained and used as indication of their performance against the benchmark. Failure to improve in subsequent inspections is a clear identification of poor health and safety management within the Faculty/Department for which the root cause should be determined.

1.9.1. Benchmarking Objectives

Year 1 (2021 - 2022)
During Year 1 of the inspection programme each Faculty/Dept underwent a programmed inspection. The benchmark for Year 1 was 75% overall compliance.

Year 2 (2022 – 2023)
The benchmark for each year is for a significant improvement on the previous year based on overall compliance. The Head of Administration and Compliance agrees targets with the College Compliance & Risk Committee in line with corporate targets and standards. The benchmark for Year 2 was 80% overall compliance

Year 3 (2023 – 2024)
During Year 3 of the Inspection programme each Faculty/Department should have received one inspection annually. This may have increased to two inspections for some departments if it was identified that significant improvement was not being made. The benchmark for academic year 2023-2024 for overall compliance was 80%.

Year 4 (2024 – 2025)
During Year 4 of the Inspection programme each Faculty/Department will continue to undergo regular inspections annually. Additional inspections may be required if it is identified that significant improvement is not being made. The benchmark for academic year 2024-2025 for overall compliance will be 80%.

Year 5 (2025 – 2026)
During Year 5 of the Inspection programme each Faculty/Department will continue to receive regular inspections but again this may increase to two inspections if it is identified that significant improvement is not being made. The benchmark for academic year 2025-2026 for overall compliance will be 85%.

1.10. References

- HSG 65 HSE Managing for health and safety
- ISO 45001 Occupational health and safety management systems
- Activate Learning – Health and Safety Policy

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Section 2. Fire Safety Management

2.0. Procedural Statement

It is the policy of Activate Learning (hereafter referred to as the College) to ensure that all employees, students, contractors, and visitors are protected from the risks of fire. In order to achieve this aim, appropriate fire prevention/precaution measures shall be taken. Also, appropriate evacuation procedures shall be developed, implemented, and periodically tested. All persons shall be provided with sufficient and appropriate fire awareness training and instruction. All premises shall comply with relevant fire safety legislation and recognised good practice.

2.1. Objectives

- To appoint one or more competent persons to fulfil the responsibility under the Regulatory Reform Fire Safety Order.
- Ensure that all Individuals are given clear information on the procedure to be adopted in the event of a fire emergency.
- Undertake suitable and sufficient fire risk assessments of all premises and activities within premises.
- Conduct regular fire evacuation drills and testing of emergency equipment
- Conduct regular fire safety inspections and final exit route checks.
- Ensure fire management plans are authored and recommendations completed.
- Monitor arrangements against the fire management plans.

Provide appropriate instruction and training for all Individuals who are responsible for acting as Evacuation Wardens.

- Undertake an annual review to ensure arrangements adopted are working and effective.

2.2. Key Legislative Requirements

The Health and Safety at Work etc Act 1974; (the Act), sets out the general duties which employers have towards employees and members of the public, and employees have to themselves and to each other. These duties are qualified in the Act by the principle of 'so far as is reasonably practicable'. In other words, an employer does not have to take measures to avoid or reduce the risk if they are technically impossible or if the time, trouble, or cost of the measures would be grossly disproportionate to the risk.

The Management of Health and Safety at Work Regulations 1999 generally make more explicit what employers are required to do to manage health and safety under the Act. Like the Act, they apply to every work activity. The main requirement on employers is to carry out a risk assessment. Employers with five or more employees need to record the significant findings of the risk assessment.

The Regulatory Reform (Fire Safety) Order 2005, (RR(FS)O); implements a risk-based approach to fire safety in community, industrial and business premises. It requires the responsible person (usually the employer, owner or occupier) to carry out a fire safety risk assessment and implement appropriate fire precautionary and protection measures, and to maintain a fire management plan

The Building Regulations 2000; set out the minimum requirements and basic performance standards designed to secure the health, safety and welfare of people in and around buildings.

The Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR); require employers to protect workers from the risks from explosive atmospheres. In order to ensure compliance, Faculties and Support Services are required to:

(a) Carry out a risk assessment of any work activities involving dangerous substances

(b) Provide technical and organisational measures to eliminate or reduce as far as is reasonably practicable the identified risks

(c) Provide equipment and procedures to deal with accidents and emergencies

(d) Provide information and training to employees

(e) Classify places where explosive atmospheres may occur into zones, and mark the zones where necessary

Fire safety is everyone's responsibility. All employees, students, contractors and visitors are expected to follow established safety procedures to ensure the safe use of electrical/gas appliances, the safe use, storage and disposal of hazardous/combustible materials.

In addition to the legal fire prevention requirements, guidance and advice on specific fire prevention practices are available from the H&S Team, and the Fire Safety, and Policies and Guidance links on the H&S SharePoint portal.

2.3. Roles and Responsibilities

2.3.1. The Board of Corporation

The Corporation as Employer has the responsibility for Fire Safety Management in respect of the activities and premises under its control. It has delegated the duty for fire safety management to the CEO who is appointed as 'Responsible Person' under the requirement of the Fire Safety Order.

2.3.2. CEO – 'Responsible Person'

The CEO is the person designated as the Responsible Person on behalf of the Corporation. The Responsible Person delegates daily operational duties to the Faculty and Group Services Directors, Director of Group Facilities Operations, the Group Head of Administration and Compliance and the Group Health & Safety Manager but remains overall responsible for ensuring that general fire precautions are taken to ensure the safety of individuals, suitable and sufficient risk assessments are conducted, and arrangements are put into place to review and monitor the protective measures.

2.3.3. Director of Group Facilities Operations

Will have responsibilities to ensure (or delegated to the Property & Environment Manager):

- Fire Risk Assessments are undertaken, and Action Plans formulated from any remedials,
- Overall compliance of this procedure by P&E staff with designated roles and responsibilities,
- Bringing to the attention of the CEO areas of non-compliance/effectiveness,
- Working with the Group Health & Safety Manager to ensure a sufficient number of P&E staff appointed to discharge duties under this procedure.

2.3.4. Group Health & Safety Manager

Will have responsibilities to ensure (assisted by regional H&S Officers):

- The monitoring and effectiveness of this procedure and associated procedures,
- Completion of reports and information shared at campus H&S Committee meetings.
- Staff receive information on the Fire Emergency Procedures to be adopted,
- Students receive suitable information and awareness of Fire Emergency Procedures,
- Implementation of Fire related training,
- Taking a "supervisory" role in planned fire evacuations by monitoring the Duty Manager in their duties or delegating this responsibility to a nominated member of staff during times of planned absence,
- Two Fire Drills are undertaken at each Campus each year/full evacuation
- Via a system of Inspections conduct checks on fire escape routes and the provision of fire safety management appliances,

- Assistance is provided in the completion of Personal Emergency Evacuation Plans (PEEPs),
- Liaison with the Head of Governance & Compliance and Head of Resilience & Statutory Compliance to advise on the adequate provision of fire safety signs/notice and requirements in the Fire Safety Action Plans,

There is an adequate number of appointed Evacuation Wardens at each College Campus,

- Fire Action Notices are displayed in appropriate locations.

2.3.5. Property & Environment Manager

The Property & Environment Manager has responsibility for the maintenance of the building elements, systems and infrastructure provided for fire safety at their College Campus.

General responsibilities include:

- The structural fire precaution and means of escape from buildings,
- The fire alarm system,
- The emergency lighting,
- The fire appliances/equipment,

General responsibilities relevant to each Campus will include:

- Maintaining the structural fire safety and means of escape from buildings,
- The fire alarm system,
- The emergency lighting,
- The fire appliances/equipment.
- Ensuring that all buildings within their control comply with fire safety requirements,
- Ensuring where possible that P&E staff attend when determining the source of activation,
- Ensuring that regular checks of the fire protection systems and escape routes are completed,
- Ensuring that weekly fire alarm tests are undertaken during the core college hours (0830 – 1630hrs), ensuring that all alarm points are tested in rotation and keeping records of such tests,
- Ensuring that a competent Contractor is appointed to undertake statutory inspections/tests e.g., service of fire alarm systems; emergency lighting; fire extinguishers and retain appropriate records,
- Ensuring contractors receive a Site Induction via the Contractor Induction process,
- Any work which involves “hot works” are subject to a Permit to Work,
- To ensure that all Fire related matters are recorded e.g., service reports; maintenance records; emergency lighting test records; fire warning system inspection reports and fire-fighting equipment service reports.

2.3.6. Faculty and Group Service Directors

- Ensure they are fully supportive of this procedure and implement effective communication arrangements to enable compliance,
- To assist the H&S Team in ensuring enough Evacuation Wardens are available within their areas of responsibility.
- Ensure that staff, students, visitors, and contractors within their area of responsibility have been provided with information and the procedures to be adopted in the event of an emergency evacuation,

- Report any shortcomings in the College's fire safety arrangements to the Group Health & Safety Manager
- Suitable and sufficient Risk Assessments are compiled when dealing with hazardous substances or processes,
- Means of escape in areas of responsibility are maintained in a safe and unobstructed condition and accessible to everyone at all times the premises are occupied,
- Ensure that staff and students who have mobility, sensory disabilities or who are temporarily incapacitated thus affecting their ability to mobilise and evacuate the building have a Personal Emergency Evacuation Plan (PEEP) completed and ensure a copy is forwarded to the H&S Team.

2.3.7. Campus Fire Officer (Duty Manager attending the scene of a fire incident)

Each Campus will have a nominated lead as Campus Fire Officer who will take a lead role in organising the evacuation and passing on information in a systematic manner. This is the role of the Duty Manager.

The Campus Fire Officer (Duty Manager) duties are as follows:-

1. To go immediately to the fire control point and notify Reception and the P&E Team that an evacuation is in progress.
2. To check in each Evacuation Warden as they arrive at the Fire Assembly Point, noting reports on the whereabouts of people who are known to be left in the building and if any signs of fire have been seen during the sweep and evacuation of the building. Note: The Fire Officer may delegate the responsibility of liaising with Evacuation Wardens to another manager to allow the Fire Officer to control the incident.
3. To evaluate the information received from Evacuation Wardens and if no reports of fire are received to organise an investigation of the reason for the alarm activation.
4. To inform Reception if fire is suspected arranging for a 999-emergency call to be made to the Fire and Rescue Service.
5. If the alarm is found to be unwarranted, liaise with P&E to silence the alarms and reset the alarm system and give instructions to allow people to re-enter the building. If the panel will not reset and there is uncertainty as to the cause, the Fire and Rescue Service must be called, and the building must remain evacuated.
6. To liaise with the Fire and Rescue Service on their arrival and inform the senior office of the whereabouts of anyone remaining in the building.

2.3.8. Property & Environment (P&E) Staff

Under the direction of the Property & Environment Manager, the P&E staff will have responsibility for the following:

- To determine the source of activation and resetting fire panels to normal mode when directed by the Duty Manager OR the Fire Service,
- To remain in contact via radio with the Duty Manager,
- To assist in sweeping buildings in accordance with the instructions of the Duty Manager, closing fire doors, shutting down electrical equipment etc. 'where it is safe to do so'

To work with the Duty Manager to ensure that vehicular access to the College is restricted during planned and unplanned fire evacuation exercises.

- To assist the fire rescue services personnel where required,
- To participate in the debrief which will be held by the Duty Manager or H&S team (under guidance from Group Health & Safety Manager) following a Fire Evacuation.

2.3.9. Reception Staff

Reception Staff will assist with the Fire Safety arrangements by assisting the Duty Manager and notifying the Emergency Services when requested to do so.

2.3.10. Evening Duty Responsible Person (where relevant)

To remain on site at all times during the duty,

- Be available to respond at immediate notice to deal with emergency fire incidents as they arise,
- Be the lead person and act as Fire Officer in the event that the fire alarm is activated and communicate with Emergency Services,
- Report major incidents to the COO as per the out of hours contact rota,
- To cascade information to colleagues as appropriate,

2.3.11. Staff

All staff must be familiar with the fire procedures and their legal duty as required by the RR(FS)O and the Health and Safety at Work etc Act 1974.

Co-operate with the College to ensure compliance with the procedure,

- Take all reasonable care for the safety of themselves and others,
- Not to misuse or interfere with any appliance or equipment provided by the College,
- Report any obvious defects or shortcomings in College fire safety arrangement or procedures,
- Ensure that students under their care are provided with clear information and instruction in the event of a fire,
- Ensure that they comply with the requirements of Section 13 of this manual Smoking in the College Environment

Fire procedures are posted throughout the College and can be found on exit routes normally adjacent to fire alarm call points.

All staff must ensure that they are familiar with the alternative means of escape in case of fire by walking the routes from the area in which they are employed.

Staff should make themselves familiar with their assembly points which are indicated on the College interactive campus map.

If you have to evacuate the premises:

- DO exit quickly and calmly
- DO go directly to open air and report to the designated assembly point
- DO NOT enter an adjacent building unless directed by the Duty Manager
- DO NOT stop to collect bags
- DO close the door behind you
- DO NOT use lifts

Any staff not at their usual place of work on hearing the evacuation signal, must leave the building following the fire evacuation route signage, and go to the designated assembly point. On no account must they return to their own department.

The fire alarm call points can be found on corridors and adjacent to final exit doors.

Portable fire extinguishers are sited in ‘high risk’ areas and at regular intervals on corridors/exit routes.

In large buildings Evacuation Wardens are utilised. Any instructions they give to staff must be complied with as they are exercising their duties outlined in the College Health & Safety Policy.

2.3.12. Duties of Tutors

Tutors are responsible for the safety of their students when in class and must make themselves aware of the fire procedures for the buildings in which they lecture/teach.

They must ensure that students under their supervision are aware of what to do on hearing the fire alarm.

On hearing the evacuation signal which is a continuous or intermittent sounding of the fire alarm or may also be a vocal fire alarm on some campuses as the system is upgraded, the Tutor should ensure their students leaves the building by the nearest available exit route in a calm and orderly manner and proceed to the designated assembly point allocated to the building. Tutors are to remain with their students. The Tutor must endeavour to ensure their students remain at the assembly point until a clear instruction from the Duty Manager has been given to re-enter the building.

2.4. Evacuation Wardens

Are responsible for ensuring that:

- There is a total evacuation of the building during a fire emergency within their defined areas,
- Where it is safe to do so and they have received training, to use the fire extinguishers in accordance with their instruction and training,
- They identify all associated escape routes, fire alarm call points and the location of fire extinguisher equipment,
- They regularly check that the means of escape are not blocked and report any other fire safety issues to the Facilities Helpdesk,
- Any individual requiring assistance, are made known and that copies of PEEP's are made available,
- They undertake training for the role in order to maintain key skills and complete refresher training every 5 years,
- Supporting the Duty Manager to ensure that vehicular access is controlled and managed during planned/unplanned evacuations.

The number of Evacuation Wardens required for each building will be proportional to the size, complexity and fire risk of that building. The Group Health & Safety Manager will advise managers on appropriate numbers of Evacuation Wardens for their area of responsibility.

(Note: As a guide, it is suggested that adequate cover can be maintained if two Evacuation Wardens per Fire Zone are appointed to this role.)

2.4.1. Specific duties of Evacuation Wardens and Halls of Residents Wardens

Generally, the aforementioned are required to ensure that safe evacuations take place in the event of the alarm being raised in a campus building. An investigation into the cause of the alarm will be implemented by either the P&E Manager or H&S team.

2.4.2. In the event that the building goes into alarm, the duties of an Evacuation Warden are as follows:

1. To ensure that a safe evacuation of the building is taking place.
2. To sweep a designated area (Fire Zone) – providing the Evacuation Warden is in their designated area when the alarm is heard.
3. To identify if any occupants have been unable to evacuate the building and to report this fact to the Duty Manager. This is particularly pertinent if people with limited mobility have been placed into fire refuge areas. Where the refuge area has a form of communication, the Fire Warden shall ensure that Reception have been notified, by activating the emergency telephone.

4. To act on the instruction of the Duty Manager to monitor entrances to the building and to prevent people from re-entering until all clear is given.

5. To take instruction from either the Duty Manager or an officer from the Fire & Rescue Service that the building is safe to re-enter. This information is to be fed back to the occupants at the fire assembly point.

6. To take part in a short de-brief session with the Duty Manager if requested to do so.

(NOTE: Detailed guidance on the specific duties of Evacuation Wardens can be found on the Health and Safety SharePoint site.

2.5. Residential students

Co-operate with the College to ensure compliance with the procedure.

- Participate fully in the Fire Drills which may include early morning/evening drills,
- To ensure that any personal electrical appliance that is used within the Halls of Residence has been subject to a formal safety check prior to use and any electrical equipment brought into the Halls of Residence is fit for purpose and the Head of Accommodation is informed,
- Not to misuse or interfere with any equipment that has been provided in the Halls of Residence in relation to fire safety, e.g., fire-fighting equipment, fire blankets,
- Report any obvious defects or shortcomings in relation to fire safety arrangements within the Halls of Residence,
- Smoking is strictly forbidden in any campus buildings including the Halls of Residence.

2.6. Disabled Persons and Temporary Impairments

- Staff to inform their manager if they have a temporary or permanent impairment which may affect ability to evacuate the building,
- H&S team (if necessary) to assist in drawing up a PEEP (Personal Emergency Evacuation Plan) using the College template,
- Human Resources to notify the H&S Team if a new employee has a disability that may affect their ability to evacuate the building.
- Curriculum Managers to ensure that PEEPs are in place for students who have declared a mobility/hearing impairment.
- H&S Team to ensure that provision is made for the safe evacuation of staff/students via evacuation chairs and that sufficient staff are trained in their use.
- Please click on the following link to access the Personal Emergency Evacuation Plan (PEEP) form: PEEP Form

2.7. Contractors

- Conduct work in accordance with the control measures as identified in the RAMS's (Risk Assessment/Method Statement),
- Ensure that they have received a Campus Induction from either their Host or the relevant Property & Environment Manager, and have been given a copy of the Contractor Information Leaflet,
- The relevant Property & Environment Manager has issued the requisite Permit to Work if required,
- Notify their Host or relevant Property & Environment Manager of any shortcomings in the Campus procedures.

2.8. External Providers (providing services on behalf of the College or hiring the facilities)

The relevant host is to ensure external providers are aware of the need to:

- Co-operate with each other so as to comply with relevant legislation,
- Co-ordinate the various measures that have been taken to reduce the risks from fire,
- Identify the nature of any risks from fire and how they might affect others in or around the premises,
- Taking all reasonable steps to inform each other of the risks to other employees' health and safety arising out of their own employee's work.

2.9. Members of the Public

The relevant host is to ensure visitors are aware of the need to:

- Report to Reception and receive information via the Visitor Badge which must be always worn whilst at the College,
- On the sounding of the alarm to proceed via the nearest fire exit route to the designated Assembly Point,
- In the event of an evacuation, to remain in contact and report to their host.

2.10. Risk Assessments

- Fire Risk Assessments will be conducted for each College Campus building. These will be conducted by the Group Health & Safety Manager and recommendations from each assessment will be closed out by the P&E Manager
- Staff reps. will be provided with an update via the team meetings and H&S Committee on the progress of the Fire Risk Assessment reviews, significant findings and timescales for completion.
- Fire Risk Assessments will be held by the P&E Manager both in hard copy and electronically. Any Staff member wishing to review the Fire Risk Assessments should contact their appropriate P&E Manager. Fire Risk Assessments should not be removed from the P&E Office.
- The Group Health & Safety Manager is responsible for checking that actions arising from the Risk Assessment are completed and that documentary evidence to support the close out of actions is supplied. These actions will inform the Fire Safety Action Plans. Termly review meetings will be held with the P&E Manager and H&S Team
- If there is any reason to suspect that the Fire Risk Assessments are no longer valid, e.g. material changes to the layout of buildings or significant change of use, then a review of the Fire Risk Assessment will be conducted by the Group Health & Safety Manager and any changes will be formally recorded.
- The fire risk assessments shall be reviewed whenever any changes to structure, layout or usage of the building takes place to ensure their on-going relevance and adequacy.

(See Appendix 2 : Scope of the Fire risk assessment)

2.11. Fire Prevention

The College is committed to managing fire precautions and fire risks through the process of risk assessment and risk control measures. The College will:

- Ensure there is adequate number of escape routes from all parts of the building and that directional fire escape signs are displayed throughout the buildings.
- Provide Fire Action Notices that will be displayed in appropriate areas and ensure that appropriate No Smoking signage is displayed at entrances/exits to buildings.
- Ensure that fully serviceable Fire Extinguishers are in all escape routes and are of the appropriate type.

- Ensure that the fire alarm system can be activated manually via the break glass call points OR automatically via smoke or heat detectors.
- Ensure that all stairways are free from defects, provide a safe passage directly away from the building and emergency exits are illuminated by appropriate lighting.
- Ensure that automatic door closures are activated on the sounding of the alarm and where appropriate fire exit doors are fitted with local alarms.
- Ensure that the fire alarm can be heard throughout all parts of the buildings.
- Ensuring that exit routes are not blocked and that all fire exit routes/escape routes are operated via push pads or bars.
- Ensure that the fire alarm system is tested weekly and records maintained in the Fire Maintenance Log or other appropriate media managed by the P&E Manager. P&E Staff are responsible for carrying out the weekly test by activating a different alarm call point each time in rotation.
- Ensure the alarm system is serviced routinely on a six-monthly basis and that records are maintained by the P&E Manager.
- Ensure there is a mechanism in place for Staff to report any defects or short comings in the College's Fire Protection arrangements. This may be either by reporting to the Facilities Helpdesk via their online reporting tool or providing a comment on the H&S feedback form via the QR posters around campus.

2.12. Fire Doors

- Fire doors must be kept closed at all times (unless they are doors which automatically close when the alarm is sounded) to maintain compartmentalisation of the building and to prevent the spread of the fire and/or smoke.
- Corridors, stairways, landings and escape routes must be kept clear at all times of anything that is likely to cause a fire or accident or to impede evacuation in an emergency. Everyday objects such as boxes of paper left on an escape corridor pose serious obstacles during an emergency evacuation.
- Hazardous materials must be stored, used and disposed of in accordance with all legal requirements and safe working practices.
- All firefighting equipment must be kept free from obstruction and be readily available for use in an emergency. Portable firefighting equipment must not be removed or repositioned without authority from the Group Health & Safety Manager.
- Any obvious or suspected damage to, or misuse of, a fire alarm or firefighting equipment must be reported immediately to the H&S Team with a request raised on the Facilities Helpdesk to rectify the matter as a priority.

2.13. Fire Emergency Plans – Duties and Responsibilities

Fire Emergency Plans are designed specifically to match the needs of the building and campus it relates to and the organisation of the Group. Appendix 4 provides detailed guidance on the requirements of a Campus Fire Emergency Plan. It is the responsibility of the Property & Environment Manager assisted by the Group Health & Safety Manager, to ensure that special/specific procedures required for the fire emergency plan are drawn up (see Appendix 1).

2.14. Smoking Rules

- Smoking will only be permitted in the designated areas such as smoking shelters, which have been provided for the purpose of smoking, this includes the use of E-cigarettes and Vapes.
- Smoking is **not permitted** in any College buildings, e.g. offices; corridors; lifts; stairwells; toilets; staff rooms; entrances to college buildings etc. or in any vehicles owned or operated by the College, regardless of their status or business with the College.

2.15. Hot Working

'Hot Work' refers to any activity that produces heat, sparks or a flame. It is most associated with:

- Cutting and welding
- Brazing and soldering
- Use of grinding wheels
- Use of blow lamps and torches

Such work activities usually form part of construction or refurbishment works but may also be involved in small works carried out as part of repairs, maintenance or redecoration.

The College operates a Permit to Work system and only with prior approval and the issue of a PtW will Contractors be permitted to conduct hot works.

Staff who as part of the curriculum conducts hot work activities must identify from the risk assessment the appropriate controls to be implemented and ensure that students are adequately supervised when undertaking this activity.

2.16. Electrical Safety

As part of the College's risk control measures the College will ensure the following:

- All College buildings will hold in date electrical test certificates.
- Approved College Contractors will inspect and maintain the electrical installations.
- Arrange for portable appliance testing to be conducted in line with H&S recommendations and records held by the Facilities Helpdesk.
- Staff are informed via the mandatory online H&S training about ensuring good electrical safety and checking portable appliances prior to use and reporting any defects.
- All computers, printers and associated electrical equipment (portable) will be shut down each evening, where feasible.
- If portable heating is required by staff due to low temperatures within rooms, then only oil-filled heaters or blow heaters are to be used. Halogen type heaters are not permitted.
- Staff are advised not to bring in items from home and any items purchased for college use should be subject to a Portable Appliance Test before use.

2.17. Dangerous Substances and Explosive Atmospheres (DSEAR)

Workplaces, teaching spaces and activities to which the provision of the Dangerous Substances and Explosive Atmospheres Regulations 2002 apply must be risk assessed for fire and other risks in accordance with current legislation. The Group Health & Safety Manager will conduct DSEAR reviews every three years.

Dangerous substances include any substances used at work that could, if not properly controlled, cause harm to people because of fire or explosion. They can be found in nearly all workplaces and include such things as solvents, paints, varnishes, flammable gases, such as liquid petroleum gas (LPG), Acetylene etc., dust from machining and sanding operations and dust from foodstuffs.

This includes all workshops at the College.

Where possible flammable substances will be stored in separate buildings out of the main buildings. Appropriate signage in accordance with the Health and Safety (Safety Signs and Signals) Regulations 1996 must be displayed in entrances/exits where the flammable substances are stored.

Where flammable substances need to be stored in buildings, minimal quantities should be held and kept in locked storage areas. As above, appropriate signage must be displayed in entrances/exits.

2.18. Lightning Protection

All lightning protection at each College Campus is earthed and tested annually by an approved Contractor. Records of all tests are maintained by the P&E Manager.

2.19. Gas Safety

All gas appliances at the College are regularly maintained and serviced by Gas Safe registered engineers. Records of tests are maintained by the P&E Manager.

It is the responsibility of Faculty Staff to ensure that all curriculum used gas equipment including science laboratories and kitchen appliances are checked to ensure that the gas supply is turned off when not in use, particularly at the end of each day.

2.20. Letting or Hiring of College Facilities

All hirers are to be made aware of the College's Fire Safety arrangements and the procedures to be adopted in the event of a Fire via an Induction checklist which is managed via the P&E Manager

2.21. Alarm Tests

All fire alarms in Group buildings will be tested at designated times, Monday to Friday of each week, (as established between the relevant P&E Manager and Group Director of Faculty and College. Details of the tests should be entered onto the local Fire Alarm logbook and entered onto the Facilities Helpdesk 'Expansive'. It is the responsibility of P&E Manager to nominate an employee to carry out these tests and complete the logbook. Defects must be reported immediately to the Facilities Helpdesk. In the event of a complete system failing the Group Health & Safety Manager or H&S Team should be informed immediately.

(For further guidance on alarm tests refer to FSG05 Fire Alarm Tests)

2.22. Fire Evacuation Drills

The College will ensure that Fire Evacuation Drills are conducted at least twice a year, this will include early morning and evening drills as appropriate to the College business.

Records will be maintained by the Facilities Helpdesk or P&E Manager as appropriate, and any actions arising will be shared to relevant staff.

The Group Health & Safety Manager will coordinate and lead on the fire drills and observe each College planned Fire Drill.

The Group Health & Safety Manager and the Group Director of Faculty and College will schedule Fire Drills at the beginning of each Academic Year and share the proposed dates with appropriate staff. This is to ensure that the dates do not coincide with planned exams or other activities which must not be disturbed.

2.23. Fire Alarm Activation (follow additional instructions on the Fire Action Posters displayed within each building and residence).

Activation of the fire alarm will give warning via a continuous ringing bell or an electronic sounder with two toned warble.

Individuals using or supervising machinery or undertaking curriculum activities using hazardous processes must ensure that all reasonable steps are taken to quickly close down or to make safe process equipment before evacuating the area.

It is important that all Individuals are aware of the evacuation procedure specific to their Campus and local areas, e.g. Merrist Wood College Animal Management and Equine.

Appendices 3 & 4 to this section will provide further guidance to responsibilities in addition to the following paragraphs.

2.23.1. Activation Action on discovering a fire

a. Raise the alarm by operating one of the manual call points.

b. Call 999 and then inform the Reception.

c. Leave by the nearest available exit and proceed to the nearest Assembly Point.

d. Do not use the lifts.

2.23.2. Action on hearing the alarm – all individuals except for Evacuation Wardens

a. Do not stop to collect personal belongings.

b. Close windows and doors if it is safe to do so.

c. Escort any visitors and leave by the nearest exit and proceed to the nearest Assembly Point.

d. Do not use the lifts.

e. Do not re-enter the building until '**All Clear**' has been given by the Duty Manager OR Fire Service.

2.23.3. Action on hearing the alarm – all individuals within Halls of Residences (student & staff accommodation)

a. Do not stop to collect personal belongings.

b. If safe to do so, place footwear and warm clothing on (if evacuation during out of hours).

c. Close windows and doors if it is safe to do so.

d. Leave by the nearest available exit and proceed to the nearest Assembly Point.

e. Notify the Duty Warden OR the Fire Service if you are aware of anybody missing.

f. Do not re-enter the building until the all-clear has been given by the Duty Manager OR Fire Service.

2.23.4. Accidental Activation

An accidental activation of the fire alarm either from a call point or by undertaking an activity which has resulted in an automatic detection device, e.g. smoke detector being activated must be notified to Reception to be relayed to the Facilities Helpdesk immediately.

2.23.5. Malicious Activation

A malicious activation of the fire alarm is defined as deliberately activating or causing another person to activate the fire alarm without suspecting a fire or other emergency. This action constitutes a disciplinary offence and will be dealt with via the Disciplinary Policy for Staff and Students. Malicious activation of a Fire Alarm is also contravention of the Regulatory Reform (Fire Safety) Order 2005 and the Health and Safety at Work etc. Act 1974.

2.23.6. Investigation into the Cause of the Incident

The H&S Team will investigate the cause for the activation and complete a report as appropriate. If applicable, recommendations will be contained in the report and actions assigned.

It will be the responsibility of the Group Director of Faculty and College to ensure recommendations are completed in a timely manner.

Where it is deemed that Disciplinary Action will be taken, the Group Health & Safety Manager will make available such reports as requested by the Head of HR or regarding a student matter, the appropriate Faculty Group Director.

2.24. Evacuation Procedures for Disabled Persons

Every individual who has a disability which may affect their ability to recognise that an emergency is taking place or to evacuate a building unaided will have a personal emergency evacuation plan (PEEP) drawn up. The Manager (for staff) or Tutor (for students) will consult with these individuals,

and where necessary prepare a plan, tailored specifically for that individual in relation to the building they use.

2.24.1. Wheelchair Users and Persons with Mobility Impairment

The wheelchair user must notify their tutors (or manager for staff) of their specific needs. If, due to the nature of the illness/injury, the individual cannot be removed from their wheelchair without risk of serious injury, movement to a point of temporary refuge will be considered as part of their PEEP.

It is essential that wherever possible the Duty Manager, Head of Student Experience and Evacuation Wardens are aware of staff, students or visitors to the building who have specific emergency evacuation needs.

NB. Most fire escape stairways or designated refuge areas are of half hour fire resistance (as a minimum) and will also provide the necessary protection 'until the arrival of Evacuation Wardens as part of their floor sweep or on the arrival of the emergency services to allow a safe evacuation.

Some refuges also have the provision of a communication system, (emergency telephone or Communication System), which are directly linked to Reception. TeamSOS is also available to staff as an emergency communication tool.

2.24.2. Deaf/Hearing Impaired Persons

In certain buildings visual fire signal indicators (red beacons) have been installed. Deaf or hearing/impaired staff/students that are likely to be working in an isolated area are encouraged to advise an appropriate member of staff of this fact, so that they may be notified of any alarm. In the Halls of Residence, appropriate equipment has been installed including vibrating pillows which are also available upon request for use in bedrooms.

2.24.3. Blind/Visually Impaired Persons

Blind/visually impaired persons are advised to locate evacuation and assembly points in their early days on campus and should contact the H&S team to be advised on the fire evacuation routes from buildings they regularly frequent. It is essential that this takes place immediately on arrival at the college rather than wait until an evacuation takes place.

2.24. During and Outside of Working Hours

2.24.1. During Working Hours

This procedure applies to activities during and outside of Working Hours.

Core Working Hours are deemed as 08:30 to 17:00 Monday to Friday. During core working hours, should the fire alarm sound all individuals must evacuate via the nearest exit and proceed to the nearest designated assembly point.

2.24.2. Out of Hours Working

College buildings are open for Evening classes until 21:30 hours when the College is locked and closed down by the P&E staff or contracted security company at approximately 22:00 hours.

In the event of an alarm activation during the evening the Duty Manager will assume the role of Fire Officer and take charge. Please refer to Section 34 of this manual, for the role and responsibilities of the Evening Duty Manager (where relevant).

2.25. New Buildings/Alterations/Refurbishments/Maintenance and M&E Projects

When any works relevant to the above are being planned, the P&E Managers shall ensure that the requirements of relevant fire safety legislation, fire risk assessments and recognised standards are considered and that the proposed building/facilities meet the requirements of this Fire Safety Management procedure. Details of the proposals shall also be sent to the Group Health & Safety Manager, to check them for compliance with fire safety legislation, standards and good practice.

2.26. Special/Specific Procedures

In some cases (e.g. Residences, Chemical Stores, etc.) there may be a need to have special/specific procedures in place. These procedures will be produced by the relevant department in conjunction with the H&S team. The relevant department will ensure that members of staff have been trained/briefed on the procedures as appropriate. A model Campus Fire Emergency Plan is available at Appendix 4 to this section.

2.27. First Aid

- First Aiders must evacuate as per other building users.
- Casualties should not receive First Aid treatment inside any building during a fire alarm unless it is necessary, and it is safe for the First Aider to do so.
- Where possible, casualties who can walk can be assisted from the building and treated once outside.
- It is the responsibility of the Evacuation Wardens to report to the Duty Manager if an individual has been left in a place of safety, e.g. a refuge area.
- If the Duty Manager is aware of an individual requiring First Aid treatment, they will direct a First Aider who has evacuated to the casualty, if safe to do so.

2.28. Training and Information

All new employees and contractors (as part of the Contractors Induction) shall be provided with local fire safety induction training by their Manager (or P&E Manager for contractors), or other appropriate person, in the first week of employment. This will include identification of escape routes, location of fire extinguisher and call points, where the assembly point is and any local hazards that they need to be aware of.

Managers must ensure that Evacuation Wardens have been appointed and have been trained by the H&S Team.

Residential students are obliged to attend a fire safety induction session provided by the Halls of Residence team. During the session, students will be made aware of the relevant precautions and procedures for the specific residence and will be made aware of the dangers and penalties associated with tampering with fire safety equipment.

The evacuation procedures and the location of assembly points shall be displayed on Fire Action Notices located at strategic points throughout all Group buildings.

All new employees are to complete fire safety awareness training on the ALO Compliance Passport.

2.28. Reporting and Investigation of Incidents

Personnel who become aware of a fire-related incident shall report it as soon as possible to the H&S Team. In cases where this is done verbally or where H&S personnel attend fires or false alarms, the online incident report form shall still be completed.

When appropriate, a member of the H&S team shall carry out an investigation and make recommendations in accordance with H&S policy.

Data provided by completed incident forms and subsequent investigations shall be analysed periodically by the Head of Resilience & Statutory Compliance to identify trends and make recommendations. Appropriate reports shall also be provided to the H&S Committee and other bodies as required.

2.29. Monitoring and Auditing

Managers shall, as part of their day-to-day duties and during departmental safety surveys, ensure that fire safety precaution and prevention measures are in place and are working as they are intended to.

H&S Team shall monitor local arrangements for the provision of training, etc. to ensure that they work satisfactorily.

Fire safety shall be included in all audits and inspections of the safety management system carried out by the H&S Officers.

All fire evacuations including fire alarms/false alarms/malicious are to be reported to the Facilities Helpdesk. Appropriate investigations will be undertaken, and a Fire Alarm Activation Report compiled.

The Group Health & Safety Manager has responsibility to ensure that appropriate arrangements are in place, considering the size and undertakings of the College. Any areas for concern or identified through the Fire Drills will be reported to relevant staff.

The H&S Team will carry out a programme of Health & Safety audits to ensure compliance with this procedure and the Health & Safety Management System.

Progress in the implementation of new and revised arrangements for fire safety management will be reviewed throughout the year and will be reported in the annual Compliance report presented to GET and the Corporation.

2.30. Record Keeping

It is important that the College can evidence compliance with fire regulations. As such the following records will be kept:

- Attendance at new Staff Induction – these records will be retained by HR.
- Training Records – ALO records will be retained by HR and the Group Health & Safety Manager will maintain a list of individuals training via the Training Matrix.
- Fire Evacuation Drills – these records will be recorded on My Compliance.
- Personal Emergency Evacuation Plans (PEEPs) – these will be retained via the relevant Faculty/Department.
- Fire Risk Assessments – these will be retained by the Group Health & Safety Manager and P&E Manager with copies available on the H&S SharePoint site.
- Fire Safety Equipment – these will be retained by the P&E Manager.
- Evacuation Chairs – maintenance records will be managed and maintained via the P&E Manager.
- Health & Safety Fire Access Checks –these records will be retained by the P&E Manager and reviewed by the Group Health & Safety Manager on regular fire walks.

2.31. Further Reading

- Maintaining Portable Electrical Equipment H&SE-INDG236
- BS 5839-1 Fire Detection and Alarm Systems for Buildings
- BS 5306-3 Fire Extinguishers Inspection and Maintenance
- BS 5306-8 Fire Extinguisher Selection and Installation
- BS 5266 Emergency Lighting
- 18th Edition IEE
- BS 6651-1999 and BS EN 62305 Protection against Lightning
- Fire Safety Risk Assessment Guides
    - Offices and Shops: ISBN: 13-978 1 85112815 0,
    - Sleeping accommodation: ISBN: 13-978 1 85112817 4,
    - Educational premises ISBN: 13-978 1 85112819 8,
    - Small and medium places of assembly ISBN: 13-978 1 85112820 4,

- Large places of assembly ISBN: 13-978 1 85112821 1,
- Theatres, cinemas and similar premises ISBN: 13- 978 1 85112822 8,
- Open air events and venues ISBN: 13-978 1 85112823 5,
- Healthcare premises ISBN: 13-978 1 85112824 2.

- Section 601 – First Aid procedures.
- Fire Safety - College Responsibilities refer to the relevant page on the H&S SharePoint portal - Fire Safety - College Responsibilities

2.32. Legal References

- Regulatory Reform (Fire Safety) Order 2005 SI 2005 No. 1541, (ISBN 0 11 072945 5)
- Fire Safety Act 2021
- Fire Safety (England) Regulations 2022
- The Health and Safety at Work etc. Act 1974
- Health and Safety at Work etc Act 1974: (ISBN 0 10 5437743).
- Management of Health and Safety at Work Regulations 1999, Approved code of practice and guidance, L21 H&SE Books ISBN 0 7176 24889
- Approved Document B: The Building Regulations 2000: Volume 1 & 2, 2006 Edition
- Dangerous Substances and Explosive Atmospheres Regulations 2002. Approved Code of Practice and Guidance. L138 H&SE Books 2003 ISBN 0 7176 2203 7
- The Health and Safety (Safety Signs and Signals) Regulations 1996
- The Equality Act 2010

2.33. Appendices

Appendix 1 - Duties/responsibilities of the Responsible Person, Competent Person & Designated Persons

Appendix 2 - Scope of The Fire Risk Assessment

Appendix 3 - Reception, Property and Environment Staff and Duty Manager Fire Actions

Appendix 4 - Campus Fire Emergency Plan

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Duties/Responsibilities of the Responsible Person, Competent Person & Designated Person

The following persons are designated as having duties/responsibilities under the RR(FS)O

Position	Designation under the RR(FS)O
Chief Executive Officer (CEO)	The CEO is the most senior member of the College body and as such is designated as the **RESPONSIBLE PERSON** under the RR(FS)O. The post holder is responsible for ensuring that fire safety matters are delegated to appropriate members of staff and are planned and resourced appropriately.
The Group Health & Safety Manager	The Group Health & Safety Manager has the technical and practical knowledge to assess, investigate and report on fire hazards associated with the infrastructure of college property. The Group Health & Safety Manager is designated as the **COMPETENT PERSON for Fire Safety** and they act on behalf of the CEO in discharging these duties. The regional H&S Team will support the Group Health & Safety Manager in conducting low level investigations and inspections.
Faculty and Group Service Directors	Faculty and Group Service Directors have responsibility for the day to day running of their departments and therefore are delegated as **DESIGNATED PERSONS** for fire safety matters under their control. Designated Persons must ensure that fire hazards are managed appropriately and that activities within the department, particularly the use or storage of dangerous substances, does not create or exacerbate a fire risk. Where premises are occupied jointly, Designated Persons are responsible for cooperating with fellow Designated Persons as far as this affects areas under their joint control. Designated Persons receive reports and fire risk assessments from the P&E Manager and Group Health & Safety Manager and are responsible for implementing action plans to remedy any deficiencies and ensure special/specific procedures required for the Fire Emergency Plan, are implemented. In discharging their duties, Designated Persons may appoint members of staff to assist with carrying out fire safety tasks.
Director of Facilities Operations	The Director of Facilities Operations is a **DESIGNATED PERSON** under the RR(FS)O 2005. The Designated Person is responsible for ensuring that College buildings are designed, built, and maintained to be protected, as far as is reasonably practicable, from the effects of fire. The Director of Facilities Operations may receive advice and information from the Group Health & Safety Manager to assist him/her in discharging this duty effectively.

Scope of the Fire Risk Assessment

Scope of the Fire Risk Assessment

The Responsible Person is charged under the RR(FS)O with ensuring that a suitable and sufficient fire risk assessment is carried out. The fire risk assessment must identify both general fire precautions and fire precautions arising from dangerous substances.

The responsible person has delegated the task of conducting fire risk assessment in the following occasions.

General Precautions

The assessment of general fire precautions is delegated to the College P&E Manager assisted by the Group Health & Safety Manager. Fire Risk Assessments are conducted biannually by the Group Health & Safety Manager who is a Competent Fire Risk Assessor with any actions or remedials raised, monitored annually by the regional H&S team to ensure they are being processed and closed.

(NOTE: This fire risk assessment is made without prejudice to any requirements made by Local Authority, Building Control or by the local Fire Authority, the assessment of general fire precautions only identifies those areas of risk apparent at the date of inspection, based on visual observation only, and does not extend to the physical inspection of ceiling voids and inaccessible places for breaches in fire walls and fire compartments. The Fire Risk Assessment records the fire safety measures in place when the fire safety risk assessment was conducted, lists any inadequacies found and details the appropriate remedial action)

Dangerous Substances

The assessment of dangerous substances is delegated to the Designated Person and is consistent with existing duties to access dangerous substances under the Dangerous Substances Explosive Atmospheres Regulations 2002 (DSEAR) and the Control of Substances Hazardous to Health Regulations (COSHH) 2002. The Designated Person may appoint members of staff from within their own department to conduct the assessment and to implement such controls as lie within their authority. The Designated Person may additionally require technical assistance/expertise from Group Health & Safety Manager to identify building modifications or changes to the general fire precautions necessary to protect people from fire risks arising from dangerous substances.

NB. The purpose of the DSEAR risk assessment is not to interfere with the work activities on campus but to ensure that suitable controls are in place to manage the risk from ignition sources and flammable materials

The findings of the fire risk assessment for dangerous substances shall be recorded and brought directly to the attention of the appropriate Designated Persons.

The content of a suitable and sufficient assessment of general fire precautions is defined by article 4 of the RR(FS)O.

The content of a suitable and sufficient assessment of dangerous substances is defined by Part 1 Schedule 1 of the RR(FS)O.

In conducting fire risk assessments, the assessor must be guided by sources of authoritative information e.g. College policies, guidance issued by fire authorities and the Health and Safety Executive, Building Regulations, British Standards and guidance issued by the higher education sector.

Fire risk assessments shall address risks to employees and other relevant persons, (defined by the RR(FS)O. as being any person who is lawfully on the premises or any person in the immediate vicinity of the premises who is at risk from a fire on the premises).

The fire risk assessment is primarily concerned with life risk but where appropriate it may include reference to fire risks affecting business continuity, asset protection and building management systems

Designated Persons are responsible for taking any action specified in the fire risk assessment to address the fire risk.

If a Designated Person is unable to take the actions specified in the fire risk assessment, they are responsible for bringing this to the attention of an individual or committee who can act on the findings of the fire risk assessment in a timely manner. The Group Health & Safety Manager must be informed of this action.

(For further guidance on The Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR) - visit the Code of Practice here)

Reception, Property & Environment Staff and Duty Manager Actions

On discovering a fire

(a) Sound the alarm by operating the nearest fire alarm call point

(b) Dial 999 if unable to contact giving the location of fire

(c) Tackle the fire with the appropriate extinguisher only if you have received extinguisher training and only if you feel it is safe to do so

(d) Evacuate the building and go to the designated Fire Assembly Point

(e) Contact Duty Manager updating the situation

On hearing the alarm

a) Report to the main Fire Alarm Control Panel and liaise with the Duty Manager

b) Investigate the cause of the activation of the alarm at the fire panel. Observe the location of the detection from the alarm panel. Then continue to investigate only if safe to do so.

c) Radio the Duty Manager that you have a fire alarm activation and that you are investigating.

d) If there is any evidence to indicate the cause of activation is a fire, Dial 999

e) Where you are satisfied the cause of activation is false – call 999 and explain that the activation was false/spurious and that there is no need for further action on their part. Inform the Duty Manager.

f) Silence the alarms and reset alarm control panel. Notify the Duty Manager.

g) The Duty Manager will authorise those in the Assembly area to re-enter the building

h) Meet with Duty Manager for a de-brief so that an incident form can be completed.

Actions for Reception

On Receiving a call of a suspected fire

a) Take details of the caller and location of activation.

b) Ask if an investigation has taken place and if the emergency services are required

c) Relay information to Duty Manager and appropriate emergency services when requested to do so.

d) Request P&E staff to investigate

e) Liaise with Emergency services as appropriate

Campus Fire Emergency Plan

This Fire Emergency Plan has been designed as a standard plan for the College Group. Where variations are required then Campuses will have specific Fire Emergency Plans developed to meet its need. There are specific duties for various members of the organisation, and these are explained clearly at different stages of the procedure. This document should be brought to the attention of all building occupants. Similar instructions will be on display on the Fire Action notices posted around the Campus.

On Discovery of a Fire on the Premises:

a) Immediately operate the nearest fire alarm call point in order to sound the alarm throughout the premises. Fire alarm call points (break glass) are found adjacent to final exit doors, corridors and staircase lobbies/landings.

b) Inform the emergency services by calling 999 by telephone from a safe venue and give them the relevant information, e.g. the correct address of the building. Please also notify Reception if possible.

c) Evacuate in a calm and orderly manner and proceed to the fire assembly point.

Only attempt to extinguish the fire if you are trained and proficient in the use of fire extinguishers. If you do attempt to extinguish the fire do not place yourself or any other person in danger.

On Hearing the Fire Alarm:

a) Evacuate the premises in a calm and orderly manner using the nearest fire exit, NOT USING LIFTS and proceed to the designated assembly point for your area.

b) Do not stop to collect your personal belongings.

c) You may be specifically designated to switch off machinery in the event of a fire evacuation; you should do this prior to leaving, only if it is safe to do so.

d) Remain at the Assembly Point until released by the Duty Manager.

e) Notify your Evacuation Warden immediately or Duty Manager of any persons you know who have not reached the assembly point and who may still be in the building. Do not return to the building until you have been told to do so by the Duty Manager, or the Fire & Rescue Service and until all clear has been given.

Specific Duties

Evacuation Wardens / Hall Wardens, on discovering a fire.

a) Raise the alarm by operating the nearest fire alarm call point

b) Inform the emergency services by calling 999 by telephone from a safe venue and give them the relevant information, e.g. the correct address of the building. Please also notify Reception if possible.

c) Only consider trying to extinguish the fire, if it safe and if proper training has been given, e.g. knowledge of which extinguisher to use on each classification of fire and how to handle the fire extinguisher.

d) Evacuate everyone from the area, directing staff, students and visitors towards the nearest available fire exit,

e) Maintain a steady flow of people evacuating the building and prevent 'bottlenecks' building up by redirecting staff, students and visitors towards other available exits (so that they are not placed at risk),

f) Direct staff, students and visitors away from potential sources of fire, where these are known,

g) Ensure, so far as is reasonably practicable, that each floor in the building is clear or is actively evacuating and try to identify anyone who is unable to self-evacuate from the building and place them in a refuge area. Where the refuge area has a form of communication the fire Warden shall ensure that Reception have been notified, by activating the emergency telephone System.

h) Leave the building themselves by the nearest available exit.

i) Report to the Duty Manager (who will be at the Fire Assembly point) on the status of their area.

j) Remain with the Duty Manager so that they can be re- deployed to aid in controlling other aspects of the evacuation or to be at the disposal of the senior officer of the emergency services on site.

k) Await instructions from the Duty Manager prior to allowing personnel back into the building.

l) If an individual is missing or has refused to vacate the building, make a note of their name and the last place they were seen. Do not re-enter the building to find them. Report this to the Duty Manager

m) Always ensure that you are in communication with the personnel waiting at the Assembly Point and keep them updated with the situation.

Duty Manager (Campus Fire Officer)

a) Proceed to the Fire Assembly Point and check-in each Evacuation Warden as they arrive and make a note of their responses

b) Contact Group Director of Faculty and College and inform them that you have a fire alarm incident, and you are investigating.

IF SAFE TO DO SO….

c) Task the P&E staff to go to the address of the activation shown on the fire alarm panel, being vigilant for any sign of fire enroute. Check the activated sensor / call point when they get there and verify the reason for the alarm activation.

d) Direct staff, students and visitors towards the Fire Assembly Point.

Any indication of fire, such as smell or sight of smoke or flames must be taken as a signal to leave the building immediately and to notify the Fire and Rescue Service, that a fire has been confirmed.

IF THE CAUSE OF THE FIRE ALARM ACTIVATION IS FOUND TO BE UNWANTED (FALSE):

e) Where you are satisfied the cause of activation is false return to the Fire Assembly Point, inform the P&E staff and the Monitoring Station, and explain that the activation was false and that there is no need for further action by the emergency services.

f) After resetting the fire alarm system give instruction to the occupants to re-enter the building

h) Complete fire incident report form on MyCompliance, linked from the H&S SharePoint site.

IN THE EVENT THAT A FIRE IS CONFIRMED:

j) Contact the Reception and request the Fire and Rescue Service.

Should there be any problem call the Fire & Rescue Service directly by dialling 999. Give the correct address of the building and any other information they require.

k) Only consider trying to extinguish the fire if it is safe to do so and correct training has been given, e.g. knowledge of which extinguisher to use on each fire and how to use the fire extinguisher.

l) Do not place yourself or any other person in danger

m) Direct staff, students and visitors towards the Fire Assembly Point.

n) Ensure (so far as is reasonably practicable) that all floors are actively evacuating and identify if anyone is unable to self-evacuate from the area.

o) Identify yourselves to the Fire and Rescue Service and other personnel in authority by wearing a blue Hi Vis tabard where possible indicating Fire Officer.

p) Provide any information to the Officer of the Fire and Rescue Service and inform them of any persons known or believed to be unaccounted for or the location of any staff, student or visitor who require assistance. Do not re-enter the building to find them.

q) Ensure communication is maintained with the personnel waiting at the assembly point.

r) Remain at the Assembly Point until told to stand down by the Officer of the Fire and Rescue Service

s) Complete fire incident report form on the H&S SharePoint site.

In the absence of the Fire and Rescue Service, the Duty Manager will have absolute control over **ALL** personnel on site.

Evacuation for Disabled Persons

This evacuation strategy will be specific to the needs and abilities of the individual in question. It is essential that wherever possible Duty Manager are aware of staff, students or visitors to the building who have specific emergency evacuation needs.

Special/Specific Procedures

These procedures are bespoke and will be produced by the relevant department in conjunction with the relevant H&S Team when required.

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Section 3. Offices and Communal Areas General Workplace Safety

3.0. Procedure Statement

The purpose of this section is to inform staff of the significant hazards that can arise in an office setting, controls that can minimise the risk from these hazards and to set the standards for office environments.

This procedure is intended to convey information to College Staff and visitors who are undertaking work duties in an office-based work environment. This procedure will apply to all College owned / occupied offices and many of the standards will also apply to all types of workplace. Please note that these office spaces may not necessarily be on the main campuses and off-site work locations are also included. This procedure does not apply to teaching rooms or lecture theatres. Section 18 Workplace Requirements should be read in conjunction with this section.

3.1. Introduction

It is generally believed that office environments are low risk environments and there is no need to give much attention to safety issues, however, this is not always true. Accidents can and do happen in the office, arising from sources such as electrical equipment, slips, trips and falls and moving heavy objects such as archive boxes or equipment.

Hazards associated with work in offices and occupation of communal areas, such as kitchens, may seem to be of a lower order than for laboratories and plant rooms, but in these too, there is some potential for harm. Most accidents in offices and communal areas are avoidable, generally by the application of good housekeeping, but the specific points noted below should be considered in conjunction with the general safety advice mentioned elsewhere in this Manual and the College Health and Safety Policy.

There are also legal standards which need to be met, as defined by the Health and Safety (Workplace) regulations and others, to ensure that workplaces are safe to occupy and do not pose a risk to health.

3.2. Responsibilities

3.2.1. Group Executive Team (GET)

GET is responsible for supporting the requirements of this procedure by providing the necessary resources needed to implement the requirements of this procedure. They are also required to demonstrate their commitment to this process by leading by example.

3.2.2. Managers

Managers are responsible for ensuring that the working environment provided to their staff meets the requirements of this procedure and that all furniture and equipment is safe to use.

3.2.3. Property & Environment

Property & Environment are responsible for ensuring buildings are safe, ventilation is provided and maintained, fire detection / fighting equipment is provided and maintained, standard office equipment and furniture is provided and maintained in offices in College owned / occupied buildings.

3.2.4. Health and Safety

The Health and Safety team shall advise on the implementation of appropriate legislation and are responsible for assisting in the resolution of issues over the interpretation of this procedure.

3.2.5. Staff

Staff are required to support the contents of this procedure by adhering to the information specified within this section. They are also responsible for raising any issues, concerns or cases of non-compliance with their manager or their regional Health & Safety Officer.

3.3. Potentially Hazardous Locations, Equipment and Activities

3.3.1. Slips, Trips and Falls

The majority of accidents in an office can be attributed to slips, trips and falls. They generally result from poor housekeeping issues such as:

- Leaving files on the floor
- Trailing wires
- Worn carpets
- Damaged stair treads
- Spilled liquids
- Not using dedicated equipment for reaching items stored at height

3.3.2. Walkways, Corridors and Stairs

Staff should walk, never run, as running can cause an accident to you or someone else. Be particularly careful on stairs. You may need to pay special attention to floors you suspect have just been washed and may still be slippery.

If you discover any issues with walkways, corridors, stairs or other area, you should report them to

Property & Environment via the Facilities Helpdesk as soon as possible, via the web form or, if urgent to the Property & Environment Manager. You should also warn others in the area, this may be verbally, or it may be more appropriate to restrict access to the area with a cone / barrier / or similar.

If you discover any hazards such as:

- Trailing wires
- Slippery floor surfaces
- Items left in the corridors

You should tidy them up if it is safe to do so and if it is within your capabilities. If not, you should report them to Property & Environment via the Facilities Helpdesk as soon as possible, via the web form or, if urgent to the Property & Environment Manager. You should then report the situation as a near miss to the Health & Safety team using the online MyCompliance Incident reporting form. This allows the team to track any issues that may be occurring across the College and tackle them before they become a serious accident.

3.3.4. Working at Height e.g. to access storage, windows etc.

Storing items at height should be considered a last resort and staff should not require frequent access to items / equipment stored at height. Frequently used items should be stored below head height.

Where windows are at height and require to be opened, staff should use a long reach pole hook to open and close windows from ground level.

If you do need to access a higher area, you should make sure that you are wearing appropriate footwear and use equipment such as step stools (not ladders) which are provided for this purpose.

On no occasion should you stand on chairs or other similar items.

3.3.5. Doors

Be particularly careful with heavy swing doors, ensure you are not following someone too closely who may not be aware of your presence and might accidentally let the door swing into you. You must also pay attention to anyone who may be following behind you before releasing a swing door. When pushing open a door, be mindful of anyone who may be standing or walking past on the other side, open doors slowly and look through the glass vision panel if the door has one.

Fire doors must never be wedged open as they form a critical role in the prevention of fire and smoke spreading throughout buildings.

3.4. Shared Areas

3.4.1. Water

An adequate supply of clean drinking water must be readily accessible. This may be by use of a drinking fountain or drinking water taps.

3.4.2. Kitchens

Worktops must be kept clear and clean at all times. If there is any damage to the fabric of the kitchen (e.g. cupboard doors) or equipment (e.g. kettle or microwave), they must be reported immediately to the Property & Environment team via the Facilities Helpdesk as soon as possible, via the web form or, if urgent to the Property & Environment Manager, and other users in the area should be warned of the issue.

Care must be taken when using the kettle, urn or microwave. To prevent burns and scalds, hot food should be removed carefully, and lids should be opened from the side to allow any steam to escape.

No cooking equipment (microwaves, toasters etc.) should be located anywhere apart from in kitchens, for fire safety / false alarm reasons.

If you spill anything on the floor or if you discover a spill, you must clean it up immediately and ensure the floor is dry. If any glass or crockery is broken it must be handled carefully, wrapped securely in several layers of paper and carefully placed in a separate bin bag, ensure the bin bag is labelled as containing sharp materials so the cleaners are aware of the need to handle the bag with extra care.

Fridges are provided throughout the College; these are for the short-term storage of food and sell-by dates should be checked frequently and the food disposed of if it expires. Food stored in fridges must be in a suitable, leak-proof container.

3.4.3. Welfare Facilities

All staff, students and visitors must wash their hands frequently with soap and water in order to help minimise the spread of illness and infections.

If consumables (e.g. soap, paper towels, hand sanitiser) are missing or the toilets, taps or hand driers are not working or are damaged in any way then this should be reported immediately the Property & Environment team via the Facilities Helpdesk as soon as possible, via the web form or, if urgent to the Property & Environment Manager.

In order to comply with regulations, the following shall be provided:

- Suitable and sufficient number of sanitary conveniences located at readily accessible places
- Suitable washing facilities located at readily accessible places
- Suitable and sufficient facilities for workers who need to change into special clothing for work.

The facilities must be readily accessible, of sufficient capacity and have seating. Suitable facilities must be provided for eating meals (in an office environment, where food is unlikely to become contaminated, seating in the work area could be sufficient where there is a facility for preparing or obtaining a hot drink)

3.4.4. Rest Areas

Suitable rest facilities must be provided in a readily accessible place. They must:

- Be large enough for the number of people who need to use them at any one time
- Have sufficient seats (with backs) and tables for the number of people who need to use them at any one time
- Include seating which is suitable for the number of persons with disabilities
- Provide the facilities for pregnant women to lie down and nursing mothers to rest.
- Protect employees from experiencing discomfort from smoking and vaping

3.4.5. Cupboards / Tambour Units

Cupboards should not be overfilled, and any heavy or fragile items should be stored on lower shelves and never above head-height. Items should be neatly stored inside the cupboards and not on the top. Care should be taken to ensure that items are not placed too close the front of the shelf where they may fall out when the door is opened.

3.4.6. Outside Areas

As the campus consists of many buildings staff may need to travel between them in the course of their work. Like corridors, outside pathways should be kept clear from obstruction. Care should be taken in wet weather when the ground may be slippery and during icy weather staff should stick to the main paths which are gritted more frequently. It is also important to note that we have publicly accessible campuses so staff should be mindful of others, who may not be familiar with the site, driving / cycling through and incorrect speeds or against one-way systems.

You must never obstruct a final fire exit, even for a short period of time.

3.5. Office Environment

3.5.1. Smoking

Under the Smoke-free (Premises and Enforcement) Regulations 2006, it is an offence to smoke inside or near any College buildings, including communal working areas, individual offices, College residences, stairwells, lifts, building entrances and doorways and near open windows / vents. There are dedicated smoking areas on all Campuses. Further information can be found in the Smoking in the College Environment Section 13.

3.5.2. Lighting

Lighting should be sufficient to enable staff to work and move around safety. People prefer to work in natural light so workstations should be positioned to take advantage of natural light where possible.

Blinds must be provided to allow people to avoid glare on computer screens. Artificial and local lighting may be required where there is not enough natural light (considering the shorter winter days). Where artificial lighting is provided, it must be such that it does not cause reflections and glare on display screens. All light sources, whether natural or artificial, should not be allowed to become obscured (e.g. by tall storage cupboards).

Suitable and sufficient emergency lighting must be provided in any workplace where persons at work are exposed to danger in the event of the failure of artificial lighting. For example: on escape routes, emergency exits and staircases.

Any lights which are too dim, too bright or broken should be reported to Property & Environment team via the Facilities Helpdesk as soon as possible, via the web form or, if urgent to the Property & Environment Manager.

If staff are unhappy with the lighting provision at their workstation it should be reported it to their manager in the first instance to discuss the issue. The Health & Safety Team are available to conduct light (Lux) level assessments.

Please ensure that before leaving the office, all lights are turned off.

3.5.3. Ventilation and Temperature

A minimum temperature of 16°C must be maintained during working hours. Where a reasonably comfortable temperature cannot be achieved through normal means, local heating or cooling must be provided. There must be a sufficient number of thermometers available to allow employees to accurately measure the temperature of their workplace. When used, they must be positioned thoughtfully to ensure they are not unduly influenced by drafts, heaters, sunshine etc.

Some buildings across the College have air conditioning and all have heating fitted. It may differ from building to building, but some buildings and rooms allow the user to adjust the heating or air conditioning to suit the comfort of those in that area. Other areas may not allow local control over the heating, these areas have been set at a temperature that should be comfortable to most users.

Please be aware that air conditioning units work better if the system is set at a constant rate and temperature and not changed frequently. Radiators and fans must not be blocked by furniture, storage or other equipment.

Older buildings may not all be fitted with the same equipment as newer buildings so may need to rely on other methods of cooling a space (e.g. opening windows). Where the need for a desk fan is identified these can be purchased through your Department. If a portable heater is required (e.g. in the event heating systems fail and temperature drops below 16^{o}C), these can be sourced though the Property & Environment team, please note that only oil-filled electric heaters are permitted.

3.5.4. Background Office Noise

Staff should be courteous of others in the area and mindful that some people can find lots of background noise distracting so staff may need to consider taking meetings or lengthy discussions to a more suitable area (e.g. a meeting room, kitchen seating area, café). This is particularly important in open-plan shared offices.

If you feel that the background noise in your area is causing you stress or other problems, you should discuss it with your manager in the first instance.

3.5.5. Floor Layout

The Workplace Health, Safety and Welfare Regulations require that “every room where persons work shall have sufficient floor area, height and unoccupied space for purposes of health, safety and welfare”. The regulations require that each person should have 11 cubic meters of space within a room. The 11m^3 applies to a limited maximum height (3m) even if the ceiling is higher, this means that the average minimum floor area should be 3.7m^2 per occupant, including circulation areas etc. or 4.6m^2 if we assume a standard 2.4m height ceiling. These specifications might need to be increased to allow for visitors or other requirements.

All offices shall meet the following criteria:

- Be thermally insulated
- Where air handling systems are present, a minimum of 300mm clearance shall be maintained
- Workstations to be arranged in such a way that avoids trailing cables
- The fire corridor must be unobstructed and no less than 1100mm wide
- Staff must not need to travel more than 18m to reach an evacuation corridor
- Staff who sit with their backs to shuttered cupboards must have a minimum of 1000mm clearance behind them and 1200mm if the cupboard doors open outwards. You must include an additional 200mm clearance if someone is to walk behind.
- Staff sitting back-to-back must have a minimum of 1800mm between their desks
- Cupboards higher than 1650mm must only be positioned against a perimeter wall so as not to obstruct natural light
- Location and space allocation shall be determined on need and efficient delivery of service, not status
- Any space requirement must be requested though the Property & Environment team and discussed with the Group Director of Faculty and College.

3.6. Equipment

3.6.1. Electrical Equipment

Electrical equipment must only be used for the purpose for which it was intended, and care should be taken when using, moving or storing it. Extra care should be taken to avoid damaging cables.

Electrical equipment, excluding new equipment, should never be used in the office without first being inspected and PAT tested by a competent person. Electrical appliances brought from home shall not be used until they have been inspected.

Further details can be found in Section 31 Electrical Safety.

3.6.2. Display Screen Equipment (DSE)

Specific DSE arrangements can be found in the Display Screen Equipment Section 11.

3.6.3. Passenger Lifts

Lifts are not to be overloaded with either passengers or goods. All lifts are clearly marked with a maximum load and passenger numbers. If a lift appears full, do not enter.

Never try to force lift doors open to get out of a broken-down lift or help someone else out of a broken lift. If the lift breaks down when you are in it, press the emergency button which will contact either Reception or the Property & Environment Team who will arrange for your rescue.

3.6.4. Confidential Waste

Paper shredders are not provided on site for general staff use, however confidential paper waste boxes or receptacles are provided across most campuses to allow for the easy and safe disposal of confidential papers. Confidential papers are regularly collected by a member of the Property & Environment team who will arrange to shred all the documents on site in accordance with GDPR regulations.

Only paper is to be placed in these boxes, never put in non-paper items (e.g. batteries). Plastic from acetates or poly-pocket must not be placed in confidential waste bins, instead they should go in bags with other confidential mixed media (e.g. flash drives, CD's, X-rays, etc.) for off-site shredding.

3.6.5. Office Furniture

Office furniture must be fit for purpose, suitably designed to match the work function and must meet the requirements listed below. If any office furniture is damaged or inadequate you should discuss it with your manager in the first instance. Any office layout queries must be directed to the Property & Environment team and discussed with the Group Director of Faculty and College.

Furniture must:

- Be ordered from approved suppliers
- Be ordered via the Property & Environment team (excluding specialist ergonomic equipment which is purchased by the Faculty / Group Services dept)
- Be positioned in such a way as to avoid risk of injury, discomfort and personal stress
- Be sensibly arranged and must be comfortable to move around, ensuring equipment remains easy to access

Furniture must not:

- Be removed from offices or teaching spaces
- Be repositioned by anyone other than a trained operative
- Be taken out of the College without P&E Manager authorisation.

Workstation chairs should be stable and allow the operator to find a comfortable seated position. The seat height should be adjustable, as should the seat back height and tilt. Chairs provided must meet the specific needs of the individual user to enable them to carry out the requirements of their work.

A footrest must be provided when the employee cannot place their feet comfortably on the floor when they are seated at their workstation

Desks / worksurfaces that are provided for members of staff who use a computer must be equivalent to 1600mm x 800mm (this area may be rectangular or an "L" shape. It may also include the top surface of a pedestal or other piece of furniture provided that is flush with the desk surface). This area may only be reduced if the workstation is only used for computer work and there is no requirement for files or paperwork or if a workstation assessment has been carried out and the

change has been agreed as acceptable by a competent workstation assessor. The space under the desk / worksurface must be kept clear enough to allow for a comfortable working posture.

3.7. Reasonable Adjustments

Reasonable adjustments shall be made to a workplace in order to not substantially disadvantage an employee with a disability when compared to a non-disabled employee. Changes can be made to physical features of a workplace and arrangements under their control.

Physical features include:

- Anything in the workplace arising from the building's design or construction
- The approaches to, exits from or access to the place of work
- Fixtures and fittings
- Furnishings, furniture, equipment or materials
- Any other physical element in the workplace

Contact your HR Business Partner for more information about reasonable adjustments or to discuss individual issues or concerns. Reasonable adjustments must also include consideration of the need to safely evacuate in the event of an emergency. The Health and Safety team should be contacted for further information.

3.8. Fire and First Aid

First Aid is provided by trained members of staff. Lists of qualified first aiders are on display throughout College buildings. First Aid kits and defibrillators are provided on each campus.

All staff receive fire awareness eLearning. In order to reduce the risk of a fire breaking out you must:

- Avoid accumulations of material, which might easily burn e.g. paper, cardboard, and plastics
- Not obstruct the ventilation of electrical equipment
- Not overload electrical sockets by connecting too many appliances to a single socket
- Minimise the use of extension cables and not use plug adaptor

Further information can be found in the Fire Safety Section 2 and the First Aid Section 6.

3.9. Office Cleaning

The Property & Environment Manager can provide information regarding the Cleaning Standards Service Level Agreement/ Schedule.

3.10. Manual Handling

Bending and stooping to lift a load significantly increases the risk of a back injury. Ideally, items should be lifted from no lower than knee height to no higher than shoulder height. Outside of this range lifting capacity is reduced and the risk of an injury is increased. Where items are required to be lifted above shoulder height a stand or suitable means of access should be used. Items which are pushed or pulled should be as near to waist level as possible.

Carrying distances should be minimised, especially if the task is regularly repeated. Repetitive tasks should be avoided wherever possible. Tasks which involve lifting and carrying should be designed in such a way as to allow for sufficient rest breaks to avoid fatigue. Avoid tasks that require twisting the body wherever possible.

All staff are required to complete the ALO online Risks and Responsibilities training module which provides a basic understanding of Manual Handling. Those staff who routinely undertake manual handling as part of their role should undergo "hands on" manual handling training available via the Health and Safety Team.

3.11. Monitoring and Review

This manual and section will be periodically reviewed, by the Group Head of Resilience and the Group Health & Safety Manager, in conjunction with the Compliance and Risk Committee, to ensure it is kept up to date (in terms of both the legislation and how it works within the College as a whole).

3.12. Related Policies, Procedures, Regulations, Legislation & Guidance

- Health & Safety at Work etc Act 1974
- Management of Health & Safety at Work Regulations 1999
- Health & Safety Executive (HSE) Approved Code of Practice and Guidance to the MHSWR Regulations
- Noise at Work Regulations 2005
- Health & Safety (Display Screen Equipment) Regulations 1992
- Manual Handling Operations Regulations 1992

3.13. Acknowledgements

- Health and Safety Executive – A brief guide to controlling risks in the workplace INDG163

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Section 4. Assessment and Management of Risk

4.0. Procedure Statement

Activate Learning is committed to promoting the health, safety and wellbeing of its staff and students. This document sets out the College arrangements for when staff or students may be required to identify hazards and assess risks associated with activities and tasks, they may be required to take part in or lead on. It applies to all staff employed with, and students studying within Activate Learning (the College).

4.1. Introduction

The Health & Safety at Work etc. Act 1974, and more significantly, the Management of Health & Safety at Work Regulations 1999 (MHSWR) requires that the College assess the risks to the health and safety of any person arising out of, or in connection with, work environment or work activities under the direct control of the College Group. In carrying out such assessments, the College must then identify the control measures required to ensure compliance with Health & Safety Legislation

This procedure has thus been prepared in accordance with the requirements of health and safety legislation and the College's Health and Safety Policy.

4.2. Risk Assessment

This Section describes the risk assessment process, through hazard identification, and identifies the formal documentation to be completed. It should be noted that certain other health and safety related regulations also contain requirements for risk assessment in respect of specific hazards and risks. Refer to the contents page and the appropriate section within this manual.

An assessment, therefore, made for the purpose of these specific regulations will partly fulfil the obligation to make an assessment under MHSWR Regulations. There is no need to repeat those assessments as long as they remain valid, however it will be necessary to ensure that they cover all significant risks. It is therefore advisable to undertake a risk assessment in accordance with the requirements of this procedure so as to identify where a more detailed risk assessment is required to be carried out in accordance with the other specific regulations.

4.3. Procedural Intent

It shall be the intention as described within this Section to:

- Actively identify all significant health and safety risks inherent in its activities including routine and non-routine tasks.
- Consider, as part of the risk assessment process, all individuals who may be affected by the undertakings of the College.
- Record the significant findings of the risk assessment, which should include how controls will be implemented to reduce the risk(s) to an acceptable level.
- Give clear guidance on the roles and responsibilities for managing the risk assessment process.
- Ensure that appropriate and relevant managers and staff receive information, instruction, and training to undertake the risk assessment process.
- Provide information, training, and guidance so that Individuals are able to undertake the task of risk assessment.
- Through the audit process, monitor and review risk assessments to ascertain legal compliance.

4.4. Definitions

- **Hazard.** Something with the potential to cause harm (this can include substances or machines, methods of work and other aspects of work organisation)

- **Risk**. Expresses the likelihood that the harm from a particular hazard is realised; the extent of risk covers the population, which might be affected by a risk, i.e., the number of people who might be exposed and the consequences for them. Risk therefore reflects both the likelihood that harm will occur and its severity i.e., Risk = Likelihood x Severity

- **Risk Assessment (RA).** A process of identifying the hazards present in the workplace (whether arising from work activities or from other factors, e.g., layout of premises) and then evaluating the extent of the risks involved.

- **Evaluation of Risk.** The evaluation of risk requires making a competent judgement as to the likelihood of that hazard actually causing harm, considering whatever control measures are already in place.

- **Suitable**. Addresses the type of risks and relevance to the task or subject being assessed.

- **Sufficient**. Addresses the extent of the information within the risk assessment.

4.5. Training

The mandatory ALO online Health & Safety module 'Risks and Responsibilities' will provide sufficient awareness for the majority of staff to assess risk to them from possible low risk hazards. Further training will be given to staff who may be required to conduct risk assessments of activities and tasks they may own or manage. Training should not be viewed as a substitute for risk assessment. The need for training as a method of risk reduction needs to be identified as part of the risk assessment process. Training is to be requested by contacting the Group Health & Safety Manager.

4.6. Responsibilities

- **CEO.** On behalf of the Board of Governors, the CEO has overall responsibility for ensuring that adequate arrangements and the effective implementation of appropriate procedures are adopted.

- **Group Leadership Team (GLT) are:**

  - Responsible for ensuring that this COP is communicated to all individuals within their area of responsibility.

  - To ensure that no person undertakes a risk assessment until they have received sufficient training.

  - Responsible for ensuring that the risk assessment process is fully implemented in their Faculty or Group Service are and that procedures are in place for dealing with situations of serious and imminent danger.

  - To monitor their areas of responsibility in order to ensure risk assessments are completed in accordance with the requirements of this procedure.

- **Managers, Supervisors and Team Leaders are:**

  - Responsible for ensuring that all risks relating to their area of control (undertaken on and off site) are assessed and recorded and that controls for all significant risks are mitigated as far as is reasonably practicable to ensure compliance with Health & Safety Legislation.

  - To ensure that risk assessments include an assessment of risks to all vulnerable groups of staff or students, i.e., new, or expectant mothers, young persons, and vulnerable adults.

  - To ensure copies of completed risk assessments are available to all persons who need to be aware of their contents. In practice, this means displayed in all work areas, e.g., studios, laboratories, kitchens, and all other areas where significant risks have been identified, on either noticeboards or in a recognised and clearly labelled lever arch folder. Where applicable, any specific actions or information must be brought to the attention of those who may be affected by the risks, along with any precautions required and any emergency arrangements introduced.

- To ensure, when implementing any preventative and protective measures, they are done so on the basis of the principles specified in Schedule 1 of the MHSWR Regulations (refer to Appendix 1)
- To confirm to the Health and Safety Team that risk assessments have been completed for all areas under their control and have been reviewed on an annual basis.
- To periodically monitor their areas of responsibility in order to check compliance with this procedure.

- **Staff**
  - All staff must ensure that they are familiar with the location of the risk assessments for their work area/activities.
  - All staff must adhere to the control measures that have been identified in the risk assessments for their work area/activities, i.e., use of machine guards, personal protective equipment, and safe systems of work.
  - They should report any hazard which they believe is not adequately controlled to their manager.
  - **All staff must ensure that they comply with any control measures identified by the risk assessment process.**
- **Health and Safety Team**
  - In conjunction with managers and the H&S Committees, it is responsible for ensuring this procedure is adequately communicated and understood by all staff.
  - Will provide Risk Assessment training to relevant staff as and when the requirement is identified.
- **Competent Persons**
  - The Management Regulations require that competent persons should carry out the risk assessment. In effect, this means persons who have received the appropriate risk assessment training or who have the relevant experience or technical knowledge in relation to the risk(s).
  - Significant risks identified that cannot be sufficiently controlled must be placed on the Group Risk Register via the appropriate Executive sponsor being informed.

4.7. Consultation with Staff

Risk assessments will be completed by a competent person and with the involvement of staff who may be affected by the activity/undertaking. In addition, this could involve students as part of their curriculum course.

4.8. Shared Workplaces

Where employers share a workplace, information must be shared between all parties and communicated to all individuals. This will require the sharing of risk assessments and an acknowledgement by the employers of the information given.

4.9. Specialist Advice

It is important when completing risk assessments to be aware of individual limitations in terms of knowledge and competence. It is therefore recognised that in some instances specialist advice may be sought from external agencies, for example relating to fire, asbestos, and legionella.

It is the responsibility of the relevant Group Director to co-ordinate the process and ensure that any external contractors are selected with care and are competent in their specialist field.

4.10. Guidance on the Risk Assessment Process

4.10.1. General Principles and Purpose of Risk Assessment. A risk assessment involves identifying hazards associated with an undertaking/activity, establishing who might be harmed and how, evaluating the extent of the risks involved, considering existing workplace precautions, and

implementing controls to reduce the associated risks. The risk assessment must be recorded where significant risks exist, and it must be reviewed on a regular basis.

The overall purpose of risk assessment is to help determine what measures need be taken to reduce risks to an acceptable level.

4.10.2. Approaches to Risk Assessment. The method by which a risk assessment is conducted will largely depend on the nature of the work and the activity to be undertaken. It must be remembered that the control measures are to be proportionate to the risks identified.

- **Area Specific -** this involves looking at all the hazards and risks in specific work areas, e.g., classrooms, laboratories, workshops, outdoor spaces where students' activities take place, offices etc. as part of an inspection.
- **Process Specific -** this involves looking at hazards and risks in particular groups, e.g., equipment and chemicals.
- **Complex Assessments** - If a particular activity has several hazards associated with it, break it down into its component parts and assess each hazardous activity/task separately.
- **Educational Trips and Visits** - If possible, the Group Leader should conduct a preliminary visit to establish potential hazards relating to any foreseeable risks. If this is not possible, the Group Leader must obtain information on the place/s to be visited with particular regard to possible hazards.

Predominantly, the majority of risk assessments will be completed using the College compliance software MyCompliance although where this system is not available then a number of risk assessment forms have been developed relating to specific procedural areas, e.g., hazardous substances, manual handling, display screen equipment, educational visits, etc.

4.10.3. Five Step Approach to Carrying Out a Risk Assessment

The 6 Step Approach:

- Step 1 - Identify Hazards
- Step 2 - Determine who might be harmed and how, e.g., staff, students, visitors, contractors.
- Step 3 - Determine the likelihood of harm occurring.
- Step 4 - Identify appropriate measures necessary to control or eliminate the risk.
- Step 5 - Record the assessment, **then**
- Step 6 - Review and monitor the risk assessment.

Step 1 - Identify Hazards. The first step in the risk assessment process is to identify all the hazards associated with a particular activity/task. Identify hazards in the workplace or area by one or more of the following methods:

- Walk around the workplace and look at what could reasonably be expected to cause harm. Talk to people who carry out the task or activity or are affected by it. Consider the environment where the task/activity is to be done:
    - When inspecting or observing a task, use the Observation Sheet (Appendix 2) to take an objective view of the area or activity. This should be done in consultation with those who also use the area and associated equipment, to record all potential risks, even those that are considered 'Low' risk. Completion of this form is not mandatory but will assist in the risk assessment process.
- Consult HSE Approved Codes of Practice and Guidance Notes – some hazards will have specific legal requirements pertaining to them e.g., hazardous substances, lead, young persons.
- Look at in-house policies, procedures, and sections within this manual.
- Consult accident/ill-health and other incident records.

- Information from manufacturers/suppliers including, for example, safety data sheets and hazard warning labels.
- When dealing with equipment and machinery this could include looking at a number of associated tasks such as installation, normal operation, breakdown, cleaning, and adjustment and dismantling.

Step 2 - Determine Who Might be Harmed and How. The risk assessment must include consideration for:

1. The number of people likely to be exposed.
2. The type of persons likely to be exposed.
3. The duration of exposure.

Appropriate actions for any specific group identified as particularly at risk may require personal risk assessments (PRA's) for specific individuals or groups of individuals such as:

- people with special educational needs.
- people with disabilities.
- new or expectant mothers (Guidelines for New or Expectant Mothers.
- young / inexperienced persons, trainees, volunteers, students (Guidelines for Young Persons – Appendix 5).
- Persons not in the College's employment, i.e., students, visitors, and contractors.

When deciding **how** persons may be harmed, you will need to look at/consider:

- Methods of work and other work-related factors, e.g., lone working, workload etc.
- Provision and/or level of training.
- Experience/technical knowledge.
- Any disabilities or impairments the person may have.

Where a female member of staff informs their manager or Human Resources (HR) that they are an expectant or new mother, the manager must review the appropriate risk assessment(s) for that member of staff so as to ensure that all appropriate control measures or work adjustments/changes, where applicable, are implemented. The manager and staff member will also be required to complete the New or Expectant Mother Risk Assessment available from HR.

Step 3 - Determine the Likelihood of Harm Occurring. This involves looking at what risk control measures are currently in place and deciding whether these are adequate to control the risk to an acceptable level and As Low As Reasonably Practicable (ALARP), i.e.:

- Each consequence will also have its own risk value. For instance, a student falling over, bruising is most likely whilst death would be extremely unlikely. However, for a person falling at height from a ladder the risks for those two outcomes would be different.
- Those risks that are considered to be 'significant' i.e., ranked 'Medium' or 'High' require further action by completing a formal Risk Assessment using the appropriate Risk Assessment form. If the potential Risk/Hazard is controlled/minimised by relatively uncomplicated systems, then these can be satisfactorily described on the Risk Assessment (Hazard Prompt List – Appendix 4). Refer to **Step 5 - Record the Assessment.**
- If a process or activity is considered to rank 'High Risk,' it must be stopped immediately and only permitted to re-commence when adequate control measures are put in place to reduce the risk ranking to 'Medium' or 'Low.'
- Where an unavoidable 'High' risk remains following the risk assessment, a Safe System of Work (including strict Control Measures) is to be implemented (a template Form is at Appendix 4).

Step 4 - Identify Appropriate Measures Necessary to Control or Eliminate Risk. The following hierarchy of control measures will help you to identify what additional control measures will need to be implemented to reduce the risk to an acceptable level. It is important to remember that some corrective measures are better than others and some are very ineffective as controls. The table below shows control measures in descending order of effectiveness.

Hierarchy of Control Measures

Hazard Elimination	e.g., use of safer alternatives; design improvements; change of process
Substitution	e.g., replacing a hazardous chemical with one of less risk
Use of Barriers	e.g., isolation/segregation; guarding
Use of Procedures	e.g., safe systems of work; limiting exposure time
Use of Warning System	e.g., signs and labels; audible alarms; information
Use of Personal Protection Equipment (PPE)	Should be used only as a last resort

Step 5 - Record the Assessment. The significant findings of the risk assessment must be recorded. Risk assessments must be shared with all individuals who may be affected by the activity/undertaking. All appropriate people must be involved and consulted in the risk assessment process, including staff with knowledge/experience of the working procedures/practices and trade union health & safety representatives.

A risk assessment must be completed prior to the commencement of any task or activity with significant risk. The responsibility for carrying out risk assessments may be delegated to suitably competent members of staff, who have sufficient training, experience, or knowledge to enable them to carry out a suitable and sufficient risk assessment. However, managers **retain the responsibility** for ensuring that assessments are completed and authorised and that actions are adequately prioritised and addressed.

All faculty and group service departments must ensure that an Action Plan is prepared, in respect of the risk assessments for their areas, where appropriate, giving information on the implementation of actions arising from the assessments, the priorities identified and timescales for their completion.

All ‘hard copy’ approved risk assessments must be held in a central location in departments and in the area where the activity takes place. Where applicable, any specific actions or information must be brought to the attention of staff who may be affected by the risks, along with any precautions required and any emergency arrangements introduced.

Step 6 - Review and Monitor the Risk Assessment. Risk Assessments must be reviewed at least annually. Previous risk assessments are to be retained for at least 12 months following their replacement. Risk assessments will also need to be reviewed prior to:

- any changes taking place (i.e., in the method of work, personnel, environment) which may invalidate the existing risk assessment.
- prior to a new process or practice being introduced.
- if there is evidence to suggest that the existing risk assessment is no longer valid (i.e., research or an accident has identified a previously unknown risk).
- when a student or staff member has a medical condition or disability that could be affected by the course content, i.e., an allergy.

All individuals have a responsibility to ensure that they adhere to the contents of the risk assessment and abide by the control measures identified.

4.11. Related Policies, Procedures, Regulations, Legislation & Guidance

- Health & Safety at Work etc Act 1974

- Management of Health & Safety at Work Regulations 1999
- Health & Safety Executive (HSE) Approved Code of Practice and Guidance to the MHSWR Regulations
- Noise at Work Regulations 2005
- Health & Safety (Display Screen Equipment) Regulations 1992
- Personal Protective Equipment at Work Regulations 1992
- Manual Handling Operations Regulations 1992
- Control of Substances Hazardous to Health (COSHH) Regulations 2002
- Control of Lead at Work Regulations

4.12. Acknowledgements

- Health and Safety Executive – A brief guide to controlling risks in the workplace INDG163

4.13. Appendices

Appendix 1– Principles of Prevention (MHSWR Regulations, Schedule 1, Regulation 4)

Appendix 2 – Risk Assessment Observation Sheet

Appendix 3 – Risk Assessment Hazard List

Appendix 4 – Guidelines for Risk Assessment of Young Persons

Principles of Prevention (Regulation 4)

a. avoiding risks.

b. evaluating the risks which cannot be avoided.

c. combating the risk at source.

d. adapting the work to the individual, especially as regards the design of workplaces, the choice of work equipment and the choice of working and production methods, with a view, in particular, to alleviating monotonous work and work at a predetermined work-rate and to reducing their effect on health.

e. adapting to technical progress.

f. replacing the dangerous by the non-dangerous or the less dangerous.

g. developing a coherent overall prevention policy which covers technology, organisation of work, working conditions, social relationships and that influence of factors relating to the working environment.

h. giving collective protective measures priority over individual protective measures; and

i. giving appropriate instructions to employees

Risk Assessment Observation Sheet

Sheet ..... of .....

Room or activity inspected	Date
Area/Dept	Carried out by

Observations List hazards, unsafe practices, and good practices	**Significant Risk** Yes / No	**If Significant Risk, List Actions Required to** List all immediate and longer-term actions required	**Timescale** e.g. immediate, 1-week etc	**Priority** (H, M, L)
Example... Risk of slips, trips, and falls due to water spillage in corridor		1. Clean up 2. Review regularly	1. Immediate 2. Weekly	M

Risk Assessment Hazard Prompt List

During work activities, could the following hazards exist?

1. Contact with Moving Machinery
2. Slips, Trips and Falls, e.g., on the same level, from heights, etc.
3. Struck by Objects, e.g., falling tools, ejection of material, etc.
4. Striking against Objects, e.g., inadequate headroom, etc.
5. Hazards associated with Manual Handling
6. Hazards associated with poor Ergonomics – conveyors, repetition, VDU's.
7. Contact with Substances (Cross-reference with COSHH Assessments)
8. Biological Hazards, e.g., rats' urine, bodily fluids
9. Vehicle hazards, covering both site transport and travel by road.
10. Harmful energies e.g., Electricity, radiation, noise, vibration
11. Fire and explosion.
12. Lone Working
13. Violence
14. Working Environment – lighting, temperature, space, etc.
15. First Aid / Emergencies
16. Physiological (work life balance/stress management)

Guidelines for Risk Assessment of Young Persons

Employers are required to assess the specific risks for young people (i.e., those under 18 years old) before employing a young person in the workplace; the assessment should consider the inexperience and possible immaturity of the individual. For young workers, the risk assessment needs to pay attention to areas of risk described below:

- work beyond their physical or psychological capacity.
- work involving harmful exposure to agents which are toxic or carcinogenic, cause heritable genetic damage or harm to the unborn child or which in any other way chronically affect human health.
- work involving harmful exposure to radiation.
- work involving the risk of accidents which may reasonably be assumed cannot be recognised or avoided by young people owing to their insufficient attention to safety or lack of experience or training; or
- work in which there is a risk to health from extreme cold or heat, noise, or vibration.

When control measures have been taken against these risks and if significant risk still remains, no child (young worker under the compulsory school age) can be employed to do this work. A young worker, above the minimum school leaving age, cannot do this work unless:

- It is necessary for their training; and
- they are supervised by a competent person; and
- the risk will be reduced to the lowest level reasonably practicable.

While a child (below the minimum school leaving age) is at work, the requirements for providing information are the same as for other employees. There is, however, an extra requirement on the employer to provide the parents or guardians of children at work (including those on work experience) with information on the key findings of the risk assessment and the control measures taken before the child starts work. This information can be provided in any appropriate form, including verbally or directly to the parents or guardians, or in the case of work experience, via an organisation such as the school, the work experience agency, or, if agreed with the parents, via the child, as long as this is considered a reliable method.

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Section 5. Animals and Assistance Dogs on College Property

5.0. Procedure Statement

This document sets out the College arrangements for staff, students and visitors bringing assistance dogs and support animals into the workplace. It applies to all staff, students and visitors within the Activate Learning College Group (the College), its owned, leased, or controlled buildings and land, (except public footpaths and rights of way). Animals are not allowed to be brought onto the College estate/premises (with the exception of public footpaths/rights of way) unless permission to do so has first been approved in accordance with this guidance.

5.1. Introduction

The general duties in the Health and Safety at Work etc. Act 1974 require employers to ensure the safety, health and welfare, so far as is reasonably practicable, of employees, and those not in employment. Furthermore, the Management of Health and Safety at Work Regulations 1999 require risks to be assessed and recorded, and arrangements for managing Health and Safety at Work to be in place.

The College recognises that although there may be positive aspects to having an animal in the workplace, there are negative aspects which must be considered.

- They may increase stress as others may find them intimidating or find the smell offensive.
- Stalled or delayed evacuation of a building in an emergency
- Aggressive behaviour of animals
- Allergic reactions and transmission of disease
- Zoophobia (phobia of animals)
- Slips, trips, and falls
- Animal waste and damage to college property

5.2. Definitions

5.2.1. Assistance Animals. An **assistance animal**, often referred to as an assistance dog, is specifically trained to assist a person with disabilities. This includes guide dogs for the visually impaired, hearing dogs for the deaf, and other dogs trained to assist with various disabilities. These animals are not considered pets and are protected under the Equality Act 2010, which allows them to accompany their owners in public places, including shops, restaurants, and public transport.

- The Equality Act 2010 recognises and allows for assistance dogs and ‘guide dogs’ as they facilitate mobility for their owner or user or assist with daily tasks.
- In accordance with the Equality Act and College Equality policy, reasonable adjustment must be allowed and funded by the College to accommodate any request to bring assistance animals (guide dogs for the blind/hearing dogs for the deaf etc.) onto the College estate.
- Approval should be granted for assistance animals and restrictions only applied where their presence poses a significant risk to health or safety (e.g., food preparation/storage areas) or the assistance animal is not appropriate to the owner i.e., hearing dog owned by someone who is not hearing impaired

Guide dogs, hearing dogs, service or alert dogs are allowed into college buildings under the control of their owner. The Property & Environment teams will work with the college member or student to identify support needs and make reasonable adjustments to provide a safe and welcoming environment.

Proof should be shown that the animal has been registered with a recognised assistance organisation. A list of organisations that are accepted by the college are listed in Appendix 1

5.2.2. Therapy Animal. A **therapy animal** is used to provide comfort and support in therapeutic settings such as hospitals and nursing homes with more than one individual. These animals are not necessarily trained to perform specific tasks but are used to improve emotional and psychological

well-being of individuals. Therapy animals do not have the same legal protections as assistance animals and are not typically allowed in public places unless specifically permitted.

- UK law does not currently recognise Animal-assisted therapy (AAT) in the same way as assistance animals. Therapy animals are used in Animal Assisted Therapy (AAT) or Animal Assisted Intervention (AAI) to improve mental, physical, social and emotional functioning.
- Therapy dogs are only permitted on campus as part of an organised activity arranged by the Regional Head of Student Experience (alongside completing the application process).
- Dogs will be required to be temperament assessed to be used as a therapy animal and must wear a PAT vest or lead slip when on campus.
- Information on PAT and assessment is detailed in Appendix 1

5.2.3. Emotional Support Animals. An **emotional support animal (ESA)** provides comfort and support to individuals with mental health conditions or emotional disorders. Unlike assistance animals, ESAs do not require specific training to perform tasks related to a disability. In the UK, emotional support animals do not have the same legal recognition or protections as assistance animals, meaning they are not automatically allowed in public places or areas that prohibit pets.

- UK law does not currently recognise emotional support animals in the same way as assistance animals.
- There is no register for emotional support dogs in the UK, so it is not possible to register, validate or get an ADUK ID for an emotional support dog. Their lack of formal training or assessment is an essential factor in the evaluation of their suitability, particularly in terms of potential risks.

5.2.4. Pet Animals. A **pet animal** is any domesticated animal kept for companionship or pleasure rather than for work or breeding purposes. They are not automatically allowed in public places or areas that prohibit pets.

- There is no specific legislation relating to pet animals (most commonly dogs) in the workplace.
- The College does not endorse pet animals coming into the workplace
- Applications for animals considered ‘pets’ should be considered if the animal were to be used for training with students (e.g., elements of the Animal Care program, Dog Grooming or Livestock Management program.). Considering the inherent characteristics of these animals, specifically their lack of formal training or assessment, it is essential to factor this into the evaluation of their suitability, particularly in terms of potential risks.

5.3. Approval authority

The decision to allow animals to be brought onto or kept on the College estate/premises rests with the Group Director of Faculty and College and their decision is final.

Approval for animals to be brought onto the College estate/premises will only be granted if the disadvantages are outweighed by the benefits provided by the animal's presence.

It will be dependent upon completion of the application as detailed in this guide, which identifies that the animal presents an acceptable risk to third parties and the College; and that compliance with local procedures will be achieved and always maintained.

Activate Learning reserves the right to cancel or decline an application or permit card at any time for any reason, which may not be disclosed to the applicant or permit card holder.

5.3.1. Approval considerations

5.3.1.2. The implications

- The purpose of the animal being onsite and the type of animal
- The area where the animal will reside during time on campus
- Hygiene and the disposal of fecal matter and other waste (arrangements must be in place prior to approval. Advice on the management of animal waste can be found on the Environment

Agency web site (for England & Wales); and legislation at www.businesslink.gov.uk.)

- Noise nuisance and distractions
- Restraint (particularly near traffic routes)
- Procedure in an emergency (will the animal be an obstacle in an evacuation)
- If the owner is a critical staff member and may need to leave the animal unattended (first aider, fire warden, Safeguarding staff etc.)
- The contact level with other staff members and students.
- Proof should be shown of training by a recognised organisation for assistance dogs or temperament assessment from PetsAsTherapy.org

5.3.1.2. Objections from colleagues

- Approval will not be granted or rescinded (except for assistance animals), where valid objections exist (e.g., an allergy, phobia, or religious belief) to the animal's presence in the work area.
- All College staff have the right to state their objection to an animal's presence in the area where they work or have cause to visit regularly. Objections will be entirely confidential and will not be shared with the applicant.
- Colleagues who share the workspace should be consulted prior to an application being approved and an animal being brought into the workspace. Applications should only be approved if there are no valid objections (unless objections are overruled by a requirement to meet a legal obligation, such as an assistance animal.) and it meets all other criteria.
- Objections from staff and fellow classmates must also be considered if a student applies to bring an emotional support animal to campus.

5.3.1.3. Cleaning

By applying to bring an animal into the workplace (including Residential accommodation), the applicant agrees to meet the cost of a biannual deep clean of their immediate workplace or room and any other internal college area which may be fouled by their animal.

5.3.1.4. Public Liability

- Persons bringing animals onto the College estate/premises may be held liable for any injury to personnel or visitors, or damage caused to the premises or facilities by their animal; so therefore, appropriate Public Liability insurance cover is required, with a minimum cover of £1M
- **Most pet insurance policies that include liability cover will not provide cover if the animal is taken into work or into an educational establishment. In this case additional public liability cover must be acquired.**
- Activate Learning is not responsible for any damage caused to a person or property by an animal brought onto site.

5.3.1.5. Staff living on site

- Staff living on site may be permitted to keep animals within their private residence subject to application approval.
- If the staff member wants to take their animal into the workplace they will be required to apply and gain approval, as detailed in this guide. This includes housing the animal at the kennels at Merrist Wood during working hours.
- The occupier will be expected to 'deep clean' the property before vacating it and handing it back to the Campus Property & Environment Manager. Failure to do so may result in the cost being deducted from their salary.

5.4. Roles and responsibilities

5.4.1. Group Director of Faculty and College

- Will review the application and make their decision based on the approval criteria.
- If the applicant is a student who is under the age of 18 as of the 31 August, the Group Director of Faculty and Campus or their nominated manager will contact the parent to discuss the application, gain further information and parental consent.
- Will ensure that animal waste facilities are put in place prior to approval.
- Will arrange the contact of the classmates of a student applicant to obtain any objections
- Will ensure that any incidence of non-compliance is dealt with and then reported to the Compliance Team to log on file.

5.4.2. All Staff

- All College staff have the right to state their objection to an animal's presence in the area where they work or have cause to visit on a regular basis. Objections should be recorded during the application process.
- Staff have the right to rescind their approval at any time by contacting the Compliance Team.

5.4.3. All Students

- All College students have the right to state their objection to an animal's presence in the area where they work or have cause to visit on a regular basis.
- Students have the right to rescind their approval at any time by contacting the Compliance Team.

5.4.4. The Compliance Team

- Will submit the application to the Group Director of Faculty and Campus
- Will record the application and associated paperwork on the Animal Permit Register
- Will contact the staff colleagues of the applicant to obtain any objections
- Will contact the Advice and Admissions teams to order the permit card

5.4.5. The Health and Safety Team

Will review and approve the risk assessment submitted by the applicant

5.4.6. The Applicant

- Will provide all requested paperwork as detailed in the application process
- Will ensure that the Pet Permit card is carried at all times and shown when asked or return home with the animal to collect it.
- Will keep the animal under control at all times, either restrained by a short leash/lead when moving around campus, secured in the kennels at Merrist Wood or secured in a crate/pet carrier when inside. **Animals are not to roam freely or have the ability to approach staff, students or visitors. Animals are not to be kept in public facing or reception areas.**
- Will ensure that if the animal is present on campus for the purposes of teaching, that this has been stipulated in the Scheme of Learning and specifically relevant to the curriculum.
- Will ensure the immediate and proper disposal of animal waste
- Will remain responsible at all times for the animal and are liable for injury or damage caused by the animal
- Will ensure that the animal is wearing a collar or harness with an identity tag, as detailed in the Animal Health Act 1981 when moving around campus. These should be removed for safety when the animal is crated.

- Will ensure that a sign is placed on the door to the office/room informing visitors of the presence of the animal.
- Will not leave the animal unattended unless they are securely crated.

5.5. Advice and Admissions

Will create the Animal Permit card which the owner should always keep with them.

5.6. Failure to adhere to the above may result in approval being rescinded and disciplinary action.

5.7. The Application Process

5.7.1. The applicant is to complete the Animal Permit Request app and attach the requested information.

- Vaccination certificate
- Risk Assessment (refer to guidance is Appendix 2)
- Proof of assessment by PetsAsTherapy.org or ADUK identification details if the animal is an assistance dog or therapy animal.
- Pet Insurance certificate
- Evidence of Public Liability Insurance
- Recent clear photograph of the animal (to be used on the permit card)

5.7.2. The application and attached information is checked by the Compliance Team for accuracy and recorded on the Animal Permit Register. If information is not clear or not included, the Compliance Team will contact the applicant.

5.7.3. The Compliance Team will contact the Manager of the applicant to provide names of the colleagues who share the workspace, and the Compliance Team will contact them by email to inform them of the application and to obtain any objections.

5.7.4. The application is forwarded to the Director of Faculty and Campus who will review and make their decision.

5.7.5. If the application is rejected by the Director of Faculty and Campus, the Compliance Team will notify the applicant and record the decision on the Animal Permit Register. The applicant may not be informed of the reasons why. This is to ensure the confidentiality of team members that objected. If rejected, the applicant cannot apply again for the same animal. The information submitted will be kept and used to cross reference if the applicant attempts to apply again with different criteria. There is no option to appeal and a second application for the same animal will not be considered.

5.7.6. If the application is accepted by the Director of Faculty and Campus, the Compliance Team will notify the applicant, record on the Animal Permit Register that the approval is pending paperwork approval and ensure that the risk assessment is approved by Health and Safety.

5.7.7. When the paperwork is approved the Compliance Team will notify the Advice and Admissions department on the campus to create the Animal Permit card, using the photograph of the animal provided at application. The applicant will be told to go and collect the permit, prior to bringing the animal onto campus. The permit must be shown when requested and if it cannot be provided the applicant must return home with the animal to collect it.

5.7.8. The expiry date of the Animal Permit Card will be the expiry date of the animal insurance or public liability insurance, whichever is soonest.

5.7.9. The Compliance Team will notify the permit holder that their permit is due to expire 60 days ahead and they will need to submit a new application with updated paperwork. Once checked and approved by the Director of Faculty and Campus, a new permit card will be issued.

5.8. Related Policies, Procedures, Regulations, Legislation & Guidance

- The Health and Safety at Work etc Act 1974
- The Management of Health and Safety at Work Regulations 1999

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- College H&S (Health & Safety) Policy
- Form RA1 Risk Assessment template
- College Site Wide Risk Assessment
- Safeguarding Policy
- Equality and Diversity Policy

5.9. Acknowledgements

- ADUK - Assistance Dogs UK - ADUK
- Blue Cross - Bringing your dog to work | Blue Cross
- Pets As Therapy (PAT) - https://petsastherapy.org/
- Allergies and Office Dogs: What to Keep in Mind When Starting a Pet-Friendly Office - https://www.employmentlawreview.co.uk/allergies-and-office-dogs-what-to-keep-in-mind-when-starting-a-pet-friendly-office/
- Managing risks and risk assessment at work - Managing risks and risk assessment at work – Overview -HSE

5.10. Appendices

- Appendix 1 – Assistance Animals
- Appendix 2 – Risk Assessment

Assistance Animals

College staff with a disability who utilise an assistance animal (or one in training) shall register their ADUK Identification details (or similar) in advance with the Compliance Team, who will then make other departments aware if required.

Students are to register their assistance dog (their ADUK Identification details or Trainers details) with the Compliance Team, who will then make other departments aware if required.

Assistance dogs must:

- Be trained by a member of the Assistance Dogs UK (AD(UK)), (a coalition of assistance dog organisations listed below), Assistance Dogs International (ADI) and The International Guide Dog Foundation (IGDF), a registered trainer or an equivalent organisation in another country.
    - Registered charities that form AD (UK), include:
        - Canine Partners
        - Dog A.I.D.
        - Dogs for the Disabled
        - Guide Dogs
        - Hearing Dogs for Deaf People
        - Medical Detection Dogs
        - Support Dog
        - The seeing Dog Alliance
        - Others that are listed on ADUK website
- have a formal identification in the form of branded jackets, harness or lead slips.
- If trained by ADUK then have the yellow ID booklet from the AD(UK) member organisation. This ID book contains information about the owner and their dog, details of the training organisation who trained the dog and its owner.

Therapy Animals

College staff who own an animal that they wish to bring onto campus to be used as a therapy animal for the benefit of other staff and students, must ensure that the animal has been temperament assessed by PetsAsTherapy.org.

The animal must be identifiable on campus by wearing a PAT vest, PAT scarf or similar. The owner will also have a PAT registered key fob as evidence.

Therapy dogs are only permitted on campus as part of an organised activity arranged by the Regional Head of Student Experience (alongside completing the application process).

Risk Assessment

The main risks associated with keeping animals in the workplace are physical injury due to bites, scratches, kicking or crushing and infection or infestation from micro-organisms or parasites, and asthmatic or allergic reactions. Some people have phobias about particular kinds of animals, and many veterinary products are hazardous to human health; therefore, a risk assessment must be completed by the applicant for each application to request that an animal be allowed to be brought onto the College estate.

Points that must be considered when conducting an animal risk assessment are:

- emergency evacuations (how will animals be evacuated without causing a hazard to others evacuating the area).
- what hazards does the animal present (e.g., tripping, bites, scratches, transmission of diseases).
- by what routes can any micro-organisms be transmitted to humans, e.g., hand to mouth contact, bites, scratches, or through the air.
- all animals are regarded as potential sources of infection or infestation (where practicable, proof of vaccination, worming, flea treatment etc. shall be required).
- how many people (staff, students, visitors, contractors) and who is exposed, does anyone have allergies or phobias.
- the areas the owner/handler is likely to visit during their duties.
- the people likely to visit the area where the animal is normally based.
- are there any new or expectant mothers working in the area.
- do students visit/pass through the area.
- what other animals may be present (are they territorial).
- vicinity to vehicle movements.
- vicinity to equipment/machinery.
- animal welfare and the storage of food

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Section 6. First Aid Procedures

6.0. Procedure Statement

This Section sets out the College's guidelines for compliance with the Health and Safety (First Aid) at Work Regulations 1981, the associated HSE (Health and Safety Executive) Approved Code of Practice (ACOP) L74 and guidance (updated 2013) and the Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). The contents of this section apply to all individuals whilst at Activate Learning, its campuses and any of its outreach centres, including franchises and other places of work. Failure to comply with these procedures may result in appropriate disciplinary action or cancellation of contract.

In accordance with the Health and Safety (First Aid) Regulations 1981 and the Health and Safety at Work, etc. Act 1974, the College is required to provide adequate and appropriate equipment, facilities, and personnel to ensure staff receive immediate attention if they are injured or taken ill at work. Whilst the Regulations do not place a legal duty on the College to extend this provision to students and visitors, we have a moral duty of care to do so.

6.1. Introduction

6.1.1. The definition of first aid provided in the regulations is:

'In cases where a person will need help from a medical practitioner or nurse, treatment for the purpose of preserving life and minimising the consequences of injury and illness until such help is obtained, and

'Treatment of minor injuries which would otherwise receive no treatment, or which do not need treatment by a medical practitioner or nurse.'

The objectives of providing first aid for a casualty are to:

- preserve life
- prevent worsening; and
- promote recovery

A glossary of additional First Aid related terminology is at Appendix 1 to this section.

6.1.2. The College must have adequate equipment, facilities, and trained personnel to provide first aid support if someone is injured or becomes unwell in college, or when involved in college educational/enrichment activities. Due to the size and nature of the organisation and the variety of work and study undertaken, different arrangements for different areas may be appropriate. Therefore, each Faculty/Services/Department must consider its risks in relation to the First Aid Needs Assessment produced by the Group Health and Safety Manager and ensure that an adequate number of staff have been trained to provide appropriate first aid.

This procedure allows for a consistent approach to the provision of First Aid at all Activate Learning sites in accordance with statutory provisions and, where appropriate, the implementation of necessary control measures to prevent recurrence. The College is committed to the thorough and open investigation of incidents appropriate to the level of harm and lessons to be learnt. For further details regarding accident investigation refer to paragraph 6.9.

6.1.3. Activate Learning will:

- Identify the first aid needs of the college in line with the Management of Health and Safety at Work Regulations 1999.
- Ensure that appropriate first aid provision is always available during normal college opening/operating hours and off the premises whilst on college organized visits.
- Appoint the appropriate number of suitably trained people as First Aiders to meet the needs of the College in all its undertakings.

- Ensure that all staff and students are aware of the procedures in the event of any illness, accident, or injury.
- Provide information on the responsibilities and investigation techniques to be adopted by GET, Directors and managers.
- Provide guidance and training for individuals as required to ensure compliance with this section.
- Implement a clearly defined system for the reporting of all incidents, accidents, near misses and dangerous occurrences.
- Maintain accident records and to report to the Health and Safety Executive as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).
- Ensure that data from incident reports are used to review and make improvements to the Health and Safety Management System.

6.2. General Guidance

Staff are to ensure that incidents they or their students are involved in are reported using the College online Accident/Incident Report Form. Further guidance is available on the H&S SharePoint portal.

All incidents including Near Misses are to be reported using the web-based form within MyCompliance.

Damage to college equipment or property must be reported to the Facilities Helpdesk or Property & Environment Manager.

Incidents that occur whilst participating in educational visits or enrichment activities must be reported in accordance with this procedure.

Investigations will be conducted for all reported accidents/incidents. The level of investigation will be appropriate to the level of harm or likely harm. The investigation is not carried out with the intent to lay blame or make judgements on whose 'fault' it is but to identify the failure in College activities or management systems and take appropriate action to prevent a recurrence.

Any loss/theft of college property including personal items from locked or unlocked offices must be reported immediately to the Property & Environment Manager.

6.3. Roles and Responsibilities

6.3.1. Group Directors are responsible for:

- Ensuring the implementation of this procedure within their area of responsibility by providing support and advice to their managers',
- Co-operating with the Group Head of Administration and Compliance / Group Health and Safety Manager or the relevant H&S Officer where a major injury or dangerous occurrence has been reported which requires investigation and where possible to preserve the scene, until an investigation has been conducted.
- Ensuring that in the event of a major injury or fatality the Group Head of Administration and Compliance / Group Health and Safety Manager is contacted immediately.

6.3.2. Managers will:

- Ensure all individuals (staff, students, and visitors) within their area of responsibility are informed of this section and its requirements.
- Ensure that this First Aid procedure is implemented and adhered to, within their departments.
- Ensure all staff, students and visitors in the department are informed of how to obtain first aid assistance. This information should cover:
    - general organisation of first aid in the department.

- information on how to obtain first aid.
- emergency phone numbers.

- Allow First Aiders in their areas time to attend incidents and training.
- Conduct investigations into minor injury and near miss reports.
- Co-operate and assist with the investigations where directed by their director or manager or by the Group Head of Administration and Compliance / Group Health and Safety Manager.
- Review risk assessments, safe systems of work and other supporting documents and implement further control measures where necessary following an incident.
- Ensure that staff complete the MyCompliance online Accident form as per guidance.
- Ensure that appropriate first aid cover is in place before approving any periods of absence for their staff 'first aiders.'

6.3.3. The Group Head of Administration and Compliance / Group Health and Safety Manager will ensure that they or a H&S Officer will:

- Determine the levels of first aid cover and equipment required for each area within the college.
- Ensure adequate first aid supplies are available throughout the college.
- Provide first aid information to staff.
- Ensure all reportable accidents/dangerous occurrences that fall under RIDDOR are reported to the enforcing authority within the timescales set out in the legislation.
- Ensure that other relevant bodies such as the Environment Agency receive reports in line with reporting requirements.
- Ensure details of all reported accidents/incidents and records are retained for the appropriate duration and stored in a secure and confidential manner.
- Provide reports to each Campus H&S Committee and a summary to the Compliance and Risk Committee.
- Provide full co-operation to any external enforcement agency investigation.
- Ensure that guidance and information is provided to relevant managers where investigation and evidence is captured.

6.3.4. **Group Health and Safety Manager** will co-ordinate the following:

- Maintain the database of current First Aid trained personnel.
- Arrange appropriate first aid training, including refresher training.
- Working with the H&S Officers, maintain and review on a regular basis, a First Aid rota for each Campus.

6.3.5. Health and Safety Officer (H&S Officer)

H&S Officers will co-ordinate the following within their regional areas:

- Regular assessment of first aid needs considering the size, distribution and activities undertaken at each College campus.
- Undertake immediate investigation or assign to a relevant manager where major injuries, dangerous occurrences or a fatality has been reported.

- Complete / review the investigation report and feedback the findings and corrective actions to Group Directors and Managers as appropriate and GET if relevant.
- Ensure that notices are clearly displayed with up-to-date information and that each Group Director receives termly, an updated list of First Aid trained personnel.
- Training of first aiders that have been Identified by relevant Managers.
- Conduct visual and working checks of AED's at least every three months and maintain appropriate records.
- Provide and maintain first aid information around communal/shared areas of the College e.g. first aid signs.
- Ensure the designated first aid boxes within the College are up to date and replenished, if necessary.
- Ensuring that sufficient first aid supplies are made available to each First Aider, considering the nature of the work activities undertaken.
- Regular review of their campus first aider rota.

6.3.6. First Aiders

Each rota'd First Aider is to be provided with a First Aid kit. All other first aiders are to have easy access to departmental first aid kits. First aid kits are to include disposable gloves that must be worn when dealing with blood or any other bodily fluids. Any material that has been in contact with blood should be treated as a biohazard and is subject to proper disposal procedures. All First Aid kits must contain a yellow biohazard bag for safe disposal of contaminated materials.

All First Aiders are to be contactable via email and via the mobile App 'TeamSOS' for distribution of information on First Aid issues. A designated 'Duty First Aider' will also have access to a radio.

The primary action of a first aider in the management of a casualty/ies is to:

- assess the situation.
- assess the condition of each casualty (triage).
- give immediate and adequate treatment, bearing in mind that a casualty may have more than one injury, some casualties may require more urgent attention than others, and some may only need reassurance.
- arrange, without delay, for the transfer of a casualty according to the seriousness of his/her condition to a place where medical treatment can be provided.

The level of treatment provided will be limited to the extent of the first aider's training and experience e.g. a first aider who has the first aid at work qualification may be expected to be capable of dealing with a wider range of injuries/illness than an emergency first aider.

First aiders must also take care to ensure that they do not become a casualty themselves due to, for example, other traffic at the scene of a road accident, being overcome by toxic substances whilst dealing with a laboratory incident, etc.

Additionally, First Aiders are responsible for:

- Responding to incidents when requested.
- Notifying their manager and their regional H&S Officer, when planning any absence i.e. leave, that may result in an absence of first aid provision.
- Completing an online accident/incident form as soon as possible and within 24hrs of attending the incident.
- Replenishing used articles from boxes after an incident. Online requisition forms are available. Contact the regional H&S Officer when stocks are running low.

- The first aid rooms should be checked by the first aiders when clearing up after an incident and, when necessary, arrangements made for the cleaning of the bedding via the Property & Environment Manager.
- Liaise with the regional H&S Officer as required.

6.3.7. Staff will:

- Be made aware of this H&S Manual and procedure via New Staff Induction.
- Ensure that all incidents are reported using the web-based Incident form on the H&S portal.
- Co-operate, where required, with the Group Health and Safety Manager, their regional H&S Officer or an enforcing or investigating body as part of an accident investigation.

6.3.8. Commercial & Lettings

The College is not responsible for providing first aid assistance to outside agencies using College facilities e.g., lettings, sports clubs, gymnasiums, nurseries etc.

P&E Managers are to request appropriate documentation from all outside agencies using College facilities providing evidence of insurance and first aid provision.

6.3.9. Event Managers / Group Leaders

Managers of events (Open Evenings, Recruitment Fairs, Fresher's) organised by Faculties/Services/Departments must ensure that they provide adequate first aid cover for the type of event they are holding and the numbers likely to attend.

Where external parties book or hire premises, those responsible for hiring out the College premises must ensure that responsibilities for the provision of first aid are clearly agreed and understood.

6.3.10. Contractors

Contractors working on College campuses are required to make their own first aid arrangements. In exceptional circumstances College First Aiders may be requested to help.

Guidance: It is important that there is no misunderstanding between the College and external hirers and contractors about who is providing first aid cover, and that the hirer / contractor does not assume that the College will provide cover. Normal practice is for the hirer / contractor to make their own arrangements.

6.4. First Aid Needs Assessment

6.4.1. First Aid Trained Personnel. There are various types of First Aider within the College:

- **3-day trained First Aid at Work First Aiders** can recognise and manage a wide spectrum injury and life-threatening symptoms in most situations.
- **1-day trained Emergency First Aid at Work First Aiders** can deal with minor injuries without support and are able to recognise and manage any immediately life-threatening condition until a fully qualified first aider or paramedic arrives.
- **3-day or 1-day (as appropriate) Forestry First Aiders** can recognise and manage injuries as stated above but within a forestry or outdoor environment which may involve catastrophic bleeding and natural diseases such as Lyme disease.
- **Paediatric First Aiders** can recognise and manage injuries as 1-day and 3-day first aiders (as appropriate) but related more towards childcare settings.
- **2-day British Horse Society First Aid** provides a basic overview of first aid procedures and focus on the injuries most likely to be sustained while handling and riding horses.

- **First Aid for Sport First Aiders** are trained in managing injuries because of sports activities, i.e., football.

All First Aiders can recognise and manage any immediate life-threatening condition and are also trained to operate an AED (Automated External Defibrillator).

6.4.2. HSE First Aid ACOP. In line with the HSE First Aid Approved Code of Practice and providing they have current knowledge and skills in first aid, the following may be considered as first aiders:

- Doctors registered with the General Medical Council
- Nurses registered with the Nursing and Midwifery Council
- Paramedics registered with the Health Professions Council

6.4.3. Assessing the First Aid provision required

The level of first aid provision should be determined based on the likelihood, at any workplace, of injuries arising which will require first aid treatment. The number of first aiders needed in any Faculty/department should therefore be determined based on an overall assessment of the faculty /department's risks, considering the following factors:

- The nature of the work and any specific workplace hazards.
- Any specific working arrangements and the number of employees (and others, if applicable) present at any one time.
- First aid cover in times of sickness or annual leave.
- The need to protect first aiders, and injured parties, from the risk of contracting a virus or disease.

The level of first aid can vary to reflect:

- Changes in occupancy and work activity.
- Individuals working alone or in small groups.
- The ability and experience of the staff.
- The distribution of the workforce.
- Individuals who may potentially be at greater risk e.g., young workers, trainees, those with disabilities.
- The distance from other appropriate help or emergency services.
- The needs of travelling, remote or lone workers, especially in remote locations.
- The accident history.

Guideline figures to assist in determining local requirements are provided in 'INDG214 (rev2) First Aid at Work, your questions answered. Extract shown in the table below. Faculties/departments in close proximity can overlap with first aid arrangements by agreement with each other.

Managers are to consider gaps in first aid cover before approving leave for first aiders.

Category of Risk	Numbers employed	Suggested minimum number of First Aid Personnel
Lower Hazard	fewer than 25	College settings expect EFAW as a minimum.
	25 -50	At least one first aider trained in **EFAW**
	more than 50	At least one first aider trained in first aid at work **(FAW)** for every 100 employed (or part thereof).

Higher Hazard	5-50 more than 50	At least one First Aider trained in **EFAW** or **FAW** depending on types of injuries that may occur. At least one additional First Aider trained in **FAW** for every 50 employed (or part thereof)
Settings where EYFS framework applies	N/A	At least one Paediatric first aider is available always when children are present and must accompany children on trips.

6.4.3. **Suitability to be a First Aiders**

The selection of first aiders depends on several factors, including an individual's:

- Reliability, disposition, and communication skills
- Aptitude and ability to absorb new knowledge and learn new skills
- Ability to cope with stressful and physically demanding emergency procedures
- Normal duties. These should be such that they leave immediately and rapidly for an emergency.

First Aiders will be selected from individuals who can be easily contacted and who are usually based in the area for which they are providing cover.

New individuals who hold a certificate in EFAW/FAW or similar should inform their Line Manager if they would like to volunteer as a First Aider. It must also be agreed with their Director if the individual is to provide First Aid provision across College **or** provide First Aid provision locally.

6.5. Factors to be considered when assessing first aid requirements

To provide guidance in completing a First Aid Needs Assessment, there are several factors that must be considered when deciding what first aid provision is needed (although this list is not exhaustive).

6.5.1. Chemicals

Work in laboratories and other areas that involve working with toxic substances, such as cyanide or phenol, or corrosive substances such as hydrofluoric acid, require appropriate medicaments to be readily available. First aiders must be trained to administer special medicaments and must be available to treat any injuries. Therefore, work with such substances must not be undertaken if either the medicament or appropriately trained first aider is not readily available.

6.5.2. Outside normal hours working

When staff or students are working outside normal hours, Curriculum Managers must ensure that at least one-person present is a first aider/emergency first aider. As a minimum anyone working outside normal working hours must know how to summon help in an emergency. The Duty Manager is available as the Appointed Person for emergency cover outside normal working hours (1700 – 2130hrs) Tues & Thurs.

Where work involves activities for which additional first aid training may be required i.e. Arboriculture and suspension trauma, this work must not be undertaken unless there is a first aider within the vicinity who has received specific training.

6.5.3. Cleaning staff

Cleaning staff frequently work in College buildings during the early mornings and evenings. The Cleaning Supervisor must instruct cleaning staff on the location(s) of the notices giving details of the nearest first aid facilities and telephone(s) in the areas in which they work. Staff should be advised to store the College Reception telephone number in their mobile telephone, if they have one.

6.5.4. Peripatetic workers

Peripatetic workers employed by the College, i.e. employees whose duties require that they work out of hours or in varied locations throughout the College or Cross-College, e.g. Estates Team, Caretakers, academic staff on fieldwork, Assessors etc., must have access to first aid kits, either in

the building where they work, or in College vehicles close to their work. Staff must have ready access to information i.e. via a departmental Health and Safety noticeboard which will detail:

- what the first aid provisions are in their base area; and
- how to obtain information about the first aid provisions in the area(s) they visit during the course of their duties.

6.5.5. Vehicles

All College vehicles - including tractors - must have a Travel First Aid kit so that peripatetic workers using the vehicle as a work base have access to a first aid kit. If first aid kits are fitted in an inconspicuous position, or kept in a glove compartment, a first aid kit sign must be used to identify it. The Manager responsible for the maintenance of the vehicle must ensure that travelling first aid kits are fitted to new vehicles when they are received.

6.5.6. Minibuses

Minibuses that are designed to carry passengers are subject to separate regulations that stipulate the contents of the minibus first aid Kit. Drivers must ensure that the required first aid boxes are present before any journey.

6.5.7. Fieldwork and Off-Site Trips or Activities

The first aid provisions to be made for fieldwork and Off-Site Trips or Activities vary depending on the number of persons involved, the length of the trip, distance from qualified medical treatment, and hazards associated with the work or location.

Where visits, events and excursions are remote from the College, a risk assessment must be conducted by the organiser prior to the event going ahead. The risk assessment must consider the activities to be undertaken, and the level of First Aid provision required.

Consequently, the first aid measures to be taken on specialised/potentially hazardous Fieldwork and Off-Site Trips or Activities should be discussed with the relevant regional H&S Officer well in advance of the trip so that the necessary first aid measures can be designed and implemented.

6.5.8. Merrist Wood College

In some remote areas where College employees and students work, additional first aid provision is required due to the remoteness of the site, the number of employees at risk, and the high-risk factors associated with the work carried out. These areas include:

- Woodland and field areas around the College
- The Farm
- Arboriculture activities on & off-site
- Countryside activities on & off-site
- Estates Team activities on & off-site

The need to provide additional protection for casualties whilst awaiting an ambulance (blankets, weatherproof coverings, stretchers etc.), must be considered. A suitable number of staff should attend the one-day Emergency First Aid at Work course, in addition to an adequate number of 3-day qualified first aiders.

6.5.9. Other Occupants

Where co-operative working between individuals of different faculties/departments sharing a building will improve the effectiveness of First Aid response, suitable arrangements should be agreed and recorded.

6.5.10. Foreseeable Absences

First Aiders must inform their line manager when First Aid cover will be reduced, for example holidays, work commitments, attending training courses, long term sick leave. This provision must also be considered when assessing First Aid numbers.

6.5.11. Review

Periodic review of the adequacy and effectiveness of First Aid arrangements is an integral part of an effective Health and Safety management system. Reviews of First Aid provision should be conducted annually by the relevant Group Director in consultation with their regional H&S Officer. Where significant changes have taken place, for example a departmental restructure or re-location, this should provoke at least a partial review.

6.5.12. First Aid outside the College Workplace

For individuals who use their own vehicles for college business, it is advisable that they hold a personal First Aid kit in their vehicle. Individuals who are provided with a college funded vehicle should have access to a personal First Aid kit.

If medical assistance is required while travelling between campuses, please report to reception of the College being visited and ask for a First Aider. If the situation is more serious, you should immediately attend the nearest Accident and Emergency Department.

6.5.13. Taught Courses where it is mandatory to hold a First Aid Qualification

Where it is a requirement of a course, for example Arboriculture, tutors will hold a First Aid qualification. It is recognised that First Aiders, in this instance, will give priority to local issues.

Students participating in this type of course will receive basic First Aid awareness training at induction and training will continue as part of the course development.

6.6. First Aid Equipment

6.6.1. First Aid boxes/bags

First Aid Boxes are to be the correct colour to comply with the Safety Signs Regulations 1996, i.e., a white cross on a green background. It should be of a suitable material designed to protect the contents from damp and dust.

All Faculties/departments in High-Risk areas will need at least one first aid box. Each first aid box should be placed in a clearly identified and readily accessible location, they should not be locked. First Aider's on the Duty Rota will be provided with their own First Aid bag if they do not have access to a centrally held First Aid container.

The requirement for additional boxes depends on the layout of the area/buildings to be covered and the H&S Officer will need to assess this to decide what will give adequate provision.

Travelling First Aid Kits should be provided in all vehicles used for College activities.

First Aid equipment needs for Off-site working, including field trips, is to be considered.

6.6.1.1. Contents of the First Aid Box

There is no mandatory list of items to be included but Appendix 4 to this section provides a guide on typical contents, both for kits within the workplace and those suitable for travel.

Ideally kits should be near hand washing facilities or individually wrapped moist cleansing wipes which are not impregnated with alcohol may be used. The use of antiseptics is not necessary for the first aid treatment of wounds.

Where First aid boxes are still managed by Faculties/departments, they must have an arrangement in place for checking the contents of dept held first aid boxes. First Aiders are responsible for their personal First Aid bags. The faculties/departments must ensure all boxes are checked routinely.

6.6.1.2. Tablets and Medication

First Aid at Work does not include giving tablets or medicines to treat illness. It is therefore not necessary for tablets and medicines to be kept in first aid boxes. If an individual has their own prescribed medicine (e.g., inhaler for asthma), the First Aider's role is limited to helping them take the medicine and contacting the emergency services as appropriate.

6.6.2. First Aid Rooms

A First Aid room containing an examination couch, First Aid supplies and washing facilities is located at each College Campus. Contact Reception for location.

After use, the First Aider must ensure that the room is clean and tidy and all soiled waste adequately disposed of, soiled blankets/pillows must be removed, and the P&E team contacted. General cleaning of the First Aid rooms will be undertaken by the College cleaning contractors.

Reception will hold a key to access the First Aid rooms at each relevant College. In addition, the P&E Manager will hold a key.

In order that all First Aiders are kept up-to-date and informed of any changes to these procedures, the Group Health and Safety Manager or Regional H&S Officer will undertake termly meetings.

6.6.3. Eye irrigation

In areas where contamination of the eye could occur, such as laboratories, workshops, etc., a clean supply of cold tap water should be readily available for eye irrigation. Where tap water is not available, sterile normal saline (0.9%) in disposable containers should be provided and identified using an appropriate sign on the container. All such sterile eye wash supplies must be replaced after use or when the 'use by' date is reached. The use of eye wash bottles filled with tap water is forbidden.

6.6.4. AEDs (Automatic External Defibrillators)

The College has arrangements for the use of AEDs (Automated External Defibrillator) that have been installed in key locations on its College sites.

AEDs should be used if you believe a person is not breathing or is breathing abnormally and does not respond when you call or shake them.

AEDs are available in most college buildings and signposted. In addition, Appendix 5 lists the location on each campus.

6.6.5. Auto Injectors

Some staff and students carry auto injectors commonly known as EpiPens. These devices are used to administer emergency lifesaving medication quickly and easily. In most cases the person requiring the medication will be able to administer it themselves, but they may need assistance. All first aiders and many staff have received training on the use of these injectors. In cases of Anaphylaxis, an ambulance will always be required.

The Administration of Medicines Policy should be read in conjunction with this section.

6.7. Provision of Information to Staff Concerning First Aid Arrangements

All departments must arrange for information to be provided to employees and others regarding the nature of the first aid provision. It should be included in the H&S induction of new staff and students (and others as applicable).

Departments should have strategically placed notices, listing first aider contact details (at least name and telephone extension) and location of the nearest first aid box. Such notices must be in green with white print.

Periodic reminders/updates are recommended to keep all staff informed.

6.8. Accident and Incident Reporting Procedure

All incidents are to be reported using the web-based Incident form on the H&S SharePoint portal.

Incident Report Forms must be completed by the attending First Aider or other appropriate member of staff if someone has suffered an injury.

If the incident is serious, e.g. death or the individual is taken from College premises to hospital by ambulance, the H&S Officer must be contacted immediately, and the area secured for further investigation. The Duty Manager must also be contacted.

The Group Health and Safety Manager will report any incidents that meet RIDDOR criteria to the enforcement authority within 48hrs.

6.9. Investigation of Incidents and Accidents

6.9.1. Low Level investigations will be conducted by the H+S Officer or relevant Manager as appropriate. These will be Incidents reported as minor incidents or near misses. Where the relevant Manager conducted the investigation, these will be reported back to the H&S Officer as an email summary of findings and actions.

6.9.2. Medium/High Level investigations will be conducted by the relevant Manager / Director, the Group Health and Safety Manager or a regional H&S Officer in conjunction with the relevant Manager or Group Director, depending on the severity of the injury. The Group Health and Safety Manager or a regional H&S Officer will assist the relevant Manager / Director in the completion of an Investigation Report or conduct it themselves. This report will be shared appropriately and is to be recorded on MyCompliance.

The Group Health and Safety Manager or a regional H&S Officer will Assist the relevant Director or Manager in developing an action plan advising on corrective/remedial actions to be taken to prevent recurrence or will undertake this themselves if required. This will be followed up by the H&S Officer one month later to check that corrective actions have been implemented.

6.10. Training

6.10.1. **Accident/incident investigation.** The College shall ensure that all Faculty or Group Services Managers receive suitable and sufficient training to complete an accident/incident investigation. Training will be delivered by the Group Health and Safety Manager as required and other forums for communication as appropriate.

6.10.2. **First Aid Training**. All first aiders have attended an approved course to the appropriate level and will receive refresher training as required. Training will be provided to maintain competency and renew First Aid at Work and Emergency First Aid at Work Certificates every three years. Annual refresher training and assessment of skills may be provided to maintain key skills.

6.11. Identification of Individuals with Medical Needs

Staff and students identified with long term medical conditions that require an agreed plan for treatment (Personal Risk Assessment (PRA)) are identified by a light blue border around their ID photo. A Personal Risk Assessment (PRA) will be completed to manage conditions such as epilepsy when a student has a risk assessment and agreed plan to be followed in the event of a seizure. This plan may request that the student is not taken to hospital immediately but given the support to manage their condition in a preferred way.

6.12. Obtaining First Aid for non-emergencies

6.12.1. Low risk curriculum departments and shared areas. Contact local building first aider. If not available, use the emergency line to contact the DM and reception to request first aid assistance from the on-duty First Aider.

6.12.2. Medium & high-risk departments (i.e. workshops, sciences, Property & Environment Team, Hair & Beauty, and Hospitality & Catering) are required to have their own first aiders and their names should be displayed in the area. If not available, use the emergency line to contact the DM and reception to request first aid assistance from the on-duty First Aider.

6.13. What to do in an emergency

In the case of any incident involving injury or ill-health on College premises where someone needs medical assistance, an individual should immediately call or send for a first aider (see lists displayed in buildings or contact reception).

Once a first aider has arrived at the scene of an incident, they will assess whether emergency help is required. To summon the emergency services, dial 999 (or contact College Reception). Reception staff will take details of the incident, and they will arrange to meet and direct an ambulance to the appropriate location.

Refer to the flow-chart at Appendix 2 to this section for guidance.

6.14. Procedure for Casualties Advised to attend Hospital (Non-Emergency)

If the first aider has advised the casualty to attend hospital and they do not require an ambulance, the procedure is as follows:

If the student is under the age of 18 a member of the Safeguarding Team should inform the parents/guardian unless they are in designated independent living.

If the student is over 18 and does not want a next of kin informed, the first aider must contact a member of the safeguarding team to record this on the student's ProMonitor file.

- Once the casualty has been booked in at the hospital, the member of staff can return to college, unless the student is under the age of 16 or vulnerable. In this case the student must be handed over to an appropriate adult.
- If the casualty refuses to go to hospital, note this on the accident form and get a witness.

The College will arrange for a taxi to be called to take the casualty to hospital if appropriate. Whether the casualty should be accompanied by a member of staff will be determined by the first aider in attendance after consulting the Duty Manager. The cost of the taxi will be met out of college funds (a receipt should be obtained by the casualty or person in attendance and submitted to finance).

6.15. Evenings & Weekends

First aid cover for 'hiring's' is the responsibility of the organiser and will be reflected within the activity risk assessment.

First aid cover for courses on campus taking place outside the normal College day will be provided by the relevant Faculty unless the Duty Manager or a member of the P&E team on duty is a First Aider. The Faculty Manager will need to confirm this with the Duty Manager or P&E Manager.

6.16. Student Residential Accommodation

The arrangements for the student accommodation are as follows: -

- During normal College hours first aid cover will be provided by staff on duty or first aiders within the curriculum area (i.e. high-risk activities).
- Out of hours, Wardens are on duty between 1700hrs and 0830hrs every day. Wardens are First Aid trained. In addition, a fully stocked first aid box must always be available.
- Residents need to be informed on how to summon help in an emergency i.e. use of 999 or 111.
- First Aid notices should include information on how to obtain help.

6.17. First Aid for Travelling, Remote and Lone Workers

The College is responsible for meeting the first aid needs of employees working away from main sites. Specifically:

- Those who travel regularly should carry a personal first aid container. All College vehicles including hired or leased must carry a first aid container.
- Employees who work in remote areas, or when limited numbers of employees are present on site. The risk assessment process must identify any additional needs. Consider means of summoning help, such as mobile phones, panic alarms or radios for employees who work alone.
- Students on work placement will have first aid reviewed by the Employer Assessment process or similar systems.

6.18. Liabilities and Stipend

The following sections are intended to clarify the liabilities and stipend awarded to first aiders.

6.18.1. Liabilities of First Aiders

Staff who are trained first aiders are regarded as acting in the course of their employment whilst administering first aid and are therefore covered for civil claims by the terms of the College

Employers' Liability Compulsory Insurance Policy. Cover is provided for first aiders who have received appropriate instruction and training and hold an up-to-date certificate.

6.18.2. Stipend

An allowance will be paid to first aiders who hold a valid First Aid Certificate and have agreed to provide first aid provision across the College as part of a duty rota system.

- First aiders regularly on the Duty First Aider rota responding across Campus will receive an allowance of £250.00 gross per annum pro rata.
- First aiders (3-day course trained) within high-risk departments who respond to calls within their Faculty/Department will receive an allowance of £125.00 gross per annum pro rata.
- Emergency first aiders (1-day course trained) will not receive an allowance.
- 100% of the payment will be made to staff that work full time (more than 0.5 FTE) and 50% payment to staff that work part time (less than 0.5 FTE)
- Staff who fail to respond to emergencies when requested will not receive any payment/allowance. Reception maintains a record of each First Aider request.

6.19. Records

Records of incident/accident forms, investigation reports, associated communications (emails) and insurance claims will be retained for a minimum of 3 years with the following exceptions:

- health surveillance, including medical reports – 40 years from the date of the last entry.
- radiation records - 50 years, or until age 75 of the individual, whichever the longer
- health records – 60 years from date of last entry or 100 years from date of birth.
- where exposure may lead to a disease many years later (i.e. Asbestosis – 60 years from date of last exposure.
- air monitoring – minimum of 5 years.
- examination and test of local exhaust ventilation – minimum of 5 years.
- examination of respiratory protective equipment – minimum of 5 years.
- accident record – whichever is the greater: 3 years from date that the record is created (or last record entered if in an accident book); or 3 years after the injured persons 18th birthday.

6.20. Related Policies, Procedures, Regulations, Legislation & Guidance

- The Health and Safety at Work etc Act 1974
- The Management of Health and Safety at Work Regulations 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- Control of Major Accident Hazard Regulations 1999
- Safety Representatives and Safety Committees Regulations 1977
- Activate Learning H&S Policy
- College H&S Action Plan
- MyCompliance Online Accident/Incident Report Form

6.21. Acknowledgements

- Health and Safety Executive (HSG245) – Investigating Accidents and Incidents https://www.hse.gov.uk/pubns/hsg245.pdf

- Health and Safety Executive (INDG453) – RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 https://www.hse.gov.uk/riddor/reportable-incidents.htm
- INDG214 - First aid at work: Your questions answered
- INDG347 - Basic advice on first aid at work
- L74 - First aid at work - The Health and safety (First Aid) Regulations 1981. Guidance on Regulations[3]
- GEIS3 - Selecting a first-aid training provider: A guide for employers [4]
- Case studies - Guidance on needs assessments [5]
- Poster - Basic advice on first aid at work[6]
- Poster - Electric shock: First aid procedures[7]
- INDG342 - Blood-borne viruses in the workplace: Guidance for employers and employees[8]
- INDG307 - Hydrofluoric acid poisoning - Recommendations on first aid procedures[9]Cyanide poisoning - Recommendations on first aid treatment for employers and first aiders

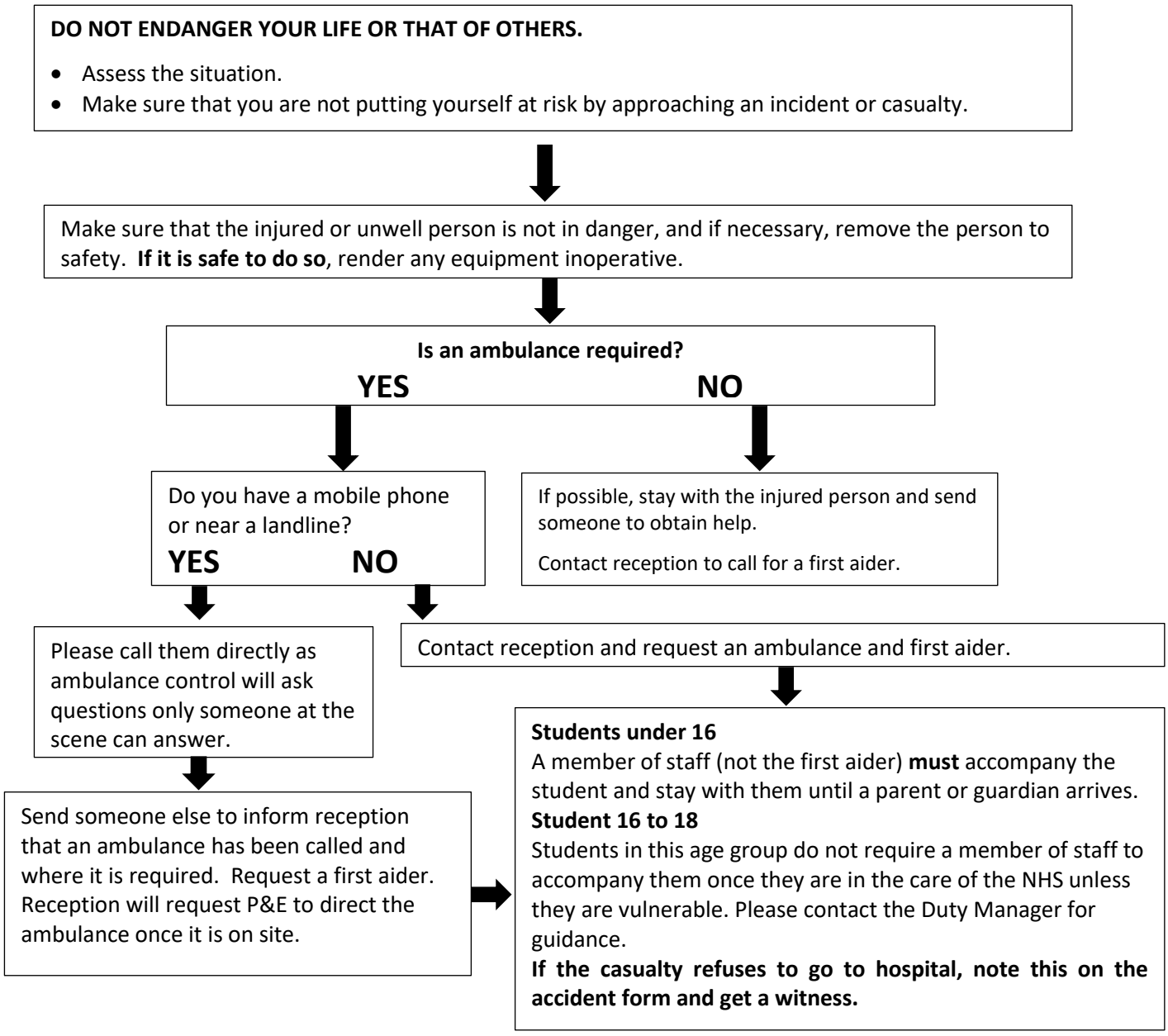
6.22. Appendices

- Appendix 1 – Glossary
- Appendix 2 – What to do in an Emergency
- Appendix 3 – Recommended Questions to address during an Incident Investigation
- Appendix 4 – First Aid bag/box contents
- Appendix 5 – College Defibrillator Location List

Glossary

Workplace	Any area of the Activate Learning estate.
Employees	Individuals employed under a contract of employment with Activate Learning (including fixed term contracts) regardless of location or status, e.g. part-time/full-time
Contractors	Term used to cover a person or business which provides goods or services under terms specified in a contract regardless of type of work undertaken
Individuals	Term used to cover employees and workers. In addition, this includes visitors, contractors, and other invitees on to the premises, e.g. members of the public
Students	A person who is engaged in study at Activate Learning
Incident	An instance of something happening; an event or occurrence that may or may not lead to injury or damage to person or property. An investigation will identify if it is an accident or near miss.
Accident	An unplanned event which results in injury to a person or damage to equipment or property
Near Miss	An event that, while not causing harm, has the potential to cause injury to people or damage to equipment or property
Fatality	Death that occurs whilst on College premises or arising out of College activities
Specified (Major) Injury	As defined in Regulation 4, of RIDDOR, namely, any individual who is taken to hospital by ambulance and receives treatment; any fracture; (other than to a single finger, thumb and toe); amputation of an arm, hand, finger, thumb, leg, foot or toe;, any crush injury; any burn injury; any loss of consciousness; any other injury at work which results in more than seven days' absence.
Minor Injury	First Aid treatable injury, which does not result in the individual requiring hospital treatment or taking seven days or more absence from normal work duties.
Dangerous Occurrence	As per requirements of RIDDOR, does not result in reportable injury, but involves the overturn or failure of load bearing/lifting machinery or electrical short circuit which causes fire or explosion.
Violence and Assault	Any incident in which an individual is either verbally or physically abused, threatened, or assaulted whilst on College premises or carrying out College activities
Emotional/ Psychological	Any incident in which an individual is seen to be suffering emotional distress or mental health signs and symptoms.
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

What to do in an Emergency



Use an AED if you suspect the person is having a cardiac arrest or has stopped breathing.
Refer to Campus maps within the Appendices.

Recommended Questions to address during an Incident Investigation

1. Where and when did the accident/incident happen? (Include date and time) e.g. Campus; Dept; Room.

2. Who was involved in the accident/incident? e.g. Student; Staff; Contractor; Visitor; Other

3. How did the accident/incident happen? (Note any equipment involved) e.g. contact with machinery; cut; slip/trip/fall

4. What activities were being carried out at the time?

5. Was there anything unusual or different about the working conditions/activity?

6. Were there adequate safe working procedures and were they followed?

7. What injuries or ill health effects, damage if any, were caused?

8. Did the people involved (staff/students) have the necessary skills and knowledge?

9. Was safety equipment issued and was it used?

10. Did other adverse conditions/factors influence the event?

11. What were the immediate causes of the event?

12. What were the underlying causes of the event? For example: No risk assessment; level of supervision not adequate; no Health and Safety training or information provided; poor layout.

13. What were the root causes of the event? For example: Management commitment to Health and Safety not communicated; unclear lines of communication and responsibilities.

14. What risk control measures are needed/recommended?

15. Do similar risks exist elsewhere in the Organisation?

16. Have the details of the event and the investigation findings been recorded and analysed? Are there any trends or common causes which suggest the need for further investigation?

17. Can you provide any Photos or Evidence?

First Aid bag/box contents

As a guide the first aid box should contain the items listed below. There may be instances when additional items are required due to the risks which are involved in the work activity. Note: No tablets, medicines, creams, or ointments should be kept in first aid kits.

Workplace First Aid box contents	**Quantity**
Guidance card & contents list	1
Individually wrapped assorted sterile plasters[2]	20
Sterile eye pads	2
Triangular bandages (preferably sterile)	4
Safety pins	6
Medium sterile individually wrapped dressings - approx. 12 x 12 cm	6
Large sterile individually wrapped, dressings - approx. 18 x 18 cm	2
Rustproof blunt ended scissors	1 pair
Disposable gloves[1]	1 pair
Travel First Aid kits contents	
Guidance card & contents list	1
Individually wrapped assorted sterile plasters[2]	6
Large sterile individually wrapped, dressings - approx. 18 x 18 cm	1
Triangular bandage (1 sterile)	2
Individually wrapped moist wipes	2
Safety pins	2
Rustproof blunt ended scissors	1 pair
Disposable gloves[1]	1 pair
Minibus First Aid kits contents	
Legal minimum contents - the vehicle must not be used unless all components are present	
Guidance card & contents list	1
Antiseptic wipes - foil packed	10
Conforming bandage	1
Triangular bandages (at least 1 sterile)	2
Individually wrapped assorted sterile plasters[2]	24
Large sterile individually wrapped dressings (not less than 15-20 cm)	3
Sterile eye pads (e.g., No 16)	2
Safety pins (assorted)	12
Rustproof blunt ended scissors	1 pair
Disposable gloves[1]	1 pair

Note: After assessment, according to the specific needs of the department or area, additional items or a variation of an item may be required. These may be kept in the first aid box if space is available, or in another suitably marked container.

1. Disposable gloves should be vinyl, nitrile, or powder free, low protein latex and UKCA or CE marked.

2. Blue plasters for Hospitality & Catering and Hair & Beauty. Waterproof plasters for laboratory workers, gardeners, agricultural workers etc.

3. Burn Gel dressings are required primarily for Hospitality & Catering where superficial burns may be likely, however, they may include other activities where burns are a hazard/risk.

4. Haemostatic dressings and tourniquets may be required for activities that may result in catastrophic bleeding, i.e., result of chainsaw injuries.

5. Silver foil blankets for outdoor activities and outlying areas, e.g., farms.

6. Blunt ended stainless steel scissors (minimum length 12.7 cm) may also be useful to cut clothing away.

7. Individually wrapped moist wipes may be justified where water is not available.

8. Resuscitation face shields - for use by trained personnel, i.e., first aid.

9. Sterile water - for eye irrigation where no running water is available.

10. Ice packs may be required where there is a risk of muscle or ligament injury or swelling. In most cases these would be held centrally i.e., Reception or by the on-duty ‘rota’ first aiders.

British Standard BS 8599 provides further information on the contents of workplace first-aid kits. Whether using a first-aid kit complying with BS 8599 or an alternative kit, the contents should reflect the outcome of the first aid needs assessment.

College Defibrillator Location List

Guildford College

- Reception (Main Building, Rm G42)
- Learning Environment (Tower 1st Floor, Rm 101)
- Electrical Workshop (Tower 4th Floor, Rm 404)
- Hair & Beauty Salon (Jubilee Building, Ground Floor)
- Carpentry Workshop (Main Building, Lower Ground Floor)

Farnham College

- Reception (Surrey Court)

Merrist Wood College

- Reception, Sports Hall
- Reception, Woodlands Centre
- Farm
- Entrance to Animal Management Centre
- Accommodation Office (Merrist Wood Annex)
- First Aid Room, Equine

Bracknell & Wokingham College

- Reception (Ground Floor)
- Agile Working Space (4th Floor)

Reading College

- Reception (Ground Floor)
- In corridor opposite Recharge Cafe (near C50, 3rd Floor)
- Motor Vehicle Office

City of Oxford College

- Reception (Dorn building)
- Learning Environment (Jericho building)

Blackbird Leyes Technology Campus

- Reception

Banbury & Bicester College

- Reception (Main campus)
- Creative Arts Centre Staff Room (Building F, Broughton Road Campus)

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Section 7. Legionella Management and Control

7.0. Procedure Statement

The Legionella Management and Control Procedure for Activate Learning has been developed to ensure that water systems are installed, operated and maintained in a manner that both reduces the risk of a Legionella outbreak and ensures appropriate water quality for College employees, students, contractors and visitors.

Activate Learning is committed to achieving this intent by the most reasonably practicable means possible and in a way that ensures a coordinated approach between all departments within the College. Activate Learning recognises the principles within the Control of Substances Hazardous to Health (COSHH) Regulations regarding the need to eliminate hazards in preference to managing the risk.

This procedure has thus been prepared in accordance with the requirements of health and safety legislation and the College's Health and Safety Policy. This procedural document should be read in conjunction with the Legionella Management Plans, Scheme of Works and Legionella Risk Assessments applicable to each campus.

7.1. Scope

The College will ensure compliance is achieved with the requirements of all relevant legislation and in accordance with the HSE Approved Code of Practice L8 (Fourth Edition) 2013, which applies to the design, operation and maintenance of all water systems (whether owned or managed by the College or brought onto College sites by facility users, tenants, contractors or other visitors), where there is the potential for Legionella to grow and become dispersed as a respirable aerosol.

The sources include, but are not limited to, the following domestic or non- domestic systems:

- Evaporative condensers
- Calorifiers, hot water cylinders and down services, local point-of-use water heaters
- Fixed and mobile air-conditioning, dehumidification or ventilation systems and humidifiers
- Water storage tanks and down services
- Domestic showers and spray taps and emergency eye wash stations
- Water features or fountains, including drinking fountains
- Sprinkler systems, hose reels (including fire-fighting equipment)
- Machine tool coolant systems e.g. lathes
- Rainwater harvesting systems

The College will ensure that all parties involved in the management of the systems identified, are given all necessary information, instruction, training and facilities for the management of these systems.

7.2. Definitions

- **Legionella Bacteria**: Legionella are a range of bacteria widespread in water, which can, if they proliferate, cause Legionnaires' disease or Legionellosis - potentially fatal forms of pneumonia. In the UK there are between 200 and 300 cases per year of which approximately thirty are fatal.

  The bacteria multiply where temperatures are between 20-45°C and nutrients are available. The bacteria are dormant below 20°C and do not survive above 60°C. The presence of sediment, sludge, scale and other material within the water system, together with biofilms, provide favourable conditions in which the legionella bacteria may grow. A biofilm is a thin layer of micro-organisms that may form as slime on the surfaces in contact with water.

- **Legionellosis**: Is a collective term to describe the group of diseases caused by the Legionella bacteria.

- **Legionnaires' Disease**: A form of pneumonia caused by Legionella bacterium and is a statutorily reportable disease under RIDDOR
- **Risk Assessment:** Identifying and assessing the risk of Legionellosis from work activities and water sources on premises and determining necessary precautionary measures and controls that may be required.
- **Written Scheme:** Is for controlling the risk from exposure by specifying measures required to ensure the controls remain effective, properly implemented and managed.
- **Duty Holder:** The employer and person in control of the premises with statutory responsibility to ensure water systems are safe and suitable precautions are in place to prevent or control the risk of exposure to legionella.
- **Responsible Person:** The person formally appointed, in accordance with the HSE Approved Code of Practice, to assume managerial responsibility for implementation of the Legionella precautions and the responsibilities detailed in this procedure. The ACOP also gives advice on the management, selection, training and competence of personnel, and sets out the responsibilities of manufacturers, importers, suppliers and installers of products and services.
- **Competent Person:** This refers to the specialist advice, guidance and services provided by contractors.

7.3. Responsibilities

7.3.1. Chief Executive

The CEO as the legal Duty Holder, has overall responsibility for all aspects of Legionella control within the College. The day-to-day operational responsibilities have been delegated to the nominated posts outlined below:

7.3.2. Director of Group Facilities Operations (Responsible Person) will take day-to-day responsibility for controlling Legionella bacteria and Legionnaires' disease at the College. They have delegated authority by the CEO, and they have the competence and knowledge of the installations under their control to ensure that all operational procedures are carried out safely, and in a timely and effective manner to protect the health and safety of people at the College. The **Responsible Person** is responsible for:

Appointing a **Deputy Responsible Person** and providing delegate authority to ensure compliance. The Responsible Person will ensure a sufficient budget is available and the following requirements are met to ensure full compliance is achieved:

- Property and Environment Managers (Deputy Responsible Person) and their deputies are suitably trained and experienced and are appointed, in writing and provided with the resources to manage Legionella hazards within their defined areas of responsibility.
- All water systems that are the responsibility of Activate Learning are managed according to the guidance set out in the HSE Approved Code of Practice L8 (Fourth Edition) 2013
- P&E staff are suitably trained and experienced to manage Legionella hazards within defined areas of responsibility.
- College contractors are managed by a 'P&E host' who will ensure that the necessary requirements for the safe management of water systems are fully identified and incorporated into specifications, method statements/risk assessments for the design or works carried out for the College as well as incorporated into the College records.
- All employees working on water systems within the College comply with the written method statements and risk assessments.
- Water systems are tested for Legionella bacteria on completion of work, depending on the nature of work carried out.

- The design of new water systems or equipment containing water considers the hazards arising from Legionella in order that the risks are eliminated or minimised.

7.3.3. Property and Environment (P&E) Managers (Deputy Responsible Person) will:

Provide line management and oversight to their P&E Team in fulfilling their role with regards to water hygiene management as follows:

- In the event of any increased risk such as high bacterial or other pathogen counts or Legionella outbreak, the following personnel are to be notified immediately, and preventative measures implemented:
    - Group Director of Faculty and College for the campus affected
    - Director of Group Facilities Operations
    - Group Health and Safety Manager

  Further information can be found in 'Legionnaires' disease Part 2: The control of legionella bacteria in hot and cold-water systems'

- Maintaining the day-to-day operation of the Legionella management programme and carrying out remedial work to reduce risks raised.
- Providing oversight of the operations of the external water hygiene contractor to ensure compliance. They will ensure all staff have the appropriate training to ensure competency to work on water systems.
- Ensuring effective arrangements are implemented for the assessment and management of the Legionella risks within the College.
- Maintaining a documented register of all water systems, including cooling towers and evaporative condensers (if applicable) is established, maintained and regularly reviewed.
- Ensuring documented risk assessments are in place for all systems detailed in the water systems register.
- Ensuring Legionella risk assessments are reviewed at least every five years. Where it is known that significant changes and/or modifications to water systems occur or issues arising following the regular monitoring programme a consideration should be given to whether the risk assessment is renewed.
- Maintaining a documented "Written Schemes", based on risk assessments describe the correct operation of the water system and persons responsible for carrying out actions.
- Ensuring all records relating to the management of Legionella are retained in accordance with the P&E departments Record Retention Schedule, including but not limited to test results, inspection records, maintenance records, staff and contractor training records etc.
- Ensuring that where applicable, all new or current cooling towers, evaporative condensers and specific types of adiabatic coolers are registered with the local environmental health authority, in writing, detailing the type and location of the facility. A copy of this notification should be retained. Where cooling towers or evaporative condensers are made redundant, decommissioned or demolished, inform the local environmental health authority, in writing, retaining a copy of the notification.
- Actively investigate any reported suspected contamination by Legionella Bacteria and put in place appropriate measures to control the bacteria.

7.3.4. Property and Environment (P&E) Deputy Managers and Team Leaders are responsible for:

- Deputising for the P&E Manager in their absence.
- Ensuring water systems comply with legislation,

- Ensuring persons are competent and are adequately trained for water and other systems work,

- Ensuring water system planned preventative maintenance is carried out in a timely and effective manner and to report any resource issues.

- Ensure all water systems or other legionella risks are acted on in a timely manner and reported if significant to the P&E Manager or in their absence, to the Director of Group Facilities Operations.

7.3.5. Project Managers (may be appointed separately or duties delegated to P&E Managers) are responsible for ensuring that:

- Risk assessments for water services work consider whole premises impact and ensure satisfactory implementation and commissioning. In addition, prior to handover of the system ensuring the risk assessment is reviewed as appropriate.

- Ensuring consultants and contractors engaged to carry out water systems work are competent to do the work.

- Ensuring appropriate communication and consultation is carried out and all records are filed centrally along with risk assessments and flushing records prior to project completion.

7.3.6. Group Directors of Faculty and College are responsible for:

- Ensuring appropriate arrangements are in place for the management of water hygiene associated with specific, local activities (water use in Hair & Beauty, in catering activities, and animal management and horticulture activities etc)

- Where appropriate, the arrangements must also include the flushing of infrequently used outlets utilised by the above local faculty activities which are not the responsibility of Property and Environment or its contractors to flush.

7.3.7. Group Head of Administration and Compliance is responsible for:

- Ensuring that the Group Health and Safety Manager develops a programme of assurance to monitor compliance with this procedure and then present a report on the findings to the campus Health and Safety Committees and the College Compliance and Risk Committee.

- Ensuring arrangements are in place to notify the Health and Safety Executive, under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) and relevant internal stakeholders.

7.3.8. Competent Person (Internal and External Contractors):

- **Internal**: To ensure the following are carried out in line with the Legionella Management Plan and appropriate campus Risk Assessments.
    - Planned preventative maintenance
    - Reporting identified problems
    - Minor Remedial Work
- **External**
    - Liaising with the appropriate P&E Manager to determine the need for statutory legionella control within the business and providing the advice required.
    - Performing statutory legionella testing and sampling e.g., outlet temperatures, CWST's sampling and cleans.
    - The provision of support and guidance with respect to identified roles and responsibilities in relation to statutory legionella.
    - To provide risk assessments and regular reports with any actions to be taken following campus visits.

7.4. Training and Competency

Suitable and sufficient information, instruction and training will be provided to employees, students, contractors and visitors to enable them to safely carry out their duties regarding water systems within the College.

Managers and supervisors must liaise with their regional Health and Safety Officer to determine and arrange appropriate information, instruction and training for identified personnel.

Refresher training will be provided through all staff mandatory training (ALO online Health & Safety module 'Risks and Responsibilities') every five years and for specialist staff i.e. P&E, every three years or after:

- An outbreak of Legionnaires disease
- A significant change in legislation

7.5. Procedure

7.5.1. Risk Assessment

The Deputy Responsible Person will arrange for suitable and sufficient risk assessments of water hygiene to be undertaken on all College buildings, unless this responsibility has been passed to a 3rd party such as a tenant.

In addition, the Deputy Responsible Person will schedule, design, order and monitor all controls necessary to reasonably and practicably manage Legionella bacteria within their College campus and have appointed a competent contractor to carry out this function.

Relevant information will be held on an appropriate system accessible by relevant stakeholders including appropriate staff within P&E and the H&S team.

Risk assessments will be reviewed at least every five years or sooner if there is a significant change to the water systems or considered appropriate by the Responsible Person, Deputy Responsible Person or Health and Safety Manager. **Appendix 1** provides an overview of the College water systems and responsibility for the management of these.

7.5.2. Management of Hot and Cold-Water Systems

All hot and cold-water systems can potentially lead to Legionella proliferation if water is allowed to stagnate at ambient temperatures (between 20 – 45ºC). The risk of the disease occurs when contaminated water is in aerosol form. This can be a particular concern associated with infrequently used outlets.

Infrequently used outlets will be flushed on a weekly basis or more frequently should the monitoring or risk assessment indicate the need. P&E will coordinate the flushing programme.

Those undertaking flushing must maintain accurate records of the flushing being undertaken.

7.5.3. Microbiological Monitoring: Microbiological monitoring of domestic hot and cold water supplied from the mains is not usually required, unless the risk assessment or monitoring indicates there is a need. The risk assessment should specifically consider systems supplied from sources other than the mains, such as private water supplies and sampling and analysis may be appropriate.

7.5.4. Avoidance of Stagnation: Dead legs, (i.e. water services leading from the main circulation water system to taps or appliances which are used only intermittently), and other parts of systems which may provide a reservoir for infection should be eliminated so far as is reasonably practicable.

Dissemination of organisms should be reduced by careful design of equipment; use of drift eliminators to stop excessive circulation of potentially contaminated air or enclosure etc.

7.5.5. System Maintenance: Water systems should be disinfected by an effective means before being taken into service and after shutdowns of five or more days. Plant must be regularly and effectively inspected and maintained (e.g. by regular visits from a water treatment specialist). Plant should be disinfected periodically (normally twice yearly) by chlorination or temporary raising the water

temperatures. Biocides may be used to control microbial growth. Maintenance personnel must wear appropriate protective clothing.

7.5.6. Maintenance Procedures: Contractors or Staff involved in plant maintenance or who might otherwise be at significant risk will require safe systems of work. The following should be their priorities when making a risk assessment:

1. Design procedures to minimise exposure (e.g. by prior disinfections).
2. Avoid creation of water sprays (e.g. by high pressure jetting).
3. Avoid exposure of others in the building to water sprays (e.g. by carrying out maintenance out of normal working hours).
4. Wear respiratory protection of a suitable and HSE approved type (normally high efficiency, positive pressure respirators with either a full-face piece or hood and blouse).
5. Take necessary precautions when entering confined spaces (permits to work, etc).
6. Handle biocides and water treatment chemicals with care.
7. Report relevant symptoms of illness to their manager immediately

7.5.7. Communication Pathway: a separate document detailing an appropriate communication pathway is held with the Facilities Helpdesk and shared with relevant stakeholders including external contractors. A diagram, summarising roles and responsibilities for communication purposes can be found in **Appendix 2**.

7.5.8. Management of Void Periods within Residencial Areas

Students have access to their residential accommodation throughout the full period of their licence. However, the College recognises there are periods when students are more likely to vacate the hostels for a period of time. Typically, these are the Christmas, Easter and Summer periods. During these times P&E will arrange for additional weekly flushing of the water systems.

Where the students have notified the Accommodation Department that they will have vacated their rooms at any time, this accommodation will be added to the 'Void Rooms' list, shared with P&E for additional flushing of the water outlets.

7.6. Course of Action in the Event of an Outbreak:

A suspected Legionella outbreak is likely to be identified by the health authority who will communicate with all relevant local premises, in order to attempt to identify the source of the bacteria. Where a College premise is approached in this way, the following is required:

- Report the contact to the P&E Manager.
- Cooperate fully with the investigating authorities, providing them with access to sampling points etc. in order that they can take water samples
- Provide access to all relevant records
- Shut down systems capable of generating aerosols, which have been implicated in an outbreak
- Undertake emergency disinfection of systems suspected of harbouring Legionella bacteria. This should only be carried out as directed by the Local Environmental Health Department
- Where relevant, identify and investigate the health status of employees, students or other people who could have been affected.

7.7. Review

This procedure will be reviewed every three years or before if it is evident that changes are required.

7.8. References and Links

Legionnaires' disease: guidance, data and analysis

Legionnaires' disease: The control of legionella bacteria in water systems. Approved Code of Practice L8 (Fourth edition) HSE Books 2013

7.9. Appendices List

Appendix 1 - Management of Equipment Identified as Having a Legionella hazard

Appendix 2 - Managerial Responsibility Arrangements for the Control of Legionella Bacteria

Management of Equipment Identified as Having a Legionella hazard

The following information is correct as of the date of approval. Further details of Schemes of Work and control systems can be found within the Water Hygiene (Legionella) Risk Assessments for each building and campus held by the relevant P&E Manager.

System/Service	Task	Frequency	Managed by	Recorded on
Hot and Cold-Water Services				
All Water Services	Flushing of little used outlets within residencies (as identified by residential team)	Weekly	• P&E	Expansive CAFM system
	Flushing of little used outlets within Science departments	Weekly	• Science Technicians	
	Voided flushing within hostels (Summer, Christmas and Easter)	Weekly	• Contractor	Contractor portal
Hot Water Services	Check flow and return temperatures on calorifiers/direct storage water heaters	Monthly	• P&E Team • Contractor	Expansive CAFM system or hard copy held by P&E Manager Contractor portal
	Visual check on internal surfaces of calorifiers/Domestic Solar Water Heaters (SWHs) for scale and sludge.	Annually	• P&E team • Contractor	Expansive CAFM system Contractor portal
	Inspect the condition and monitor temperatures of water heater header tanks.	Annually	• P&E team • Contractor	Expansive CAFM system Contractor portal
	Check water temperature up to one minute to see if it has reached 50°C in the sentinel taps	Monthly	• P&E team • Contractor	Expansive CAFM system Contractor portal
	Check representative taps for temperature as above on a rotational basis	Annually	• P&E team • Contractor	Expansive CAFM system Contractor portal

Note: Contractor refers to PH Water Services for Surrey colleges, SMS Environmental for Berkshire colleges and Oxfordshire colleges less Banbury College which uses Environmental Scientific Solutions.

Currently, records are a combination of hard copies held by P&E Managers, recorded on Expansive or held on contractor portals. Work in progress to have all documentation on Expansive.

System/Service	Task	Frequency	Managed by	Recorded on
Cold Water Services	Check tank water temperature remote from ball valve and mains temperature at ball valve. Note maximum temperatures recorded by fixed max/min thermometers where fitted.	Monthly	● P&E ● Contractor	Expansive CAFM system
	Check that temperature is below 20°C after running the water for up to two minutes in the sentinel taps.	At least monthly		Expansive CAFM system
	Visually inspect cold water storage tanks and carry out remedial work where necessary.	Annually		Contractor report
Shower Heads	Dismantle, clean and descale shower heads and hoses	Quarterly	Contractor	Expansive CAFM system Contractor portal
Little Used Outlets, including taps in LEVs	Flush through and purge to drain, or purge to drain immediately before use, without release of aerosols.	At least monthly	● Communal areas – P&E team ● Within laboratory -Science Technicians	TBC
				TBC

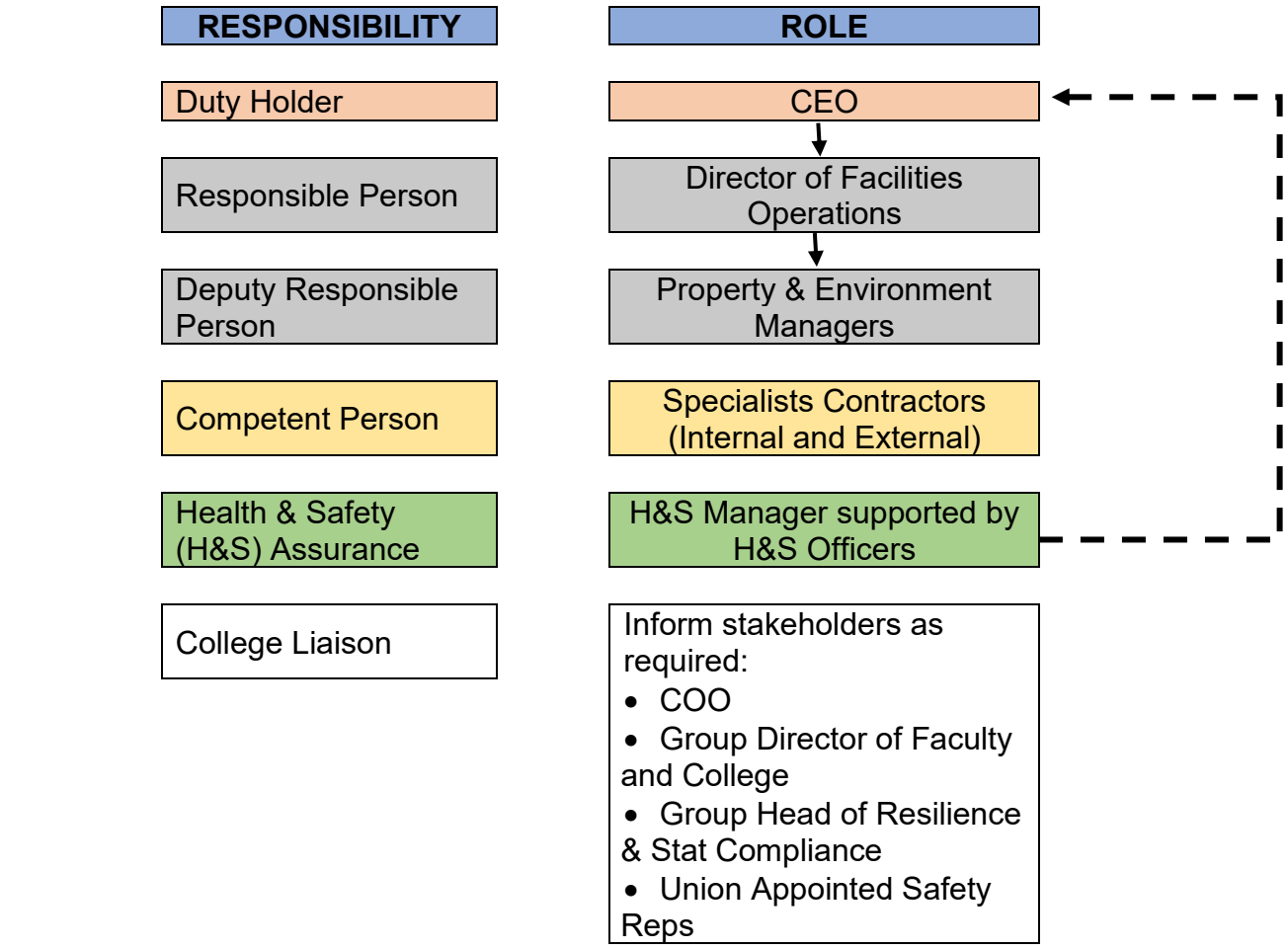
Other Legionella Risk Systems

The College does not have any cooling towers or operational fire hose reels. The following are examples of systems that should be included, together with suggested controls:

- Sprinklers and hose reel systems: Consider regular draining and replenishing of the water, particularly if connected to the mains water system. When testing, ensure aerosol generation is minimised.
- Water Softeners: Clean and disinfect resin and brine tanks as directed by the manufacturer.
- Lathe and machine tool coolant systems: Clean and disinfect storage and distribution of coolant systems as directed by the manufacturer.

System/Service	Task	Frequency	Managed by	Recorded on
Spray Humidifiers	Clean and disinfect spray humidifiers and make-up tanks, including all wetted surfaces, descaling as necessary	Monthly	Contractor	PPM report
Misting systems	Clean and disinfect distribution pipework, spray heads and make-up tanks including all wetted surfaces, descaling as necessary	Quarterly	Contractor	Contractor report
Spray outlets	Clean and disinfection of spray outlets (Taps)	Quarterly		
TMV	Maintenance and servicing	Annually		

Managerial Responsibility Arrangements for the Control of Legionella Bacteria



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Section 8. Dangerous Substances and Explosive Atmospheres (DSEAR)

8.0. Procedure Statement

The purpose of this document is to ensure that materials or processes that are covered by the Dangerous Substances and Explosive Atmosphere regulations 2002 are effectively managed to a point where the associated risks are effectively controlled.

This section is to be used in conjunction with Section 12 Management of Substances Hazardous to Health section of this manual. DSEAR substances by their nature are hazardous and so the general requirements in section 12 of this manual must be followed.

8.1. Introduction

What is DSEAR?

DSEAR stands for the Dangerous Substances and Explosive Atmospheres Regulations 2002.

Dangerous substances can put peoples' safety at risk from fire, explosion and corrosion of metal. DSEAR puts duties on the employers to protect people from these risks including members of the public who may be put at risk by work activity.

8.2. What are dangerous substances?

Dangerous substances are any substances used or present at work that could, if not properly controlled, cause harm to people as a result of a fire or explosion or corrosion of metal. They can be found in nearly all workplaces and include solvents, paints, varnishes, flammable gases, dusts, pressurised gases and substances corrosive to metal.

8.3. What does DSEAR require?

Employers must:

- find out what dangerous substances are in their workplace and what the risks are
- put control measures in place to either remove those risks or, where this is not possible, control them
- put controls in place to reduce the effects of any incidents involving dangerous substances
- prepare plans and procedures to deal with accidents, incidents and emergencies involving dangerous substances
- make sure employees are properly informed about and trained to control or deal with the risks from the dangerous substances
- identify and classify areas of the workplace where explosive atmospheres may occur and avoid ignition source in those areas

8.4. Scope

This section provides a framework for Faculty and Group Service departments to fulfil their statutory duties and ensure the health and safety of staff and students working in areas where DSEAR may apply.

The procedure applies to:

- All staff, students and personnel (e.g. contractors and visitors) at workplaces under the control of Activate Learning.
- Hazardous substances as outlined in the Dangerous Substances and Explosives Atmospheres Regulations (DSEAR) 2002.

- Substances that due to their chemical properties or the way in which they are used or present in the workplace pose a risk of injury, fire or explosion.

8.5. Key legislative requirements

8.5.1. Dangerous Substances and Explosive Atmosphere Regulations 2002

The key areas covered in DSEAR are listed in the table below:

Regulation	Duty	Comment
5	To assess all potential risks to employees and others whose safety may be affected by the use of dangerous substances at the workplace	This is met by the completion of a DSEAR risk assessment
6	Eliminate or reduce risk to people safety from the presence of dangerous substances	See above
7	Requirement of competent identification of hazardous and non-hazardous zones before new work starts	The classification of zones must be completed by a competent person.
7(3) schedule 4	Warning signs to be installed where explosive atmospheres may occur	Refer to DSEAR guidance document HSE ACOP L138
8	Arrangements to deal with accidents, incidents and emergencies	Suitable arrangements to deal with accidents and incidents should accompany the risk assessment and be in place before work begins
9	Information instruction and training	Information must be provided which explains the findings of the risk assessment and informs employees of the precautions that they must take to prevent harm to themselves or others. Information must be up to date and delivered in a manner that is understandable to the target audience

8.5.2. Other Key Legislation

The Regulatory Reform (Fire Safety) Order 2005

8.6. Responsibilities

8.6.1. Group Directors shall:

- Ensure that all areas where DSEAR may apply have been correctly identified
- Ensure that risk assessments are in place for all DSEAR areas and activities
- Ensure that any required risk reducing measures, emergency arrangements etc, are implemented
- Ensure that adequate time and resources are available to implement the policy

8.6.2. Fire Safety Manager (Group H&S Manager) shall:

- Provide advice to managers at their request concerning fire risks arising from departmental processes and use of buildings.
- Provide advice to managers at their request concerning suitable emergency arrangements.

- Providing fire training as appropriate
- Provide advice to schools or services at their request concerning areas or processes where DSEAR may apply
- Provide advice to schools or services at their request concerning risk assessment
- Liaise with regulators such as the HSE, Environment Agency and Fire and Rescue Service

8.6.3. Health and Safety Officers shall:

- Monitor compliance with this policy
- Review the DSEAR policy
- Provide information, advice and training

8.6.4. Faculty Directors and Property & Environment Managers shall:

- Monitor the effectiveness of any control measures and make recommendations to the appropriate Group Director as necessary.
- Ensure that all areas or processes where DSEAR applies within the department are effectively managed and compliant with this procedure.
- A DSEAR inventory is produced and maintained.
- Audit DESAR assessment documentation to verify that suitable and sufficient assessments are in place and up to date.
- Ensure that members of staff and students are trained in the safe use of any equipment needed to control the risk from any DSEAR material.
- Verify that plant, equipment and engineering controls are maintained
- Report accidents or near misses involving DSEAR substances to the Health & Safety Team.

8.6.5. Line Managers

Staff who are responsible for managing the activities carried out by students, other staff or volunteers are considered DSEAR supervisors. As such they have a duty to ensure the health and safety of the students/staff they supervise and have responsibility where their students/staff handle Hazardous chemicals.

Managers are responsible for the health and safety of the staff/students they manage and others who may be affected by their work.

Managers will ensure:

- Personnel they manage/supervise are competent to work with substances covered by DSEAR and have been provided with sufficient information and training on the risk posed by the substances they use and the control measures in place.
- Equipment is used correctly and maintained in an efficient state and good working order.
- Risk assessments are reviewed and updated regularly, when significant changes occur or following an incident.

8.6.6. Employees and students

Employees and students shall:

- Attend training as requested by their manager.
- Co-operate with the College to implement any control measures identified in the DSEAR risk assessments

- Report any defects or deficiencies in these measures (e.g. problems with PPE, or concerns regarding the effectiveness of LEV's) to their manager.

8.7. Risk Assessment

All areas where flammable liquids, gases and dusts, or any substance with any of the following hazard phrases H220, H222, H224, H225 and H250 are used, a DSEAR risk assessment must be completed. The Fire Safety Manager (Group H&S Manager) will conduct a DSEAR risk assessment.

8.8. Guidance documents

The DSEAR guidance document 'Dangerous Substances and Explosive Atmospheres Regulations 2002. Approved Code of Practice and guidance L138' outlines how to identify DSEAR areas, how DSEAR areas should be managed and how the risks can be minimised.

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Section 9. Working at Height

9.0. Procedure Statement

Working at height remains one of the biggest causes of fatalities and major injuries. Common cases include falls from ladders and through fragile surfaces. 'Work at height' means work in any place where, if there were no precautions in place, a person could fall a distance liable to cause personal injury (for example a fall through a fragile roof). The purpose of this Section is to provide direction and guidance so that work at height is avoided if not necessary or if unavoidable is undertaken in a safe manner and in accordance with the Work at Height Regulations 2005 (as amended).

9.1. Introduction.

Working at Height - General Principles

1. Avoid work at height, where this is not possible.

2. Ensure that work is carefully planned, appropriately supervised, and carried out in as safe a way as is reasonably practicable.

3. Provide that where working at height cannot be avoided, a suitable and sufficient risk assessment is undertaken by a competent person who will identify the significant risks associated with the activity.

4. Ensure that adequate control measures are implemented to reduce the risk of a fall injury, and these are communicated to relevant individuals.

5. Monitor work as identified from the risk assessment.

6. Provide adequate training for individuals who may work at height.

7. Ensure the equipment provided is suitable, maintained and inspected, prior to use.

8. Ensure individuals can get safely to and from where they work at height.

9.2. Definitions

- **Working at Height.** Work at Height means any place above or below ground level where a person could fall a distance liable to cause harm. For College staff this could range from using a kick stool (elephants' foot) to a tower scaffold or MEWP (Mobile Elevated Working Platform) or a fall into an opening in a floor or a hole in the ground.

- **Competent Person.** This is someone who has sufficient knowledge, experience, and adequate training in order to prevent the risk of injury or harm.

- **Ladder**. Is it a ladder or stepladder? These must only be used for short duration work e.g., less than 30 minutes.

- **Fragile Surfaces.** A fragile surface is "any surface liable to fall if any reasonably foreseeable load is applied to it" and this will include surfaces such as sky lights and other horizontal or angled glazing in roofs, asbestos cement sheets and other non-load bearing materials, light weight ceilings constructed over internal offices.

- **Risk Assessment.** This involves identifying the hazards present in any working environment or arising out of work activities and evaluating the extent of the risks involved, considering any existing precautions and their effectiveness.

- **Method Statement.** This is a key safety document that takes the information arising from significant risks from the risk assessment and combines them with a practical safe working method.

- **Permit to Work – (PTW).** This is a formal document issued for all high-risk activities which specifies the work to be undertaken and the precautions to be taken. A Permit to Work will be issued for a defined time period; the person receiving the PTW must sign to accept all

necessary control measures. A Permit to Work will be issued in respect of any working at height – (legislation no longer specifies a minimum height, “the 2m rule”)

- **Collective and Personal Control Measures.** Collective control measures are a means of protecting a group of people e.g., a safe working platform. Personal control measures involve an individual using a personal fall arrest harness with a lanyard.

9.3. Roles and Responsibilities

9.3.1. Group Directors / Faculty Directors / Heads of Department

Are responsible for ensuring that safety is managed within individual areas and are conversant with the contents of this Section, associated College Safety Guides, and procedures to be adopted.

9.3.2. Group Health and Safety Manager

- For ensuring that this Section and associated College Safety Guides are brought to the attention of the Curriculum Managers and Faculty Directors, and through monitoring, is satisfied that this Section is being complied with.
- Responsible for investigating any accidents/incidents arising out of work at height and ensuring if corrective action is required, this is implemented.
- Responsible for liaising with the enforcing authority (HSE or Local Authority) in relation to any reportable accidents involving work at height.

9.3.3. Property and Environment Manager

- For ensuring that staff within their remit avoid work at height activities wherever possible and where it is not possible to avoid work at height, suitable and sufficient risk assessments are in place for the work to be conducted.
- For contracted services, receive a copy of the Risk Assessment/Method Statement prior to work commencing.

9.3.4. Curriculum Managers / Group Service Managers

Are responsible for ensuring that:

- All work is carefully planned and organised.
- The risks from working at height are assessed and documented.
- Appropriate work equipment is selected, regularly inspected, and maintained before use.
- All work at height (external) takes account of inclement weather.
- Those involved in working at height are trained and competent.
- Records of inspection, tests and maintenance logs for any ladder are kept up to date.
- The risks from falling objects are adequately controlled.

9.3.5. Contractors as Employers

Contractors, as employers, have a duty to ensure, as far as is reasonably practicable regarding their employees and their College hosts, that they:

- Provide a safe system of work
- Provide information, instruction, training, and supervision
- Provide a safe working environment

9.3.6. Managing Contractors.

Staff who engage the services of a contractor are responsible for ensuring that their contractors have received an appropriate College H&S Induction and have received the Contractor Information Leaflet

and that this has been recorded. Section 25 of this manual; General Safety of Visiting Workers / Contractors, Sub-Contractors and Outside Workers provides further details.

9.3.7. College Staff

Staff are responsible for ensuring that they comply with this section and are also responsible for:

- Reporting any incidents, breaches of and non-conformance with health and safety to their Line Manager and their regional Health and Safety Officer to allow them to investigate further.
- Inspecting equipment is supplied to conduct Working at Height operations to ensure that it is in a safe condition and appropriate for the task.
- Using the equipment supplied (including safety devices) in accordance with instruction and training.
- Report any defective equipment to their Line Manager and withdraw unserviceable equipment from use.

9.3.8. Students

Tutors are responsible for bringing this section to the attention of students who may be required to conduct activities at height. Students are responsible for ensuring that they comply with this section and are also responsible for: -

- Reporting any incidents, breaches of and non-conformance with health and safety to their Tutor.
- Abiding by Local Rules that are displayed in all Workshops and work areas where Working at Height may be required.
- Reporting any defective equipment to their Tutor.
- Using equipment supplied (including safety devices) in accordance with instruction and training.
- Not to misuse or tamper with any equipment that has been provided in the interests of health and safety.

9.4. Risk Assessments

Are used as the primary means to identify likely hazards and to identify the control measures required to minimise the distance and consequences of a fall should one occur, and the work equipment required e.g., kick stool, step ladder, fall protection equipment.

A suitable and sufficient risk assessment must be undertaken by a competent person, this is someone who has the knowledge and experience in the activity to be undertaken and who can foresee likely hazards that may arise from the proposed activity.

Each faculty area should have work at height risk assessments for the routine activities that are undertaken each academic year. These must be reviewed annually OR if reason to suspect that the risk assessment is no longer valid. Risk Assessments must be shared with appropriate staff/students, and these must be readily available e.g., hard copies in workshops and OR on the College intranet Safety Management System. (MyCompliance).

For hazards not identified or where a new activity or process is being introduced, a new risk assessment must be undertaken prior to the work being undertaken. The following steps can be used to conduct a risk assessment for work at height:

- Identify the hazards posed by any work at height activities, for example, consider whether there are further dangers or people or objects falling from height.
- Identify the duration of the work.
- Identify who might be harmed and how, e.g., staff/students/visitors etc.

- Consider installing exclusion zones as part of a control measure, e.g., barriers to protect people from working at height and those passing below.
- Mobile Elevated Work Platforms (MEWPs) are a safe way of reaching guttering, fascia's etc but the assessment must identify any overhead cables and crushing/trapping injuries or being struck by the boom.
- Consideration must be given to the stability of the structure and the work equipment to be used close to or against it.
- Record the significant findings of the assessment using the College risk assessment template.
- Review and monitor the control measures as identified.

9.5. Planning and Controlling Work at Height

All work at height activities must be adequately planned and controlled to ensure that the correct equipment is used for the purpose for which it is designed. Staff must not take short cuts in order to complete a job quickly or as a last-minute task. When planning a work at height activity, the following are to be considered:

- Complexity, duration, and frequency of the task.
- Number of individuals involved competence and levels of supervision.
- Safe access to and from the work area.
- Protecting others e.g., risk of falling objects/materials.
- Rescue plans should a fall occur
- Access equipment to be used, e.g., ladders, stepladders, kick stools, tower scaffolds, scissor lifts, MEWP.
- Familiarisation with manufacturer's instructions and load bearing capacities.
- Possible falls above, at (into excavations etc), or below ground level, where an individual could be injured if they fell.
- Possible falls of objects, falling from height or through fragile roofs.
- Overreaching/balancing when working at height and overloading.
- Training requirements and environmental conditions.
- Adverse weather

9.6. Fragile Surfaces

No work should be undertaken on or near fragile surfaces unless a suitable and sufficient risk assessment has been undertaken, and this has been reviewed by the regional Health and Safety Officer and Property and Environment Manager (if appropriate).

Works required for maintenance/cleaning on or near fragile surfaces will be undertaken by a suitably competent contractor appointed through the Property and Environment Department.

9.7. Permit to Work (PTW)

This specifies the high-risk nature of the work to be done and the precautions to be taken. Before access is granted to any roof, an authorised person (Property and Environment Manager or deputy (or similar) must issue a permit to access/work along with a safe system of work, e.g., method statement and risk assessment.

Roof access to all College owned buildings falls within the remit of the Property and Environment Manager.

Where it cannot be satisfied that adequate precautions are in place, the Property and Environment Manager (or deputy (or similar) will not issue a permit to work, and the work will not be permitted to take place.

9.8. Selecting Access Equipment

9.8.1. Ladders (including Stepladders). Ladders are only to be used as working platforms when it is NOT reasonably practicable to use any other safer method or equipment. There are other suitable working platforms available e.g., podium steps.

Work from ladders must be restricted to low risk work at relatively low heights where the task is of a short duration, e.g., 30 minutes or less and where 3 points of contact can be maintained.

Any ladder/stepladder used must be:

- In good condition.
- Set on a secure base.
- Long/high enough to carry out the task without having to use the top steps where there is no suitable hand hold.
- Ladders that are being used as a means of access must be secured at the top, for example by tying to a fixed structure or alternatively by using a ladder stabiliser or anti-slip device at ground level.
- Someone to “foot” the base by standing at the bottom (when it is not practicable to secure the ladder any other way).
- To use the appropriate class of ladder e.g. Class 1 Industrial.

9.8.2. Mobile Tower Scaffolds / Mobile Elevating Work Platforms (MEWP) / Cherry Pickers. It is essential that only competent staff have access to this type of equipment.

All equipment must be secured when not in use, ideally the boom should be raised, and the keys removed from the control unit.

When using this type of equipment, the following considerations must be considered when planning work at height activity:

- Environmental conditions.
- Floor loading/ground conditions and stability.
- Space constraints.
- Traffic routes including pedestrian/traffic segregation.
- Personal Protective Equipment and harnesses.
- Emergency procedures.
- Adequate training of Staff

Where a tower scaffold is being used as part of Construction works, the Principal Contractor (or Property and Environment Manager if Client managed) must ensure regular inspections and retain the Certificates of Inspection.

9.8.3. Scaffolding. Scaffolding must only be assembled, dismantled, or significantly modified by appropriately trained and competent contractors under competent levels of supervision and must be subject to regular inspection (statutory requirement).

All scaffolding works will be undertaken by a competent contractor appointed by the Principal Contractor (or Property and Environment Manager if Client managed). Certificates of Inspection for each 7-day period must be retained. The Property and Environment Manager is to produce a Temporary Works risk assessment for the scaffold until the primary user takes ownership of the scaffold.

9.8.4. Personal Fall Arrest Equipment / Work Restraint Systems. Personal fall protection systems such as lanyards and harnesses must only be used if the risk assessment indicates that they can be used safely, and that the use of safer collective controls is not feasible. All staff using fall protection systems must be adequately trained in their use.

9.9. Control Systems

Where working in excess of 2 metres or more, the following control systems will need to be considered:

- Edge Protection
- Air bags
- Nets
- Fall arrest systems
- Work restraints
- Preventing access to dangerous areas

9.10. Inspection

Every item of equipment used for working at height is to be subject to the following inspection regime:

- Each item of equipment for working at height is to be identifiable. For ladders/step ladders, Scafftags or similar are required.
- Each item of equipment, e.g., ladders/step ladders, should identify via the Scafftag or similar label, the date of the last inspection and the competent person completing the inspection. This identifies that the equipment is in a safe condition for use.
- Each item of equipment, e.g., ladders/step ladders, harnesses etc., is to be subject to formal inspection e.g., every 6 months if regularly used outdoors or annually if used indoors or more frequently depending on use and environmental conditions.
- Further details of the inspection regime for ladders / stepladders can be found in Safety Guide SG04 which includes an inspection checklist (appendix 1) and register (appendix 2).
- Each item of equipment must be subject to a thorough 'User' visual inspection prior to use.
- Equipment must be re-inspected should an incident occur, which may have caused the equipment to become unsafe or through external conditions e.g., environmental factors.
- Registers are to be kept and maintained by each Faculty/Department identifying type of equipment, date of inspection, date due for any formal maintenance, log of any defects and actions needed; date equipment should be replaced OR is withdrawn due to defects. Refer to Appendix 2 to Safety Guide SG04 'Ladders / Stepladders'.
- Access equipment must only be available to individuals who have undergone the necessary training.
- Inspection of scaffolding and tower scaffolds (where being used as part of a construction project) must be subject to a formal inspection every 7 days by a competent person and immediately after an incident occurring or inclement weather.
- Statutory inspections of lifting equipment will be undertaken by the College's Insurance provider and records retained by the Property and Environment Manager.

9.11. Training

Where it has been identified from the risk assessment and or Job Description that Working at Height is to be undertaken, the line manager is to ensure that staff receive suitable and sufficient information, training, and instruction. Any staff who may be required to undertake Working at Height is to complete the Working at Height Safety Induction online training (details available from the

regional Health and Safety Officer) and receive additional instruction from their manager which includes reading the Working at Height Risk Assessment. For Staff or students who are undertaking a course of training, all Work at Height will be appropriately supervised.

Depending on the complexity of the training, the College may engage the services of a competent external provider to provide more detailed practical based training.

The regional Health and Safety Officer will deliver training in kick stool use, to relevant individuals after they have completed the Working at Height Safety Induction online training

All training provided by the College will be recorded and refresher training provided at timely intervals to maintain key skills. Individuals will be expected to attend training sessions and will not be permitted to use work at height equipment until they have completed the training and instruction.

All individuals are to be aware of their limitations and to seek advice when necessary.

9.12. Assistance and Guidance

Group Health and Safety Manager

Regional Health and Safety Officer

Property and Environment Manager

HSE INDG401 Working at height - A brief guide - https://www.hse.gov.uk/pubns/indg401.htm

Safety Guide SG04 - Use of Ladders and Stepladders

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Section 10. Manual Handling

10.0. Procedure Statement

Activate Learning is committed to promoting the health, safety and wellbeing of its staff and students. This document sets out the College arrangements for when staff or students may be required to take part in manual handling operations or activities at College as a College related task/activity. It applies to all staff employed with, and students within the Activate Learning College Group (the College).

10.1. Introduction

The Manual Handling Operations Regulations 1992 (as amended 2002) apply to a wide range of manual handling activities at work. The regulation define manual handling as…

".the transporting or supporting of a load (include lifting, putting down, pushing, pulling, carrying of moving of a load) by hand or bodily force. "

A load may be either an inanimate object, such as a box or trolley, or an animate object, such as a person or animal.

Incorrect manual handling can cause musculoskeletal disorders (MSDs). The term musculoskeletal disorders' covers…

".*any injury, damage or disorder of the joints or other tissues in the upper/lower limbs or the back.*"

These disorders account for more than a third of all work-related illnesses and can occur to any individual in any occupation, including offices, laboratories, libraries and maintenance.

Although manual handling injuries can be caused by intense or strenuous activities or unexpected events, such as a fall, often this isn't the case. Unfortunately, most occur as a result of cumulative strain, i.e. gradual wear and tear caused by day-to-day tasks, with the person not feeling the pain until several hours after the injury. In rare cases, this can result in long-term debilitating injuries.

Factors leading to cumulative strain are:

- Excessive tension continued from day to day
- Lack of variety of movement in the task
- Excessive and/or prolonged muscle tension or force
- Awkward body postures
- Insufficient rest between periods of work
- Repetition of the task

Procedures for the assessment of manual handling operations are shown below at paragraph 10.7, and these assessments are a key factor in managing the prevention and control of manual handling injuries.

Individuals must not carry out or be given any manual handling work which is beyond their capabilities or experience. Always use any equipment provided and if in doubt obtain assistance.

If an individual experiences adverse symptoms, such as pains in a joint or the back, these pains should be reported to their Supervisor/Manager and Regional Health & Safety Officer to enable arrangements for treatment if necessary and possible modification to the work.

Musculoskeletal Disorders (MSD's) are one of the most common causes of occupational ill health. MSD's affect the muscles, joints, tendons, and other parts of the musculoskeletal system. It is important to understand the risks associated with manual handling and take appropriate measures to assess and ultimately reduce these risks, so the likelihood of suffering from MSDs such as back pain is reduced.

10.2. Duties

The College is required to:

- As far as reasonably practicable, have arrangements in place to avoid the need for manual handling.
- Assess the risk of injury from manual handling that can't be avoided and review this assessment if there is reason to suggest it is no longer valid, or there have been significant changes to the manual handling activity.
- As far as reasonably practicable, where manual handling can't be avoided, reduce the risk of injury from manual handling.
- Monitor any procedures in place or introduced to reduce the risk from manual handling and act upon any findings to implement further improvements where reasonably practicable
- Provide training and information to employees, including specific information about any loads they may handle.

It is important to take an ergonomic approach when looking at Manual handling activities. Therefore, assessments should include consideration of the task; the load; the working environment; and the individual capability of those carrying out the task. An assessment should be carried out by the person, or team of people, familiar with and / or directly involved with the task being assessed.

10.3. Responsibilities

Group Directors and Heads of Department must:

- Ensure that manual handling tasks are considered during risk assessment activities.
- Reduce the need for manual handling as far as reasonably practicable in areas under their control.
- Ensure that suitable and sufficient resources are available to enable manual handling tasks to be carried out with minimal risk.
- Provide appropriate and suitable equipment such as trolleys or sack trucks to minimise the risk of injury through manual handling.
- Provide suitable personal protective equipment if required.
- Refer individuals to occupational health if informed of health problems related to manual handling.
- Arrange relevant training for individuals or groups where required.

10.4. Staff Must:

- Use any equipment / system of work provided, to reduce the risk of manual handling injury.
- Attend manual handling training if required.
- Bring any problems relating to manual handling to the attention of Supervisors or Line Managers.
- Not attempt to lift or move any containers or objects which may be beyond their capabilities.

10.5. Students must:

- Follow and comply with any local rules regarding manual handling.
- Use any equipment provided for the transportation and moving of materials and equipment.

10.6. The Health & Safety Team will:

- Provide advice and guidance on manual handling issues.
- Provide manual handling training on request.

- Review and revise these manual handling procedures as necessary to ensure compliance with current legislation.

10.7. Risk Assessment

The purpose of a risk assessment is to identify hazards, the persons affected, and the degree of risk and to consider suitable means of controlling or eliminating the risk. The Line Manager and/or staff members must carry out risk assessments for work activities within their area of responsibility.

Risk assessments will help identify if the work can be completed without the need to undertake manual handling activities.

If it cannot be considered reasonably practicable to carry out the work without avoiding hazardous manual handling activities, then a Manual Handling Assessment should be completed to identify measures that need to be taken to secure safe working arrangements.

The assessment considers:

- Task
- Individual capability
- Load
- Environment

Specialist assessments involving the movement of students with physical disabilities will be conducted by Student Services who will provide a moving and handling protocol for these students.

10.8. Reducing the Risk

The Manual Handling Assessment should decide how best to reduce the risk of injury. A typical list of measures to consider is given below. This list is not exhaustive.

- Eliminate task
- Automate Task
- Use mechanical handling aids
- Share the load
- Reduce the weight of individual items
- Make the load easier to manage or grasp etc.
- Improve task layout
- Remove any space constraints
- Improve the condition of floors etc.

Training in correct manual handling is available to all College staff. This can be arranged by contacting the Health & Safety Manager.

10.9. Principles of Safe Moving and Handling

Moving and handling is a common cause of injury at work. Good manual handling techniques can significantly reduce the risk of injury. Most staff and students will, at some time, become involved in manual handling tasks in college. This could include carrying books, moving a computer, or carrying equipment from one area to another. The following techniques for moving and handling will ensure that moving and handling tasks are undertaken safely and without undue risk of injury.

10.10.1. Before you start

- Think about the job/task.
    - Does it need carrying, or can a trolley or other equipment be used instead?
- Think about what you are going to do before you do it.

- Where is the load going?
- Does it need more than one person to lift it safely?
- Is there enough room?
- How can you avoid having to twist when lifting or putting the load down?
- Think about you.
- Are you dressed for the job? Tight clothing can restrict movement. High heels are never suitable.
- Do you have a health problem that might make you vulnerable to injury?

- If you are not sure of how heavy a load is, test it out before you try to lift it.
  - Gently rock the load to test the weight and its distribution.
- If you have not been formally trained (i.e., attended a course of practical instruction), you should not lift more than 10kg without advice from your Manager.
- Remove any obstructions/tripping hazards from the route.
- Work out where and how to take a rest if moving a heavy load over a long distance.
- Are there any sharp edges? If so, then you may need to wear gloves to protect yourself.
- If the load is too bulky, look at ways in which to break it down.

10.10.2. Lifting technique

- Place your feet apart to make a stable base for lifting.
- Placing one leg forward in front of the other will help improve balance and control.
- If you have to reach out to the load, try sliding it towards you before attempting to lift it.

If lifting from a low height, bend your knees, NOT your back.

- Stand correctly, keeping your back upright (do not stoop) and your chin tucked in.
- Keep your shoulders level and facing the same direction as your hips.
- Lift smoothly, avoiding jerking movements.
- Lift your head first – your back then straightens automatically.
- Grip the load with your palms, rather than just your fingers – If you need to change your grip, rest the load first.
- Keep your arms close to your body to help support the load.

Do not allow the load to obstruct your view. Seek assistance if it is too large.

10.10.3. Moving the load

- When carrying, keep the load as close to the body as possible.
- Keep the heaviest side of the load closest to your body.
- When pulling or pushing, use your body weight to move the load. If possible, let the momentum of the load do some of the work e.g., when pushing trolleys.
- When pulling, keep your back straight and your arms as close to your body centre line as possible.
- Avoid twisting your body when turning.

10.11. Procurement/Maintenance of Equipment

Any additional equipment or furniture required to assist with manual handling activities will be provided and maintained in accordance with the ‘Work Equipment’ section of this manual.

10.12. Training

The mandatory ALO online Health & Safety module 'Risks and Responsibilities' will provide sufficient training and awareness for the majority of staff that may only occasionally be required to move or lift items not weighing more than 10kgs over very short distances.

Additional training and refresher training will be given to staff and students involved in manual handling as identified by risk assessment. Training should not be viewed as a substitute for risk assessment. The need for training as a method of risk reduction needs to be identified as part of the risk assessment process.

10.13. Related Policies, Procedures, Regulations, Legislation & Guidance

- Health & Safety at Work etc Act 1974
- Management of Health & Safety at Work Regulations 1999
- Health & Safety Executive (HSE) Approved Code of Practice and Guidance to the MHSWR Regulations
- Manual Handling Operations Regulations 1992
- Manual handling assessment charts (the MAC tool)

10.14. Acknowledgements

- Health and Safety Executive – A brief guide to Manual handling at work INDG143

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Section 11. Display Screen Equipment

11.0. Procedural Statement

Display screen equipment, and particularly visual display units (VDUs), are a commonplace feature of the office environment. There are a number of hazards associated with the prolonged use of DSE and information on how to minimise these risks is outlined below. Display screen equipment and other relevant work equipment, including desks, chairs and other associated furniture can and should be adjusted to the most comfortable position for each individual user. In order to avoid discomfort from prolonged use of DSE equipment, users should:

- receive training in how to assess their workstation
- assess their workstation
- receive training in how to correctly use any software
- raise any problems with their line manager in order that they may be resolved
- make necessary adjustments to their workstation, and
- adopt good working practices

All staff who work with DSE equipment must undertake the online training and self-assessment identified within the DSE mandatory training on ALO.

11.1. The Screen

Display screens should have easily read characters, and should be stable, with no visible flicker or swim. Screens should swivel and tilt easily, and you should have control of brightness and contrast. The screen should be free from reflective glare. There is no evidence to suggest that display screens cause damage to the eyes or eyesight or make existing eye defects worse. However, some people find reading from a VDU screen is tiring even when other precautions, such as preventing poor positioning with respect to overhead lighting and windows, resulting in glare, have been taken. If you are in any doubt about your eyesight, you should have an eye test.

11.2. DSE Eye tests

College employees who are regular users of display screen equipment (DSE/VDU) should be made aware that, upon request, they will be provided with a DSE/VDU eye test.

Further guidance on obtaining an eye test is available from HR or the H&S Team.

11.3. Work surface

Your work surface should be sufficiently large for a flexible arrangement of the components of your workstation and should be of low reflectance. A suitable document holder should be provided, if you require one.

11.4. Standing desks

It is acknowledged that for many staff, sitting all day at a conventional desk is not beneficial to their posture. For some staff, a raised desk surface will be the most appropriate solution for this issue.

If, after a DSE risk assessment has been undertaken, a raised surface is recommended, the staff member should contact their manager to request this. There are a variety of options, including:

- Sit-stand workstations – height adjustable PC stations placed on normal desks – for example https://www.posturite.co.uk/desks-furniture/sit-stand-desk-converters
- Standing desks – either manual or electronic – contact the Furniture Office
- Higher static desks – where staff with laptops could move to when they feel the need to stand for short periods of time – contact the P&E Manager.

The H&S Team can provide guidance to the manager and HRBP to identify which type of surface to provide for their staff.

11.5. The Keyboard

The keyboard should be separate from the screen and tiltable, for maximum operator control.

Common keyboard shortcuts

Using keyboard shortcuts can reduce your usage of a computer mouse and therefore help reduce the effects or likelihood of work-related discomfort.

Details of some common keyboard shortcuts for Windows programmes is available at Appendix 1 to this section.

11.6. Seating

The height of your chair and the angle of the chairback need to be adjustable so that the whole design of the workstation is suited to the physique of the operator, so as to provide a comfortable working environment. A suitable footrest should be provided, if you request one.

11.7. Work pattern

There is no doubt that ergonomic and visual fatigue problems can be aggravated by long periods of work. A transfer to other activities for around 10 minutes in every hour is generally regarded as a good way of avoiding such problems. Flexibility in the work regime is the key, considering the requirements of both the individual operator and the work in hand.

11.8 Work Environment

Your work environment, in terms of space considerations, lighting, reflections and glare, noise, temperature and humidity, must be such that a comfortable workstation is provided, which is acceptable to you.

11.9. Training and Risk Assessment

Online DSE Training and Workstation self-assessment via ALO should be carried out when a member of staff begins work at the College and then the Workstation self-assessment should be reviewed every two years.

A new risk assessment should also be carried out if there is a change in equipment or in location/set up or if you feel your equipment set up may be contributing to ill health.

11.10. Workstation Assessments and concerns

11.10.1. General advice for employees

After completing the self-assessment, staff should correct or arrange for correction of any issues which have been highlighted on the assessment form.

11.10.2. Local assistance

Should an issue arise which staff cannot resolve themselves, they should discuss this with their manager in the first instance who will then request a follow-up assessment by the regional H&S Officer.

11.11. Assistive hardware/Software

The HRBP's offer a service to support disabled staff with assistive software or hardware requirements. HRBP's will then request assistance from IT or the H&S Team as appropriate.

11.12. Furniture and Office Requirements

- Requests for specialist furniture (chairs, desks etc) should be directed at the Property & Environment Manager.
- Requests for wrists rests, footrests, ergonomic aids (i.e. Penguin mouse) are to be made to the line manager for purchasing from the department budget.

11.13. Further assistance if required - external consultancy with associated costs

There may be occasions when it is appropriate to consult experts on ergonomics. This would be appropriate once all the above advice and guidance has been followed and any adjustments implemented for a reasonable period of time, but the staff member is still experiencing issues with their DSE set up. Managers are to contact HRBP's to request assistance.

There are many companies who provide this service on a commercial basis. One such local company is Posturite who have indicated that they will undertake a free telephone consultation, before moving on to a paid face to face assessment.

11.14. Contacting the Occupational Health Service

After following the above advice and having implemented a trial of any adjustments as identified in the risk assessment, if there are continued outstanding health concerns the Occupational Health Service would encourage an initial visit to your own GP for assessment of your health, followed by contact with the Occupational Health Service for further assessment via self-referral or managerial referral.

Contact the HRBP to arrange an Occupational Health referral.

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Section 12. Management of Substances Hazardous To Health

12.0. Procedural Statement

Exposure to any substance hazardous to health must be prevented, or where this is not reasonably practicable, a suitable and sufficient assessment of the risk is conducted, and steps taken to meet the requirements of the regulations. Failure to assess the health risks or to prevent exposures where reasonably practicable to do so is a breach of legislation.

The activity involving the hazardous substance where personnel may be exposed dictates the need for a risk assessment (not just the presence of the substance), typical activities may include:

a. moving / handling.

b. transportation (including a Dangerous Goods assessment).

c. use.

d. maintenance.

e. storage; and

f. final disposal.

12.1. Introduction

This section has been divided into two sub-sections:

Part 1: Directive. This part provides the direction that must be followed in accordance with statute or the College Health and Safety policy.

Part 2: Guidance. This part provides the guidance and best practice that should be followed and will help you to keep to the requirements of the Health and Safety policy.

12.2. Scope

Substances hazardous to health' means a substance (including a preparation) falling into at least one of the following groups:

a. substances classified by legislation and for which an indication of danger for the substance is very toxic, toxic, harmful, corrosive, or irritant.

b. substance for which the Health and Safety Executive (HSE) has approved a Workplace Exposure Limit (WEL).

c. clinical waste (including animal tissue, animal waste, body parts etc).

d. biological agents e.g. fungi, bacteria (including legionella), moulds, parasites etc.

e. a dust of any kind, except dust which is a substance within paragraph (a) or (b) above, when present at a concentration of air equal to or greater than:

(1) 10 mg/m3 as a time-weighted average over an 8-hour period of inhalable dust; or

(2) 4 mg/m3 as a time-weighted average over an 8-hour period of respirable dust.

f. any substance that is not classified in the above points but because of its chemical or toxicological properties and the way it is used or is present in the workplace creates a risk to health.

12.3. Glossary of Terms

The key terms used in this section are explained in the Glossary of Terms (which is at Appendix 1 of this section).

12.4. Part 1: Directive. This part provides the College policy on the management of substances hazardous to health (including natural or artificial substances and mixtures). It describes how the risk assessment process works and the responsibilities for implementing the resulting actions to reduce the risk so far as is reasonably practicable (SFAIRP) at the point of use.

12.4.1. Legislation. UK Health, Safety and Environmental Protection (UK HS&EP) legislation requires employers to ensure, SFAIRP, the health, safety and welfare of employees and anyone else who may be affected by a work activity. The key legislation that applies to the management of hazardous substances are as follows (further guidance / references can be found in 'Related Documents'):

a. Control of Substances Hazardous to Health Regulations 2002.

b. Registration, Evaluation, Authorisation and Restriction of Chemicals (REACH).

c. Health and Safety at Work etc Act.

12.4.2. Asbestos and Legionella are known high risk substances which have the potential to have serious health effects were exposure occurs. They must be considered through assessment in accordance with this section.

12.4.3. The HSE's COSHH Essentials online tool can be used as an aid in the process of hazardous substance risk assessments.

12.4.4. UK HS&EP legislation concerning the Registration, Evaluation, Authorisation and Restriction of Chemicals (REACH) operates alongside COSHH to ensure information on the hazards of chemicals and how to use them safely will be passed down the supply chain by chemical manufacturers and importers through improved Material Safety Data Sheets (MSDS). This term MSDS is technically still used in legislation e.g. COSHH, however, the term Safety Data Sheet is becoming more commonly referred to by suppliers and is in line with the REACH regulations.

12.4.5. Must and Should

Where this section says 'must', this means that the action is a compulsory requirement. Where this section says 'should', this means that the action is not a compulsory requirement but is a recommendation of good practice to comply with the Health and Safety policy and best practice guidance.

12.4.6. Policy Statements

This section establishes the following 'policy statements' to provide direction on the management of hazardous substances (including natural or artificial substances and mixtures), which must be followed:

a. **Policy Statement 1** (Page 107). The manager must make sure that no activity is conducted which is liable to expose themselves or any person(s) to any substance hazardous to health unless a suitable and sufficient assessment of the risk is conducted, and control measures are implemented.

b. **Policy Statement 2** (Page 108). The manager must make sure that the risks associated with exposure to any substance hazardous to health are evaluated and identify suitable and sufficient control measures, which must be implemented and maintained.

c. **Policy Statement 3** (Page 108). College procurement and persons responsible for the procurement or provision of hazardous substances must refer to the REACH requirements and obtain the relevant information, and the information must be provided to end users.

d. **Policy Statement 4** (Page 109). The manager must make sure that all persons who might be exposed to a hazardous substance have access to all relevant information about the hazardous substance.

e. **Policy Statement 5** (Page 110). The control measures in the risk assessment or as communicated by management must be complied with. If the controls in the risk assessment cannot be complied with and the activity must proceed, alternative ways of working must be considered, and implemented where reasonably practicable.

f. **Policy Statement 6** (Page 110). The relevant Group Director must make sure that systems are in place within their Faculty and College Campus, to identify Health Surveillance (HS) or Health Monitoring (HM) requirements and that suitable and appropriate HS / HM programmes for new and existing staff are developed and implemented.

g. **Policy Statement 7** (Page 110). All personnel involved in the disposal of substances must comply with instructions provided, as defined in the risk assessment, or as detailed in manufacturers documentation. Hazardous waste information must be provided to the holder of substances to make sure disposal procedures are correct.

h. **Policy Statement 8** (Page 111). The relevant Group Director via their managers must make sure that personnel have access to all the relevant resources / equipment and information regarding procedures and arrangements for dealing with emergencies.

12.4.7.

Policy Statement 1

The manager must make sure that no activity is conducted which is liable to expose themselves or any person(s) to any substance hazardous to health unless a suitable and sufficient assessment of the risk is conducted, and control measures are implemented.

Employers must not carry out or commission work which is liable to expose persons to a substance hazardous to health unless they provide those persons with suitable and sufficient:

a. information - a MSDS does not constitute a risk assessment but must be used as a source of information when completing risk assessments.

b. instruction - appropriate level of supervision to ensure those persons are aware of the risk(s) associated with the substance and/or procedures.

c. training - those persons must receive appropriate training to the role assigned to them; and

d. equipment - includes appropriate documentation defining the safe operation and maintenance of the equipment.

The assessment must consider activities and processes and must NOT just be substance specific. Whilst a substance specific assessment may appear an easier way of doing the assessment it does not enable consideration of the interfaces and additive effects where more than one substance is used in a task. Therefore, the assessment must:

a. fully identify the activity or process.

b. identify all substances or products being used or produced.

c. consider who and how many are likely to be exposed for example young persons and those of childbearing age, how and for how long.

d. include a register to track items in circulation and assist in stock control and waste management.

e. consider storage of items and the control of hazardous substances. A storage plan may be created, and colour coded to assist in segregation of high-risk items, cages and locked cabinets must be implemented where required; and

f. consider the risk of exposure as recognised in lessons identified from accidents, incidents, and emergencies data.

Processes that use or produce hazardous substances must be risk assessed:

a. in the design and development process to design out or minimise their use or production.

b. when substances (e.g. dust or vapours) result from a process or activity or which arise as a result of an accident or emergency.

c. when substances arise as wastes or residues from processes or activities, including scrap material; and

d. when substances arise as a result of interaction with another process or activity in the vicinity.

The College online Safety Management System MyCompliance has a COSHH assessment module that allows for the creation of COSHH assessments as part of an activity risk assessment.

12.4.8.

Policy Statement 2

The manager must make sure that the risks associated with exposure to any substance hazardous to health are evaluated and identify suitable and sufficient control measures, which must be implemented and maintained.

Competent persons are required throughout the organisation and must be involved at all stages of managing risk in a process or activity including evaluation and identification of suitable and sufficient control measures.

Record the significant findings. The assessor (if not the line manager) should bring the findings of the assessment (considering any variation due to local conditions, changes in use and personnel issues and, if appropriate, explain the risks) and the required control measures to manage those risks to the attention of the manager. The competences required of assessors are described in glossary (Appendix 4).

Risk assessment is not a substitute for making things safe, consider the headings in the order shown according to the hierarchy of risk controls. Do not simply jump to the easiest control measure to implement:

a. elimination - redesign the job or substitute a substance so that the hazard is removed or eliminated.

b. substitution - replace the material or process with a less hazardous one; care should be taken to make sure the alternative is safer than the original.

c. engineering controls - separate the hazard from operators; give priority to measures which protect collectively over individual measures.

d. administrative controls - these are all about identifying and implementing the procedures you need to work safely, for example, reducing the time workers are exposed to hazards (for example by job rotation); and

e. provision of personal protective equipment (PPE) or respiratory protective equipment (RPE) - only after all the previous measures have been tried and found ineffective in controlling risks to a reasonably practicable level, must PPE or RPE be used.

Risk assessments and associated documents must be kept for audit and investigation purposes and be retained for a minimum of 3 years after expiry and in accordance with the Health & Safety Records Retention Schedule guidance at page viii. However, it is common practice to keep records for 5 years, including the MSDS. For health monitoring, records are to be kept for 40 years.

12.4.9.

Policy Statement 3

College procurement and persons responsible for the procurement or provision of hazardous substances must refer to the REACH requirements and obtain the relevant information, and the information must be provided to end users.

Procurers and importers of hazardous substances must understand and satisfy the requirement for manufacturers and suppliers to provide information to enable the assessment process to be completed. This information is usually included in the MSDS.

Early identification within the supply chain of the potential use or generation of hazardous substances will have a significant impact on the hazard analysis, relevant safety cases and overall project risk management. They must be evaluated as to whether a substance can be eliminated, or an alternative, less hazardous substance used whilst maintaining capability.

Consideration should be given to design alterations to minimise exposure and the management of residual exposure to be designed into the process / user instructions.

Where the need for specific PPE for the end user of a substance or equipment is identified as a result of introducing a hazardous substance; managers and persons responsible for procurement must ensure that the PPE requirement is communicated to so that the end user is informed and consulted of the need. Equipment maintenance documentation must specify any PPE that is required.

12.4.10.

Policy Statement 4

The manager must make sure that all persons who might be exposed to a hazardous substance have access to all relevant information about the hazardous substance.

Where the information is inadequate to allow a suitable and sufficient assessment to be carried out at the point of use, the user's manager in conjunction with the supplier must obtain the relevant information about the materials, exposure routes, potential health effects to make sure the risks are able to be suitably assessed and the control measures to be implemented. These must be incorporated into process and user instructions.

Should there be concern from a person who might be exposed to the hazardous substance, they have the right to refuse to work with that substance, but this must be discussed with their manager as to what the concerns are and any further safety measures that can be introduced.

This information must be recorded at the point of use and where appropriate, copied into the appropriate HR documentation. Where actions or controls are identified to reduce exposure there is a statutory requirement to implement those controls.

The manager must make sure that monitoring of exposure to hazardous substances within an activity or process is undertaken where an assessment concludes that:

a. there could be serious risks to health if control measures failed or deteriorated.

b. exposure limits might be exceeded.

c. control measures might not be working properly; or

d. when employees are exposed to certain substances and processes specified in Schedule 5 to the COSHH Regulations.

The manager must ensure that those undertaking and interpreting exposure monitoring are competent to do so; where there is any doubt advice should be sought from the Group Head of Health & Safety.

The manager must make sure that all control measures identified by the COSHH assessment including any additional arrangements to the emergency procedures are implemented, communicated, monitored, and reviewed. Where appropriate, this information must be recorded and copied into the HR documentation.

12.4.11.

Policy Statement 5

The control measures in the risk assessment or as communicated by management must be complied with. If the controls in the risk assessment cannot be complied with and the activity must proceed, alternative ways of working must be considered, and implemented where reasonably practicable.

All personnel must comply with instructions provided for the safe use, handling or storage of substances as defined in the risk assessment or as otherwise communicated by management including the correct use of control measures.

Personnel must undertake such training as is required to understand the information and instruction provided on the potential health risks and the exposure controls to be implemented for the safe use, handling and storage of substances and processes used therein.

This must apply on all of the College estate, including shared facilities and off-site centres.

12.4.12.

Policy Statement 6

The relevant Group Director must make sure that systems are in place within their Faculty and College Campus, to identify Health Surveillance (HS) or Health Monitoring (HM) requirements and that suitable and appropriate HS / HM programmes for new and existing staff are developed and implemented.

See Section 14 to this manual - Health Surveillance and Health Monitoring, and HSE guidance COSHH Health Surveillance, necessary when there is a disease associated with the substance in use e.g. asthma, dermatitis, cancers etc.

There is a legal obligation to undertake HS, but not HM. However, it is a hugely beneficial way of collecting information, which could help identify health issues within the workplace and help managers to monitor trends.

The manager must be given assurance that HS and HM processes are in place via audit, to provide them with confidence that their commanders or line managers are implementing appropriate HS / HM programmes.

College staff will receive their Occupational Health (OH) support via HR. Where services through the OH Service Provider are not available, the manager, via HRBP and the Group H&S Manager must source suitable equivalent services to provide the required HS / HM. The manager must be aware of the work activities undertaken by their staff and whether they require HS or HM arrangements (this should be identified by risk assessment).

The manager must make sure that where regulation or College Policy requires persons to undergo health surveillance that the requirement is adhered to.

12.4.13.

Policy Statement 7

All personnel involved in the disposal of substances must comply with instructions provided, as defined in risk assessment, or as detailed in manufacturers documentation. Hazardous waste information must be provided to the holder of substances to make sure disposal procedures are correct.

Guidance on the disposal of hazardous waste is available from the Property & Environment Manager or Health & Safety Manager. Hazardous waste arising from College activities must be reduced and

minimised. Where the production of hazardous waste is unavoidable it must be managed in accordance with the campus waste procedures.

Hazardous Waste must be stored in the correct specification containers. These must be located in a secure/controlled area with spill prevention/containment measures. The Property & Environment Manager, must, when letting contracts for waste services, provide assurance that waste service providers, throughout the supply chain, are appropriately licensed.

12.4.14.

Policy Statement 8

The manager must make sure that personnel have access to all the relevant resources / equipment and information regarding procedures and arrangements for dealing with emergencies.

The manager is responsible for making sure that their staff and visitors within their area of responsibility have received adequate training and / or been briefed in the local emergency procedures for example a Spill Response Plan, to understand what action is required of them in the event of an emergency or disaster i.e. spillage of a hazardous substance or a release of a toxic cloud.

For staff, visitors and contractors, who may have a disability, medical condition etc. (temporary or permanent) which may affect their ability or the ability of others to respond or react to an emergency; a Personal Risk Assessment should be conducted and a Personal Emergency Evacuation Plan (PEEP) produced to ensure their timely evacuation without assistance from the Emergency Services unless their assistance has been pre-agreed. Further details can be found in Section 35 of this manual.

Any additional emergency procedures specific to the COSHH risk assessment must be clearly documented and recorded on the COSHH assessment form; these are in addition to the existing emergency arrangements. Emergency Services information needs to be building location specific and available out of normal working hours. These may include notification to the local fire service of substances held on the campus, to aid them in awareness of hazards should they need to attend.

12.5. Part 2: Guidance

This part provides the guidance and best practice that should be followed using the Plan, Do, Check, Act approach and will help you to comply with the College H&S Policy.

12.5.1. PLAN - identify problems and opportunities

Like any health and safety assessment, a COSHH assessment should begin with a thorough walk-around observation of all areas and processes in the workplace, including waste storage and disposal systems (the COSHH Assessment Process Flowchart is at Appendix 2 of this section).

The requirement following substances directly identified, is to design and operate processes and activities to minimise emission, release and spread of substances hazardous to health, by considering the following:

a. consider ways to achieve and maintain control of exposures where prevention is not deemed practicable (decisions should be recorded), e.g. ventilation systems, containment, substituting materials.

b. disposal and other similar issues following an incident have been considered and documented.

c. this information may also inform the final equipment disposal requirements allowing the risk from such activities to be considered and planned for early on the equipment life cycle.

d. identify all potentially exposed groups (including cleaners and maintenance).

e. list significant sources of exposure and how people could be exposed.

f. reduce number of sources.

g. reduce emission rate.

h. segregation of large sources.

i. enclosure of sources.

j. Local Exhaust Ventilation (LEV).

k. lessons learned, and resultant amended work processes should controls prove inadequate; or

l. organise the work to minimise the number of people exposed and the duration, frequency, and level of exposure.

Consider all relevant routes of exposure - inhalation, skin absorption and ingestion - when developing control measures, consider the following:

a. how does contaminant get into the air?

b. how does contaminant get onto skin, eyes, and other soft tissue?

c. looking at the process which is the greater exposure risk (consider the environment the process is in); and

d. how could contaminant get into water?

Control exposure by measures that are proportionate to the health risk, consider the following:

a. what are the long- and short-term health effects?

b. is there a need for measuring exposures to ensure that assessments are valid and that the control measures implemented are effective in reducing exposures?

c. is there enough information to decide the risk to health?

d. has Workplace Exposure Limits (WEL) been assigned?

e. is health surveillance required?

f. are the proposed control measures likely to be sufficient to control exposure adequately, i.e. below the WELs?

g. how often will the control measures be reviewed and by whom?

Choose the most effective and reliable control options which minimise the escape and spread of substances hazardous to health, consider the following:

a. can the process or substance be eliminated / substituted?

b. can process be modified to reduce spread, emissions and use less of substance?

c. minimising numbers of personnel involved in the activity.

d. maintaining good hygiene practices, e.g. cleaning of workplaces to reduce the potential for exposures via ingestion for example.

e. is the working methods compatible with the control measures?

f. has the control measures been integrated with the work process?

Where adequate control of exposure cannot be achieved by other means, provide, in combination with other control measures, suitable PPE, consider the following:

a. list types, required specifications and where use is required.

b. RPE, which must fit correctly and be worn correctly. (Face Fit testing required - see Section 15.)

c. is it compatible with the task?

d. have the wearers received training and information about the equipment and how to look after it?

e. correct storage will be needed to reduce the risk of contamination and further incidental exposure

f. who is going to be responsible for checking and maintaining the equipment?

Inform and train all employees on the hazards and risks from the substances with which they work, and the use of control measures developed to minimise the risks, consider the following:

a. ensure information about the health risks, the control measures etc are communicated to those carrying out the task, and that any training required to carry out the task has been completed and recorded.

b. use of control measures by employees, ensuring it is part of work instructions.

Ensure that the introduction of control measures does not increase the overall risk to health and safety, consider the following:

a. emergency procedures, including for example fire and evacuation and spillage

plan/procedures, are in place and demonstrated on a regular basis.

b. assess proposed control measures to ensure that no new risks are introduced or that they are adequately controlled such that the overall risk of exposure is minimised.

12.5.2. DO - implement potential solutions - Assessing the Risk

Assess the risks, identify what could cause harm in the workplace, who it could harm and how, and what you will do to manage the risk.

The Health and Safety Executive (HSE) guidance is explicit that where there is a practical cost-effective solution, then the solution should be adopted. Where specific controls have been identified but it is not reasonably practicable to implement them, there is a requirement for the justification for rejection to be recorded and included in the activity, process, or project documentation. However, if such controls are not practicable given the working environment or where adequate control of exposure cannot be achieved by other means or if there is a temporary failure of control measures, then PPE or RPE will need to be used. The use of PPE or RPE will often be required for maintenance operations for which the risk of exposure must be COSHH assessed.

The assessment should consider activities and processes and should NOT just be substance specific. Whilst substance specific assessment may appear an easier way of doing the assessment it does not enable consideration of the interfaces and additive effects where more than one substance is used in a task.

Therefore, the assessment should:

a. fully identify the activity or process.

b. identify all substances or products being used or produced.

c. consider who and how many are likely to be exposed, how and for how long.

d. a COSHH register will help track items in circulation and assist in stock control and waste management.

e. consider storage of items and the control of hazardous substances. A storage plan may be created, and colour coded to assist in segregation of high-risk items, cages and locked cabinets used where required; and

f. consider exposure resulting from accidents, incidents, and emergencies.

The management of COSHH risks should be controlled using the following in order of priority:

a. elimination of the hazard.

b. substitution of the hazard (alternative substances or procedures).

c. hazard control (e.g. physical protective measures, engineering control).

d. provision of safety procedures or Safe Systems of Work; and

e. provision of personal and / or respiratory protective equipment.

Where substances are purchased from outside the EU or the hazard is a by-product of a process (e.g. fume from welding or wood dust from machining), this information may not be readily accessible (HSE advice sheets cover some processes but not all). In these cases, assistance / advice should be sought from a competent person (e.g. an occupational hygienist) on the properties of the substance or process. It is not acceptable to allow substances or processes into use without proper assessment of the health risks.

The assessment should consider all routes by which exposures to hazardous substances may occur (inhalation, skin contact, ingestion, eye contact etc) and under all circumstances, hence assessors should have working knowledge of these processes and activities in order to complete the required 'suitable and sufficient' assessment. It should also consider if any end users might be more vulnerable, i.e. pregnant workers, young persons.

There are a number of inter-related factors that can affect the risk from exposure:

a. the type of damage or harm that the substance can cause, and the amount needed to cause it.

b. how much of the substance is likely to be: ingested, get airborne and breathed in, or come into contact with the skin or eyes.

c. the duration of exposure and environmental conditions.

d. the amount being used and its physical properties i.e. its dustiness or volatility; and

e. interaction with other substances (synergistic effects, simultaneous or sequential exposure).

The Material Safety Data Sheet (MSDS) for most substances procured by the College and classified as 'hazardous' are available from the supplier or via MyCompliance. Any changes or updates to the substances used should be sent to MyCompliance so that the COSHH database can be updated.

The MSDS is the principal source of information for most substances and forms the basis of the assessment process; therefore, assessments cannot be easily completed if this information is not available. Manufacturers and suppliers have a legal requirement to provide that information. Users and maintainers have a legal requirement to apply the information.

The HSE COSHH Essentials[3] is a simple to use online system that is menu led using the information provided in the MSDS to produce generic advice. It can be used as a simple initial assessment to identify and record significant findings. However, as it is a legal requirement that the risk assessment be 'suitable and sufficient', the generic information provided should only be used as guidance to assist in completing the full risk assessment.

Information on the COSHH Essentials process is available on the HSE website. Users of the online system should note that COSHH Essentials assessments are only held on the database for 30 days from completion but should be downloaded and stored electronically to provide an auditable record.

COSHH Essentials follows a step-by-step process resulting in a recommended control approach. Supporting this are Control Guidance Sheets that the HSE have produced. Whilst it is not expected that these approaches will apply in all cases, the principles should be used with suitable adjustments to enable appropriate controls to be implemented. The assessment summary and Control Guidance Sheets should provide the user with enough information to identify if specialist help is required to complete a full COSHH risk assessment. If COSHH Essentials has been used the output should be saved and if necessary, kept with the working reference copy of the MyCompliance COSHH assessment.

The completed assessment should be recorded using MyCompliance and passed to the manager or project leader for implementation of the control measures. Where specialist advice is required, or training identified, the H&S Manager should be contacted.

[3] COSHH Essentials sets out basic advice on what to do to control exposure to hazardous substances in the workplace.

12.5.3. CHECK - assess the results - Review and measure performance

Assess how well the risks are being controlled and if you are achieving a safe working environment. In some circumstances formal audits may be useful, however there should be continual review of control measures to ensure effectiveness.

An initial review should take place shortly after implementation, in order to check the effectiveness of control measures.

Subsequent reviews should be undertaken:

a. should an accident or incident occur.

b. when there has been a significant change in the activity or process (location,

duration, quantity etc).

c. there is reason to suspect that the assessment in no longer valid.

d. there is a change in personnel e.g. the operator or line manager; and

e. at a frequency based on the risk but normally not exceeding every two years.

Each review should include the manager's assessment of the effectiveness of control measures, and any further controls that may be required.

Check and review regularly all elements of control measures for their continuing effectiveness, consider the following:

a. arrange exposure monitoring and health surveillance where required.

b. checks of LEV systems, to follow LEV engineer guidance booklet and log into logbook each time before use, to check all of the system in between statutory testing and examination.

c. maintenance of control measures including statutory examination and testing by competent engineers.

d. review written instructions and operating procedures, do they encourage use of controls and training; and

e. check process regularly for signs of effectiveness / failure, e.g. visible dust on surfaces = possible leakage.

12.5.4. ACT - implement improved solutions - Review the performance

Learn from any accidents or incidents, ill health data, errors and relevant experience picked up through the risk assessments and control measures in place.

Revisit plans, policy documents and risk assessments and take appropriate amendment action on any lessons identified, including from audit and inspection.

12.6. Related Policies, Procedures, Regulations, Legislation & Guidance

The following sections of this manual should be consulted in conjunction with this section:

- Section 4 - Management of Risk,
- Section 6 - First Aid Procedures,

12.7. Acknowledgements:

- HSE L5 - Control of substances hazardous to health.
- HSE HSG 97 - A Step-by-Step guide to COSHH Assessments.
- HSE HSG 258 - Controlling airborne contaminants at work - A guide to local exhaust ventilation (LEV).
- HSE HSG 53 Respiratory Protective Equipment at Work.
- HSE EH40/2005 - Workplace Exposure Limits.

- HSE INDG 136 - Working with substances hazardous to health

12.8. Appendices

- Appendix 1. Glossary of Terms
- Appendix 2. COSHH Assessment Process Flowchart
- Appendix 3. Identifying Control Approaches
- Appendix 4. COSHH Assessor Competence Requirements

GLOSSARY OF TERMS

Absorption	Uptake of material into the body, e.g. the blood, cells, organs, etc. Skin, inhalation, ingestion, and injection are routes by which substances can enter the body (see also Inhalation and Ingestion).
Accident	An unplanned or unforeseeable event that caused injury or occupational disease to a person or which caused/had the potential to cause a RIDDOR
Dangerous Occurrence	(see also Incident).
Additive / Synergistic	Substances said to be additive are those having or relating to an effect that is the sum of individual effects. Those said to be synergistic in their effects when they act either on the same organs or by the same mechanisms so that the overall effect is considerably greater than the sum of the individual effects. This may arise from mutual enhancement of the effects of the constituents or because one substance 'potentiates' another causing it to act in a way it would not if used on its own.
Advice	Providing specific and practical direction on the action(s) to be taken to ensure compliance. Advice stops short of telling a participant exactly what to do, but if followed, should contribute to enabling a compliant solution.
As Low As Reasonably Practicable (ALARP)	When risks are tolerable and have been reduced to a level where applying further controls would be extremely disproportionate to the benefit that would be gained. The term means essentially the same thing as So Far As Is Reasonably Practicable (SFAIRP) and at their core is the concept of 'reasonably practicable'.
Assessment	The formal review of a Safety document or other written product.
Carcinogenic	A substance is said to be carcinogenic if, after inhalation, ingestion or penetration of the skin occurs, it may induce cancer in humans or increase its incidence.
Competent Person	Competence can be described as the combination of training, skills, experience, and knowledge that a person has and their ability to apply them to perform a task safely. Other factors, such as attitude and physical ability, can also affect someone's competence
Control Measures	A method for reducing exposure to external influences, e.g. substitution, engineering control, respiratory protective equipment. The right combination is crucial. No measures, however practical, can work unless they are used properly.

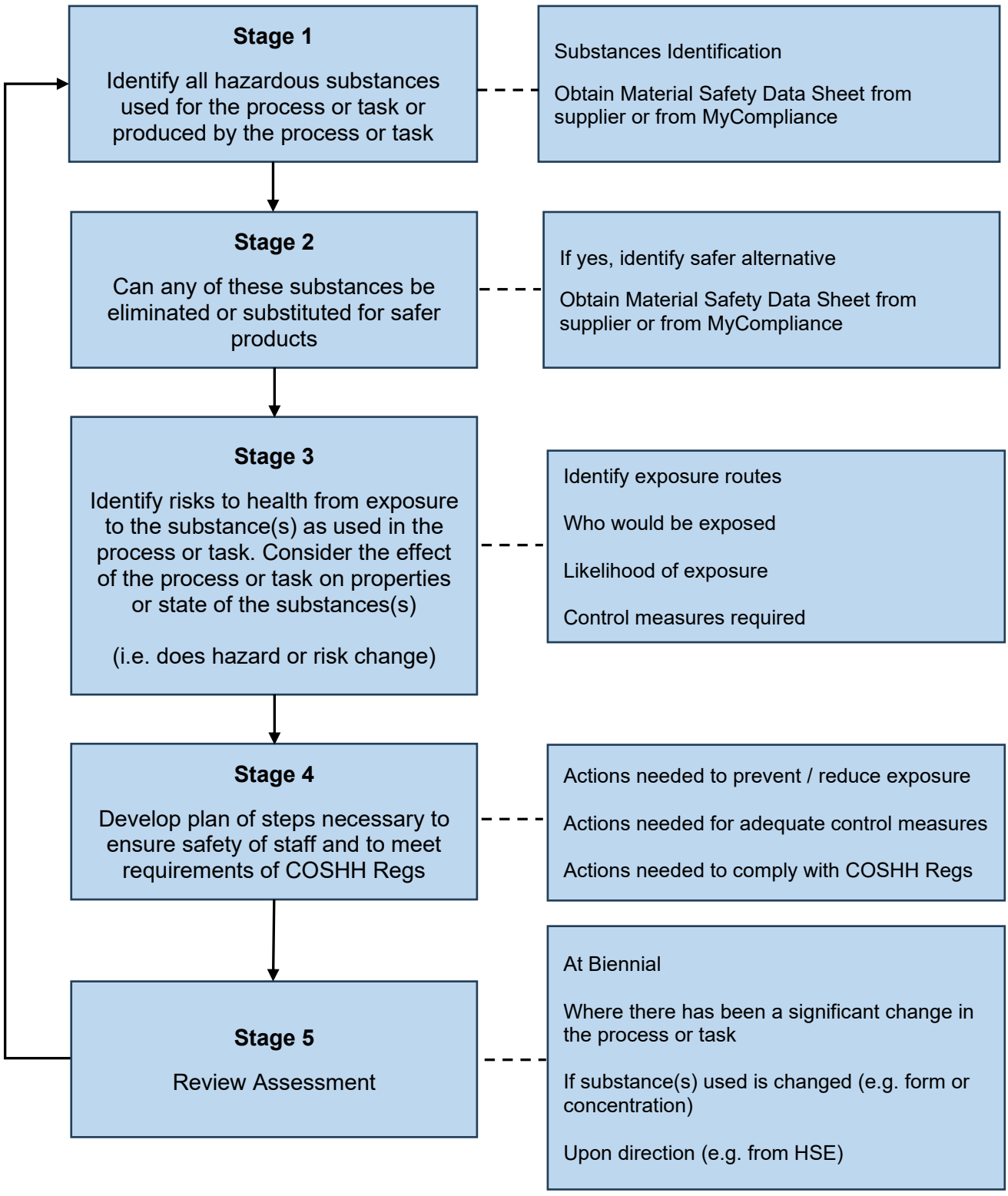
Dust	Created when solid materials are broken down into fine particles. The smaller the dust, the longer it remains in the air and the easier it is to inhale.
Environment	Surroundings which a system or organisation effects, including air, water, land, natural resources, flora, fauna, and their interrelation with humans (third parties).
Fume	Created when solid materials (usually metals) vaporise when subjected to high temperatures. The metal vapour rapidly cools and condenses into an extremely small particle, with particle size generally less than one micrometre in diameter.
Gas	Substance similar to air which becomes airborne at room temperature and, because they are able to diffuse or spread freely, can travel very far, very quickly.
Guidance / Guidance Material	Advice or information aimed at providing a consistent approach to an issue or subject as given by an authority in order to provide additional explanation, assist in application of a regulation or help illustrate meaning. Will assist in compliance as part of good practice.
Hazard	Is the actual or potential condition that can cause injury, both immediate and delayed, illness or death of personnel or damage or loss of equipment or property.
Health and Safety Protection (HaSP)	An umbrella term for the laws, rules, guidance, and processes designed to help protect employees, the public and the environment from harm in the workplace
Health surveillance	Systematic, close overview of an individual's health.
Health and Safety Executive (HSE)	Is a non-departmental public body of the United Kingdom. It is the body responsible for the encouragement, regulation and enforcement of workplace health, safety, and welfare, and for research into occupational risks in England and Wales and Scotland.
Incident	An unplanned or unforeseeable event which causes loss or damage to property, plant or equipment, or the environment due to shortfall in safety measures (see also Accident and Near Miss).
Ingestion	Taking in of material via the mouth.
Inhalation	The process or act of breathing in, taking air and sometimes other substances into your lungs.
Likelihood	Estimate of the probability or frequency of a risk occurring in a specified time period, based on the description of its cause, event and consequences.

Manager	Refers to personnel responsible for planning activities, supervising activities, and making sure personnel are safe.
Management System	A system to establish policy and objectives or to achieve those objectives.
Maintenance	The combination of all technical and administrative actions, including supervision actions, inspection, testing, servicing, and classification as to serviceability intended to retain an item in a state in which it can perform a required function.
Material Safety Data Sheet (MSDS)	An important document that contains the information necessary for the safe supply, handling, and use of hazardous substances and should contain the information necessary to undertake a risk assessment as required by COSHH. This term is still used in legislation e.g. COSHH, however, the term Safety Data Sheet (SDS) is becoming more commonly referred to by suppliers and is in line with the REACH regulations.
Mist	Tiny liquid droplets that are formed from liquid materials by atomisation and condensation processes such as spraying. Many mists are a combination of several hazardous ingredients.
Must	Where this chapter says ‘must’, this means that the action is a compulsory requirement.
Notification	To Inform of something in a formal or official manner.
Policy	A course or principle of action to be adopted.
Reasonably Practicable	A narrower term than ‘physically possible’ … a computation must be made by the owner in which the quantum of risk is placed on one scale and the sacrifice involved in the measures necessary for averting the risk (whether in money, time or trouble) is placed in the other, and that, if it be shown that there is a gross disproportion between them – the risk being insignificant in relation to the sacrifice – the defendants discharge the onus on them. (Definition set by Court of Appeal in Edwards vs National Coal Board [1949]) (HSE).
Regulation	A ‘rule or authoritative direction’ having the effect of law, placing restriction on another organisation, or defining overarching mandatory activities or conditions that are to be met without exception. The act of regulating is the enforcement of compliance with a rule or authoritative direction prescribed by those delegated such authority.
Risk	The level of risk is determined from a combination of the likelihood of a specific undesirable event[hazard] occurring and the severity of the consequences, for example, how often is it likely to happen, how many people could be

	affected and how bad would the likely injuries or ill health effects be.
Risk Assessment	The process for measuring (estimating) the magnitude of the risk as part of mitigating it to ALARP and informing any decision on whether or not that risk is tolerable.
Risk Management	Process that encompasses systematic hazard identification, risk assessment, hazard risk matrix, risk reduction and risk monitoring, evaluation, and review.
Safe	Freedom from unacceptable or intolerable conditions that can cause death, injury, occupational illness, damage to or loss of equipment or property, or damage to the environment.
Safety	The freedom from unacceptable risks of harm to personnel and material at all times.
Safety Case	A structured argument, supported by a body of evidence that provides a compelling, comprehensible, and valid case that a system is safe for a given application in a given operating environment.
Severity	Is the degree of injury, numbers of personnel affected, property damage, or other factors that could occur as a result of a hazard being realised.
Should	Where this chapter says ‘should’ this means that the action is not a compulsory requirement but is considered best practice to comply with the Policy.
So Far As Is Reasonably Practicable	Legal phrase used in Health and Safety at Work Act etc 1974, which is alternatively referred to as ALARP, the degree of risk where the trouble, time and money needed to reduce that risk starts to become disproportional to the derived benefit.
Subject Matter Expert (SME)	The individual or organisation most directly concerned with a specific subject. Whilst the sponsor of the subject remains ultimately accountable for the subject, an SME is responsible for the completeness and technical accuracy of the information they provide and for notifying the sponsor when the information changes or requires amendment. The SME may appoint additional SMEs to assist in providing information.
Time Weighted Average (TWA)	This term applies to exposure to airborne concentrations of substances averaged over a time period. The two periods used are: long term (8 hours) and short term (15 minutes). Short term exposure limits (STEL) are set to help prevent effects, such as eye irritation, which may occur after exposures of a few minutes.

Vapour	Gaseous state of substances that are either liquids or solids at room temperature. They are formed when solids or liquids evaporate.
Workplace Exposure Limits (WELs)	Are occupational exposure limits (OELs) set under COSHH in order to help protect the health of workers. They are concentrations of hazardous substances in the air averaged over a specified period of time referred to as a time weighted average (TWA).
Young person	In this chapter a young person is defined as: (a) a person aged 16 years, from the date on which he attains that age until and including the 31st of August which next follows that date. (b) a person aged 16 years and over who is undertaking a course of full-time education at a school or college which is not advanced education. (c) a person aged 16 years and over who is undertaking approved training that is not provided through a contract of employment. For the purposes of paragraphs (b) and (c) the person: (a) must have commenced the course of full-time education or approved training before attaining the age of 19 years; and (b) must not have attained the age of 20 years

COSHH ASSESSMENT PROCESS FLOWCHART



IDENTIFYING CONTROL APPROACHES

1 General Ventilation

Good standard of general ventilation and good working practices

2 Engineering Control

Typically, local exhaust ventilation (LEV), ranging from a single point extract close to the source of hazards. To ventilate partial enclosure. It includes other engineering methods of control e.g. cooling coils for vapours, but not complete containment.

3 Containment

The hazard is contained, or enclosed, but small breaches of containment may be acceptable. Often used where a substance is very hazardous, or a lot is likely to get into the air.

Least reduction in exposure

Greatest reduction in exposure

Special – Control Approach 4

It is important that you seek further advice

Control approach 4 applies where you are handling chemicals assigned to Hazard Group E. These have the potential to cause **very serious health effects** such as cancer or asthma, and a safe level of exposure will be difficult to establish (**i.e. WEL substances, 'sen' substances**). Different types of control will be needed for different chemicals in this group;

Or

You are handling large quantities of chemicals that are in a form that can be easily inhaled causing a serious health effect. All aspects of handling these substances need to be assessed at a level of detail beyond that provided here.

Selecting Control Approach 4 (special) means that you will need more specialist advice than provided here.

You must contact the Group Health & Safety Manager or Occupational Health (via HR) who will provide specific advice on your assessment.

Possibilities may include substitution, or the installation of other control measures.

If you have any doubts about which categories to use, contact the Health & Safety Team or Occupational Health (via HR) for additional advice

COSHH ASSESSOR COMPETENCE REQUIREMENTS

1. Those persons most likely to be competent assessors will usually have:

   a. A basic understanding of the COSHH Regulations or have access to someone who does. The assessor will need a good working knowledge of the content and principles of the Approved Code of Practice (ACOP) and relevant guidance.

   b. The ability to systematically gather relevant information about how exposure may occur and the risks to health from that exposure. This requires the ability to:

      (1) understand the significance of what is being observed during the process, particularly if it is different from written procedures.

      (2) identify where operational conditions may influence the way the process is carried out and how this may affect the risk to health / exposure.

      (3) identify and review technical literature where relevant.

      (4) ask relevant questions of operators, supervisors, managers, H&S Officers etc and draw all the information together from all sources in a systematic way, to estimate likelihoods and consequences; and

      (5) form valid and justifiable conclusions about the risks to health.

   c. The ability to specify the actions required to comply with the regulations. This involves:

      (1) asking fundamental questions about whether exposures need to occur (i.e. can process or substances be eliminated).

      (2) having an appreciation of the range of possible control measures and the actions required to maintain those control measures; and

      (3) ability to look critically at existing arrangements and identify where they may not be appropriate and / or effective (assistance may be required from specialists).

2. Understand their limitations - the assessor should know or be aware of where expertise that is likely to be required during the assessment process can be sourced, and to know at what stage that expertise will need to be involved, e.g. air monitoring (exposure monitoring) should only be carried out by professionally trained persons.

3. Occupational hygiene advice or Health & Safety Team advice on the selection and fit testing of respiratory protective equipment should be sought where its use has been identified.

4. Make a report effectively communicating the findings about the risks and the precautions to be taken to all stakeholders (therefore the assessor should be in such a position that all stakeholders can be identified, and the information provided).

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Section 13. Smoking in the College Environment

13.0. Procedural Statement

Activate Learning supports a smoke free code of practice in its workplaces in order to provide a healthy and comfortable working environment for employees, students and visitors. This section promotes a smoke-free environment in compliance with Activate Learning's obligations under the Health Act 2006; the Smoke-free (Premises and Enforcement) Regulations 2006; the Smoke Free (Exemptions and Vehicles) Regulations 2007; and the Health and Safety at work etc Act 1974.

The objectives of this procedure are to:

- Provide smoke-free internal and external working environments, for all users across the Activate Learning estate and vehicle fleet.
- Support Activate Learning's commitment to health and wellbeing.
- Comply with relevant health and safety best practice and legislation.

13.1. Introduction

This smoking procedure applies to all employees, students, contractors, visitors and tenants using Activate Learning owned or managed premises and vehicles. Activate Learning **does not permit** smoking inside any of its owned or managed buildings or vehicles.

Except for in 'designated smoking areas', which are clearly identified, Activate Learning **does not permit** smoking externally, across any of its estate.

In no-smoking areas – the smoking of tobacco-based or other products is prohibited, this includes the use of all e-cigarettes and vaping equipment.

13.2. Responsibilities

13.2.1. Management/Employer responsibilities:

Activate Learning has a duty to take reasonable care to protect the health of its employees. Consequently, managers are required to:

- Ensure that all new employees are made aware of the smoke free procedures at Induction.
- Recognise that some employees may experience initial difficulties in moving to a smoke free environment and it is important that where this is identified that employees are signposted to appropriate support mechanisms.
- Act to promote and enforce this procedure.

13.2.2. Staff responsibilities:

- Take reasonable care for the health and safety of themselves and others.
- Familiarise themselves and comply with this procedure and its content.

13.2.3. Student responsibilities:

In accordance with the student handbook all students are expected to uphold Activate Learning's smoke free policy.

Students are expected to:

- Take reasonable care for the health and safety of themselves and others.
- Familiarise themselves and comply with this section and its content.

13.3. Facilities for smokers

The College will provide a designated smoking area for use by employees, visitors, contractors and students. Employees who choose to take breaks in order to smoke will make up the working time

missed through smoking by extending their working day, or by making a reduction to the length of their lunch break, as agreed with their line manager.

13.4. Enforcing the smoke free policy

Any member of staff who repeatedly fails to observe the rules by smoking in unauthorised areas will be reported to their line manager and may face disciplinary action in accordance with the Activate Learning Disciplinary Procedure.

Any student failing to observe no-smoking policy with be asked to stop. In the event of repeated breaches, the student will be referred to a manager who may proceed with disciplinary action as outlined in the Student Behaviour and Disciplinary Policy.

All staff have a role to play in enforcing this process and are expected to deal with any observed or reported breaches.

In the event of a breach by a visitor, or staff member of other organisations, they should be asked to extinguish all smoking materials and be informed of the availability of designated outside smoking areas. If they continue to smoke, the matter should be referred to the Head of Student Experience or a member of the Property & Environment team who will ask them to leave the site.

Local Councils are responsible for enforcing the legislation. Those who do not comply with the smoke free law will be committing a criminal offence and may be liable to a fixed penalty fine and possible criminal prosecution.

13.5. Support for Smokers

Advice and counselling can be obtained from Occupational Health providers, GPs, local NHS cessation advisers and through the individual College based nurses and counsellors.

The NHS Smoking Helpline number is **0300 123 1044**. The helpline can offer advice and support on stopping smoking along with a website at www.nhs.uk/smokefree which provides current guidance.

13.6. Monitoring and Review

The following will be monitored through the following avenues:

- Prospective employees will be advised of the smoke free procedures.
- The smoke free procedure will form part of every induction programme.
- Discarded smoking materials are disposed of safely.
- This section will be reviewed regularly to ensure that it continues to meet the aims of the Health & Safety policy.

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Section 14. Health Surveillance & Health Monitoring

14.0. Procedural Statement

This section aims to ensure the health and well-being of staff and students at Activate Learning through effective health surveillance (HS) and/or health monitoring (HM). It outlines the responsibilities, processes, and actions required to detect and manage health risks associated with college activities.

14.1. Introduction

The connection between cause and effect of work-related ill health is not always obvious as it can often take some time for symptoms to develop. For some personnel, a pre-existing health condition may affect their ability to work, or the type of work they can do. In other cases, the work itself may have the potential to affect a person's health, particularly when personnel remain exposed to health risks after safety controls have been put in place. This is because safety control measures may not always be reliable or effective, despite appropriate checking, training and maintenance.

HS is a systematic process of repeated health checks which are used for identifying ill health or diseases caused by work and for gaining an overview of the health status of the personnel conducting the work. In some cases, it can be used to make sure personnel with pre-existing health conditions can work safely.

HS can help control risks by:

a. providing data to help evaluate health risks, including cross referencing medical findings with accident, incident and environmental incident occurrence reports.

b. enabling employees to raise concerns about how their health is or may be affected by their work; and

c. highlighting lapses in workplace controls and giving feedback to risk assessments.

Certain regulations listed below make mandatory provision for Medical Surveillance (MS) where there could be exposure to certain high hazard substances or agents such as asbestos, lead and ionising radiation. MS requirements are predominately the same as HS requirements, but a doctor appointed by the HSE must conduct the MS.

HM is an informal system used where the health effects from work activities are not specific to a work activity, for example, lower back pain that may be common in the general population through non-work events. Other issues where a person's health status may affect others, for example, epilepsy in safety critical roles and so on, may require HM.

Other types of HM that can be used are biological monitoring and biological effect monitoring. Biological monitoring is the measurement of a chemical or its breakdown products in a biological sample (usually urine or blood) to indicate how much chemical has entered the body by all routes of exposure. For example, measurement of lead in blood of workers exposed to lead dust. Biological effect monitoring is the measurement of biological effects resulting from absorption of chemicals. For example, measurement of protein in urine of workers exposed to cadmium to check their kidney function. An occupational health professional will be able to advise if biological monitoring or biological effect monitoring is required.

When conducting HS or HM, a competent person must be used to collect, analyse and interpret the data. Providing a manager is competent and able to recognise and assess the health symptoms and conditions associated with the hazard, it might be appropriate for them to manage the collection of HS data using self-assessment questionnaires or HM data by conducting regular health checks.

In cases where the manager is not competent to collect the HS or HM data, a competent person, such as an occupational health professional, must be used. HS or HM should not be confused with health promotion or general health checks, as they are not the same as a broad health check-up with a General Practitioner.

Employers have a general duty under the Health and Safety at Work etc. Act 1974 (legislation.gov.uk) to maintain safe working arrangements for their employees. There is a further duty on employers under the Management of Health and Safety at Work Regulations 1999 which states; Every employer shall ensure that his employees are provided with such health surveillance as is appropriate having regard to the risks to their health and safety which are identified by the assessment.

The non-exhaustive list below identifies relevant legislation which makes provision for MS or HS:

- The Control of Asbestos Regulations 2012
- The Work in Compressed Air Regulations 1996
- The Ionising Radiations Regulations 2017
- The Control of Lead at Work Regulations 2002
- The Control of Substances Hazardous to Health Regulations 2002
- The Control of Noise at Work Regulations 2005
- The Control of Vibration at Work Regulations 200

14.2. Scope

This procedure applies to all staff, students, contractors, and any other parties involved in activities at Activate Learning that may expose them to health risks requiring surveillance or monitoring.

14.3. Key Principles

- Ensuring compliance with relevant health and safety legislation, including the Control of Substances Hazardous to Health (COSHH) Regulations and the Management of Health and Safety at Work (MHSW) Regulations.
- Prioritising the health and well-being of all individuals through proactive health surveillance and monitoring.
- Implementing appropriate risk assessments and control measures to mitigate health risks.
- All individuals may be involved in health monitoring however only staff will be participate in health surveillance.

14.4. Responsibilities

Compliance Manager

- Coordinate and assist in the delivery of timely and relevant health surveillance programmes, at times and locations to suit best the needs of services requiring them.
- Advise managers of any of their staff that fail to attend programmes/clinics

Group Health and Safety Manager

- Providing competent health and safety advice regarding health surveillance and monitoring.
- Ensuring compliance with relevant legislation and internal policies.
- Advise HRBP’s, managers and subjects of health surveillance regarding outcomes, fitness for work status and any recommended restrictions in work practice.

Managers

- Ensuring that all staff involved in activities requiring health surveillance receive appropriate training and are aware of their responsibilities.

- Identifying job-specific training needs and ensuring that employees complete the relevant mandatory training.
- Ensure appropriate risk assessments take account of health surveillance requirements.
- Identify and inform staff groups for whom health surveillance is required.
- Ensure liaison with the Occupational Health Unit to assist in identifying where health surveillance requirements are necessary or have been identified.
- Immediately advise the Occupational Health Unit of any event resulting in the accidental release of, or exposure to, substances hazardous to health.
- Ensure those with the responsibility for carrying out risk assessments are fully aware of health surveillance requirements and the arrangements to follow where a need, or potential need, is identified.
- Ensure staff requiring health surveillance are able to attend the health surveillance programmes.
- Ensure adequate and up to date records are maintained.
- Following the risk assessment, incorporate suitable health surveillance requirements, including on an individual's commencement of employment or assignment to a particular activity.
- The review of intervals for health surveillance following any untoward occurrence within the working environment**.**
- FOM's / Group Service managers are to coordinate staff that require attendance at a HS clinic. If new staff members join that require HS, FOM's / Group Service managers are to inform the Compliance Team to ensure the records are updated. New staff will then be offered testing in the next rotation.

Health and Safety Officers

- Conducting regular inspections and audits of health surveillance and monitoring programmes to ensure compliance with safety standards.
- Providing guidance on the implementation and maintenance of health surveillance and monitoring procedures.
- Assisting in the completion of risk assessments and ensuring appropriate control measures are in place.

Employees

- Completing all mandatory health and safety training related to health surveillance and monitoring.
- Adhering to all safety guidelines and procedures when participating in health surveillance and monitoring activities.

HRBP

- Identify staff that may be at risk of work-related ill health on the basis of pre-employment health declarations.
- Liaise with and provide information to general practitioners and other specialists regarding adverse outcomes of health surveillance.
- Identify complex cases where referral to Occupational Health or other relevant specialist is necessary to underpin advice to management.

Individuals Undergoing Health Surveillance

Those undergoing health surveillance are responsible for: -

- Attending any clinic appointment arranged for them.

- Advising the Health Surveillance contractor of any significant health issues.
- Reporting any significant changes in their health to the HRBP in intervals between health surveillance sessions.
- Cooperating with health surveillance programmes and other risk reduction measures for the protection of their health.

14.5. Health Surveillance Procedures

Risk Assessment

- Managers are to ensure that they conduct comprehensive risk assessments to identify potential health risks associated with college activities and to inform the Group Health & Safety Manager if staff require health monitoring or health surveillance.
- Managers are to implement appropriate control measures to mitigate identified risks, including the use of personal protective equipment (PPE) and safety devices.

14.6. Health Surveillance Programme

- The Group Health & Safety Manager will develop and implement a health surveillance programme for employees exposed to hazardous substances or activities as identified in the Health Surveillance Matrix.
- The Group Health & Safety Manager will ensure that health surveillance is carried out by competent personnel, such as occupational health professionals or specialist contractors.
- The Group Health & Safety Manager will have access to individual health records for all participants in the health surveillance programme via the Health Surveillance contractor portal.

Medical Surveillance

- For employees exposed to substances specified in Schedule 6 of the COSHH Regulations, ensure medical surveillance is supervised by an HSE Appointed Doctor at intervals not exceeding 12 months. Whilst Activate Learning currently does not carry out activities listed in Schedule 6, a number of departments or areas do carry out activities using substances that can be inhaled , absorbed through the skin, swallowed, cause occupational asthma and severe dermatitis. The risk assessment process will identify such health hazards and health surveillance will be arranged for employees that have been identified as at risk.
- The Group Health & Safety Manager shall provide employees and their managers with information and advice regarding further health surveillance and any necessary actions based on the results. The HRBP may also be notified if Occupational Health is required to conduct additional assessments.

Health Monitoring

- The Group Health & Safety Manager will implement health monitoring procedures for activities where formal health surveillance is not appropriate but where monitoring symptoms can provide valuable information.
- Managers and staff are encouraged to report symptoms early to assess the need for action and prevent further health issues.

14.7. Emergency Procedures

- Managers are to develop and implement emergency procedures for dealing with incidents involving health risks identified through surveillance and monitoring.
- Managers are to ensure that all staff are trained in emergency procedures and are aware of the actions to be taken in the event of an emergency .

14.8. Access to Health Surveillance Information and Records

Following a particular aspect of an individual's health surveillance programme, the Group Health and Safety Manager will bring the findings to the attention of the individual and discuss any implications as a result.

The Group Health and Safety Manager will bring to the attention of an individual's line manager and HRBP the relevant findings of a health surveillance programme. Such findings could include:

- Exposure to hazardous substances, physical agents etc indicating a risk to the individual's health.
- Indication of the non-performance or under performance of risk control measures.
- Whether the individual is deemed fit to undertake a particular work activity.
- Individuals who are subject to health surveillance are entitled to access the records held in respect of that health surveillance and can be routinely supplied with a copy of the examination outcome at the time it is carried out.
- Requests for access to an individual's health records by any third party must be in writing and be accompanied by the individual's written consent to access these records.
- Where a request is made by the Health and Safety Executive to the College to provide access to an individual's health record, that request must be in writing and the information will be restricted to that given by the relevant regulations and/or accompanying approved code of practice.

14.9. Maintenance and Retention of Health Surveillance Records

- Individual's health surveillance records will be maintained and retained in accordance with the prescribed periods given by the regulations under which that health surveillance has been carried out. These periods can be found in Appendix 1 to this policy.
- Where no prescribed period is given in respect of health surveillance carried out as required by specific legislation, the records for that health surveillance will be retained in accordance with Appendix 1.
- Individuals' health surveillance records will be held securely and confidentially by the Group Health and Safety Manager

14.9. Compliance and Review

- The Group Health & Safety Manager will ensure all health surveillance and monitoring activities comply with relevant legislation and internal policies.
- The effectiveness of this procedure will be reviewed annually or sooner if required to ensure it remains current and effective.

14.10. Appendices:

Appendix 1: Legislative Requirements for Health Surveillance / Health Monitoring and the College Application

Appendix 2: Types of Health Surveillance available

Legislative Requirements for Health Surveillance / Health Monitoring and the College Application

The Management of Health and Safety at Work Regulations		
What the Regulations Require	**Application of the Regulations Requirements**	**Retention of Health Surveillance Records**
Regulation 6 Employers are required to ensure employees are provided with appropriate health surveillance in relation to risks to health and safety identified by risk assessments carried out in accordance with the Regulations.	Risk assessments carried out under the Regulations will identify circumstances where health surveillance is required by specific health and safety regulations, e.g. Control of Substance Hazardous to Health Regulations (COSHH). In addition, health surveillance will be appropriate where risk assessments identify the following criteria: a) There is an identifiable disease or adverse health effect related to employees' work. b) Valid techniques are available to detect indications of the disease or health effect. c) There is reasonable likelihood the disease or health effect may occur under particular conditions of the work; and d) The surveillance is likely to further protection of the health and safety of the employees it will cover, e.g. maintaining the effectiveness of a risk assessment and the controls implemented as a result.	There is no prescribed time period for the retention of records of health surveillance carried out under these Regulations. Good practice is to retain an individual's health surveillance record whilst they remain an employee and, once an individual's employment has ceased, whilst enquiries could still be made. Any records of health surveillance carried out under the Regulations will be retained by HR for at least 40 years after the date of last entry

The Control of Vibration at Work Regulations		
What the Regulations Require	**Application of the Regulations Requirements**	**Retention of Health Surveillance Records**
Regulation 7 Employees shall be subject to suitable health surveillance if a risk assessment, carried out in accordance with the Regulations indicates: a) A risk to the health of employees exposed, or liable to be exposed, to vibration; or b) Employees are likely to be exposed to vibration at or above an exposure action value. Suitable health surveillance is considered appropriate where exposure to vibration is such that: i. A link can be established between the exposure and an identifiable disease or adverse health effect. ii. The disease or health effect may occur under the circumstances of the employee's work; and iii. There are valid detection techniques for the disease or health effect.	**Hand-arm Vibration Syndrome** Health surveillance should be provided for vibration-exposed employees, i.e. those undertaking activities involving the use of hand-held vibrating tools where: Exposure is likely to be regularly above the action value of 2.5m/s2 A(8) as given by the Regulations. Exposure is likely to be occasionally above the action value and the risk assessment identifies the frequency and severity of exposure may pose a risk to health; and Employees are identified as particularly sensitive to vibration, e.g. previously diagnosed as suffering from hand-arm vibration syndrome. **Whole Body Vibration** Guidance accompanying the Regulations identifies health surveillance as not appropriate. There are no methods that exist for the detection, or indicate the early onset, of adverse health effects associated with whole body vibration, i.e., lower back pain, that are specifically related to work. Whilst formal health surveillance is not identified as required, the guidance that accompanies the Regulations suggests an approach of reporting and monitoring the symptoms of lower back pain to assist in assessing the need for action on whole body vibration. This 'health monitoring' approach is not a legal requirement under the Regulations	There is no prescribed time period for the retention of records of health surveillance carried out under these Regulations. Good practice is to retain an individual's health surveillance record whilst they remain an employee and, once an individual's employment has ceased, whilst enquiries could still be made. Any records of health surveillance carried out under the Regulations will be retained by HR for at least 40 years after the date of last entry

The Control of Noise at Work Regulations		
What the Regulations Require	**Application of the Regulations Requirements**	**Retention of Health Surveillance Records**
Regulation 9 If a risk assessment carried out in accordance with the Regulations identifies employees are, or likely to be, exposed to noise levels presenting a risk to health, those employees shall be subject to suitable health surveillance. Where health surveillance identifies hearing damage and, in the opinion of the doctor who the affected employee is referred to, this damage is likely to have resulted from exposure to noise: a) the affected employee shall be subject to continued health surveillance; and b) A review of the health of any other employee who has been similarly exposed is undertaken.	The Regulations give both lower and upper action values. These values are: **Lower Action Values** • 80dB average daily or weekly exposure; and • 135dB peak single exposure. **Upper Action Values** • 85dB average daily or weekly exposure; and • 137dB peak single exposure. Health surveillance will be required where employees are regularly exposed above the upper action values. Where an employee is regularly exposed between the lower and upper action values or occasionally above the upper action value, health surveillance should be provided if the particular employee is sensitive to noise, e.g. through previous exposures	There is no prescribed time period for the retention of records of health surveillance carried out under these Regulations. Good practice is to retain an individual's health surveillance record whilst they remain an employee and, once an individual's employment has ceased, whilst enquiries could still be made. Any records of health surveillance carried out under the Regulations will be retained by HR for at least 40 years after the date of last entry

The Control of Substances Hazardous to Health Regulations		
What the Regulations Require	**Application of the Regulations Requirements**	**Retention of Health Surveillance Records**
Regulation 11 Where it is appropriate for the protection of the health of employees who are, or liable to be, exposed to hazardous substances, those employees will be under suitable health surveillance. Health surveillance is appropriate where: a) Exposure is to a substance, or engagement in a process specified in COSHH to the Regulations and there is a reasonable likelihood that an identifiable disease will result. Health surveillance in these circumstances will include medical surveillance under the supervision of a relevant doctor at intervals not exceeding 12 months, or more frequent if the doctor requires. In addition, where the doctor has certified: i. An employee should not be engaged in work that results in exposure to a specified substance, or specifies specific conditions whilst carrying out that work, those conditions must be complied with until the doctor indicates otherwise; and ii. Medical surveillance should be continued after exposure to a specified substance has ceased, that medical surveillance must continue whilst the employee is still employed until the doctor indicates otherwise.	In addition to the specific conditions given by the Regulations in relation to substances and activities given in Schedule 6 to the Regulations, examples of where health surveillance would be appropriate under the other criteria given in regulation 11 would include: - a) Exposure to substances having recognised adverse health effects on other parts of the body, e.g. mutagens, carcinogens, biological agents and micro-organisms, from where they enter, i.e., by inhalation, ingestion, skin absorption or skin puncture. b) Substances known to be respiratory sensitisers, cause occupational asthma; and c) Substances known to be skin sensitisers, cause severe dermatitis. Valid health surveillance techniques need to be sufficiently sensitive and specific to detect the disease or health effect related to the type and level of exposure concerned. However, the techniques should not be carried out where there is a risk of the employee's health being harmed.	The Regulations require that each employee is subject to health surveillance; the records of that health surveillance shall be maintained and retained by HR for at least 40 years from the date of last entry.

The Control of Substances Hazardous to Health Regulations		
What the Regulations Require	**Application of the Regulations Requirements**	**Retention of Health Surveillance Records**
Regulation 11 (continued) b) An employee's exposure to a hazardous substance is such that: i. An identifiable disease or adverse health effect may result. ii. There is a reasonable likelihood the disease or health effect may occur under the particular conditions of the employee's work; and iii. There are valid techniques to detect the indications of the disease or health effect, and these techniques are of low risk to the employee.		

The Ionising Radiation Regulations		
What the Regulations Require	**Application of the Regulations Requirements**	**Retention of Health Surveillance Records**
Regulation 24 1) This regulation shall apply in relation to:- (a) Classified persons[4] and persons whom an employer intends to designate as classified persons (b) Employees who have received an overexposure (c) Classified persons and persons whom an employer intends to designate as classified persons.	Employees are required to be under medical surveillance by an 'Appointed Doctor' (AD) or Employment Medical Adviser (EMA) (this will be a OH Physician if required) The employer will create a health record for each classified person (and others to whom this Regulation applies) and retain this for at least 50 years from the date of the last entry. Adequate medical surveillance should include:	HR will maintain the medical record for each classified person. Records of Health Surveillance carried out under IRR regulations will be retained by HR for 50 years from the date of last entry in the record.

[4] A classified person is someone who could be exposed to ionising radiation, through occupational exposure including reasonably foreseeable incidents, who could receive more than the following exposures:

- 6mSv/year whole body effective dose
- 150 mSv/year equivalent dose to the extremities
- 15mSv/year to the lens of the eye.

An employer is required to designate a person as being classified if that person is likely to receive an effective (whole body) dose in excess of 6mSv/y, or more than three-tenths of the dose limit to the extremities (150 mSv/y)

Regulation 24 (continued) (d) Employees who have received an overexposure and are not classified persons. (e) Employees who are engaged in work with ionising radiation subject to conditions imposed by an Appointed Doctor or Employment Medical Adviser under paragraph (6). 2) The employer shall ensure that each employee to whom this regulation relates is under adequate medical surveillance by an Appointed Doctor or Employment Medical Adviser for the purpose of determining the fitness of each employee for the work with ionising radiation which they are to carry out.	(a) a medical examination before first being designated as a classified person in a post involving work with ionising radiations (b) periodic reviews of health at least once every year. (c) special medical surveillance of an employee when a relevant dose limit has been exceeded. (d) determining whether specific conditions are necessary. (e) a review of health after cessation of work where this is necessary to safeguard the health of the individual. It is the duty of employees to make themselves available for medical surveillance during working hours, if required by the employer, and to provide the Doctor with such health information as they may require. Female employees must notify their employer as soon as possible if they become pregnant or if they are breast feeding The dosimetry record and the absence record for the previous 12 months must be provided to the OH Physician at the time of the medical examination The Doctor may certify that in their professional opinion the employee concerned should not be engaged in work with radiation or that work should continue only in accordance with conditions specified by the Doctor. Where an employee is aggrieved by a decision recorded in the health record, they may apply to the HSE for a review of that decision provided the application is made within 3 months of the date on which they were notified of the decision	

Types of Health Surveillance available

The Management of Health and Safety at Work Regulations	
Risk Item	**Type of Appropriate Health Surveillance**
Noise levels presenting a risk to health	Enquiry about symptoms, inspection of ears, audiometry
Chemicals/substances causing skin irritation	Enquiry about symptoms, inspection and skin examination
Vibrating machinery/equipment	Enquiry about symptoms, inspection and examination i.e. HAVS
Ionising Radiation Non-Ionising (laser) class 3R, 3B and 4 laser	Enquiry about symptoms, medical examination, blood tests Specific laser vision screens by appointed optometrist
Respiratory Sensitisers (animals, wood dust, agricultural grains and dust,)	Enquiry about symptoms, lung function test

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Section 15. Personal Protective Equipment (PPE) and Respiratory Protective Equipment (RPE)

15.0. Procedural Statement

This section aims to ensure the safety and health of all employees and students by providing guidelines for the selection, use, maintenance, and training of Personal Protective Equipment (PPE) and Respiratory Protective Equipment (RPE).

15.1. Scope

This procedure applies to all employees of the College, contractors, agency colleagues, apprentices, volunteers including limb (b) workers, carrying out work on behalf of the College.

A limb (b) worker* is a person who doesn't work for themselves (i.e., they are not self-employed) but who is not an employee as their work is irregular but work under a contract for service.

The main objective of this procedure is to provide all staff with information on the use of PPE and to ensure that the legal requirements for the provision of PPE are broadly defined.

15.2. Definitions

Personal Protective Equipment (PPE) is defined as "all equipment (including clothing affording protection against the weather) which is intended to be worn or held by a person at work, and which protects the person against one or more risks to that person's health or safety, and any addition or accessory designed to meet that objective'. Regulation 2: PPE regulations

Examples include, e.g., safety helmets, bump caps, gloves, eye protection, masks, respiratory equipment, high-visibility clothing, safety footwear, safety harnesses, and lanyards, fluid resistant surgical masks, and FFP3 masks as appropriate.

15.3. Key Principles

- Ensuring compliance with the **Personal Protective Equipment at Work Regulations 1992 (as amended)** and other relevant legislation.
- Implementing appropriate risk assessments and control measures (in accordance with the Hierarchy of Controls) to avoid ill-health and injury from inhalation hazards.
- The controls are in the order required for consideration:
    1. Elimination – physically remove the hazard
    2. Substitution – replace the hazard
    3. Engineering controls – isolate people from the hazard
    4. Administrative controls – change the way people work
    5. PPE – protect the worker with personal protective equipment.

15.4. Responsibilities

Group Health and Safety Manager

- Providing competent health and safety advice regarding PPE and RPE.
- Ensuring compliance with relevant legislation and internal policies, procedures and this manual.

Managers

- Ensure the provision, maintenance, and training of appropriate PPE and RPE.
- Ensure that a workplace risk assessment is caried out to identify all workplace hazards and activities which are of significant risk, consider the possibilities of eliminating or reducing the risk by means other than the use of PPE.

- Identifying job-specific training needs and ensuring that employees complete the relevant mandatory training.
- Ensure that all staff are aware of the procedure and safety issues relating to the use of PPE.
- Identify the need for PPE.
- Review the risk assessment as required e.g., following an incident, a change in work activities or procedure.
- Ensure that all staff groups and individuals as appropriate are given the appropriate information, instruction, and training in the correct usage of PPE and the identification of wear and tear.
- Ensure that appropriate support is given to staff involved in any incident.
- Manage the effectiveness of preventative measures through an effective system of reporting, investigating, and reporting incidents.
- Ensure a suitable quantity with an appropriate stock level is maintained.

Health and Safety Officers

- Conducting regular inspections and audits to monitor the safe and correct use of PPE and RPE.
- Providing competent health and safety advice regarding PPE and RPE.
- Assisting in the completion of risk assessments and ensuring appropriate control measures are in place.

Employees

- Take reasonable care of their own health and safety at work and of other persons who may be affected by their acts or omissions.
- Comply with all safety procedures/safe systems of work and approved codes of practice pertaining to their particular work activities.
- Report all incidents that may affect the health and safety of themselves or others and asking for guidance as appropriate.
- Take part in any training designed to meet the requirements of these procedures.
- Report any dangers or potential dangers they identify or any concerns they might have in respect of the provision or use of PPE.
- Take reasonable care of their PPE and report loss or defects to your manager so it can be replaced.
- Never work without PPE when it is known to be necessary and return PPE to its safe storage, where provided, after use
- Inform their manager if they suffer an adverse reaction or sensitivity when using PPE so that advice can be sought from occupational health.

15.5. Workers with protected characteristics

The Equality Act 201013 sets out a number of characteristics which are protected and prevent workers from being discriminated against in relation to these Regulations.

These protected characteristics cover age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sex and sexual orientation.

PPE will need to be suitable and sufficient and, if necessary, consider any protected characteristic such as gender, pregnancy, race, or any disability of the worker.

There is no exemption from the Regulations for disabled people, and suitable PPE must be provided and worn if the risk assessment indicates it is required. This may in some circumstances require adjustments and adaptations to PPE (e.g., a raised sole on protective footwear). Such changes should only be made in consultation with the manufacturer to ensure that the PPE remains suitable and sufficient. Refer to Regulation 4: PPE regulations

15.6. Procedure and Implementation

Risk assessment. A risk assessment is required to determine the need for PPE and the suitability of what is provided. This is required to ensure that only PPE which is fit for purpose for the particular task is provided. The assessment should consider the following:

- Nature of the task to be undertaken (what is the risk?)
- Who is at risk? (risk of contamination to staff, contractor etc.)
- What level of PPE is required?
- Is it appropriate for the risks involved and the conditions at the place where exposure to the risk may occur? e.g., eye protection for pesticides will not offer adequate face protection for someone using an angle grinder to cut steel or stone or welding.
- Does it prevent, and/or adequately control the risks identified without increasing the overall level or risk?
- Can it easily be adjusted to fit the wearer correctly?
- Has the health of the person wearing the PPE been taken into consideration?
- What are the needs of the jobs and demands it places on the wearer? E.g., the length of time the PPE needs to be worn, the physical effort required to do the job, and the requirements for visibility and communication.
- If more than one item of PPE is worn, are they compatible? E.g., does a particular type of respirator make it difficult to enable eye protection to fit correctly?
- Is the PPE compliant with British Safety Standards? PPE that is not compliant must not be used and must be destroyed. If you are unsure, look for the label, and check the datasheet that came with it.

It is the responsibility of the line manager, or Supervisor, to ensure any safety certification, and the risk assessment is reviewed if there is reason to suspect that any PPE certificates of safety are no longer valid, or if there has been a significant change in matters to which it relates. i.e., a safety harness, or lanyard will have a certificate of safety and a datasheet from the manufacturers, which will include the appropriate application, weight capacity, what it's made of, how to adjust, operating temperatures, and the British Standards that apply.

Where, as a result of review, changes in the assessment are required, the manager shall ensure that those changes are made. Where changes are made to the task procedure, then the manager shall ensure that the task is fully reassessed.

15.7. Provision of Personal Protective Equipment

The cost of providing, and maintaining PPE, is to be included within departmental budgets, allowed for within projects, and considered in business or service plans.

The UKCA marking is the product marking used for products being placed on the market in Great Britain (England, Scotland, Northern Ireland, and Wales). The UKCA marking applies to most products for which the CE (Europe & Southern Ireland) marking could be used. The date by which products placed on the GB market must be UKCA-marked which replaces the CE mark used prior to the UK leaving the European Union has been indefinitely extended beyond 2024 for 18 categories of products, PPE included.

Items of PPE clothing (Hard hats, Bump caps, Hi-Viz vests, or jackets etc.), purchased prior to the UK leaving the European Union will have the CE mark applied, and is perfectly safe for use.

Where Respiratory Protective Equipment (RPE) is required, it is usually as a result of a CoSHH risk assessment whereby the hazard, the task, and the work environment are identified and understood. These three points determine that the appropriate RPE is identified and is adequate and suitable for the wearer.

Under the law, RPE is the last line of protection. It is important to note that RPE can be uncomfortable to wear and may interfere with your work, which can lead to incorrect use. It will only protect the wearer if it is correctly worn. Incorrect use, or poorly maintained RPE is unlikely to provide the correct level of protection.

The two main types of RPE are respirators, and breathing apparatus (BA).

- **Respirators**
    - Standard respirators use filters to remove contaminants from the air being breathed in. These can either be non-powered – relying on the wearer's breathing to draw the air through the filter; or
    - Powered respirators – using a motor to pass air through the filter to give a supply of clean air.
- **Breathing Apparatus** needs a supply of breathing-quality air from an independent source (e.g., air cylinder, or air compressor). Respirators and BA are divided into two groups.
    - Tight-fitting facepieces (referred to as masks) rely on having a good seal with the wearer's face. These are available as both powered, and non-powered respirators and BA. A face fit test should be carried out to ensure that the RPE will protect the wearer.
    - Loose-fitting facepieces rely on enough clean air being provided to the wearer to prevent contaminant leaking in (only available as powered respirators or BA). Examples are hoods, helmets, visors, blouses and suits.

15.8. Storage, Maintenance, and Replacement

- Where PPE is maintained for use or reserve supply, it shall be the responsibility of the local manager to ensure that an appropriate area for storage is provided.
- Where PPE is required for use, the local manager will ensure that appropriate and adequate stock levels are maintained and accessible to any staff that may require it.
- Disposable PPE e.g., sterile gloves, surgical masks, shall be discarded immediately after use as clinical or general waste as appropriate.
- Where PPE is not disposable and is maintained for common use, it shall be the responsibility of the last person using it to ensure that it is properly cleaned and, where required, decontaminated. It must be immediately returned to the designated storage and left ready for use by the next person requiring it.
- Where PPE is provided for individual issue, it shall be the responsibility of the individual to ensure that it is maintained, available and ready for use.
- It is the responsibility of the individual to ensure that, before using either communal or personal issue PPE, that it is in good order, being fit-for-purpose, both before and during use.
- It is the responsibility of the local manager to ensure that PPE is in good working order and if required, more intricate repairs maintenance is carried out by appropriately trained persons. Maintenance will vary with the type of equipment and how it is used.

15.9. Defects

- Should a defect of any nature be discovered or develop during use, or a required item lost, that item of PPE must be immediately removed from service, the loss or defect reported to the supervisor/manager, and a replacement obtained before the task may be continued.

- Staff must not tamper with, adapt, or misuse PPE in any way. Such action will be considered a serious matter of misconduct and dealt with as such in accordance with the College Disciplinary procedures.

15.10. Information, Instruction, and Training

- The manager or supervisor must ensure that anyone using PPE is aware of the reason why it is needed, instructed when it is to be used, repaired, or replaced.
- The manager or supervisor will also ensure that employees are trained in the proper use of PPE, how to correctly fit or wear it and its limitations.
- The manager or supervisor must ensure that safety signs are displayed to remind users to wear PPE.

15.11. Monitoring & Compliance

It is the responsibility of managers to:

a. Monitor compliance with this procedure within each faculty, area or department they are responsible for.

b. Conduct regular inspections to verify that PPE is suitable and being properly maintained and ready for use.

c. Ensuring that PPE is well looked after and properly stored when it is not being used.

d. Ensuring PPE is kept clean and in good repair, follows the manufacturer's maintenance schedule (including recommended replacement periods and shelf lives).

e. Investigate when PPE is not being used and take appropriate action.

15.12. Review

- Review the PPE and RPE assessment regularly or when there are changes in the workplace that may affect the validity of the assessment.

15.13. Further Guidance

- HSE ACOP L25 - The Personal Protective Equipment at Work Regulations 1992 (as amended)
- Health & Safety at Work act 1974 - Section 9
- Personal Protective Equipment at Work (Amendment) Regulations 2022
- Control of Substances Hazardous to Health Regulations 2002 (COSHH) Approved Code of Practice and Guidance, L5
- Control of Asbestos Regulations 2012
- Noise at work: The Control of Noise at Work Regulations 2005, L108
- Statutory guidance: Regulation 2016/425 and the Personal Protective Equipment (Enforcement) Regulations 2018
- The Construction (Design and Management) Regulations 2015
- The Control of Substances Hazardous to Health Regulations 2002 (Amt) 2004
- HSE Guidance on Natural Rubber Latex sensitisation in health and social care
- HSE Guidance on Respiratory Protective Equipment (RPE) fit testing 2019
- Confined Space Regulations 1997

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Section 16. Lone Working

16.0. Procedure Statement

This Section explains the requirements to ensure that any staff involved in working by themselves, i.e., Lone Working, may do so safely and without risk to their health. This section provides guidance to all staff and managers on the health and safety issues related to staff working in isolation and or without supervision where there is a risk that is related to the activity being undertaken, of ill health, injury or assault and the consequences aggravated by any delay in receiving treatment. This guidance applies to work that is specifically intended to be conducted unaccompanied or without immediate access to another person for assistance.

16.1. Introduction

According to the Health and Safety Executive 'lone workers are those who work by themselves without close or direct supervision'. Lone working is generally considered to be work that may last some time and is intended to be conducted alone or without immediate access to another person for supervision or assistance.

Lone working could be during normal hours at a remote location within the normal workplace, or when working outside normal hours. A person who is outside the line of sight or shouting distance from any other would be considered to be working alone. For some people this is a routine part of their normal work, for others it may be an occasional but planned occurrence. Lone working may come about because all other people leave the workplace, for example, towards the end of the working day.

There is no general legal prohibition on lone working, but some specific high-risk activities may have a legal requirement for at least one other person to be present and for certain procedures to be followed, for example confined space working, fumigation, and live electrical work.

For all work activities, the broad duties of the Management of Health and Safety at Work Regulations require that the hazards of the work be identified, the risk involved is assessed, and measures are put in place to avoid or control the risks.

Precautions should take account of the normal work and foreseeable emergencies, e.g., fire, equipment failure, illness, and accidents. Lone workers should not be at more risk than other employees thus may require extra risk control measures.

In most cases, any additional risks posed by lone working are due to possible delays in seeking or receiving assistance in the event of emergencies. However, for some tasks, the work environment, equipment, or materials may be unsuitable for use by one person.

This section applies to all College staff and students undertaking work on campus. It is intended to minimise possible adverse effects of lone working.

16.2. Principles of Lone Working

The College will:

- avoid or minimise lone working where there are reasonable, practicable alternatives.
- include lone working in all risk assessments where it is planned or foreseeable that lone working will occur. Risk assessments must be recorded and reviewed at least annually.
- clearly define which activities can and cannot be carried out by lone workers, based on the findings of the risk assessments.
- introduce suitable safe lone working arrangements, including communications and access to assistance, for both normal working and foreseeable emergencies.
- assess the suitability of people for lone working, taking account of their competence, experience and any medical conditions which may place them at additional risk, particularly in emergencies.

- provide all people undertaking lone working with suitable information and training in the safe arrangements for the work, including permitted activities, approved working procedures, communication or monitoring arrangements, and emergency procedures.
- provide appropriate monitoring and supervision, based on the findings of the risk assessment.

16.3. Duties

16.3.1. Managers

For managers, establishing safe working arrangements for lone workers should be no different to organising the safety of other staff. Managers should be familiar with the work that their staff are expected to undertake and assess whether the requirements of the task can be met by a person working alone, and without placing that person significantly more at risk than when working with others.

Not all staff will be suitable to undertake lone working activities, and the manager shall, as far as is reasonably practicable, ensure that lone workers have no known temporary or long-term medical conditions (mental or physical) which would make them unsuitable for working alone and shall take into consideration foreseeable emergency situations. Medical advice should be sought as appropriate from Occupational Health Advisers; if required, HR should be notified.

The Manager shall ensure appropriate risk assessments are done and recorded for activities undertaken by lone workers. The findings of the risk assessments and any necessary control measures implemented shall be brought to the attention of all staff. The manager must be satisfied that all staff understand the control measures and the risks arising from the hazards associated with the activity. Risk assessments shall consider:

- if the working environment presents a special risk to the lone worker (e.g., cramped, excessive temperatures, poor visibility, isolated, slippery/wet, below ground level, etc.),
- if there is safe access and egress (if temporary access equipment (e.g., ladders) is required, can it be managed safely by one person),
- if all the plant and equipment, substances and articles involved in the work can be safely managed by one person,
- if there is a method of communicating with the person working alone and how can that person summon help if needed (e.g., telephone, radio, personal alarm, panic button, etc),
- foreseeable emergency situations (e.g., fire, equipment failures, illness, accidents, deterioration in weather conditions, etc),
- whether a permit to work system is in operation for the specific task.

Managers should define the limits of what can and cannot be done whilst working alone; specify how and when the lone worker should stop working or seek advice in circumstances which are new, unusual or beyond the scope of their training.

Managers shall ensure that lone workers fully understand the hazards associated with the activity and the risks arising from the hazards, the necessary precautions to remove or control the risks, and be sufficiently experienced and competent.

Procedures shall be put in place to monitor the safety and general wellbeing of lone workers, and include, as a minimum, a check at the end of the working period to ensure that the lone worker has safely vacated the work area and is returning to their department, campus, or home.

The extent of supervision required is a manager's decision based on the risk assessment's findings. It is vital staff that will work alone are fully involved in the planning of the work and in setting up the systems that will ensure their safety. Their views must be considered, and the likelihood of needing assistance should be fully discussed.

The responsibility for ensuring safe systems of work is implemented for lone working lies with the person who manages the work; this responsibility cannot be delegated to the lone worker although

they will be implementing it. Therefore, the manager will periodically visit the lone worker (frequency of visits will be dependent on the risk) to observe working practices and confirm that control measures are effective and being complied with and keep a record of such visits. Examples of procedures for monitoring lone workers are shown at Appendix 1.

Lone workers should be capable of responding correctly to emergency situations and any additional emergency arrangements required should be identified and staff trained to implement them. Lone workers shall have access to adequate first aid facilities for treating minor injuries and be trained in first aid to an appropriate level if required.

16.3.2. All Staff

As the management control that can be exercised over lone working staff is limited, staff working alone often have a more active role in managing their own health and safety.

Lone workers must fully understand and implement all management controls put in place to enable the lone working activity to be conducted safely and keep within the scope of the agreed lone work and work areas. Where staff identify that they cannot implement all management controls they must not start work and must contact their manager for advice, e.g., conditions at a work location have changed since their last visit. Staff shall cooperate with their manager, bringing to their attention any concerns that they may have about any workplace health and safety issues, in particular any new hazards that arise during the lone working activity.

If circumstance dictates that an activity becomes an unplanned lone working situation, Staff shall stop the activity if it is safe to do so and inform their manager of the circumstances, any reason(s) why they would be unable to work alone, and request details of any additional control measures they should take prior to commencing the activity.

16.4. Retention of Records

All records, including Risk Assessments, etc. should be kept in accordance with the College document retention policy.

16.5. Related Policies, Procedures, Regulations, Legislation & Guidance

The following sections of this manual should be consulted in conjunction with this section:

- Section 4 - Management of Risk,
- Section 6 - First Aid Procedures,

16.6. Acknowledgements:

- The Management of Health and Safety at Work (MHSAW) Regulations
- The Workplace (Health, Safety and Welfare) Regulations
- Health and Safety Executive Guidance INDG73 – Working Alone in Safety; Controlling the Risks of Solitary Work

Examples of procedures for monitoring Lone Workers

1. Managers / Supervisors periodically visiting and observing people working alone. Post-task discussions should confirm if any problems have been identified that will need addressing.

2. Managers / Supervisors maintaining contact with lone workers using either a telephone or radio. Contact arrangements should be documented as part of the risk assessment. Contact arrangements should ideally be between the supervisor and the lone worker, or with another department member. If this is not possible and the contact is by arrangement with a friend or family member, it is essential that the latter be briefed on the procedure to follow if contact cannot be made.

3. The use of signing-in systems. These are useful for monitoring the safety of lone workers if there is a procedure for actively checking the safety of those who have recorded their presence in a building. Their main use tends to be in a fire or similar emergency as they indicate where people are working in a building. Although Security officers (if applicable) on patrol have a remit for checking on those who have signed into a building out of hours, they are not responsible for monitoring unless this has been specifically agreed with them.

4. Ensuring that there is a person within visual or audible contact. It is not enough to see another person signed into a similar area of the building. It must be agreed that the person is to be a back-up to the lone worker.

5. Automatic warning devices that operate if specific signals are not received periodically from the lone worker (more information available from the H&S Team).

6. Other devices are designed to raise the alarm in the event of an emergency, and which are operated manually or automatically by the absence of activity.

7. Arrangements for checks to be made to ensure that a lone worker has returned to their base or home on completion of a task.

8. Contingency plans specifying the action to be taken should a pre-arranged contact not be made, or an alarm device operate.

9. The TeamSOS App can be used to maintain communication with lone workers.

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Section 17. E-Bikes and E-Scooters

17.0. Procedure Statement

This section sets out the College position on the use of e-scooters and e-bikes on its campuses and summarises relevant guidance from legislation and other College policies and procedures.

The use of sustainable methods of travel is encouraged wherever possible by students, staff, tenants, and visitors, whilst needing to ensure that the safety and comfort of their community is fully considered.

17.1. Introduction

This procedure covers all Activate Learning campuses. It is not intended to include off-site usage, rather it seeks to provide a specific policy for a growing transport technology solution.

17.2. Definitions

- **Electric micro mobility device** includes any small, low-speed, electric-powered transportation device, including electric-assist bicycles (e-bikes), electric scooters (e-scooters), and other small, lightweight, wheeled electric-powered conveyances.
- **E-scooters**: 2-wheeled stand-on scooters propelled by a motor, as well as/instead of being manually propelled. This term is used as shorthand in this policy to cover all powered transporters
- **E-bikes**: bicycles which are propelled by a motor, as well as/instead of being manually propelled
- **Powered transporters**: the Government uses this term to cover a variety of novel personal transport devices which are propelled by a motor, as well as/instead of being manually propelled. It includes e-scooters, Segways, hoverboards, go-peds (combustion engine-powered kick-scooters), powered unicycles, and u-wheels
- **Mobility scooters**: seated 3- or 4-wheel motor-propelled scooters designed to support users with additional mobility needs
- **Manual scooters**: manually propelled 2-wheel scooters
- A **lithium-ion or Li-ion battery** is a type of rechargeable battery which uses the reversible chemical reduction (gain of electrons) of lithium ions to store energy.
- **Electrically assisted pedal cycles'** (EAPCs) include e-Bikes, or electric bikes.
    - An EAPC must have pedals that can be used to propel it.
    - It must show either:
        - The power output or the manufacturer of the motor
    - It must also show either:
        - The battery's voltage or the maximum speed of the bike.
    - Its electric motor:
        - Must have a maximum power output of 250 watts
        - You should not be able to propel the bike when it is travelling more than 15.5mph
    - An EAPC can have more than 2 wheels (for example, a tricycle).

17.3. Legal position

E-scooters are currently classified as Personal Light Electric Vehicles (PLEVs), so they are treated as motor vehicles and are subject to the same legal requirements as any other motor vehicle,

requiring insurance, a valid driving licence, and compliance with various construction and use requirements. They are currently not capable of complying with these latter requirements.

While e-scooters are legally available to purchase, it is currently against the law to ride a privately owned E-scooter in any public place in the UK. This includes roads, pavements, parks, town centres or promenades. The only place a privately owned e-scooter can be used is on private land with the agreement of the landowner.

Activate Learning as a landowner does not permit the use of e-scooters or other powered micro-devices such as e-hoverboards, e-skateboards, e-cycles, or similar devices on campus.

Use of e-bikes (EAPCs) on UK roads and in public spaces where bicycles are permitted is legal within the UK and is therefore allowed on the external areas of any Activate Learning campus provided, they conform to legal standards regarding maximum speed, power, and pedal assistance. You do not need a licence to ride one and it does not need to be registered, taxed, or insured. Refer to the definition above.

Any person who uses a powered transporter on a public road or other prohibited space in breach of the law is committing a criminal offence and can be prosecuted.

Trial schemes are running in specific areas in the UK for the use of approved rental e-scooters only. The rules for private e-scooters and other powered transporters have not changed.

The College campuses are private land. The College does not grant permission for the use of e-scooters on its campuses.

17.3.1. Legislation

As well as the Health and Safety at Work etc Act 1974, the following apply.

- Road Traffic Act 1988.
- The Road Vehicles (Construction and Use) Regulations as amended 2022
- Provision and use of work equipment regulations 1998.

17.4. General principles

- Our campuses are shared by pedestrians, cyclists, and vehicles. To keep everyone safe, all users should be considerate towards other road and path users
- Cycles, Electrically assisted pedal cycles (e-bikes) and manually powered scooters are not permitted on footpaths.
- Cycles and Electrically assisted pedal cycles (e-bikes) must use lights between dusk and dawn so that you can see and be clearly seen
- E-scooters are not permitted on campus to align with them being illegal external to campus
- Mobility scooters and powered wheelchairs used by a disabled person are allowed on campus and on footpaths.
- Bicycles are not permitted to be brought into College buildings unless folded away. They must remain folded away and not create a health and safety hazard (e.g., trip hazard).
- E-bikes, due to the fire risk of the lithium-ion or Li-ion battery, are not permitted to be brought into College buildings.

17.5. Charging e-bikes

Due to the additional fire safety risks associated with the batteries in e-bikes, the charging of these items in College buildings and Halls of Residence is strictly prohibited. The College recommends that users carefully follow the manufacturer's guidance for charging their devices, since there are many reported incidents of these batteries catching fire.

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Section 18. Workplace Requirements

18.0. Procedure Statement

All employers in the UK have a legal duty to provide a safe place to work for their employees, and for members of the public. They must take appropriate measures to protect the health and safety of all persons in the workplace and ensure that suitable welfare facilities are provided. These obligations are enforced by the Health and Safety at Work Act 1974 (HASAWA), and the Workplace (Health, Safety and Welfare) Regulations 1992 that were brought into UK law by The Secretary of State, detail how these duties and obligations will be enacted.

There are some exceptions whereby the Workplace Regulations covered in this policy do not apply, the only area most applicable and of interest to the College is Construction sites, which at the time of writing is covered by the Construction Design and Management Regulations 2015.Since they were introduced, certain elements of the Workplace Regulations have been updated accordingly since then, but primarily, the basis of the regulations have not changed.

18.1. Aim

The aim of this section is to stipulate the minimum requirements of the Workplace as laid out in the Workplace (Health, Safety and Welfare) Regulations 1992, and demonstrates the College's commitment to reducing accidents and exposure to hazards in the workplace. The College shall ensure that every workplace, modification, extension, or conversion which is under its control, complies with the requirements of the Workplace Regulations 1992, and subsequent amendments.

This procedure will enable managers and other accountable persons to comply with the Workplace Health, Safety and Welfare Regulations. It is intended to protect the health and safety of everyone in the workplace, and to ensure that adequate welfare facilities are provided for people at work. This will be achieved by identifying hazards, assessing the risks controlling and mitigating these risks so far as is reasonably practicable.

The requirement is to ensure that workplaces meet the health, safety and welfare needs of all members of a workforce, including people with disabilities (as defined in the Equality Act 2010). Where necessary, parts of the workplace, including in particular doors, passageways, stairs, showers washbasins, lavatories, and workstations should be made accessible for disabled people.

18.2. Definitions

A workplace **means**:

''Any premises or part of premises which are not domestic premises and are made available to any person as a place of work, and includes:

(a) any place within the premises to which such person has access while at work; and

(b) any room, lobby, corridor, staircase, road, or other place used as a means of access to or egress from that place of work or where facilities are provided for use in connection with the place of work other than a public road.''

Premises: means any place (including an outdoor place) on the College Estate.

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

Hazard: a hazard is anything with the potential to cause harm e.g. chemicals, electricity, working at height, noise etc. •

Risk: the likelihood that the hazard will actually cause harm, injury, or damage; it also considers the consequences, extent and outcome of a hazardous event occurring.

Reasonably Practicable: means that you have to take action to control the health and safety risks in your workplace except where the cost (in terms of time and effort as well as money) of doing so is "grossly disproportionate" to the reduction in the risk.

18.3. Scope

This procedure applies to all employees of the College, contractors, agency staff, apprentices, volunteers, young workers, and anyone carrying out work on behalf of the College.

The Workplace Health, Safety and Welfare Regulations apply to a very wide range of environment and include areas within the workplace such as offices, classrooms, lecture rooms, toilets, plant rooms, loading bays, workshops, outside areas. It also applies to communal areas of a shared building such as corridors, restaurants, staircases, lobbies, rest areas, changing rooms, courtyards, balconies, roads, or paths.

The procedure will help the College to understand its regulatory requirements on issues such as ventilation, temperature, lighting, cleanliness, room dimensions, workstations and seating, floor conditions, falls or falling objects, transparent and translucent doors, gates and walls, windows, skylights and ventilators, traffic routes, escalators, sanitary conveniences and washing facilities.

18.4. Responsibilities

Chief Executive Officer

The Chief Executive Officer is the Accountable Officer with overall responsibility for health and safety within the College ensuring compliance with the requirements of The Health and Safety at Work etc., Act 1974, the Workplace (Health Safety and Welfare) Regulations 1992 and the requirements of this procedure.

Executive Directors

All Executive and Non-Executive Directors have corporate responsibility to provide a safe working environment and shall ensure adequate arrangements and resources are provided to implement the requirements of this procedure, all safety Regulations, and any associated safe systems of work; and apply this within their respective areas of responsibility.

Group Directors / Heads of Department

They are responsible for discussing with local managers and supporting them to ensure that the information contained in this procedure is disseminated, the requirements implemented, and ensure clear lines of communication, responsibilities, and cooperation. They are to work with the Property & Environment Department to provide suitable and sufficient equipment for work which is serviced and maintained and put procedures in place to control and safely manage any identified risks.

Managers / Team leads / Supervisors or similar

The above persons responsible for other workers have a duty to:

- Assess work areas annually, or as often as is required, to ensure that they are safe, provide for the general welfare and do not present a risk to for staff, clients, students, visitors, and other persons who may enter them.
- Maintain live copies of the workplace risk assessment via MyCompliance and bring to the attention of staff. Liaise with the Health and Safety Team for any Health and Safety support.
- Undertake specific risk assessments such as for pregnant or nursing mothers, young or disabled persons.
- Enter any significant risks onto the College risk register and include an action plan for reducing/ eliminating the identified risk.
- Ensure adequate measures are in place to manage the use of chemical substances relating to COSHH Management. These include ensuring chemicals are securely stored when not in use, carry out COSHH assessment of chemicals, and that the appropriate warning or identification labels are displayed as required.
- Ensure that all workplaces under your remit are suitable and fit for its intended purpose.
- Ensure that the workplace is spacious, suitable, and sufficient for the work activity which needs to be undertaken.

- Ensure that the workplace, and certain equipment, devices and systems are maintained in efficient working order (efficient for health, safety, and welfare).
- Ensure all staff are familiar and understand the contents of this policy.
- Provide local Induction, Information, Instructions and Training to staff with regard to the workplace and the safe use of equipment to enable them to operate within the workplace safely.
- Ensure a planned routine for maintenance, cleaning, repair and testing by competent persons.
- Retain training records of all training provided to their staff. Records for any mandatory training via ALO will be captured electronically.
- Be aware of how to deal with emergency situations, ensure clear and unobstructed means of escape and communicate clear instructions to their staff.
- Ensure contractors assess the risks of their work activities and put in place measures to protect themselves, and other persons who may be exposed to the work.
- Managers will ensure that all equipment, devices, and systems are:
    - Subject to a system of statutory maintenance.
    - Maintain compliance with the College Provision and Use of Work Equipment Procedure.
    - Used safely by staff they manage.

Employees

All employees have a responsibility:

- To take reasonable care of their health, safety, and wellbeing at work and that of others who may be affected by their acts and omissions.
- To co-operate with management and comply with all health and safety rules and regulations.
- To comply fully with the requirements of this policy.
- To use the workplace, facilities and equipment as instructed.
- Not to interfere with or misuse anything provided for their or others' personal protection or safety.
- Not to carry out any task or use any equipment unless they have received training.
- To perform a visual inspection of the workplace or equipment to ensure that there are no obvious hazards or defects before commencing work.
- To seek further instructions and guidance from their line manager if they believe that their workplace is unsafe.

Property & Environment Department

- Oversee contractor's work to ensure that they comply with the requirements of this procedure.
- Ensure contractors have adequate health and safety arrangements in place for their work activities and that they carry out safe work within the premises.
- To work with departments to establish a system for Plan preventative maintenance, statutory maintenance.
- Ensure that examination, replacement, repair and testing all equipment, devices, and systems is adequate depending on the type of work being undertaken.

- To undertake safety inspections of the premises and outside areas.

The following headings are outlined in the Workplace, Health, and Safety regulations. They reflect the main requirements for minimum workplace standards that contribute to the general working environment of people in the workplace.

18.5. Ventilation

All workplaces are to be ventilated by a sufficient quantity of fresh or purified air. Fresh, clean air should be drawn from a source outside the workplace, uncontaminated by discharges from flues, chimneys or other process outlets and be circulated through the work room. Ventilation should also remove and dilute warm, humid air and provide air movement which gives a sense of freshness without causing a draught.

Windows or other openings may provide sufficient ventilation, but where necessary, mechanical ventilation systems should be provided and regularly maintained. Non-natural ventilation must be fitted with an effective device to give visible or audible warning of any failure, maintained in an efficient state, in efficient working order and in good repair, and subject to a system of statutory and regular maintenance.

18.6. Temperature

Environmental factors (such as humidity and sources of heat), combined with personal factors (such as the clothing the worker is wearing and how physically demanding their works), influences someone's thermal comfort.

Individual personal preference makes it difficult to specify a thermal environment that satisfies everyone. Workplaces where the activity is mainly sedentary, e.g. offices, the temperature should normally be at least 16°C. If work requires physical effort, it should be at least 13°C, (unless other laws require other temperatures).

Every effort should be made to contain extreme temperatures to a reasonable level by insulating hot pipe work and equipment, shading windows, reorganising tasks to build in rest breaks, replace body fluids to combat dehydration or cold, moving workstations within offices away from heat sources, air cooling equipment, acclimatisation of workers to the environment in which they work, medical pre-selection of employees to ensure they are fit to work in environments of extreme temperatures, use of personal protective clothing, training in the precautions, and in all cases, supervision to ensure the precautions identified by the assessment are undertaken.

Where extremes of temperature are not conducive to safety or health, or to productive performance by building / room occupants, the local manager is responsible for conducting a thermal / temperature assessment and reporting the matter to their Group Director for action.

18.7. Lighting

- Lighting should be sufficient to enable people to work and move safely.
- Fixtures shall be located to avoid glare where glare would interfere with the work undertaken or present a risk to health or safety.
- If necessary local lighting should be at individual workstations, and at places of particular risk.
- Lighting levels and light fittings should not create any hazards.
- Automated emergency lighting, powered by an independent source, should be provided when sudden loss of light would create a risk.

18.8. Cleanliness and Waste

- Every workplace, including furniture, furnishings and fittings must be kept clean.
- Materials used should be appropriate for the environment and capable of being cleaned e.g. carpets or fabric covered chairs are not permitted in areas where body fluids cannot be suitably cleaned.
- Surfaces of the floors, walls and ceilings must be kept clean and clutter free.
- Cleaning and the removal of waste should be carried out as per the P&E waste disposal procedure.
- Equipment, chairs, devices no longer fit for purpose should be taken out of service and disposed of appropriately.
- Regular housekeeping of workstations and work areas are necessary to ensure a safe environment is maintained. Items no longer in use or required for the service should be disposed of appropriately.
- Contents of all shelves/shelving are to be stowed neatly to prevent any objects from falling.
- Waste materials in the workplace must not be allowed to accumulate and should be discarded as soon as possible.

18.9. Overcrowding

All offices and staff rooms or similar shall have sufficient floor area, height and unoccupied free space for purposes of health, safety and welfare. The volume of the room, when empty, divided by the number of people working in it should be at least 11 cubic metres per person.

All or part of the room more than 3 metre high, should be counted as 3 metre high. The figure of 11 cubic metres per person is a minimum and may be insufficient depending on the layout, contents, furniture, and the nature of work. Any offices and staff rooms or similar that do not achieve the minimum of 11 cubic metres per person is to be risk assessed and guidance sought from the Regional Health & Safety Officer.

The figure of 11 cubic metres does not apply to:

a. retail sales kiosks, attendants' shelters, machine control cabs or similar small structures, where space is necessarily limited; or

b. rooms being used for lectures, meetings, and similar purposes.

18.10. Workstations and Seating

Workstations should be suitable for the people using them and the work they do, and they should be able to leave their workstations swiftly in an emergency.

If work can or must be done sitting, seats suitable for the people using them and the work they do, must be provided. Seating must give adequate support for the lower back, and footrests should be provided for workers who cannot place their feet flat on the floor.

18.11. Buildings

The condition of buildings must be monitored to ensure that they have appropriate stability and solidity for their use. This includes normal running of the work process (e.g. vibration and floor loadings) and foreseeable risks (e.g. fire in a cylinder store).

18.12. Floors and Traffic Routes

Traffic route, or route for pedestrian traffic, vehicles, or both, includes any stairs, fixed ladder, doorway, gateway, loading bay or ramp. There should be sufficient traffic routes, of sufficient width, and headroom, to allow people and vehicles to circulate safely with ease.

Floors and traffic routes must be suitable for the nature of work and as far as reasonably practicable, be kept free of holes, unevenness and slipperiness that cause tripping hazards and/or obstructions. Criteria for these effects including subsidence, collection of surface water, cracks and ruts, wear and tear, should be determined and set, and regular surveys/inspections and maintenance systems developed to undertake repair when these limits are exceeded, and damage/faults identified.

Access for all types of Fire Appliances are not specified in this regulation, but the mention of “there should be sufficient traffic routes, of sufficient width, and headroom, to allow people and vehicles to circulate safely with ease” means that we must consider the requirements of the local fire authorities, and specifics are defined within the Fire Regulatory (Fire Safety) Reform Order 2005 (summarised below).

“Access roads for fire appliances should be provided with a minimum 10 metre working area(s) at appropriate locations where fire appliances are to be positioned and used around an area or building.”

In wet working areas, floors must be provided with an adequate and effective means of drainage.

Slopes, steps, and stairways must be fitted with an adequate handrail.

To allow people and pedestrians to move safely, the best approach is to keep vehicles and pedestrians apart by ensuring that they use entirely separate routes. If people and vehicles have to share a traffic route, use kerbs, barriers, or clear markings, to designate a safe walkway, and where pedestrians need to cross a vehicle route, provide clear marked crossing points with good visibility, bridges or subways.

Make sure the shared route is well lit. Set appropriate speed limits, and make sure they and other traffic rules are obeyed. Provide route markings and signs so that drivers and pedestrians know where to go and what rules apply to their route, so they are warned of any potential hazards.

18.13. Tanks and Pits

Tanks or pits in any work area shall be securely covered or fenced to prevent anyone falling in. Any walkways across or near tanks or pits shall also be securely fenced.

18.14. Glazed Windows, Doors, Gates and Walls

Windows, transparent or translucent surfaces in walls, partitions, doors, and gates should, where necessary, be made of safety material or be protected against breakage. If there is danger of people coming into contact with it, it should be marked or incorporate features to make it apparent.

Openable windows, skylights and ventilators should be capable of being opened, closed, or adjusted safely and, when open, should not pose any undue risk to anyone. E.g. they should be opened without over-reaching or climbing across furniture.

Windows and skylights should be designed or constructed so that they may be cleaned safely. When considering if they can be cleaned safely, account may be taken of equipment used in conjunction with the window or skylight or of appropriate devices fitted to the building.

Doors and gates should be suitably constructed and fitted with safety devices, if necessary, to prevent a sliding door or gate from coming off its track or falling back during use. If they swing both ways and have conventionally hinged doors on main traffic routes, they should have a transparent viewing panel.

Powered operated doors should have safety features to prevent people being struck or trapped and, where necessary, should have a readily identifiable and accessible control switch or device, so that they can be stopped quickly in an emergency. A safety device should also be fitted to permit manual operation in case the power fails.

18.15. Toilets and Washing Facilities

Suitable and sufficient sanitary conveniences and washing facilities should be provided at readily accessible places. They and the rooms containing them should be kept clean and be adequately ventilated and lit.

Washing facilities should have running hot and cold or warm water, soap and clean towels, or other means of cleaning or drying. If required by the type of work, showers should be provided. All such installations should be subject to regular maintenance in order to ensure the risk of legionella is properly addressed.

Men and women should have separate facilities unless each facility is in a separate room with a lockable door and is for use by only one person at a time.

18.16. Accommodation for Clothing and Changing

Adequate, suitable and secure space should be provided to store workers' own clothing and special clothing. As far as reasonably practicable the facilities should allow for drying clothing.

Changing facilities should be provided for workers who change into special work clothing. It should be accessible from work rooms and washing and eating facilities, and should ensure the privacy of the user, be of sufficient capacity, and be provided with seating.

18.17. Rest and Meal Facilities

There should be suitable, sufficient and readily accessible rest facilities.

Seats should be provided for workers to use on their breaks. These should be in a place where personal protective equipment need not be worn. Rest areas or rooms should be large enough and have sufficient seats with backrest and tables for the number of workers likely to use them at any one time, including suitable access and seating which is adequate for the number of disabled people at work.

Where workers readily eat meals at work, suitable and sufficient facilities should be provided for the purpose. Such facilities should also be provided where food would otherwise be likely to be contaminated.

Work areas can be counted as rest areas and eating facilities, provided that they are adequately clean and there is a suitable surface on which to place food.

Where provided, eating facilities should include a facility for preparing or obtaining a hot drink. Where hot food cannot be obtained in, or reasonably near to the workplace, workers may need to be provided with a means of heating their own food (e.g. microwave).

Canteens or restaurants may be used as rest facilities provided there is no obligation to purchase food.

Suitable rest facilities should be provided for pregnant women and nursing mothers. They should be near to sanitary facilities and where necessary, include the facility to lie down.

18.18. Smoking Facilities

- It is against the law to smoke in virtually all enclosed public places and workplaces, including work vehicles.
- Employees are not permitted to smoke in their cars during work.
- Designated smoking areas are identified on each site.

- Employees and students smoking on site are subject to disciplinary action.

18.19. Drinking Water

There shall be an adequate supply of wholesome drinking water provided. It is advisable that drinking water is conspicuously marked by an appropriate sign where necessary.

Water should only be provided in refillable closed containers where it cannot be obtained directly from a mains supply. The containers should be refilled at least daily.

18.20. References and Links

The Health and Safety Executive guidance leaflet L24 provides information on all workplace matters discussed in this section.

Workplace health, safety and welfare. Workplace (Health, Safety and Welfare) Regulations 1992. Approved Code of Practice and guidance L24

Internal guidance

College Health & Safety Policy

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Section 19. Work Equipment and Abrasive Wheels

19.0. Procedure Statement

This section outlines the procedure for the safe use of work equipment and abrasive wheels at the College. It ensures compliance with the Provision and Use of Work Equipment Regulations (PUWER) and other relevant health and safety legislation.

19.1. Scope

This section applies to all staff and students at the college who use work equipment, including abrasive wheels, in their activities.

19.2. Definition of Work Equipment

Work equipment is any machinery, appliance, apparatus (includes furniture), tool or installation for use at work (whether exclusively or not). This includes equipment which employees provide for their own use at work. The scope of work equipment is therefore extremely wide. The use of work equipment is also very widely interpreted and '...means any activity involving work equipment and includes starting, stopping, programming, setting, transporting, repairing, modifying, maintaining, servicing and cleaning'.

19.3. Roles and Responsibilities

Group Directors:

- Ensure adequate resources and procedures are in place for identifying, recording, testing, maintaining, and inspecting work equipment.
- Communicate relevant procedures to all potential users and ensure defective equipment is reported and isolated.

Managers:

- Ensure work equipment is installed and located safely, with sufficient space for operation and maintenance. Ensure fixed plant and assets are installed and located to minimise risks.
- Adhere to testing and inspection requirements and provide assurance to the Group Director of Faculty and College.
- Provide staff with appropriate information, training, and supervision for the safe use of work equipment.
- Conduct regular departmental spot checks and ensure maintenance is carried out by competent persons.
- Ensure all equipment purchased is safe for use and compliant with relevant safety standards.
- New equipment should carry a Conformité Européenne (CE) mark or UK Conformity Assessed (UKCA) mark and be accompanied by relevant safety documentation.

Staff:

- Comply with all information, instructions, and training provided for the safe use of work equipment.
- Report any unsafe or defective equipment immediately.
- Only operate equipment they are qualified and authorised to use.

Health & Safety Officers

- Ensure work equipment and abrasive wheels are included as appropriate within departmental inspections.

19.4. Safe Use of Abrasive Wheels

Selection and Installation:

- **Managers and Operators**: Ensure abrasive wheels are suitable for the task and comply with safety standards.
- **Operators:** Install wheels correctly as trained, following manufacturer instructions and ensuring they are guarded to prevent access to dangerous parts.

Training and Supervision:

- **Managers**: Provide training on the correct handling, mounting, and use of abrasive wheels.
- **Managers and Operators**: Ensure only trained and authorised personnel use abrasive wheels.

Operation:

- **Operators:** Operate abrasive wheels within the specified maximum rotation speed.
- **Operators:** Use appropriate personal protective equipment (PPE) to protect against flying fragments and other hazards.
- **Managers and Operators**: Ensure emergency stop devices are functional and cannot be easily bypassed.

Maintenance and Inspection:

- **Managers and Operators**: Conduct regular inspections of abrasive wheels to check for defects, damage, or wear.
- **Operators**: Maintain wheels in a safe condition and replace them as necessary.
- **Managers and Operators**: Record inspection results and take corrective actions if any issues are identified.

19.5. Record Keeping

- **Managers**: Retain risk assessments and associated documents as per the college's record retention policy.
- **Managers**: Maintain records of training, inspections, and maintenance activities.

Related Documents

- Provision and Use of Work Equipment Regulations (PUWER)
- HSE L22 – Safe use of work equipment
- HSE INDG229 - Using work equipment safely
- HSE HSG17 Safety in the use of abrasive wheels

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Section 20. Use of Lifting Equipment

20.0. Procedural Statement

This section aims to ensure the safe use, operation, and maintenance of lifting equipment at Activate Learning. It outlines the responsibilities, safety measures, and emergency procedures to minimise risks associated with lifting operations.

20.1. Scope

This section applies to all staff, students, contractors, and any other parties involved in the use, operation, or maintenance of lifting equipment at Activate Learning.

20.2. Key Principles

- Ensuring compliance with the Lifting Operations and Lifting Equipment Regulations (LOLER) 1998 and other relevant legislation.
- Prioritising the safety and well-being of all individuals involved in lifting operations.
- Implementing appropriate risk assessments and control measures to mitigate hazards associated with lifting equipment.

20.3. Responsibilities

Group Health and Safety Manager

- Providing competent health and safety advice regarding lifting equipment.
- Ensuring compliance with relevant legislation and internal policies, procedures and this manual.

Managers

- Ensuring that all staff involved in the use of lifting equipment receive appropriate training and are aware of their responsibilities.
- Identifying job-specific training needs and ensuring that employees complete the relevant mandatory training.

Health and Safety Officers

- Conducting regular inspections and audits of lifting equipment to ensure compliance with safety standards.
- Providing guidance on the safe operation and maintenance of lifting equipment.
- Assisting in the completion of risk assessments and ensuring appropriate control measures are in place.

Employees

- Completing all mandatory health and safety training related to lifting equipment.
- Adhering to all safety guidelines and procedures when operating or maintaining lifting equipment.

20.4. Safe Operation of Lifting Equipment

Risk Assessment

- Managers are to conduct comprehensive risk assessments to identify potential hazards associated with lifting operations.
- Managers are to implement appropriate control measures to mitigate identified risks, including the use of personal protective equipment (PPE) and safety devices.

20.5. Safe Operating Procedures

Managers and Operators

- Ensure that all lifting equipment is operated in accordance with the manufacturer's guidelines and relevant legislation.
- Provide adequate and suitable instructions for the safe operation of lifting equipment, including actions to be taken in the event of an emergency.
- Ensure that all lifting equipment is clearly marked with its Safe Working Load (SWL) and that this is not exceeded during operations.

20.6. Maintenance and Inspection

Managers and Operators

- Conduct regular maintenance and inspections of lifting equipment to ensure it remains in safe working condition.
- Ensure that any maintenance work is carried out by competent personnel and in accordance with the manufacturer's guidelines.
- Keep records of all maintenance and inspection activities, including thorough examination reports as required under LOLER.

20.7. Emergency Procedures

Managers and Operators

- Develop and implement emergency procedures for dealing with incidents involving lifting equipment.
- Ensure that all staff are trained in emergency procedures and are aware of the actions to be taken in the event of an emergency.

20.8. Compliance and Review

- Ensure all lifting equipment complies with the Lifting Operations and Lifting Equipment Regulations (LOLER) 1998 and other relevant legislation.

20.9. Conclusion

Activate Learning is committed to ensuring the safe use, operation, and maintenance of lifting equipment. This section will be reviewed regularly to ensure it remains effective and compliant with current legislation.

20.10. Further Guidance

HSE Approved Code of Practice L113 - Lifting Operations and Lifting Equipment Regulations 1998 guidance on Regulations

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Section 21. Noise at Work

21.0. Procedural Statement

Exposure to any noise at work which may result in harm or ill health must be prevented, or where this is not reasonably practicable, a suitable and sufficient assessment of the risk is conducted, and steps taken to meet the requirements of the regulations. Failure to assess the health risks or to prevent exposures from noise at work where reasonably practicable to do so is a breach of legislation.

21.1. Introduction

The Control of Noise at Work Regulations 2005 (CNAWR) does not apply to members of the public exposed to noise from their non-work activities or making an informed choice to go to noisy places, nor do they apply to low-level noise which is a nuisance but causes no risk of hearing damage.

Noise induced hearing loss is a significant and yet preventable problem. The CNAWR tighten the values at which employers must act, in line with the European Physical Agents (Noise) Directive and it is the Health and Safety Executives (HSE) belief that if the 2005 Regulations are complied with, they should eventually eliminate disability from occupational noise induced hearing

21.2. Scope

This Section applies to all those employed by the College as well as those working on behalf of the College (for example, contractors).

21.3. Glossary of Terms

The key terms used in this section are explained in the Glossary of Terms (which is at Appendix 1 of this section).

21.4. Noise at Work

Exposure to excessive noise is regarded as a major health hazard as it may cause temporary or permanent loss of hearing or tinnitus (ringing, whistling, buzzing or humming in the ears), a distressing condition which can lead to disturbed sleep. The ear may be able to cope with some intermittent exposures to loud noise although there may be some temporary changes to perception or a short-term ringing in the ears. Permanent damage can be caused immediately by sudden extremely loud noises, e.g. from cartridge-operated machines, but permanent hearing loss is usually gradual, caused by prolonged exposure over many years. Young people can be damaged just as easily as the old, but the problem is often not noticed until it combines with natural hearing loss due to ageing. Then the person may find they can no longer no longer hear instructions as easily or follow conversations in a crowd, have trouble using the telephone, and confuse similar words because they find it difficult to catch sounds like 't', 'd' and 's'. Their families may complain about the television being too loud, having to shout or being accused of mumbling.

The Control of Noise at Work Regulations 2005, which came into force on 6 April 2006, apply to almost all work activities. They require employers to prevent or reduce risks to health and safety from exposure to noise at work. The guidance to the Regulations states that, as a simple guide, action to reduce exposure may need to be considered if people have to raise their voices to carry out a normal conversation when about two metres apart; if they use noisy powered tools or machinery for more than half an hour a day; or the work produces very loud impact or explosive sounds. Unwanted noise in general work and study areas may be distracting but is not a health hazard within the meaning of the Regulations.

Potentially hazardous noise exposure is generally incidental to carrying out an activity, for example use of process equipment, power tools or hand tools. The College has identified a number of teaching and support activities and areas with potentially significant noise exposures of this type. These include Faculty workshops e.g. engineering workshops; carpentry workshops; vehicle and maintenance workshops; plant rooms; IT server rooms; reprographics rooms; etc. Surveys to date have identified few of these have the potential to expose staff or students to hazardous levels of noise.

Noise exposure may also be deliberate, for example playing or listening to music. The College's teaching activities, for example in music technology, performing arts and media, potentially have significant noise exposures. Music activities presently carried out at the College may not exceed the noise regulation action levels. Regular reviews to verify that they remain below the regulatory action levels of noise levels produced during the music periods of teaching should continue. The HSE web pages 'Sound Advice', relating to noise associated with music can be accessed via:

http://www.hse.gov.uk/noise/musicsound.htm.

This section sets out the College arrangements to manage and minimise noise exposure, and to provide hearing protection only where technical and organisational measures have not reduced the noise exposure below the action levels in the Regulations or as a short-term measure while other methods of controlling noise are being developed.

The College strives to ensure that an environment conducive to learning, research and other work, is maintained by minimising the adverse impact of noise without placing unreasonable restrictions on development or adding unduly to the costs and administrative burdens. As such, noise at a level that is not considered harmful by the Noise at Work Regulations, may still require consideration.

Noise that is not considered to be harmful under the Noise at Work Regulations, may still impact the ability to maintain an environment that is conducive to learning, research or other work. In these cases, principles of reduction should also be applied and an environmental impact assessment completed. An example would be the introduction of an activity that increased background noise (typical background noise in an office for example is 55db) either continuously or for regular, repeated intervals. The impact assessment should consider the expected noise level, noise characteristics, area, duration and frequency in order to determine whether it is likely to be a nuisance to those working/studying in the area or for occupants in adjacent buildings. Noise characteristics and levels can vary substantially according to their source and the type, so it is important to consider the character of the noise just as much as its level when considering nuisance. Sudden impulses, irregular noise or noise which contains a distinguishable continuous tone all require special consideration as these are likely to increase the scope for complaints.

In most cases the provisions of this section will apply equally to employees and to students attending lectures and practical sessions; the term 'workers' is used to cover both. Where legal requirements and the section apply specifically to employees only, that term is used.

21.5. Noise Level Measurement

Noise levels are generally expressed in decibels (dB). Examples of common noise levels would be:

- 50-60 dB - normal conversation
- 80 dB - noisy street
- 100 dB - pneumatic drill
- 125 dB – chain saw

An increase of 3dB may be barely noticeable because of the way ears work, but it means a doubling in the sound intensity. Small changes in numbers can have a far more significant on the ears than they may seem.

21.6. Noise Exposure Action Values and Limit Values

The Control of Noise at Work Regulations 2005 require specific action at certain action values and set maximum values which must not be exceeded:

- Lower exposure action value
  - exposure averaged over a working day or week of 80 dB
  - maximum noise exposure (peak sound pressure) in a working day of 135 dB
- Upper exposure action value

  - daily or weekly exposure of 85 dB
  - peak sound pressure of 137 dB
- Exposure limit values – Must not be exceeded
  - daily or weekly exposure of 87 dB
  - peak sound pressure of 140 dB

These exposure limit values take account of any reduction in exposure provided by hearing protection, i.e. the values are the noise experienced at the ear.

21.7. Responsibilities

The College will:

- Ensure staff and students are not exposed to persistent or instantaneous noise of a kind that would be detrimental to hearing.
- Ensure that an environment which is conducive to learning, research and other work is maintained. This includes ensuring that staff and students are not exposed to excessive, persistent noise that is not defined as harmful under the Noise at Work Regulations
- Keep up with good practice and relevant education sector and industry standards for noise control
- Encourage continuous improvements

21.7.1 Group Directors must:

- Ensure that noise is considered in risk assessments and reviews for relevant activities. Formal assessment of the risk to health is required where noise levels exceed the lower exposure action value
- Reduce noise exposure levels so far as is reasonably practicable, by reducing the production of noise by applying the principles of reduction as set out in the Noise at work Regulations
- Ensure that those that are exposed to harmful noise are given appropriate information and training
- Consider alternative processes, equipment and/or working methods which will make the work quieter or mean people are exposed for shorter times
- Consider noise levels when purchasing new equipment, and where possible specify and purchase quieter equipment
- Consider noise levels when installing or relocating equipment or activities, and where possible make adjustments to minimise noise production
- Have maintenance arrangements that ensure equipment continues to operate properly and does not become noisier over time
- Request of the Health and Safety Team that an area of concern is the subject of a noise survey to ascertain if it requires scheduled two-yearly noise surveys
- Provide suitable hearing protection to workers (staff and students), on request, where the personal noise exposure is between the lower and upper exposure action values
- Designate and provide signage for hearing protection zones where exposure to workers is equal to or exceeds the upper exposure action value
- Keep a record of all workers (staff and students) exposed to noise levels exceeding the upper exposure action value
- Inform workers (staff and students) where the personal noise exposure is above the upper exposure action value and provide relevant information

- Provide suitable hearing protection to workers (staff and students) in designated hearing protection zones, and require and supervise its wearing
- Where hearing protection is provided (on request or mandatory), provide suitable training and instruction on correct fitting, maintenance and suitable storage
- Where hearing protection is mandatory, provide suitable supervision to ensure rules are followed and hearing protection is being used properly. Where necessary, the College's disciplinary procedures should be followed
- Refer employees to the Health and Safety Team for health surveillance (hearing checks) if they are likely to be regularly exposed above the upper exposure action values, or are at risk for any reason, e.g. they already suffer from hearing loss or are particularly sensitive to damage
- Consider and control noise that is not considered to be harmful under the Noise at Work Regulations but may still impact the ability to maintain an environment that is conducive to learning, research and other work
- Ensure an environmental impact assessment is completed before new practices that may increase noise are introduced

21.7.2. Health & Safety Team will:

- Carry out or arrange a noise survey of all relevant areas every two years, or sooner if problems are reported; keep records of all noise surveys undertaken.
- Provide survey findings to the relevant Group Director and provide advice on any necessary remedial actions
- Arrange for appropriate health surveillance (hearing checks) of relevant employees

21.7.3. Procurement will:

Advise Group Directors on drawing up suitable contract specifications with the advice of the Health & Safety Team if necessary.

21.7.4. Staff must:

- Notify their manager or the regional H&S Officer if they suspect a noise risk in their workplace.
- Use hearing protection provided for mandatory use in designated hearing protection zones
- Attend health surveillance (hearing checks) if requested to do so by the Health & Safety Team

21.7.5. Students are required to:

- Use hearing protection provided for mandatory use in designated hearing protection zones

21.8. References and Links

- HSE Guidance on Hearing protection
- HSE Brief guide to a noise at work
- HSE How do I reduce noise
- HSE Don't lose your hearing
- HSE Health Surveillance

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Section 22. Vibration at Work

22.0. Procedural Statement

Exposure to any vibration at work which may result in harm or ill health must be prevented, or where this is not reasonably practicable, a suitable and sufficient assessment of the risk is conducted, and steps taken to meet the requirements of the regulations. Failure to assess the health risks or to prevent exposures from vibration at work where reasonably practicable to do so is a breach of legislation.

22.1. Introduction

Hand arm vibration (HAV) and whole-body vibration (WBV) are possible consequences from using equipment with a vibration hazard at work or in the home. The Control of Vibration at Work Regulations 2005 govern the management of this hazard in the workplace. The Health and Safety Executive (HSE) have also produced two guidance documents to accompany these regulations, 'L140 Hand-arm vibration - The Control of Vibration at Work Regulations 2005' and 'L141 Whole-body vibration - The Control of Vibration at Work Regulations 2005' both of which are linked as a pdf at the end of this section in an appendix. You should read the aforementioned guidance documents L140 and L141 prior to attempting to complete the risk assessment, as these are extensive and useful on a practical level.

22.2. Scope

This Section applies to all those employed by the College as well as those working on behalf of the College (for example, contractors).

22.3. Glossary of Terms

The key terms used in this section are explained in the Glossary of Terms (which is at Appendix 1 of this section).

22.4. Exposure Limits

There are limits of exposure to vibration for both HAVs and WBV, as follows:

- HAVs
    - Exposure action value (EAV) 2.5 m/s2A(8) averaged over an 8-hour period at which a number of actions are required
    - Exposure limit value (ELV) 5 m/s2A(8) over an averaged 8-hour period to which the user is not allowed to be exposed
- WBV
    - Exposure action value (EAV) 0.5 m/s2A(8) averaged over an 8-hour period at which a number of actions are required, see below in guidance
    - Exposure limit value (ELV) 1.15 m/s2A(8) over an averaged 8-hour period to which the user is not allowed to be exposed

22.5. Health effects

HAVs. According to HSE L140, page 43, symptoms include the following:

a) Neurological – numbness and tingling in the fingers and a reduced sense of touch, temperature and pain perception; symptoms lasting more than 20 minutes after vibration exposure are likely to be pathological. These effects can make it difficult to feel, and to work with, small objects.

b) Vascular – temporary reduction in blood circulation in the fingers with parts of the fingers becoming white (blanched). This effect is sometimes known as vibration white finger (VWF): the fingers feel numb when blanched. As blood circulation returns to normal, either by itself or after rewarming the fingers, they can be throbbing, red and painful. Although vibration causes VWF, it usually does not bring on the white finger attacks. The main trigger is exposure to the

cold, e.g. being outdoors during winter, or by cooling in otherwise warm environments. Initially, the tips of the fingers are affected

but symptoms usually get worse, and the effects spread along the finger towards the palm with continuing exposure. The thumb may also be affected. Rarely, in very advanced cases, blood circulation may be permanently reduced in the affected fingers.

c) Musculoskeletal – joint pain and stiffness in the hand and arm. Grip strength can be reduced. An increase of 3dB may be barely noticeable because of the way ears work, but it means a doubling in the sound intensity. Small changes in numbers can have a far more significant on the ears than they may seem.

WBV

In HSE L141, it highlights that the main health effect of someone exposed to WBV is back pain. However, it must be remembered that there are many other, and more likely, reasons for back pain including poor posture whilst sitting/operating controls, sitting still without changing positions for an extended period of time, manual handling or repeated movements such as jumping down from cabs.

Pre-existing conditions

Staff with pre-existing conditions, as follows, may be more sensitive to vibration:

a) Employees with existing HAVS or other diseases of the hands, arms, wrists or shoulders

b) Employees with diseases affecting blood circulation, e.g. primary Raynaud's, or nerve disorders affecting the hands or arms, e.g. carpal tunnel syndrome

22.6. Organisation and management responsibilities

The College will:

- Ensure staff and students are not exposed to vibration of a kind that would be detrimental to health as per paragraph 22.5 above.
- Ensure that an environment which is conducive to learning, research and other work is maintained.
- Keep up with good practice and relevant education sector and industry standards for vibration control
- Encourage continuous improvements

22.6.1 Group Directors must:

Group Directors are responsible for the health and safety of the staff and students within their area of responsibility i.e. team, department, office, faculty, campus etc. They must ensure that suitable arrangements are in place to implement the process within this section and that there is suitable monitoring arrangements to advise them that appropriate control measures are in place to reduce the risk to staff and students.

Group Directors are to:

- Ensure that vibration is considered in risk assessments and reviews for relevant activities. Formal assessment of the risk to health is required where vibration levels reach the Exposure action value (EAV)
- Reduce vibration exposure levels so far as is reasonably practicable, by reducing the production of vibration by applying the principles of reduction as set out in the Control of Vibration at Work Regulations 2005
- Ensure that those that are exposed to harmful vibration are given appropriate information and training
- Consider alternative processes, equipment and/or working methods which will result in people exposed for shorter periods of time.
- Consider vibration levels when purchasing new equipment.

- Consider vibration levels when installing or relocating equipment or activities, and where possible make adjustments to minimise vibration production
- Have maintenance arrangements that ensure equipment continues to operate properly and does not worsen over time
- Request of the Health and Safety Team that an area of concern is the subject of a vibration survey to ascertain if it requires scheduled vibration surveys
- Keep a record of all workers (staff and students) exposed to vibration levels meeting or exceeding the EAV or ELV.
- Inform workers (staff and students) where the personal vibration exposure is meeting or exceeding the EAV or ELV and provide relevant information
- Refer employees to the Health and Safety Team for health surveillance (HAV / WBV) if they are likely to be regularly exposed, or are at risk for any reason, e.g. they already suffer from HAV / WBV or are particularly sensitive to damage
- Consider and control vibration that is not considered to be harmful under the Vibration Regulations but may still impact the ability to maintain an environment that is conducive to learning, research and other work

22.6.2. Managers must:

It is the responsibility of the Manager (henceforth, the title of 'Manager' includes any managerial position for the purposes of this section) to ensure the health and safety of staff under their supervision.

- ensure that suitable and sufficient risk assessments (RA) are in place to control the risk from vibration
- ensure all those possibly affected are aware of the outcome of this RA
- ensure any staff that are identified as requiring health screening or surveillance (HS) from that risk assessment are notified to the Health & Safety Team prior to any exposure and that they attend their health surveillance appointment and that any outcomes of the HS are implemented
- ensure sufficient supervision of staff and record on the job training undertaken (on iTrent)
- provide or ensure that training is provided in a timely manner.

22.6.3. Staff

Staff have specific responsibilities as follows:

- read and understand the outcome of the risk assessment and any associated department protocols / safe system of work for the work
- undertake training provided on working safely with vibrating equipment
- complete and submit health screening form or attend health surveillance appointments (if required) and action any advice in conjunction with your manager
- report to your manager any health effect if suspected they are related to exposure to vibrating equipment
- follow all other safety protocols provided

22.6.4. Health & Safety Team will:

- Provide guidance and advice on control measures for staff using vibrating equipment
- Assist with organising vibration measurements, if applicable
- Assist the Manager in investigating suspected or confirmed cases of ill-health if required
- Manage the provision of an appropriate health screening and surveillance programme

- Provide advice and guidance following HS on managing/limiting exposure (if required) or refer to OH via the HRBP.

22.6.5. Regional Health & Safety Officers

Regional Health & Safety Officers have the same core responsibilities as set out in the H&S Policy and but may have additional responsibilities within their areas, but listed are the minimum:

- provide advice to managers/staff on risk assessment process and best available control measures
- ensure that a suitable method of audit is in place to be used to monitor a safe system regarding any known vibration risks and provide a review to the appropriate Group Director at suitable intervals
- provide or assist in providing local training as required following risk assessment
- raise any concerns and act as a link between the Health and Safety Team and Faculty / Group Services Department.
- assist in the investigation of any suspected or confirmed cases of ill-health attributed to exposure to vibrating equipment

22.6.6. Procurement will:

Advise Group Directors on drawing up suitable contract specifications with the advice of the Health & Safety Team if necessary.

22.7. Risk assessment

A risk assessment should be undertaken which takes into account the following factors:

a) Identify which tasks could have an impact on or have a risk of HAVs or WBV

b) A reasonable estimation of exposure and a comparison with the ELV and EAV

c) Available risk controls

d) Identifying those at risk and those who may be more at risk, for example staff who already have HAVs

e) Identifying current control measures and which additional control measures that may be required if vibration needs to be reduced

f) Identify if health screening or surveillance is appropriate

It is also good practice to formulate an action plan on how you will implement these controls with manageable timescales and identified staff responsible for each task.

The Risk module on MyCompliance can be used to undertake this risk assessment. Guidance to support the risk assessment can be found in appendix 1 of this section and the HSE have also provided a checklist at https://www.hse.gov.uk/vibration/hav/advicetoemployers/index.htm#problem to ascertain if a risk assessment is required

22.8. Training and Supervision

22.8.1 Training

All staff must be trained appropriately in how to safely undertake their jobs. This includes how to correctly use the equipment to reduce possible exposure to vibration.

If vibration is a risk, then employees must be informed of the outcome of the risk assessment, the controls which have been put in place to reduce the risk and the requirement to complete a health screening form or attend health surveillance (if appropriate). They should also be told which symptoms of vibration exposure to look out for and encouraged to report these to their manager to ensure that control measures are reviewed. They should also be encouraged to report issues with their equipment, for example if they feel that vibration levels have increased significantly.

22.8.2 Supervision

Managers must monitor their staff and students for compliance in the use of control measures, meeting training requirements, completion of health screening form or attendance at health surveillance appointments as per paragraph 22.6.2.

The level of supervision must also be appropriate, based on the competence level of the staff or student.

22.9. Health screening and surveillance

22.9.1 Health screening

Any staff who have pre-existing or ongoing health issues which could be affected by any vibration exposure must complete the health screening form prior to any exposure. The risk assessment process, or key jobs hazards evaluation process at recruitment stage, should have identified any such staff.

22.9.2. Health surveillance

HAVs. Health surveillance is required for those employees who are exposed at or above the EAV and also to those identified as particularly at risk for HAVs following the health screening above. Once these staff are identified, please contact your HRBP to discuss the matter with the College Occupational Health Service provider.

WBV. Health surveillance is not appropriate for WBV as it fails to meet the criteria for the requirement for health surveillance. However, any staff exposed to WBV should be encouraged to report any instances of low back pain or increases in low back pain following a period of possible exposure. These symptoms should be reported to the manager.

22.9.3. Occupational disease. Certain occupational diseases are reportable to the HSE under RIDDOR. These include:

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

b) carpal tunnel syndrome: where the person's work involves regular use of percussive or vibrating tools

This must be diagnosed by a doctor. If diagnosed, then the Health and Safety Team must be notified immediately.

22.10. References and Links

The Health and Safety Executive has a website dedicated to vibration, where you will find leaflets which can be used to inform your staff of the risks, as well as helpful advice for you as the manager.

http://www.hse.gov.uk/vibration/index.htm

http://www.hse.gov.uk/vibration/hav/index.htm

http://www.hse.gov.uk/pUbns/priced/l140.pdf

http://www.hse.gov.uk/vibration/hav/readyreckoner.htm

http://www.hse.gov.uk/vibration/hav/vibrationcalc.htm

http://www.hse.gov.uk/vibration/wbv/index.htm

http://www.hse.gov.uk/pUbns/priced/l141.pdf

Internal guidance

College Health & Safety Policy

22.11. Appendices

Appendix 1 - guidance on how to undertake a suitable and sufficient risk assessment

Guidance On How To Undertake A Suitable And Sufficient Vibration Risk Assessment

The Risks module within MyCompliance should be used in conjunction with the following guidance.

Guidance for risk assessment completion

a) Identify which tasks could have an impact on or have a risk of HAVs or WBV

The following tasks, when undertaken on a regular basis and over a large part of the day, could have an impact on HAVs or WBV. These are examples only and are not comprehensive.

HAVs

- Handheld powered machinery, such as hedge trimmers, chainsaws, power drills, angle grinders, etc.
- Hand fed machinery such as pedestal grinders or jigsaws
- Hand guided machinery such as mowers
- Further examples are given on page 65 of L140 (although this list is tabling vibration magnitude data, it also lists many typical jobs which could expose workers to vibration)

WBV

- Sit on mowers
- Equipment driven or operated which generally drives over un-tarmacked or very uneven road surfaces
- Further examples are given in the HSE guide L141. However, there will likely be few occasions in the College where WBV is a significant hazard.

b) A reasonable estimation of exposure and a comparison with the ELV and EAV

Trigger time

In the first instance, simply watching an operative and recording how long they use a piece of equipment for over a shift/day (or as long or short as is required to get a representative overview of how they use the equipment) should give a reasonably accurate estimate of time spent. If their workday varies, you may need to observe over a few days to get an accurate estimation of time spent.

Vibration magnitude

Once you have an accurate estimation of time, you will need to gather the vibration magnitude data for each piece of equipment being used. This can usually be obtained from the manufacturer/supplier or there are various sources online, such as the Health and Safety Executive website which provides a list of 'typical vibration levels for common tools which lists various common pieces of equipment and their likely vibration magnitude.

You must be sure that the vibration magnitude data is as accurate as it can be, for example, some manufacturers/supplier's data is based on laboratory tests not actually using the equipment as it would be in the workplace which will likely underestimate the vibration magnitude. You should read L140 Part 2 (page 30) for HAVs and L141 Part 3 (in particular pages 31-35) for WBVs in detail before attempting to estimate the possible exposure.

There may also be a need to measure actual vibration magnitude on equipment as it is being used. This will only be likely if no vibration magnitude data is available from the manufacturer or other sources or if the piece of equipment is being used in a novel way and the data available cannot be used as a comparison. However, there are limitations to this measurement and data gathered, therefore this should only be considered once the above have been exhausted.

If in doubt, or if you feel actual vibration measurements may be required, contact the Health & Safety Team.

Ready reckoner

Once you have the above information, you can use a ready reckoner or the vibration calculator produced by the HSE, available online, to work out the possible exposure for HAVs.

If the exposure levels are well below the EAV (see bullets below), then you should record this and note down why no further actions may be required at this time. However, remember that risk should always be reduced as low as reasonably practicable therefore if there are simple changes which could reduce the risk even further, you should still implement those. Also, those staff at more risk, for example those already diagnosed with HAVs, may require a reduction, even if the exposure level is below the EAV.

If the exposure levels are close or above the EAV, then you must look at further control measures to implement. If exposure levels are above ELV levels, then you must discontinue the work immediately, and you cannot recommence until exposure levels are reduced below the ELV.

Using the ready reckoner will result in a numerical value being assigned. This will fall into one of the following categories, with indicated actions required:

- 400 points or more or 5 m/s2 and above ELV – high priority, stop work as it currently stands and must reduce to below this to as low as practicable
- 100 to 399 points or above EAV 2.5 to 5 m/s2 – medium priority and should reduce to as low as practicable
- less than 100 points or less than EAV 2.5 m/s2 – low priority, likely no further action required although if you can reduce the level, then this should be implemented

c) Available risk controls

You should investigate if alternative low vibration equipment is available, or if different or specific ways of working are advised by the manufacturer to reduce exposure to vibration and replace as necessary.

d) Identifying those at risk and those who may be more at risk, for example staff who already have HAVs

Identify all staff who regularly use the equipment being assessed. Ensure that any staff at particular risk, such as those with HAVs or other pre-existing or ongoing health issues which could be affected by vibration exposure, as follows:

- Employees with existing HAVS or other diseases of the hands, arms, wrists or shoulders
- Employees with diseases affecting blood circulation, e.g. primary Raynaud's, or nerve disorders affecting the hands or arms, e.g. carpal tunnel syndrome

and those who are pregnant or young workers, are also identified to ensure extra controls are put in place to reduce the risk to them. Certain work environments can also put staff at a higher risk, such as those which are very cold or wet or roads which are particularly uneven, and these should also

be identified. Highlight these staff members clearly on the risk assessment form or undertake a specific risk assessment (i.e. PRA) for them.

e) Identifying current control measures and which control measures may be required if vibrations need to be reduced

You should list all controls currently in use to reduce the exposure levels, for example job rotation, or limiting amount of time using equipment. This should be noted on the risk assessment and how it reduces the risk.

Then identify any changes required to reduce the risk further. If these are simple, such as work rotation, then toolbox talks etc. may suffice in passing this information on to staff. However, many changes may take time, and an action plan should be put in place, with appropriate timescales and assigned actions, to ensure they are implemented.

Regulation 6 in L140 (for HAVs) and L141 (for WBV) gives many examples of how to control or reduce vibration exposure and should be read before completing this part of the risk assessment.

f) Identifying if health surveillance is required

If, after controls have been implemented as above, the exposure is still at or just below the EAV, or there are staff at particular risk, then those staff should be added to the health surveillance programme managed by the Health & Safety Team,

g) Maintenance

You should always have a maintenance regime in place for all equipment as this will assist in extending the life of the piece of equipment. As equipment becomes older, it often starts to vibrate more, therefore older equipment may pose a higher risk than new equipment and this must be considered in the risk assessment.

h) Review of risk assessment

The risk assessment should be reviewed on a regular basis. This may be annually, after an accident or incident, or if health surveillance has identified a possible issue in control measures following an increase in symptoms.

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Section 23. Use of Pressure Systems

23.0. Procedural Statement

This section aims to ensure the safe use, operation, and maintenance of pressure systems at Activate Learning. It outlines the responsibilities, safety measures, and emergency procedures to minimise risks associated with pressure systems.

23.1. Scope

This procedure applies to all staff, students, contractors, and any other parties involved in the use, operation, or maintenance of pressure systems at Activate Learning.

23.2. Key Principles

- Ensuring compliance with the Pressure Systems Safety Regulations (PSSR) 2000 and other relevant legislation.
- Prioritising the safety and well-being of all individuals involved in the use of pressure systems.
- Implementing appropriate risk assessments and control measures to mitigate hazards associated with pressure systems.

23.3. Responsibilities

Group Health and Safety Manager

- Providing competent health and safety advice regarding pressure systems.
- Ensuring compliance with relevant legislation and internal policies/procedures.

Managers

- Ensuring that all staff involved in the use of pressure systems receive appropriate training and are aware of their responsibilities.
- Identifying job-specific training needs and ensuring that employees complete the relevant mandatory training.
- Producing risk assessments for any activities involving pressure systems and bringing it to the attention of users.

Health and Safety Officers

- Conducting regular inspections and audits of pressure systems to ensure compliance with safety standards.
- Providing guidance on the safe operation and maintenance of pressure systems.
- Assisting in the completion of risk assessments and ensuring appropriate control measures are in place.

Employees

- Completing all mandatory health and safety training related to pressure systems.
- Adhering to all safety guidelines and procedures when operating or maintaining pressure systems.

23.4. Safe Operation of Pressure Systems

Risk Assessment

- Managers are to conduct comprehensive risk assessments to identify potential hazards associated with pressure systems.
- Managers are to implement appropriate control measures to mitigate identified risks, including the use of personal protective equipment (PPE) and safety devices.

23.5. Safe Operating Procedures

Managers and Operators

- Ensure that all pressure systems are operated in accordance with the manufacturer's guidelines and relevant legislation.
- Provide adequate and suitable instructions for the safe operation of pressure systems, including actions to be taken in the event of an emergency.
- Ensure that all pipe work containing water, compressed air, and gas is clearly marked and isolated before any work is undertaken.

23.6. Maintenance and Inspection

Managers and Operators

- Conduct regular maintenance and inspections of pressure systems to ensure they remain in safe working condition.
- Check fluid levels, filter conditions, accumulator pre-charge pressures, fluid plumbing, and component leaks as part of routine maintenance.
- Ensure that any maintenance work is carried out by competent personnel and in accordance with the manufacturer's guidelines.

23.7. Emergency Procedures

Managers and Operators

- Develop and implement emergency procedures for dealing with incidents involving pressure systems, including the use of remotely operated shut-off valves (ROSOVs) where necessary.
- Ensure that all staff are trained in emergency procedures and are aware of the actions to be taken in the event of an emergency.

23.8. Compliance and Review

- Ensure all pressure systems comply with the Pressure Systems Safety Regulations (PSSR) 2000 and other relevant legislation.
- The effectiveness of this section will be reviewed annually or sooner if required to ensure it remains current and effective.

23.9. Conclusion

Activate Learning is committed to ensuring the safe use, operation, and maintenance of pressure systems.

23.10. Further Guidance

HSE Approved Code of Practice L122 - Pressure Systems Safety Regulations 2000 guidance on Regulations

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Section 24 – Safe Systems of Work (incorporating Permit to Work (PtW's))

24.0. Procedural Statement

When particularly hazardous maintenance or construction work takes place, it is the College policy to control such work through a permit to work system. A permit to work is a formal authorisation to operate a pre-approved safe system of work.

24.1. Scope

The Permit to Work procedure applies to all employees, learners, contractors, visitors, and tenants participating in hazardous maintenance or construction work on the Activate Learning estate.

This section sets out the procedures and guidance for the use of Permits to Work (PTW) to manage hazardous College activities with a high level of residual risk not already covered by other Safe Systems of Work procedures.

24.2. Introduction

Activate Learning (hereafter referred to as the College) has a statutory duty to provide and maintain plant and systems of work, that are; so far as is reasonably practicable, safe and without risk to health. For high-risk activities, it is good practice to set-up a PTW system. The harmonisation of PTW systems between different locations can provide a familiar format and assist personnel moving between locations to understand the required controls and procedures to manage high risk activities. It is therefore essential that any PTW systems or the revision / review of additional / new PTWs use the principles, guidance and templates contained within this procedure.

A PTW is an effective means of controlling hazardous work activities and is a key element of the hierarchy or risk controls[5]. It shall be a formal written authority to a named competent person to closely control an activity or process, to which, following a risk assessment and the formulation of a Safe System of Work or a method statement, a high level of risk still exists. A PTW is the formalisation of a Safe System of Work but is not a guarantee of absolute safety.

24.3. Core Principles

'Permits to Work' are formal, documented safe systems of work used to control high risk activities or access to high-risk areas, and are used across the College to control the following activities:

- Work at height
- Hot works
- Confined spaces
- Excavation work
- Work on fire alarm or detection systems
- Isolation of Services (non-electrical including gas and pressure systems and pipelines)
- Work on or adjacent to a highway
- Use of a drone requires Specialists Permits (requiring specific risk assessments and control measures)
- Electrical Isolation and electrical Live Working
- Roofs and roof spaces
- Substations, electrical intake, or switch rooms
- Plant rooms and lift motor rooms.

[5] Management H&S at Work Regulations 1999, Schedule 1

The minimum competence requirements of all involved in permitting, especially the Authorised Person (AP) and the Person in Charge (Contractor Supervisor) (PiC) must be determined and documented.

Permits must stipulate the hazards, the risk control measures required (linking to the Risk Assessment and Method Statement as appropriate), the supervisory arrangements, the time limits/duration of the work, and the arrangement for checking work is complete and all has been 'made good' before a permit is closed.

There must be sampling in place by the PtW Issuer to ensure that the work is being carried out in accordance with the Method Statement during the work, and that the correct people (especially the Person in Charge (Contractor Supervisor) is still on site and supervising the work.

24.4. When Should a Permit to Work be Used?

A PTW should be used whenever it is intended to carry out any work which may adversely affect the safety of personnel, the environment or plant and equipment where assessment and the existing Safe System of Work do not fully mitigate the level of risk. A PTW is a normal part of good practice used as one of many risk control measures for activities such as maintenance work.

It is also advisable to use PTWs when two or more individuals or groups of people, perhaps from different trades or different contractors, need to co-ordinate their activities to ensure that they do not compromise the safety of each other; each will be issued with a permit. This will apply equally when there is a transfer of work and responsibilities from one group to another.

24.5. Management/Employer responsibilities

Director of Group Facilities Operations.

Shall be responsible for the appointment of Authorising Person (AP's) and shall satisfy themselves that the AP is competent, with sufficient knowledge and experience of the task, hazards and potential risks involved with the activity to evaluate and sanction the PTW on their behalf. The AP shall be provided with a letter of authority or Terms of Reference (TORs) defining the types of PTW that they are permitted to authorise. The Property & Environment (P&E) Manager will in most cases be the AP however where they may manage additional campuses, then the P&E Deputy or Team Leader may also be an AP for that specific campus. A Deputy AP may be appointed to assist the AP in times of absence, but a suitable system must be in place to prevent conflicting PTW's being approved by both the AP and the Deputy.

P&E Managers

The P&E Manager (owner of the task) shall be responsible for ensuring that a risk assessment has been undertaken and that a suitable Safe System of Work / method statement has been drafted by a competent person (seeking specialist advice if necessary) prior to raising a PTW. The P&E Manager should ensure that all control measures have been implemented so that when the PTW is issued, each party are confident that the risks are as low as is reasonably practicable (ALARP) and acceptable for the work to commence on the designated task, area or plant for the time specified.

The P&E Manager can request the assistance of the Regional H&S Officers in reviewing the risk assessment and method statement and in some cases the Construction Phase Plan for suitability.

Authorising Person (AP)

The AP (or Deputy AP) shall have suitable knowledge, experience, and the authority to act (e.g. refuse to issue, withdraw, or close a PTW) as necessary. Before issuing the permit, the AP is to be satisfied that suitable risk assessments and Safe Systems of Work etc have been developed and all necessary precautions have been taken, and in conjunction with the appropriate manager (i.e. Curriculum Manager / Head of Department etc), that any work activities that may interact are identified and de-conflicted. Any PTW shall only be valid when signed by the AP giving their authority to proceed (e.g. Issuing Authority on H&S Form 004) and should be signed off by the AP when the activity has been completed or work ceased (e.g. Issuing Authority Hand Back on H&S Form 004). All PTWs shall be recorded on a PTW register (e.g. H&S Form 003) or similar control system prior to issue and on closing.

The AP is the only person who is authorised to sign the authority to proceed and the Authorising Person's declaration (e.g. Issuing Authority on H&S Form 004). The AP shall periodically monitor PTW tasks to ensure that the conditions of PTWs are complied with.

Person in Charge (Supervisor)

The PTW should be issued to the Person in Charge (PiC) of the work, who must be competent, understand and agree to the conditions of the permit. The PiC will be the person who physically supervises the task or activity and accepts the responsibility for ensuring compliance with the requirements of the PTW by signing a declaration (e.g. Operating Authority on H&S Form 004). Such persons shall be held responsible for directly controlling the task as detailed on the PTW and must always be present at the location where the activity is being carried out and able to provide close supervision for the duration of that activity.

The PiC shall ensure that they are fully conversant with, and able to ensure compliance with the conditions set out in the PTW and all documentation associated with the task, that the PTW is displayed at the point of work, and that all personnel involved in the activity / task are fully briefed, competent and adequately trained.

Each PiC shall ensure that any additional actions required by the PTW are in place including additional emergency arrangements and that all necessary safety and emergency equipment is available, suitable and safe for use before commencing the task and that only the task detailed on the PTW is carried out. If the conditions of the PTW cannot be met work must stop immediately and all personnel withdrawn, and when safe to do so, all tools, plant and equipment and the area made safe.

If the PiC leaves the point of work, the task shall be stopped, and the area made safe until they return.

The PiC must ensure that all personnel directly affected by the activities of the PTW have been briefed to ensure they are aware of the hazards and control measures and are subsequently kept informed of any changes of the task.

If the task is not completed within the specified working time, the AP shall determine how the task is to be stopped, the area made safe, and the permit closed. A new permit shall be raised and issued to the next PiC taking over the responsibility for the continuance of the task where the permit is issued to the individual PiC not to the task. Under no circumstances can the same person carry out the duties of the AP and be the person in charge of the task / activity.

All Personnel

All personnel (College employees and contractors) are to comply with all information, instruction, training (including Safe Systems of Work) as required by management and in accordance with the requirements of any PTW. Personnel should inform the manager of any defective control measures, or any physical or medical condition that could affect the findings of the risk assessment and their ability to undertake the activity safely so that appropriate corrective action can be taken.

24.6. Retention of Records

The original signed copy (working copy) of the PTW shall be issued to the PiC and a copy retained by the AP for the duration of the task. Upon completion of the task the original (working copy) should be returned to the AP who should complete and sign off the PTW. The original (working copy) should be filed together with any associated unique supporting documentation and retained for a minimum of three years in accordance with the Retention of Records guidance at the start of this manual.

The Register of PTWs should be retained for a minimum of three years following the last entry, or as defined by applicable maintenance & service records.

24.7. Related Policies/Documents

- H&S Policy
- Fire Risk Assessment
- Campus Asbestos Register

- Confined Spaces Register
- Specific Method Statement (Plan of Work)
- Risk Assessment Section 4 and specific Risk Assessments
- Personal Protective Equipment (PPE) and Respiratory Protective Equipment (RPE) Section 15

24.8. Help

- Group Health & Safety Manager
- Regional Health & Safety Officers
- Property & Environment Managers

24.9. Appendices

Appendix 1 - Is a Permit to Work required - Flow Chart

Appendix 2 - Register Of Permits To Work

Appendix 3 - Permit to Work Form H&S 004 (available from P&E Manager or H&S Team) and Checklist

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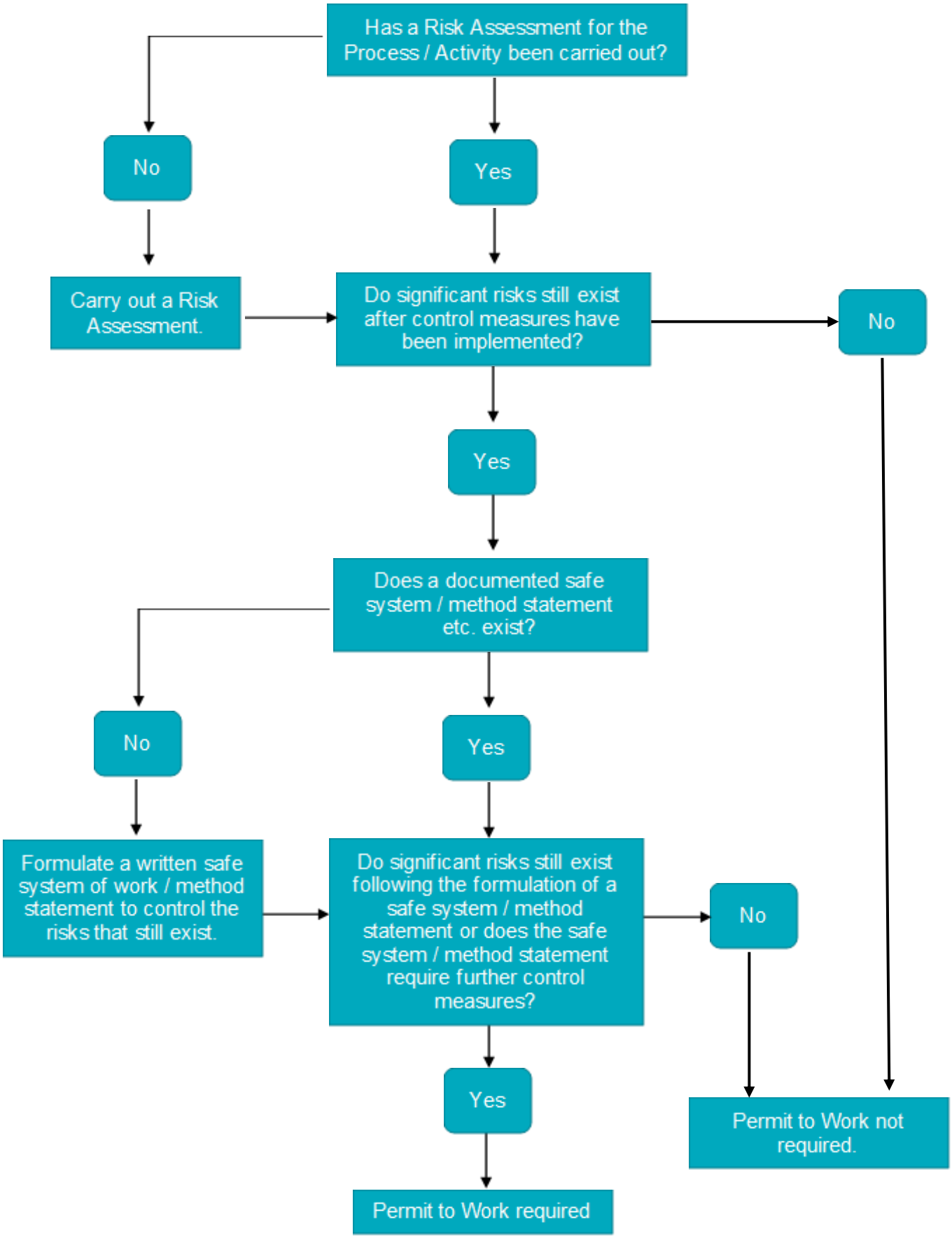
Is a Permit to Work required - Flow Chart



Permit To Work
Register Of Permits To Work

College / Campus	
Work Area or Function	

Serial No of Permit	Type/ Reason for Permit	Date and Time Permit Issued	Date and Time Permit Closed	Name of Authorising Person (AP)	Name of Person in Charge (Contractor Supervisor or similar)

Permit To Work – H&S Form 004

Refer to specific Form

Section 25. Driving for Work, Workplace Transport and Traffic Management

25.0. Procedural Statement

The Health and Safety Executive has recognised that driving for work is one of the most dangerous things many workers will do. It is estimated that up to a third of all road traffic incidents involve someone who is 'driving for work' at the time. This may account for around 12 fatalities and 150 serious injuries every week. Each year in Great Britain there are over 35,000 injury collisions that involve someone who was driving for work at the time.

Activate Learning is committed to managing their road risk and delivering its legal and moral obligations regarding employees driving for work, using college transport to ensure they get home safe and well at the end of each day. Driving for work refers to any work carried out on behalf of Activate Learning that involves an employee driving a vehicle and covers all journeys other than to and from the employee's normal place of work.

Many vehicles used for work journeys are supplied by the employer, but there are also vehicles used for work that are owned, leased, or hired by individual members of staff. These are called "grey fleet' vehicles. The College owes the same duty of care under health and safety law to these drivers as it does to drivers of College owned vehicles.

The College requires any employees who drive for work to comply with safe driving guidance and always follow the Highway Code. There is no requirement or expectation that an employee, regardless of their position, will break any road traffic law while driving on work journeys.

This section aims to ensure the safety and health of all employees, students, contractors, and visitors by providing procedures for the safe management of workplace transport (and grey fleet) and traffic within the college premises, commuting between campuses on College business and during off campus trips and activities where college transport is used. The aim is to ensure the safe movement of pedestrians and vehicles, minimising the risk of accidents and injuries.

25.1. Scope

This procedure applies to all workplace transport activities, including the use of college vehicles, personal vehicles for college use, and the movement of vehicles within the college premises and off-site. It covers all employees, students, contractors, and visitors involved in or affected by workplace transport and traffic management.

Employees who drive for work will be responsible and accountable for their own actions when driving for the purposes of work. Should the College receive information that an employee may have breached this requirement, an internal investigation will be carried out which may lead to disciplinary action being taken, including the possibility of termination of employment.

25.2. Definitions

- **Traffic Management**: The management of the movement of pedestrians and vehicles, including cars, vans, bicycles, motorbikes, and other mechanical handling equipment.
- **Traffic Route**: A route designated for pedestrian or vehicle traffic, including stairs, doorways, loading bays, and ramps.
- **PCV / D1**: A formal course of instruction (theory and practical) which includes a medical, allowing drivers to drive a minibus.
- **D1(101):** A license category held by drivers who passed their 'B' car license prior to 1997 which allows them to drive a minibus over 3500kg (over 4250kg for E-minibus).
- **MiDAS:** Minibus Driver Awareness Scheme. A formal assessment of the driver's competency in driving a minibus. Arranged by the Compliance team. Required by all authorised drivers of College transport. The only exceptions are if the driver has completed a formal D1/PSV course, or the driver has D1(101) on their license and they can evidence a history of driving minibuses with passengers.

- **Minibus Permit:** Section 19 Standard Permits are issued to bodies to enable them to provide transport for their own members or other people whom the organisation exists to help. The vehicle must not be used for carriage of members of the general public. Category B and category D1 (101) licence holders are entitled drive minibuses that are operated for hire or reward in accordance with a Section 19 permit.

- **Vehicle before use and after use inspection**: A means of checking a vehicle is safe and road worthy by using a formal checklist before the vehicle is used and again after completing the journey.

- **College vehicle**: A vehicle owned or on lease for use by competent and trained College staff and in some cases by authorised and trained students. Such vehicles may include minibuses, cars, tractors, plant equipment and all-terrain vehicles.

25.3. Roles and Responsibilities

Group Director of Facilities Operations

- Ensure that suitable systems and resources are in place for safe traffic management within the college premises.

- Ensure a suitable and sufficient risk assessment is completed to identify traffic management risks and necessary control measures.

- Ensure that the person undertaking the risk assessment has a good working knowledge of the college premises and any hazardous activities.

Property and Environment Managers

- Conduct a suitable and sufficient risk assessment to identify traffic management risks and necessary control measures.

- Develop and maintain a Traffic Management Plan, incorporating any changes to site activity or layout.

- Develop and maintain the Traffic Management Plan, ensuring it is reviewed annually or following any accidents, incidents, or changes to site activity.

- Identify and implement control measures such as barriers or guard rails to prevent pedestrians from walking onto vehicle routes.

- Ensure traffic signs, signals, and road markings are clearly visible and in good condition.

- Provide ease of access for disabled staff or visitors by identifying the need for ramps, automatic doors, and other controls.

- Conduct spot checks to ensure compliance with this procedure and identify areas for improvement

Managers/Hosts

- Inform all staff, contractors, and visitors of relevant traffic management rules and procedures.

- Ensure all traffic accidents, incidents, and near misses are reported and investigated, with corrective measures put in place.

- Direct contractors and visitors to report their arrival to reception to receive instructions about the college layout, rules, and procedures.

Staff

- Comply with college traffic management procedures and take reasonable care to ensure their actions do not harm themselves or others.

- Report any accidents, incidents, near misses, or defects relating to traffic routes, signs, signals, or road markings to their manager.

- Report any defects to pedestrian routes and road surfaces to the appropriate Property and Environment Manager.

Drivers

The driver will be responsible for the collection and return of the vehicle and the following tasks before commencement of the journey:

- Each driver is not only responsible for the safe driving of the vehicle, but also for ensuring that its operation is legal in all respects. The vehicle should be checked in order that it complies to being roadworthy.
- The driver should check over the vehicle as per the vehicle checklist and should any listed mechanical defect be found; the vehicle MUST NOT BE DRIVEN.
- Conducting a pre-use check of the vehicle to make sure it is not overloaded.
- Ensure that all doors are securely fastened.
- If the vehicle is a minibus, ensure that it is carrying a fully stocked first aid kit and fire extinguisher.
- Ensure you take the vehicle pack as it contains important information relating to the vehicle.
- P&E staff will check the vehicles on a regular basis.

The following tasks will be completed by the driver at the end of the journey:

- Completion of the logbook
- The reporting of any defects which occurred during the journey.
- The replenishing of the fuel.
- Ensure that the vehicle is left in a clean and tidy condition.
- Return vehicle pack to P&E (for Merrist Wood College they are to be returned to the Facilities Helpdesk)

25.4. General Principles for Safe Traffic Routes

- Adopt a one-way vehicular traffic system where practicable to eliminate the need for vehicles to reverse.
- Ensure vehicular traffic routes are wide enough for the safe movement of the largest vehicle permitted to use them.
- Consider vehicle height and avoid routes that pass close to hazardous areas.
- Construct traffic routes with suitable materials, ensuring firm and even surfaces that are properly drained.
- Avoid slopes where possible, and if unavoidable, ensure they are properly signposted.
- Maintain traffic routes to provide good grip for vehicles and pedestrians, especially in adverse weather conditions.
- Implement speed restrictions, traffic calming measures, and fixed features near higher-risk areas.

25.5. Driving at Work Procedure

25.5.1. Authorised Drivers

The Compliance team will maintain a register of minibus authorised drivers which will be available to view by all managers. All staff required to drive College minibuses must be registered as authorised drivers by submitting their driving license (which must be in date) to the Compliance Team (email compliance@activatelearning.ac.uk) for inspection.

Any alterations, endorsement or suspension of an authorised minibus driver's license must be immediately notified to the Compliance Team.

Please note that if the photo card license has expired, staff will not be covered by the College insurance, and they will be unable to drive a College vehicle until a valid photo card license has provided.

Authorised drivers should book transport for official journeys by contacting their campus P&E dept (contact Facilities Helpdesk for Surrey Colleges).

Business Use Car insurance

Staff that are required to use their own vehicles when driving on College business are to ensure they have Business Use Car insurance cover. Managers are required to check that their staff have appropriate Business Use Car insurance if required to drive on College business.

25.6. Use of College Vehicles

College vehicles are only to be driven by competent and trained College staff or in exceptional cases by College students. The 'fleet' manager responsible for the vehicle is to maintain a record of authorised drivers and their means of competency. A register of minibus drivers is maintained centrally.

When using a College vehicle, all staff must:

- Be the named driver on the booking sheet and supply a mobile contact number as part of the booking process.
- Check the vehicle in accordance with the checklist issued with the keys.
- Drivers must observe the Highway Code and Road Traffic Act.
- Complete the mileage log for each journey made.
- Observe the NON-SMOKING restriction.
- Ensure the seating capacity is not exceeded, and all passengers behave in a safe manner.
- All fuel obtained must be recorded on a garage receipt showing the vehicle registration number.
- Any incidents, such as punctures, accidents or breakdowns, must be recorded on the Fault Report log which is contained within the vehicle pack and reported to the P&E dept (or Rural Estates team for Surrey Colleges) once the breakdown has been dealt with according to procedure.
- Any faults with the vehicle should be logged in the Fault Report Log.
- Any misuse of the vehicle, whether through failure to comply with regulations laid down by the College or misconduct of the passengers, will mean withdrawal of the privilege of use for a specific period of time. Further instances will result in complete withdrawal of privilege of use.
- On return to campus, the vehicle and keys are to be returned to the P&E dept (for Merrist Wood College they are to be returned to the Facilities Helpdesk).
- In the event of late return of keys, Reception or P&E must be notified as soon as possible
- Clean out the vehicle when finished.

25.7. Using College Minibuses

A minibus is a motor vehicle with between 9 and 16 passenger seats. It is described as a category D1 vehicle by the Driving Vehicle Licencing Authority. See appendix 1 for further details.

25.7.1. Using a Trailer on a Minibus

The driver must hold the appropriate license. A D1 and a D1(101) entitlement permits the driving of a minibus with a trailer of up to 750kg maximum authorised mass (MAM). A D1E and a D1E(101) should be on the driver's license where the maximum authorised mass of the trailer is over 750kg.

In this case the minibus/trailer combination must not exceed 12 tons MAM, and the laden weight of the trailer must not exceed the unladen weight of the towing vehicle.

- The gross-train weight of the minibus must not be exceeded.
- Regulations state that when a minibus has rear passengers there must be unobstructed access to at least two exits.
- Additional training may be required to ensure they are competent in managing the attachment of the trailer to the minibus and in driving the minibus/trailer combination.

25.7.2. Hours of Driving

- Drivers should consider the number of hours required to complete the journey and also how many hours may have already been worked – e.g., full days teaching. Drivers should plan their journey to include plenty of breaks. Think of distance, breaking and stopping points, arrival and departure times.
- The College recommends that staff members should carry out no more than two hours continuous driving after which the accumulated length of break from driving should be at least 15 minutes.
- During a normal working day drivers should not drive for more than six hours in total. Drivers should not be required to supervise students during their breaks, as this would not be a break for the driver. With each additional driving period, the break time should be extended. Drivers should NEVER be expected to do a full day's work or be awake for a full day and then drive for several hours in the evening. Staff should re-arrange their work schedule if this is the case.

25.7.3. Seating Capacity

- The number of passengers including the driver must not exceed the number of seats provided. A minibus has a maximum of seventeen seats including the driver. In all cases the driver must ensure that all passengers use their seatbelts.
- A very small number of individuals may have a good medical reason why they should not wear a seatbelt and may have a medical exemption certificate. Such passengers must travel in the rear of the vehicle.

25.7.4. Wheelchair Passengers

- Persons (drivers) wishing to use minibuses equipped for carrying wheelchairs will require to receive separate instruction in the use of tail-lift and wheelchair restraints.
- There are special training requirements for drivers of wheelchair accessible buses, including the use of passenger seats, seat removal and wheelchair restraint systems.
- Passengers may have a wide variety of needs; these include physical, emotional, mental and medical needs and behavioural and learning difficulties. The needs of the passengers need to be known in advance of the journey so that they can be catered for and planned for.
- Passengers should only be carried on a minibus suitable for their needs. Full guidance in Appendix 2

25.8. Advice for Drivers

Before Setting Off

- Allow sufficient time for the journey, avoid long spells of driving and plan breaks.
- Never allow passengers to board until the vehicle is at a complete standstill and safely parked by an adjacent pavement or other traffic free area.
- DO NOT overload the capacity of the vehicle and ensure that all passengers are wearing seatbelts.
- Check road and weather conditions.

Additional points for Minibus safety.

- Always ensure that the ambulant disabled passengers are seated safely and comfortable and that passengers travelling in their wheelchairs are safely restrained. Wheelchairs not in use must also be securely stored.
- Ensure any luggage or equipment is stored safely and keep the gangways clear.
- Take care when using passenger lifts and other specialist equipment. Always comply with the manufacturer 'instructions
- Consideration should always be given to the safety of the passengers waiting for the minibus to arrive and during the time they are boarding and leaving the minibus at pick-up and drop-off places. Always identify a safe pick-up point
- Passenger comfort is important. The minibus must not be too hot, cold or stuffy. The driver must be aware that driving too fast, especially when this may involve vehicle swing and sway, is likely to induce travel sickness. There must also be regular and appropriate rest stops. Passengers must be made aware of what type of behaviour is expected of them.
- Drivers cannot safely drive and supervise up to 16 students at the same time. It is neither predictable nor safe. Escorts are recommended whenever large groups are being carried, especially on longer journeys.

During the journey

- Enforce a NO SMOKING rule.
- NEVER use a mobile phone whilst driving
- If you have to stop for an emergency or breakdown whilst on a motorway, only stop on the hard shoulder and as far away from moving traffic as possible.

Additional points for a Minibus

- Ensure all passengers remain seated and no horseplay.
- Do not allow passengers to operate doors while in motion.

At the end of the journey

- Never allow passengers to disembark until the vehicle is at a complete standstill and safely parked.
- Always park so that passenger's step onto the footway and not onto the road
- Report any problems or incidents that occurred during the trip to the College.
- Replenish the fuel.
- Clean and tidy the vehicle and ensure all rubbish is removed and disposed of appropriately.
- Return the keys and pack to P&E

25.9. Emergencies

If the vehicle breaks down:

- Get the vehicle off the carriageway, if possible.
- Use hazard warning lights and other lights as necessary.
- Do not spend very long trying to find the problem.
- Call for assistance as per the information in the vehicle pack, without leaving the vehicle, if possible. Use your mobile phone if you have one or ask a passenger to do so on your behalf. If you have to leave passengers in the vehicle in order to summon assistance, always instruct them to stay in or with the vehicle until you return.

Breakdown on the Motorway

- If practicable leave the motorway at the next exit and seek assistance.
- Otherwise pull safely off the carriageway onto the hard shoulder and park as far to the near side of the hard shoulder as possible.
- Try to stop near an emergency phone, which is a mile apart, or use your mobile phone when stationary. Red and white posts positioned every 100 metres have an arrow indicating the direction of the nearest telephone. The emergency phones are free and connect you directly with the Motorway Police Control Room. They will arrange any help you need. The emergency phones are coded so your exact location is known.
- Switch on the vehicle's hazard warning lights and at night switch on all other lights except headlights.
- If possible, get all the passengers out of the vehicle using near side exits. Then keep passengers well away from the carriageway, preferably on the embankment. In the case of passengers in wheelchairs, it may not be practicable or safe to do so.
- **NEVER CROSS THE CARRIAGEWAY**

Vehicle Fire

- Stop and switch off the engine.
- Leave the gear lever in neutral in case the engine re-starts due to an electrical short circuit.
- GET THE PASSENGERS OUT OF THE VEHICLE and away from it. Always evacuate the vehicle if possible BEFORE tackling the fire
- For wheelchair users, use the lift, as even in an emergency it is the safest way to evacuate the vehicle. If power to the lift is cut, use the hand-pump to lower the lift halfway and evacuate the wheelchair users in two steps – from bus to lift platform, from lift platform to the ground – the wheelchair should be lifted out backwards, use two people for this procedure.
- If no help is available or the wheelchair cannot be released from the clamps, the passengers must be carried from the vehicle. Check with the passenger how best to carry them. If they are unconscious drape their arms around your shoulders and with their face to your back carry them to safety.
- Tackle the fire ONLY IF IT IS SAFE to do so and you have received training. If you suspect an engine fire, release the bonnet catch from the inside of the vehicle if possible. DO NOT OPEN THE BONNET. Use the fire extinguisher, if vehicle has one fitted, through the aperture between bonnet and grill.
- **CALL THE EMERGENCY SERVICES**
- When the emergency services arrive, inform them if all passengers are out of the vehicle, and if there are any hazardous containers on board, i.e., gas cylinders.

IF A PASSENGER IS TAKEN ILL

- Stop in a safe place.
- Administer first aid if you feel able to do so.
- Call for an ambulance if required, either by mobile phone or by stopping traffic, to get them to call for help. If near a hospital or Health Centre, it may be appropriate to drive there directly.
- Contact the College with details of the circumstances.
- Offer reassurance to the other passengers.

25.10. Insurance

All passengers travelling in College vehicles are covered by College insurance. Drivers should ensure that the number of passengers carried does NOT exceed the number of seats, otherwise the insurance cover will be void. When using a minibus, the driver must hold a current MiDAS certificate, or their insurance cover may be void. The only exceptions are if the driver has completed a formal D1/PSV course, or the driver has D1(101) on their license and they can evidence a history of driving minibuses with passengers.

A vehicle pack will be included in each vehicle consisting of breakdown and insurance details.

25.11. Drinking or Medication and Driving

In keeping with the College's policy on the above, you are prohibited from driving when under the influence of alcohol or drugs. This includes prescription medication, where the supporting information indicates that it may have an effect on your ability to drive. You must bear in mind that anyone involved in heavy drinking the night prior to driving can still be over the legal limit to drive well into the following day.

25.12. Accident/Incident

If a breakdown/accident or incident occurs, then the procedure on the Immediate Action Card (held with the vehicle documents) should be followed:

Care of the Group

- Ensure the safety of the group from further danger.
- Arrange search, rescue, medical care or hospitalisation as necessary.
- Ensure the welfare of all concerned.

Next Steps

- Inform the contact person at home/College as soon as possible.
- Inform the Breakdown Service Provider as soon as possible (this information can be found on the front of the vehicle pack).

All College minibuses are covered by Breakdown Recovery Service for roadside assistance and relay.

A driver's guide to the service provided by the Breakdown Recovery Service is listed on the front of the vehicle pack.

- The person you will contact will need to know what has happened and the current situation.
- Try to provide a telephone number/destination where you can be contacted.
- In case of a serious incident, notify the police.
- Do not interfere with any equipment etc., which could be relevant to the subsequent investigation.

A **SERIOUS ACCIDENT OR INCIDENT** is described as:

- An accident leading to a fatality, serious or multiple fractures, amputation or other serious Injury.
- Serious illness
- Circumstances in which one or more party members might be at serious risk.
- Any situation in which the presence or possible involvement of the press or media could have significant implications.

Warnings and advice

- Without the approval of the establishment head or appointed authority, politely decline to comment to the media.
- Avoid making any statement admitting liability.
- Those involved in an accident need not communicate with anyone other than those in an official capacity.
- Be compassionate with anyone involved.
- Preserve any vital evidence and keep a written record of all relevant facts on the incident form within the vehicle pack.

25.13. Adverse Weather Conditions

Where there is adverse weather conditions forecast, the driver is advised not to plan or undertake a journey unless absolutely necessary. In periods of ice and snow the driver must use their discretion to decide whether a road is passable or not, and where possible choose a safer alternative. When the air temperature is below –12C, diesel fuel will stop flowing due to wax build up in the pipeline.

Drivers are advised not to attempt journeys in such low temperature conditions. At their discretion drivers may abandon a journey and take students back to College (or another safe environment). In the event that the transport becomes stuck because of blocked roads, students should be instructed to stay on the bus until help arrives.

25.14. Maintenance and Recovery

If you require breakdown recovery services or windscreen damage repair (all college vehicles), please call the number listed in the vehicle information pack and follow instructions.

Procedure for Driving a College Minibus

1. Scope and purpose.

Relates to all staff driving a minibus for Activate Learning-related business (e.g. student field trips). Minibuses are defined as vehicles with between 9 and 16 passenger seats which may include towing a trailer up to 750kg.

This procedure will cover:

- Driving licence requirements
- Minibus Permits (Section 19 Permits)
- Medical fitness
- Insurance cover
- Driver before use and after use vehicle inspection.

2. Legal Requirements

Every minibus must:

- Only be driven by drivers who are legally entitled, and properly insured, to drive the minibus
- Be well maintained and road legal
- Have a valid MoT certificate and insurance
- Display a valid permit disc as part of a section 19 permit scheme

In order to be properly licensed to drive a minibus, the driver will in most cases need to have the following:

- a valid driving licence (this may be a D1 category (PCV attained) licence (see para 2 & 3 for exemptions)
- Section 19 Mini-bus Permit (provided with the minibus)
- Medical self-assessment declaration
- Valid insurance (college insurance may apply)

3. Driving Licence Requirements.

3.1 Car licences issued prior to 1 January 1997.

If you hold a full driving licence issued before 01/01/97, your licence may give you a category D1 (101) entitlement. This D1(101) entitlement is not a formal minibus driver's license. This D1(101) will entitle you to drive a minibus provided:

- You are 21 years of age or over,
- Completed a MiDAS (Minibus Driver Awareness Scheme) assessment,
- The minibus has a maximum of 17 seats (including the driver's seat); and
- The vehicle is not being used for hire or reward.
- A vehicle is to be treated as carrying passengers for hire or reward if any payment is made for the carrying of passengers, irrespective of to whom the payment is made. This includes when:
    - The passengers have paid for the fuel only
    - The passengers have shared the cost or part of the cost of the minibus
    - The minibus hire is included in a "package" trip
    - The passengers directly pay a charge per person for a journey

- When the whole cost or any part of the cost of the minibus is taken from funds which include membership subscriptions from passengers
- When passengers do not pay directly to use the vehicle but buy fuel for it.
- The '101' element means the driver can drive a minibus but not for 'hire or reward'. This is why the Permit is required.

The DVLA has stated that any term time travel undertaken by an educational organisation would likely be considered as being "for hire and reward", whereas a student driving fellow students in a minibus to a sports fixture would be viewed as for social purposes and not for hire or reward.

3.2. Car licences issued on or after 1 January 1997.

If you hold a driving licence dated on or after 01/01/97 (or for any other reason you do not have a category D1 minibus entitlement on your driving licence) then you can drive a college minibus on a car license (B category), provided:

- you have completed a MiDAS assessment,
- you are aged 21 or over,
- you have held a car (category B) licence for at least 2 years,
- you meet the 'Group 2' medical standards if you're over 70 - check with your GP if you're not sure you meet the standards
- you are providing your driving services on a voluntary basis; and
- the maximum weight of the minibus is not more than 3500kgs (incl passengers and equipment) - or 4250kgs if an e-minibus. The maximum weight permitted if the minibus includes specialist equipment for disabled passengers, for example a wheelchair ramp is 4250 kgs for a standard minibus or 5000kgs if an e-minibus
- you're not towing a trailer
- When driving a minibus on this basis you may only receive out of pocket expenses.

The definition of hire and reward is given above in 3.1. If you hold a licence dated on or after 01/01/97 and the minibus is being used for hire or reward you will need to have a Passenger Carrying Vehicle (PCV) licence (D1 category).

3.3. Car Driving Licence Obtained on or After 19 January 2013

Drivers who gained their B driving licence on or after 19 January 2013 can only drive a minibus with a maximum length of 8 metres.

3.4. PCV/PSV Licence (D1 Cat) - official minibus driving license

A category D1 entitlement is obtained by the driver attending and completing a formal minibus training course. This is not the same as a 1-day MiDAS assessment.

4. Minibus Permits (also known as a Section 19 Permit).

Minibus Permits (also known as a Section 19 Permit) are issued to organisations concerned with, amongst other things, education including colleges. By obtaining a Permit you do not need to have the PCV (D1) licence.

The Permit is only applicable where the minibus is being used solely for the organisation in question and on a non-profit basis. Permits are procured by the P&E Department. A permit is required for each vehicle being used by the College at any one time. For example, if you are using 5 minibuses at the same time then you would require 5 permits.

If you do not have the D1 entitlement, then the Permit is applicable:

- where you receive no payment or consideration other than out of pocket expenses,
- you are over 21 years of age and have held a car licence for at least 2 years,

- the appropriate weight restrictions are met, and you are driving on a voluntary basis (i.e. not part of your regular employed role).

5. Driving a minibus abroad.

Section 19 permits are not valid outside the UK.

The type of driving licence which drivers will need when taking a minibus abroad within the European Union (EU) is as follows:

- Drivers who passed their car driving test before 1st January 1997 can drive on ordinary entitlement providing the minibus is not operating for hire and reward. The definition of hire and reward is described in more detail above.
- Drivers who passed their car driving test before 1st January 1997 can only drive a minibus which is operating for **hire and reward** if they have a licence which has either full D or D1 entitlement (PCV) obtained by taking a further test.
- Drivers who passed their car driving test on or after 1st January 1997 will also require full D or D1 entitlement (PCV) obtained by taking a further test.
- 'Obtained by a test' means that the driver has passed a second driving test in addition to passing an ordinary driving test.

For general queries about taking a minibus abroad, contact the Department of Transport on 0300 123 9000.

6. Procedure for requesting a college minibus

Contact the Facilities Helpdesk or P&E Manager to book a minibus. Managers are to ensure that their staff have completed a MiDAS (Minibus Driving Assessment Scheme) assessment before driving a college minibus. If a College minibus is not available, the P&E Manager will arrange to hire one (P&E will pay the hire costs).

The driver is to inspect the vehicle before and after use. Minibuses are to be returned with a full fuel tank and any damages reported to the P&E Manager. Fuel cards are available from the P&E Manager.

7. Procedure for requesting a MiDAS assessment

Click here to book a MiDAS assessment. Managers are to ensure that their staff have completed a MiDAS assessment before driving a college minibus. The Administration and Compliance (A&C) Team will arrange the MiDAS assessment and also remind staff when their current assessment is due to be retaken.

Staff are to provide a scanned copy of their driving license when requesting to attend a MiDAS assessment. Staff are also to provide evidence of their driving record which may show any points or disqualifications. Use the following link to view your driving licence information View or share your driving licence information - GOV.UK (www.gov.uk)

MiDAS training costs will be covered by the A&C Team, the cost of minibus hire for the MiDAS training (if required) will be funded by the P&E Manager.

8. Summary of requirements

- If you have D1 101 on your license you can drive a college minibus (any weight) as long as you have completed a MiDAS minibus assessment, and the minibus has an in-date Section 19 permit.
- If you have a B car license you can drive a college minibus (maximum 3500kg) as long as you are over 21yrs old and have been driving for more than 2 years, have completed a MiDAS minibus assessment and the minibus has an in-date Section 19 permit.
- If you have attained a minibus D1 license by completing a full minibus course, then you can drive a college minibus (any weight) with or without a Section 19 permit.

Passengers Travelling in Wheelchairs

Most minibuses with passenger lifts are fitted with a standard under-floor lift. Basic operating instructions are located at the rear of the vehicle, inside the rear doors.

Operation of Tail-lifts

- Park the bus on level ground whenever possible. If sloped ground cannot be avoided, always face the vehicle downhill.
- Stop the engine – there is enough battery power to use the lift. Ensure that the handbrake is on, and rear doors are secured when opened.
- Passengers should be guided on to the lift by the driver or escort. Always approach the platform from the rear in a straight line.
- Advise passengers to hold handrails, wheelchair users to apply brakes and ensure that the wheelchair stops at the rear bridge plate and at the front of the lift are both raised.
- Passengers who use electric wheelchairs should be advised to turn off the power until the lift has stopped moving. If the driver is concerned about any possibility of the wheelchair being moved by accident, they should ask the passenger how to disconnect the power drive to the wheels.
- The driver or escort should stand on the lift with the passenger while the driver operates the controls.
- Always ensure that the lift is raised to floor level before passengers start moving to the back of the bus.
- When folding the lift away, keep hands and feet clear of moving parts including the gap between the operating arm and the vehicle body.
- If the electrical power supply fails a manually operated pump is located by the lift motor (inside bus at near side rear) The lift can be raised and lowered by operating control valves and pump handle. Instructions are on the pump case or side wall of the bus.
- Passenger lifts are available for people who have difficulty walking as well as for wheelchair users. The driver or escort must stand on the tail lift with the passenger and support them while the lift is in motion.

Carrying Passengers in Wheelchairs

The requirements of the Code of Conduct for carrying passengers in wheelchairs must always be followed:

- **Passengers must not be carried in wheelchairs facing sideways.**
- All wheelchairs must be restrained by use of a webbing harness. Refer to the P&E Manager for guidance for correct use of clamps. Some wheelchairs (especially sport models and some electric wheelchairs) do not have a conventional frame which will accept clamps.
- Passengers with such wheelchairs must transfer to an ordinary seat and must not travel in an unrestrained wheelchair.
- Passengers in wheelchairs must be offered the use of a track-mounted seat belt.
- Electric wheelchairs take up more space in the bus and could present a hazard if power is not switched off. Always ask the passenger to switch off power when the wheelchair is in position. On some wheelchairs it may be possible to disconnect the drive to the wheels to prevent any accidental movement of the controls.
- If a passenger transfers to a fixed seat, their wheelchair should be folded and stowed safely on the vehicle. Restraint straps are available to secure a folded wheelchair.

- Other items such as Zimmer frames should also be restrained.
- A gangway must always be maintained between seats and wheelchairs, sufficient for the driver to raise the rear door handles.
- All restraint equipment must be stowed safely when not in use. Clamps, seatbelts etc., may be attached to the tracking or stowed in storage boxes such as the one above the windscreen. Loose equipment is a hazard for tripping and would fly around in the event of emergency braking.

Seat Removal and Refitting

Drivers need to know before starting a journey how many passengers will be travelling, including any who remain in wheelchairs. The seating layout must be adapted to suit. Two systems are in use for locating seats in tracking.

a. Lockable seat fixture – this can be identified as a bar joining the base seat legs with a central spring-loaded plunger. The track must be clean and free from small stones or grit. Locate the seat on the track with the base plate flush with the top of the track. Release the locking plunger and move the seat forward or back by approximately half an inch. The plunger should then drop into place. The seat is only secure when the top of the plunger is flush with its housing.

b. Hook seat fixing – Locate the seat on the track. Fix the hook base in the track and pull the hooks over the seat bar. Tighten the knurled nut until the seat is secure

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Section 26. General Safety of Visiting Workers / Contractors, Sub-Contractors and Outside Workers

26.0. Procedure Statement

Activate Learning recognises its statutory duty to ensure, so far as is reasonably practicable, the health, safety and welfare of all its employees, agency workers, contractors, students and other visitors who may be affected by its undertaking.

This Code of Practice sets out the College obligation and recognises that any engagement with contractors to carry out work at our premises, requires obligations to plan, monitor and control their work for the safety of everyone who may be affected by their activities.

In accordance with the Health and Safety at Work, etc. Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Construction (Design & Management) Regulations 2015, the College is required to ensure that competent and appropriate contractors are employed, supervised and monitored when working or visiting our college premises. For the purpose of this procedure, a contractor is defined as anyone who undertakes work on behalf of Activate Learning for gain or reward.

26.1. Introduction

This procedure has been produced to ensure that all works undertaken by contractors engaged by Activate Learning are carried out in such a manner that will be safe for staff, students, contractors and other visitors to the site. The rules outlined in this procedure should not be regarded in any way as relieving contractors of their own statutory duties or of their responsibility to work safely. The rules set out in this document are essentially for guidance on best practice only and are not intended to either restrict or dictate the way in which construction or maintenance work is undertaken.

All contractors, including self-employed persons, undertaking work on College premises, are expected to conduct their activities in accordance with the principles of the Health and Safety at Work Act (HSAWA) and relevant regulations made under HSAWA, including Health and Safety Executive guidelines and industry best practice.

Work in occupied premises may create risk for both those engaged in the work and for users of the building (i.e. students, staff or public). Some users may have special needs i.e. learning difficulties, sight impairment etc., and these persons should be given consideration when preparing risk assessments and subsequent systems of work.

In any case of doubt regarding the application of this code or in any circumstances affecting safe working not covered by this code, advice should be sought from the regional Health & Safety Officer.

All contractors working on any of the College premises are expected to comply with the provisions contained within this code. However, observance of this code does not in any way relieve the contractor (or any one he may employ such as a sub-contractor) of his or her legal or contractual obligations.

It is the contractor's responsibility to ensure that all of their employees including their sub-contractors, who will be working on the College estate, are made aware of the requirements of this CoP and the workplace health and safety rules and emergency procedures of the department or area in which they are working.

IMPORTANT NOTE - Failure to comply with the requirements of this procedure will likely result in contractors failing to be awarded future work by Activate Learning.

26.2. Aim

The aim of this procedure is to provide guidance to all staff who are directly involved in the appointment, use and management of contractors. The procedure will be most applicable for

Property & Environment and Group Services related departments; however, other departments and individuals will require the appointment of contractors from time to time. This procedure will cater for all types of contractor and therefore all responsible persons employing contractors are required to adhere to the requirements of this procedure.

26.3. Roles and Responsibilities

Executive Directors

The CEO has overall responsibility for Health and Safety within the college. Directors and Heads of departments also hold specific responsibilities throughout the college and assist in ensuring that the requirement of this procedure is implemented as appropriate.

Contractor Host or Employing Manager

The host or employing manager must ensure that the contractor is competent to carry out the works specified. Throughout the contract period the host or employing manager must monitor the standard of the contractor's work and the progress made.

It is also the duty of the host or employing manager to ensure that all relevant safety measures are taken, not only to protect the contractors but all persons who may come into contact with the College and its undertakings. The College has a duty to ensure that these work activities do not alter the conditions or impede the provision of a safe place of work for staff, students and visitors.

It is the duty of the host or employing manager to provide contractors with information on emergency procedures relevant to the premises and provide details of particular hazards in the area (This may include Control of Substances Hazardous to Health – COSHH assessments) for example, chemicals or biological hazards. Appendix 3 provides a copy of the site induction process which should be used by the host or employing manager. The regional Health & Safety Officer can provide the Induction on request.

The **Contractor Host or Employing Manager**, will endeavour to ensure that:

- The location where work is to be undertaken is clearly defined.
- The contractor has provided evidence of DBS (if relevant).
- A copy of this section is always made available to each contractor.
- Any information concerning site hazards in the possession of the College, is fully communicated to the contractor prior to work commencing.
- The precautions stipulated in this procedure and any additional control measures which the contractor or his/her representative are instructed by the College to implement, are fully observed.
- All contractors are made fully aware of the accident, incident and dangerous occurrence notification and fire and other emergency evacuation procedures relevant to the site where the works are to be undertaken.
- Appropriate arrangements are in place to co-operate and co-ordinate with contractors regarding welfare and first aid facilities, emergency procedures and other health and safety matters affecting their work.

If during the course of work, Property & Environment staff or other Activate Learning personnel, observe a contractor or sub-contractor disregarding any of these rules or not working in accordance with the findings of risk assessments and agreed method statements, then they will immediately inform the site Property & Environment Manager and/or the Health & Safety Team who will require the contractor to adopt the necessary safety measures and adhere to any additional instructions forthwith or be escorted off site.

26.4. Process for the appraisal and selection of contractors

Only contractors able to demonstrate a robust health and safety culture coupled with a proven history of compliance with regulatory requirements are invited to bid for tenders.

All contractors must be accredited with the 'Contractors Health & Safety Assessment Scheme (CHAS)' or similar. Furthermore, it is expected that the contractor will be able to demonstrate that it is a member of an appropriate trade association or body. This stipulation forms part of the pre-qualifying documentation. Once a contractor has proved his commitment to health & safety by successfully completing work to an acceptable standard he can be entered into the 'Approved Contractor, Consultant and Supplier's' list.

26.5. Communications with contractors

The College acknowledges its legal responsibilities to contribute to the safety of the contractor (and any sub-contractor(s) they may use) by the provision of safety information (i.e. emergency procedures and managing the safety of areas within their control. In all cases maintaining health and safety will be dependent on the establishment of good communications between the contractor and their point of contact within the College. This will be the manager responsible for overseeing all aspects of the project from start to finish and is often the person named on the official order or the nominated project officer. This point of contact is described throughout this CoP as the 'College Representative'. In any case of doubt regarding the application of this CoP or in any circumstances affecting safe working practice not covered by the CoP, advice should be sought from the College Representative.

26.6. DBS checks for contractors in College

It will be the responsibility of the **Host or College Representative** (usually the P&E Manager) to ensure that any contractor, or any employee of the contractor, who is to work at the College, has been subject to the appropriate level of DBS Check (where that is necessary or appropriate) and that adequate supervision is in place whilst on the premises. Contractors engaging in regulated activity will require an enhanced DBS Check (including a Children's Barred List Check). For all other contractors who are not engaging in regulated activity and may be on campus for less than 3 days in a month, but whose work provides them with an opportunity for regular contact with children or vulnerable adults, an enhanced DBS Check (not including a Barred List Check) will be required.

Under no circumstances should a contractor for whom no checks have been obtained be allowed to work unsupervised or engage in regulated activity. If a contractor working at the College is self-employed, the Host or College Representative should consider obtaining the DBS Check as self-employed people are not able to make an application directly to the DBS on their own account. The Host or College Representative should always check the identity of contractors and their staff on arrival at the campus and ensure that signing in arrangements are in place and are adhered to.

For contractors visiting the campus on a regular basis, details must be noted on the Colleges Single Central Record (SCR) and cross referenced with a 'letter of assurance' from the employer to confirm that other required checks have been undertaken. Where contractors only make occasional visits, it is not necessary to add their details to the SCR.

Examples of when a DBS may or may not be required

Agency Cleaner

The College has contracted an agency to provide additional staff for a specialist cleaning service at each campus. This contract is fixed term for 2 years. Each cleaner will work at the college at least once a week on an ongoing basis.

The cleaning agency will be at the college on an ongoing basis and the cleaners will be working frequently therefore each cleaner is in Regulated Activity and an enhanced DBS Check with a Barred List Check is required.

As the employer, it is the agency which is responsible for obtaining these checks on the cleaning staff. The college should obtain written confirmation, using a Letter of Assurance, from the agency that all appropriate vetting and barring checks have been completed.

Building contractors

Mr Baker leads a team contracted by the college to undertake the construction of a new building on the campus premises. This construction will take approximately 6 weeks, and each building contractor will work on the premises at least once a week during this period. No member of college staff will be assigned to supervise the contractors. However, the building area has been separated off from the students and so there is no opportunity for contact with children.

Due to Health and Safety, students are not allowed near a "hard hat" area and, therefore, there is no opportunity for contact with children. The work of the building contractors is not Regulated Activity, and the contractors are not eligible for an enhanced DBS Check or Barred List Check.

All contractors must comply with the College's signing in arrangements.

Contractor Induction should be in place to include the College's Code of Conduct for Safeguarding

Maintenance contractors

Miss Cole is an electrician and is sometimes contracted by the College to deal with electrical issues on an emergency basis. These are one-off occasions and are never more than twice in a month.

Miss Cole provides an occasional service (less than 3 times in a rolling 30-day period) and is therefore not in regulated activity or on a regular basis, so an enhanced DBS Check or Barred List Check is not required.

The College should instead apply other safeguarding measures (such as supervisory arrangements, signing in procedures, and an induction explaining the College's Safeguarding Code of Conduct). If Miss Cole could not be supervised at all times, then a Standard DBS may be required.

26.7. General responsibilities of the Property & Environment Manager

The Property & Environment Manager will ensure that:

- Risk assessments, method statements insurance certificates, details of competency, evidence of DBS (if applicable) **together with a Construction Phase Plan** (level of detail to be appropriate to the size of the project) are collected from the contractor and reviewed by the Property & Environment Manager and the H&S Officer prior to work commencing.
- Provide a copy of Appendix 1 & 2 of this section to the contractor to review and acknowledge understanding. This is required prior to commencing work on site.
- Providing a 'Client Brief' to the contractor.
- The contractors' signing in book is ready for use. Contractors' ID is checked, and their work request verified.
- Contractors are given temporary passes.
- Contractors are given a site induction prior to work.
- Contractors are taken to the area they wish to work.
- Permits-to-work are issued and overseen where necessary.
- With the assistance of the Health & Safety Team, contractors working methods are checked at regular intervals to ensure compliance with H&S regulations and site rules.

Note: Further guidance on Client responsibilities can be found on the College H&S portal: The Construction (Design and Management) Regulations 2015 (CDM 2015)

The CDM Regulations applies to almost all maintenance and construction work required at the College. Within CDM, construction work means the carrying out of any building, civil engineering or engineering construction work and includes:

(a). the construction, alteration, conversion, fitting out, commissioning, renovation, repair, upkeep, redecoration or other maintenance (including cleaning which involves the use of water or an abrasive at high pressure, or the use of corrosive or toxic substances), de-commissioning, demolition or dismantling of a structure.

(b). the preparation for an intended structure, including site clearance, exploration, investigation (but not site survey) and excavation (but not pre-construction archaeological investigations), and the clearance or preparation of the site or structure for use or occupation at its conclusion.

(c). the assembly on site of prefabricated elements to form a structure or the disassembly on site of the prefabricated elements which, immediately before such disassembly, formed a structure.

(d). the removal of a structure, or of any product or waste resulting from demolition or dismantling of a structure, or from disassembly of prefabricated elements which immediately before such disassembly formed such a structure.

(e). the installation, commissioning, maintenance, repair or removal of mechanical, electrical, gas, compressed air, hydraulic, telecommunications, computer or similar services which are normally fixed within or to a structure.

26.8. Related Policies/Documents

- Health and Safety at Work etc. Act 1974
- Construction (Design and Management) Regulations 2015
- Occupiers' Liability Act 1957 and 1984
- Management of Health and Safety at Work Regulations 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 (as amended 2013)
- Electricity at Work Regulations 1989
- Dangerous Substances and Explosive Atmosphere Regulations 2002
- Hazardous Waste Regulations 2005
- Environmental Protection Act 1990
- Control of Asbestos at Work Regulations 2006 (as amended 2012)
- Employers' Liability insurance certificates
- Public Liability insurance certificates
- College Asbestos Management Plan and Asbestos Register
- Health & Safety Policy

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Safe Working Practices for Contractors

Required Contractor Documentation

Before any work commences, the contractor shall provide the College Representative with appropriate documentation to verify that the project has been planned and risk assessed. Depending on the scale of the project this may include a risk assessment of the works to be carried out, a method statement detailing how the works are to be undertaken, and evidence of equipment checks i.e. Scaftags and Laddertags. For more detailed projects that may be within scope of the **Construction (Design and Management) Regulations 2015** then a Construction Phase Plan will also be required.

Commencement of works

Contractors shall not be permitted to work on any part of the College estate until the Acceptance Form attached to this Procedure has been completed and received by the Property & Environment Manager. This Procedure and declaration apply to all work undertaken by the contractor on the estate.

No work shall commence unless the College Representative has been consulted, and adequate time has been allowed to complete and arrange any Health and Safety requirements. Contractors shall ensure that their employees and those of their sub-contractors are adequately trained and competent to carry out the work in question.

Induction of contractors

Following award of contract, the Contractor Supervisor (or similar) must contact the Property & Environment Manager for an induction briefing. The H&S Officer can assist in providing the Induction briefing. The level of briefing will be commensurate with the size of the project and the level of risk. Part of the briefing process is for the contractor to read, agree and sign up to this Procedure for contractors.

Records of contractor meetings and briefings

All information regarding the briefing must be entered in the Induction Briefing register. For minor works the briefings will be held in the Campus P&E Office followed by a tour of the work area. Major project briefings will be held in the Campus P&E Office or that of the Principal Designer / Contractor at the start of the project.

Site & Pre-Start Meetings.

The following information should be discussed and reviewed with contractors and sub-contractors during pre-start meetings:

- site layout and access.
- site-specific hazards.
- site safety standards.
- security measures to be adopted.
- welfare facilities available (with details of who is responsible for providing, maintaining and cleaning them).
- use of client services such as sanitary accommodation, etc.
- fire and emergency procedures.
- provision of qualified first aiders and first-aid kits.
- accident, incident and dangerous occurrence notification procedure.
- COVID-19 protocols including social distancing

Provision of safety-related documentation

It is expected that contractors employing five or more people will have a health and safety policy. Before any contract work commences, it is expected that the contractor will have conducted risk assessments of the works to be undertaken and formally submitted them to the Property & Environment Office of the relevant campus, for consideration and approval, along with any relevant method statements, COSHH assessment findings and a **Construction Phase Plan, as is now required for all 'construction works' projects, by the Construction (Design and Management) Regulations 2015.** No work of any kind is to be started until the contractor has gained formal authorisation from the College and arrangements will be put in place for a member of the Property & Environment Team to liaise with the contractors on a daily basis.

Essential rules to be followed by all contractors

Contractors will be expected to:

- Brief their own employees and sub-contractors on local procedures considering any communication problems (i.e. English as a second language) and record details.
- Review procedures, risk assessments and methods of work (including the provision of Personal Protective Equipment (PPE)) as necessary.
- Ensure a suitably qualified person is appointed as liaison with the College Representative and ensure that person is always readily accessible.
- Comply with any site Permits-to-Work
- Comply with site security requirements
- Ensure suitable monitoring and supervision is put in place proportionate to the work being carried out.
- Isolate any work being carried out i.e. by barriers, or signage i.e. use of wet floor signs to indicate toilet cleaning taking place, or work at height i.e. window cleaning.
- Manage any flammable substances safely and keep securely and advise the Property & Environment Department.
- Ensure that any equipment is properly maintained and in good repair and working order and used only by suitably trained and therefore competent persons.
- Agree location of skips for rubbish etc. The skips not to be stored close to buildings (within 10 metres.) Consider if increased frequency of rubbish removal from site needed.
- Risk assessments and suitable systems of work for vehicle movement must be prepared and segregation of vehicle and persons instigated.
- Take responsibility for sub-contractor(s) and make sure they comply with all relevant statutory requirements and local campus rules and procedures.
- Promptly notify all accidents/incidents to Property & Environment Department and to report any reportable accidents, incidents and/or dangerous occurrences to the Health and Safety Executive, as required under the RIDDOR Regulations.
- Comply with the College Safeguarding Code of Conduct
    - avoid contact with children
    - never be in contact with children without College staff supervision
    - stay within the agreed work area and access routes
    - obtain permission if you need to go outside the agreed work area or access routes
    - keep staff informed of where you are and what you are doing
    - do not use inappropriate or profane language

- dress appropriately – shirts to be worn at all times
- observe this code at all times
- remember - your actions no matter how well intentioned could be misinterpreted

Working subject to a permit-to-work system when undertaking higher risk activities

Contractors will be expected to work subject to the requirements and stipulations laid down under a permit-to-work system agreed with or administered by the Property & Environment Department, when undertaking the following potentially higher risk categories of work on any of the Activate Learning Group owned or managed sites:

- Working at height including on any roofs
- Hot working
- Working within confined spaces (which will include boiler rooms and roof spaces)
- Digging/excavation work
- Any demolition works
- Any hoisting or heavy lifting operations
- Use of cartridge-operated tools
- Cabling works and pipe cutting work (either installation or removal)
- Electrical work where either it is absolutely necessary to work on live equipment or the work is extensive and non-routine
- Non-routine gas installation or repair operations
- Working with particularly hazardous and/or explosive or highly flammable substances
- Asbestos material repairs or removal

The Principal Designer / Contractor will ensure that:

- Contractors always sign in prior to work commencing on site.
- Contractors fully familiarise themselves with the contents of this Procedure.
- Contractors always sign out when leaving site.
- Visitor passes MUST be worn and visible at all times when walking around the site.
- Risk assessments and method statements **together with a Construction Phase Plan** (when applicable) MUST be provided prior to work commencing and be available on site for contractor staff and visitors to view on request.
- Contractors work subject to a formal permit-to-work system operated through the Property & Environment Office in all instances of higher risk categories of work listed in this Procedure.
- Contractors are escorted to the area they are to be working in and immediately notify the Property & Environment Manager or College Representative if the work area changes.
- Contractors arrange parking with the College Representative prior to arriving on site.
- Contractors leave a worksheet or up-date with the local Property & Environment Administrator of the completion of works on a daily basis.

General construction site safety matters

Site access, storage and welfare arrangements etc., must be agreed with the Property & Environment Manager prior to the work commencing. Very careful consideration must always be given to ensure the health and safety of College staff, students and other visitors who pass nearby the site or who may need to gain access to the site.

Use of sub-contractors

Any contractors undertaking 'construction works of any kind for the College shall not appoint any sub-contractor without the prior written agreement of the Property & Environment Manager. The Principal Contractor shall then ensure that any sub-contractor appointed is made fully aware of all local site rules and emergency procedures and also given a copy of this Procedure.

Training and instruction of contractors' employees

The College expects that contractors will ensure that all of their employees are competent to perform their work, have been trained to the appropriate industry or legislative standard and always work in a safe and workmanlike manner.

Welfare facilities

Both the College and the contractor have responsibilities for ensuring that all contract workers are provided with and/or have pre-arranged and agreed access to adequate toilet, washing and other similar welfare facilities. The contractor is therefore responsible for ensuring that suitable arrangements are made with the College Representative for either the provision of or permitted access to college toilet and washing facilities.

IMPORTANT NOTE - Where the college concerned makes any such facilities available to the contractor then the contractor may be charged a fee to the necessary additional cleaning and re-stocking of these facilities.

Consumption of food and drink

Operatives, if cleanly and suitably dressed, and wearing a College lanyard, may use the College Recharge areas (café's) during normal opening hours. They may also use vending machines in foyer areas, providing that wrappers, cans, etc. are disposed of properly.

If full control of an area of the college has been specifically handed over to a contractor for the duration of a contract, the contractor may, by agreement with the College Representative, allocate some of the space for operative refreshment provided that such space presents a clean and healthy environment. Otherwise, no operative may consume food or drink in any College area unless permission has been given by the College Representative beforehand. In all cases, waste food and containers must be disposed of in such a way as not to encourage vermin.

Site tidiness – general 'housekeeping'

Contractors are expected to keep their work area as clean and tidy as possible at all times. Waste materials must be placed in appropriate containers and not allowed to accumulate on site. Both equipment and work areas must be regularly cleaned, and waste materials removed as the job progresses with walkways and fire exits kept clear and free from obstruction at all times.

All materials and equipment must be safely stacked, chocked and/or stored in an appropriate and safe manner to prevent rolling, falling or collapse and thereby causing injury. Tools left on site must be kept in a secure locked storage facility agreed with the Property & Environment Department.

It is expected that all hazardous substances will be handled, stored and disposed of, in a safe and appropriate manner in accordance with both the requirements of the Control of Substances Hazardous to Health Regulations 2002 (COSHH) and all relevant and applicable environmental protection legislation.

It is expected that the contractor will maintain safe and clear access to and egress from the work site at all times and always marshal their vehicles accordingly using their own trained Banksmen where necessary.

It is expected that the generation of dust and noise will be kept to an absolute minimum. To achieve this, it is expected that utilising simple practical measures such as the provision of dust skirts for waste chutes, covers for waste skips, etc. along with the provision of vacuum systems and water jets for portable powered masonry saws, where it becomes necessary to cut masonry externally on site, such as near classrooms and/or offices.

Protection of the environment and disposal of all waste materials

Contractors shall not deposit any waste, chemical or other substance into any drains, skips or bins on the College estate, unless the College Representative has specifically granted permission.

All waste must be disposed of in a controlled manner and in accordance with the requirements of the Environmental Protection Act 1990 and other applicable environmental legislation. In order to ensure that the College fully discharges its duty of care under section 34 of this Act, it is expected that waste materials will only be permitted to be removed from any of the College premises by a registered carrier with the Environment Agency and/or the holder of a Waste Management Licence.

IMPORTANT NOTE – In order to minimise the risk of fire and of vandalism to property, waste materials will not be permitted to accumulate on site. No waste shall be permitted to be burned on any College site.

Works undertaken on service installations

Contractors must not interfere with any fire alarms, alarm wiring, fire equipment or any other safety installation provided to protect building occupants without specific permission from the College Representative. Similarly, permission must be obtained prior to the connection of any equipment to the gas, electrical, water or any other services and any relevant Permits to Work issued. Entry to substations, switchgear and plant rooms is prohibited unless the College Representative has given permission. Specialist arrangements apply to High Voltage sub-stations.

Works on gas installations

No contractor shall perform gas works or work on gas installations, fittings or storage vessels on College premises, unless they are Gas Safe Registered and suitably licensed to undertake works on installations of the relevant category.

Lifting/removing service hatches / outlet covers (manhole covers)

No service hatches / outlet covers may be lifted for working purposes without express permission given by the College Representative. If access to service hatches / outlet covers is required, then barriers are to be erected around the open hatches / outlets to prevent falls.

Electrical safety

All electrical contractors must be competent and appropriately qualified and preferably also NICEIC approved. All works, including short-term or temporary works must always be carried out in accordance with the requirements of the latest version of the 'Wiring Regulations' issued by the Institution of Engineering and Technology (IET).

All electrically operated power hand tools used externally must be either battery powered, or be 110V centre-tapped to earth, must be well maintained and have been electrically inspected and tested within at least the last 3 months.

There flexible cables and extension leads have to be used, the minimum length of cable should be used. Such extension cables must be regularly checked with appropriate warning signage erected where there is deemed to be a tripping hazard. As far as possible, cables and leads must be routed safely so as not to pose a tripping hazard.

Tools, Equipment and Plant

All plant, tools and other work equipment used by contractors on the College estate must be appropriate for the work to be undertaken, comply with all relevant legal standards and must be maintained and inspected in accordance with appropriate safety standards and statutory provisions. Contractors are not permitted to use College owned plant, tools or other work equipment.

All portable tools, so far as is reasonably practicable, shall either be battery operated or operate at 110V or less. In certain circumstances, where agreed by the College Representative, an alternative device may be used which must incorporate an earth leakage/residual current device.

Cartridge fixing tools must not be used on the College estate without the prior permission of the College Representative. Should permission be granted they must only be used by trained operatives and in compliance with the relevant Health and Safety Executive Guidance, with cartridges kept securely at all times.

When working in or around occupied buildings, particularly those used for teaching and examinations, contractors should be sensitive to excessive noise generated when using pneumatic and cutting tools and be prepared to carry out excessively noisy and/or dusty works when teaching\ examinations are not in progress by prior agreement with the College Representative.

In the case of excessive use of powered hand tools, it is expected that contractors will ensure that both their employees and the sub-contractors they engage, are not exposed to excessive levels of HAV and that appropriate control measures are put in place to adequate control the risks related to HAV, in accordance with the requirements of the Control of Vibration at Work Regulations 2005.

Noise

It is expected that contractors will endeavour to minimise the noise generated on site as far as reasonably practicable and that they will operate in full accordance with the requirements of the Control of Noise at Work Regulations 2005.

Radios

The use of personal radio receivers/music devices by contractors is prohibited throughout the whole of the College estate.

Petrol- and diesel-powered equipment.

Any such equipment including mechanically propelled vehicles must be maintained in good condition and free from oil or fuel leaks. The storage of any fuel is prohibited unless it is controlled to the satisfaction of the College Representative. Refuelling is only permitted in areas which have been designated by the Property & Environment Manager.

Drivers of mechanically propelled vehicles and operators of other equipment must be competent and possess appropriate certification.

Works above ground

The permit-to-work safety management system must be initiated prior to working at height and it is expected that all contractors will work in full accordance with the requirements of the Work at Height Regulations 2005 by properly risk assessing all works to be undertaken at height.

IMPORTANT NOTE - The presence and location of fragile areas on roofs must be determined in conjunction with the site Property & Environment Manager before entering out onto any roof area.

In the case of work on flat roofs, lacking edge protection, where it is necessary to approach within 2 metres of the edge in order to complete the work, it is expected that contractors will wear a full body harness with a suitable lanyard secured to an attachment point which has been subject to a ‘thorough examination’ within the previous 6 months, by an engineering surveyor approved by the College’s insurers.

Use of Scaffolding. All scaffolding contractors working on the College estate shall be members of the National Access and Scaffolding Confederation. Contractors are required to supply their own access equipment. Use of college ladders, etc. is not permitted. All ladders and scaffolds must be erected and modified by trained personnel and meet appropriate British Standards and HSE guidance. Any scaffold must be erected and dismantled in a safe and workmanlike manner in accordance with relevant regulations and industry best practice in order to avoid damage to property and injury to others. All scaffolding, including mobile tower scaffolding, shall only be erected, modified or dismantled and used by competent people who are suitably trained and experienced, such as PASMA trained. Once erect, it is expected that scaffolding will be subject to the inspection requirements with a scaffold register kept together with an inspection report.

Incomplete scaffolding must be clearly identified by the provision of appropriate warning signs displayed in a prominent position on the scaffold. Particular attention must be given to the provision of guardrails, intermediate rails and toe boards on working platforms so as to prevent falls of people, tools or materials. Working platforms or scaffolding must never be used for the storage of materials etc. Articles must never be thrown or dropped down from scaffolding but lowered in an appropriate and safe manner, preferably using a properly constructed waste chute. People working on or around the scaffold must always wear all the necessary personal protective equipment such as hard hats and safety boots, etc.

Where a scaffold crosses over a walkway or entrance a protective fence must be installed and all supporting structure in the area marked so as to prevent people walking into it.

Once a scaffold is complete a 'handing over' certificate must be issued to the Property & Environment Manager before any work starts. Inspections must be made by a competent person and a written record kept. Inspections will be made after every seven days and after exposure to weather conditions likely to affect the condition of the structure.

When the work involves the erection of any scaffold support, shoring or similar structure, the contractor is responsible for providing whatever additional safety features such as walkways, covers, warning lights, etc that may be necessary for safety. Action must be taken daily to ensure safety by the removal of ladders or other means of access when work ceases.

Use of ladders. Ladders must be securely tied or footed at all times and shall extend the working place by at least 1.1 m (3ft 6ins). When ladders and scaffolds are erected, barriers and signs must be used to prevent injury to passers-by. A warning sign must be displayed if a scaffold is incomplete and under no circumstances must it be used.

Wherever possible leaning ladders shall only be used as a means of access to a working platform or stage. The use of leaning ladders shall be strictly in accordance with Health and Safety Executive Guidelines and industry best practice. Ladders and stepladders should only be used for access, inspection or very light work and in any case for short-term work only. Ladders must never be left on site unattended and where it is not practicable to remove them, suitable measures must be taken to prevent unauthorised people using them and they should always be removed from the first lifts of scaffolding at the end of the working day. Contractors and their employees must ensure that ladders are adequately secured both at the top and at the bottom to prevent them slipping.

Hoists and Powered Access Equipment. Contractors installing and using hoists etc must provide copies of test\examination certificates prior to their use. Furthermore, anyone operating any type of mobile elevating work platform (MEWP) must hold a training certificate issued by the International Powered Access Federation (IPAF), often referred to as an ‘IPAF card or licence’, certifying the person as being suitably trained and experienced and therefore ‘competent’ to operate the particular class or category of MEWP to be used.

Access to roofs is not permitted without the permission of the Property & Environment Manager and completion of the relevant Permit-to-Work. It is the contractor’s responsibility to ensure the safety of their employees and other persons below whilst working on roofs.

Lifting/hoisting operations

It is expected that all lifting operations will be performed strictly in accordance with the requirements of the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER). Contractors shall produce, upon request, the appropriate statutory ‘thorough examination’ certificates for all lifting equipment to be used on site.

It is expected that operators of cranes or lifting machinery will be competent to do so and have received appropriate training and detailed information as to how lifting operations will be undertaken must be decided and agreed with the College Representative before work commences. Checks must be made to ensure that the ground on which the crane or lifting equipment is used is level, stable and suitable to withstand the weights likely to be imposed. The contractors must ensure that no part of the crane or the lifting equipment is likely to impinge upon or come in contact with overhead cables or scaffolding etc and always use a trained signalman to direct the crane operator.

IMPORTANT NOTE – During all lifting operations appropriate precautions including the erection of barriers and signage must be provided to ensure that unauthorised persons are prohibited from entering into or near the work area.

It is expected that all lifting equipment including its attachments and slings etc., will have been subject to a 'thorough examination' by a qualified and competent engineering surveyor within at least the past 12 months, in accordance with the requirements of LOLER. If lifting equipment is to be used for lifting people, then it must have been specifically designed for this purpose and have been subject to a 'thorough examination' within the past 6 months.

Works below ground

No excavations on the Group's estate may be carried out without the permission of the College Representative and must always be undertaken subject to a permit-to-work. Whilst the Property & Environment Department will advise as far as possible to the location of buried services, it is the contractor's responsibility to ensure that adequate checks are carried out to locate any services, and to proceed with the excavation work with due care.

The work site must be made and kept safe by means of barriers, warning notices, lights etc, at all times. When work is complete, the site must be made good, and any markers, protective covers and warning notices removed.

All trenches and excavations, particularly those adjacent to roads and existing buildings, must be adequately shored. Excavations should be fenced off or boarded over when work is not actually proceeding and be inspected to ensure its integrity at least every 24 hours, 7 days a week.

Demolition works

Contractors are reminded that any demolition works will evoke requirements of the Construction (Design and Management) Regulations 2015 (CDM 2015) and at the very least, require the preparation of a demolition plan by a competent person. Adequate steps must therefore be taken to plan the demolition or dismantling work to ensure the safety of everyone potentially affected and secure compliance with these Regulations.

Particular care and attention must always be given to the prevention of contact with or damage to, underground or overhead services. Suitable precautions must be taken to prevent the unintentional collapse of the building or any adjoining structures and secure the safety of both any occupants and of passers-by.

The permit-to-work safety management system must be initiated for any excavation work. Unauthorised access to the site must be prevented by the erection of adequate barriers, fencing and the displaying of appropriate statutory warning signage before any excavation work commences. It is expected that all excavation work will be undertaken in a safe manner and in accordance with Health and Safety Executive guidance, HSG 185. Before any work involving excavations is performed, every effort must be made to identify the presence of underground services such as electricity cables, gas pipes, water pipes, drains and telecommunications cables.

IMPORTANT NOTE - In order to prevent people, plant or materials falling into excavations, shafts or pits, suitable fencing or barriers must be provided. The use of traffic cones, barricade tape or similar, is NOT appropriate or acceptable for this purpose. If excavations are to be left open during hours of darkness, then they must also be suitably boarded over and illuminated with an adequate number of warning lamps, in addition to the provision of pedestrian barriers. Such lamps must be in good working order, well maintained and checked on a regular basis. Areas around excavations must be kept clear of all debris and other waste materials and deliveries must never be unloaded, stored or stacked near excavations. Contractors are required to ensure that their excavations are inspected by a competent person prior to the start of each working shift.

Entry into confined spaces

For any proposed work in a confined space, such as an excavation, drainage system containing a manhole, boiler room or roof space, etc., the College Representative must be informed and a safe system of work based upon risk assessment agreed, prior to work commencing. The permit-to-work

safety management system must always be initiated for any confined space working, in order to ensure compliance with the requirements of the Confined Spaces Regulations 1997 and a minimum of two employees shall be present at all times.

Additionally, contractors must always ensure that appropriate emergency procedures are in place to enable the immediate rescue of persons working in any confined space.

Personal Protective Equipment and clothing (PPE)

Contractors must ensure that their employees are provided with and wear all the appropriate PPE identified in the risk assessments of the activities to be undertaken. Where the site requires the mandatory wearing of certain personal protective equipment such as safety helmets, safety footwear, hearing protection and high visibly clothing etc., the contractor must ensure that all the appropriate statutory safety signage is also erected.

IMPORTANT NOTE - The Group Director for Facilities Operations and the Group Health & Safety Manager reserve the right to insist on the immediate removal from site of any individual not complying with the spirit of these site rules, particularly regarding any flagrant and/or reckless disregard of the mandatory wearing of any prescribed mandatory personal protective equipment or clothing.

Asbestos-containing materials (ACMs)

The Group holds an Asbestos Register and has specific procedures in place for the identification and removal of asbestos in line with current regulatory requirements. Whilst the Group takes steps to ensure that contractors will not encounter asbestos unexpectedly, it cannot be guaranteed. The Asbestos Register does not identify asbestos that may be hidden or could be uncovered during demolition or internal structural alterations. In any case of doubt, it must be presumed that asbestos containing materials are present, until proved otherwise. If the presence of asbestos is detected or suspected during the course of building works, then the work must stop immediately, and both the College Representative and Campus Property & Environment Manager immediately informed. If the suspected asbestos material is likely to be affected by the construction work, all work in the vicinity must cease immediately in order to be re-assessed by a competent person.

IMPORTANT NOTE - You are reminded that any asbestos removal and/or major works on many asbestos-containing materials (ACMs), is only permitted by an HSE licensed contractor, who is also approved by the P&E Manager.

Maintenance of safe traffic routes and the segregation of vehicles and pedestrians

The Group estate entwined in a number of locations with the town presents danger in respect of road safety and drivers are expected to exercise a high degree of care and the presence of large numbers of young people must be constantly borne in mind. Parking on the any of the Group's estate is subject to local rules and restrictions and advice as to parking arrangements should be made with the College Representative. Contractors shall ensure that all construction site vehicles and plant are only operated by trained and competent persons and are adequately maintained and used in accordance with recommended guidance and safe working practices.

It is expected that contractors will adhere to site speed limits and traffic signs when driving on any Activate Learning site. All contractors are required to drive with due care and attention and with regard to the presence of staff, students and other visitors whilst on College premises. All contractors must strictly comply with any prior agreed access and/or egress routes and with any one-way systems in force at the particular College site.

Contractors must ensure the separation of vehicle and pedestrian routes on site as far is as reasonably practicable, using appropriate barriers, safety warning signage and temporary lighting, etc.

Delivery and storage of materials and loading and unloading vehicles

Contractors will be facilitated as much as possible by the College, but prior approval must be obtained before arranging for the delivery of any equipment or materials or using any space which is normally used by staff and students for parking and access. It will be expected that contractors

provide Banksmen to supervise loading and unloading operations and that any damage to any surface must be made good at the contractor's own expense.

Contractors are not permitted to use any College equipment for unloading and College employees are not permitted to assist a contractor physically in any work including carrying or offloading.

Forklift trucks and excavators

Specific permission is required for the use of forklift trucks or excavators. It is unlikely that such permission will be granted unless they are operated within a defined and fenced off area and it can be demonstrated that drivers have received the necessary formal training. *(Apart from being a hazard to persons, such equipment can cause serious damage to the surface of roads, pavements and landscaped areas).*

Fire safety and emergency evacuation procedures

All contractors and their employees must ensure that they fully familiarise themselves with the relevant College Campus Fire and Emergency Evacuation Procedures copies of which can be supplied by either the site Property & Environment Manager or the College Representative. A safe means of escape in case of fire must be maintained at all times.

The integrity of fire alarm systems and escape routes must be maintained in any occupied building at all times. When work involves the breaking through of fire compartments, the breakthrough point should be suitably fire stopped immediately. If in doubt the College Representative should be consulted prior to commencing work.

Contractors must obey alarm signals whilst on the College estate and make themselves aware of local fire procedures, they must report to the buildings fire officer (wearing a hi viz vest) after the building has been evacuated following an emergency.

Contractors should be aware that College staff and students would regard accidental tripping of fire alarms by their work activities as a genuine emergency and the evacuation procedure for that building will be implemented and the fire brigade summoned. The Contractor should make every effort to ensure that such false alarms are not caused. The location of automatic detection devices and the work to be undertaken must be considered prior to starting work and the College Representative advised if there is any likelihood of a false alarm being caused.

Where any form of hot working is to be undertaken, suitable precautions including the provision of appropriate portable fire-fighting equipment must be provided by the contractor. Additionally, the permit-to-work management system must be initiated with the College Representative before any hot working commences.

IMPORTANT NOTE - You are reminded that smoking is restricted to designated external smoking areas and strictly prohibited by contractors whilst they are in the process of undertaking their construction works on any of the Activate Learning sites.

Use of hazardous substances on site

It is expected that appropriate COSHH assessments will have been carried out when working with substances hazardous to health and control measures will be in place with strict adherence to instructions contained within the substance supplier’s Material and Safety Data Sheets.

Use of LPG and highly flammable liquids on site

Working with highly flammable liquids and LPG must only be undertaken by suitably trained and competent people. The necessary safety arrangements for work involving the use of LPG must be agreed with the site Property & Environment Manager, prior to work commencing.

Highly flammable solvents or materials containing highly flammable solvents may only be used after seeking prior permission from the College Representative. No flammable liquids and LPG cylinders may be stored within College buildings. They must be stored outside at a location agreed with the

College Representative away from buildings, in a secure cage, protected from the weather and marked with appropriate statutory warning signs.

Oxygen and acetylene cylinders used on portable trolleys must always be chained safely in position and accompanied by an appropriate fire extinguisher such as a carbon dioxide or dry powder fire extinguisher.

LPG, acetylene or oxygen cylinders may only be used in well-ventilated spaces and NEVER below ground level or directly adjacent to any excavations.

IMPORTANT NOTE - The contractor is responsible for providing appropriate fire-fighting equipment whenever LPG or oxy-fuel cutting equipment is used on the Group's estate.

Compressed gas cylinders

Cylinders must only be used and moved in accordance with the supplier's instructions. They must be stored in the open air out of sunlight and away from heat in a designated secure area. They must not be stored in timber cabins. Cylinders must not be rolled but be moved upright.

A written method statement is required from a contractor before gas cylinders are allowed on the college campus. All persons using or handling compressed gas cylinders must be trained in their usage.

Provision of emergency first-aid and summoning the emergency services

Contractors will be responsible for both providing their own first-aid equipment and facilities and trained First Aiders used by their employees unless alternative arrangements have been previously agreed and stipulated within the contract.

If it is necessary to summon the emergency services, then the contractor should do this via the college campus main reception desk so that the emergency services can be properly directed. The College Representative must also be immediately notified of any construction site emergency.

Accident, incident and dangerous occurrence notification and reporting

All accidents, incidents and dangerous occurrences occurring to both contractors, College staff, students and other visitors, etc., must be immediately brought to the attention of the Campus Property & Environment Manager or College Representative. Furthermore, it is expected that contractors will comply with the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) (as amended), with all reportable accidents and dangerous occurrences promptly reported on-line to the Health and Safety Executive (HSE) with copies always forwarded to the site Property & Environment Manager.

Construction site security and the use of statutory signage

Contractors must provide all such equipment sufficient to protect third parties from danger. This includes barriers together with appropriate warning signs. Where any work prevents normal access, the contractor must liaise with the College Representative beforehand so that the College may erect suitable diversion signs.

Fencing and barriers shall be erected to ensure the security of the construction site with adequate statutory warning signs, in accordance with the requirements of the Health and Safety (Safety Signs & Signals) Regulations 1996. All such signage shall be prominently displayed in order to deter intruders from accessing the site. In order to be considered adequate these measures shall include the erection of 'Heras' -type or close board fencing together with the removal of ladders from the first lift of any scaffold that has been erected on site.

Regular checks must be made to ensure the integrity of the construction site perimeter fencing with simple records kept of such checks. Repairs to damaged fencing, barriers and signage must be promptly organised by the contractor as soon as they are noted/reported.

It is expected that all construction sites will be thoroughly checked by a competent representative of the main or Principal Contractor, at the end of each working day, with appropriate steps taken to ensure that the site is safe and secure against access by unauthorised persons.

IMPORTANT NOTE - All visitors to the contractors' site (unless segregated and contractor managed) including drivers of delivery vehicles must always immediately report to the Main Reception, which will maintain regular communications with the site Property & Environment Office.

Construction and Maintenance work under CDM Regulations

The CDM Regulations applies to almost all maintenance and construction work required at the College. Within CDM, construction work means the carrying out of any building, civil engineering or engineering construction work and includes:

(a). the construction, alteration, conversion, fitting out, commissioning, renovation, repair, upkeep, redecoration or other maintenance (including cleaning which involves the use of water or an abrasive at high pressure, or the use of corrosive or toxic substances), de-commissioning, demolition or dismantling of a structure.

(b). the preparation for an intended structure, including site clearance, exploration, investigation (but not site survey) and excavation (but not pre-construction archaeological investigations), and the clearance or preparation of the site or structure for use or occupation at its conclusion.

(c). the assembly on site of prefabricated elements to form a structure or the disassembly on site of the prefabricated elements which, immediately before such disassembly, formed a structure.

(d). the removal of a structure, or of any product or waste resulting from demolition or dismantling of a structure, or from disassembly of prefabricated elements which immediately before such disassembly formed such a structure.

(e). the installation, commissioning, maintenance, repair or removal of mechanical, electrical, gas, compressed air, hydraulic, telecommunications, computer or similar services which are normally fixed within or to a structure.

Activate Learning College - Safe Working Practices for Visiting Workers, Contractors and Sub-Contractors Acceptance Form

This form must be completed and signed by the Principal Designer / Contractor Supervisor / Manager prior to undertaking any construction, maintenance, or other similar works on the College estate.

This completed form should be returned to the: **Property & Environment Manager (or designated person) of the relevant Campus**

- I/We have received a copy of the Activate Learning Safe Working Practices for Contractors procedure (Appendix 1 to Section 26 of the H&S Manual).
- I/We have arranged for a site H&S Induction with (enter name of College contact) on ……. (enter date and time).
- I/We have read and understood the procedure/section 26 referred to above and briefed our employees and sub-contractors of the requirements and contents.
- I/We agree to comply with all current legislation governing construction works and associated activities together with the specific rules and procedures detailed within these procedure/section 26 and industry best practice such as the Construction Sector Site Operating Procedures version 9.
- I/We understand that any contravention/breach of relevant health and safety legislation and the specific rules and procedures detailed in this Safe Working Practice document, may lead to termination of the contract and/or removal from the College approved list of contractors.
- Where a DBS is required, I have provided evidence of this for all my employees required to work at the College.

Signed:
……

Designation:
……

On behalf of (Business/Contractor Name):
……

Dated:
……

Signed by the Property & Environment Manager (or designated person):
……

Dated:
……

CONTRACTORS / UNESCORTED VISITORS INDUCTION PROGRAMME

Managers must ensure that all unescorted visitors and contractors employed to carry out work within the College or its outreach Centres receive an induction prior to commencement of work.

Primary Information	Details
College Health & Safety Policy Statement	• The object of the policy • The College's attitude to health, safety, and wellbeing
College Health & Safety Management Structure	• Those with Health & Safety responsibilities
Fire and Emergency Procedures	• First Aid-Accident Reporting • Fire Evacuation Procedures • Assembly points • Identification of persons in charge of assembly points
Areas of Controlled Access	• ID swipe cards / access arrangements • Signing in • CCTV • Identify contractors' areas. • Restricted Areas, how are they are identified and who may access them
Code of Conduct	• Safeguarding • Use of Radios and Mobile Phones • Designated smoking areas • Abuse of drugs and alcohol • Equality on Campus
Vehicle use	• Use of vehicles on site, including permits, speed and Parking restrictions
General requirements when working	• Health and safety procedures laid down by the risk assessment process must be followed. • Housekeeping • Areas in which personal protective equipment is mandatory. • Special clothing or hygiene requirements • Welfare Facilities
Site Tour	• Location of firefighting equipment • Welfare and amenity provisions (toilets, washing/eating facilities) • Car parking/vehicle restrictions

Company*	Name	Signature

*Use a separate form for each Company / Contractor organisation

Name of Contractor Supervisor / Manager:_____

Signature of Supervisor / Manager:_____

Date of Induction:_____

Name of Person providing Induction:_____

Note: One copy to be retained by the contractor and one placed in the Contractors Induction file

Section 27. Radiation Safety

(refer to CLEAPSS guidance L093 Managing Ionising Radiations and Radioactive Substances in Schools and Colleges)

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Section 28. Asbestos Management

28.0. Procedural Statement

The aim of this Asbestos Management Plan (AMP) is to set out the guidelines for compliance with the Control of Asbestos at Work Regulations 2012. This procedure applies to all employees and contractors working with or for Activate Learning, its campuses and any of its outreach centres, including franchises and work placements. For the purposes of this document, Asbestos Containing Materials will be referred to as ACMs.

28.1. Introduction

The College's procedure is to:

- Identify and manage asbestos containing materials (ACMs) across the Activate Learning estate by:
    - Suitable and sufficient risk assessment will be conducted by a competent person to determine the presence of ACMs
    - Maintaining and keeping a record of all known ACMs identified from the risk assessment via an Asbestos Register, to be held at each campus by the relevant Property & Environment Department
- Preventing or controlling exposure to the hazards associated with ACMs across the Activate Learning estate, so far as is reasonably practicable:
    - Only licensed asbestos contractors will be authorised to carry out works where the risk assessment has identified the presence of ACMs
    - Information will be provided to contractors on the location of ACMs prior to commencement of any work
    - Property & Environment Department will periodically monitor the condition of the areas containing ACMs as per the Asbestos Management Plan
- Provide information on the procedure to be adopted for all individual post holders within Activate Learning estate:
    - This procedure will be communicated to all Faculties/Departments and recognised trade unions. It will be the responsibility of each Director to ensure that the policy is communicated to all individuals
- Provide information on the specific responsibilities of individuals, namely CEO, Director of Group Facilities Operations and Property & Environment Managers.
    - To ensure that Property & Environment staff have been trained to recognise the presence of ACMs
    - To provide asbestos awareness training on a regular basis to this particular group of individuals
    - To conduct a biennial review of the College's Asbestos Management Plan and Emergency Procedures.

28.2. Roles and Responsibilities

The CEO, on behalf of the Corporation, as Duty Holder, has overall responsibility for ensuring that adequate arrangements and the effective implementation of this COP is adopted.

Director of Group Facilities Operations (Appointed Person).

- Has delegated responsibility for ensuring effective implementation of the procedures and communication with their teams.
- Ensures that all Property & Environment operatives clearly understand their roles and responsibilities to enable them to effectively carry out the management of the procedures.

- To co-ordinate activities with the Group Health & Safety Manager to ensure legislative compliance.

Faculty and Group Services Directors.

- Duty to ensure that the policy is adhered to and individuals within their area of control understand their responsibilities with regard to the procedures.
- To inform staff through staff Induction the requirement to avoid using equipment/accessories that may penetrate/damage the fabric of the building.

Property & Environment Managers (Deputy Appointed Person).

- Ensure the Asbestos Register is kept up to date; provide a record of the location, condition, maintenance and removal of all ACMs.
- Arranging, through the services of a licensed contractor, for the repairing, sealing, labelling or removing of ACMs if there is a risk of exposure due to its condition or location
- Periodically monitor the condition of ACMs
- Provide information to contractors prior to any work commencing
- To obtain from the contractor a plan of works where ACMs are known to be present

Group Health & Safety Manager

- To review the AMP on a biennial basis.
- To work jointly with the Director of Group Facilities Operations to ensure the objectives of the AMP are achieved
- To be consulted by the Property & Environment Managers on any work undertaken to the fabric of the building where known ACMs are present
- To advise on any asbestos training for the employees identified in this AMP.
- Is responsible for ensuring the procedures is brought to the attention of the Group Executive Team, Regional H&S Committees and Leadership Team.

Regional Health & Safety Officers

- To periodically review the Asbestos Registers to ensure they are up to date as per the Asbestos Management Plan
- Will periodically monitor the condition of the areas containing ACMs as per the Asbestos Management Plan.

Employees.

- Take reasonable care for the health and safety of themselves and others.
- Familiarise themselves and comply with the code of practice and its content.
- All staff have a role to play in enforcing the code of practice and are expected to deal with any observed or reported breaches.

28.3. General Guidelines

This AMP is intended as a guidance document for all staff across the Activate Learning estate.

All individuals have a duty to report any damage to ACMs or to materials suspected of containing asbestos to the Facilities Helpdesk. Departments are not to carry out any work on the fabric of buildings on the Activate Learning estate or engage contractors to do so without consultation with the Property & Environment Manager regarding the possible presence of ACMs, in case such work leads to accidental asbestos fibre release from drilling, cutting or breaking of ACMs.

As and when new information regarding ACMs becomes available, this will be duly communicated to all individuals through appropriate College communication channels.

28.4. Procedure

There is a legal requirement on the College, as an employer, to 'manage' the asbestos in its buildings. In summary, such management will involve:

- Finding out if ACMs are suspected or present
- Check the condition of ACMs
- Identify what condition the material is in
- Record the information
- Assess periodically the condition of ACMs
- Prepare and implement a plan to manage these risks

The management of ACMs in the fabric of the buildings is primarily the responsibility of the Property & Environment Department. They will take all appropriate steps to comply with asbestos related legislation. In particular, it seeks to ensure that any work involving ACMs will not lead to any person being exposed to greater than legally stated 'control' levels of asbestos fibres in the air.

28.5. Identification of Asbestos Containing Materials (ACMs)

A suitable and sufficient risk assessment will be conducted by a competent person to establish if asbestos is present across the Activate Learning estate. In order to determine the presence, extent and location of ACMs, a Management Survey will be conducted. The purpose of the survey is to collect representative samples which are analysed to determine the type and condition of the asbestos.

Following the survey reports, Asbestos Registers will be compiled for each campus. It will be the responsibility of the relevant Property & Environment Manager to ensure that the Asbestos Register is reviewed and updated in line with any physical alterations to the Campus. Revisions will take place where asbestos removal, encapsulation and environmental cleaning works have been carried out.

ACMs identified from the survey will be subject to periodic review by the Property & Environment Manager. The review shall involve a visual inspection of all ACMs listed in the Asbestos Register. Results from the inspection will be used to update the Asbestos Register and, if required, risk assessments will be revised. If it is deemed that deterioration of ACMs is significant, then this will be escalated to the Director of Group Facilities Operations and the Group Health & Safety Manager.

28.6. Plan of Work

Before any work is undertaken by the Property & Environment Department, a plan of work must be produced. This can also be referred to as a Method of Statement and will detail how the work is to be carried out. The plan of work must be readily available and kept by the Property & Environment Manager with the Asbestos Register. The College reserves the right to stop any work which it deems is not compliant with current legal requirements.

Before any work is undertaken by an HSE licensed contractor, they must provide to the Property & Environment Manager a plan of work, RAMS, a copy of their licences and evidence of competency.

28.7. Categories of Work

There are three categories of work with asbestos:

- **Licensed Work.** Applies where the exposure to asbestos is not sporadic and of low intensity OR work for which the risk assessment demonstrates that the control limit will be or is liable to be exceeded.

- **Non-Licensed Work**. Applies when the work is sporadic and of low intensity and does not exceed the control limit e.g. short non-continuous maintenance work; removal of textured decorative coatings when this can be achieved without deterioration of the material; removal of gaskets or asbestos rope cords from heating appliances

- **Notifiable Non-Licensed Work (NNLW)**. Applies when the work is sporadic and of low intensity and does not exceed the control limit e.g. short duration work; repairing minor damage to a small section of pipe insulation where the exterior coating has been broken or damaged; removing AIB panels fixed with nails or screws; removal work involving textured coatings where the method of removal requires deterioration of the material; maintenance work on asbestos cement. Work under NNLW must be reported to the HSE prior to work commencing. A licence is not required for this type of work.

Activate Learning does not expect any staff to undertake works on ACMs without appropriate training and authorisation.

28.8. Risk Management of ACMs

In order to prioritise the risk of identified ACMs and appropriate controls, the following categories have been assigned:

- Priority 1 (High risk) – Asbestos removal and environmental cleaning works at Activate Learning estate shall be undertaken immediately.
- Priority 2 (Medium risk) and 3 (Low risk) – Management controls are set in place in order to avoid any exposure or release of fibres to individuals.

28.9. Major Refurbishment and Demolition Work

Where major structural changes to the building are required, other work involving disturbing the fabric of the building, or parts of the building are to be demolished, a Refurbishment/Demolition Survey will be carried out.

Where the Construction (Design, Management) Regulations 2015 apply, information from the Refurbishment/Demolition survey will be made available to the Principal Designer /Contractor.

Regardless of priority, all ACMs will, as far as practicable, be identified and removed by specialists in advance of major refurbishment and demolition works. All removal works must be undertaken by an approved HSE licensed contractor.

28.10. Re-Inspection Surveys/assessment

Activate Learning will undertake Re-Inspection Surveys/assessment every 3 years OR sooner if a reason to suspect that current surveys are no longer valid e.g. there have been significant changes to the premises. The purpose of the Re-Inspection Surveys/assessment is to assess the condition and any damage of previously identified ACM's. The Re-Inspection Surveys/assessment will be completed by a qualified external contractor.

28.11. Maintenance, Repair and General Works

Under no circumstances must any work to the fabric of the building be undertaken by individuals with the exception of the Property & Environment Department, who have received the appropriate training and instruction to recognise ACM's. Where works are required to the fabric of the building, a request must be made, in writing, to the Facilities Helpdesk.

The Property & Environment Manager will consult the Asbestos Register for the presence of any ACMs. For minor works, the Property & Environment Department will carry out the work; however, if during the course of the work, suspect material is found then they will immediately stop the work. For works which involve an external contractor, all information on the known presence of ACMs will be provided to the contractor prior to work starting, through the Permit to Work procedure. The contractor will also return signed, the form at Appendix 1 as confirmation that they have read the appropriate asbestos register/survey. The contractor must contact the Property & Environment Manager immediately if they encounter suspect material.

Where it has been identified that ACMs are present, then an HSE licensed contractor will be appointed to carry out the work and provide a suitable plan of work to the Property & Environment Department.

28.12. Non-removal of Asbestos during Building Works

In the majority of instances, asbestos is safe if left undisturbed. This decision will be based on evidence from the Asbestos Register, risk assessments and current condition of the material. Where it is deemed that ACMs will not be removed, then the following precautionary measures shall be put in place:

- Information will be provided to the contractor prior to any works being undertaken
- The contractor will provide details in the plan of work on the measures to be taken in order to protect the material from further damage/disturbance, protection and decontamination of those carrying out the work, protection of other persons on or near the working area
- The contractor to provide evidence via airborne monitoring of the working area that the work is not disturbing ACMs

28.13. Asbestos Removal and Environmental Cleaning Works

Any work involving the treatment, encapsulating, or removing of ACMs shall be undertaken by a licensed contractor.

Licensed asbestos contractors shall:

- Consult the Asbestos Register, survey information and risk assessment to ascertain the scope and extent of the asbestos.
- Provide a plan of work for the removal of the asbestos.
- Notify the appropriate enforcing authority 14 days in advance of any works to be undertaken.
- Conduct air measurements as part of the Clearance Certificate and employee exposure monitoring. This must be carried to ISO 17025 by a recognised accredited body.
- Take adequate steps to monitor employees' exposure through personal or static sampling.
- Provide test results to the Property & Environment Manager and Group Health & Safety Manager.

28.14. Control of Waste

All asbestos waste removed will be sent to a licensed disposal site. Documentary evidence of safe disposal via copies of consignment notes must be provided by the waste carrier. Licensed contractors to ensure that asbestos waste is placed in suitable double-skinned plastic sacks to prevent any of the contents escaping during normal handling. Any asbestos waste that contains sharp or rigid material must not be placed in sacks but must be double wrapped intact in plastic sheeting and placed in a sealed, labelled container such as a lockable skip.

28.15. Emergency Procedure

Where work is being carried out by a non-licensed contractor and suspected ACM material is encountered, the following procedure must be followed:

- Stop working immediately and contact the Property & Environment Manager who will then notify the Regional Health & Safety Officer.
- Property & Environment Manager to isolate the area, shut doors and windows and post warning notices to instruct individuals not to enter the area.
- If possible, enclose/barricade the area.
- Property & Environment Manager to inform the Director of Group Facilities Operations.
- Arrangements to be made for a sample to be taken of the material and sent for testing by a UKAS accredited body.
- Appropriate risk assessments and control procedures shall be agreed following consultation with the Property & Environment Manager and the Regional Health & Safety Officer and communicated to appropriate individuals.

- Following confirmation of the test sampling, the area will either be encapsulated, treated or ACM removed.

28.16. Training

Awareness training will be provided on a regular basis to all Property & Environment operatives and other staff (such as IT) when required. This will be delivered by e-learning and will focus on the awareness of asbestos containing materials.

Duty to Manage Asbestos (Appointed Person) training will be provided to the Property & Environment Managers and Director of Group Facilities Operations.

28.17. Monitoring and Review of the Asbestos Management Plan (AMP)

The following measures will apply:

- Property & Environment Managers will periodically monitor the condition of ACMs.
- Group Health & Safety Manager to review the AMP on a biennial basis.
- Health & Safety Officers to periodically review the Asbestos Registers to ensure they are up to date as per the Campus Asbestos Risk Assessments and this Asbestos Management Plan.

28.18. Related Policies/Documents

- Control of Asbestos at Work Regulations 2012
- Construction (Design, Management) Regulations 2015
- Campus specific Asbestos Management Plans
- Health and Safety Executive
- ISO 17025
- H&S Policy
- Campus Asbestos Register
- Campus Asbestos Management Plans (part of the Campus Asbestos Risk Assessment and Asbestos Management Survey Report procedure)
- Permit to Work Procedure
- Method Statement (Plan of Work)

28.19. Help

- Group Health & Safety Manager
- Regional Health & Safety Officers
- Property & Environment Managers

28.20. Appendices

Appendix 1 - Safe Working Practices with Asbestos - Contractors Acknowledgement Form

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Safe Working Practices with Asbestos - Contractors Acknowledgement Form

An Asbestos Management Survey Report which shows the incidence of asbestos containing materials (ACMs) throughout the site, is available to you and can be viewed on site in the Property & Environment Office or access to an electronic copy can be provided. It is mandatory for all contractors to view this survey before commencing any work of an invasive nature.

Contractor Declaration:

As a condition of any contract to provide services and /or materials to Activate Learning we, the undersigned company, hereby agree to perform our work in such a manner so as not to disturb any Asbestos Containing Materials (ACM's).

To ensure that asbestos-containing materials are not disturbed we will undertake the following action:

- We will review the Asbestos Registers and Emergency Procedures prior to commencing work. If we will be working in areas where asbestos is known to be present, we will adhere to Activate Learning procedures regarding working with asbestos and safe working practices.
- We will follow Contractors Flow Diagram 'Cont01' located within the appropriate site/building Asbestos Management Plan.
- We will be aware of and follow Activate Learning emergency procedures if in the event we encounter suspect material during our work.
- If any work is to be undertaken in areas where asbestos was identified or presumed, we will ensure our employees, agents, contractors and representatives have undertaken asbestos awareness training, reviewed on a regular basis.

Name: _____

Role (Supervisor/Project Manager/Manager etc): _____

Signed: _____

Date: _____

This completed form should be returned to the: **Property & Environment Manager (or designated person) of the relevant campus prior to any work commencing.**

Signed by the Property & Environment Manager (or designated person):

_____

Dated: _____

Please report any issues or comments to the Health and Safety Team healthandsafety@activatelearning.ac.uk

Section 29. Event Planning & Public Events

29.0. Procedural Statement

This section aims to ensure that all events organised by Activate Learning are planned and executed efficiently, safely, and in compliance with relevant regulations. The section provides guidelines for the planning, promotion, and delivery of events, ensuring they meet the needs of all stakeholders.

29.1. Scope

This section applies to all staff, students, contractors, and any other parties involved in organising or participating in events at Activate Learning.

29.2. Key Principles

- Ensuring all events are planned and conducted in a manner that prioritises the safety and well-being of all participants.
- Complying with relevant legislation and internal policies, including health and safety regulations, data protection, and public liability insurance.
- Recognising the importance of effective event management in enhancing the reputation and operational success of Activate Learning.

29.3. Responsibilities

Event Organisers

- Ensuring all events are planned in accordance with this section, the H&S policy and relevant legislation.
- Completing appropriate risk assessments and implementing suitable controls to mitigate identified risks.
- Coordinating with relevant departments to ensure all logistical aspects of the event are managed effectively.

Health and Safety Officers

- Providing guidance on health and safety requirements for events.
- Assisting in the completion of risk assessments and ensuring compliance with health and safety regulations.

Managers

- Supporting event organisers in the planning and execution of events.
- Ensuring that all staff involved in events are aware of their roles and responsibilities.

Employees

- Participating in event planning and execution as required.
- Adhering to all health and safety guidelines and procedures during events.

29.4. Event Planning Requirements

Initial Planning

- Define the purpose and objectives of the event, ensuring they align with the organisational goals of Activate Learning.
- Identify the target audience and stakeholders, including students, staff, sponsors, and the community.
- Determine the type and scale of the event, considering practical aspects such as venue, facilities, and resources.

- Consider the possible attendance numbers as the event may require additional measures to maintain safety and compliance.

Health and Safety

- Conduct comprehensive risk assessments to identify potential hazards and implement appropriate control measures.
- Ensure compliance with health and safety legislation, including provisions for first aid, emergency procedures, and safeguarding.
- Address site-specific considerations such as parking, access arrangements, and environmental impact.

Financial Management

- Develop a realistic budget, identifying sources of income and expenditure, including venue hire, catering, and promotional costs.
- Implement financial contingency plans to address potential issues such as inclement weather or low attendance.

Promotion and Communication

- Develop a promotional plan to raise awareness of the event, using cost-effective methods appropriate to the target audience.
- Ensure clear and effective communication with all stakeholders throughout the planning and execution of the event.

29.5. Execution and Monitoring

- Assign specific roles and responsibilities to staff and volunteers, ensuring effective coordination and teamwork.
- Monitor the progress of event planning and make necessary adjustments to ensure objectives are met.
- Conduct regular reviews and debriefs to identify areas for improvement and ensure continuous enhancement of event planning processes.

29.6. Compliance and Review

- Ensure all events comply with relevant legislation and internal policies, including health and safety, data protection, and public liability insurance [1] .
- The effectiveness of this policy will be reviewed annually or sooner if required to ensure it remains current and effective.

29.7. Conclusion

Activate Learning is committed to ensuring that all events are planned and executed to the highest standards, prioritising the safety and well-being of all participants and meeting the needs of all stakeholders.

Under the Terrorism (Protection of Premises) regulations, the Group Director of Faculty and College will be the designated Responsible Person for all events on their college campus; college organised or external i.e. hirings. Collaboration, co-ordination and communication will be key to ensuring all stake holders are aware of their responsibilities.

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Section 30. Science Areas and Science Activities

30.0. Procedural Statement

This section aims to ensure the safety and health of all employees, students, and visitors in college science areas and during science activities by providing guidelines for safe practices, risk assessment, and compliance with relevant health and safety regulations.

30.1. Scope

This procedure applies to all science laboratories, preparation rooms, storage areas, and any other locations where science activities are conducted within the college. It covers all employees, students, contractors, and visitors involved in or affected by science activities. For guidance regarding use and storage of radiation sources refer to **Section 27. Radiation Safety incl Disposal of Radioactive Waste.**

30.2. Responsibilities

- **Managers**: Ensure the provision of a safe working environment, ensure risk assessments are conducted for each science activity, provide necessary training, and ensure compliance with health and safety regulations.
- Monitor compliance with safety procedures, ensure risk assessments are conducted and updated, and provide necessary training and supervision
- **Employees (Teachers/Tutors/Lecturers, Technicians)**: Cooperate with the employer and manager on health and safety matters, follow safety procedures, use provided safety equipment, and report any hazards or incidents.
- **Students**: Follow instructions, use safety equipment as directed, and report any hazards or incidents.

30.3. Risk Assessment

Science Tutors / Technicians

- Conduct a risk assessment before any activity involving hazardous procedures, chemicals, or microorganisms.
- Identify hazards, assess the risks, and implement control measures to minimise or prevent risks.
- Review and update risk assessments regularly or when there are changes in activities or conditions.

30.4. Safety Measures

Science Tutors / Technicians

- **Personal Protective Equipment (PPE)**: Ensure appropriate PPE is available and used correctly, including lab coats, gloves, goggles, and other necessary equipment.
- **Laboratory Safety**: Maintain a clean and organised laboratory environment, ensure proper storage of chemicals, and use fume cupboards where necessary.
- **Equipment Safety**: Regularly inspect and maintain laboratory equipment to ensure it is in good working condition.
- **Emergency Procedures**: Ensure emergency equipment such as eyewash stations, safety showers (if available), and fire extinguishers are accessible and in working order. Display emergency contact numbers and procedures prominently.

30.5. Training

Managers

- Ensure Science staff are appropriately trained and competent for their role. This will include how to conduct a risk assessment, the correct use of PPE, use and storage of hazardous substances, use and maintenance of laboratory equipment, and awareness of emergency procedures. Further training is available via CLEAPSS.
- Ensure Science staff understand the risks associated with science activities and the importance of following safety procedures .
- Conduct regular safety drills and refresher training sessions to reinforce safety practices.

Science Tutors / Technicians

- Provide training to all relevant students on the correct use of PPE, laboratory equipment, and emergency procedures.
- Ensure relevant students understand the risks associated with science activities and the importance of following safety procedures .
- Conduct regular safety drills and refresher training sessions to reinforce safety practices.

30.6. Review

- Managers are to conduct periodic spot-checks to ensure compliance with this procedure and identify areas for improvement.

30.7. Compliance

- Ensure compliance with the Health and Safety at Work Act 1974, COSHH Regulations 2002 (as amended), and the Management of Health and Safety at Work Regulations 1999.
- Follow guidance from CLEAPSS and other relevant health and safety resources

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Section 31. Electrical Safety and Inspection & Testing Of Electrical Equipment

31.0. Procedure Statement

This section sets out what is required to ensure that electrical equipment (i.e. equipment with a plug or equipment wired directly into a power source) used at the College is maintained in a safe condition for use. The aim is to reduce the risk of injury and property damage from faulty electrical equipment. If followed it will ensure compliance with the maintenance requirements of Regulation 4(2) of the Electricity at Work Regulations 1989 (EAW) and The Provision and Use of Work Equipment Regulations (PUWER) 1998.

31.1. Introduction

This section is based upon the HSE guides HSG107 Maintaining portable electrical equipment, INDG236(REV3) Maintaining portable electric equipment in low-risk environments, IET Guidance Note 3 Inspection & Testing 9th Edition and the 5th Edition of the IET Code of Practice for In-Service Inspection and Testing of Electrical Equipment.

All staff and students are to be encouraged to:

- visually inspect portable electrical equipment for any obvious faults before using the equipment.
- not use faulty electrical equipment and immediately report faults.
- not use equipment for work that has not been appropriately inspected or tested.

All electrical equipment must be purchased from official suppliers and be used for the purpose intended by the manufacturer or designer.

All electrical equipment owned by the College must be inspected and tested by the College-appointed contractors – the Property & Environment administrators will liaise with managers and contractors to arrange a suitable date and time for testing.

Inspection and test frequencies with respect to the various types of equipment used at the College are given in Appendix 4. Equipment that has been satisfactorily inspected and/or tested must be labelled according to the standard College label format (see para 31.13. Labelling). Items that fail inspection or test will be removed from service/use immediately by the Property & Environment Team or Health & Safety Team, and only those that are deemed repairable (e.g. flex replaced) will not be disposed of.

31.2. Scope

This procedure sets out what managers and staff have to do to prevent, so far as is reasonably practicable, anyone being injured or property being damaged, through poorly maintained electrical equipment.

31.2.1. Which electrical equipment is within scope? Any electrical equipment that has a power lead (cable) and plug and which is normally moved around or can easily be moved from place to place from hereon to be known as Portable Equipment. This also includes larger equipment that can be moved but which is generally stationary in a fixed location, and which has a lead and plug e.g. photocopiers, larger items of scientific analytical equipment. Other items which would also be included would be those that are permanently connected to the electrical installation such as hand dryers and cookers. This equipment may be either Class I, Class II, Class II FE or Class III

Electrical equipment tested under other specific legislation or separate testing programmes such as Fixed wiring inspections are outside the scope of this document and its requirements.

31.2.2. Categories of Electrical Equipment. Electrical equipment is categorised into:

- Mobile
- Stationary

- Fixed equipment
- Handheld Equipment
- Built-in appliances/equipment
- IT equipment
- Extension Leads
- Electric Heating Equipment
- Electrical Installations in office furniture and similar

These categories help to make decisions regarding the frequency of in-service inspection/test and the likelihood of damage occurring e.g. handheld equipment should be inspected more frequently than stationary equipment. Appendix 1 gives definitions and examples of these categories.

31.2.3. Three phase and 'hard wired' equipment. Portable equipment does not include electrical equipment that is permanently connected to the building electrical supply - 'hard wired', or three phase equipment.

31.3. Responsibilities

Managers.

Managers must ensure that arrangements are in place for the regular inspection and testing of portable electrical appliances within their areas of control, as outlined in this section. This will include electrical equipment in offices, laboratories, workshops, stores, equipment brought onto site as part of an event and equipment designed and engineered as part of College activities.

Staff.

Staff must:

- Ensure that they use electrical equipment as instructed.
- Check that equipment has no obvious visual damage or defects before using it.
- Remove from service and report any defective or out-of-test equipment; general organisation of first aid in the department.
- Only use equipment that has a valid inspection/test label.

Student-owned equipment must conform to current UKCA (UK Conformity Assessed), or CE (European Conformity) marking standards and must be safe to use. However, it does not need to be subject to in-service inspection and testing unless there are doubts about its safety, or UNLESS it is used 'for work'. Any student-owned equipment that does have either UKCA or EC marking or which appears to be unsafe must not be used. The College reserves the right to ban use, confiscate the equipment, or insist on in-service inspection and test at the student's expense.

31.4. Types of Inspection

31.4.1. User check. Users must check equipment before use. The user check is a vital safety precaution, as many faults can be identified by a simple visual inspection. The user is the person most familiar with the equipment and in the best position to know if the equipment is in a safe condition and working properly. The user check is limited to an external visual inspection without any dismantling of the equipment, such as removal of covers or plug tops.

These checks do not need to be recorded. However, if faults are identified, action must be taken to prevent further use until repair or disposal. A guide on what to look for during a user check is given in Appendix 2.

The frequency of checks will vary depending on the type of equipment and its location. Guidance is given in Appendix 2.

31.4.2. Formal visual inspection. A formal visual inspection is a more detailed visual inspection by a competent person, and the equipment is labelled to state this inspection has been completed.

The formal visual inspection can be undertaken as the main test for double-insulated equipment in low-risk environments. The method for carrying out a formal visual inspection is set out in Appendix 3. Guidance on frequency of inspection is given in Appendix 4.

The person carrying out the inspection must be trained and competent – see para. 31.5. Competency.

Where equipment fails a formal visual inspection, it must be immediately removed from use and labelled as failed/faulty. Repair or disposal should be arranged.

31.4.3. In-service inspection and test. An in-service inspection and test is a more detailed examination of the equipment, involving:

- a preliminary inspection (as for a formal visual inspection)
- an earth continuity test (Class I equipment only)
- an insulation resistance test if applicable, or protective conductor current /touch current test or substitute / alternative leakage test
- a functional test.

The in-service inspection and test must be carried out by a trained and competent person – refer to para. 31.5. Competency. Full details of how to conduct each test are given during training and in the IET Code of Practice for In-Service Inspection and Testing of Electrical Equipment.

Recommendations on frequency of in-service inspection and test are given in Appendix 4.

31.4.4. Three Phase and 'Hard-Wired' Equipment

16. Three-phase equipment, and equipment operating at currents in excess of 13A, MUST NOT be tested or repaired by College staff (excluding suitably qualified P&E staff). This also applies to all hard-wired equipment.

Responsibility for the maintenance, inspection and test of such equipment rests with the local P&E Manager. Manufacturer's guidance regarding maintenance should be followed, and the owning department should have an appropriate inspection regime in place, covering the equipment and the supply, up to the point where it joins the building electrical supply.

P&E will ensure the inspection and test of this equipment when inspecting and testing the main electrical infrastructure within the building. Time scales for inspection will be in accordance with the environment and use and will follow guidance set out in the Institution of Engineering and Technology (IET) Guidance Note 3 Inspection and Testing.

31.5. Competency - Formal Visual Inspections and Combined Inspection and Testing

Staff. Formal Visual Inspections can normally be carried out by a member of staff who has sufficient information and knowledge of what to look for, what is acceptable, and who has been given the task of carrying out the inspection (that is, they are competent to do the task). Advice on the correct training can be obtained from the Health & Safety Team.

Staff or contractors who carry out combined inspection and testing of portable electrical equipment must be competent to do so. As an example, an acceptable training course to conduct Combined Inspection and Testing (PAT testing) is the City and Guilds Certificate of Inspection and Testing Electrical Equipment (course number 2377-0020).

Staff or contractors who conduct Combined Inspection and Testing (PAT testing) must attend a refresher training course every 4 years to ensure competence is maintained.

College approved contractor. Where a Faculty/Dept identifies the requirement for formal inspection and/or testing then they are to notify the Facilities Helpdesk or local P&E Manager so that the College-approved contractor can be tasked. The procedure for doing so is given in Appendix 5.

31.6. Frequency of Inspection and Testing

Inspection and testing of electrical equipment (formal PAT testing) is a means of assessing if the appliance is safe or if maintenance or repair is required. The frequency of inspection and testing will

depend upon the likelihood of faults developing and the consequences of lack of maintenance. Factors which influence this include:

- the environment (e.g. wet or harsh conditions increase the risk).
- the users (e.g. use by multiple users or the public, or use limited to one person).
- the equipment construction (Class I or Class II).
- the type of equipment e.g. portable, handheld or stationary.

The College has set out the recommended frequency of inspection, adapted from the Health and Safety Executive (HSE) guidance HSG107 and the IET Code of Practice for In-Service Inspection and Testing of Electrical Equipment. These test frequencies are set out in Appendix 4.

Competent staff and contractors carrying out formal inspections and tests must be guided by these frequencies. Where there is a higher level of risk the frequency of inspection/test may need to be increased i.e. where equipment is regularly damaged, fails tests or is mistreated. If a Faculty/Dept believes that less frequent inspection/test is required, this must be justified by risk assessment, with reference to previous inspection/test results, and failure data, and must be agreed with the Health & Safety Manager and P&E Manager.

Guidance:

In general, office equipment which is kept in the same location e.g., IT equipment, photocopiers etc will only need an in-service inspection and test every 3-4 years. More frequently used equipment, if it is moved regularly or is hand-held and hence is more likely to present a risk to the user, requires more frequent inspection and test e.g., extension cables require in-service inspection and test every year. Handheld tools and equipment which are regularly used by more than one person or are used in a hostile environment require more regular formal in-service inspection and test (at least annually) and may require additional visual inspections e.g. 6 monthly. See Appendix 4.

31.7. New equipment. Equipment manufacturers and suppliers are legally required to ensure that new or second-hand equipment supplied by them is safe for use at work. No formal inspection or test is required before putting the equipment into first use. However new portable electrical equipment should be checked by the user before use for obvious signs of damage to the plug, cable or external casing.

New equipment should be inspected once it has been installed for 12 months (or sooner if convenient to do so). This may require labelling to ensure that the date it is brought into service is known.

The manufacturer's instructions should always be read and understood before an unfamiliar item of equipment is used for the first time.

31.8. Personal equipment brought into the College. Staff should be discouraged from bringing personal items of electrical equipment to work (e.g. radios, kettles, and fridges). However, there may be circumstances when this is approved by the Manager, in which case this equipment must be inspected and tested before use and then at intervals as specified in this COP. Equipment that is not safe must not be used on College premises or during College activities.

31.9. Student owned equipment. It is not College policy to inspect and/or test electrical items owned by students i.e. laptops, mobile phones and chargers etc, and this is not required under the Electricity at Work Regulations, **UNLESS** such equipment is being used 'for work'. Students are responsible for their own personal electrical/electronic equipment but must follow the College Health and Safety Policy and Codes of Practice. Action must then be taken to reduce the risk to an acceptable level. This may involve banning use of the equipment on College property; confiscation; or insisting on in-service inspection and test at the student's expense.

Student owned electrical equipment held in Residential accommodation will be covered by the Accommodation Services Dept portable appliance testing requirements.

31.10. Leased equipment. Equipment hire companies are legally required to ensure that equipment supplied by them is safe for use at work and is regularly inspected and tested before and after use. Therefore, equipment that is leased by the College should not normally need to be tested by College staff or contractors; appropriate routine safety testing should be an integral part of the service contract. If electrical testing is not part of the service contract (as may be the case for some photocopiers) then this equipment should be included in the in-house testing programme.

31.11. Equipment brought on site for events. Equipment that is brought onto site for an event must be in a safe condition. It is the responsibility of the Event Co-ordinator to ensure equipment has been suitably inspected and if necessary tested. If this cannot be proved, then a competent person must carry out an in-service inspection and test appropriate to the class of equipment. See COP Event Safety for more information relevant to events.

31.12. Pat Testing Equipment.

Equipment used to carry out the in-service inspection and test must have the following functionality:

- Measurement of earth continuity with one or more pre-set test currents up to a maximum value of the order of 26A.
- Measure of insulation resistance normally using a test voltage of 500V D.C.
- Measurement of earth continuity using a low value of current in the range of 20 mA to 200mA, typically 100mA known as the ‘soft test’
- Fuse assessment.

31.13. Labelling

Suitable labelling must be provided on equipment that has been formally visually inspected or tested, stating the following information:

- Date of inspection/test
- Name of tester
- Appliance number (if full records are being kept)
- Next inspection/test date due
- Pass or fail

Labels must be securely fixed so that they do not fall off easily. When re-testing equipment, the old label must be removed. When testing equipment that has a detachable power lead and both the equipment and the power lead are tested, both items must be labelled.

If the appliance has failed it must be labelled with the following information:

- Indication of danger e.g. ‘faulty, dangerous, do not use,’
- Detail of the fault e.g. ‘cable damaged’
- Name of inspector/tester
- Date of inspection/test

31.14. Failed Equipment

Failed equipment will be taken out of use immediately by the Property & Environment Team. It will be removed from the workplace and taken to a secure location or disabled safely so that the equipment cannot be used.

Guidance:

It is recommended, but not mandatory, that Class I (earthed) equipment is tagged with a separate BLUE label, and that CLASS II (double insulated marked with a square within a square) equipment is tagged with a GREEN label. This will help those undertaking testing in the future to identify which items need a formal visual inspection, or an in-service inspection and test.

31.15. Record Keeping

There is no legal requirement to keep records of portable appliance inspection and testing. However, where inspection and testing is carried out by the College-appointed contractor, they will supply records of all items examined. Where College staff carry out inspection and testing, the minimum requirement is to maintain records of:

- Items that fail, including description of the item and appliance number (if there is one); details of the fault; name of the inspector/tester; and the date of inspection/test (also see para 31.13. Labelling).
- The total number of items inspected/tested.

The keeping of any records must not be used as a substitute for labelling equipment.

Guidance:

HSE advise that 'you may find it helpful if you have a lot of electrical equipment to keep track of and to help you review your maintenance procedures. Experience of faults found will determine whether inspection intervals can be lengthened and whether and how often there should be a combined inspection and test.'

The evidence of records would also help in any legal case following an accident involving electrical appliances. Records can be paper-based or electronic. If kept, they should comprise:

- a record of formal and combined inspections and tests for each item of equipment
- a record of repairs made and all faulty equipment
- List of the numbers and types of equipment passed and those failed
- If a PAT Tester that is designed to interface with a PC is used, the format of record storage and printouts will be determined by the PAT Tester and associated software.
- If a manual tester is used, separate records will be required. They should detail:
- appliance description
- the equipment identifier e.g., asset number
- class of appliance
- test date
- formal visual inspection or combined in-service inspection and test
- test type, results, and status (pass/fail)

31.16. PAT Testing Arrangements

In most cases, it will be the responsibility of the Campus Property & Environment (P&E) Manager to arrange PAT for the site. Faculty / Group Services should clearly define who is responsible within their teams to ensure that electrical equipment is available when notified. Where PAT is conducted in-house by competent staff, managers are to notify P&E of the PAT operator, and which areas do not require testing by the P&E PAT contractor.

Guidance:

Where external contractors are engaged, an efficient way of managing testing is for a local manager or staff member to conduct regular site surveys of the area checking for items that may be out of test or was missed on the latest test. The H&S Team will also be checking appliances during regular inspections and audits. They will check the inspection/test frequency of all appliances and will notify P&E of any items that are out of test, or about to become so.

Users should be informed in advance of the visit, and instructed to make all their appliances readily accessible, including those held in store (assuming these items are likely to be used in the following period).

31.17. Monitoring

Compliance with the procedures outlined in this section should be monitored by Managers, P&E teams and the H&S Team, particularly during their annual review of health and safety performance and during health and safety inspection tours.

31.18. Further Information

Further information and guidance is available from the following sources:

a. Guidance note 3: Testing and Inspection, 9th edition, or later edition.

b. Health and safety Executive (HSE) - Maintaining portable electrical Equipment in offices and other low risk environments http://www.hse.gov.uk/pubns/indg236.pdf

c. Health and safety Executive (HSE) - Maintaining portable electrical Equipment https://www.hse.gov.uk/pubns/priced/hsg107.pdf

d. IET Code of Practice: Inspection & Testing of Electrical Equipment- 5th Edition

e. Activate Learning Health and Safety Policy

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Categories of Portable Electrical Equipment

Handheld Portable equipment

A handheld appliance or equipment is portable equipment intended to be held in the hand during normal use e.g. power drill, hedge cutter, soldering iron, hair drier.

This is the most hazardous type of equipment as current can flow from hand to hand and will pass close to the heart. Appliances are also gripped so the operator will find it almost impossible to let go of an appliance under electrical shock conditions. The situation could be worse where a person is working hard and sweating or working outdoors in wet conditions. Moisture will reduce the contact resistance, and a large current could flow.

Mobile equipment

Mobile equipment that is intended to be moved while in operation e.g. vacuum cleaner, floor polisher, or an appliance that can easily be moved from one place to another e.g. food processer, kettle, desk fan, bench top centrifuges, hot plates, small laboratory water baths.

Stationary equipment

Equipment that has a mass greater than 18kg and is not provided with a carrying handle e.g. refrigerator, freezer, dishwasher or washing machine, large centrifuge, photocopier.

IT equipment

IT equipment includes computer monitors, data terminal equipment, power packs, mobile phone charging units, printers and televisions. Plugs and leads to some smaller items such as mobile phone charging units should be tested but the equipment itself may not be suitable for testing.

Built-in appliances/equipment

Extension Leads

Electric Heating Equipment

Electrical Installations in office furniture and similar

Fixed equipment

User Checks

Users of portable appliances should look for the following indicators of damage or faults, before using the equipment:

- Is the user aware of any problems, does the appliance work?
- Damage to the cable/lead, e.g. cuts, fraying, abrasion (apart from light scuffing).
- Damage to the plug, e.g. the casing is cracked, the pins are bent, the screw holding the plug together is loose, the plug rattles.
- Non-standard joints, including taped joints in the cable.
- The outer covering (sheath) of the cable not being gripped where it enters the plug or the equipment. Look to see if the coloured insulation of the internal wires is showing.
- Damage to the outer cover of the equipment or obvious loose parts or screws.
- Signs of overheating (burn marks or staining) on the equipment or plug.
- Equipment being used in conditions where it is not suitable, e.g. a wet or dusty workplace.
- Equipment with signs of cracks, chemical or corrosive damage to the case, switches not working properly, protective covers missing or loose.
- Extension leads or adapters are overloaded (too many appliances for the fuse or current rating of the lead).
- Residual Current Devices (RCDs) failing to disconnect from the supply when the test button is pushed.

If any of the above are identified, do not use the equipment, remove it from service, and report it to your manager or Facilities Helpdesk.

Frequency of checks

Where equipment is stationary, or not moved frequently, and is not used in a hostile environment, user checks may not be required until the equipment is moved, at which point it would be convenient to do so.

Where equipment is handheld, moved frequently, or is used in a hostile environment e.g. catering kitchens, workshops, or laboratories, it may be more prone to damage. Therefore, user checks are recommended weekly for all such equipment, and before each use for handheld equipment.

Where portable appliances are used by students in residential accommodation, it is recommended that staff carry out a user check monthly, as part of their regular accommodation servicing/maintenance duties.

Formal visual inspections

The following must be considered when carrying out a formal recorded inspection of equipment:

The Environment

The inspector should consider if the equipment is suitable for the environment or the nature of the work. Care needs to be taken when selecting equipment for work in harsh or hazardous environments (e.g. if the equipment is exposed to):

- mechanical damage
- the weather
- natural hazards
- high or low temperatures
- pressure
- wet, dirty or corrosive conditions
- flammable or explosive substances

These conditions will influence the frequency of inspection and testing required. Specialist advice may need to be taken, and reference must be made to British Standards and HSE guidance, e.g. the guidance on Regulation 6 in the Memorandum of Guidance on the Electricity at Work Regulations 1989.

Where the inspector considers the equipment to be unsuitable for the environment, this must be recorded and brought to the attention of the person responsible for the equipment.

Good Housekeeping

Check that the equipment is installed and operated in accordance with the manufacturer's instructions. The following are examples of items which should be checked:

- cables are not located where they are likely to be damaged, e.g. trodden upon or snagged, or create trip hazards
- means of disconnection/isolation from the mains supply are readily accessible
- space around the equipment is adequate for ventilation and cooling
- ventilation openings are not blocked
- cups, plants and work material are not placed where their contents could spill into the equipment
- equipment is not positioned so close to walls and partitions that the cord is forced into a tight bend as it exits the equipment (this may also indicate inadequate spacing for ventilation and cooling)
- the equipment is operated with protective covers in place and doors closed
- check that there is no indiscriminate use of multiway adaptors and trailing socket outlets or overloaded extension cables.
- there are no unprotected cables run under carpets.

Disconnection of Equipment

The means of isolation from the electricity supply must be readily accessible to the user i.e. in normal circumstances it must be possible to reach the plug and socket without difficulty. In general, the inspector will determine whether there is a means for switching off the electricity:

a) for normal functional use

b) in an emergency

c) to carry out maintenance.

Where possible the equipment must be isolated from the supply. This will be simple to achieve when the equipment is connected via a plug and socket. However, some equipment may be connected to the supply by other means such as an isolator or connection unit, where isolation from the supply can be achieved only by switching OFF or by removing the fuse. Great care should be taken when carrying out a visual inspection of equipment which does not have a visible means of isolation.

The Condition of the Equipment

Before inspecting the equipment ask the users whether they are aware of any faults and whether it works properly and proceed accordingly. The user is familiar with the equipment and may be aware of intermittent faults.

The following items need to be inspected:

- the flexible cable - is it in good condition? Is it free from cuts, fraying and damage?
- is it in a location where it could be damaged or cause a trip hazard? Is it too long, too short or in any other way unsatisfactory?
- the socket-outlet (if known) or flex outlet - is there any sign of overheating? Is it free from cracks and other damage?
- the appliance - does it work? Does it switch on and off properly? Is it free from cracks or damage to the case or damage which could result in access to live parts?
- can it be used safely?

NB Some of the following checks may not be possible for equipment fitted with a non-rewirable plug:

- check that detachable power supply cords to Class I equipment incorporate continuous protective conductor.
- look for signs of overheating - this may be caused by a fault in the plug (e.g. a loose connection) or by a faulty socket-outlet (or connection).
- remove the cover of the plug. Check that the flexible cable is properly secured in the cord anchorage - gripping the sheath so that there is no strain on the cable cores or the terminations.
- if the plug is of the non-rewireable type, the cable grip should be tested by firmly pulling and twisting the cable. No movement should be apparent.
- check that the cable core terminations are tight, the plug is correctly connected, there is no excessive removal of insulation, that there are no loose strands, and the cable cores are not strained.
- the fuse should be securely gripped and should not show any signs of overheating.
- Check that the fuse is to BS 1362 and is approved - an ASTA mark shows that it has been approved for safety. Check the rating of the fuse - most appliances up to about 700W should have a 3A fuse fitted (red). For appliances over about 700W fit a 13A fuse (brown). Non-rewireable plugs will have the appropriate fuse rating marked on them.
- when replacing the plug cover check that it fits properly and will not come loose during use.
- check the flexible cable connections and anchorage at the equipment, if practicable.

Recommended In-Service Inspection and Test (PAT) Frequency

Legislation, HSE or IET Best Practice does not specify specific frequency periods but instead advises that a risk-based approach is used to determine a suitable frequency based on the **Probability** of maintenance requirements (high to low) against **Impact** by the environment and users (high to low). i.e. Desk Top Computer is low maintenance and used indoors so low risk. A stringent test frequency cannot be set for all types of equipment and environments; however, these test frequencies are given as a general guide for compliance. Test frequencies may be decreased if offset by formal visual inspections and backed up with evidence of limited failure rates and faults found.

Any variation from the guidance in the below Table must be agreed with the Health and Safety Manager and the Group Director of Facilities Operations. Where there is evidence of regular damage to equipment and higher failure rates are recorded, more frequent in-service inspection and test may be necessary.

What is a low or high-risk environment?

Low risk environments at the College include offices, seminar rooms (but not computer rooms), classrooms and retail shops on campus.

High risk environments would include the outdoors where equipment would be susceptible to wet, sunny or cold conditions. Work areas that may produce dust and dirt. Work areas where equipment may be easily damaged or come into contact with biological or chemical agents and animals.

Equipment Type	Examples	Type of Inspection / Test		
		User Checks	Formal Visual Inspection	Combined inspection and testing (PAT)
Contractor owned equipment, including subcontractors	Portable electrical equipment to be used on College premises e.g., used for maintenance contractors,	Yes, by contractor	Required should the equipment Become faulty	Person assigning work / appointing contractor is to check PAT label is in date OR Contractor to provide written record of combined PAT for electrical equipment to be used
Battery equipment less than 40v	Battery charged: • Drill • Screwdriver	No	No	No
Battery charging equipment with transformer or USB connection built into plug	I-Pad or mobile phone charger.	Yes	No	No
Mains supply, extra low voltage: Less than 50 volts AC	e.g., telephone, low voltage desk light, Phone with digital display	No	No	No
Battery charging equipment plugged into mains	• Rechargeable battery charger • Laptops • Any charger with a 240volt trailing lead between plug & charger	Yes	Yes, every 2yrs	No
Information technology equipment	Desktop computer Laptop, Notepad / tablet, Printer, Portable projector	Yes, before use	Yes, every 4yrs formal visual inspection	Not required if double insulated (Class II) Yes, every 4yrs if earthed (Class 1)
Office equipment: Not hand-held during use,	Large printer, Photocopier, Shredder, Scanner,	Yes, before use	Yes, every 4yrs formal visual inspection	Not required if double insulated (Class II)

rarely moved	Laminator, Desk / pedestal lamp, Desk / pedestal fan.			Yes, every 4yrs if earthed (Class 1)
Double insulated (Class II) Equipment	Not hand-held. Moved occasionally, e.g., fans, table lamps	Yes, before use	Yes, every 4yrs formal visual inspection	Not required if double insulated (Class II)
Double insulated (Class II) Equipment	Mobile equipment that is moved in use or is likely to be moved e.g., some floor cleaners and some kitchen equipment).	Yes, before use	Yes, 1yr	Not required if double insulated (Class II)
Portable equipment: Double insulated	Microscope	Yes, before use	Yes, 1yr	Not required if double insulated (Class II)
Earthed equipment (Class I)	Items that are moved in use, or are likely to be moved frequently e.g., kettles, fans, irons, heaters, some floor cleaners.	Yes, before use	Yes, 1yr (not required if sealed plug)	Yes, every 2 yrs.
Plug-in Residual Current Devices (RCD's)	Portable RCD	Yes, check 'test' button at time of use and for cracks or damage	Yes, 1yr	RCD to accompany equipment to be PAT. Request RCD test to be carried out at same time
Larger equipment rarely moved	Water cooler, fridge / freezer, Cooker, Dishwasher.	Yes, only when installed or moved	No	Not required if double insulated (Class II) Yes, every 4yrs if earthed (Class 1)
Cables (leads and plugs connected to the above), and mains voltage extension leads	Cables, extension leads Multi-way adaptors	Yes	Yes, 6 mths – 4 yrs depending on the type of equipment it is connected to	Yes, 1–4 years depending on the type of equipment it is connected to
Vending machines	Vending machine	Yes	See combined PAT	Responsibility for maintenance incl PAT to be confirmed when contract is made with supplier; annually minimum
High risk External environments, harsh environments e.g., exposure to chemicals, water, solvents, dust etc. Farms, construction related workshops	All portable equipment.	Yes, before use	Yes, every 6 mths (not required if sealed plug)	Yes, 6 – 12 mths*
High risk some P&E equipment, commercial kitchens, or equipment regularly moved in vehicles.	All portable equipment.	Yes, before use	Yes, every 6 mths (not required if sealed plug)	Yes, 6 – 12 mths*

Notes:

* Where necessary based on failure rate/evidence of damage this PAT frequency should be increased to 6mths.

Using the College-Appointed Contractor to Undertake Inspection and Testing of Electrical Equipment (PAT testing)

A contract for Formal Visual Inspection and the Combined inspection and testing of Portable Appliances has been awarded to a specialist contractor. Contract details are available from the Property & Environment Dept.

In the majority of cases the P&E Dept will be aware of the location of portable appliances however Faculties / Group Services managers should advise the local P&E Manager or Facilities Helpdesk if they have purchased additional items since the last inspection. They should advise the local P&E Manager or Facilities Helpdesk of the campus, building and rooms as well as the number of items to be tested.

The PAT contractor will publish test reports and provide copies to the local P&E Manager and/or Facilities Helpdesk.

Under the terms of their contract, if engineers find any minor faults whilst they are on site (e.g. blown fuses, damaged plugs or loose plug connections), they will carry out these repairs. However, if they find any equipment with serious electrical faults, they will advise the owning department by means of a failure report (item locations and failure reasons) and affix labels indicating that the equipment must not be used. The Faculty / Group Services dept must make these items inaccessible and subsequently arrange for repair (and re-testing) or suitable disposal.

Normal College practice is that PAT testing contractors should not have access to higher hazard areas where access is restricted to authorised personnel only. Examples are laboratory storerooms, workshops, radiation laboratories and plant rooms. If it is proposed to have PAT testing in these and similar areas undertaken by contractors, it is the Faculty / Group Services dept responsibility to ensure that PAT testing contractors are adequately instructed about any risks and safe systems of work, and that they are appropriately supervised. Higher risk areas must be identified in writing to the contractors with a written declaration that these areas are safe for them to conduct testing in.

Section 32. New and Expectant Mothers

Refer to HR Maternity procedure

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Section 33. Training and Information for Staff

33.0. Procedural Statement

The training of staff, including any part-time, temporary or agency staff, in health and safety matters is essential in ensuring that staff are aware of the risks to health and safety generated by their work and in enabling them to take appropriate action.

The aim is to ensure that all employees, students, and stakeholders at Activate Learning are provided with appropriate health and safety training to maintain a safe and healthy working environment. The policy is built on the principles of ISO 45001:2018 and complies with relevant legislation.

33.1. Introduction

The **Health and Safety at Work etc Act 1974** places a duty upon employers to provide such information, instruction, training and supervision as is necessary to protect the health and safety at work of employees.

The **Management of Health and Safety at Work Regulations** state:

Every employer shall ensure that his employees are provided with adequate health and safety training:-

a. on their being recruited into the employer's undertaking; and

b. on their being exposed to new or increased risks because of:-

- their being transferred or given a change of responsibilities within the employers undertaking.
- the introduction of new work equipment or change in work equipment already in use within the employer's undertaking.
- the introduction of new technology into the employer's undertaking, or
- the introduction of a new system of work into or a change respecting system of work already in use within the employer's undertaking.

Health and safety training shall:-

1. be repeated periodically where appropriate.
2. be adapted to take account of any new or changed risks to the health and safety of the employees concerned; and
3. take place during working hours.

The Health & Safety Team provides a central programme of standard health and safety courses.

Any health and safety training centrally organised by the Health and Safety Team will be recorded on the Safety Management System on SharePoint. Any ALO health and safety specific mandatory training provided by HR will be recorded on the HR iTrent System.

Refresher training will be required at intervals dependant on the training topic.

33.2. Key Principles

- Aspiring to 'Best Practice' in health and safety by adhering to ISO 45001:2018 principles.
- Complying with relevant legislation and implementing an appropriate health and safety management system.
- Recognising that health and safety is essential for good management and should be prioritised at all levels within the organisation and supported through training and development.

33.3. Responsibilities

Group Executive Team (GET)

- Ensuring that their departments are resourced appropriately to deliver / attend the identified health and safety training.

Group Health and Safety Manager

- Providing competent health and safety advice to staff.
- Developing and maintaining a Health & Safety Training matrix to identify staff roles and appropriate training requirements in consultation with managers.
- Identifying, arranging and delivering in-house health and safety training and fire drills.
- Maintaining records of all health and safety training apart from ALO online courses whereby training records are maintained by HR.
- Provides a central programme of standard health and safety courses.

Managers

- Ensuring that all new staff receive appropriate induction training regarding health and safety relevant to their area of employment.
- Identifying job-specific training needs and ensuring that employees complete the relevant mandatory online health and safety training.
- Faculties/Group Services managers are required to keep a local record of their staff health and safety training, including induction.

Health and Safety Officers

- Providing enhanced training to Evacuation Wardens and ensuring all other staff receive awareness training of the evacuation process.

Employees

- Completing all mandatory health and safety training as required.
- Participating in additional job-specific training as identified by their manager.

Students

- Undergoing mandatory health and safety training during their induction, which is refreshed regularly.

33.4. Training Requirements

Induction Training

- All new staff and students will receive induction training that includes a summary of the health and safety policy, fire and emergency procedures, and accident reporting.
- Details of the training provided will be recorded and made available on request.
- Managers should work through the HR induction checklist which provides a guide to the information and activities that need to be covered within the first six weeks of employment. With regards to health and safety, managers are required to use this checklist to explain local arrangements, such as location of first aiders, fire escape routes, accident reporting procedures and other health and safety information (e.g. details of risk assessments and PPE) relevant to the employee's job. All relevant issues must be completed and initialled by the manager and employee within three months of the employee's appointment.
- The following resources are available to support the induction process.
    - Human Resources 'New Starters'
    - Health & Safety Induction Video
    - Health & Safety induction presentation
    - Health & Safety induction information for all campuses

- Health and Safety training matrix

- In addition, line managers are asked to identify any outstanding training needs of the new employee and ensure that these needs are addressed. The Health & Safety Team also advises on safety information included in student handbooks.

Mandatory Online Training

- All employees are required to complete the relevant mandatory online health and safety training provided through the Activate Learning Online (ALO) platform.

- This training includes general health and safety awareness, fire safety, and Display Screen Awareness.

Job-Specific Training

- Employees will receive additional training relevant to their specific roles, such as handling hazardous substances, operating machinery, or working with display screen equipment (DSE).

- Training will be repeated periodically and adapted to account for new or changed risks.

Evacuation Wardens

- Evacuation Wardens will receive enhanced training from Health and Safety Officers to prepare them for their roles during emergencies.

- All other staff will receive awareness training of the evacuation process to enable them to step in if necessary.

33.5. Continuous Improvement

- Health and safety training will be reviewed regularly to ensure it remains current and effective.

- Feedback from staff and students will be encouraged and used to improve training programme.

33.6. Monitoring and Review

- The effectiveness of health and safety training will be monitored through regular inspections, audits, and spot checks.

- Progress against the health and safety action plan will be reviewed by the college Health and Safety Committee at least once a year [3] .

33.7. Conclusion

Activate Learning is committed to providing a safe and healthy environment for all its stakeholders by ensuring comprehensive health and safety training.

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Section 34.

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Section 35. Emergency Provisions for Persons with Disabilities

35.0 Summary Information

If you have a disability, ask for a personal emergency evacuation plan (PEEP). PEEPS ensure that everyone in our buildings can leave them safely if there is a fire.

For the benefit of individuals with disabilities, the College provides systems such as:

- An app that allows users to contact Reception and Duty personnel in an emergency TeamSOS) – **for staff only**
- Vibrating pillow alarms
- In some areas, beacons that illuminate when a fire alarm activates
- Areas (refuges) within buildings where an individual can remain safe from fire for up to 30 minutes (not available on Surrey campuses).
- In some buildings, lifts or special evacuation chairs that can be used to safely bring wheelchair users to the ground floor
- Trained staff to assist disabled persons in an emergency

If you are unsure about how you can escape from any of our buildings, email healthandsafety@activatelearning.ac.uk for advice and guidance.

35.1. Introduction

In some instances, disabled individuals require additional facilities and support to ensure their safety in the event of fire. To identify what is precisely needed the College devises personal emergency evacuation plans (PEEPs) for disabled staff, students and visitors who attend the College more than 3 times per annum. If you fall into one of these categories but do not have a PEEP, you should make contact as indicated below:

Individual	**Initial contact**
Student	Student Services
Staff	Line manager
Visitor	Point of contact/host in the College

Particular PEEP-related provisions and procedures in place across the College are outlined below.

35.2. Provisions and procedures in place for wheelchair users and others with mobility issues

35.2.1. Refuges

Refuges are areas in buildings, typically staircase lobbies, where individuals can wait and be protected from fire and smoke until such time as they need to be evacuated (or can safely return to other areas within the building)[6].

The physical protection of the refuge is designed to last at least 30 minutes. Should evacuation be necessary, it will occur well within this time.

In order to communicate with Duty Personnel and Reception staff, refuges are generally provided with some form of fixed communication. In some buildings, mounted intercom units are installed. To communicate using the intercom, simply press the button on it.

[6]As disabled persons should not be evacuated unnecessarily, it will be uncommon for an individual to be evacuated from a refuge during a fire.

Reception staff will then respond through the speaker and a two-way conversation can commence.

In addition to the above, there are some refuges that do not yet have fixed communications. In these locations, individuals will either need to use a mobile phone to contact Reception on their emergency numbers[7] or use the 'TeamSOS'[8] app to do the same.

These refuges will be focussed upon during any evacuation should it not be possible to make contact from them (for example, where the occupant of the refuge doesn't have a phone).

35.2.2. Automatic door openers

Disabled individuals should note that some automatic door openers may cease to function during a fire alarm where their continued operation is deemed to present a risk in terms of the spread of fire. Should this happen, other individuals will be able to assist (Emergency Evacuation Wardens are instructed to offer assistance where necessary).

35.2.3. Evacuation procedures for individuals who cannot negotiate steps or stairs.

Where an evacuation is necessary and an individual who cannot negotiate steps or stairs is required to leave the building, evacuation will normally be carried out by either an evacuation lift (specially designed to be operable in the event of fire) or an evacuation chair.

Bracknell & Wokingham College is presently the only campus building that has an evacuation lift. In an emergency, these lifts will automatically return to ground level where they will come under direct control of the Facilities team (Property & Environment Team).

Evacuation via evacuation chair is the method that will be employed in other buildings, with the exception of those few buildings that have upper floors that are inaccessible due to the absence of lifts.

Evacuation chairs are specially designed to transport individuals down or, in some cases, upstairs. They might also be used to transport persons horizontally if the need arises to do this (for example, where an individual cannot reach a refuge unaided). Property & Environment Team members are trained to use Evacuation chairs but will not naturally be aware of an individual's specific needs. They will, consequently, readily receive direction from those they might assist. Certain individuals identified to assist within a PEEP will also receive evacuation chair training.

35.2.4. Evacuation procedures for individuals with other mobility issues

For individuals with mobility issues that do not prevent the use of stairs, the general approach is for the individual to slowly make their way out, following the main flow of people where that would result in safer movement. If an individual can go down or upstairs but with significant difficulty, it is acceptable to wait in a refuge and be guided by Emergency Evacuation Wardens or Duty personnel as to whether immediate evacuation is necessary.

The assistance of others may be helpful or necessary depending upon the level of impairment.

35.3. Provisions and procedures in place for individuals with hearing impairments

A notification of a fire will be received via the TeamSOS App. The announcement will request a response from staff to acknowledge they are safe or whether they require assistance. Alternatively, staff requiring assistance can contact Duty personnel or Reception directly using the TeamSOS 'Incident' or 'Chat' feature.

35.3.1. Visual alarm devices

To assist those with hearing impairments, and in places where an audible alarm may not be heard by those without an impairment, visual alarm devices are also installed in some areas within the College. Typically, these can be found within toilets which are naturally areas where those with a hearing impairment may not be able to rely upon the actions of others to indicate that a fire alarm has sounded.

[8] For further details on the TeamSOS app, see paragraph 35.6 below

35.3.2. Vibrating alarms

For hearing impaired students that live in our accommodation, vibrating alarms will be provided. These alarms are designed to be placed under pillows and will vibrate when the fire alarm sounds.

35.3.3. Evacuation procedures for individuals with hearing impairments

Once an individual with a hearing impairment becomes aware of an alarm, assuming there is no other disability, evacuation should be straightforward.

The key objective is to consequently ensure that the individual does know when the alarm has sounded. This may be achieved by exploiting the facilities highlighted above, or, alternatively, ensuring that other students or staff indicate the alarm, either directly or indirectly (through collective movement). Naturally, individuals should avoid places where they might be isolated from others and no visual alarm is provided.

35.4. Provisions and procedures in place for individuals with visual impairments

35.4.1. Signage

The main fire safety provision in place for those with visual impairments is the provision of highly legible signage.

Evacuation procedures for individuals with visual impairments Individuals with visual impairments may be able to navigate their way slowly around buildings, in which case the guidance in respect of escape is much the same as for individuals with mobility impairments. For those with significant impairments, the assistance of others may be necessary. This help may either be pre-arranged or more ad hoc (asking the assistance of staff fellow students for example).

35.5. Provisions and procedures in place for individuals with other impairments

Individuals within the College may have other impairments that may affect their ability to respond effectively during a fire alarm. For example, the sound of the fire alarm may be disorienting or cause panic. The procedures necessary for the safety of Individuals in this bracket are varied and will need to be discussed during the PEEP interview.

35.6. TeamSOS

The College uses the ‘TeamSOS’ app to further enhance the safety of its staff and students. It is strongly recommended that both staff and students download the app and register with the service. One of the apps most valuable features is its ability to enable direct emergency communication with Duty personnel and Reception via the ‘Chat’ or ‘Incident’ notification function.

35.7. General assistance for disabled individuals

Disabled individuals should receive support from all College staff in the event of fire. Particular assistance will be provided by Emergency Evacuation Wardens, Duty personnel, Tutors and Property & Environment Team staff.

35.8. Residential accommodation

Where a student with a PEEP resides in our accommodation, accommodation wardens will be made aware that the individual has a PEEP. Students residing in other accommodation such as off-campus lettings, should raise the issue of their particular needs with the manager of that accommodation.

35.9. Further information and building familiarisation

If you wish to discuss anything about what to do when the fire alarm sounds or require a familiarisation of the buildings you may use, please contact your line manager or tutor, or email healthandsafety@activatelearning.ac.uk.

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Section 36. Business Continuity Planning

Refer to Incident Response and Business Continuity Management Policy and separate campus BCP's

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