

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

RISK ASSESSMENTS AND LEGAL AND OTHER REQUIREMENTS

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Date: 30th January 2013

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1. Introduction

Measures for the management of risk will reflect the principle of the elimination of hazards or environmental aspects wherever practicable, followed in turn by risk reduction (either reducing the likelihood of occurrence or potential severity of harm).

This document meets the current requirements of:

- Green Dragon Environmental Standard
- Corporate Health Standard
- OHSAS 18001
- ISO14001
- EMAS

Risk assessments are the cornerstone of effective risk management across the College. The College will take all reasonable steps to ensure the health, safety and wellbeing of staff, students, visitors, contractors and members of the public whilst at the College, and all reasonable steps to eliminate or reduce environmental impact in all its forms.

This procedure also describes the actions taken to ensure that Health, Safety and Environmental Legislation and other legal requirements are kept up-to-date, and that this information is disseminated, maintained and reviewed.

The approach taken in this document aligns with the statement made in the HSE Manual and Policy (document code HSE001; section 4.3): *We subscribe to the Health and Safety Executive 'Principles of Sensible Risk Management'.*

The scope of risk assessments at the College is considerable and therefore this document is sub-divided to provide supportive procedure and guidance. The sub-sections are described below:

Sub section:	Risk Assessment Type	Page
1	School/Department risk assessments using the electronic format	4
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N.B: Workplace assessments are carried out in accordance with procedure HSE008 01, Workplace Monitoring and Vetting

2. Legal and Other Requirements

Compliance with legislation and other legal requirements is the cornerstone of good performance and a fundamental requirement of the Standards. The purpose of this procedure is to ensure Cross-college compliance with applicable health, safety and environmental legislation, regulations, codes of practice, guidance, and other documentation, including college policies.

3. Procedure

- 3.1 The Health, Safety and Sustainable Development Manager, is responsible for installing and maintaining a Register of Legal and Other Requirements (Code: **HSERLOR004**) and making such information readily available via the staff portal. Amendments and/or additions to the register are communicated to the relevant persons. The register will specify the legal and other requirement and its health, safety or environmental applicability to the College. The register will be reviewed at least annually. In carrying out this task, any or all of the following resources may be used:
- Legislation Subscription Service
 - HSE website
 - Welsh Government website
 - Environment Agency Guidance Publications, Trade publications
 - Purchased supporting documentation
 - Carbon Trust
 - National Public Health Service Website
- 3.2 All Heads of School/Departmental Managers are responsible for ensuring that specific legislation relating to their area of responsibility is understood by all relevant members of staff, and that such legislation is taken account of during the risk assessment process. Advice/support on legal and other requirements is available from the HSE team.
- 3.3 All Heads of School/Departmental Managers are responsible for bringing to the attention of the HSE team, any legal amendments or guidance relating to their area of responsibility identified within trade literature, conferences, mailshots etc, for inclusion on the Register as necessary.

4. Document Review

- 4.1 This procedure (including all sub-procedures) will be reviewed in accordance with **HSE002, Documentation and Document Control**.

5. Related Documents

HSE002	Documentation and Document Control
HSE003	Committee Meetings, Consultation, Participation and Communication
HSERLOR004	Register of Legal and Other Requirements
HSERRMD004	HSE Risk Register Master Document
HSE006 02	Fire Safety Arrangements
HSE006 03	Fire, Emergency Response and Business Continuity
HSE009	Objectives and Targets
HSE010	Training, Awareness and Competence
HSE013	Audit
HSEPS	HSE Policy Statement
HSEOHIG10	Policy and Procedure for New or Expectant Mothers
HSEOHIG11	Guideline on Health and Safety Risk Assessments for New or Expectant Mothers.

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 1: SCHOOL/DEPARTMENT RISK ASSESSMENTS USING THE ELECTRONIC FORMAT

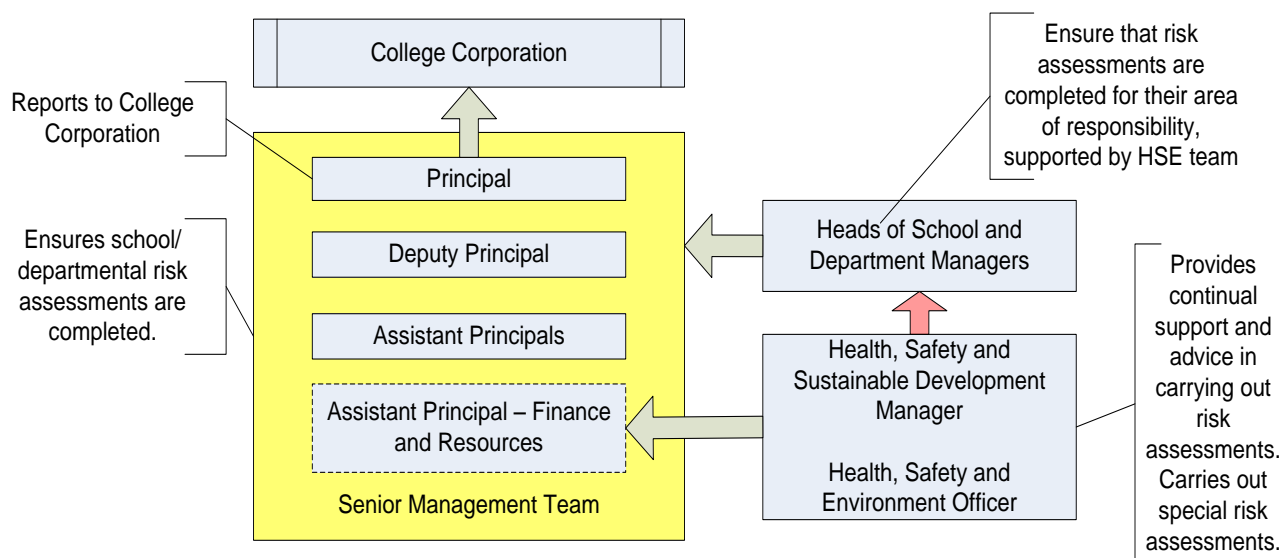
1. Introduction

The purpose of this sub-section is to:

- ✓ describe the process for carrying out risk assessments using the electronic format
- ✓ ensure that risk assessments are completed, maintained and reviewed

2. Responsibilities

2.1 Health and Safety Risk Assessment Structure (Responsibilities)



2.1 Senior Management has overall responsibility for ensuring that school/departmental risk assessments are completed.

2.2 School Heads and Departmental Managers are responsible for:

- a) ensuring that risk assessments are completed, maintained and reviewed on, at least, an annual basis or in response to change where necessary (e.g following accidents and incidents, disease, installation of new equipment, departmental re-structure, persons with disability etc).
- b) liaising with staff and the health and safety team in preparing risk assessments.
- c) ensuring that all identified actions are closed out within the agreed timescale.

2.3 The Health and Safety team are responsible for:

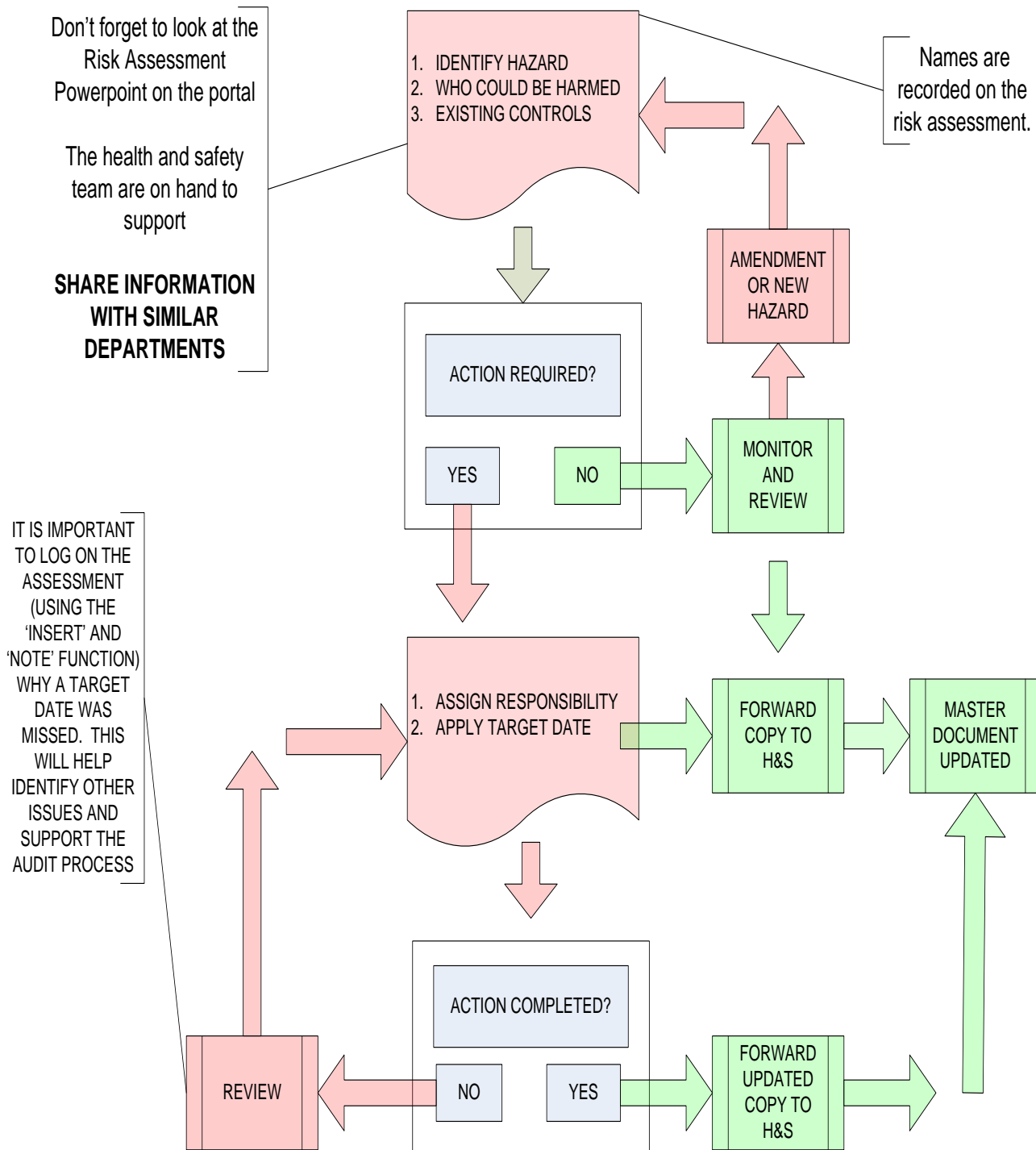
- a) providing ongoing risk assessment support and advice cross-college
- b) reviewing risk assessments and maintaining the risk assessment Master Document
- c) carrying out special risk assessments where necessary

2.4 All members of staff are responsible for liaising with the Head of School/Departmental Manager in identifying hazards and, where relevant, assisting in the implementation of effective control methods.

3. Procedure

- 3.1 School Heads and Departmental Managers ensure that risk assessments are carried out for their areas of responsibility using the electronic format *supplied by the health and safety team*. The name of those carrying out the assessment is recorded on the electronic risk assessment document. The assistance of the health and safety team is always available. **It is strongly recommended that you share information with similar departments.**
- 3.2 In order to assist in the process a **Risk Assessment Powerpoint Presentation** is available on the **Portal**; this provides information on risk assessments and using the electronic format. Further assistance is always available from the health and safety team.
- 3.3 Where actions are identified, a target date is applied and responsibility assigned.
- 3.4 Completed actions are closed out and the date recorded on the risk assessment document. The Head of School or Departmental Manager is responsible for ensuring that all actions are closed out.
- 3.5 Completed actions are reviewed to ensure the intended outcomes are successful. Further action is assigned where this is not the case. This is recorded on the electronic document.
- 3.6 Completed assessments are emailed to the health and safety team, who are responsible for installing the document into the Risk Assessment Master Document. *A copy of the electronic assessment is maintained by the Head of Department or Departmental Manager.*
- 3.7 The Head of Department must ensure that any school/departmental change which may invalidate the risk assessment (e.g. new equipment, working methods, chemicals, persons with disability or medical needs, accident, dermatitis, etc) are reflected in an amended assessment. In this case a new version number is applied to the assessment and this is sent to the health and safety team for installation into the Master Document.
- 3.8 The health and safety team review all risk assessments and liaise with the relevant person(s) when clarification, further development is necessary.
- 3.9 Heads of School and Departmental Managers are responsible for ensuring that risk assessments are reviewed on, at least, an annual basis. The new review date is recorded on the electronic document.
- 3.10 Special or confidential risk assessments may be prepared separately e.g new or expectant mothers, personal medical conditions, young persons risk assessments for work experience.
- 3.11 The Master Document records the overall risk level for the school/department. The diagram below summarises the process.

CARRYING OUT A RISK ASSESSMENT USING ELECTRONIC FORMAT



BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 2: OFF-SITE EDUCATIONAL TRIPS/VISITS

READERS OF THIS SECTION MAY REFER TO THE FOLLOWING GUIDANCE DOCUMENT ON WHICH THIS PROCEDURE HAS BEEN PRODUCED.

**‘EDUCATIONAL VISITS: A SAFETY GUIDE FOR LEARNING OUTSIDE THE CLASSROOM’.
(PUBLISHED BY THE WELSH ASSEMBLY GOVERNMENT 2008, AS AMENDED)**

1. Introduction

It is important that this procedure is followed to ensure the highest standards of organisation, administration and supervision of visits.:

- ✓ To provide protection and support for those accompanying educational visits
- ✓ To ensure that all groups act as good ambassadors for the College.
- ✓ To ensure the health, safety and Welfare of staff and students on the visit as part of the College's duty of care and its responsibilities under the Health and Safety at Work, etc, Act 1974.

The **Management of Health and Safety at Work Regulations 1992 (as amended)** made under the **Health and Safety at Work Act 1974** requires employers to:

- ✓ Assess the risks of activities and take measures to ensure that those risks are adequately controlled.

In meeting this legislative requirement, co-operation and clear understanding between employer and employee is paramount. The employer has a duty to ensure, so far as is reasonably practicable, the health and safety of anyone who may be affected by their activities, including participants in educational visits. In order that this duty can be fulfilled, the employee has a duty to:

- ✓ Take reasonable care of their own and **others'** health and safety
- ✓ **Co-operate** with their employers over safety matters
- ✓ Carry out activities **in accordance with training and instruction**
- ✓ **Inform** the employer of any serious risks

2. Scope

This procedure is relevant to any occasion where a young person leaves the college for any organised activity whilst legally in the care of the college. This procedure is not applicable to work placement which is covered in a separate procedure. Visits/activities are attended only by students and staff currently registered with the College.

3. Competence

Competency is a **key element** in the quality and safety of any visit/activity. A competent person can best be defined as:

'Someone who has sufficient training and experience or knowledge and other qualities to enable them to properly do the task in question'.

Competency is best achieved by:

- ✓ Selection of appropriate people (in terms of their personal qualities)
- ✓ Induction, where necessary, of less experienced staff by working alongside more experienced colleagues to develop competence in visit/activity planning and leadership
- ✓ Selection of the right people for the right visit/activity
- ✓ Monitoring people to ensure that further development needs are identified, and providing such training. (Relevant training could include first aid, minibuss driving, life-saving or other specific activity).

4. Responsibilities

4.1 The Corporation

The Corporation responsibilities are defined as below:

[Schedule 3]

(1) The Corporation is to be responsible for:

(a) The determination of the educational character and mission of the institution and for oversight of its activities;

This includes ensuring that the necessary arrangements are in place for effective management of educational visits/activities. Responsibilities for overseeing these arrangements are assigned to the Principal.

4.2 The Principal

The Principal is responsible for ensuring that all activities are properly planned and appropriately supervised by a competent person. In carrying out this duty, the Principal ensures that sufficient time and resources are made available to ensure staff competence (please see section 3 above).

The Principal has overall responsibility for final approval of off-site visits/activities, and may devolve responsibility to the Assistant Principals. The Principal/Assistant Principal should ensure that:

- ✓ Staff competence is maintained/developed as described in section 3 above.
- ✓ The visit/activity arrangements meet the requirements for safe leadership and supervision, finance and suitability of location and purpose.
- ✓ Any issues identified in exploratory visits have been satisfactorily resolved prior to approving an activity.
- ✓ Accreditation or verification of independent providers has been checked.
- ✓ Adequate child protection procedures are in place.
- ✓ A contingency plan is in place.
- ✓ Effective arrangements for the reporting of accidents and incidents, and the investigation of serious accidents and incidents.
- ✓ Risks have been assessed and appropriate safety measures are in place including first aid.
- ✓ Visit/activity leaders have sufficient time to organise documentation and, where possible/relevant, pre-inspect locations.
- ✓ The suitability, number and competence of all adults, including volunteers, accompanying or instructing the party.
- ✓ Communication with parents/carers has taken place and consent provided.
- ✓ Arrangements have been made for the medical needs and special educational needs of all young people.
- ✓ Adequate first aid is available.
- ✓ Travel times out and back are known, including pick-up and drop-off points.
- ✓ Appropriate transport arrangements are in place.
- ✓ Adequate and relevant insurance cover.
- ✓ Venue/location details are recorded and 24/7 phone numbers/emergency contact numbers are held.
- ✓ Effective arrangements are in place for management of difficulties/emergencies.
- ✓ Visit/activity arrangements are evaluated to inform future visits and staff training needs.

4.3 Assistant Principals

Assistant Principals are responsible for adherence to those points raised above which may be devolved to them by the Principal.

4.4 Head of Department

The Head of Department is responsible for ensuring the robustness of the planning, staffing, financing, and safety of the visit/activity. In addition the Head of Department should ensure that:

- ✓ The leader and assistants/volunteers are competent.
- ✓ The learning activity is appropriate to the course programme.
- ✓ The students are adequately supported and supervised during the activity.
- ✓ They assist and confirm the contents of the risk assessment where necessary and seek support from the health and safety team where required.
- ✓ Ensuring that students are carefully briefed on what is to be done, any expenses they may incur, and the standard of behaviour expected of both staff and students.
- ✓ The leader is assisted in preparation of documentation where necessary.

4.5 The Group Leader

Has overall responsibility for the supervision and conduct of the visit and should have regard to the health & safety of the group. He/she should:

- ✓ be competent
- ✓ ensure that the aims of the visit are commensurate with the needs of the students
- ✓ obtain permission for the visit/activity or series of visits/activities
- ✓ ensure that the procedures for planning and organising off-site visits/activities have been strictly adhered to
- ✓ appoint a deputy for the visit/activity (if more than one member of staff is required to go on the visit/activity)
- ✓ clearly define each group supervisor's role and ensure all tasks have been assigned
- ✓ be aware of child protection issues and introduce measures to protect children as required
- ✓ undertake and complete a risk assessment which should be monitored throughout the activity, updated and appropriate action taken as necessary
- ✓ ensure that adequate first aid provision will be available
- ✓ undertake and complete the planning and preparation of the visit including the briefing of group members and when applicable, the parent
- ✓ ensure that lecturers and other supervisors are fully aware of what the proposed visit involves
- ✓ ensure that students are aware of the nature and purpose of the visit/activity including possible adjustments (plan B's).
- ✓ ensure that parents are aware of the nature and purpose of the visit/activity, and obtain their consent if the student is under 18
- ✓ consider stopping the visit if the risk to the health and safety of the students is unacceptable and have in place procedures for such an eventuality – the group leader has overall responsibility of the group and if necessary should override any decisions made by others for example Outdoor Centre staff.
- ✓ ensure that group supervisors have details of the college contact in case of emergencies
- ✓ ensure that group supervisors and the college contacts have a copy of the emergency procedures

- ✓ ensure that the group's lecturers and other supervisors have the details of students' special educational and medical needs which will be necessary for them to carry out their tasks effectively
- ✓ check on student's general health and, where the duration of the visit/activity warrants it, specifics of diets, medicines and relevant personal problems
- ✓ as appropriate, should issue kit lists, journey times, emergency contact details, notes on expectations regarding conduct. If appropriate, a meeting of parents should be held to expand on these issues
- ✓ keep the Head of Department/Assistant Principal and Principal informed on organisational progress
- ✓ ensure that details of equipment, transport, accommodation and other bookings and associated financial matters are dealt with adequately

And:

- ✓ ensure that students and staff conduct themselves in a responsible manner at all times. The leader should ensure that procedures are in place to:
 1. Agree with students/parent or guardians the behaviour expected before they leave.
 2. Ensure that medicinal drug requirements (staff, parents/guardians, carers or students) are identified and recorded and that methods of safe storage and administration are in place and that additional staffing levels are identified where relevant.
 3. Staff are willing and able to safely administer drugs where applicable.
 4. Ensure that both staff and students understand the boundaries set on misuse of alcohol.

Alcohol is the substance most likely to be abused, with significant and potentially dangerous consequences for young people. The sanctions for breaking a behaviour agreement relating to misuse of alcohol should be well defined prior to the trip/activity and emphasised to students, staff, and parents/guardians/carers. It is essential to discuss emergency plans beforehand and to emphasise that personal safety is a far greater consideration than the fear of reprimand.

Young people should always be supervised by alcohol-free staff.

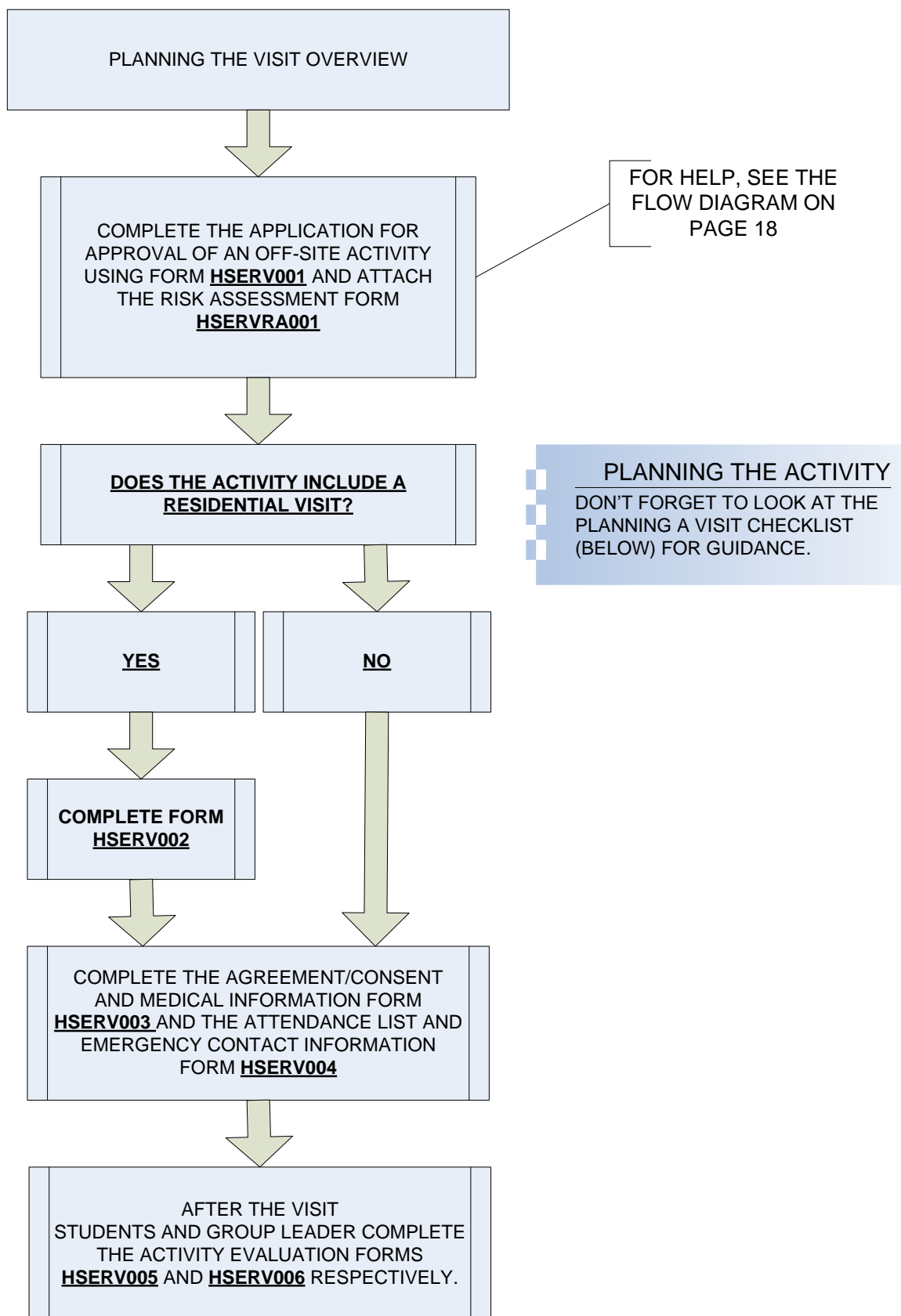
The key points are:

- The effect of alcohol on health and safety of self and others
 - The effect of alcohol on decision making ability
 - Staff members being returned to duty
5. Ensure that all party members are aware that illegal drug use will be not be tolerated and that strict sanctions will be applied, including the person being sent home (student, staff, parent/guardian/carer).

5. Planning the visit

There is no substitute for effective forward planning. The Head of Department should be satisfied that all relevant documentation has been fully completed, and that health and safety advice regarding completion of risk assessments has been sought where necessary. Sufficient time should have been allowed during the planning process to ensure that documentation is completed and reviewed without undue time constraints. Diagram 1 below shows the overall process.

Diagram 1: Planning an activity – overview



5.1 Visit planning checklist

The following is an aide-memoir only. Further information should be included in the documentation, where relevant, as identified by the person(s) organising the activity.

- **Purpose of visit**
- What are the aims of the visit?
- **Where and when do you intend to go?**
- Are venue, activities and time of year appropriate to aims and age/ability of group?
- Have you planned alternative activities (plan B) in case you need to abandon your planned programme for any reason?
- **Have you gained approval from your Head of Department prior to making any financial commitment?**
- **Risk management**
- Have you carried out (if possible) an exploratory visit (highly desirable)?
- Have you identified all the main hazards (including for any plan B)?
- If yes, have you discussed these with other leaders and young people?
- If there are additional hazards and safety measures above and beyond the risk assessment, have you completed a specific risk assessment that details these additional risks and safety measures?
- Have you shared this with other leaders and young people and filed a copy?
- Have you taken, where necessary, health and safety advice?
- **Emergency procedures, contacts and communication**
- Have you planned what to do in the event of an emergency during the visit?
- Have you established appropriate emergency contacts (24 hrs) with your base establishment and parents/carers? County press/media officer?
- Have you set up effective communication procedures with the group?
- **Mobile phones**
- Have you agreed a mobile phone use policy with parents and young people?
- **Overseas visits**
- Have you provided at least 8 weeks advance notice of an overseas trip?
- **Staffing**
- Are adequate staffing numbers available, taking into account any special needs?
- Are staff competent for their roles on the visit?
- Are Voluntary helpers being used? Are they appropriate? Are they aware of their responsibilities?
- Is a police check necessary for your helpers under the Child Protection Act?
- Are any of the activities offered licensable? (Adventure Activities Licensing Regs. 1996)
- If so, is the provider licensed by the Adventure Activities Licensing Authority to provide these?
- Does the visit involve young people working without the direct supervision of staff at any time?

- **Insurance (particularly outside the UK and especially outside Europe)**
- Is personal insurance cover for young people/staff provided? Have you informed the person responsible for procurement?
- Have you checked any cover automatically provided by, say, a tour company?
- Are parents aware of the insurance position?

- **Parent/carer information and consent**
- Have you provided parents/carers with full information regarding the visit and all planned activities (including plan B activities)?
- Have you met with parents/carers?
- Have they given appropriate written consent?
- Have you filed copies of the consent forms?
- Are they aware of the consequences of any misbehaviour by their child?

- **Special Needs**
- Have you taken account of any special needs of young people/staff?
- Have you made all staff (including independent providers) aware of relevant special needs?

- **Programme**
- Does your programme include alternatives (plan B) in case the original programme needs to be abandoned for any reason?
- Have you planned 'Down-time' arrangements?
- Have you arranged adequate supervision at all times? Duty rota for staff?
- Have you agreed standards of behaviour and conduct?

- **Clothing and Equipment**
- Are clothing and equipment appropriate to the activities and location?
- Has young peoples' essential clothing been checked?

- **Medical arrangements**
- Do you have a record of relevant medical information of all the young people and staff?
- Have you made appropriate medical arrangements, including first aid?
- Are there any special potential health hazards associated with the site?
- Are all staff involved aware of the above?

- **Accommodation and Transport**
- Suitability? Pre-visit check?
- Fire precautions and certification? Fire drill?
- Young people security?
- Driver suitability? Drivers' hours? Insurance?
- Adequate stops, eating and care arrangements en route?

- **Visits Overseas**
- Passports/Visas?? Health/medical arrangements in place?

- **Post-visit review arrangements**
- Review risk assessment and update if necessary
- Review other arrangements and evaluate whether the visit met the intended aims

5.2 Transport

- 6.2.1 No member of staff may drive a college minibus without either a category D1 licence and or having received approved minibus training. **Only D1 category licence holders may drive a minibus overseas and further, drivers not holding a D1 may not drive any vehicle over 3.5 tonnes.**
- 6.2.2 Mobile phones are **never** used whilst driving.
- 6.2.3 While on stops/rests, the leader should carry out a 'head count' before progressing.
- 6.2.4 When hiring a coach or minibus, the leader must ensure that the operating company is reputable, that seat belts are installed and whether the operator has procedures to deal with emergencies.
- 6.2.5 It is essential that all students use the transport provided by the College to and from the destination.
- 6.2.6 Staff should **NOT** condone or sanction students using their own cars for college business, especially if they intend to transport other students.
- 6.2.7 Students undertaking evening/weekend activities as part of their course should be reminded that they can be reimbursed for public transport costs from Student Services.
- 6.2.8 It is strongly advised that staff should not be in a position where they are alone with a student. The Group Leader should arrange for a central dropping point rather than individual home points.
- 6.2.9 Staff must not use their own vehicles to transport students.

5.3 Application for approval

- 5.3.1 In order to avoid delays, it is important that the following timelines for application are followed:

Period of off-site visit/activity	Minimum advance notice required
One day or less	2 weeks
Over one day and based in the UK	4 weeks
Over one day and based outside the UK	8 weeks

- 5.3.2 For applications for an activity, use form **HSERV001** and attach the risk assessment form **HSERVRA001** (both available via the portal).

5.4 Risk Management

The risk assessment process and its' review are crucial steps in ensuring that risk is minimised and that the College meets the **legal requirements** placed upon it. Previous similar trips can provide valuable information for the visit leader; the sharing of such information is strongly recommended. **Please see diagram 2 below.**

5.4.1 Use of Independent Providers

Where an independent provider is used, the risk assessment **must** include an agreement between both parties to define responsibilities. In particular:

- Times when the provider will have sole responsibility for leading and supervising the group
- Times when the responsibility is shared with College staff and,
- Times when the College staff has sole responsibility e.g. between activities, during meals, overnight etc

5.4.2 Dynamic risk management during the visit

Situations that may arise during the visit/activity have to be effectively managed (e.g. cancelled transport, staff/student illness, adverse weather conditions). ***The ability to re-assess and manage changing risk while the visit is taking place is a key element of the competence for leaders and should be the focus of training for visit leaders.*** The Head of Department is responsible for ensuring that staff are competent and should identify training needs.

Dynamic risk assessments may be used to inform and amend the risk assessment for the benefit of others.

5.4.3 Contingency planning (Plan B)

A contingency plan may allow the aims of the visit to be achieved even if the original plan has to be abandoned. The College must be aware of a plan B.

5.4.4 Specific activities and types of visit

- Remote supervision: Where an activity requires remote supervision, the group leader must be suitably qualified and experienced, and familiar with the area. **Group leaders can access the 'remote supervision guidance notes' available from www.mtlw.org.**
- Water margins, coastal waters and natural waters: Water margins and natural waters present significant hazards. Leaders should reflect in the risk assessment:-
 - a) The likelihood of someone falling in
 - b) The seriousness (depth, temperature, current, weather conditions, underwater hazards)
 - c) How easy it would be to carry out a rescue
 - d) Student/staff swimming ability, tides, rip tides and sewage outlets

5.4.5 Hazardous pursuits and outdoor activities

For the purposes of gaining approval for a hazardous activity, the following are classed as hazardous:

Abseiling and High Ropes; All Airborne Pursuits; Angling (in land and sea); Archery; Camping; Canoeing; Caving; Climbing, (artificial and rock); Cycling (mountain biking, expeditions, time trials, racing); Expeditions; Fell Walking; Gorge Walking; Horse/Pony Trekking; Karting; Motor Sports; Mountaineering; Orienteering; Rafting (white water); Sailing; Shooting; Skiing; Snowboarding; Windsurfing;

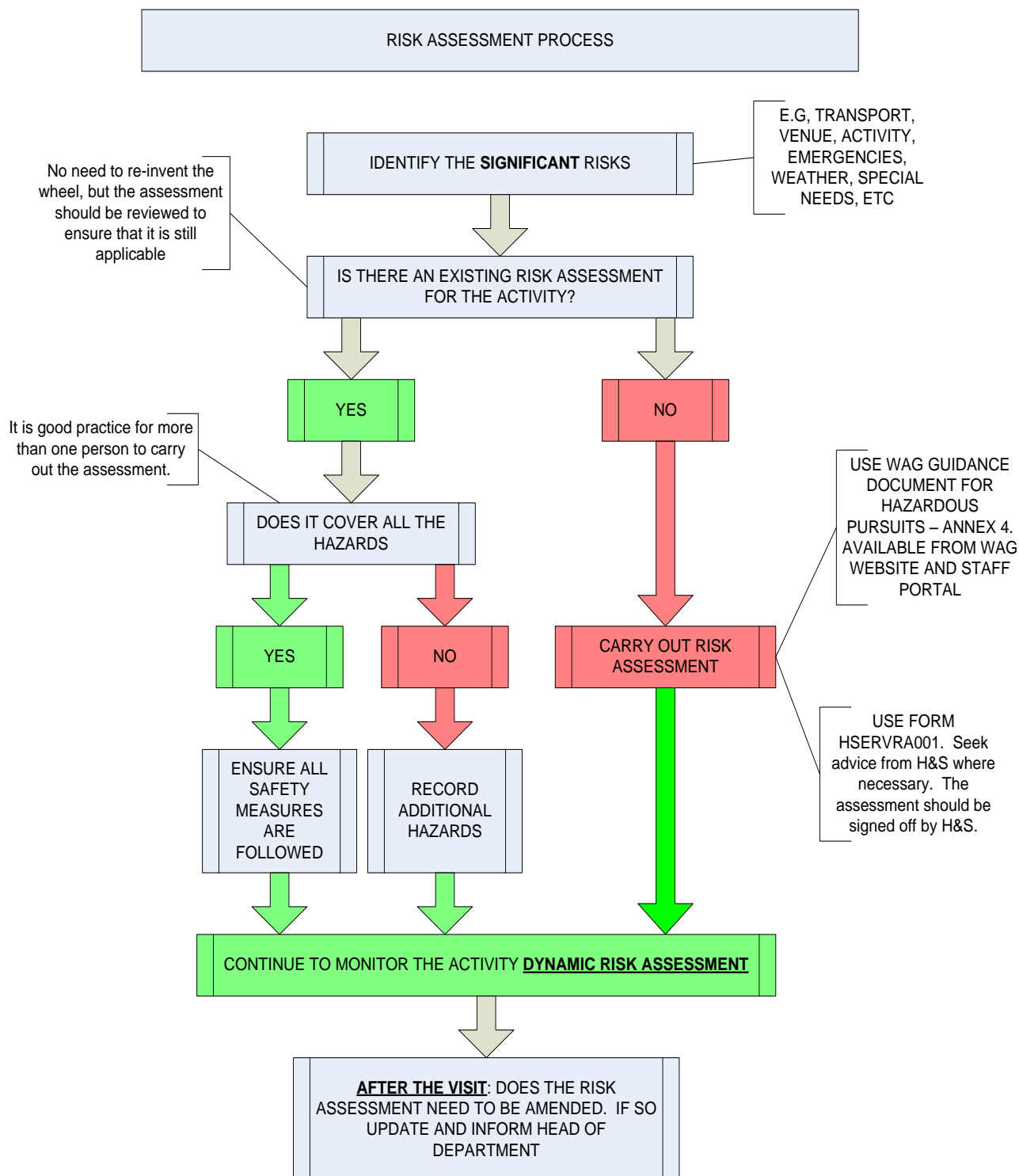
Any centre used for activities and hazardous pursuits must be approved and licensed (please see section 5.4.5 below).

Persons carry out the risk assessment are strongly advised to view the activity pointers in ANNEX 4 of the WAG Educational visits guide available on the WAG website or the staff portal under health and safety.

5.4.5 Adventure activities licensing

Any organisation providing adventure activities to people under 18 years of age may require a licence to operate. The AALS website www.aals.org.uk is an important source of information.

Diagram 2: Risk Assessing a Visit



5.5 Insurance

The visit leader should ensure that students/ parents/carers are informed of the scope of insurance cover arranged.

The College recommends that Individuals travelling outside of the UK take out additional personal insurance.

6. Staffing:

6.1 Staff/Young person ratios

The following table provides a guideline only on staff: student ratios, but is not applicable to outdoor pursuits. The risk assessment will determine whether the staff number needs to be increased (e.g. large parties, persons with additional needs, extended residential) or reduced (e.g. visit to local sports centre, local venue). In most situations, a single member of staff will not be sufficient.

General Off-Site Visits	
Activity	Staff:Young Person Ratio
Local visits and normal countryside (close to vehicle access (i.e. less than 30 minutes walking time for any group member to the nearest road from which the group could be easily evacuated/not including demanding environments – hazardous terrain, difficult escape, fast flowing water))	1:15-20
Residential and visits abroad	1:10-15 (but 1:10 with 2 staff minimum for visits abroad)
Swimming in public pools with lifeguard	1:15-20
Swimming elsewhere without lifeguards	1:5-10 (but 2 staff minimum). Leader should have lifeguard qualification

6.2 Volunteers

Volunteers **must** be competent and approved by the Head of Department (students, staff and relations of leaders/helpers). Volunteers must be briefed, understand their responsibilities and authority of the group leader, and be aware of emergency procedures. **For residential visits all volunteers must be CRB checked.** Volunteers should avoid being left alone with a young person wherever possible; supervision should be structured to reduce such possibilities.

7. Communicating with students/parents and guardians

Communication will always take place to confirm the aims and benefits of the visit/activity, dates, venues, travel arrangements, supervision, emergency arrangements, medical requirements etc. Consent for persons under 18 years of age is required from parents/guardians, **without which the young person cannot be taken on the visit/activity. Medical consent is always required, without which the student cannot be taken on the visit/activity.**

Agreement/consent and medical conditions are recorded on form **HSERV003** (available on the portal).

Information on attendees and emergency contact details are recorded on form **HSERV004** (available on the portal).

8. Organisation and supervision during the visit/activity

The group leader must monitor the group and conditions (dynamic risk management), be physically and mentally fit, and operating within their personal experience, abilities and qualifications. The Head of Department is responsible for liaising with staff to identify training needs.

The group leader needs to ensure that students know which adult is responsible for them, and that they understand the expected standards of behaviour and sanctions.

It is good practice for the leader to have a reasonable knowledge of particular needs, e.g. medical, disability, nutritional (food allergies), and to carry a list of all group members and emergency contact details/numbers. A regular head count is good practice (especially at assembly points, after planned stops on the journey, departure and arrival) and, where applicable, a rendezvous point is identified and agreed. The leader may wish to use a buddy system where students are paired up. Particular care should be taken when re-arranging groups to ensure all persons are present.

8.1 Downtime arrangements

Where students are not directly engaged in the main programme of activities, downtime can be used to create opportunities for social development and relaxation. **Leaders should note that a high proportion of accidents and problems have occurred during downtime.**

Visit leaders should therefore ensure that young people continue to be properly supervised during downtime before and after activities, including the evenings on residential visits. A group occupied in a planned activity is far safer than a group left to its own devices in an unfamiliar environment.

The group leader should ensure that students and staff/volunteers understand the behaviour expected of them and the sanctions, including being sent home.

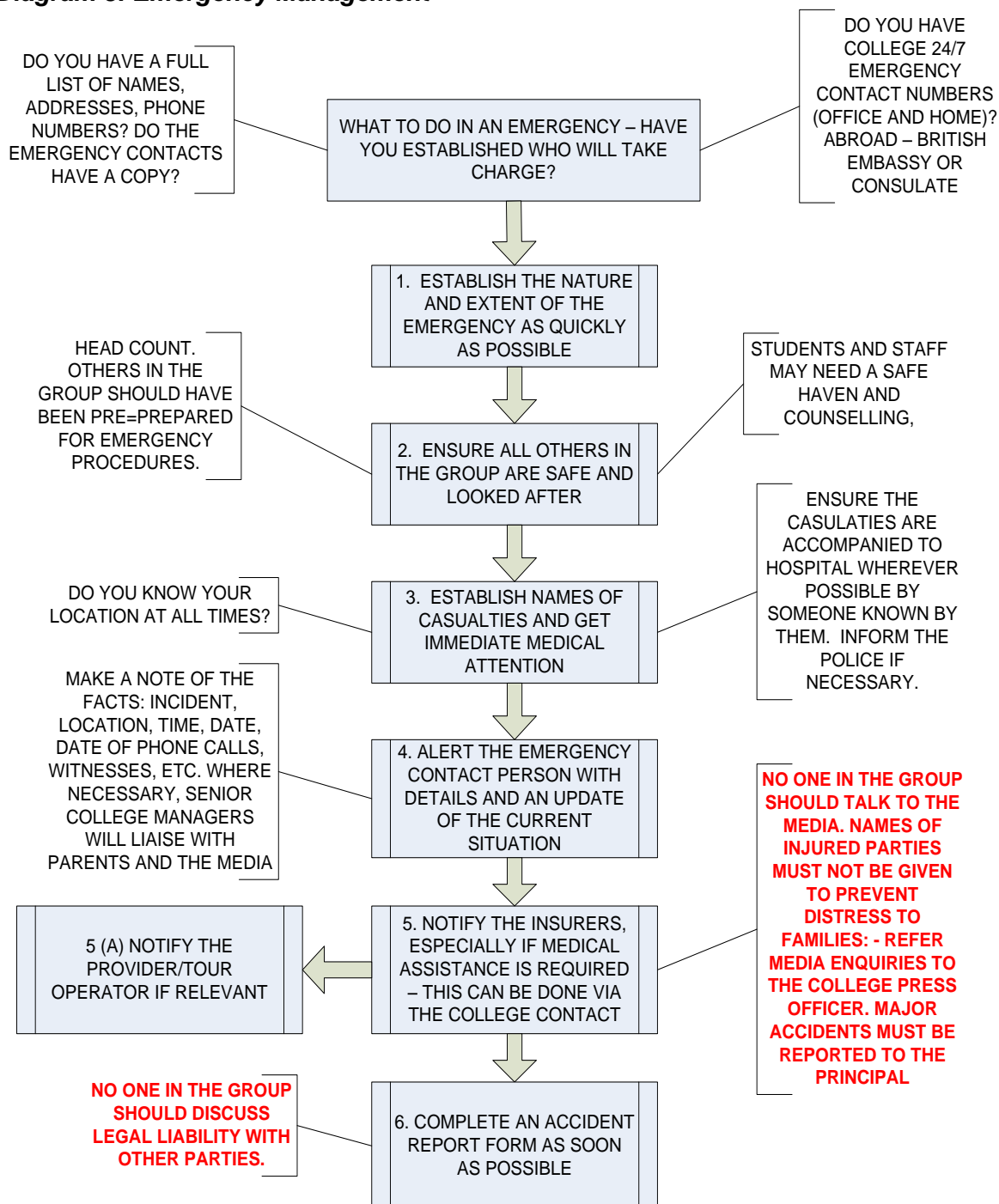
8.2 Residential visits

The risk assessment should have ensured that the place of residence is acceptable regarding fire safety, access to balconies, facilities, and, crucially, security etc. On arrival, it is best practice for students and staff to familiarise themselves with the fire escape routes and evacuation procedures. A fire drill should be arranged to take place at the earliest opportunity. When booking arrangements are carried out for residential visits, use form **HSERV002** (available on the portal).

9. Emergencies/Serious Incidents/Fatalities

Diagram 3 below describes the management of emergencies.

Diagram 3: Emergency Management



10. Reviewing the visit

The importance of an appropriate review cannot be overemphasised. The main purpose is to identify strengths and weaknesses to inform future visits. Risk assessments may need to be amended to reflect additional hazards. All accidents/incidents must be reported.

The student and group leader review the activity and record this on forms **HSERV005** and **HSERV006** respectively. Both are available on the portal.

11. Related Documents

HSERV001	Application for approval of a regular off-site activity
HSEVRA001	Off-site risk assessment form
HSREV002	Booking Conditions for Residential Visits
HSERV003	Agreement/Consent and Medical Details
HSERV004	Attendance List and Emergency Contact Information
HSERV005	Activity Evaluation (Student)
HSERV006	Activity Evaluation (Group Leader)
HSER006 01	Accident and Incident Record - bilingual version
HSER006 01A	Incident Investigation Record

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 3: FIRE RISK ASSESSMENTS

1. Introduction

Fire is unlike any other aspect of risk due to its potential to cause catastrophic loss within a very short space of time. This includes not only loss of life but loss of buildings and everything contained therein. This also impacts upon business continuity in addition to environmental impact from toxic airborne particles, pollution from water run-off during fire fighting and the transport and disposal of destroyed materials. The disruption caused, and the financial impacts from a fire can be enormous. Many buildings on campus are in very close proximity and fire spread between buildings is a very real threat.

Bridgend College will ensure, so far as is reasonably practicable, that the risk from fire will be managed in compliance with the Regulatory Reform (Fire Safety) Order 2005 (as amended) and all other relevant regulations having a bearing upon fire safety at the College. Management of fire risks will be undertaken in such a way as to prevent injury or ill-health to employees, visitors, contractors and others who may be affected by the activities of the College.

The College Corporation is ultimately responsible for ensuring effective fire safety management at Bridgend College. The Principal has appointed 'competent' persons to assist in the generation of the fire risk assessment, fire policy, procedures, information and training, and the installation, testing and maintenance of fire safety equipment.

The purpose of this sub-section is to:

- ✓ ensure that suitable and sufficient fire risk assessments are carried out in line with legislative requirements
- ✓ ensure that fire risk assessments are completed, maintained and reviewed

2. Responsibilities

- 2.1 The Health, Safety and Sustainable Development Manager is responsible for carrying out cross-college fire risk assessments, maintaining documentation and reviewing such assessment on, at least, an annual basis, or in response to significant changes.
- 2.2 The HSE department is responsible for generating and maintaining building floor plans in CAD. All alterations are reported to the health and safety team in order that fire risk can be reviewed and drawings amended. Drawings will show the location of all fire detection, warning and fire-fighting equipment and the location of fire blankets, call points, emergency lighting, and emergency fire exits. In addition, documentation is maintained for all contract inspections of fire detection and fire alarms systems and, fire fighting equipment. Copies of drawings are provided for the estates department.
- 2.3 The Facilities Manager is responsible for ensuring that actions and non-conformances relating to fire safety are closed out as a priority.
- 2.4 The relevant Head of School/Departmental Manager ensures that Personal Emergency Evacuation Plans are completed where necessary.
- 2.5 The relevant Head of School/Departmental Manager is responsible for informing the health and safety team of any **significant** change within their area of responsibility which may affect fire safety.
- 2.6 All members of staff are responsible for reporting to their line manager, anything which they feel presents a **significant** fire threat.

- 2.7 The Assistant Principal (Finance and Resources) is responsible for reviewing, in conjunction with the relevant persons, the availability of financial resources for fire safety.

3. Procedure

- 3.1 The Health, Safety and Sustainable Development Manager shall carry out cross-college fire risk assessments which are recorded on the Risk Register Master Document **HSERRMD004**. The Master Document is available on the portal.
- 3.2 The assessment is carried out through physical inspection and document check (where relevant), with evidence being recorded within the Master Document.
- 3.3 Where relevant, actions are described, responsibility assigned and a target date applied. Upon completion of the action, a review is carried out to ensure its effectiveness and further action assigned where necessary.
- 3.4 The relevant person reports the completion of an action to the health and safety team who are responsible for updating the Risk Register Master Document.
- 3.5 The fire risk assessments are reviewed on, at least, an annual basis or in response to any significant change.
- 3.6 All risk assessments are version controlled.

4. Personal Emergency Evacuation Plans (PEEP's)

- 4.1 The relevant Head of School/Departmental Manager is responsible for completing, where necessary, a personal emergency evacuation plan. Specialist advice may be sought from the Disability Support Department.
- 4.2 The PEEP is prepared, maintained and reviewed (at least annually) by the Head of School/Departmental Manager or nominated person.
- 4.3 PEEP's are recorded on the document **HSERPEEP004**.

5. Document Review

- 5.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

6. Related Documents

HSERRMD004	Risk Register Master Document
HSERPEEP004	Personal Emergency Evacuation Plan
HSE006 02	Fire Policy and Safety Arrangements
HSE006 03	Fire, Emergency Response and Business Continuity
HSER007 03	School/Department/Area Inspection Record
HSE008 04	Control of Contractors
HSE008 07	Pollution Prevention and Spill Control
HSE010	Training, Awareness and Competence
Building Floor Plans	
Fire Engineer/Extinguisher Inspection and Testing Reports/ Internal Inspection Reports	

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 4: SUSTAINABILITY RISK MANAGEMENT

1. Introduction

Bridgend College's approach to sustainable development is described in the Sustainable Development Strategy (document code: HSESDS01) and the reader is directed to this document which describes in detail the vision, indicators and objectives which are integral to sustainability risk. The college's approach is based on:

1. Long-term thinking and organisational resilience
2. Ensuring a balance between economic, social and environmental dimension in all decision-making at all levels of the organisation
3. Focussing on prevention of problems through identifying critical early interventions
4. Engaging and involving others for collective support and positive behaviour change at the individual and organisation level (college culture)

The purpose of this sub-section is to:

- ✓ define the method for identifying the environmental aspects and impacts associated with all undertakings of the College.
- ✓ to define a method for determining the significance of the identified environmental aspects and impacts.
- ✓ ensure that environmental assessments are completed, maintained and reviewed
- ✓ to meet the commitments laid down in the HSE Policy Statement **HSEPS** and the **Sustainability Policy** (both described in the HSE Manual and Policy, **HSE001**)

2. Responsibilities

- 2.1 The Health, Safety and Sustainable Development Manager is responsible for the maintenance of the register of environmental aspects and impacts held on the Risk Register Master Document **HSERRMD004**.
- 2.2 The HSSusDev Manager, in liaison with the HSE team and other members of staff, is responsible for evaluating the significance of the identified environmental aspects and impacts across the College.
- 2.3 All members of staff are responsible for notifying the Health, Safety and Sustainable Development Manager, of any known changes to their activities or services that are likely to affect the register of aspects and impacts, and their significance evaluation.
- 2.4 The relevant identified person is responsible for ensuring that actions relating to their area of responsibility are completed according to agreed target dates
- 2.5 The Assistant Principal (Finance and Resources) is responsible for reviewing, in conjunction with the relevant persons, the availability of financial resources for environmental actions.

3. Definitions

Environment - surroundings in which an organisation operates, including air, water, land, natural resources, flora, fauna, humans and their interrelation.

Environmental Aspect - element of an organisation's activities, products or services that can interact with the environment.

Environmental Impact - any change to the environment, whether adverse or beneficial, wholly or partially resulting from the Colleges' activities.

Significant Environmental Aspect - an environmental aspect that has or can have a significant environmental impact.

Direct aspect - an interaction with the environment over which the organisation has control and over which it can be expected to exert an influence.

Indirect aspect - an interaction with the environment over which the organisation does not have control and cannot be expected to exert an influence.

4. Procedure

- 4.1 The findings of the environmental review and subsequent reviews, including individual department reviews, are used to identify the College's environmental aspects and impacts.
- 4.2 The identified aspects and impacts, cross-college, will be compiled into a register of environmental aspects and impacts and held on the Risk Register Master Document **HSERRMD004**. The register includes an assessment of normal, abnormal and emergency conditions. The register identifies direct and indirect impacts, positive and negative impacts and takes into account historic, current and proposed developments, activities and services.
- 4.3 A **Control Rating** is applied. This is determined from the criteria in the Control Rating Assessment table, where a maximum control rating score of 5 is applied. The process considers:-
- ✓ Current environmental control methods and procedures
 - ✓ A clear knowledge of the aspect and its impact, including the event-receptor pathways
 - ✓ Maintenance of associated machinery
 - ✓ Environmental awareness and, accident and emergency training
 - ✓ Monitoring of environmental aspects and impacts
- This is a subjective exercise and the results may require review during the process.*

Note: Legislation applies to all aspects which are therefore of high significance. The following scoring method is applied to eliminate the level 5 score which would otherwise be applied in all cases. This allows objectives to be assigned to those of higher priority.

Control Ratings:

Negligible or no control - Score 5

Control of the aspect is nonexistent or totally ineffectual. There are no controls and knowledge of the environmental impact is negligible.

Slight degree of control - Score 4

There are some controls in place (either procedures or physical) and there is some awareness of a control requirement. Such controls only have limited effect on reducing the relevant environmental impact.

Moderate degree of control - Score 3

There is recognisable control on the aspect. This may include procedures, management controls or physical controls, but they are not totally effectual and implementation / use of them are not comprehensive.

Medium degree of Control - Score 2

There is significant control on the aspect through procedures, management control and physical controls. Relevant parties are aware of such controls and they are generally affectively applied.

High degree of Control - Score 1

All (or practically all) necessary procedures, management controls and best practice have been implemented and compliance with such procedures and best practice is high. The impact has been minimised to very significant extent.

4.4 A **Severity rating** is applied. This is determined from the criteria in the Severity Rating Assessment table, where a maximum control rating score of 5 is applied. The process also considers:

- ✓ Quantity (volume and / or rate of emission or consumption)
- ✓ Toxicity (e.g. environmental threat)
- ✓ Existence of applicable legislation
- ✓ Frequency of occurrence (normal operating conditions only)
- ✓ Likelihood of occurrence (abnormal / emergency situations only)
- ✓ Transmission effectiveness of pathway
- ✓ Sensitivity of environmental receptor (an environmental target that could be degraded by the escape of the hazard)

This is a subjective exercise and the results may require review during the process.

Severity Ratings:

Rating Description

Severe – Score 5

The parameters of the aspect / impact are comparatively high and combined in a manner that causes, or can cause, severe environmental damage, major pollution, e.g. permanent / long-term environmental damage / impacts. Or, there is insufficient information.

Major – Score 4

The parameters of the aspect / impact exist at a level that does or will cause environmental damage, but the damage is not permanent or is only medium term.

Moderate – Score 3

The parameters of the aspect / impact all exist at recognisable levels and are / can cause environmental damage, but such damage is short term and always repairable.

Minor – Score 2

Some of the parameters exist at recognisable levels and are (can) result in environmental change, but the effect of such change is easily recoverable or self recovering, and there is no lasting impact.

Insignificant /Positive – Score 1

None of the relevant parameters exist at a level that can cause environmental change, or the aspect results in a positive environmental effect.

4.5 A **Significance Assessment Score** is applied. This is determined by the multiplication of the control rating and severity rating, and gives a maximum possible score of 25. Where actual data is not available, best estimates are applied as appropriate. A **Risk Matrix** is used for this process:

SEVERITY RATING	CONTROL RATING				
	NEGLIGIBLE 5	SLIGHT 4	MODERATE 3	MEDIUM 2	HIGH 1
SEVERE 5	25	20	15	10	5
MAJOR 4	20	16	12	8	4
MODERATE 3	15	12	9	6	3
MINOR 2	10	8	6	4	2
INSIGNIFICANT/POSITIVE 1	5	4	3	2	1

12+ = significant risk

8,9,10 = Medium Risk

<8 = Insignificant Risk

- 4.6 An **Evaluation Criteria**, as given above, is applied to give an overall level of risk. Any aspect with a rating of 12 or above will be considered significant.
- 4.7 The register will be reviewed and maintained during the annual management review process, and/or in response to significant changes within the College or changes in legal and/or other requirements. In addition, complaints, non-conformances and incidents will result in review.
- 4.8 The evaluation criteria is used to inform action. Actions are recorded in accordance with **HSE009, Objectives and Targets**.

5. Document Review

- 5.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

6. Related Documents

HSEPS	HSE Policy Statement
HSESDS01	Sustainable Development and Strategy
HSERRMD004	Risk Register Master Document
HSE009	Objectives and Targets

Sustainability Policy
Green Dragon Environmental Standard
ISO14001 Standard
EMAS
Green Travel Plan Criteria
Carbon Trust Standard
Corporate Health Standard
Sustainability Steering Group Minutes

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 5: ESTATES RISK MANAGEMENT

1. Introduction

Effective management of the estate is a crucial aspect of maintaining high levels of health, safety, welfare and environmental protection. Uncontrolled management can have a significant and unacceptable impact on levels of risk for the College. The College has a legal duty to carry out risk assessments - part of this duty relating to effective communication between relevant parties.

The purpose of this sub-section is to:

- ✓ ensure that the estates department risk assessments are completed, maintained and reviewed
- ✓ ensure that the estates department, health and safety team and other relevant persons are informed of all proposed construction projects and alterations, including electrical/gas work within any area of the College.

This scope of this procedure covers all parts of the Estate, both building structures and all areas of land exterior to the main buildings, including footpaths, roads, parking facilities, access gateways, green areas and any other area under the management control of the College.

2. Responsibilities

- 2.1 The Facilities Manager is responsible for ensuring that the estate is maintained in a satisfactory state of repair with regard legal obligations for health, safety, welfare and environmental protection. The HSE department provide ongoing support and advice as required.
- 2.2 The Facilities Manager is responsible for ensuring that risk assessments for his area of responsibility, are completed, maintained and reviewed.
- 2.3 The Facilities Manager has overall responsibility for the management of contractors.
- 2.4 The HSE department are responsible for completig outreach assessments and incorporating within the Risk Register. Reference to non-college owned premises are referenced.
- 2.5 All Heads of School/Departmental Managers are responsible for reporting, to the Facilities Manager, any person/business contracted to carry out construction work within their department, in order that approval is granted. This is carried out prior to any work being undertaken.
- 2.6 All Heads of School/Departmental Managers are responsible for reporting, to the Facilities Manager, any proposed construction projects carried out in-house, for approval. This is carried out prior to any work being undertaken.
- 2.7 The Assistant Principal (Finance and Resources) is responsible for reviewing, in conjunction with the relevant persons, the availability of financial resources for estates actions.

3. Procedure

3.1 Environmental Risk

- 3.1.1 The estates department will be managed in an environmentally responsible manner, ensuring that the buildings, land, plant or activities do not adversely impact on the local environment to an unacceptable level. The results of environmental reviews and/or risk assessments may be used to assist in effective management. The HSE department provide ongoing support and advice as required.
- 3.1.2 Actions will be taken to minimise and mitigate any potentially adverse impact on the environment (e.g. from waste building materials, air emissions, gas migration, wastewater discharges, etc.). The results of environmental reviews and/or risk assessments may be used to assist in effective management.
- 3.1.3 **Biodiversity risk** - The wildlife of the local environment will be protected from direct impact from the College's activities; this includes minimising the use of pesticides and artificial fertilisers, and using good husbandry to encourage native and natural flora and fauna wherever practicable and in line with any biodiversity or other policy/strategy endorsed by the College. The risk of loss of biodiversity is considered in all aspects of estates management and is considered as part of the risk assessment process prior to work commencing.
- 3.1.4 **Building Design Risk** - Environmental considerations will be incorporated into new design building projects and/or alterations wherever practicable, and in accordance with any policy/strategy endorsed by the College.
- 3.1.5 **Biodiversity Risk** - Only timber and timber products such as The Forest Stewardship Council, that have been lawfully obtained and have come from forests and plantations which are managed to sustain their biodiversity, productivity and vitality, and to prevent harm to other ecosystems and any indigenous or forest-dependent people, will be used on the estate. This sections applies to both in-house work and is specified in contract work.

3.2 Health, Safety and Welfare Risk

- 3.2.1 **Asbestos** - All construction work risk assessments will take into consideration and record the risks associated with asbestos. Management of asbestos is recorded in the Asbestos Register held in the estates department and in accordance with procedure **HSE008 02, Asbestos Management**.
- 3.2.2 **COSHH** - The risks to people and the environment from storage and use of hazardous substances, including hazardous waste, on site will be minimised wherever possible and practicable. All materials will be securely stored and, where relevant, banded. Access to hazardous materials will be via an authorised persons/keyholder approach. Control of materials is carried out in accordance with procedure **HSE008 03, Control of Waste Materials**. The storage of hazardous materials is recorded in risk assessment.
- 3.2.3 **Waste Disposal Risk** - All redundant and waste substances will be removed at the earliest opportunity in compliance with the relevant legislative requirements. Current waste carrier licences and site licenses are held in the estates department. Control of materials is carried out in accordance with procedure **HSE008 03, Control of Waste Materials**.

3.2.4 **Contractor Risk** – All contract work is carried out by businesses approved by the Facilities Manager and in accordance with procedure **HSE008 04, Control of Contractors**. Records of permit-to-work are maintained in the estates department. All work is carried out in accordance with the relevant legislation; a CDM Co-ordinator is assigned where necessary.

All Heads of Department/Departmental Managers inform and agree with the Facilities Manager, and other relevant persons, proposed construction work within their area of responsibility. Approval for work to any building must be obtained from the Facilities Manager.

3.2.5 **In-House Construction Risk** – All work undertaken by the estates department is carried out in accordance with the relevant risk assessment and safe working practices. Alterations to buildings take account of fire safety. The health and safety team are informed of alterations in order that fire risk assessments can be reviewed. Alterations are recorded on building drawings, where available. Alterations in all cases are recorded, maintained and auditable.

3.2.6 **Electrical Risk** – All electrical work is undertaken by certified, competent persons. Electrical testing and general inspection is carried out in accordance with procedure **HSE008 05, Electrical Testing and Inspection**.

All Heads of Department/Departmental Managers inform and agree with the Facilities Manager, and other relevant persons, proposed electrical work within their area of responsibility. Approval for work to any building must be obtained from the Facilities Manager prior to any work commencing.

No member of staff may bring onto any campus, any personal electrical items without prior approval of the Facilities Manager. The Facilities Manager reserves the right to request removal from the College, personal electrical items.

No member of staff may, under any circumstances whatsoever, remove any electrical item from the workplace for home repair.

No unqualified and unauthorised member of staff may, under any circumstances whatsoever, carry out any electrical repair.

3.2.7 **Work at Height Risk** – All work at height is carried out by competent persons who have received sufficient instruction and training and in accordance with procedure **HSE008 06, Work at Height** and safe working practice. No contractor shall carry out work at height without a permit-to-work.

No member of staff or student, unless trained and authorised, may carry out any work at height.

3.2.8 **Equipment and Machinery Risk** – All estates department staff are competent to use the necessary equipment and machinery to carry out their tasks. Training requirements are identified by the Facilities Manager. Health screening may be required to ensure the safety of members of staff using machinery, including forklifts, cars and minibuses, and to ensure the safety of others.

3.2.9 **Risks arising from significant health and safety concerns** – The relevant person informs the health and safety team and the Facilities Manager. Upon assessment of the risk, and where necessary, a meeting is held with the relevant persons to agree a course of action. Where necessary, pilot projects shall take place to ensure effective risk control before the control method is fully applied.

Where significant alterations to a building structure, electrical system or areas external to the main buildings (e.g. pathways, ramps, car parks) are required, and to ensure effective use of resources, all expenditure/additional expenditure has final approval by the Assistant Principal (Finance and Resources) in consultation with the Facilities Manager and taking account of the results of full health and safety risk assessment.

Immediate action is taken where there is a risk of imminent danger.

3.2.10 **Outreach centres** are non-college owned premises and responsibility for corrective Maintenance lies within the duty of Care of the owner. The centres are assessed for suitability as areas of learning.

4. Document Review

4.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

5. Related Documents

HSE008 02	Asbestos Management
HSE008 03	Control of Waste Materials
HSE008 04	Control of contractors
HSE008 05	Electrical testing and inspection
HSE008 06	Work at Height
HSE008 07	Pollution Prevention and Spill Control
HSE008 14	Personal Protective Equipment and Signage
HSE008 16	Lock Out and Tag Out

Green Dragon Environmental Standard
Green Travel Plan Requirements
Corporate Health Standard
OHSAS18001
ISO 14001
EMAS

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 6: CONTROL OF SUBSTANCES HAZARDUS TO HEALTH (COSHH)

1. Introduction

Using chemicals or other hazardous substances at work can put people's health at risk, so the law requires employers to control exposure to hazardous substances to prevent ill health. We have to protect both employees and others who may be exposed, by complying with the Control of Substances Hazardous to Health Regulations (COSHH) 2002 (as amended).

***Appendix 1 provides simple information on COSHH hazards
COSHH and Material Safety Data Sheet (MSDS) power-points are available on the portal.***

These guidelines provide a step by step approach for managers to follow, to enable them to carry out risk assessments and to identify the measures needed to ensure compliance with the regulations.

2. Responsibilities

- 2.1 The Principal has overall responsibility for the management of health & safety within the College. This includes the responsibility for the provision of resources and implementation of all measures needed to comply with the relevant legislation and guidance.
- 2.2 The relevant school/department manager has overall responsibility for ensuring that COSHH risk assessments are completed and maintained within their area of responsibility. Further, the responsibility extends to ensuring that identified risks are reduced to an acceptable level through closure of actions within a defined timeframe, as described within the assessment, and that assessments are reviewed on, at least, an annual basis or in response to additional factors arising which necessitate revision of the assessment.
- 2.3 The relevant school/department manager is responsible for ensuring that staff attend appropriate training where a need is identified within the risk assessment.
- 2.4 The relevant school/department manager is responsible for ensuring that appropriate PPE is available within their work area and are suitable and sufficient for the purpose for which they are being used.
- 2.5 All members of staff are responsible for informing the risk assessment process, where necessary and/or as directed by their line manager.
- 2.6 All members of staff are responsible for contacting, in the first instance, the Occupational Health Advisor where he/she identifies symptoms which are suspected to be due to COSHH related work.
- 2.7 The Occupational Health Advisor is responsible for providing support, and recording such information as defined within her professional role.
- 2.8 All members of staff are responsible for:
 - Taking reasonable care for their own health & safety and for that of others who may be affected by their acts and omissions.
 - Using substances safely to minimise the risk of injury in accordance with any instruction or training received and follow any safe system of work that is in place. This includes use of PPE as provided.
 - Ensuring that all containers, glassware is labelled at all times and stored securely and safely after use.

- Reporting to their line manager and the occupational health advisor, any health conditions (including pregnancy) that could affect their ability to comply with the requirements of this procedure or that they feel may be the result of using substances.
 - Attend COSHH training as identified in risk assessment.
- 2.9 The HSSusDev. Manager is responsible for providing support and guidance on all aspects of risk assessment and management as required.

3. Procedure

- 3.1 The head of School/area manager assigns responsibility for completing the 'COSHH RISK ASSESSMENT RECORD' which is available on the portal (also in printable format) or from the HSE department.
- 3.2 Actions, where identified, are assigned a target date for completion and responsibility. On closure of the action, the assessment is updated to reflect this.
- 3.3 The assessment is maintained within the relevant area, is clear and legible, and always available for inspection or audit at any time.

4. Document Review

- 4.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

5. Related Documents

HSEPS	Health and safety policy statement
HSE001	HSE Manual and policy
HSE005	Structure and responsibility
HSER007 07	COSHH Record
HSE010	Training, awareness and competence
HSE013	HSE audit

COSHH risk assessment record (on portal)
COSHH power-point (portal)
MSDS power-point (portal)

APPENDIX 1

1. The main types of hazardous substances are:

- **Chemical substances:** used directly in work activities which are usually purchased from a supplier (e.g. adhesives, paints, cleaning agents, pesticides);
- **By-products:** substances generated or given off during work activities (e.g. fumes from welding, wood dust, brick or cement dust)
- **Biological agents:** such as bacteria and viruses contracted from other people or animals, either by direct contact or indirectly via contaminated water, bedding, body fluids etc.

Forms hazardous substances can take:	
<ul style="list-style-type: none"> ▪ <i>solids</i> ▪ <i>liquids</i> ▪ <i>mixtures</i> ▪ <i>dusts</i> 	<ul style="list-style-type: none"> ▪ <i>fumes</i> ▪ <i>vapour</i> ▪ <i>gases</i> ▪ <i>micro-organisms or biological agents</i>

2. Examples of the effects hazardous substances can have on health include:

- skin irritation or dermatitis as a result of skin contact
- asthma as a result of developing an allergy to substances used at work
- losing consciousness as a result of being overcome by toxic fumes or vapour
- infection from bacteria and other micro-organisms (biological agents)

Short-term
<ul style="list-style-type: none"> • <i>skin/eye irritation</i> • <i>skin burns</i> • <i>headaches</i> • <i>dizziness</i> • <i>nausea</i> • <i>breathing difficulties</i> • <i>unconsciousness</i>

Long-term
<ul style="list-style-type: none"> • <i>cancer</i> • <i>lung disease</i> • <i>occupational asthma</i> • <i>liver/kidney dysfunction</i> • <i>skin disease</i> • <i>central nervous system disorders</i>

3. Hazardous substances can enter the body in many different ways:

<p>ROUTES OF EXPOSURE</p> <ul style="list-style-type: none"> • ingestion • inhalation • absorption • skin contact • skin injection or puncture

4. Staff and students at Risk

- Agricultural - pesticides, herbicides, vapours, rat urine (e.g. leptospirosis / weil's disease) dusts (grain), zoonoses, engine oil, chemicals;
- Painters & Decorators - paints, fumes, solvents, thinners, dusts;
- Photographic/Reprographic - chemicals used for developing, solvents, paper dust;
- Staff working with animals/ - infections from direct contact or contaminated bedding, zoonoses, veterinary medicines, animal dips, chemicals;
- Automotive - engine oil, exhaust and welding fume, paints and solvents;
- Cleaners & cleansing workers - chemicals, hypodermic needles , body fluids;
- Maintenance Staff - Toxic paints, solvents, adhesives, cement, dust (wood), diesel, fibres;
- Built Environment - paints, adhesives and solvents, dust (including silica/quartz from concrete) cement

5. Estates staff and building contractors are particularly at risk due to the wide variety of hazardous substances they use or come into contact with, such as:

- Contaminated land – chemicals, dust, gases and vapour that have accumulated;
- Paints, adhesives and solvents;
- Asbestos
- Dust (including silica/quartz from concrete);
- Fumes and gases in confined spaces;
- Pesticides - timber treatment/weed killers;
- Contaminated water - leptospirosis / weil's disease;
- Wood dust

6. How could you prevent or adequately control exposure to hazardous substances?

- **change the process or activity** so that the hazardous substance isn't needed or generated;
- **replace it** with a safer alternative;
- **use it in a safer form**, e.g. pellets instead of powder or smaller quantities;

If prevention is not reasonably practicable, then exposure must be adequately controlled. This can be achieved by using one or more of these methods.

- **totally enclose** the process;
- **partially enclose it** and use extraction equipment ('local exhaust ventilation' or LEV);
- **provide general ventilation** of the work room;
- **use systems of work** like handling dispensing and storage procedures which *minimise* the chances of hazardous materials spilling, leaking or otherwise escaping;
- **reduce the number of employees exposed**, or the duration of their exposure, but only after considering, and where possible using, the above measures.

If exposure cannot be adequately controlled by any of the above measures, **personal protective equipment (PPE)** must be provided as a means of control, e.g. face masks, respirators and protective clothing. It should be noted though that the COSHH Regulations only permit the use of PPE to achieve adequate control if other means of control cannot be used alone.

7. Welfare facilities

It is also important to consider what welfare facilities are required to minimise the risk of exposure to hazardous substances. When working with hazardous substances, hand washing and drying facilities should be provided. If staff work away from a base where such facilities are available, then it may be necessary to provide a wash basin and water supply etc. in the back of the vehicle that they use. Adequate facilities for changing, storing and drying clothes may be needed if workers must change into and out of work clothes.

It may also be necessary to provide first aid kits for use while away from the office.

Staff, students, visitors and contractors should be prohibited from eating, drinking and smoking in areas where hazardous substances are present, used or stored. Alternative facilities should be provided away from contaminated work areas.

8. What is adequate control of hazardous substances?

Under COSHH, adequate control means reducing exposure to a level that most workers could be exposed to, day after day at work, without adverse effects on their health. For a number of commonly used hazardous substances the Health and Safety Commission has assigned an Occupational Exposure Limit (OEL) to help define 'adequate control'.

There are two types of OEL: Occupational Exposure Standards (OESs) and Maximum Exposure Limits (MELs). A list of current OELs can be found in the HSE publication EH40 *Occupational exposure limits* (available from the Health and Safety Manager).

- **Occupational Exposure Standards (OES).** An OES is set at a level that is not likely to damage the health of workers exposed to it, by inhalation, day after day (based on current scientific knowledge).

For substances with an OES, we should reduce exposure to comply with that OES. However, under COSHH we will still be considered to have adequate control if the OES is exceeded, provided we identify why it has been exceeded and take appropriate steps to reduce exposure as soon as is reasonably practicable.

- **Maximum Exposure Limits (MEL)**

MELs are set for substances which may cause the most serious health effects, such as cancer and occupational asthma, and for which it is not possible to set an OES (because a 'safe' level of exposure has not been established). For substances with MELs we are required to reduce exposure so far as is reasonably practicable and, in any case, below the MEL.

9. Using the controls

Employees and staff are required to make proper use of control measures and to report defects. Managers are responsible for taking all reasonable steps to ensure that they do so.

10. Maintaining controls

Controls provided to prevent exposure to hazardous substances must be kept in efficient working order and good repair. Engineering controls such as local exhaust ventilation and respiratory protective equipment should be examined and, where appropriate, tested at suitable intervals.

- *Local exhaust ventilation (LEV) should be examined and tested by a competent person (such as an insurance company engineer surveyor) every 14 months. Records of this must be kept for at least 5 years.*
- *Respirators (except disposable ones) should be examined at least every month, or up to every 3 months if used only occasionally. Records of this should also be kept.*

11. Employee and staff information; individuals should be aware of-

- the nature of the substances they work with or are exposed to at work and the health risks;
- the control measures provided, their purpose and how to use them;
- how to use any personal protective equipment and clothing provided;
- the importance of good personal hygiene when working with hazardous substances;
- the collective results of any exposure monitoring and health surveillance (without naming individuals);
- emergency procedures - what to do in the event of a spillage, a fire, first aid measures, safe disposal procedures etc.

12. Reviewing COSHH assessments

You should review your assessment:

- annually;
- whenever there is reason to think it is no longer valid, such as following adverse monitoring or health surveillance results; an incident like a spillage or accidental exposure; or if new information about risks becomes available;
- when there has been a significant change in the work, such as a change in materials or equipment used or work methods or frequency.

13. Where can I find more information

1. The Control of Substances Hazardous to Health Regulations: Approved Code of Practice. L5
Free download from www.hse.gov.uk
2. EH40/99:Occupational exposure limits: HSE Books 1999-09-01. ISBN 0 7176 1660 6 (revised annually);

Remember that the document COSHHHG 01(COSHH Guidance), is available on the portal is you require further information.

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 7: DISPLAY SCREEN EQUIPMENT (DSE)

1. Introduction

Bridgend College will, so far as is reasonably practicable, avoid the risk of injury or ill health caused by incorrect use of display screen equipment (DSE).

This procedure applies to all departments/areas of the College and forms an integral part of the risk management process.

DSE disorders are part of a group of musculoskeletal disorders (MSDs). These are problems affecting the muscles, tendons, ligaments, nerves or other soft tissues and joints. The back, neck and upper limbs are particularly at risk. There are many conditions including low back pain and carpal tunnel syndrome for example. Acute symptoms may arise as a result of an identifiable event such as unaccustomed and/or intense physical exertion resulting in pain and loss or restriction of movement, for example sprains and strains. Alternatively, there may be a more gradual onset of symptoms which may persist and gradually worsen.

The risk assessment process, together with early reporting of symptoms will help ensure early intervention to ensure an individual gets the right support

2. Responsibilities

- 2.1 The Principal has overall responsibility for the management of health & safety within the College. This includes the responsibility for the provision of resources and implementation of all measures needed to comply with the relevant legislation and guidance.
- 2.2 The relevant school/department manager has overall responsibility for ensuring that DSE risk assessments are completed and forwarded to the HSE department for inclusion on the Risk Register Master Document. Further, the responsibility extends to ensuring that identified risks are reduced to an acceptable level through closure of actions within a defined timeframe, as described within the assessment, and that assessments are reviewed on, at least, an annual basis or in response to additional factors arising which necessitate revision of the assessment. Consideration is given to full time, part time, temporary, homeworkers and work taking place at a separate location to the College.

Employers must:

- ✓ Analyse work stations and assess and reduce risks. This includes the equipment, furniture, the work environment, the job being done and any special needs required by staff.
 - ✓ Provide adjustable chairs and suitable lighting
 - ✓ Plan work so there are breaks or changes of activity away from the computer. The breaks are not required to be a specific length of time but the general advice is to provide more frequent, shorter ones as opposed to less, longer ones. Ideally, the operator should be allowed a certain amount of discretion as to when to take breaks away from the screen
 - ✓ On request, provide eye tests or spectacles if special ones are required. Employees can ask their employer to pay for eye tests and there is also a requirement to test at regular intervals
 - ✓ Provide health, safety and training information specific to the safe use of working with VDUs and computers.
- 2.3 The relevant school/department manager is responsible for ensuring that staff attend appropriate training where a need is identified within the risk assessment.

- 2.4 The relevant school/department manager is responsible for ensuring that DSE equipment (desks, chairs, foot/wrist rests) are available within their work area and are suitable and sufficient for the purpose for which they are being used. They must also ensure that it is maintained and kept in safe working order
- 2.5 All members of staff are responsible for informing the risk assessment process, where necessary and/or as directed by their line manager.
- 2.6 All members of staff are responsible for contacting, in the first instance, the Occupational Health Advisor where he/she identifies symptoms which are suspected to be due to DSE work
- 2.7 The Occupational Health Advisor is responsible for providing support, and recording such information as defined within her professional role.
- 2.9 All members of staff are responsible for:
- Taking reasonable care for their own health & safety and for that of others who may be affected by their acts and omissions.
 - Use DSE equipment safely to minimise the risk of injury in accordance with any instruction or training received and follow any safe system of work that is in place.
 - Ensure that there are no obvious defects that may compromise their safety or the safety of others. Any defects must be reported immediately to the Line Manager and that piece of equipment taken out of service.
 - Report to their line manager any physical/health conditions (including pregnancy) that could affect their ability to comply with the requirements of this procedure or that they feel may be the result of using DSE.
 - Attend DSE training as identified in risk assessment.
- 2.12 The HSSusDev. Manager is responsible for providing support and guidance on all aspects of risk assessment and management as required.

3. Procedure

Not every person using DSE is necessarily a 'user/operator'. This distinction is important as the likelihood of experiencing musculoskeletal problems, visual fatigue and stress is related to the frequency, duration, intensity and spells of continuous use of DSE.

As a rule of thumb, if a person uses DSE more for continuous spells of two hours or more on most days, then they should be considered as 'users/operators'.

The assessment form is designed for simplicity but support and advice is available from the HSE department.

- 3.1 The relevant member(s) of staff complete the manual handling assessment using the '**blank DSE excel**' form which is available on the portal or, by request, from the HSE department.
- 3.2 All parts of the form are completed. The campus, location, name of assessor(s), date of assessment and date of next assessment (at least every 12 months) are recorded on the sheet:-

CAMPWS/CAMPUS:	LLEOLIAD/LOCATION:
DYDDIAD YR ASESIAID YMA/DATE OF THIS ASSESSMENT:	DYDDIAD YR ASESIAID NESAF/DATE OF NEXT ASSESSMENT:
ASESWR(WYR)/ASSESSOR(S):	

Double click in the far left cell of a row – you can then click your cursor anywhere on the row to complete the details.

- 3.3 The relevant cells on the excel sheet are formatted to allow the cell to expand when typing. You can insert additional rows if required.
- 3.4 Actions are recorded where relevant and responsibilities assigned for completion. Target dates are inserted and supporting documentation is referenced where available e.g. training certification, risk assessment date/type.
- 3.5 Completed forms are returned **electronically to the head of school/department** who reviews the assessment and ensures that identified actions are closed out.
- 3.7 An electronic copy of the completed assessment(s) is emailed to the HSSusDev Manager who shall copy the assessment into the Risk Register Master Document. The Master Document is posted on the portal for sharing and updated at least twice per annum.
- 3.8 **Medical DSE assessments may be carried out by the Occupational Nurse Advisor as necessary. For confidentiality, these are recorded on HSEOHIG 26.**

4. Guidance on safe DSE and workstation use

How Can I Help Myself when working with VDU?

The user/operator must take personal responsibility for ensuring their own health, safety and welfare.

A DSE Powerpoint is available on the portal to help you get to grips with correct use of DSE.

4.1 **Make sure you are comfortable**

- ✓ Adjust your chair and VDU to find the most comfortable position in which to work. As a rough guide, your forearms should be approximately horizontal and your eyes level with the top of the VDU.
- ✓ Make sure you have enough desk space for documents and other equipment
- ✓ Try different arrangements of keyboard, screen, documents and mouse to find what suits you best
- ✓ Arrange your desk and VDU to avoid glare or bright reflections on screen. This will be easier if neither you nor the screen is directly facing windows or bright sunlight. Adjust curtains and blinds to prevent unwanted light and glare
- ✓ Make sure there is sufficient space under your desk to move your legs freely and remove any obstacles that might prevent this
- ✓ Avoid excess pressure from the edge of your seat on the backs of your knees and legs. For smaller people, a footrest might be helpful

4.2 Adopt a good posture (please see Appendices 1 and 2)

A good working posture is one which can be sustained with the minimum of static muscular effort. In general, a varied working position is Better than a fixed working posture. However, a working position which is static and relaxed, is better than one which is static and tense. Your upper body is most comfortable when:

- ✓ Your upper and lower back is supported and your head is up.
- ✓ Your upper arms are relaxed
- ✓ Your hands and wrists are most comfortable when your forearm is nearly at a right angle to your upper arm and your wrist is in a straight line with your hand and forearm.
- ✓ Your knees are level with your hips.
- ✓ Your feet are flat on the floor.
- ✓ Your eye level is just above the top of the screen. Tilt your screen if necessary.
- ✓ The screen is directly in front of you, not at an angle.

Top tips:

- ✓ Try to type using both hands ... or better still, learn to touch type because this encourages the correct positioning of your hand and wrist so will not overstrain your forefingers
- ✓ If your wrists are bent for long periods of keyboarding, you are at risk of long term tendon and nerve disorders – use a wrist rest.
- ✓ Adopt a light touch when using the mouse to reduce stress on the wrist and hand – no need to grip tightly.

4.3 Eyes

According to medical evidence, computer use is not associated with damage to your eyes or eyesight; nor does it make existing defects worse. However, eye muscles that shift focus between your source document and a screen for a long period of time can tire.

The symptoms of eye strain include:

- ✓ Headaches
- ✓ Itching eyes
- ✓ Burning eyes
- ✓ Blurring
- ✓ Fatigue

If you wear contact lenses you may experience the sensation of dry eyes whilst using a computer. This is because you may blink less often than usual.

Top tip:

- ✓ Take a break - to prevent the onset of fatigue, you should have a break, or change of activity, for about 10 minutes after every uninterrupted 60 minutes of computer work. Short, frequent breaks are more satisfactory than occasional, longer breaks. If possible, breaks should be taken away from the screen. In between breaks, look into the distance and stretch occasionally.

4.4 Keying In

- ✓ Adjust your keyboard so that you have a comfortable keying in posture. A space in front of the keyboard often helps for resting the hands and wrists in between typing
- ✓ Try to keep wrists straight when typing. Type softly and don't overstretch your fingers

4.5 Using a Mouse

- ✓ Keep the mouse within easy reach so that it can be used with a straight wrist. Sit upright and close to the desk and move the keyboard out of the way if it is not being used.
- ✓ Support your forearm on the desk and don't grip the mouse too tightly
- ✓ Rest your fingers on the buttons and press them gently

4.6 Reading the Screen

- ✓ Adjust the brightness and contrast of the screen to suit the lighting conditions in the room and make sure the screen surface is clean
- ✓ In setting up software, choose text that is a suitable size for you to read and colours that are easy on the eye
- ✓ Individual characters on the screen should be sharply focused and should not flicker or move. If they do, your VDU may need servicing or adjusting

4.7 Laptop use: top tips

- ✓ Use a separate keyboard and mouse so the laptop can be put on a stand and the screen opened at eye level. Alternatively, use a docking station.
- ✓ Use your laptop on a stable base where there is support for your arms, and not on your lap.
- ✓ Take regular breaks.
- ✓ Adopt good sitting posture with lower back support and ensure other desk equipment is within reach.
- ✓ Get into good habits before the aching starts. Neck, shoulder and back problems build up over time.

5. Document Review

- 5.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

6. Related Documents

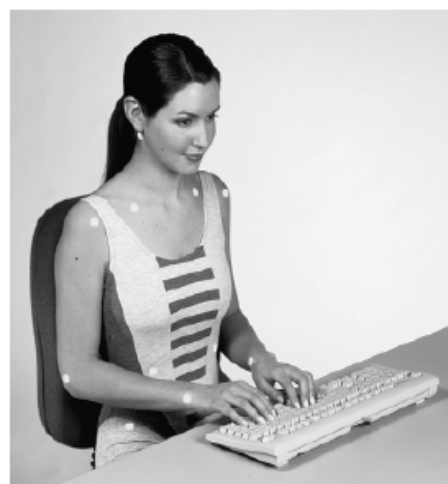
Health, Safety and Environmental Policy Statement	HSEPS
Structure and Responsibility	HSE005
HSE Risk Register Master Document (Electronic)	HSERRMD004
OHSAS18001	
DSE Excel Assessment sheet	
DSE Powerpoint	

Appendix 1

The secret of sitting correctly is to encourage the spine to lengthen into its neutral 'balanced' position.

The pelvis should tilt forwards allowing the spine to hold it's natural 'S' shape.

This means weight is evenly distributed across the intervertebral discs and there is a better balance in the supporting musculature.



unhealthy

Pelvis

Pelvis crest forced to lean back.

Spinal column

Strained spinal column, with compression of the lumbar discs.

Breathing

Restricted, only using upper part of chest.

Lower abdomen

Compressed. Poor digestion.

Circulation

Restricted.

Movement

Limited.

Muscles

Elongated in back, slack in abdomen. Imbalance can weaken lower back

Kyphotic spine
 angle of pelvis crest makes spine go into a C shape

healthy

Pelvis

Pelvis crest rotated forwards⁽¹⁾

Spinal column

Extended spinal column, with even weight distribution on lumbar discs and balanced musculature.

Breathing

Unrestricted, using diaphragm and upper part of chest.

Lower abdomen

Not compressed. Improved digestion.

Circulation

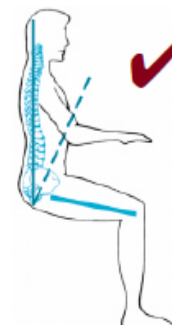
Unrestricted.

Movement

Greater freedom of movement.

Muscles

Less strain on back, abdomen toned. Balance maintained, lower back kept strong.

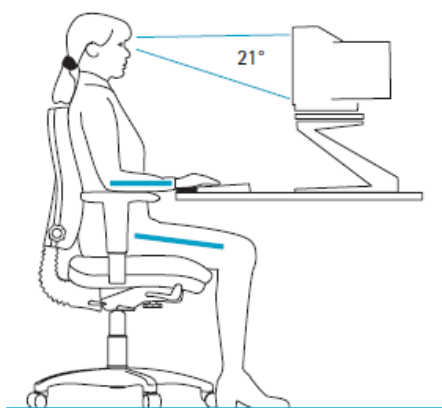


Lordotic spine
 angle of pelvis crest makes spine go into an S shape

(1) The use of a forward tilting seat is not advisable for certain medical conditions, if there is any pain do not persist, use the seat in a level position or where comfortable. Initially vary posture regularly to allow muscle groups to adjust to the new position.

Appendix 2

the ideal posture



when using a computer

Posture

Lengthen spine into its natural balanced position, keeping head held over the shoulders and in line with the buttocks.

Chair

Tilt seat forwards or level according to comfort or medical requirement.⁽¹⁾ Adjust seat height so hip joint is slightly higher than knee joint.

Desk height

Middle row of the keyboard should be level with the elbow, (forearms parallel to the floor).

If the desk is too low raise with desk feet, if too high use a foot stand and raise seat height.

Place mouse in easy reach zone by keyboard.

Screen

Should be at arms length and on eye level in front of the user (visual angle 0-21°).

Position at 90° to any light source avoiding glare or reflections. Use copy holder so input data is within field of view.

Telephone

If used for more than 40% of the working day consider a headset to free hands for more efficient working.

Space

Create sufficient room to work especially if multitasking. Place equipment on stands or arms if necessary.

Movement

Prevent static loading. Rock, change position to reduce fatigue. Place one foot in front of the other, alternate position during the day. Take breaks and vary tasks.

(1) The use of a forward tilting seat is not advisable for certain medical conditions, if there is any pain do not persist, use the seat in a level position or where comfortable. Initially vary posture regularly to allow muscle groups to adjust to the new position.



when writing

Posture

Lengthen spine into its natural balanced position, keeping head held over the shoulders and in line with the buttocks.

Chair

Tilt seat forwards or level according to comfort or medical requirement⁽¹⁾. Adjust seat height so hip joint is slightly higher than knee joint.

Desk height

Elbow should be just below the desk top. If the desk is too low raise with desk feet, if too high use a foot stand and raise seat height.

Writing slope

Raise work using a slope. This reduces viewing distance, lessens eye strain and limits the body leaning forwards. Hold the head upright to maintain a balanced spinal posture.

If taking notes from a book keep it within the field of view using a book attachment above the slope.

Telephone

If used for more than 40% of the working day consider a headset to free hands for more efficient working.

Space

Create sufficient room to work especially if multitasking. Place equipment on stands or arms if necessary.

Movement

Prevent static loading. Rock, change position to reduce fatigue. Place one foot in front of the other, alternate position during the day. Take breaks and vary tasks.

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 8: MANUAL HANDLING

1. Introduction

Bridgend College will, so far as is reasonably practicable, avoid the need for its employees to undertake any manual handling operation at work that involves the risk of injury. Where elimination, automation or mechanisation of the manual handling operations is not reasonably practicable, a suitable and sufficient written risk assessment of all such manual handling operations must be undertaken. This procedure applies to all departments/areas of the College and forms an integral part of the risk management process.

Manual handling disorders are part of a group of musculoskeletal disorders (MSDs). These are problems affecting the muscles, tendons, ligaments, nerves or other soft tissues and joints. The back, neck and upper limbs are particularly at risk. There are many conditions including low back pain and carpal tunnel syndrome for example. Acute symptoms may arise as a result of an identifiable event such as unaccustomed and/or intense physical exertion resulting in pain and loss or restriction of movement, for example sprains and strains. Alternatively, there may be a more gradual onset of symptoms which may persist and gradually worsen.

The risk assessment process, together with early reporting of symptoms will help ensure early intervention to ensure an individual gets the right support This policy supports the legal duties placed on the organisation by the following: -

2. Responsibilities

- 2.1 The Principal has overall responsibility for the management of health & safety within the College. This includes the responsibility for the provision of resources and implementation of all measures needed to comply with the relevant manual handling legislation, associated legislation and relevant guidance.
- 2.2 The relevant school/department manager has overall responsibility for ensuring that manual handling risk assessments are completed and forwarded to the HSE department for inclusion on the Risk Register Master Document. Further, the responsibility extends to ensuring that identified risks are reduced to an acceptable level through closure of actions within a defined timeframe, as described within the assessment, and that assessments are reviewed on, at least, an annual basis or in response to additional factors arising which necessitate revision of the assessment.
- 2.3 The relevant school/department manager is responsible for ensuring that staff attend appropriate training where a need is identified within the risk assessment.
- 2.4 The relevant school/department manager is responsible for ensuring that manual handling equipment is available within their work area and is suitable and sufficient for the purpose for which it is being used. They must also ensure that it is maintained and kept in safe working order
- 2.5 All members of staff are responsible for informing the risk assessment process, where necessary, to ensure competency to perform their duties.
- 2.6 All members of staff are responsible for contacting, in the first instance, the Occupational Health Advisor where he/she identifies symptoms which are suspected to be due to manual handling.
- 2.7 The Occupational Health Advisor is responsible for providing support, and recording such information as defined within her professional role. In addition:-

- Pre-employment screening identifies staff that may be at risk from manual handling activities whilst ensuring that the Disability Discrimination Act 1997 is complied with.
 - Any employee with a health condition referred to the Occupational Health Advisor, either as a self-referral or via their Line/Departmental Manager is reviewed prior to attending a manual handling training course.
 - Advice to the Line/Departmental Manager regarding an employee's suitability to undertake manual handling activities is provided. *This aspect of support and advice is a shared responsibility with the HSE department.*
- 2.8 All members of staff are responsible for reporting, to the HSE department, accidents and incidents related to manual handling.
- 2.9 The Health, Safety and Environment Officer is responsible for recording and investigating accidents and incidents in accordance with HSE006 01, First Aid, Accidents, Incidents and Investigation.
- 2.10 All members of staff are responsible for complying with the Manual Handling Operations Regulations 1992 (as amended). They must: -
- Take reasonable care for their own health & safety and for that of others who may be affected by their acts and omissions.
 - Use appropriate manual handling equipment to minimise the risk of injury in accordance with any instruction or training received and follow any safe system of work that is in place.
 - Visually inspect any handling aid prior to use to ensure that there are no obvious defects that may compromise their safety or the safety of others. Any defects must be reported immediately to the Line Manager and that piece of equipment taken out of service.
 - Report to their line manager any physical/health conditions (including pregnancy) that could affect their ability to comply with the requirements of this procedure or that they feel may be the result of a manual handling activity.
 - Attend manual handling training as identified in risk assessment.
 - Advise their Line Manager if they identify additional training needs or do not feel competent/safe in carrying out their duties.
- 2.11 The Estates Manager will ensure that, so far as is reasonably practicable, that:-
- Maintenance schedules are available for all mechanically operated lifting and handling equipment.
 - All mechanically operated lifting and handling equipment is inspected and tested appropriately by qualified engineers as often as required by the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER).
 - N.B Test certification is held electronically in the HSE department and is freely available.
- 2.12 The HSSusDev. Manager is responsible for providing support and guidance on all aspects of risk assessment and management as required.

3. Procedure

- 3.1 The relevant member(s) of staff complete the manual handling assessment using the '**blank manual handling xls**' form which is available on the portal or, by request, from the HSE department.

- 3.2 Each manual handling task identified must be accompanied by a separate assessment although similar tasks may be grouped together and presented as a single assessment.
- 3.3 All parts of the form are completed. The campus, location, name of assessor(s), date of assessment and date of next assessment (at least every 12 months) are recorded on the sheet:-

CAMPWS/CAMPUS:	LLEOLIAD/LOCATION:
DYDDIAD YR ASESIAD YMA/DATE OF THIS ASSESSMENT:	DYDDIAD YR ASESIAD NESAF/DATE OF
NEXT ASSESSMENT:	
ASESWR(WYR)/ASSESSOR(S):	

Double click in the far left cell of a row – you can then click your cursor anywhere on the row to complete the details.

- 3.4 The relevant cells on the excel sheet are formatted to allow the cell to expand when typing. You can insert additional rows if required.
- 3.5 Actions are recorded where relevant and responsibilities assigned for completion. Target dates are inserted and supporting documentation is referenced where available e.g. training certification, equipment test certificates, equipment maintenance log books, handbooks, safe working practice documents. **A safe working practice template with support notes and, an example safe working practice are available on the portal.**
- 3.6 The head of school/department ensures that identified actions are closed out.
- 3.7 An electronic copy of the completed assessment(s) is emailed to the HSSusDev Manager who shall copy the assessment into the Risk Register Master Document. The Master Document is posted on the portal for sharing and updated at least twice per annum.

4. Document Review

- 4.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

5. Related Documents

Health, Safety and Environmental Policy Statement	HSEPS
Structure and Responsibility	HSE005
First Aid, Accidents, Incidents and Investigation.	HSE006 01
HSE Risk Register Master Document (Electronic)	HSERRMD004
Safe Working Practice Template	(coded by school/department)
OHSAS18001	
Corporate Health Standard	

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 9: WESTON HOUSE

1. Introduction

Weston House is an exemplar facility offering 24 hour care and curriculum provision for young people aged 16-25 with disabilities and/or additional learning needs. Its main aims are to promote independence, further social and educational opportunities and equip the young person with the appropriate skills necessary for adulthood.

Weston House gives young people who, because of their disability, are not able to access courses at their local College to undertake a full-time, mainstream course at Bridgend College.

ASSESSMENTS FOR WESTON HOUSE ARE MAINTAINED BY THE MANAGER AND REMAIN CONFIDENTIAL.

2. Responsibilities

- 2.1 The Principal has overall responsibility for the management of health & safety within the College. This includes the responsibility for the provision of resources and implementation of all measures needed to comply with the relevant legislation and guidance.
- 2.2 The Assistant Principal (Finance and Resources) has delegated responsibility for Health and Safety management across Bridgend College.
- 2.3 The Director of HR has delegated responsibility for the management of Weston House.
- 2.4 The Health, Safety and Sustainable Development (HSSusDev) Manager is responsible for supporting and informing the College on all health and safety matters and ensuring that all documentation within the HSE System is correctly authorised, maintained, version controlled and issued.
- 2.5 The Weston House Manager is responsible for implementing all requirements laid down within this policy
- 2.7 The Director for HR and the Weston House Manager are responsible for ensuring that this procedure is strictly adhered to.

3. Procedure

- 3.1 The Manager of Weston House ensures that risk assessments are carried out using the excel sheet HSERRMDWE004 on an ongoing basis according to occupancy. Risk assessments may be completed by assigned individuals.
- 3.2 The assessments shall remain confidential at all times, but available to the HSE department for audit purposes.

Note: This risk assessment process is separate to the general risk assessments for Weston House.

4. Document Review

- 4.1 This document will be reviewed on, at least, an annual basis or in response to significant changes within the system, or factors impacting upon the system.

5. Related Documents

HSE002	Documentation and Document Control
HSE003	Committee Meetings, Consultation, Participation and Communication
HSERLOR004	Register of Legal and Other Requirements
HSERRMDWE004	HSE Risk Register Master Document (Weston House)
HSE006 02	Fire Safety Arrangements
HSE010	Training, Awareness and Competence
HSE013	Audit
HSEPS	HSE Policy Statement

BRIDGEND COLLEGE

INTEGRATED HEALTH, SAFETY AND ENVIRONMENTAL MANAGEMENT SYSTEM

SUB-SECTION 10: LONE WORKING

1. Introduction

Bridgend College recognises that there may be an increased risk associated with some types of lone working. The purpose of this procedure is to ensure that a sensible approach is taken to effectively manage lone working.

2. Definitions

Lone workers are those who work by themselves without close or direct supervision. Some common examples which can be found within the College are:

- a. A person working on their own in a workshop or laboratory
- b. Home workers and Contractors working alone
- c. People working outside normal hours on their own
- d. People working at an outreach location or at another employer's workplace on their own
- e. Mobile workers who work away from the College on their own

3. Notes

The following circumstances are examples of authorised or unavoidable lone working.

- a. Caretakers or other staff opening or closing premises or out of hours call-out to the college
- b. Travelling for business purposes and vetting and monitoring work placements
- c. Contractors not employed by the college
- d. Work authorised by heads of school or area managers
- e. Occupational health visits

4. Responsibilities

- 4.1 The Principal has overall responsibility for ensuring that lone working is effectively managed. The responsibility for procedural control and audit is delegated to the Assistant Principal, Finance and Resources, and further delegated to the Health, Safety and Sustainable Development (HSSusDev) Manager.
- 4.2 Relevant Heads of Department/Area Managers are responsible for implementing this procedure within their area of responsibility.
- 4.3 The Health, Safety and Sustainable Development (HSSusDev) Manager is responsible for providing support and guidance on a needs basis and, ensuring that lone working is assessed via internal audit procedure.
- 4.4 All members of staff are responsible for:
 - ✓ cooperating fully in implementing this procedure and reporting any problems encountered
 - ✓ complying with the risk assessment recommendations and any working procedures laid down by their line manager
 - ✓ taking reasonable care of themselves and others affected by their work
 - ✓ reporting to their Line Manager or Occupational Health any personal conditions which may affect their capability to undertake certain activities whilst lone working
 - ✓ reporting and documenting any accidents, incidents, injuries or ill health
- 4.5 The Facilities Manager is responsible for managing lone working arrangements with contractors.

5. Procedure

5.1 In the first instance, avoiding lone working wherever possible is always the best option.

5.2 Please use the table below to answer some key questions:

Key risk assessment questions (not exhaustive):

	Question	Consideration
1	Does the workplace present a special risk	Due to environment, location, unfamiliarity, remoteness etc.
2	Does the activity present a special risk	Equipment, substances, manual handling, etc. High risk activities must not be undertaken by lone workers.
3	If equipment is used, can it be handled safely by one person	Is the person familiar with and competent to use the equipment for example
4	Are there adequate welfare facilities	Toilet, washing, eating etc.
5	Is there access to first aid and/or emergency services and a means of communication	First aid kits, emergency contact numbers (including work numbers), vehicle break-down cover, mobile phone
6	Is a lone worker more at risk due to gender or inexperience	Maturity, familiarity with procedures, knowledge and expertise, especially young or new workers
7	Has the individual had sufficient information, instruction and training to undertake the work alone	Is the employee competent
8	Is the person medically fit	Is an individual pregnant or suffering ill health
9	What arrangements are in place to provide adequate supervision	Periodic visits, phone-in/check-out, permit to work
10	Are prohibitions made clear	What activities are prohibited, e.g. work at height
11	Is there a particular risk of violence	Is an area known/prone to increased risk

5.3 Control measures

5.3.1 Before any lone working may take place, the Line Manager, in conjunction with the member(s) of staff concerned, will conduct an assessment of the risks attendant in the proposed work. To address the additional risks (if any) identified in relation to a lone working situation, the line manager shall introduce measures to eliminate or minimise the risks. **It is the responsibility of the line manager to ensure that significant risks and controls are recorded and reviewed on, at least, an annual basis or following a significant incident. This, like any part of the HSE system will be subject to audit.**

Such additional control measures **may** include:

- (i) authorisation for staff to work alone / out of hours;
- (ii) personal safety monitoring system via, for example, security phone services
- (iii) provision of communication equipment;
- (iv) periodic check-in arrangements or visits by other staff;
- (v) information and training.
- (vi) other devices designed to raise the alarm operated manually or automatically
- (vii) the provision of information, Instruction and training in dealing with aggression.

5.3.2 Staff working overtime (e.g. technicians working after 5pm) must report this to the estates team and state their location and expected time of departure and again if the departure time is expected to be exceeded; they should also inform the estates team on actual departure.

5.3.3 The caretaker should not lock up until satisfied that no member of staff is unaccounted for.

5.3.4 Assessors and other peripatetic staff

Assessors/vetting staff routinely work on their own visiting candidates/businesses in a wide range of locations often outside of normal college hours. Other members of staff may also have occasion to visit venues or meetings away from their normal place of work. The college accepts that a duty of care is owed to assessors and others whilst on college business.

This section sets out the controls, procedures and guidance that are to be adhered to by assessors and where applicable by other members of staff. Line managers are to ensure that these requirements are followed.

- ✓ All assessors are to visit the college at intervals agreed by their line manager (unless daily attendance is usual practice), and present their planned programme of work.
- ✓ Assessments of candidates are **NOT** to be undertaken in client's homes.
- ✓ Any variations to the planned program of work should be updated as soon as is practical. Last minute changes must be communicated to the line manager either by phone or by text/email and, prior to the appointment.
- ✓ Where appointments are undertaken before or after office hours it is essential that both line manager and family member are aware of the anticipated time of return to work/home.
- ✓ Contact details of the nominated family member are to be passed to line manager who will maintain a register of contact names and numbers.
- ✓ Where appointments are in locations other than in places of work and where other people are not present, then they should be held in a public place.
- ✓ Should an incident occur where an assessor feels threatened or uncomfortable by the candidate, client or any other person the interview shall be terminated immediately and the assessor shall leave. All incidents must be reported to the line manager. All incidents involving threatening or intimidating behaviour will be reported without exception to the police and other relevant authorities.

5.3.5 Workshop Technicians

Technicians may need to undertake work in the workshop outside of teaching hours (including no-term time, half-term etc.). In order to minimise the risk of an adverse event the following controls, instruction and guidance is to be adhered to.

- ✓ All activities must be assessed and prior permission of the head of school must be obtained
- ✓ Estates staff must be informed of the staff members location and duration of activity
- ✓ Planned 'checks' (either in person or by phone) should be carried out at agreed intervals

5.3.6 Cardiff Arts Academy

The city centre location coupled with information from the local police raises the lone worker risk rating.

- ✓ After 6:00 p.m. access to the foyer area takes places only authorisation of the caretaker.

5.3.7 Equine and animal care

Animal welfare demands that individuals may need to attend the college outside of normal operating hours to care for animals at the school for equine and the animal care centre.

- ✓ All activities must be assessed
- ✓ Prior permission of the head of school must be obtained
- ✓ Estates staff must be informed of the staff members location and duration of activity
- ✓ Planned 'checks' (either in person or by phone) should be carried out at agreed intervals

5.4 Personal Safety Tips for Lone Workers

- ✓ Ensure that you have emergency contact numbers in your phone at all times. Can you assign a quick dial for the emergency services? Do you have a good signal?
- ✓ Please report identified risk to your line manager so that action can be taken.
- ✓ Where feel that your personal safety is or could be compromised, you must not try to negotiate this situation but remove yourself immediately and evaluate later.
- ✓ During working hours you must carry your ID badge and show ID if requested.
- ✓ Meeting or working at a private address is strictly prohibited other than in exceptional circumstances with the agreement of the Senior Manager.
- ✓ Park in areas which are well lit and have your vehicle keys to hand.
- ✓ After work, ensure that your spouse, partner, guardian or other person knows what time to expect you home.

5.5 Safe travelling tips

- ✓ Plan your route – avoid having to stop to check directions
- ✓ Ensure that you have enough fuel for your return journey
- ✓ Keep bags, cases and valuables out of sight and park in well lit areas if possible
- ✓ Reverse into parking bays for an easy and direct exit in an emergency
- ✓ If you suspect you are being followed, drive around a block or roundabout a few times. If you are still suspicious, drive to a busy place or a police station. Try to note the number of the vehicle you believe is following you and report the matter to the police or your line manager.
- ✓ If someone approaches you when you have stopped, lock the vehicle doors. Open your window a fraction to allow conversation. Only offer to help if you are sure the situation is genuine. If you have a mobile phone offer assistance whilst remaining in your car. Once your vehicle is in motion, unlock the car doors

6. Document Review

- 6.1 This document is reviewed in accordance with procedure HSE002, Documentation and Document Control.

7. Related Documents

HSE001	HSE Manual and Policy
HSEPS	HSE Policy Statement
HSE004	Risk Assessments and Legal and Other Requirements
HSE005	Structure and Responsibility

OHSAS18001
Corporate Health Standard