

Specialists in **Place-Making**

*Supporting artists of quality in participatory, place-led, practice*

**Health & Safety**

**Purpose:** To provide a clear statement of intent regarding Health & Safety law, regulation and industry best practice.

Roles & Responsibilities are clarified and guidance regarding process also given.

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| --- | --- | --- | --- |
| **Owner** | | Director of Policy | |
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# Interwoven General Statement of Intent

In pursuance of Section 2(3) of the Health & Safety Act 1974, this policy, together with any appendices is intended to assist the Interwoven Board, individual artists, contractors and volunteers with the effective implementation of health and safety in their operations of their artistic work.

Failure to comply with the Health & Safety Act 1974 could result in enforcement action being instigated by the Health and Safety Executive (HSE).

The Interwoven Board is committed to the on-going process of providing a working environment that will ensure, so far as is reasonably practicable, the health, safety and welfare of all its individual artists, contractors and volunteers, service users/customers and other persons who may be affected by any work undertaken on behalf of the organisation.

In maintaining its stated commitment the Interwoven Board will positivity work towards the creation of a health and safety culture within the organisation by;

* Actively seeking the cooperation and involvement of all levels of the collective in the effective implementation of this policy.
* Ensuring that sufficient resources are made available to meet the organisation’s statutory responsibilities in respect of health, safety and fire safety.
* Providing suitable and sufficient health and safety related information, instruction and training.
* Ensuring that health, safety and fire plans are developed and maintained in respect of all of the organisation’s services.
* Ensuring that all services develop and implement risk assessment programmes.

Failure by any individual artists, contractors and volunteers, to comply with the terms if this safety policy will be regarded as a breach of safety procedures and could result in action being taken by the organisation, up to and including, removal of funding and/or membership.

Full support to the aims and principles of this policy and its appendices, is given by the Interwoven Board who will be kept fully appraised of all current health and safety issues.



**AJ Walker**

**Director of Policy** 2 **Health & Safety** **Legal Framework**

2.1 This policy respects and complies with the following Acts of Law and Statutory Instruments (*but is not limited to*)

* Health & Safety at Work Act 1974
* Corporate Manslaughter & Corporate Homicide Act 2007
* Regulation of Investigatory Powers Act 2000
* Environment & Safety Information Act 1998
* Health & Safety (Offences) Act 2008
* Human Rights Act 1998
* Protection from Harassment Act 1997
* Confined Spaces Regulations 1997
* Control of Asbestos Regulations 2012
* Control of Major Accident Hazards Regulations 2015
* Control of Noise at Work Regulations 2005
* Control of Substances Hazards to Health (COSHH) 2003 & 2004
* Electricity at Work Regulations 1989
* Display Screen Equipment Regulations 1992
* Health & Safety First Aid Regulations 1981
* Health & Safety Sharp Instruments in Healthcare Regulations 2013
* Health & Safety Training for Employment Regulations 1990
* Management of Health & Safety and Fire Precautions (Workplace) 2003
* Lifting Operations & Lifting Equipment Regulations 1998
* Personal Protective Equipment at Work Regulations 1992
* Work at Height Regulations 2005 & 2007
* Safety Representatives and Safety Committee Regulations 1977

**3** **Organisational Responsibilities**

3.1 Whilst the Interwoven Board accepts full responsibility for ownership of this policy, ***all***employees, agency workers, contractors and volunteers have a personal responsibility to ensure a proactive approach to health and safety matters that impact on the organisation.

3.2 The Director of Policy is the lead Director with specific responsibility for health, safety and welfare and is the competent person for health and safety matters for whom reference should be made in the event of any difficulties in the implementation of the health and safety policy and procedures.

3.3 In addition to these roles, others within the organisation also have responsibility for implementing and checking health and safety arrangements, these are as follows;

*Board of Trustees*

3.4 The Interwoven Board carry individual and collective responsibility for decisions made at Board level that may affect the health, safety and welfare of all personnel exposed to the activities of the organisation.

3.5 In recognition of the legal duties imposed upon them, the Interwoven Board will:

* understand the main requirements of the Health and Safety at Work etc Act 1974
* ensure that all health and safety aspects and implications are given due consideration in all executive decisions
* ensure adequate resources are available to enable legal and moral obligations to be met
* set, and ensure effective implementation of the organisation’s Health and Safety policy
* develop health and safety strategies and objectives
* Adopt best practice in health and safety management, in line with standards set by external bodies such as:-
  + National Health Service Litigation Authority, Risk Management Standards (NHSLA)
  + Care Quality Commission Standards (CQC)
  + Health and Safety Executive, Regulations, Approved Codes of Practice and Guidance.
  + Department of Work & Pensions (DWP)
* ensure that the Director of Finance and Corporate Services manages health and safety within the organisation and all premises are periodically audited to ensure that high standards of health and safety performance are being maintained and identify areas where improvements are to be made
* undertake an annual review of the Health and Safety policy to ensure it meets the requirements of current legislation and reflects the activities of the organisation
* seek the advice of the appointed Health and Safety Advisor when health and safety guidance or assistance is required.

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### *Interwoven Board*

3.6 In recognition of the legal duties imposed upon the Interwoven Board, they will:

* ensure adequate resources are available to enable legal and moral obligations to be met
* ensure that all new members receive adequate induction training as soon as is reasonably practicable after joining the organisation
* ensure all employees, agency workers, contractors and/or volunteers receive suitable information, instruction, training and where appropriate, supervision to ensure their competence for the work they are to undertake
* ensure that all plant, equipment and materials are safe and suitable for the work for which they are to be used
* ensure that suitable and sufficient risk assessments of the activities of the organisation are undertaken to identify and implement effective control measures required to eliminate, reduce or control the risk of harm occurring to employees, the environment or others who may be affected by the activity
* ensure that the results of the risk assessments are effectively communicated throughout the organisation and to others who may be affected by the activity
* provide, maintain and instruct employees, agency workers, contractors and/or volunteers in the use of personal protective equipment as identified by risk assessment
* in respect of hazardous substances, ensure that appropriate information is available to enable suitable assessment of the process to be conducted
* ensure that all injuries, diseases and dangerous occurrences involving the organisation’s employees are investigated and, where appropriate, reported as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
* maintain effective communication routes throughout the organisation to ensure employees are aware of the organisation Health and Safety policy and other health, safety and environmental matters as they arise
* take immediate action in respect of:
* prohibition and improvement notices
* matters of complaint by HSE or EA Inspectors
* concerns by employees or others, of health, safety or environmental standards
* accidents, incidents and near misses involving employees, agency workers, contractors and/or volunteers of the organisation
* ensure that the management of health, safety and the environment within the organisation is audited annually by the Director of Finance and Corporate Services. This will ensure that high standards of health, safety and environmental performance are being maintained and identify areas where improvements are to be made
* ensure that environmental factors are included in business decisions and that systems of work and practices give due consideration to their potential environment impact and
* continually review the Health and Safety policy to ensure it meets the requirements of current legislation and reflects the activities of the organisation.

#### *Employees, Agency Workers, Contractors and/or Volunteers*

3.7 All employees, agency workers, contractors and/or volunteers are expected to co-operate with any Health and Safety representatives, directed by the organisation and to recognise and accept their responsibilities under the policy.

3.8 In particular they will:

* comply with the Health and Safety policy, failing to do so will be treated seriously and may result in disciplinary action
* adhere to their duty to take all reasonable steps to preserve and protect the health and safety of themselves and all other people affected by the operations of the organisation, and not to interfere with anything provided to safeguard their health and safety
* report any accident/incident/near miss involving themselves or a customer/service user in-line with the incident reporting policies and procedure

4 **Plan, Do, Check, Act**

4.1 Health and Safety Executive (HSE) are the government enforcement agency for Health & Safety Law in England and Wales.

4.2 The HSE produce the Guidance document HSG 65, which is expected to form the foundation of every company’s health & safety system. This document has recently been reviewed and indicates a move away from the previous approach known as POPMAR (Policy, Organising, Planning, Measuring performance, Auditing and Review) model of to a ‘Plan, Do, Check, Act’ approach of managing Health & Safety.

4.3 The move towards Plan, Do, Check, Act achieves a balance between the systems and behavioural aspects of management. It also treats health and safety management as an integral part of good management generally, rather than as a stand-alone system.

4.4 As part of the planning process the policy has been written in line with the guidance as set out.

**5 Risk Assessment**

5.1 All activities shall be assessed as required under the: **Management of Health and Safety at Work Regulations 1999.**

5.2 The purpose of the risk assessment is to identify hazards, and evaluate the risk arising from them in order to establish the necessary preventive measures to bring health and safety standards up to the minimum legal requirement.

5.3 In addition to general building use and operational risk assessments, there should also be additional risk assessments in place for the following (as appropriate);

* New or expectant mothers
* Young persons (*Under 19 years old or an apprentice until they have completed their apprenticeship*)
* People with a disability who may need adjustment in the workplace or additional consideration in the event of a fire or emergency situation
* Lone Workers
* Ligature points (*Health & Social Care Services only*)
* Workers whose first language *is not* English

5.4 It is important to involve the worker(s) who require a specific risk assessment in the creation of it to ensure all aspects are covered.

5.5 Risk assessments will be reviewed annually to ensure they are accurate and up to date.

5.6 The organisation uses a “Risk Assessment Framework” to help provide consistency with regard to identifying hazards and ensuring risk is controlled effectively.

5.7 The Risk Assessment Framework\* is as follows;

* Part 1 – Hazard Checklist
* Part 2 – Risk Assessment
* Part 3 – Risk Control

*\*The standards templates for all three parts can be found at appendix 1*

5.8 The frequency for monitoring controls as indicated in Part 3 – Risk Control will directly feed into the workplace inspection checklists.

**6 Accidents, Incidents and Near Miss Reporting**

6.1 Every member of staff involved or witness to an incident, accident or near miss is responsible and accountable for ensuring it is reported to the Director of Policy using the Incident form (*appendix 2*). Accident records are compiled and stored by the Director of Policy.

6.2 The Director of Policy is responsible for reporting cases of accident and disease to the relevant enforcing authority as set out in the: **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995**

6.3 The organisation accepts that accident investigation is a valuable tool in the prevention of future incidents.

6.4 In the event of an accident resulting in injury a RIDDOR report will be drawn up by the Director of Policy detailing:

* the circumstances of the accident including photographs and diagrams wherever possible
* the nature and severity of the injury sustained
* the identity of any eyewitnesses
* the time, date and location of the incident
* the date of the report and
* details of first aid, medical advice or emergency support provided

6.5 All eyewitness accounts will be collected as near to the time of the accident as is reasonably practicable. Any person required to give an official statement has the right to have a lawyer or trade union representative present at expense of the organisation.

6.6 The completed RIDDOR report will be submitted and reviewed during the Health and Safety Committee meetings, in an attempt to discover why the accident occurred and what action should be taken to avoid a recurrence of the problem.

6.7 Any RIDDOR reports if deemed necessary by the Board will be submitted to the organisation legal advisers who will advise on liability, proceedings and quantum of damages. The lawyers will then submit the report to the organisation insurance risk advisors for assessment.

## 7 Personal Protective Equipment (PPE)

7.1 It is the policy of the organisation to comply with the law as set out in the: **Personal Protective Equipment at Work Regulations 1992**.

* all employees, agency workers, contractors, volunteers and service users/customers who may be exposed to a risk to their health and safety while at work or within organisational premises will be provided with suitable, properly fitting and effective personal protective equipment
* all personal protective equipment provided by the organisation will be properly assessed prior to its provision
* all personal protective equipment provided by the organisation will be maintained in good working order by the user
* all workers provided with personal protective equipment by the organisation will receive comprehensive training and information on the use, maintenance and purpose of the equipment
* the organisation will endeavour to ensure that all personal protective equipment provided is used and used properly by its employees, agency workers, contractors, volunteers and service users/customers
* employees, agency workers, contractors, volunteers and service users/customers must use all personal protective equipment provided to them in accordance with the training and instruction given to them regarding its use
* employees, agency workers, contractors, volunteers and service users/customers who have been provided with personal protective equipment must immediately report any loss of or obvious defect in any equipment provided

## 8 Manual Handling Operations

8.1 It is the policy of the organisation to comply with the law as set out in the**: Manual Handling Operations Regulations 1992.**

8.2 Manual handling should be avoided whenever reasonably practical, it is important that any work that involves the need to move awkward or heavy loads is assessed.

8.3 Where it is not possible to avoid manual handling operations, a risk assessment of the operation will be made taking into account the task, the load, the working environment and the capability of the individual concerned. An assessment will be reviewed if there is any reason to suspect that it is no longer valid. All possible steps will be taken to reduce the risk of injury to the lowest level possible.

8.4 Any employee who has manual handling tasks as part of their job role will be given training and included in the organisations health surveillance programme.

**9 Control of Substances Hazardous to Health (COSHH)**

9.1 It is the policy of the organisation to comply with the law as set out in the: **Control of Substances Hazardous to Health Regulations 2002.**

9.2 A risk assessment will be conducted of all work involving exposure to hazardous substances. The assessment will be based on manufacturers and suppliers health and safety guidance and our own knowledge of the work process.

9.3 The organisation will provide guidance on how to safely control the use of hazardous substances and reduce the risks that may potentially cause harm.

9.4 All employees, agency workers, contractors, volunteers and service users/customers who will come into contact with hazardous substances will receive comprehensive and adequate training and information on the health and safety issues relating to that type of work.

9.5 Assessments will be reviewed annually, and whenever there is a substantial modification to the work process and if there is any reason to suspect that the assessment may no longer be valid.

**20 Record Keeping**

20.1 Records shall be kept of:

* assessments issued for specific contracts
* information, instructions and training provided
* employees trained
* equipment maintenance and testing (minimum 5 years)
* monitoring data (minimum 40 years)
* health surveillance records (minimum 40 years)
* details of accidents, incidents and near misses (3 years)

**21 Training**

21.1 General Health & Safety training is mandatory for all new members with additional refreshers on an annual basis.

21.2 Additional Health & Safety training such as COSHH, Manual Handling, Infection Control, Fire Warden, Food Safety etc… will be arranged as appropriate for each job role within the organisation.

**22 Misconduct**

**The first priority is to protect human life**

22.1 Any employees, agency workers, contractors, volunteers who do not adhere to this policy or any Health & Safety procedure/instructions within their specific workplace will subject themselves to disciplinary actions

22.2 Any customer/service user who does not adhere by instructions given to them regarding their health & safety whilst using the organisation’s services will be removed from the provision in order to protect the health and safety of our staff and other customers/service users.

**23 Policy Review**

23.1 This policy will be reviewed every 2 years unless there is a change of law, regulation or contractual obligation and maybe therefore subject to change.

**Hazard Checklist (Part 1) : Location**

*Appendix 1*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Site** |  | | **Responsible Manager** |  | **Assessor** |  | **Date** |  |
| **Description of the Location**  *e.g. office/bedrooms/kitchens etc…* | | **Description of the Hazard** | | | **Number of people affected and status designation** *e.g. staff, client, visitor, other health professional etc* … | | **Risk Assessment Recommended? Yes / No** | |
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**Risk Assessment Form (Part 2)**

**Likelihood of hazard occurring**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Minor**  (1st Aid) | **Moderate**  (Lost Time) | **Serious**  (RIDDOR Reportable) | **Major**  (RIDDOR Notifiable) | **Catastrophe**  (Fatalities) |
| **Extremely Unlikely** | 1 | 2 | 3 | 4 | 5 |
| **Unlikely** | 2 | 4 | 6 | 8 | 10 |
| **Likely** | 3 | 6 | 9 | 12 | 15 |
| **Extremely Likely** | 4 | 8 | 12 | 16 | 20 |
| **Almost Certain** | 5 | 10 | 15 | 20 | 25 |

*Complete this for every hazard which has been identified as requiring a risk assessment from the* ***Hazard Checklist*** *(Part 1)*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Site** |  | | **Responsible Manager** |  | | | **Assessor** | |  | | **Date** | |  |
|  | | | | | | | | | | | | | |
| **Location/ Equipment/ Substances/Work Activity** | | **Hazard, hazardous event and expected consequence** | | | **People affected** | **Assessment of Risk**  **=** | | | | | | **Are risk controls required?**  **Yes / No** | |
| **Likelihood Level**  **X** | | **Severity**  **(Consequence) Level** | | **Risk Level** | |
|  | |  | | |  |  | |  | |  | |  | |
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**Severity if it does happen** 

**Risk Control Form (Part 3)**

**Severity if it does happen** 

**Likelihood of hazard occurring**

*Complete this for every Risk assessed which has been identified as requiring a risk control from the* ***Risk Assessment*** *(Part 2)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Minor**  (1st Aid) | **Moderate**  (Lost Time) | **Serious**  (RIDDOR Reportable) | **Major**  (RIDDOR Notifiable) | **Catastrophe**  (Fatalities) |
| **Extremely Unlikely** | 1 | 2 | 3 | 4 | 5 |
| **Unlikely** | 2 | 4 | 6 | 8 | 10 |
| **Likely** | 3 | 6 | 9 | 12 | 15 |
| **Extremely Likely** | 4 | 8 | 12 | 16 | 20 |
| **Almost Certain** | 5 | 10 | 15 | 20 | 25 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Site** |  | | **Responsible Manager** | |  | | **Assessor** | |  | | **Date** | |  |
|  | | | | | | | | | | | | | |
| **Location/ Equipment/ Substances / Activity**  **and**  **Risk Level**  *(from assessment)* | | **Existing Risk Controls** | | **Further risk controls required** | | **Residual Risk**  **=** | | | | | | **Description of monitoring required** *(inc. Frequency)* | |
| **Probable**  **Likelihood Level**  **X** | | **Potential**  **Severity (consequence) Level** | | **New**  **Risk Level** | |
|  | |  | |  | |  | |  | |  | |  | |
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*Appendix 2*

**ACCIDENT / INCIDENT REPORT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Person’s Initials:** |  | **Location:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Please indicate:*** | Service User | Employee | Visitor | Volunteer | Other |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date:** |  | **Time:** |  |

|  |  |
| --- | --- |
| **Briefly**  **Describe incident/accident:** |  |

|  |  |
| --- | --- |
| **Outcome:** |  |

|  |  |
| --- | --- |
| **Action taken to prevent a recurrence:** |  |

**RISK RATING SEVERITY TO THE PERSON *(Please indicate):***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Score** | **1** | **2** | **3** | **4** | **5** |
| **Severity** | **Near Miss** | **Minor** | **Moderate** | **Major** | **Catastrophic** |
|  | *No harm caused to the person or property* | *Required minor intervention* | *Required professional intervention or potential adverse effects* | *Required professional intervention, further actions or caused actual adverse effects* | *Leading to death, irreversible health effects or serious sexual assault* |

**RISK RATING LIKLIHOOD OF RECURRANCE *(Please indicate)*:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Score** | **1** | **2** | **3** | **4** | **5** |
| **Likelihood** | **Rare** | **Unlikely** | **Possible** | **Likely** | **Almost Certain** |
|  | *This will probably*  *never happen/recur* | *Do not expect it*  *to happen/recur but it is possible it may* | *Might happen or recur occasionally* | *Will probably*  *happen/recur, but it is not a persisting issue/ circumstances* | *Will undoubtedly*  *happen/recur,*  *possibly frequently* |

|  |  |  |  |
| --- | --- | --- | --- |
| **Report completed by:** |  | **Date:** |  |

|  |  |
| --- | --- |
| **Witnessed by *(if applicable)*:** |  |