

Health and Safety Handbook

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1. Introduction

Herefordshire and Worcestershire CCG has statutory obligations under the Management of Health and Safety at Work Regulations to ensure that any significant risks arising from its undertakings are assessed and either removed or reduced as far as is reasonably practicable. The CCG recognises that risk may take a variety of forms: harm/injury to people, loss/damage to property etc.

This handbook is intended to provide information to support and assist managers and staff in meeting their obligations regarding health and safety. It also offers guidance on the CCG's overall health and safety risk assessment process. It outlines the arrangements for identifying, evaluating and reducing health and safety risks via the completion of suitable and sufficient risk assessments and should be read in conjunction with the **CCG's Health and Safety Policy**.

2. Scope and Purpose

These procedures apply to all CCG staff and those who act in an official capacity on the CCG's behalf and who may be exposed to the risk of harm, loss or damage arising out of the course of the CCG's activities. This includes:

- a) Employees (permanent and temporary);
- b) Governing Body members;
- c) Individuals who are working for the CCG; for example, within Commissioning Support Services;
- d) Contractors, agency staff.

The CCG is committed to ensuring people's health and safety. It aims to do this by:

- a) Providing a safe working environment which, as far as is reasonably practicable, is free from the risk of harm, loss or damage;
- b) Assessing the hazards that may cause significant risks to occur;
- c) Identifying the measures needed to remove or reduce these risks;
- d) Providing guidance to management and staff on implementing these measures;
- e) Providing a system of recording and reviewing risk assessments and organisational risk information.

3. Equality Statement and Due Regard

Herefordshire and Worcestershire CCG aims to design and implement policy documents that meet the diverse needs of our services, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account current UK legislative requirements, including the Equality Act 2010 and the Human Rights Act 1998, and promotes equal opportunities for all. This document has been designed to ensure that no-one receives less favourable treatment due to their personal circumstances, i.e. the protected characteristics of their age, disability, sex, gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity. Appropriate consideration has also been given to gender identity, socio-economic status, immigration status and the principles of the Human Rights Act.

In carrying out its functions, Herefordshire and Worcestershire CCG must have due regard to the Public Sector Equality Duty (PSED). This applies to all the activities for which Herefordshire and Worcestershire CCG is responsible, including policy development, review and implementation.

4. Implementation and Dissemination of the Document

Policy and procedure documents are available via the CCG's website and intranet. The principles embedded within the procedures will be included in Induction training, as part of mandatory health and safety training and specific risk assessment training sessions.

It is the responsibility of line managers to ensure that members of staff are made aware of the procedures and associated policies.

Previous versions of the procedures will be archived in accordance with CCG policy. All staff are strongly discouraged from printing off or photocopying these procedures. The CCG's website version is the definitive version.

5. Monitoring and Review

Incidents will be reported on a regular basis to the Joint Commissioning Committee. The investigation of these incidents will be used to identify the adequacy of existing controls and the effectiveness of the procedures. Monitoring of the procedures will also be undertaken via the analysis of completed risk assessments and the review of risk register information.

This Handbook will be subject to review every 3 years or in line with changes to legislation, technology or good practice. The review of procedures will also be based on the prioritisation of risk within the CCG and as a consequence of any serious staff incidents.

6. References

- Health and Safety at Work etc. Act 1974;
- Management of Health and Safety at Work Regulations 1999;
- Workplace (Health, Safety and Welfare) Regulations 1992;
- The Health and Safety (First Aid) Regulations 1981;
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR);
- Provision and Use of Work Equipment Regulations 1998 (PUWER);
- The Health and Safety (Display Screen Equipment) Regulations 1992;
- The Electricity at Work Regulations 1989;
- Maintaining portable electric equipment in low-risk environments INDG236 (REV2);
- The Regulatory Reform (Fire Safety) Order 2005;
- Control of Substances Hazardous to Health Regulations 2002 (COSHH);
- Manual Handling Operations Regulations 1992 (as amended);
- The Control of Noise at Work Regulations 2005;
- The Social Security (Claims and Payments) Regulations 1979;
- The Data Protection Act 1998;
- HSG 38 Lighting at Work.

7. Health and Safety Procedures

7.1 Display Screen Equipment (DSE)

Line managers are responsible for ensuring a suitable and sufficient assessment of each workstation is carried out by their staff, taking into account all aspects of the working environment. The assessment will consider lighting, space, desk, layout, seating, welfare and safety etc.

The first stage of the risk assessment requires any employee who uses DSE as part of their work, to complete the **DSE Workstation Assessment Checklist** which can be found in **Appendix 1**. This should be completed at induction for new employees and all employees should review their self-assessment annually, or when there are significant changes to their workstation.

DSE Workstation Assessments should be repeated/reviewed where there is:

- a change in the display screen worker population;
- a change in the individual's capabilities;
- a major change to the software used;
- a major change to the display screen equipment or furniture, including remedial work;
- a change in workstation location;
- a substantial increase in the amount of time required to be spent using display screen equipment;
- modification to the lighting;
- if requested by the user.

The DSE workstation assessment evaluates the existing control measures and determines whether further action is needed to improve the DSE and/or workstation. All necessary steps will be taken to remedy any risks highlighted as a result of the risk assessment. Further assistance and guidance on workstation assessments can be requested from the CCG's Health and Safety Lead. Where necessary this may involve referring the user to Occupational Health or GP for medical assessment.

7.1.1 Flexible and Agile Working

A workstation DSE assessment should also be undertaken for employees working flexibly at several DSE workstations or at home. If the flexible worker has a regularly used workstation a DSE Workstation Assessment Checklist should be completed for this workstation. If they work at home as part of their flexible working arrangements, a DSE Workstation Assessment

Checklist must be completed for this particular workstation also. Managers in charge of touchdown points/hot desks are responsible for ensuring all workstations comply.

7.1.2 Health and Safety Guidelines for Use of Laptop Computers

Due to the compact design of laptop computers and the smaller size of the screen and keyboard, users may experience discomfort if certain precautions are not taken for usage. The CCG recommends the following be considered by users and adopted as working practice.

- Leave enough working room in front of the laptop to rest your wrists and forearms whilst carrying out work;
- Ensure you adopt an upright sitting position and do not crouch over the laptop computer;
- Use a mouse which is separate to the laptop wherever possible;
- Always adjust the angle of the computer screen in order to reduce or eliminate reflections;
- If any discomfort is experienced when using a laptop, stop work and report to your line manager;
- Whilst working in the office, use a laptop docking station when available;
- Ensure that whilst using the laptop that it is at the correct height in order to prevent discomfort from having to look up or down at the screen;
- Take regular breaks away from the laptop;
- Ensure that the laptop is on a solid, flat surface;
- Never overload the laptop carrying case with additional folders etc, to prevent injury through awkward lifting and stress on the shoulders, neck and spine;
- Distribute the load in your laptop carrying case as evenly as possible;
- When carrying your laptop in a public area be aware of your own personal security and the environment you are in;
- Do not use the laptop in your car whilst stationary: the limited space and sitting position could lead to discomfort.

7.1.3 Eye and Eyesight Tests

Regular users who require corrective lenses to use the computer are entitled to reimbursement for eye and eyesight tests. The user's optician will determine the frequency of these tests. The user should complete a claim form, obtain their line manager's authorisation and take the form with them to the eyesight test for the optician to sign. The **Authorisation and Reimbursement Claim Form for DSE Users** can be found in **Appendix 2**. The user is required to meet the cost of the test but can claim this back by attaching the claim form and the eyesight test receipt to an expenses claim form for submission to SBS for payment via Payroll. The CCG will contribute towards the costs involved where the change of lenses or new glasses are required to correct vision defects at the viewing distances or distances used specifically for DSE work concerned. The CCG is only obliged to pay for basic frames and lenses and will contribute up to a maximum of £40.00. The DSE user may, if they wish, contribute to the cost of purchasing more costly spectacles.

7.1.4 Training

The Display Screen Equipment information and training eLearning programme provided through ESR has been developed to provide an informative approach to the risks associated with Display Screen work and the knowledge of how ergonomic principles can be adopted to reduce some of the risks encountered. The programme looks at potential ill health effects from working with Display Screen Equipment and how good posture and simple effective solutions can be applied. The programme, which should be completed annually, also gives an overview of the Display Screen Equipment Regulations.

7.2 Fire Safety

7.2.1 Fire Risk Assessment

The CCG will ensure that fire risk assessments (FRAs) are conducted on all properties occupied by it for the purposes of its business. Risk assessments will be reviewed annually or if a process changes or temporary works are due and the significant findings are to be recorded.

7.2.2 Fire Safety Training

It is the responsibility of line managers to ensure that all staff (including temporary and agency staff) are given appropriate information about, and instruction in, the fire precautions and evacuation procedures to be taken or observed within the premises. Information and instruction will be given during induction at the start of the person's employment in the CCG, and whenever there is a change in the fire risk. Staff are required to undertake Fire Safety Awareness eLearning annually as part of their mandatory training.

7.2.3 Fire Wardens

The Health and Safety Lead is responsible for ensuring sufficient Fire Wardens have been nominated and trained to oversee evacuations for their respective areas at all times of the working day. The role of a Fire warden is to:

- act as a focal point for fire safety issues within their areas of responsibility, including:

- checking fire doors and emergency exits, ensuring that they open and close fully and that they are not obstructed;
- ensuring that all fire-fighting equipment (such as fire extinguishers) is present, serviced and not tampered with;
- looking out for incorrect use of electrical cables and equipment;
- ensuring that flammables, combustibles and waste materials are managed correctly;
- ensuring that all record keeping is up to date;
- assist in the fire response in their areas, including:
 - raising the alarm quickly;
 - the correct selection and use of fire extinguishers;
 - conducting a sweep of their areas, including meeting rooms, toilets, kitchens etc. to check that everyone has evacuated the area and is accounted for during an incident/emergency;
 - assisting mobility, hearing or sight impaired people during an evacuation;
 - closing fire doors to contain the fire;
 - conducting a roll call at the assembly point;
- liaise with other fire wardens.

7.2.4 Fire Drills

A fire drill is intended to ensure, by means of training and rehearsal, that in the event of fire:

- The people who may be in danger act in a calm and orderly manner;
- Where necessary those designated carry out their allocated duties to ensure the safety of all concerned;
- The means of escape are used in accordance with a pre-determined and practised plan;
- If evacuation of the building becomes necessary, staff should be aware of what to do.

Fire drills will be held at least once a year. Where there are alternative means of escape the drill should be based on the assumption that one or more of the escape routes cannot be used because of a fire. During these drills a member of staff who is told of the supposed fire should operate the fire alarm and, thereafter, the fire routine should be rehearsed as circumstances allow.

Normally advance warning should **not** be given of the fire drill. However, you can individually warn anyone who may need to know in advance. Every opportunity should be taken to learn lessons from the drill and to reinforce staff training where gaps are identified. It is good practice to appoint a small number of people to observe the drills and highlight areas of concern. It is important that all managers are aware of the procedures, as employees will naturally look towards them in an emergency.

7.2.5 Fire Detection and Warning Systems

The CCG through liaison with the landlord (where appropriate) will ensure that there is a suitable and sufficient Fire Detection and Warning system. The CCG will also ensure that all equipment and systems are tested and maintained in accordance with the relevant legislation and standards.

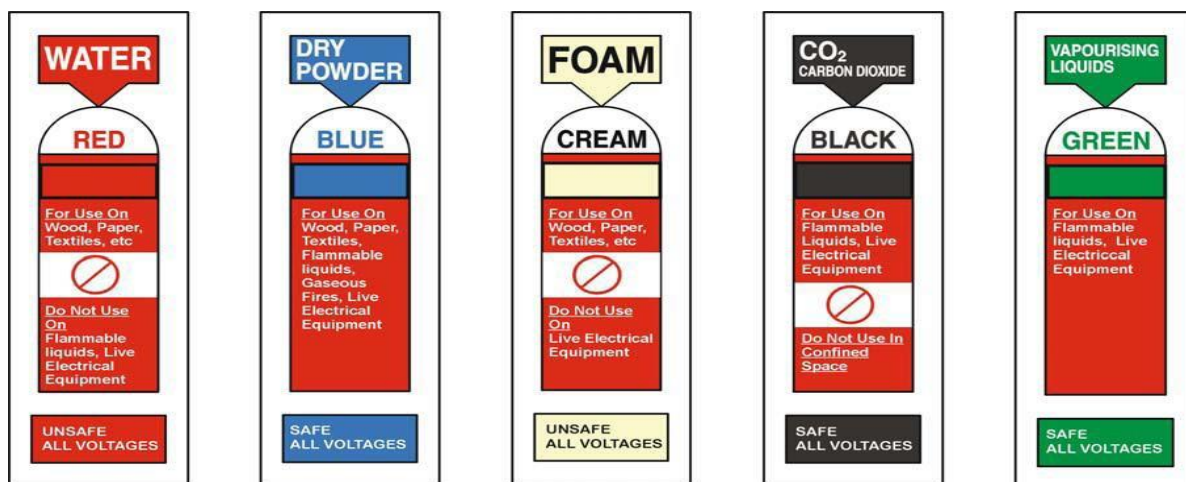
7.2.6 Fire Fighting Equipment

In offices the emphasis must be towards the safety of staff and visitors rather than fighting the fire. Extinguishers should primarily be used to protect life and facilitate safe escape. They should only be used, by trained staff, if they can be used safely and without risk of trapping the user.

Fire extinguishers should normally be located in conspicuous positions on escape routes, preferably next to exit doors, and should not become a trip hazard. Wherever possible, fire-fighting equipment should be grouped to form fire points. These must be clearly visible and conspicuously indicated so that fire points can be readily identified.

The CCG will ensure a qualified contractor undertakes annual fire extinguisher servicing and maintenance and the records for this are to be held on site in the fire safety log.

In accordance with the latest British Standard for the colour coding of portable extinguishers (BS EN 3) new extinguisher bodies must be **red**, and subject to national regulations, an area up to five per cent of the body may be colour coded to assist identification of the extinguishing material it contains. Graphic symbols are used on the extinguisher body to assist identification of the type of fire it can be used on.



7.2.7 Means of Escape

Means of escape enable a person to move away from a fire via structural parts of a building (corridors/staircases) to reach a place of safety.

It is essential that escape routes and the means provided to ensure they are used safely, are managed and maintained to ensure they remain usable and available at all times when the premises are occupied. All corridors and stairways that form part of designated escape routes are to be kept clear and hazard free at all times. Items that may be a source of fuel or pose an ignition risk should never be located on any corridor or stairway that will be used as an escape route. In addition, all final exit doors are to be kept clear at all times and regular checks are required to ensure that these doors open freely without any obstructions.

7.2.8 Internal Fire Doors

Where practicable it is good practice for all doors in the escape route to open in the direction of escape. This is particularly important for doors in high-risk areas, where the doors are at the base of stairs or where more than 50 persons are expected to evacuate.

All such doors must be able to be opened from the direction of travel without the use of a key or pass card (where security systems are in place, provision must be made for linking to the fire alarms to override locks when alarms are activated).

Smoke/Fire doors must be self-closing, fitted with intumescent strips and cold smoke seals. Fire resistant doors fitted to cupboards and service risers that open onto escape routes must be kept locked, be fitted with intumescent strips and cold smoke seals.

7.2.9 External Final Exit Doors

These are doors designed to be part of the means of escape for use to reach an external place of safety. They must meet the following criteria:

- Open in the direction of travel;
- Be free from obstruction or trip hazard. Where steps or slopes are in place these must be minimised and if necessary highlighted;
- Doors that are also used for normal access and egress must be capable of being opened / unlocked or released by a single turn handle or device like a thumb turn;
- Doors that are used only for emergency evacuation must be capable of being opened with a single action device such as a push bar or pad.

7.2.10 Fire Notices and Signs

Signs must be used, where necessary, to help people identify escape routes and fire - fighting equipment. For a sign to comply with the Health and Safety (Safety Signs and Signals) Regulations 1996 and BS 5499-4 and BS 5499-5 it must be in pictogram form. The pictogram can be supplemented by text if it is considered necessary to make the sign more easily understood, but you must not have a safety sign that uses only text.

The CCG will ensure that there are sufficient appropriate fire notices and signs within their premises and will liaise with the landlord where appropriate. The purpose of fire notices is to give concise instructions of the actions to be taken on discovering a fire and hearing the alarm.

The purpose of fire signs is to direct people towards fire exits, or to provide specific information or warning about particular equipment, doors, rooms or procedures. They should be recognisable, readable and informative, as they convey essential information to regular and infrequent users of the premises and the fire and rescue service.

7.2.11 Fire Prevention

The CCG places great emphasis on Fire Prevention in order to minimise the risk of a fire occurring. In order to achieve this all employees and visitors are to ensure:

- All waste material is kept in suitable containers before it is removed from the premises;
- No combustible material is stored against electrical equipment or heaters;
- Excess combustible materials and stock are stored in a dedicated storage area, storeroom or cupboard that is fire resistant. Do not store excess stock in escape routes or areas where staff or visitors would normally have access (Under no circumstances are electrical and gas service cupboards and rooms to be used as storage areas for combustible materials).
- Skips and bins if used are a minimum of 6m away from any part of the premises.
- No unauthorised electrical equipment is used within the CCG premises;
- Electric plug sockets are not over-loaded and only authorised extension cables are used. The use of 3-way adaptors is prohibited.

The CCG will also ensure, by liaising with the landlord (where appropriate), that all Mechanical and Electrical equipment within the CCG's area of responsibility is maintained, serviced and tested in accordance with relevant legislation, guidance and standards including:

- Fixed Wire Testing and Portable Appliance Testing;
- Lifts.

7.2.12 Electrical Risks

Electrical accidents can have very serious consequences. To help prevent them, remember these three basic rules:

- Always check electrical equipment visually before use and report faulty or damaged equipment; do not attempt to use it;
- Do not try to repair faulty equipment; Leave it to a competent person;
- Never use electrical equipment in damp surroundings unless you know that it is suitable for that purpose.

The CCG will purchase electrical appliances and equipment from reputable suppliers and manufactured to an appropriate standard. The equipment should be used correctly and not abused, there should be no unauthorised repairs and the equipment should be periodically subject to a Portable Appliance Test. The CCG will, through a service level agreement, ensure that all portable appliance equipment is tested in accordance with current guidelines. Nearly 75% of electrical faults are caused by faulty leads or plugs. Long extension leads are to be avoided wherever possible. If their use is unavoidable, ensure that the connector is manufactured to BS EN 60309. No unauthorised electrical equipment is permitted on the CCG's premises without authorisation.

7.2.12.1 Portable and Transportable Electrical Equipment Guidance

This applies to equipment which is not part of a fixed installation but is, or is intended to be, connected to a fixed installation, by means of a flexible cable and either a plug and socket or a spur box, or similar means. It includes equipment that is either hand held or hand operated while connected to the supply or is intended/likely to be moved while connected

to the supply.

Though there are no universally accepted definition of what is meant by portable or transportable electrical equipment. The definition given above indicates the types of equipment covered by this guidance note, the supply to the equipment being at a voltage which can potentially result in a risk of fatal electrical shock to any person, i.e. when it is more than 50V ac or 120V dc.

Extension leads, plugs and sockets, (i.e. 'four way' gangs/trailing leads) which supply portable equipment are classed as portable equipment since they operate in the same environment and are subject to the same use as the equipment they serve.

Note: The word portable is used subsequently to mean both portable and transportable.

The person using the equipment should be encouraged to look critically at the electrical equipment they use and, after a minimum of basic training, visually check for signs that the equipment is not in good condition, for example:

- there is damage (apart from light scuffing) to the cable sheath;
- the plug is damaged, for example the casing is cracked or the pins are bent;
- there are inadequate joints, including taped joints in the cable;
- the outer sheath of the cable is not effectively secured where it enters the plug;
- obvious evidence would be if the coloured insulation of the internal cable cores was showing;
- The equipment has been subjected to conditions for which it is not suitable, e.g. it is wet or excessively contaminated;
- there is damage to the external casing of the equipment or there are some loose parts or screws;
- there is evidence of overheating (burn marks or discoloration).

These checks also apply to extension leads and associated plugs and sockets. **All employees are expected to undertake regular visual checks of their workstations and after a workstation move.**

Checks should be undertaken by the user each time the equipment is used and during its use. Any faults should be reported to the line manager and the equipment taken out of use immediately. Line Managers should take effective steps to ensure that the equipment is not used again until repaired by a person competent to carry out the task, (e.g. the defective equipment could be labelled as 'faulty' and its associated plug removed).

Persons carrying out **testing** of portable electrical equipment should be trained for the work they are to undertake. It is the employer's duty to ensure that they are competent for the work they are to carry out.

An inventory should be kept of all electrical equipment kept on site. This inventory is normally kept by the contractor carrying out the testing.

7.2.13 Heating

Individual heating appliances require particular care if they are to be used safely, particularly those which are kept for emergency use during power cut or as a supplementary during severe weather. The greatest risks arise from lack of maintenance and misuse.

Portable heaters are not to be used within the building without authorisation from the building manager i.e. failure of heating.

Convect or fan heaters should be preferred to radiant heaters because they present a lower risk of fire and injury. If authorised the following rules are to be observed:

- All heaters must be kept clear of combustible materials and in a position where they do not cause an obstruction. Their use must be continuously risk assessed.
- The use of portable fuel burning heaters, including bottled gas (LPG) are prohibited within the office environment.

Building heating systems should only be used in accordance with manufacturer's instructions and will be serviced annually by a competent appointed contractor.

7.2.14 Smoking/vaping

Smoking and the use of e-cigarettes/vaping is prohibited within all CCG premises and CCG vehicles for all staff and visitors.

7.2.15 Hot Work

The CCG requires that where any hot works are to be carried out within its areas of responsibility, then a permit to work is to be in place. The permit to work is to be controlled by either the building manager or the landlord. Hot work is defined as burning, welding, brazing, soldering, grinding or cutting work producing sparks, during activities such as plumbing and flat roof work. Such works are to be carried out by suitably-qualified contractors.

7.2.16 Arson

Recent fire statistics in the UK indicate that over 2100 serious deliberately set fires occur every week resulting in injuries and fatalities. All premises can be targeted deliberately or just because they offer easy access. Be aware of other deliberately set fires in the locality, which can indicate an increased risk to your premises. Be suspicious of and record any small 'accidental' fires on the premises and investigate them fully.

7.2.17 Help for People with Disabilities/Mobility Problems

When planning evacuation procedures and assessing the adequacy of fire precautions, consideration must be given to the requirements of people with special needs. Some common forms of disability that you may need to take account of include:

- Mobility impairment, which can limit speed of evacuation;
- Hearing impairment, which can limit the response to an alarm;
- Visual impairment, which can limit the ability to escape;

- Learning difficulties, which can affect the response to an alarm.

Where people with special needs (employees and visitors) work in or use the premises, their needs should, so far as is practicable, be discussed with them. These will often be modest and may require only changes or modifications to existing procedures. However, in some cases, more individual arrangements involving the development of 'personal emergency evacuation plans' (PEEPs) may need to be considered

Please refer to **Appendix 3** for the **PEEP template** and an example of a completed PEEP. Further advice and guidance can be sourced from the Health and Safety Lead.

7.3 Slips, Trips and Falls

These can be defined as:

Slip: To slide accidentally causing the person to lose their balance. This is either corrected or causes a person to fall.

Trip: To stumble accidentally over an obstacle, causing the person to lose their balance. This is either corrected or causes a person to fall.

Fall: An event which results in the person coming to rest on the ground or another surface lower than the person, whether or not an injury is sustained.

The Health and Safety Executive advise that the main causes of slip and trip accidents in healthcare are:

- Slippery/wet surfaces – caused by water, fluid substances, or dusty contamination e.g. talcum powder;
- Obstructions, both temporary and permanent;
- Uneven surfaces and changes of level, such as unmarked ramps.

Bad housekeeping is therefore a significant causal factor in the number of slip, trip and fall incidents. The CCG is committed to maintaining safety within its premises by:

- Ensuring there are suitable and clear walkways through the workplace;
- Keeping walkways clutter free, ensuring there are no trailing wires or obstructions;
- Reviewing the way that staff work and the areas in which they operate – are the floors tidy, is there enough storage space?
- Educating employees about the need to reduce tripping hazards by maintaining good housekeeping levels in their own area;
- Clearing up any spillages immediately as per local procedures;
- Ensuring that waste materials are properly stored and removed on a regular basis;
- Ensuring that defective furniture or equipment is reported and replaced or repaired immediately.

7.4 Manual Handling

Poor lifting and carrying technique contributes to manual handling related injuries of staff every year. Although there are some members of staff who lift objects on a daily basis as part of their employment, nearly all staff will lift some objects during their working week. Good technique is vital in preventing injury.

If the object to be lifted is large, awkward or heavy then an assessment should be undertaken. The first part of any assessment should consider whether the object needs to be lifted at all. Engineering methods e.g. lifting appliances, or trolleys etc., should be considered next, if this is not possible a method for manual lifting with the assistance of other staff can be used. Many people use poor techniques and have escaped injury due to their general fitness and age. However there will be a risk of eventual injury as these conditions change. A serious back injury could cause substantial pain and be extremely debilitating.

Some tips on efficient lifting:

- is it necessary to lift the load? If not – don't!
- assess the lift and decide if help is needed;
- obtain a firm grip on the load (use gloves if necessary);
- bend at the knees not from the waist;
- use your legs not your back to thrust upwards (the leg muscles were designed for power and strength);
- keep the load near to your body;
- do not twist your spine when lifting or carrying loads.

Staff are required to complete mandatory Moving and Handling eLearning every 3 years.

7.5 Lone Working

Lone or remote workers are defined as: Those staff who work by themselves without close or direct supervision, for example one person working in a building, staff working separately from others or outside normal working hours, peripatetic staff who work away from their base.

Line Managers are expected to identify any lone workers within their team, assess the risks to their safety and develop suitable controls to reduce the likelihood of harm occurring. The objective of this risk assessment approach is to ensure that managers develop local safe systems of work for those staff who work alone. This should include a system of supervision, support, contact, training and security arrangements.

All lone worker incidents must be recorded and reported in line with the CCG's Incident Reporting Procedure (see Section 7.13). Lone worker issues should be discussed within team meetings and where necessary escalated to the CCG's risk register.

As far as possible, managers should ensure lone workers have no medical condition that could put them at an increased risk. Pre-employment health screening should address this as part of the recruitment process.

All staff must be alert to the risks of lone working. They must take reasonable care of themselves and not expose themselves to unnecessary risk of harm. They should work with their line manager in completing any risk assessment and inform their line manager of any concerns that might require the risk assessment to be reviewed.

Staff should consider the following guidance in relation to lone or remote working:

- Ensure that a colleague or line manager knows you are working alone and arrange to contact them when you are finished;
- Check that you have access to a working telephone (mobile or landline);
- Have emergency contacts on speed dial;
- Ensure that colleagues or family know how to contact you and what to do in case of an emergency;
- Arrange for someone to ring you at a pre-determined time to check you are alright;
- Make use of any security measures such as locking access doors where possible;
- Ensure you are familiar with the fire evacuation arrangements of any building and who to contact in case of an incident;
- Be aware of individual safe lifting limits in line with manual handling training, policy and personal abilities;
- Record any concerns you have regarding your personal safety and ensure these are communicated to your line manager.

For more detailed guidance please refer to the CCG's **Lone Working Policy**.

7.6 Children and Young Persons

In line with the Management of Health and Safety at Work Regulations, the CCG is required to assess the workplace risks that may affect the health, safety and welfare of any young person. This risk assessment will outline the existing control measures designed to safeguard that person as well as detail what further action needs to be taken to remove or reduce these risks from occurring. **In the case of young people under the minimum school leaving age, their parents (or those having the parental responsibility) will be informed of the key findings of the risk assessment and the control measures taken.**

Definitions:

Child: Anyone who has not yet reached the minimum school leaving age of 16.

Young person: Anyone under the age of 18.

Managers must undertake a risk assessment of the expected work area before the young person arrives and implement any additional controls to protect that young person. The assessment should take into account that young people need to be protected from any risks which are a consequence of their lack of experience, knowledge or the fact that they may not have fully matured. In particular it should look at:

- How the workplace is laid out, including housekeeping and welfare facilities;
- What type of work equipment will be used and how it will be handled;
- How the work is organised within the team;
- The need to provide health and safety instruction;
- The nature of any physical, biological or chemical agents they may be exposed to;
- The availability of personal protective equipment for the young person to use.

If a significant risk cannot be removed or reduced by implementing additional control measures, then the young person must not be allowed to do the work.

Managers must ensure the findings from any assessment are:

- understood by staff who will be working with and/or supervising the young person;
- communicated to the school/college, or provided to the young person so that the legal guardian can be informed;
- explained to the young person when they arrive;
- recorded on the young person's file.

The manager or supervisor of the young person will ensure that they receive a suitable induction on arrival and are given instruction on the following areas:

- Workplace hazards and potential risks of harm
- Control measures in place to protect their health and safety
- Welfare facilities, first aid arrangements and fire evacuation procedures

For further guidance please refer to the CCG's **Work Experience Policy**.

7.7 Expectant and New Mothers

The CCG accepts its responsibilities as set out within the Management of Health and Safety at Work Regulations to protect new, expectant and breastfeeding mothers. The CCG is required to assess the workplace risks that may affect the health, safety and welfare of any pregnant staff or new mothers. This risk assessment will outline the existing control measures designed to safeguard the staff member and her unborn child as well as detail what further action needs to be taken to remove or reduce the risks from occurring.

Managers are required to ensure the findings from any assessment are understood by the staff member and are communicated to her colleagues where any work changes impact on the team. They should maintain a copy of the risk assessment on file for that staff member.

Further information and guidance can be found in the CCG's **Maternity, Paternity, Adoption and Parental Leave Policy**.

7.8 Personal Security

The NHS, in accordance with the Secretary of State Directions (April 2004), has developed the following legally based definitions:

- **Physical Assault** - “The intentional application of force to the persons of another, without legal justification, resulting in physical injury or personal discomfort”. Physical assaults include being shoved, pushed, punched, kicked, head- butted, etc.
- **Non-Physical Assault** – “The use of inappropriate words or behaviour causing distress and/or constituting harassment”.

The following are examples of non-physical assault:

- Offensive language, verbal abuse and swearing, which prevents staff from doing their job or makes them feel unsafe;
- Loud and intrusive conversation;
- Negative, malicious or stereotypical comments;
- Invasion of personal space;
- Brandishing of objects or weapons;
- Offensive gestures;
- Threats of violence;
- Stalking;
- Spitting;
- Unreasonable behaviour and non-cooperation.

When considering their personal safety, staff should be aware of the following situations where they may be at risk of harm:

- Lone working when other staff are not present (see section 7.5 of this Handbook and the CCG’s **Lone Working Policy**);
- Working with service users who have a history of aggressive behaviour against staff or who have the potential to display aggressive behaviour;
- Individuals who are intoxicated or under the influence of drugs.

Staff should consider the following guidance for defusing aggressive behaviour:

- Imagine yourself in the other person’s place and conduct yourself accordingly;
- Be polite at all times, talk calmly and avoid sudden movements;
- Check that your posture is not intimidating, stay at eye level if possible;
- Answer questions accurately;
- Do not challenge or accuse anyone who is angry or abusive;
- Avoid rising to any personal criticism, offer to resume the conversation at a later date/time, or ask if they would like to speak to a colleague;
- If any face to face conversation or telephone call is getting out of your control, withdraw politely and seek assistance.

7.9 Premises Security

Senior managers are responsible for ensuring adequate security arrangements are in place for the buildings where staff are employed. Site security is an issue for all staff and a general level of awareness is essential. Any untoward findings should be reported immediately to the manager responsible for the site.

All members of staff should ensure that their work areas are secured at the end of the working day (where applicable,) and that keys are held in a secure place at all times. The loss of any key(s) must be reported to the Corporate team as a risk. It is important to avoid delay so as to ensure premises can be secured.

Members of staff, who require access through any door which is controlled via digital door locks or proximity access systems, will be issued with the appropriate code numbers or personal fobs/cards to ensure the security of the area is maintained at the highest level. Code numbers must not be issued to unauthorised personnel.

Access codes should be changed whenever it is felt that the code may have become compromised or following the dismissal of a member of staff.

Security passes are personal to the user and must not be passed to unauthorised personnel or loaned to other members of staff. Lost or mislaid passes, fobs or ID Cards must be reported to the Corporate Team immediately.

Members of staff should be aware of anyone trying to 'tailgate' – i.e. gain access to a controlled access area by closely following them as they enter. If the person is not recognised as a member of staff, or authorised visitor, he/she should be asked to:

- Wait at the door or in a designated waiting area;
- Sign the Visitors Book;
- Give details of the person with whom they have an appointment;
- Await the arrival of an identified member of staff to escort him/her into the controlled access area;
- At the end of the appointment/meeting, the visitor should be escorted out of the controlled access area and asked to sign out of the Visitors Book.

7.10 Mobile Phones

7.10.1 Personal mobile phones

Personal mobile phones can be used for work purposes where this has been agreed between the member of staff and their line manager. In all other cases, the use of personal mobile phones at work for private use should be restricted to breaks and emergency situations. In the event that a member of staff needs to be contacted via their personal mobile during working hours, the phone should be switched to silent and/or diverted to the messaging service. The CCG will not accept responsibility or liability for the loss or damage to personal mobile phones belonging to staff.

7.10.2 Use of Mobiles for Work Purposes

Staff should not use a mobile phone in any public area where the use is prohibited. In line with Department of Health guidance, it is acceptable to use mobile phones in healthcare premises, where there is no risk of interference.

When using a mobile phone, staff need to consider the following principles of safety, sensitivity, confidentiality and appropriateness:

- It should be possible to make the call without affecting the safety of yourself and others around you;
- Patient confidentiality must always be respected; not all conversations are appropriate in a public place;
- Personal calls should be made only during breaks or in exceptional circumstances;
- If the call is being made in a public place, consider the content and language used during the conversation.

In some cases, staff may need to use a phone to record an image or photo for work purposes (e.g. a building repair or the investigation of a criminal offence). If the image does not identify any people, then they do not need to obtain consent. However, if a person including a member of staff, is identifiable in the image then their consent should be sought.

The inappropriate use of mobile phones could contravene the Data Protection Act and the Caldicott principles. Staff should therefore exercise caution when using a mobile phone camera.

Mobile phone chargers will need periodic portable appliance testing from a competent engineer. Staff should ensure that the charger is available in their workplace when this testing is undertaken.

7.10.3 Use of Mobiles Whilst Driving

Using a mobile phone whilst driving can be dangerous and is contrary to the Road Traffic Act and the Highway Code. It is an offence to use a handheld mobile phone whilst driving a vehicle. The minimum penalty for this offence is £200 and 6 points on your licence. The CCG does not expect any of its staff to operate a handheld mobile phone whilst driving at work.

No line manager will require any member of staff to receive or make a call on a mobile phone while they are driving. Staff are expected to switch their phone to silent and activate the messaging service. If staff decide to use their mobile phone while in a vehicle, the CCG expects them to stop the vehicle in a safe place and switch the engine off before checking their messages or making any calls. The only exception to this is where a hand held mobile can be used for dialling 999 in a genuine emergency and the driver judges it unsafe or impractical to stop the vehicle.

The use of handsfree sets is not prohibited under the legislation. However, the use of these sets still increases the likelihood of the driver being distracted and thereby involved in an accident. If this occurs, the driver risks prosecution for failing to have proper control of the vehicle because of careless or dangerous driving.

As a result of this, the organisation also discourages the use of handsfree sets and these will not be routinely provided for staff. There may be some exceptions where it is necessary for senior managers to be contactable all the time. In such cases, an application will need to be made to the Head of Governance and Corporate Affairs. The organisation will not advocate the use of this device except in emergency situations where the employee considers it safe to do so.

7.11 Control of Substances Hazardous to Health (COSHH)

The use of chemical substances in any environment requires strict control procedures to ensure the safety of personnel and visitors. The Control of Substances Hazardous to Health Regulations 2002 (COSHH) requires employers to make arrangements to control the exposure of their employees to all substances which may affect their health. The CCG will endeavour, wherever possible, only to use substances classified as non-hazardous. Where this is not possible and a hazardous substance cannot be substituted, strict controls will be enforced as list below:

- If using a hazardous substance a COSHH assessment on its use must be prepared;
- Before using a new product, managers must ensure that they are in possession of the COSHH assessment. The content of which must be provided to those employees who are likely to come into contact with the product;
- Always work to the systems that are in place and follow the guidance given in the material safety data sheet (MSDS) and COSHH Assessment Form;
- Always wear the supplied PPE if necessary for the task;
- Always work in a safe and professional manner;
- DO NOT USE any hazardous substance for anything other than its intended use;
- Report to management any issues/concerns that you may have;
- Ensure hazard information is kept up to date;
- All substances that have the potential to cause harm to health must be stored safely and securely and with regards to the suppliers' recommendations;
- Ensure that employees are trained in all areas mentioned above.

The CCG requires all contractors (i.e. cleaners) using COSHH items within CCG premises to ensure that they comply with the arrangements above.

A COSHH assessment will evaluate the existing control measures and determine whether further action is needed to remove or reduce the risk of harm from exposure to the substance. The assessment findings must be communicated to staff and a copy of the assessment retained on file by the Associate Director of Corporate Services. Assessments should be reviewed annually or alternatively when there are significant changes to the work process, the environment, or the user's health.

If the risk assessment identifies that further control measures are needed, they should be implemented where reasonably practicable and communicated to staff and anyone else who may be exposed to the substance. These include:

- Eliminating the substance and/or substituting it for a safer alternative;

- Modifying the work process to isolate the substance and/or the number of people exposed;
- Developing safe systems of work and emergency procedures that are followed by staff;
- Using personal protective equipment in line with manufacturer's instructions.

The **COSHH Risk Assessment form** can be found in **Appendix 4** and further advice and guidance can be sourced from the Health and Safety Lead.

In the event of an accident or injury resulting from a hazardous substance, the following actions should be taken and the incident reported in accordance with the Incident Reporting Procedure (see Section 7.13):

- Any contamination of the skin should be washed thoroughly with lots of soap and water;
- Contaminated clothing must be removed as soon as possible and washed separately;
- Eyes that have been contaminated should be bathed immediately with water for at least five minutes;
- Medical examination in Minor Injuries or A&E is recommended in case further treatment is required;
- Spills should be cordoned off immediately and signs displayed warning of the hazard;
- Staff should follow the manufacturer's recommendation for dealing with any spills as this may vary depending on the type of substance;
- Hazardous substances must be disposed of in accordance with the manufacturer's safety data sheet information.

7.12 Contractors and Visitors

Visitors must report to reception and be escorted to their destination. They should be made aware of any local safety procedures and, in the event of fire evacuation, escorted out of the premises to the assembly points.

If contractors or visitors are seen acting unsafely this should be reported to the building manager so that the matter may be raised with the individual or company concerned.

7.13 Incident Reporting Procedure

The CCG aims to ensure that all kinds of risks are minimised for the protection of staff, patients, visitors, contractors and services through effective management of risks. The CCG recognises that reporting incidents is a key component of their risk management system and is committed to encouraging staff to report all incidents.

The purpose of this procedure is to outline the arrangements for identifying, managing, investigating and reporting health and safety related accidents, incidents and near misses (hereafter referred to as incidents) within the CCG.

The reporting of incidents is designed to ensure:

- A culture of openness in reporting incidents;
- Prompt and precise gathering of information;

- Prompt communication with staff, and where appropriate, the media;
- Minimisation of distress to those affected by an incident;
- Identification of patterns and trends in the occurrence of incidents and near misses;
- Minimise future risk, as far as is reasonably practicable, by taking prompt and appropriate preventive action and ongoing monitoring;
- Early warning of potential litigation and cost impact;
- Fulfilment of the CCG's legal duties under statutory regulations including RIDDOR 1795, the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999.

It is vital that the CCG recognises and monitors all incidents regardless of their nature and assumed severity. In addition to statutory reporting requirements, the CCG operates a central database where incidents are logged. The database is maintained by the Health and Safety Lead and monitored by the Associate Director of Corporate Services. As some incidents will not have a statutory reporting route, this process ensures that all incidents are captured and learned from. A regular incident report will be presented to the Joint Commissioning Committee.

This procedure and central reporting outlined above does not include provider and third-party incidents and SIs.

7.13.1 Health and Safety Incidents

The CCG has a statutory obligation under the Health and Safety at Work Act to ensure a safe working environment. All accidents, incidents, near misses, unplanned events and cases of work-related ill health are to be reported immediately using the incident reporting form in Appendix 5.

RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) reportable incidents must be reported to the enforcing local authority by the Health and Safety Lead within the appropriate timescale.

7.13.2 Incident reporting

The immediate priority for all staff in the case of an incident is to take steps necessary to secure the safety of the person involved. Prompt action must be initiated to prevent a reoccurrence of any incident or to minimise the risk of a potential incident or near miss materialising into an actual incident. The type of immediate action required varies according to the nature of the occurrence. Action may include:

- Administering first aid (where qualified to do so);
- Taking a faulty piece of equipment out of action;
- Closing a workplace until repairs can be carried out (this may also involve activation of the CCG's Business Continuity Plan);
- Changing a working practice to prevent reoccurrence.

All incidents must be reported within 48 hours (or 24 hours for serious incidents) using the Incident Reporting Form (Appendix 5). Your line manager and the Health and Safety Lead should also be notified of the incident.

The incident form should be used to report the facts of the incident, not opinion, as comprehensively as possible, using further sheets appended and secured to the form if required. The member of staff involved in the incident, or anyone witnessing it, should complete the form. Only one form should be completed. Any remedial action that is undertaken or planned should be noted on the form.

All incidents will be logged on the CCG's central database. Once an incident has been logged, an appropriate individual will be allocated to lead the investigation. All incidents should be risk assessed by the investigating manager using the matrix set out in Appendix 6, taking advice from internal specialist staff, dependant on the nature of the incident.

Once an investigation has concluded, the results and any actions/lessons learned must be recorded. It is the responsibility of the investigating manager to ensure that adequate feedback has been given to the person reporting the incident. An incident may only be closed when authorised by the Associate Director of Corporate Services.

7.13.3 Incident investigation

The following general principles are relevant to investigating incidents. As a general rule, the depth and breadth of an investigation should be proportionate to the level of risk posed by recurrence of the incident and the prospect of the investigation generating new lessons to learn. Any investigation should have the following aims:

- Ensure timely and appropriate follow-up;
- Establish the facts;
- Identify factors contributing to the events;
- Determine what actions are to be taken to remedy any identified deficiency;
- Prevent, as far as possible, similar occurrences in the future;
- Meet national, regional and legal reporting requirements.

To ensure the achievement of these aims, an investigation, which will be carried out by a nominated manager, may include the following components:

- Collection of evidence about what happened;
- Consideration of the evidence, including comparison with relevant standards, protocols or guidelines, whether national or local;
- Establishment of the facts and, based upon these, the drawing of conclusions and making of recommendations for action to minimise risk;
- Drawing up an action plan with prioritised actions, responsibilities, timescales and strategies for measuring the effectiveness of actions;
- Implementation of the improvement plan and tracking progress, including the effectiveness of actions.

7.13.4 Lessons learned

The key purpose of collecting information from incidents/near misses is to learn from them and act upon them. Line Managers, through reviewing and investigating incidents/near misses, will identify factors and improvements. These may be useful in other areas and should be shared when appropriate. Where appropriate, incident outcomes will be shared with CCG staff through team meetings, staff briefings and the Staff Council. Learning from incidents will be shared at an organisational level through regular reports to the Joint Commissioning Committee.

7.14 First Aid

The CCG is under a general duty to provide a safe place of work, with suitable arrangements for welfare. The CCG must ensure that there is adequate first aid provision for employees who may become ill or are injured at work. A suitable person must be appointed to take responsibility for first aid provision and maintenance of the first aid box under the Health and Safety (First Aid) Regulations 1981 (as amended).

Employees will be informed of arrangements which have been made for first aid, including the location of equipment, facilities and appointed personnel.

The aim of first aid is to reduce the effects of injury or illness suffered at work caused either by the work itself or by some other factor outside the CCG's control. First aid provision must be 'adequate and appropriate in the circumstances'. This means that sufficient first aid personnel and facilities should be available to:

- Give immediate assistance to casualties with common injuries or illness and injuries likely to arise from specific hazards at work;
- Provide first aid and offer assistance to a member of the public, resident, guest or service user who is on CCG premises, including those visiting or attending any CCG events and;
- Summon an ambulance or other professional help.

7.14.1 First Aiders

The CCG will consider the nature of activities at the workplace when determining the number and types of first aiders to appoint. As a minimum, a low-risk workplace such as a small office should have a first-aid box and a person appointed to take charge of first-aid arrangements, such as calling the emergency services if necessary.

When an employer's first-aid needs assessment indicates that a first-aider is unnecessary, the minimum requirement is to appoint a person to take charge of first-aid arrangements. The roles of this appointed person include looking after the first-aid equipment and facilities and calling the emergency services when required. They can also provide emergency cover, within their role and competence, where a first-aider is absent due to unforeseen circumstances (annual leave does not count).

The recommended numbers of first aid personnel to be available at all time when people are at work are:

Degree of Hazard	No of employees	First Aid personnel recommended
Low Hazard e.g. offices	Less than 25	At least one appointed person
	25 -50	At least one first – aider trained in EFAW
	More than 50	At least one first – aider trained in EFAW for every 100 employed (or part thereof)

Emergency First Aid at Work (EFAW) provides basic lifesaving first aid including:

Understanding of Health and safety (first aid) regulations;	Resuscitation;
Managing an incident;	Shock;
The priorities of first aid;	Choking;
Treatment of an unconscious casualty;	Seizures;
Bleeding;	Common workplace injuries;

First Aid at Work (FAW) provides comprehensive set of practical skills for first aid situations including:

Accidents and illness;	Choking;
Treatment of an unconscious casualty;	Bleeding;
Heart attacks;	Burns and scalds;
Resuscitation;	Poisoning;
Shock;	Fractures
Seizures;	Eye injuries;
Asthma;	Low blood sugar;
Severe allergic reaction	Fainting.

Qualified physicians and nurses can act as fully qualified First Aiders without having to attend specific training courses. To be counted as part of the CCG complement of first aiders a doctor or nurse must:

- be in clinical practice;
- maintain competency in resuscitation techniques;
- be willing to attend incidents on request;
- be included on lists of first aiders.

7.14.2 First Aid Boxes and Accident Books

First Aid Boxes and Accident Books will be maintained in each of the CCG's premises. Nominated members of the Corporate team are responsible for monitoring the contents of the first aid boxes and ensuring they are kept fully stocked in accordance with British Standard (BS) 8599, including replacing items that have reached their expiry date.

To comply with the legal requirements under health and safety legislation, including RIDDOR, a record of work-related injuries and incidents must be maintained using the Accident Book. These records can be used as evidence in compensation claims for both employees and for employers if the accident was, for example, a consequence of faulty equipment.

Additionally, the accident book is a record which can be used to track trends in accidents so that common threads can be identified and prevented.

7.14.3 First Aid Risk Assessment

As with all risk assessments, first aid assessments shall be reviewed annually, or whenever there is a material change either to the amount and type of work carried out or to the number of staff members employed on the site.

In assessing needs, the following should be taken into account:

- Workplace hazards and risks;
- The number of staff members employed on the site;
- The accident record of the site;
- The nature and distribution of the workforce;
- The remoteness of the site from emergency medical services;
- The needs of travelling, remote and lone workers;
- Annual leave and other absences of First Aiders and, if applicable, appointed persons.

7.15 Welfare Facilities

Welfare facilities include the provision of adequate toilet and washing facilities. The CCG will ensure these facilities are in sufficient numbers, clean, well maintained and have adequate ventilation. Hot and cold water, soap and hand drying facilities will also be in place. The provision of suitable drinking water is also a statutory requirement and will be supplied.

7.16 Training

7.16.1 Staff Inductions

In order to secure the health and safety of all employees, the CCG will provide health and safety training to new employees, including temporary staff, which will be incorporated into general induction training.

Induction training will commence on the first day of employment so that employees are familiar with basic procedures once they are at their place of work. Where this is not possible, induction training will take place as soon as possible after the employee has started work. The person responsible for this will always be the Line Manager.

The health and safety component of induction training will contain the following:

- **CCG's Health and Safety Policy** — the contents of CCG's policy statement will be covered in detail, including the responsibilities set out in the policy, this will enable the employee to become acquainted with the organizational arrangements;
- **Accident Reporting Procedures/First Aid** — this will cover the action to be taken when an accident has occurred, the person to be informed and where to acquire first aid treatment (this section will also cover the CCG's procedure as to the investigation of accidents: the reporting procedure will be explained so that the employee is aware as to what will happen when an accident occurs);

- **Fire Procedures and Precautions** — this section covers action to be taken in a fire situation and will include:
 - the location of the fire exit;
 - the assembly point;
 - the responsible person the employee must report to;
 - further instructions on the action to be taken in the event of discovering a fire;
 - what to do with machinery or processes left prior to evacuating an area.
- **Safety procedures** — items for discussion in this section could include;
 - use of display screen equipment;
 - lone working;
 - any additional local safety rules.

Once the induction training has been completed, a record of the training will be kept. The name of the employee, the date and subjects covered should be included.

7.16.2 Statutory and Mandatory Training

The CCG provides training through an on-line learning system designed to ensure all employees are competent to undertake their work in a proper and safe manner. Training will include:

- Fire Safety - annually
- Health, Safety and Welfare – every 3 years
- Moving and Handling (Level 1) – every 3 years
- Display Screen Equipment Information and Training – annually.

7.17 Open Plan Office Etiquette

Talking too loudly, munching food, tapping pencils, and rustling paper etc. are just some of the annoying things that staff do that can affect our ability to concentrate on our work. Uninvited invasion of space can further affect our ability to work efficiently. Such annoyances may force unnecessary stress and frustration to staff and affect their ability to work efficiently and with good levels of concentration.

Open plan offices have many benefits, such as bringing about a closer working relationship with colleagues from within your own department/team. And, if there were any departmental/team barriers previously in place they are likely to be crossed within an open plan office. Additionally, open plan offices can be a fun place to work in due to increased social interaction giving a feeling of belonging to large family.

Open plan offices became popular in the 1970s as a way of improving communication and productivity of the workforce. However, there have been suggestions that lack of privacy and increased distraction will make workers less efficient. It is well known that introverts like to focus on work and for such people interruptions may break their concentration whilst extroverts appear to be able to deal with interruptions and even regard them as stimulation and as being part of work.

The CGG values all of its employees and the contribution each of them makes to its overall success and it strives to create and maintain a healthy and enjoyable working environment in which open and effective communication, support for each employee and mutual respect between individuals are the expectations and the reality.

The following open plan office etiquette is expected to be adhered to by all staff in order to achieve this.

- Please respect people's personal space;
- Be aware of noise levels in the office and try and keep conversations, either on the telephone or in person to a reasonable level;
- Do ensure that you cannot be overheard when discussing confidential matters and use designated quiet space where available for confidential conversations;
- Avoid using speaker phones and try and set a low volume telephone ring;
- Be considerate over the use of mobile phones, particularly for incoming calls where you may have loud, unusual or annoying ring tones. Personal mobile phones should be on silent or vibrate. Do not leave personal mobile phones unattended if possible;
- Shouting across the office to fellow work colleagues is not recommended;
- There may, on occasion, be the requirement for managers/teams to meet with their staff on short notice regarding confidential and personal matters. With a reduction in office space available, managers should agree what rooms can be used for these issues. These rooms will need to be entirely private;
- Avoid eating at your desk (or at least avoid eating things that are smelly and crunchy);
- Listening to music will annoy others as you will, without doubt, unknowingly hum along to it;
- Need some peace and quiet to read those all-important documents? Consider booking a meeting room;
- Do not leave any valuables on your desk or anywhere around your work area as they may go walkabouts;
- Remember, if you leave your desk ensure that you lock your computer down;
- Do clear your desk at the end of each day, keeping all portable records containing person-identifiable or confidential information in recognised filing and storage places that are locked at times when access is not directly controlled or supervised;
- When receiving visitors please be respectful of other people working in the office and around the building;
- Ensure that visitors are accompanied at all times and sign in and out accordingly.

Open plan offices are regarded as a nice social environment to be in, one in which a lot of work gets done. There is a need to concentrate on the things you are trying to do rather than paying attention to what's happening around you.

APPENDIX 1

Display Screen Equipment (DSE) Workstation Assessment Checklist

Workstation location:	
Name of user:	
Date checklist completed:	

This checklist can be used as an aid to risk assessment and to help comply with the Schedule to the Health and Safety (Display Screen Equipment) Regulations.

Work through the checklist, ticking either the 'Yes' or 'No' column against each risk factor:

✓ 'Yes' answers require no further action.

× 'No' answers will require investigation and/or remedial action by the workstation assessor. Their decisions will be recorded in the 'Action to take' column. Assessors should check later that actions have been taken and have resolved the problem.

Remember the checklist only covers the workstation and work environment.

Declaration by user

I, the user of this display screen workstation, confirm that I have undertaken this self-assessment of my workstation and that:

- The responses recorded on this form are correct; and
 - I understand that I should report any health concerns that I may have in connection with the use of my workstation to my line manager at the earliest possible opportunity.

I understand that the information provided by me on this questionnaire will be treated in the strictest confidence and will not be released without my consent to any unauthorised person.

Signature of user		Date
Signature of line manager		Date

For Corporate use only:


Assessment checked by:		
Any further action needed?	YES	NO
Follow-up action completed on:		

DISPLAY SCREEN EQUIPMENT (DSE) WORKSTATION CHECKLIST


1. DISPLAY SCREENS

Problems to look for when making an assessment	Tick either		Ways of reducing the risk	Action to take
	YES	NO		
Are the characters clear and readable?			Make sure the screen is clean and that cleaning materials are available to clean the screen. Check that text and background colours work well together.	
Is the size of text comfortable to read?			Software settings may need adjusting to change text size.	
Is the image stable, i.e. free of flicker and jumping?			Try using different screen colours to reduce flicker, e.g. darker background and lighter text. If problems still exist, check the set-up.	
Is the screen's specification suitable for its intended use?			For example, intensive graphic work or work requiring fine attention to small details may require large display screens.	
Are the brightness and/or contrast adjustable?			Separate adjustment controls are not essential, provided the user can read the screen easily at all times.	
Does the screen swivel and tilt?			Swivel and tilt need not be built in; you can add a swivel and tilt mechanism if required. However, you may need a replacement screen if: <ul style="list-style-type: none"> ■ swivel/tilt is absent or unsatisfactory ■ work is intensive and/or: ■ you have problems getting the screen to a comfortable position 	
Is the screen free from glare and reflections?			You might need to move the screen or even the desk and/or shield the screen from the source of reflections. Screens that use dark characters on a light background are less prone to glare and reflections.	
Are adjustable window coverings provided and in adequate condition?			Check that blinds work. Consider anti-glare screen filters	

2. KEYBOARDS

Problems to look for when making an assessment	Tick answer		Ways of reducing the risk	Action to take
	YES	NO		
Is the keyboard separate from the screen?			This is a requirement, unless the task makes it impracticable (e.g. where there is a need to use a portable).	
Does your keyboard tilt?			Tilt need not be built in.	
Is it possible to find a comfortable keying position?			Try pushing the display screen further back to create more room for the keyboard, hands and wrists. Users of thick, raised keyboards may need a wrist rest.	
Do you have good keyboard technique? 			Training can be used to prevent: <ul style="list-style-type: none"> ■ hands bent up at wrist ■ hitting the keys too hard ■ overstretching the fingers 	
Are the characters on the keys easily readable?			Keyboards should be kept clean. If characters still can't be read, the keyboard may need modifying or replacing. Use a keyboard with a matt finish to reduce glare and/or reflection.	


3. MOUSE, TRACKBALL etc

Problems to look for when making an assessment	Tick answer		Ways of reducing the risk	Action to take
	YES	NO		
Is the device suitable for the tasks it is used for?			If you are having problems, try a different device. The mouse and trackball are general-purpose devices suitable for many tasks, and available in a variety of shapes and sizes.	
Is the device positioned close to you?			Most devices are best placed as close as possible e.g. right beside the keyboard. Training may be needed to: <ul style="list-style-type: none"> ■ prevent arm overreaching; ■ encourage you not to leave your hand on the device when it is not being used; ■ encourage a relaxed arm and straight wrist. 	
Is there support for your wrist and forearm? 			Support can be gained from, for example, the desk surface or arm of a chair. If not, a separate supporting device may help. You should be able to find a comfortable working position with the device.	
Does the device work smoothly at a speed that suits you?			See if cleaning is required (e.g. of mouse ball and rollers). Check the work surface is suitable. A mouse mat may be needed.	
Can you easily adjust software settings for speed and accuracy of pointer?			You may need training in how to adjust device settings.	

4. SOFTWARE

Problems to look for when making an assessment	Tick answer		Ways of reducing the risk	Action to take
	YES	NO		
Is the software suitable for the task?			Software should help you carry out your daily tasks, minimise stress and be user-friendly. Have you had appropriate training in using the software? Software should respond quickly and clearly to user input, with adequate feedback, such as clear help messages.	

5. FURNITURE

Problems to look for when making an assessment	Tick answer		Ways of reducing the risk	Action to take
	YES	NO		
Is the work surface large enough for all the necessary equipment, papers, folders etc?			Create more room by filing papers elsewhere. If necessary, consider new power and telecoms sockets, so equipment can be moved. There should be some scope for flexible arrangement.	
Can you comfortably reach all the equipment and papers you need to use?			Rearrange equipment, papers etc to bring frequently used things within easy reach. A document holder may be needed, positioned to minimise uncomfortable head and eye movements.	
Are surfaces free from glare and reflection?			Consider ways to reduce reflections and glare.	
Is the chair stable? Does the chair have a working: <ul style="list-style-type: none"> ■ seat back height and tilt adjustment? ■ seat height adjustment? ■ swivel mechanism? ■ castors or glides? 			The chair may need repairing or replacing if you are uncomfortable, or cannot use the adjustment mechanisms.	
Is the chair adjusted correctly? 			You should be able to carry out your work sitting comfortably. Consider training in how to adopt suitable postures while working. The arms of chairs can stop you getting close enough to use the equipment comfortably. Move any obstructions from under the desk. See Appendix 1 for guidance on the ideal seated position for DSE work.	
Is the small of the back supported by the chair's backrest?			You should have a straight back, supported by the chair, with relaxed shoulders.	
Are forearms horizontal and eyes at roughly the same height as the top of the screen?			Adjust the chair height to get your arms in the right position, then adjust the screen height, if necessary.	

Are your feet flat on the floor, without too much pressure from the seat on the backs of the legs?			If not, a foot rest may be needed.	
--	--	--	------------------------------------	--

6. ENVIRONMENT

Problems to look for when making an assessment	Tick answer		Ways of reducing the risk	Action to take
	YES	NO		
Is there enough room to change position and vary movement?			Space is needed to move, stretch and fidget. Consider reorganising the office layout and check for obstructions. Cables should be tidy and not be a trip hazard.	
Is the lighting suitable, e.g. not too bright or too dim to work comfortably?			You should be able to control light levels, e.g. by adjusting window blinds or light switches. Consider shading or repositioning light sources or providing local lighting, e.g. desk lamps (but make sure lights don't cause glare by reflecting off walls or other surfaces)	
Does the air feel comfortable?			Display screens and other equipment may dry the air. Circulate fresh air if possible. Plants may help. Consider a humidifier if discomfort is severe.	
Are levels of heat comfortable?			Can heating be better controlled? More ventilation or air-conditioning may be required if there is a lot of electronic equipment in the room.	
Are levels of noise comfortable?			Consider moving sources of noise, e.g. printers, away from you.	

7. Final Questions to Users....

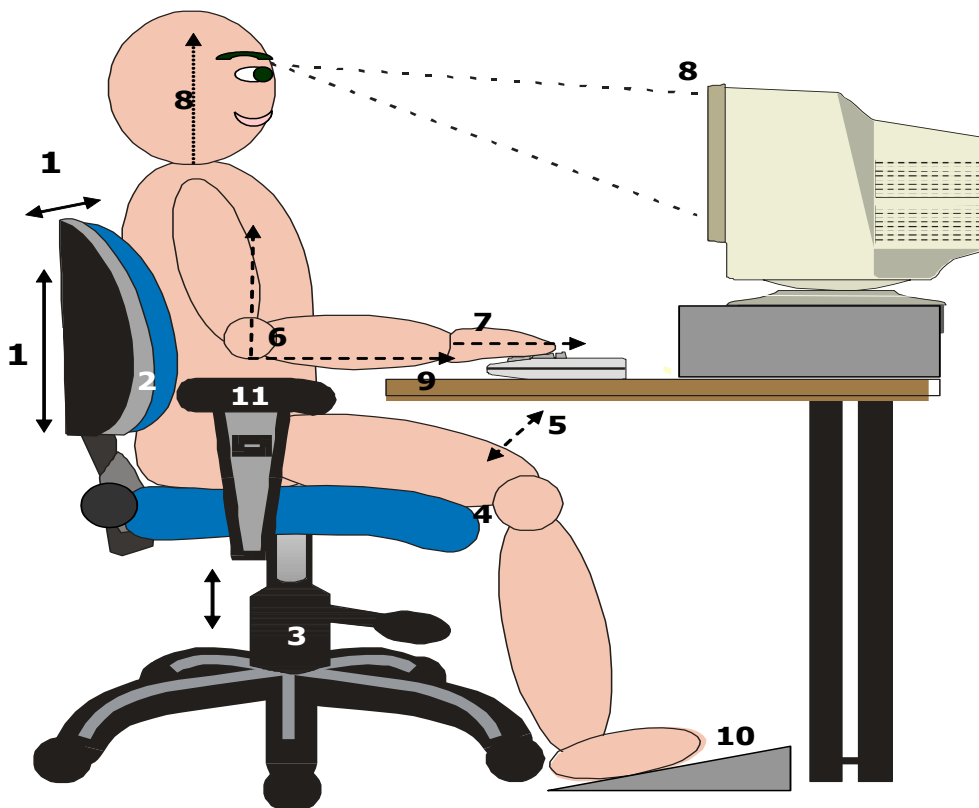
- Has the checklist covered all the problems you have working with DSE?
- Have you experienced any discomfort or other symptoms that you attribute to working with DSE?
- Have you been advised of your entitlement to have an eye test?
- Do you take regular breaks working away from DSE?

Write the details of any problems here (continue on another sheet if necessary):

A large, empty rectangular box with a thin black border, intended for writing the details of any problems. The box is currently blank.

Ideal seated position for DSE work

1. The seat back rest should be adjusted so you are sitting upright
2. Good lumbar support should be achieved (i.e. the lower back should be supported)
3. Seat height should be adjusted to achieve 4 – 7 below
4. There should be no excess pressure on the underside of your thighs and back of knees.
5. There should be room under the desk to allow changes in posture (no obstacles)
6. Forearms should be horizontal and elbows approximately at right angles
7. There should be minimal bending of the wrists and hands, they should be horizontal
8. Screen should be at arms' length and height and angle should be adjusted to allow a comfortable head position with the neck and head straight
9. Ensure there is space in front of the keyboard to support your hands/wrists during pauses in keying. Place mouse close to keyboard
10. A foot support should be provided if your feet do not now touch the ground
11. If seat arm-rests are provided these should not prevent you from pushing your chair under the desk or should be adjustable in height



APPENDIX 2

AUTHORISATION AND REIMBURSEMENT CLAIM FORM FOR DISPLAY SCREEN EQUIPMENT USERS

Name of Employee:

Department: Personal Number:

Do you already wear spectacles? YES/NO (delete as applicable)

If Yes, PERMANENTLY or OCCASIONALLY (delete as applicable)

You are authorised to receive a VDU eye test at any opticians if you are a VDU user and spend in excess of four hours per day working at a VDU.

If spectacles are found to be required for VDU use, a contribution up to a maximum of £40.00, in addition to the cost of the eye test will be reimbursed. Any charges in excess of this amount must be met by you personally.

If you require spectacles for anything other than VDU use the optician will inform you but any associated charges will be at your own expense.

Please arrange an appointment at your selected optician and hand this letter of authorisation to the optician.

Authorised by your Manager (Name):

Position: Date:

Employee's Declaration:

I confirm that I am VDU user and that I spend in excess of four hours per day working at a VDU. I attach a receipt from my optician for the costs incurred. I agree to the terms of the claim and confirm that I agree to pay any additional cost.

Signed: Date:

FOR USE BY OPTICIAN

Employee's Name: Date of Test:

I confirm that a full eye test has been completed on the above-named employee and the result is enclosed.

- a) This person was not tested wearing existing spectacles.
- b) This person was tested wearing existing spectacles and we found these spectacles to be *suitable/unsuitable for working with VDU's.
- c) *Single focal/Bifocal spectacles *have/have not been supplied. (* Delete as applicable.)

Optician's Name: (PRINT):

Optician's Signature: Date:

Branch Address:

APPENDIX 3

To be completed by the Line Manager. (If the individual works in more than one building, then it may be necessary to prepare a separate PEEP for each building).

PERSONAL EMERGENCY EVACUATION PLAN			
Name			
Department			
Building			
Room Number and Floor			
Contact Number			
AWARENESS OF PROCEDURE			
<i>(Insert Name)</i> is informed of a fire evacuation by: (please tick ✓ relevant box)			
Existing alarm system;		Visual alarm system;	
Pager device;		Other (please specify);	
DESIGNATED ASSISTANCE			
The following has been designated to give assistance to get out of the building safely in the event of an emergency			
Name:			
Contact details:			
Name:			
Contact details:			
METHODS OF ASSISTANCE			
EQUIPMENT PROVIDED			
PERSONALISED EVACUATION PROCEDURE (A step by step account beginning with the first			
1			
2			
3			
4			
MONITOR and REVIEW			
Signed Manager		Date	
Signed Individual		Date	

Personal Emergency Evacuation Plan (Example)

To be completed by the Line Manager. (If the individual works in more than one building, then it may be necessary to prepare a separate PEEP for each building).

PERSONAL EMERGENCY EVACUATION PLAN			
Name	John Peterson		
Department	Admin Assistant		
Building	Lancashire Area Office		
Room Number and Floor	3 rd Floor Rm 25		
Contact Number	Ext 5054		
AWARENESS OF PROCEDURE			
John is informed of a fire evacuation by: (please tick ✓ relevant box)			
Existing alarm system;	<input checked="" type="checkbox"/>	Visual alarm system;	<input type="checkbox"/>
Pager device;	<input type="checkbox"/>	Other (please specify);	<input type="checkbox"/>
DESIGNATED ASSISTANCE			
The following has been designated to give John assistance to get out of the building safely in the event of an emergency			
Name:	Eric Smith		
Contact details:	Admin Assistance Rm 21 ext.; 5050		
Name:	Archie Jones		
Contact details:	Team Leader Rm 27 ext.; 5052		
METHODS OF ASSISTANCE			
Eric or Archie will act as John's 'Buddy' and accompany John down the stairs.			
EQUIPMENT PROVIDED			
Powerful Hand Torch			
PERSONALISED EVACUATION PROCEDURE (A step by step account beginning with the first alarm)			
1	On hearing the alarm John will proceed to the fire exit.		
2	John will wait at the refuge point until everyone passes and the stairs are clear, then walk down the stairs assisted by his 'Buddy' using the torch if necessary.		
3	The Fire Warden will inform the Fire Liaison Officer that John and his 'Buddy' are proceeding down the stairs slowly		
4	The staircase is protected and provides John with at least 30 minutes protection to descend the stairs and reach a place of safety.		
MONITOR and REVIEW			
This procedure will be rehearsed during fire drills and will be reviewed annually.			
Signed Manager	S Jones	Date	01 July 13
Signed Individual	J Peterson	Date	02 July 13

Personal Emergency Evacuation Plan (PEEP) MATRIX

Options		Mobility Impaired People (a)				Sensory Impaired People		Cognitive Disabilities (f)			
Options	Types of Escape	Electric Wheelchair (b,c)	Wheel chair user(b)	Mobility Impaired person	Asthma/breathing problems	Visually impaired person(d)	Hearing impaired person(e)	Dyslexic orientation disorders	Learning difficulty autism	Mental health problems	Dexterity problems
1	Meet assistances at refuge		✓	✓		✓					
2	Meet assistance at the workstation	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
3	Where suitable fire evacuation lifts exists these may be used	✓	✓	✓	✓						✓
4	Make own way downstairs slowly	✓	✓	✓	✓						
5	Move downstairs on bottom after main flow	✓	✓	✓	✓				✓		
6	Use evacuation chair or similar	✓	✓	✓	✓						
7	Travel down in own chair with support		✓								
8	Can get downstairs using handrails	✓	✓	✓	✓	✓			✓		
9	Needs assistance to walk downstairs 1 person (Buddy system).	✓	✓	✓	✓	✓			✓	✓	✓
10	Needs assistance to walk downstairs 2 person (Buddy system).	✓	✓	✓	✓	✓					
11	Horizontal evacuation	✓	✓								
12	Cannot transfer readily	✓	✓								

13	Needs colour contrast on stairways					✓					
14	Needs step edge markings			✓		✓	✓	✓		✓	
15	Needs showing escapes routes				✓	✓	✓	✓	✓		
16	Needs assistance for person and dog					✓					
17	Needs door opening (Buddy system)										✓
18	Needs orientation information					✓	✓	✓	✓	✓	
19	Needs tactile map of building					✓					
20	Large print information					✓		✓	✓		
21	Needs taped information					✓		✓	✓	✓	
22	Needs information in Braille					✓					
23	Buddy system					✓	✓	✓			
24	Provision of alternative alarm	✓	✓	✓		✓	✓				
25	Provision of flashing beacons						✓				
26	Additional checks by fire wardens						✓	✓	✓	✓	
27	Identification of escape route by reception / security	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Notes on disabilities

- a. There is a vast range of people who fit into this category. Issues relating to this group of people may also be relevant for people who have heart disease, asthma or heart conditions.
- b. This group of people is considered most at risk in terms of escape. However, in some instances, a person who frequently uses a wheelchair may be able to walk slightly and therefore be able to assist with their own escape or even facilitate independent escape. It is essential that the disabled person is asked the relevant questions tactfully and in a way that produces the best escape plan.
- c. Electrically powered wheel chair users may have less mobility than people who use manual chairs. It is wise to allow the escape of all other groups of disabled people in the building to ensure that is sufficient staff to assist this group.
- d. People who are visually impaired are helped to escape by the provision of good signage and other orientation clues. It should be noted that most visually impaired people have some sight and that they will be able to use this during the escape in order to make their own way out of the building. The provision of a high powered torch may be useful. If the “Buddy System” is used” it is recommended that the vision impaired person grasps their “Buddy’s” elbow as this will enable the person being assisted to walk half a step behind and thereby gain information about doors and steps.
- e. Hearing impaired and deaf people need to know that there is an escape in progress.
- f. People with cognitive disabilities often problems comprehending what is happening in escape conditions, or may not have the perceptions of risk as non-disabled people. Provision of good orientation facilities and measures within the building is essential. There may be reluctance by some to take an unknown route from the building. Some people with cognitive disabilities may fall into the group of unknown disabilities, such as dyslexia, dyspraxia and autism. These people may not be aware of the problem. The PEEP system should be used to give them the opportunity to understand the possible need for choice and direction change during an escape.

DEFINITIONS

Protected escape route

A protected escape route may consist of a corridor or stair enclosure which, once entered, will lead directly to a place of safety via an emergency exit.

The escape route is separated from the rest of a building by fire-resisting construction, providing a minimum fire resistance of 60 minutes. Access to the escape routes is by 'Fire Doors' which provide a minimum fire resistance of 30 minutes. These doors are fitted with self-closing devices capable of closing the doors from all angles of swing.

Once inside a protected escape route, you are deemed to be in a place of safety. In order to maintain a satisfactory standard:

- No combustible material should be stored or sighted within protected stair enclosure. (Open notice boards, paper/cardboard stored below stairs etc.)
- Stairways and corridors to be kept free from obstruction. (No siting of equipment within these areas)
- A programme of inspection to ensure that all fire doors function properly and that any defects are immediately identified and repaired

Refuges

A refuge is an area normally sited within an enclosure such as a protected lobby, protected corridor or protected stairway, which provides a temporary safe area for people who will not be able to use stairways without assistance.

The refuge normally needs to be big enough to allow wheelchair use and to allow the user to manoeuvre into the wheelchair space without undue difficulty.

A means of communication must be provided so that the person requiring assistance can make contact with those people who have been designated to provide assistance. This could be by fixed telephone at the refuge point, mobile phone, or two way radio link.

It is essential that the location of any wheelchair spaces within a corridor or stair enclosure does not adversely affect the means of escape for other people by narrowing the escape route width.

In circumstances where the refuge area identified for a wheelchair user may restrict the free passage of others trying to evacuate the building, the area may still be suitable for use as a refuge providing that the wheelchair is manoeuvred into position after other persons have left that part of the building.

Evacuation chairs (EVAC chairs)

Evacuation chairs are specially designed chairs for the evacuation of a person down a stair enclosure in a controlled and safe manner.

Whilst they are primarily for the use of wheelchair users, they can also be of assistance to those with impaired mobility, chronic/asthmatic conditions etc.

They must only be operated by person(s) trained in their use.

Buddy System

The 'Buddy System' is a procedure whereby a friend, colleague or staff member is allocated the responsibility of ensuring that the person, who may require assistance, is alerted of the need to evacuate a building and may assist that person in the evacuation.

Normally the person allocated this responsibility will be employed within the vicinity or work area of the person requiring assistance.

In order to maintain the continuity of the evacuation procedures, persons should be nominated to deputise for those allocated the responsibility in their absence.

APPENDIX 4

COSHH ASSESSMENT FORM

Function	
Site / Location	
Assessor's Name & Job Title	
Date	
Review Date	

Substance / Material						
Manufacturer / Supplier						
Hazard Details	Harmful		Mutagenic		Radioactive	
	Irritant		Biological		Combustible	
	Oxidising		Toxic		Flammable	
	Corrosive		Very Toxic		Highly Flammable	
	Carcinogenic		Environmental		Explosive	
Persons at Risk	Healthcare		Maintenance		Patients	
	Nursing / Medical		Administrative		Visitors	
	Domestic		Pregnant Staff		Others	
Routes of Exposure	Inhalation		Absorption - skin		Eyes	
	Ingestion		Puncture		Other	
Risks						
Control Measures	Safety data sheet – safety phrases: Use: Storage: Equipment: PPE: Spills: Disposal:					

What further controls are needed?	
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Re-evaluation	Consequence 1 2 3 4 5	Likelihood 1 2 3 4 5	Priority L M H E
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ACTION PLAN

To be completed by the Senior Manager based on the recommended further controls and the re-evaluation of risk

Manager's Name & Job Title	
---------------------------------------	--

Further Action Required	Person responsible	Completion Date

Has the recommended action been agreed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Manager's Name			
Signature			
Date			

Does any outstanding risk need to be added to the Risk Register?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, please give brief details		

APPENDIX 5

Incident Reporting Form

An electronic version of this form can be found on the CCG intranet

INCIDENT FORM		
<i>Please complete this incident form immediately after the incident has occurred.</i>		
Section 1 Details of the person affected by the incident	Name of person affected	
	Date of birth	
	Gender	
	Name(s) of Witness(es)	
Section 2 Details of the incident	Date of incident	Time
	Location of incident	
	Type of incident	Personal Accident Violence, abuse or harassment Ill health Fire incident Security incident Vehicle incident Finance Other (please specify)
	Result	Was the person harmed? Yes No Degree of harm None Minor Moderate Major Death/catastrophic
Section 3 Summary of the incident <i>Please describe clearly and concisely what happened.</i> <i>Please describe any injury sustained.</i>		

<p>Section 4 Summary of action taken</p> <p><i>Please describe what actions you took immediately following the incident.</i></p>			
<p>Section 5</p> <p>What changes will be implemented as a result of this incident?</p>			
<p>Section 6</p> <p><i>To be completed by the person reporting the incident.</i></p>	Full name		Date form completed
	Job title		
	Work address		
	Team/department		
	Telephone number		
	Email address		
<p>PLEASE SEND TO YOUR LINE MANAGER IMMEDIATELY</p>			
<p>LINE MANAGER TO COMPLETE SECTION 7 within 48 hours of the incident and submit to the Health and Safety Lead</p>			
<p>Section 7</p> <p>Actions taken by Line Manager</p> <p><i>What actions have been taken?</i></p> <p><i>What immediate steps have been taken to minimise the likelihood of reoccurrence?</i></p> <p><i>Is a risk assessment necessary?</i></p>			

Guidance notes for completing the Incident Form

Please read these notes carefully before completing the incident report form. For further advice contact your line manager or the Health and Safety Lead. For the purpose of this form an incident is defined as an unplanned and uncontrollable event which may, but does not have to, result in personal injury, property damage or loss.

- Completing this form does not constitute an admission of liability of any kind on any person
- Any equipment etc involved in the incident should be retained in safe keeping for examination
- Where death or serious injury occurred this must be reported to a Director.

Use this form to report all incidents including:

- Work-related incidents resulting in injury to an employee of the CCG, patients, clients, visitors, contractors, or members of the public
- Incidents resulting in damage to property
- Near misses which may have no immediate effect but where serious consequences were avoided by luck
- Personal violence, abuse or harassment
- Security, finance, vehicle
- Other occupational injury or ill-health.

The individual affected by the incident is the person who suffers or potentially suffers injury, ill health and including theft and any other property damage or loss. If an incident involved more than one person, a separate incident form must be completed for each individual. No more than one affected person's name should be on a single incident form. Certain sections of the form require reference to pick lists for guidance.

SECTION 1 – Give the details of the affected person.

SECTION 2 – Details of the incident and the location. Please be as precise as possible regarding the location e.g. building, toilet, stairs, car park etc. Only one type of incident should be ticked. The following definitions apply:

- **Personal Accident:** Any accident, no matter how small which did or could have adversely affected any person. This does not include any incident that is caused deliberately (e.g. act of violence or fire).
- **Violence, Abuse or Harassment:** Any incident involving verbal abuse, unsociable behaviour, racial or sexual harassment or physical assault, whether or not injury results.
- **Ill Health:** Any case of known or suspected work or environment related ill health (headaches, infections etc).
- **Fire Incident:** Any incident, no matter how small, involving fire or fire warning system.
- **Security Incident:** Any untoward incident involving theft, loss or other damage to organisational or personal property, intrusions, false alarms (but not fire alarms), absconded patient and other security issues.
- **Vehicle Incident:** Any incident involving a vehicle e.g. road traffic accident, excluding vandalism or theft which would be classified as security incidents.
- **Finance:** Theft, loss, misuse incurred as a result of e.g. out of date goods, materials, consumables etc.
- **Other:** This type of incident should be marginal in number and might include items which do not fit in previous categories. Please give as much detail as possible.

Grading the Incident: Grade the incident using the matrix (Appendix 6) by taking into account the consequences and the Recurrence/ Likelihood.

- **NONE:** No obvious harm. No injury/minor injury not requiring first aid.
- **MINOR:** Non-permanent harm, less than 3 days off work, complaint possible, inefficient short to medium term operational management.
- **MODERATE:** Semi-permanent harm, 3+ days off work, complaint likely, potential long term service disruption.
- **MAJOR:** Major permanent harm, complaint expected, temporary service closure.
- **CATASTROPHIC:** Death, complaint certain, extended service closure.

SECTION 3 – Please give a full summary of the incident, describe clearly and concisely what happened. **ONLY FACTS SHOULD BE REPORTED NOT PERSONAL OPINIONS.**

SECTION 4 – What actions did you take immediately to prevent the incident happening again?

SECTION 5- What changes will be made as a result of this incident? You may require the support of your Line Manager for this part.

SECTION 6- Please ensure you print your name clearly and provide us with all the appropriate details.

SECTION 7 – This section is to be completed by the Line Manager. It is the role of the manager to make suitable and sufficient assessment of any risk implications, which may arise from the incident reported and take appropriate action. Please state whether a risk assessment is required. If no, clearly state why not.

APPENDIX 6

Risk Assessment Matrix

All incidents should be risk assessed by the investigating manager using the matrix set out below. Further information on risk assessment can be found in the CCG’s Risk Management Policy. Once the likelihood and the impact score have been established, a total risk score can be determined in line with the scoring matrix below:

		Impact				
		1 Insignificant	2 Minor	3 Moderate	4 Major	5 Catastrophic
Likelihood	5 Certain	5	10	15	20	25
	4 Likely	4	8	12	16	20
	3 Possible	3	6	9	12	15
	2 Unlikely	2	4	6	8	10
	1 Rare	1	2	3	4	5

The risk grade obtained from the risk matrix will be assigned levels and investigations as set out in the table below.

Remote	1 - 3	Normal risks which can be managed by routine procedures
Low	4 - 6	Remedial action plan monitored locally by risk owner and team, 6-monthly
Medium	8 - 12	Requires actions which are to be implemented as soon as possible, remedial action plans to be monitored by Joint Commissioning Committee, 3-monthly
High	15 - 25	Immediate action, remedial action plans to be monitored by Joint Commissioning Committee, 3-monthly