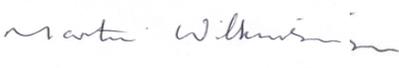


Health, Safety & Environment (HSE) Policy Statement and arrangements for our Society		
Martin Wilkinson Chair	Accountability for HSE lies with our Society Board They have delegated responsibility to the Chair who will ensure HSE is given priority in all aspects of the work and services we provide.	
Properties & HSE Manager	has day-to-day responsibility for ensuring this policy is put into practice	
Statement of general policy	Responsibility of: Name/Title	Action/Arrangements
Prevent accidents and cases of work-related ill health by managing the HSE risks in the workplace. (See full policy for further detail)	Properties & HSE Manager	Relevant risk assessments have been or will be completed and actions arising out of those assessments implemented and reviewed as and when working habits or conditions change.
Provide clear instructions and information, and adequate training, to ensure employees and volunteers are competent to do their work	Martin Wilkinson – Chair & Properties & HSE Manager	Staff and subcontractors are given necessary HSE induction. Staff and volunteers are provided with appropriate training (including, but not limited to, fire safety, working at height, asbestos awareness and electrical safety) and personal protective equipment.
Engage and consult with employees and volunteers on day-to-day HSE conditions	Martin Wilkinson – Chair & Properties & HSE Manager, All staff and volunteers.	Staff and volunteers are routinely consulted on HSE matters as they arise and also formally consulted at regular HSE performance review meetings or sooner if required.
Implement emergency procedures – evacuation in case of fire or other significant incident.	Properties & HSE Manager	Escape routes and public area are well signed and kept clear at all times. Evacuation plans are tested < Quarterly and updated to meet changing needs.
Maintain safe and healthy working conditions, provide and maintain plant, equipment and machinery, and ensure safe storage/use of substances. (See full policy for further detail)	Properties & HSE Manager	HSE will be centred on the needs of individual residents and our commitment to provide them with a safe, secure and comfortable home. Systems are in place for routine inspections and testing of equipment and machinery and for ensuring that action is promptly taken to
Signed on behalf of the Society by Martin Wilkinson, Chair	27 th July 2020	
HSE law poster is displayed at	Each House	Notice Boards in Cecil - Kitchen/ Park -Laundry Room
First-aid box is located:	Each House	Kitchen
Accident book is located:	Each House	Kitchen

Where required, accidents and ill health at work are reported under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations).

Health Safety & Environment (HSE) Policy

1. Context, Aims & Objectives of this policy

Our Society operates two Supported Houses accommodating up to a total of 18 of people. We employ 12 staff, most on part time contracts. Some Trustees/Volunteers act as direct line managers to particular employees. Other employees report to a House Manager. We are not CQC registered, do not provide 24 hour cover and support, and staff are not “on call” to residents outside of their regular cook/housekeeper duties.

This policy has been produced in accordance with legislation and guidance to ensure we have a Health, Safety & Environment (HSE) policy that is specific to our managerial and service activities as described above. Its aims are to set a framework to enable us to continually improve our HSE arrangements. We encourage you, our trustees, employees and volunteers, to improve HSE performance by challenging work practices and participating in discussions to drive and enable change.

In order to achieve compliance with this policy, our objectives are to:

- set and maintain high standards for HSE throughout our organisation
- disseminate these objectives and standards, and relevant information on safety and health, to our staff, residents and volunteers
- identify hazards, the risks associated with them, and where possible remove, control or reduce the hazards and risks involved
- monitor all work areas for HSE compliance
- provide adequate resources to enable us to properly implement this policy and monitor its effectiveness
- make visitors, contractors, temporary workers and third parties aware of their respective HSE responsibilities and duties as appropriate
- ensure that those who work or provide services for us are given the necessary information, instruction, training and supervision to enable them to do so in a safe and healthy manner.

With regard to HSE management, we recognise our general duty with regard to the health and safety of all employees, residents, volunteers, contractors, visitors and others affected by our work activities under the Health and Safety at Work Act 1974 and any other regulations which may apply. We aim to ensure compliance and, so far as is reasonably practicable, take the required action through our HSE management systems to reduce risks, categorised under the following headings. Also to actively involve and consult with employees, residents, volunteers and other stakeholders for this purpose

- Safe premises and systems of work
- Safe use, handling, transport and storage of substances and articles
- Provision of information, instruction, training and supervision
- Safe place of work
- Safe working environment with adequate welfare facilities

We will establish arrangements to comply with the management of HSE Regulations by:

- carrying out suitable and sufficient assessment of risks using the five step process of hazard Step 1- identification, Step 2 -determining who is at risk, Step 3 - evaluate and control risks, Step 4 - record findings and Step 5 - review and revise management systems.
- implementing management systems which achieve a balance between the systems and behavioural aspects of HSE management.
- establishing competent people in each role through selection, personal development and HSE training and procedures during induction and for specific workplace activities, with refresher training provision as required.
- developing suitable emergency procedures for potential significant events, incidents or infections with contingency arrangements.
- providing HSE information to residents, employees, volunteers, contractors and others affected by

- our activities.
- co-operating with local authorities, regulatory and other organisations to safeguard HSE compliance, control measures and promote good practice.
- reviewing the effectiveness of our external contractors overall HSE performance.

2. HSE ORGANISATION

Chair

- Our Chair has overall responsibility for HSE, ensuring adequate governance and management control systems are implemented, monitored, reviewed and that they are kept up to date aiming for continual improvement.
- S/he will provide leadership; promote a HSE culture with risk management based upon prioritisation underpinned by suitable and cost effective resource allocation.

Board Members

- Board members, individually and collectively, are responsible for ensuring that there are legally compliant and effective HSE control systems in place and that these are regularly monitored and reviewed.
- Will assist in ensuring a positive HSE culture is embedded within the organisation
- Will ensure HSE Management is based on prioritisation of risk and the appropriate allocations of resources to lower the risk to an acceptable level.
- Ensure HSE is on the agenda, and performance against key targets reported at, all Board meetings.
- Ensure policies and procedures are reviewed and updated in line with legislation, guidance and best practice with the involvement of competent advice.

Managers, Trustees and Volunteers with Designated HSE and/or other Managerial Responsibilities

- Delegate, co-ordinate, plan and integrate HSE management systems working with staff to ensure legal and regulatory compliance for housing services.
- Provide leadership and promote a positive operational HSE culture, safe systems of working and good standards of practice.
- Identify and prioritise actions in response to identified HSE risks resulting from risk assessments, monitoring and reporting systems.
- Provide structures, procedures and resources for information, instruction, supervision and training of employees and volunteers to enable HSE competences and safe systems of working.
- Support the implementation of systems for routine HSE consultation with employees, residents, and volunteers.
- Co-ordinate appropriately to develop, plan, implement, monitor and review management systems which support compliance with legal, regulatory and good practice requirements.
- Work with managers to identify HSE risks, the prioritisation and implementation of suitable control measures, contributing to the provision of reports to our Board.
- Ensure due diligence systems are in place for the selection of service providers and contractors for tendering and procurement.
- Ensure appropriate standards of safety and quality management across our organisation
- Ensure systems are in place to handle complaints effectively.
- Ensure policies and procedures are kept up to date and in line with current guidance and industry standards.
- Ensure organisational safety & quality plans are formulated and tracked to ensure compliance.
- Support compliance with HSE legislation and other legal and regulatory requirements for housing services.
- Where required, carry out HSE inspections, advisory visits and prepare written reports with recommendations to improve HSE.
- Identify learning and development needs of staff and to ensure that a suitable and sufficient programme of training and instruction is in place relating to HSE related subjects.

- Monitor and review risk assessments, identified control measures and action taken.
- Record and monitor accidents, injuries, dangerous occurrences, occupational ill health and incidents using the information to measure performance and to identify HSE management priorities for continual improvement & produce HSE reports as required.
- Ensure plans are in place to effectively deal with emergencies or on-going arrangements should emergency shelter or accommodation be required.
- Provide information to all relevant stakeholders on matters which will affect their HSE relating to our premises and activities.

Duty House Managers

- Carry out routine day to day HSE management, risk control systems and good practice standards to maintain safe and quality driven working practices within our premises.
- Ensure staff and residents are aware of all emergency procedures and contacts.
- Support trustees and volunteers in identifying and providing to line managers HSE risks arising from risk assessments, accident and injuries reports, routine inspection checks and audits.
- Support trustees and volunteers in providing information, instruction, supervision and in-house learning and development for employees and volunteers working within the premises.
- Support trustees and volunteers in displaying HSE information for residents and visitors, taking care to maintain a homely environment.
- Ensure contractors and service providers working on our premises are informed of evacuation procedures and emergency exits.
- Liaise with their line management for advice and support in relation to HSE concerns.
- With the support of the HSE manager and secretary, implement and maintain an up to date HSE file for each premises and service.
- Promote a positive HSE culture, safe systems of working and good quality practice standards within the house, leading by example.

All Employees

- Are required to co-operate with preventative and protective measures to safeguard and promote HSE.
- Must participate in induction, general and specific work activity HSE learning and development programmes.
- Need to take reasonable care to promote and ensure their own and others' HSE.
- Report any HSE concerns to their line manager, nominated HSE representative and the Board.
- Must not intentionally or recklessly interfere with or misuse anything provided in the interests of health, safety or welfare.

Schedules Appended to this Policy

HSE Risk Assessment and other Arrangements

Detailed organisation arrangements for HSE matters within our Society

HSE Risk Management, Audit and Inspection Questions

The first two Schedules detail the relevant organisational arrangements for our Society and support the actions, arrangements and organisation described in the HSE Statement and sections 1 and 2 above. The third Schedule of Risk Management, Audit and Inspection Questions may be helpful for staff or volunteers when considering potential risks and the related issues and arrangements involved. Only some of these will be applicable or relate to our society/situation.

Schedule of HSE Risk Assessment and other Arrangements

HSE information and guidance is provided in the following pages.

Documentation for each house is stored electronically by the secretary with paper copies held in the HSE file in the kitchen of each house, both of which are retained in accordance with the document retention policy.

Arrangements by Category.

The categories included in this schedule are:

- A - Risk Assessment,
- B - Fire Safety & Emergency Procedures
- C - Reporting Accidents and Incidents
- D - First Aid Training and Provision
- E - Safe Premises and Equipment
- F - Services, G - Safe Handling and Use of substances
- H - Infection Control, I - Food & Hygiene Safety
- J - Environment & Waste
- K - Occupational Health
- L - Vulnerable People
- M - Working at Height
- N - Manual Handling
- O - Learning & Development
- P - Display of HSE Information
- Q - Contractor Safety
- R - Asbestos
- S - Display Screen Equipment (DSE) Safety
- T – Monitoring & Audit
- U – Smoking
- V – Lone Working.

A Risk Assessments

Risk assessments will be proactively completed for specific activities or concerns and reactively completed for accidents or incidents by our designated Trustee/Volunteer or other suitably competent person.

Unless otherwise indicated, they will follow the HSE five step process

(– see *HSE: Risk Assessment- a brief guide to controlling risks in the workplace and Risk Assessment and Management Guidance Notes*)

Step 1: Identify the hazards

Step 2: Decide who might be harmed and how

Step 3: Evaluate the risks and decide on precautions

Step 4: Record significant findings

Step 5: Review the assessment and update if necessary

- Our general risk assessments for hazards associated with general work activities, locations, equipment and processes and are based on a three by three risk matrix to determine the risk level for severity and likelihood outcome. Control measures identified are put into an action plan and reviewed.
- Specific risk assessments need to be used for some risks to individuals, complex tasks and policy areas; for example, fire, hazardous substances, manual handling, display screen equipment, lone working, use of equipment, occupational health, pregnancy and young persons.
- Information and practical training will be provided to any staff and volunteers expected to complete risk assessments.
- Outcomes and actions from risk assessments are reviewed and reported to the Board
- Employees and volunteers are required to report any workplace hazards or concerns to a designated Volunteer or Trustee or line manager.

The risk assessment process is not about creating huge amounts of paperwork; rather it is about

identifying and taking sensible and proportionate measures to control the risks. It should be noted that personal risk assessments are dynamic as the condition of the individual involved can change quite quickly and need to be reviewed regularly for relevance. If changes are made, they must be communicated to the individual and to those supporting him or her.

B Fire Safety and Emergency Procedures

We recognise our responsibility for fire safety management, and the measures identified through risk assessment to reduce and control the risks of fire and to enable safe evacuation of all persons from the premises to a place of total safety – see Regulatory Reform (Fire Safety Order) 2005.

Our evacuation strategy is:

Simultaneous evacuation where everyone leaves the building when the alarm sounds.

We have identified arrangements for the effective management of fire safety within our premises. Our operational fire management framework is based upon risk assessment and the implementation of control measures to prevent and protect residents, employees, volunteers, contractors and property from the risk of smoke, fire and damage to building structures.

Fire safety planning and procedures take into account person-centred risk assessment and the strategies needed to address the specific risks associated with vulnerable older residents together with the nature and purpose of service activities.

It is presently anticipated that our residents would be able to evacuate the building if required to do so. If this becomes difficult due to increased age, impaired mobility or other needs, discussions will take place with the residents around how best to meet those needs, in their best interests.

Key procedures include:

- The regular (6 monthly) completion of an individual fire safety support, needs and risk assessment for each resident. In essence, where we consider that a resident is reaching a stage where we can no longer keep them safe within the building, we will encourage them and their family /sponsor to seek more suitable care facilities. If necessary, we would issue a letter to this effect should the resident, family or e.g. Social Services, disagree with our assessment.
- Personal Emergency Evacuation Plans (PEEPs) developed for each resident not capable of meeting the plan
- PEEPs for any other disabled or vulnerable person working or visiting the premises.
- Providing fire safety information, induction and mandatory learning and development for employees and volunteers.
- Maintenance and inspection of fire safety detection, warning and protective systems.
- Fire equipment and emergency evacuation routes are routinely checked, monitored and recorded.
- Fire drills are carried out at regular intervals (< quarterly), monitored and recorded together with any identified actions for improvement of fire safety and evacuation procedures.
- Fire risk assessments have been carried out and are routinely reviewed.
- Fire audits are completed annually on all premises to ensure management procedures are carried out correctly and the risk assessment reviewed.
- A building design layout plan that shows the fire protected areas or zones within each premises is displayed next to the fire panel.
- Fire evacuation and emergency contingency plans are available and easily accessible in each premise and kept up to date.
- Employees will be given a fire safety induction and suitable and sufficient training and instruction on safety arrangements within their work place.

Each employee, volunteer and contractor will have a responsibility for maintaining fire safety measures. Fire safety will be promoted and sustained through consultation with residents, employees, volunteers and others affected by our activities.

We will work in co-operation and co-ordination with TAS, authorities, registered bodies and premises with shared tenancy to promote and maintain effective fire safety management and good practice within its premises.

C Reporting Accidents and Incidents

All employees are required to immediately report all accidents, injuries and ill health associated with work activities and, as a required legal duty, to notify the HSE Executive as guided in the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

RIDDOR requires employers and others to report deaths, certain types of injury, some occupational diseases and dangerous occurrences that 'arise out of or in connection with work'. Generally, this covers incidents where the work activities, equipment or environment (including how work is carried out, organised or supervised) contributed in some way to the circumstances of the accident. Other reporting requirements relevant for health and social care are:

Over-seven-day incapacitation of a worker: Accidents must be reported where they result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury. This seven day period does not include the day of the accident but does include weekends and rest days. The report must be made within 15 days of the accident.

Over-three-day incapacitation of a worker: must be recorded, but not reported where a person has been incapacitated for more than three consecutive days.

Injuries and ill health involving people not at work (for example residents or visitors): Accident or injuries which result in a person not at work being taken to hospital for treatment, must be reported if it arises out of or is in connection with a work activity being undertaken by others. A resident falling is only reportable under RIDDOR when the fall has arisen out of, or in connection with a work activity which includes where equipment or the work environment (including how or where work is carried out, organised or supervised) are involved. Arrangements in place are as follows:

- Each house maintains an accident reporting book compliant with the Data Protection Act/ GDPR **.
- A record of accidents and incidents is maintained within each premise and for each service.
- A record of residents' falls will be completed and kept secure with personal plans and risk assessment records.
Falls are monitored and reported every month as part of accident and incident reporting procedures.
- All accidents, injuries, illnesses and incidents will be recorded and reported routinely to the Board/ HSE lead/ line manager as part of the routine reporting procedure.
- Accident investigation procedures are performed to identify the causes of accidents and incidents and the implementation of suitable preventative and control measures. The generic risk assessment form and system is used in this process for minor events. Significant events require formal investigation with the identification of root causes to enable both local and organisational learning and improvement.

** to comply with the Data Protection Act 1998, personal details entered on accident report forms must be kept confidential.

The personal information collected on an Accident Report Form will be processed by the Administration Manager/ Board/ HSE lead/ line manager in accordance with GDPR (Data Protection until May 2018) terms and conditions, held securely, and not made available to any third party unless permitted or required to do so by law.

The information will be used for accident reporting and monitoring; for the purpose of meeting our statutory, legal and insurance requirements and retained in accordance with our record retention schedule.

D First Aid Training and Provision

It is important to ensure that first aid facilities and resources are in place in the event of an accident or incident to provide immediate aid to employees. It is strongly recommended by the HSE that this is extended to non-employees who may be injured or become ill.

The following steps are in place:

- A risk assessment has been completed to establish the appropriate level of provision and all duty managers have received first aid training.
- Managers and designated staff in supported housing will be trained in 'Emergency First Aid at Work'.
- First Aid boxes, located in secure, accessible places near to hand washing facilities, are in place.
- Any large scale events or activities will include first aid risk assessment and adequate first aid provision.
- First aid boxes will be checked and restocked following an incident and at least monthly by the designated first aiders.

E Safe Premises and Equipment

Legislation governing HSE relating to our houses and equipment mainly relate to the HSE at Work Act 1974, Workplace Health, Safety and Welfare Regulations 1992, Provision and Use of Work Equipment Regulations 1998, Lifting Operations and Lifting Equipment Regulations 1998, Gas Safety (Installation and Use) Regulations 1998, Electricity at Work Regulations 1989, Control of Substances Hazardous to Health Regulations 2002.

These Acts and Regulations cover installation, servicing and maintenance of installations and equipment and water safety to prevent Legionella, burns and scalding. To meet these regulations:

- We professionally maintain our buildings and properties in a safe state and in accordance with current legislation.
- Building and personal security are maintained with regular reference to Good Practice Standards and regular consultation with Police Crime Prevention Officers and other specialists.
- All equipment will be routinely inspected, serviced and maintained in safe condition by competent persons and in accordance with suppliers' manuals and requirements for statutory inspections.
- Residents, volunteers and employees using specialised or new equipment such as hoists or stair chair lifts will receive suitable information, instruction, training and supervision.
- Routine HSE housekeeping checks and inspections for each house and garden will be carried out, recorded and any defects reported.
- All portable electrical appliances (including those of residents) are tested to a regular schedule (or when brought into the house by a resident) by our trained Warden. Frequency of testing is based upon risk assessment and compliance with regulations. Our PAT testing equipment is recalibrated yearly.

F Services

Water

- A Legionella risk assessment is undertaken by an external contractor every two years, or when significant changes occur. We understand that the assessments comply with ACOP L8 HSG 274.
- Appropriate schemes of work are defined by the contractor based on the risk assessments for monitoring and microbiological sampling as required for the type of water system in situ. This will include for example:
- All showerheads and spray taps are inspected and cleaned at routine recommended intervals, (< Quarterly).
- Our water systems are maintained in safe condition subject to the required safety checks, maintenance and servicing.
- Inspection of water storage tanks and cleaning takes place as required (we now have a fully pressurised unvented system in each house)
- Water temperatures are regularly monitored as being within required limits to prevent harm and adjustments made as needed.
- Little used outlets will be flushed weekly

- 5 years records of monitoring will be kept.
- Any non conformities or positive sampling will be reported to the Property Manager who will seek competent advice

Gas

- Gas safety checks are carried out on all individual gas appliances in our houses and a completed safety certificate is obtained for each premise listing all gas appliances each year within a twelve month period.
- We use Gas Safe registered contractors and check they are appropriately qualified for domestic, commercial or LPG systems.
- The checks include appliances, pipe work and flues.
- A strict monitoring regime is in place that highlights properties that are due for inspection 30 days in advance.
- The Property Manager is responsible for ensuring they are undertaken by our contracted supplier in a timely manner. Certificates and remedial actions are referred to the Properties Manager to ensure that remedial actions are completed where appropriate.
- We have no gas fittings in any of our rooms

To report a gas or carbon monoxide emergency services you must call the National Gas Emergency Service 24 hours a day on 0800 111 999

Electricity

We are responsible for ensuring the electrical installation in our properties is maintained in a safe condition and that equipment that staff are required to use is safe and without risks of harm. To ensure compliance:

- Routine periodic inspections of wiring installations are undertaken by suitably qualified electricians and where it is indicated that the system is dangerous, potentially dangerous or requires improvements remedial work will be undertaken to ensure the safety of persons on premises.
- All portable electrical appliances will be tested in accordance with the HSE guidance 'Maintaining portable electrical equipment in low risk environments' (INDG236 (rev3), published 09/13).

We must maintain electrical equipment if it can cause danger, but the law does not say how we must do this or how often. Our Property Manager will decide the level of maintenance needed according to manufactures guidance, to the risk of an item becoming faulty and how the equipment is constructed.

Not every electrical item needs a portable appliance test (PAT). In some cases, a simple user check and visual inspection is enough, e.g. checking for loose cables or signs of fire damage and, if possible, checking inside the plug for internal damage, bare wires and the correct fuse.

In our houses and offices portable appliance testing is carried out annually based on HSE guidance INDG 236, Maintaining portable electric equipment in low risk environments and including new items

We test residents portable appliances as part of the programme described above.

All portable appliances will be recorded on a register to ensure they are not missed. Any that are found to be defective will be taken out of use until they have been repaired or disposed of.

A member of our staff who is suitably trained to demonstrate competence to undertake portable appliance testing will do so. The device will have been calibrated in the twelve months prior to the testing

G Decent Homes and HHSRS

Following a self-assessment exercise, we believe our properties meet this standard.

H Safe handling and Use of Substances

Our responsibility for meeting the Control of Substances Hazardous to Health Regulations 2002 (COSHH) for is recognised.

Its requirements will be applied to daily working practices within our premises..

- Material safety data sheets are present on sites where staff are required to use hazardous substances.
- All hazardous substances have had a COSHH risk assessment which is relevant to the house, vulnerability of its occupants and the nature of the activities undertaken
- Risk assessments have taken and will take into account exposure routes through respiration, ingestion and skin exposure and be based upon hazard data sheet information.
- When hazardous chemicals are used, appropriate safeguards are or will be put in place to minimise risks identified.
These will be communicated to potential users.
- Any chemicals causing health risks will be eliminated, substituted with a safer option (if possible) or mitigated.
- All hazardous substances will be stored, handled, used and disposed of in line with the requirements highlighted by the manufacturer.
- Employees are provided with information and training on COSHH.
- Residents receiving 'Domiciliary Oxygen Therapy' will need to follow appropriate policies and procedural guidance for risk assessment and control measures.
- Suppliers are required to provide instruction, training, on line support and emergency contact numbers.

I Infection Control

- House managers must record and report any infectious disease outbreaks to the Board.
- The importance of stringent hygiene measures especially for cooks, catering staff or those involved with food handling will be reinforced through food hygiene procedures
- If an infectious outbreak occurs within a supported house or a resident returns from hospital with an infection, house managers/house committee chairs are required to contact their local infection control nurse for advice. Procedural guidance according to the infective organism and control measures are to be put in place.
- Infection control procedures, information and guidance are provided on the Abbeyfield Connect Website for specific infectious disease outbreaks.
- A supply of personal protective equipment will be used by employees for an infection outbreak or for the care of specific residents with an infection.
- An emergency infection control spill kit will be prepared in each premise.
- A system will be put in place to separate soiled or infectious linen with laundry rooms being divided into dirty and clean areas.
- Infectious waste products will be kept securely and disposed of following local council waste control measures.
- A pandemic contingency plan will be in place nationally and for each house.

J Food and Hygiene Safety

We work within the Food safety Act 1990 as amended, the 2006 HACCP regulation guidance, the 'Safer Food Better Business' specific for sheltered housing.

Our houses are required to maintain effective means- including routine audits, risk analysis and supplier checks- to ensure the safety of supplied food and facilities.

- Our food is all sourced, stored, refrigerated, prepared, served and managed within the 'Safer food, better business' handbook provided by the Foods Standards Agency.
- Our houses will continue to use systems that support HACCP and provide a suitable management and recording system according to their size and catering provision.
- Training according to HACCP principles has been provided and will regularly be updated for all staff involved in food preparation and hygiene activities.
- We actively promote nutritional wellbeing for all residents.

- A list of all food allergens is available at all premises to detail what is present within all meals served.
- Where a resident lacks capacity to manage the risk for food allergies etc. staff will ensure appropriate controls are in place to keep them safe.
- The importance of stringent hygiene measures especially for cooks, catering staff or those involved with food handling will be reinforced through food hygiene procedures and fitness to work must be completed before any person returns to work following an infectious illness.

K Environment and Waste

We will comply with all relevant environmental legislation including the duty of care relating to waste and environmental protection.

These include duties imposed under the Environmental Protection Act 1990 (including the Duty of Care Regulations), the Controlled Waste Regulations 2012, the Hazardous Waste Directive 2011, the Hazardous Waste Regulations 2005 and the revised EU Waste Framework Directive. To do so we will:

- Keep waste to a minimum using the waste hierarchy and taking reasonable steps to prevent, reuse, recycle or recover waste (in that order).
- Sort and store waste safely and securely.
- With the exception of waste collections by Fylde Borough Council, ensure a waste transfer note is completed for each load of waste that leaves our premises.
- With the exception of Fylde Borough Council, check if the waste carrier is registered to dispose of waste. Not allow the waste carrier to dispose of waste illegally.

To assist in protecting the environment we will endeavour to:

- Source materials from sustainable sources
- Reduce our consumption of natural resources and encourage the efficient use of resources within our business
- Seek to reduce the carbon footprint of our organisation and its activities
- Ensure environmental aspects, including those affecting climate change are taken into account in the procurement of goods and services
- Give due consideration to environmental issues and energy performance in the acquisition, design refurbishment, location and use of our buildings
- Manage our operations to prevent pollution by identifying the potential source, pathway and receptors of any process that could be harmful and ensuring appropriate controls are in place.
- To work with our contractors and assisting in meeting their environmental duties when working on our behalf or undertaking
- Ensure due diligence forms a part of all processes when outsourcing waste management
- Ensure staff are aware of our policies on environmental protection and recycling initiatives.

L Occupational Health

We recognise our responsibility to promote and support the safety, health and wellbeing of our employees and volunteers. As such:

- Workplace and activity risk assessments will be carried out by line managers for employees and volunteers that will be specific to roles and work activities. Specific hazards to a working environment and activities to be undertaken will be identified with information and instruction provided on the control measures and preventative procedures in place.
- All staff working at computers who meet the criteria for free eyesight tests specific to Display Screen Equipment use will be provided with funding from us as an employer for eyesight tests and, where it meets specific requirements, a standard pair of glasses (i.e. where your normal glasses are not suitable for display screen work). This is in line with the HSE Guidance: <http://www.hse.gov.uk/pubns/indg36.pdf>
- Where appropriate, we will ask for consent to contact health care professionals for a medical report
- In addition, where appropriate we will signpost staff to organisations where they have requested support with specific issues to help maintain their health and wellbeing

M Vulnerable People

We recognise our regulatory obligations to vulnerable people including those in the HSE at Work Act 1974, Management of HSE at Work Regulations 1999 and the Equality Act 2010. To meet these, all vulnerable persons including residents, people with disabilities, pregnant workers, lone workers and young persons will be risk assessed and measures taken to control and mitigate identified risks. Actions to be taken will be incorporated within our management systems.

N Working at Height

We recognise our regulatory obligations to comply with the Work at Height Regulations 2005. Our Property Manager will ensure all work at height is properly planned, supervised and carried out by competent people with the skills, knowledge and experience to do the job. They must use the right type of equipment for working at height. Our employees must take a sensible approach when considering precautions. Low-risk, relatively straightforward tasks will require less effort when it comes to planning and there may be some low-risk situations where common sense dictates that no particular precautions are necessary. Risk assessments will be undertaken to ensure suitable controls can be put into place. Staff must consider the height of the task, the duration and frequency, and the condition of the surface being worked on.

Before working at height, staff must follow these simple steps:

- Avoid doing so where it's reasonably practicable. Balance the level of risk against the measures needed to control the real risk in terms of money, time or trouble. Do not take action if it would be grossly disproportionate to the level of risk to do so.
- Where work at height cannot be easily avoided, use the right type of equipment or find an alternative place of work that is already safe in order to prevent falls.
- Minimise the distance and consequences of a fall by using the right type of equipment where the risk cannot be eliminated.

O Manual Handling

We recognise our regulatory obligations to comply with the Manual Handling Operations Regulations 1992.

Manual handling is defined as "any transporting or supporting of a load (including the lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or bodily force" and the regulations require the following steps to be put in place:

1. avoid hazardous manual handling operations so far as is reasonably practicable
2. assess any hazardous manual handling operations that cannot be avoided
3. reduce the risk of injury so far as is reasonably practicable

The main risk factors or conditions associated with the development of injuries in manual handling include:

- Awkward postures (e.g., bending, twisting)
- Repetitive motions (e.g., frequent reaching, lifting, carrying)
- Forceful exertions (e.g., carrying or lifting heavy loads)
- Pressure points (e.g., grasping [or contact from] loads, leaning against parts or surfaces that are hard or have sharp edges)
- Static postures (e.g., maintaining fixed positions for a long time)

Employees are required to:

- Follow systems of work in place for their safety
- Use equipment provided for their safety properly
- Cooperate with their employer on HSE matters
- Inform their employer if they identify hazardous handling activities
- Take care to make sure their activities do not put others at risk.

P Learning and Development

All employees and volunteers will receive HSE induction and role specific learning and development. Further learning and development will be provided as necessary with records maintained as evidence.

- Any specific training needs will be identified for particular roles and work activities which include young

persons, lone workers, pregnancy, volunteers and those working at other locations.

- Notification of sources of HSE advice is displayed on notice boards.
- Staff should not undertake health and safety related tasks for which they have not been appropriately trained

Q Displayed HSE Information

Key HSE information is displayed (or in some cases accessible) within each premise which includes:

- HSE Law Poster (or pocket guides issued)
- Certificate of Employer's Liability Insurance
- HMO Licence
- Our HSE Policy Statement
- Action in the event of a fire or emergency where required.
- First aiders and appointed persons
- The location of first aid box
- Emergency fire and contingency plan

R Contractor Safety

All construction and contractual work must be compliant, as appropriate, with The Construction (Design and Management) Regulations 2015 (CDM 2015) and follow good practice standards when working for us. These guidelines mainly concern refurbishment works where the premises may be occupied.

- Ensure that all contractors are CHAS accredited which means that they meet acceptable standards of HSE.
- All contractors used must be capable of meeting the Construction (Design and Management) Regulations 2015 as required.
- Contractors must produce and provide accurate and suitable risk assessments and method statements for each project.
- There must be good understanding and co-operation with our staff and services when working in our occupied premises, making special provisions as required.
- Each project must have a competent site foreman in control that has passed their CSCS tests as well as any trades on site.
- Inspection availability must be provided at all times, with regular progress meetings to discuss the quality of work and HSE issues.
- A sign-in and report to the scheme manager on a daily basis must be implemented and maintained; this includes signing out and that all working areas are left safe and secure with all emergency systems and provisions reinstated and in good working order.
- Daily meetings must be held with the duty house manager to ensure that all parties are aware of the works taking place that day.
- Carry out tool box talks to site workmen before the project.
- Provide appropriate documentation, instruction, information and demonstrations which enable the end users to operate any installations correctly and safely.

S Asbestos

- We continue to comply with the Control of Asbestos Regulations 2012, which imposes a duty to manage the risk from asbestos, by ensuring all of our premises built before the year 2000 have an asbestos survey undertaken.
- In the Park Avenue house where the survey has shown no asbestos was present we will keep evidence of this. No further action will then be required unless new information comes to light, or a more intrusive survey is needed for demolition or refurbishment or for work required in previously inaccessible areas, e.g. under floors, behind walls etc..
- In the Cecil St house where asbestos was detected a programme of removal was undertaken in 2018 by a licenced contractor. However, a full environmental clean of the entire sub floor area was not feasible, so all necessary precautions should be taken in the event that this area needs to be accessed. Warning notices will also remain in place.

- If asbestos containing materials are further discovered in a property, the following actions will be put in place:
- They will be monitored by suitably qualified persons to ensure its condition does not pose a risk of harmful exposure
- The asbestos register and management plan will be updated to reflect the new findings”
- A risk assessment will be undertaken to identify any persons likely to disturb the asbestos and an asbestos management plan (AMP) setting out how ACMs will be managed will be put in place.
- Employees will be given an appropriate level of information, training and instruction and emergency procedures will be place.
- Information on the location and condition will be given to contractors who may work within the building.
- Should there be any adverse events involving asbestos containing materials, competent advice will be sought and appropriate reporting and health surveillance undertaken as advised.
- Where work is to be undertaken on asbestos containing materials, suitable risk assessments and method statements should be in place and any permits to work schemes communicated to house staff to enable them to provide safety information to anyone who may be affected by the work.

Copies of the registers and surveys and management plans will be held electronically and provided on request to relevant stakeholders and within each property.

T Display Screen Equipment (DSE) Safety

DSE Regulations only apply to employers whose workers regularly use DSE as a significant part of their normal work (daily, for continuous periods of an hour or more). These workers are known as DSE users whether they work in a designated office or from home.

We have only one part- time employee, working from home, who does fall into this category.

For this individual we have ensured that

- The workstation in use is appropriately sited on a desk
- The employee has been assessed to reduce risks (in particular to take regular breaks)
- appropriate controls are in place
- the member of staff has been provided with appropriate information and training
- Eye and eyesight tests on request, and special spectacles if needed;
- The assessment will be reviewed when the user or DSE changes.

U Smoking

For fire safety reasons, and also the health and comfort of other residents and staff, our policy is not to permit smoking in any part of our buildings. This requirement is specified in tenancy and employment conditions, and covered by notices displayed in public areas.

V Lone Working

For those working alone (i.e. those members of staff or volunteers who work by themselves without close or direct supervision) additional emphasis is needed on HSE issues, including the duties of the particular post and its associated risks. These might include:

handling of emergency procedures relating to fire, accident and illness:

reacting to verbal abuse/hostility, threats or physical attack:

working in isolated areas (e.g. lofts and cellars) where they might not be able to summon help in the event of accident.

Monitoring and Audit

In compliance with the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999, we will carry out systematic monitoring and audit review using a system of routine checks, risk assessments, inspections, reporting procedures and audits for health and safety.

Routine health and safety checks will be carried out in each premise which will be monitored and reviewed by the property manager, house committee chair or chairman and ultimately the board.

- Effective procedures are to be maintained at each site to facilitate the identification, reporting and correction of hazards.
- A system of routine reporting procedures is implemented for key health and safety areas, which includes accidents, incidents and fire safety events.
- Internal auditing will be carried out annually by property manager, house committee chair or chairman as appropriate.

Review

The content and effectiveness of this Policy and our arrangements will be reviewed and revised as often as is necessary. Reviews will take into account any legislative or other relevant changes, the details of which will be appropriately communicated to our staff.

Schedule of detailed organisation arrangements for HSE matters within our Society

	STATEMENT OF GENERAL POLICY The Society undertakes:	RESPONSIBLE PERSON: Title	ARRANGEMENTS/ ACTION
1	To maintain safe and healthy working conditions, to minimize the potential for accidents and work-related ill health and provide adequate control of HSE risks arising from our work activities.	Chair	Relevant risk assessments completed and actions arising out of those assessments implemented. (Risk assessments reviewed every year or earlier if working habits or conditions change.)
2	To maintain safe and healthy conditions for residents and visitors, to minimize the potential for accidents and ill health related to work undertaken by the society.	Chair	The other items in this General Policy are the primary means of ensuring that our residents and visitors have safe and healthy conditions to live in.
3	To review accidents, illness and dangerous occurrences arising from work activity and implement safety related improvements.	HSE Volunteer	Procedure is in place to review accidents, illness and dangerous occurrences and to report events under RIDDOR as required by HSE. (Reporting of Injuries, Diseases and Dangerous Occurrences Regs) www.hse.gov.uk/riddor Tel: 0845 300 9923
4	To work with our suppliers and contractors to maintain safe and healthy methods of working.	Properties Manager	Arrangements for liaison with and supervision of contractors is in place.
5	To provide adequate training, information and instruction, to ensure our employees are competent to do their work safely. To provide adequate briefing to residents on the safety requirements and emergency arrangements.	HSE Officer, with House Committee and House Managers	Staff and subcontractors are given necessary HSE induction. Staff are provided with appropriate training (including hygiene, working at height, asbestos awareness and electrical safety) and personal protective equipment. We ensure that contractors are suitably qualified and HSE compliant to enable them to operate safely. Residents briefed on safety requirements and emergency arrangements by various means as necessary.
6	To provide adequate supervision of employees and contractors.	House Managers House Chairs Properties Manager	Domestic staff are supervised by the respective House Manager. House Managers are supervised by the House Chair and Committee members. Contractors and maintenance personnel are supervised by the

			Properties Manager.
7	To engage and consult with employees on HSE matters and provide advice and supervision on occupational health.	House Managers House Chairs Properties Manager	Supervision as in 3 above. Staff routinely consulted on HSE matters as they arise but also formally consulted at regular HSE performance review meetings or sooner if required.
8	To advise on emergency arrangements, safety systems to mitigate risks and the preparation of implementing procedures. To implement emergency procedures – evacuation in case of fire, accident, illness or other incident.	HSE Volunteer House Managers	Emergency procedures and notices (fire, accident, illness) in place. Residents and staff briefed on the Emergency arrangements. Escape routes and fire doors well signed and kept clear at all times. Evacuation plans are tested from time to time and updated as necessary.
9	To ensure safe storage and use of substances.	House Managers	Toilets, washing facilities and drinking water provided for staff, residents and visitors. COSHH assessments of materials used in the properties are undertaken and the requirements implemented
10	To provide and maintain safe appliances, plant, equipment, machinery and services within the properties.	Properties Manager	Systems are in place for routine examination, inspection, testing and maintenance of appliances, equipment and machinery, to meet statutory requirements and good practice, and for ensuring that action is promptly taken to address any deficiencies. Refer to Risk Assessment and Management Guidance Notes and to the Property Servicing Test Plan and Record
11	To safely manage any Asbestos identified on the premises during certified inspection of the property with regard to possible contact by staff and others who may need access to affected areas. For survey details / requirements see http://www.hse.gov.uk/ASBESTOS/surveys.htm	Properties Manager	We have up to date Asbestos surveys and Management Plans in place to ensure that all associated risks are mitigated as far as is reasonably practicable. Any tradesmen needing to work in the area are notified in advance.

HSE poster is displayed at:	Cecil St in the kitchen Park Avenue in the kitchen		
First-aid box and accident book are located at:	Cecil St in the kitchen Park Avenue in the Laundry Room		
Signed: (Employer) – Chairperson		Date:	27/07/2020
Subject to review and monitoring by:	HSE Officer	Every:	24 months or sooner if work activity changes

Schedule of Risk Management, Audit and Inspection Questions

This list of questions for the topics mentioned below may be helpful to staff or volunteers when considering the issues involved. Only some of these will be applicable or relate to our society/situation.

Accident and Incident Reporting

Asbestos

Burns and Scalds Prevention

Disaster Recovery

Contractor Safety

COSHH

Dangerous and Flammable Substances

Information Protection & Confidentiality

Display Screen Equipment

Electrical Safety

Falls

Fire Safety

First Aid

Gas Safety – Mains Supply

Gas Safety – LPG (Liquid Petroleum Gas) Flat Doors (beyond a flat door is the person's own home)

HSE Information

Housekeeping

Infection Prevention and Control

Insurance

Legionella

Lifts

Lone Working

Machinery & Equipment

Moving & Handling

New and Expectant Mothers

Oil Heating Systems

Pest Control

Safeguarding & Complaints

Security

Smoking

Tree Safety

Waste Management

Window & Balcony Safety

Working at Height

Young Persons i.e. apprentices/ work experience (16-18)

Approach and External Areas

Corridors, Halls & Stairs

Cellars and Basements

Communal Lounges and Dining Areas

Communal Toilets and Bathrooms

COSHH Store

Flat Doors (beyond a flat door is the person's own home)

Hazardous Areas - Boiler, lift & electric switch rooms

Kitchens used by staff

Laundry Rooms

Lifts

Maintenance Workshops & Sheds

Offices

Roof Space & Voids

Riser and Access Ducts

Wheelchair, Scooter and Equipment Charging Areas/ Rooms

Accident and Incident Reporting

- 1 Are all accident reports properly completed and submitted?
- 2 Have copies of all RIDDOR reports been centrally filed?
- 3 Are all accidents appropriately investigated to determine the root cause?

Air-conditioning and Extraction

- 4 Are service sheets available to evidence the air conditioning and general extraction ventilation systems been maintained in safe condition?

Asbestos

- 5 Can staff access to the asbestos policy?
- 6 Is there an asbestos survey on site for properties built before 2000?
- 7 Where asbestos has been identified is there an up to date asbestos register?
Is there a risk assessment to identify persons who are at risk of disturbing it who may require training?
- 8
- 9 Is there an asbestos management plan?
- 10 Have responsible persons and those who could disturb it had awareness training?
- 11 Do all contractors sign to say they have seen the documentation?
Are copies of documentation relating to remedial works on asbestos retained in the register/on file? (Removal, encapsulation etc)
- 12 Are all staff aware of emergency procedures relating to asbestos incidents if it is present in their service?
- 13

Burns and Scalds Prevention

- 14 Can staff access the Prevention of Burns and Scalds Policy?
- 15 Where appropriate are suitable risk assessments in place (as per the policy appendices)
If care staff are providing personal care for vulnerable persons are baths and showers checked before full body emersion?
- 16

Disaster Recovery

- 17 Is the disaster recovery plan up to date to take into account any changes in staffing etc?

Contractor Safety

- 18 Are there suitable arrangements in place for when contractors visit or carry out work within the service? (i.e. pre arranged visits, security, checking ID cards / supervising them on site, cordoning off areas where they may need to work, permits to work etc)
Are compartment walls checked by property / maintenance teams after works to ensure they have not breached fire walls and left curtains open?
- 19
- 20 For major works, do all relevant persons have access to the CDM policy?
- 21 Are all appropriate guarantees, warranties and manuals received stored electronically?
- 22 Can staff access the Behaviour that Presents Risks policy?
- 23 Where appropriate have staff had behaviour management training?
Are risk assessments and behaviour management plans in place to support persons who may exhibit challenging behaviour?
- 24
- 25 Where appropriate to the service has staff had dementia awareness training?
- 26 Are suitable arrangements in place for staff debriefs following incidents?
- 27 Are staff made aware of the counselling and support helplines available?

COSHH

- 28 Can staff access the policy on the Control of Substances Hazardous to Health and associated safety memos?
Are material safety data sheets from the manufacturers on site for substances with hazard warning labels which are supplied to and used by staff?
Have COSHH risk assessments been undertaken for the storage, handling, use and disposal of hazardous substances used by staff?
- 29
- 30
- 31 Has all staff that use hazardous substances been given suitable and sufficient training?
If staff are required to replace containers/ refill auto feeds on washers and auto dispensers of chemicals are they trained?
- 32

Dangerous and Flammable Substances

- 33 If petrol is on site for garden equipment, has a risk assessment been undertaken?
34 Do housing staff have access to the oxygen safety memo for housing?
35 Can care home staff access the Oxygen risk assessment?
36 Is the location of the oxygen detailed in the fire risk assessment, fire folder or grab bag and is the fire service aware?

Information Protection & Confidentiality

- 37 Can staff access to the Data Protection policy?
38 Can staff access to the Information Security policy?
39 Can staff access to the Mobile and Remote Devices Security policy?
40 Has staff completed training on data protection and confidentiality?
41 Can staff access the Records Retention policy?
42 Are there appropriate checks on archives to ensure appropriate document retention and destruction deadlines?
43 Are appropriate arrangements in place for document destruction when required?
44 Are suitable arrangements in place for the secure retention of CCTV images?

Display Screen Equipment

- 45 Can staff access the Display Screen Equipment policy?
46 Have all staff that use computers for continuous periods of 1 hour a day on a daily basis completed DSE training and the assessment?
47 Do arrangements take into account those who work from a home office?
48 Have DSE users been informed of their entitlement to eye tests?

Electrical Safety

- 49 Have staff access to the electrical safety memo?
50 Is there an in date periodic 5 year electrical wiring certificate on site? If so on the front does it say satisfactory?
51 If the report is unsatisfactory is there evidence to demonstrate all remedial actions from the report been completed? (see observations / recommendations page for C1, C2 & C3 concerns)
52 Has PAT been completed?
53 Is there a suitable register of portable appliances?
54 Is there an annual calibration certificate for the PAT device to validate the readings?
55 Are suitable controls in place for staff bringing electrical items on site?

Falls

- 56 Can staff access the new Falls policy?
57 Are catering staff in commercial kitchens advised on appropriate/ slip resistant footwear?
58 Are falls risk assessments in place and subject to regular review?
59 Does the documentation system demonstrate lessons learnt and suitable management?
60 Are local falls protocols and falls teams' contact details on site where appropriate to the service?

Fire Safety

- 61 Can staff access the current Fire policy, memos and procedures?
62 Is there a working controlled entry systems to the building?
63 Is there a signing in book to account for persons on premises and is it being used appropriately?
64 Is there an up to date fire risk assessment?
65 Have all recommendations on the action plan been undertaken to the required timescales?
66 Is there a documented fire evacuation strategy in place?
67 Have regular fire drills been undertaken and been effective?
68 Have person-centred fire risk assessments been completed where appropriate?
69 Do all persons who require assistance to evacuate have a PEEPS completed?
70 Is the new fire logbook in place and all relevant checks and servicing completed?
71 If dry powder extinguishers are in place, has a risk assessment been undertaken?
72 Is there a PEEPS summary available?
73 Has all staff had fire safety training on induction and at regular intervals thereafter?
74 Where appropriate, are there an adequate number of fire wardens /marshal on the staff group?

75 As per the fire evacuation equipment manual, has the risk assessment for the supply of
evacuation equipment been completed where appropriate?
Where required under the Provision and Use of work Equipment Regulations has evacuation
76 equipment been serviced annually?(Evac chairs etc)
77 Where in place has designated staff had training on the use of evacuation equipment?
Where more than one company share a building and are responsible persons, is there evidence of
co-operation, communication and consultation on matters of fire safety? (An example would be a
78 separate company providing care or catering)
79 Where installed, has lightening protection been subject to an annual service?
Where in place have external metal fire escapes stairs and walkways had a 3 yearly structural
80 stability check?

First Aid

81 Has a first aid needs risk assessment been undertaken as per the new First Aid Policy?
82 Are an appropriate number of first aid trained personnel available on site/ each shift?
83 Are first aid kits checked monthly by first aid trained personnel?
84 Can staff that handle and prepare food access the Food Hygiene policy?
85 Is there a food safety system (i.e. safer food better business) in place and completed as required?
86 Is special dietary and allergen information available?
87 Do training records demonstrate staff are competent in food safety management?
88 Has kitchen staff been given information on the safe use and storage of catering knives?
89 Is there a food hygiene rating in place?
Has the commercial kitchen extraction been inspected and cleaned? (frequency is determined by
daily cooking hours- up to 6 hrs annual inspection and clean/ 6-12 hours twice a year/ over 12
90 hours quarterly)
91 Are risk assessments in place for the safe use of large scale equipment and machinery?

Gas Safety – Mains Supply

92 Has the gas boilers / heating system been safety checked in the last 12 months?
If there are any recommendations on the Heating gas safety certificate is there evidence to show
93 they been completed?
94 Have the gas tumble dryers been safety checked and the hoses cleaned?
If there are remedial actions on the tumble dryer report is there evidence to show they have been
95 completed?
96 Has gas catering equipment and interlocks been safety checked in the last 12 months?
97 If there are recommendations on the report is there evidence to show they have been completed?
98 Are carbon monoxide detectors in place and regularly tested?
99 Are all gas shut off and isolation points noted in the fire folder?

Gas Safety – LPG (Liquid Petroleum Gas)

100 Have LPG fixed appliances been subject to an annual safety check?
101 Are risk assessments in place for the use of bottled LPG?
Where applicable are LPG BBQ's subject to safety checks prior to use as per Gas Safe
102 recommendations?
Are procedures in place to ensure both ID and qualifications to work on LPG appliances are
103 checked?

HSE Information

104 Is there a HSE Law poster displayed or a pocket guide issue system in place?
105 Can staff access the new HSE Policy?
106 Is HSE on the agenda of staff meetings?
107 Are the Divisional HSE meeting minutes circulated?
108 Is the HSE folder in place and well organised?
109 Have all staff had HSE training specific to their role?
110 Are regular HSE internal checks/ walk through inspections undertaken?
111 Is there an appropriate system in place to report faults and maintenance concerns?

112 If in place Is the maintenance log book audited by managers to ensure maintenance personnel are doing work within the scope of their qualifications, training and knowledge?

Housekeeping

113 Are there clear lines of responsibility for cleanliness within the service?

114 Are cleaning schedules/rotas in place?

115 Are colour coding schemes in place for cleaning equipment?

116 Where applicable are staff trained in infection prevention and control?

117 Are there appropriate arrangements for stock control and ordering of cleaning products?

118 Are procedures in place for deep clean and for changes to schedule during an outbreak?

119 Do cleaning staff have access to appropriate PPE- aprons, gloves, goggles, masks etc?

Infection Prevention and Control

120 Can staff access the infection control policies and procedures?

121 Are regular internal audits and checks undertaken appropriate to the service and activities?

122 Are care staff taught how to wash their hands and put on and take off PPE safely?

Are staff made aware on the policy on prevention of occupational exposure to blood borne viruses?

124 Are staff aware of procedures for needle stick injuries?

125 Are staff aware of guidelines on not returning to work until 48 hours after first formed stool?

126 Have all relevant staff had appropriate training?

127 Where applicable is there a designated infection control lead/ trainer in the service?

128 In care are aseptic techniques used for dressings and catheters?

Are staff advised to check their hands and report any itchy flaky skin which may be a reaction to substances and gloves?

130 Are checks made to ensure suitable PPE is available at all times?

131 Are suitable procedures in place for dealing with outbreaks?

132 Are local protocols and contact details of teams in the area available?

133 Are suitable procedures in place for body fluid clean up and spillages on different surfaces?

Insurance

134 Is the current employer's liability insurance certificate accessible to staff?

135 Is the current public liability insurance certificate available/ displayed within the service?

Legionella

136 Can staff access the Legionella policy?

137 Is there an up to date Legionella Risk Assessment on site?

138 Have all remedial actions been completed in line with the recommendations?

139 Are there appropriate lines of communication with the water hygiene company?

140 Are there up to date schematic drawings of the water system?

141 Are roles and responsibilities defined?

142 Have responsible persons had Legionella Awareness training?

143 Is there an up to date logbook on site?

144 Are little used outlets flushed twice a week in care/ other services weekly?

145 Are spray taps, showerheads and hoses dismantled, cleaned and descaled at least quarterly?

146 Are TMVs/ TMTs failsafe checked every 6 months and serviced annually?

147 Are there records of microbiology in place and, if so, are they compliant?

148 Are all specialist water company service sheets available to ensure 5 years continuous records?

Lifts

149 Are reports in place to evidence that lifts have had a 6 monthly LOLER inspection?

150 Are reports in place to evidence lifts have been regularly serviced?

Lone Working

151 Do staff who work alone have access to the Lone Worker policy?

152 Have staff who work alone had lone working training?

153 Are lone working risk assessments in place to manage any significant risks?

Machinery & Equipment

- 154 Is there documentation to evidence electronic profiling beds are maintained in safe condition?
- 155 Is there documentation to evidence all air mattresses have been maintained in safe condition?
- 156 Is documentation in place to show wheelchairs and mobility aids are checked and maintained in safe condition?
- 157 Is the evidence to show that any powered gates and barriers have maintained in safe condition to prevent trapping?
- 158 Is there evidence to demonstrate powered doors and entry systems have been maintained in safe condition?
- 159 Where necessary to safeguard vulnerable persons, are bedrail risk assessments in place?
- 160 Are regular checks made on bedrails that are in place to prevent entrapment?
- 161 Is laundry equipment maintained in safe condition?
- 162 Is lint removed from tumble dryer filters?
- 163 Where installed are there service sheets to evidence sluice machines and macerators been maintained in safe condition?
- 164 Where appropriate is there service sheets and appliance testing for any maintenance, gardening machinery and power tools been provided by the company?
- 165 Where installed are there service sheets to evidence nurse call/ warden call and panic alarm systems maintained in working order?

Medication Safety- Care

- 166 Where appropriate, can staff access to the relevant medication policy for the service?
- 167 Are regular medication audits undertaken?
- 168 Are there documented procedures for the ordering and checking in of medication deliveries?
- 169 Are storage arrangements and medication security appropriate to the service?
- 170 Are documentation systems for the administration of medication completed appropriately?
- 171 Are appropriate systems in place for PRN medication?
- 172 Are appropriate procedures in place for home remedies and over the counter medication?
- 173 Do staff complete a recognised course?
- 174 Do staff have competency assessments in practice?
- 175 Are there appropriate procedures in place for reporting medication errors?
- 176 Are there reflective practice statements in place for those who make a mistake?
- 177 Are there appropriate documentation systems for controlled medication?
- 178 Are there appropriate arrangements in place for the return of unused/ excess medication?

Moving & Handling

- 179 Can staff access to the Moving and Handling policy?
- 180 Have all staff that are required to undertake moving and handling tasks had suitable and sufficient training and instruction?
- 181 Are moving and handling risk assessments in place where required for inanimate objects and assisting service users?
- 182 Are reports in place to show that hoists, track hoists, powered standing hoists, etc. had a 6 monthly LOLER inspection and an annual service?
- 183 Do reports show all slings have been subject to a 6 monthly LOLER inspection?
- 184 Has other moving and handling equipment which is not powered had regular maintenance e.g. rolators, stand aids?
- 185 Is there documentation to show stair lifts had a 6 monthly LOLER inspection?
- 186 Is there documentation to show stair lifts been serviced?
- 187 Is there documentation to show lifting platforms had LOLER inspections?
- 188 Is there documentation to show lifting platforms had regular servicing?

New and Expectant Mothers

- 189 Are risk assessments in place to ensure mother and baby safety?

Oil Heating Systems

- 190 Where installed is there evidence to show the oil boiler been serviced by an Oftec technician?
- 191 Where installed is there evidence the oil tank had an annual inspection by an Oftec technician?

192 Are oil tanks given a visual check regularly for leaks to prevent damage to the environment?

Pest Control

193 Where necessary to prevent illness, pest control contract is place?

194 Is there a service book on site from the pest control company?

195 Does the logbook note the chemicals used in case of accidental ingestion?

Safeguarding & Complaints

196 Can staff access the Safeguarding and Whistleblowing policies?

197 Has staff had safeguarding vulnerable adults training where appropriate?

198 Has staff had Mental Capacity Act training where appropriate?

199 Has staff had Deprivation of Liberty Safeguards training where appropriate?

200 Are internal reporting systems/ forms in place?

201 Are appropriate employee pre employment checks vetting procedures in place for all relevant staff?

202 Where agency staff are used, are due diligence checks made to ensure appropriate vetting and checks are undertaken by the agency?

203 Where necessary is the CQC registration displayed?

204 Where necessary is the CQC rating displayed and published?

205 Is the complaints procedure available to residents and staff?

206 Is the complaints poster displayed in a prominent place?

207 Are the required CQC notifications completed correctly?

208 Are appropriate safeguarding notifications submitted when required?

Security

209 Are suitable arrangements in place with regards access to restricted areas of buildings and outbuildings?

210 Where CCTV is in place, Are there service sheets to evidence it has it been maintained in working condition?

211 Where necessary, are boundaries secured to prevent trespassing on premises to reduce the risk of arson and damage?

212 Do house staff check exit routes, cookers etc before leaving for the day?

213 Are arrangements in place for key fob, swipe cards and managed entry systems?

214 Are there suitable arrangements for the management of keys?

215 Are suitable arrangements in place for return of fobs or passes when a staff member leaves?

Smoking

216 Is there a smoking policy in place for the premises?

217 Are designated smoking areas appropriate to the nature of the service?

Tree Safety

218 Have large trees been checked to identify decay, broken or detached branches which could lead to damage or injury from falling objects in winter?

Waste Management

219 Are suitable contracts in place for the collection of general waste?

220 Where appropriate, are suitable contracts in place for the collection of feminine waste?

221 Where appropriate are suitable contracts in place for the collection of offensive and hazardous waste?

222 Where appropriate are suitable arrangements in place for oil and kitchen waste?

223 Where appropriate, are suitable contracts in place for the collection of medicines waste?

224 Can staff access the safety memo on waste?

225 Are waste notes retained where required?

Window & Balcony Safety

226 Where necessary to safeguard vulnerable persons, are risk assessments in place to determine the need for window restriction?

227 Are documented checks in place to evidence window restrictors are checked regularly to prevent falls?

228 Where necessary to safeguard vulnerable persons, are risk assessments in place with regards

balcony access and external escape stairs?

Working at Height

- 229 Can staff access to the Work at Height safety advice memo?
Have persons who would be required to work at height as part of their role had an appropriate
230 level of training?
Are checklists in place to show ladders are checked regularly to ensure they are the correct type
231 and maintained in safe condition?
232 Are risk assessments in place for work at height tasks?

Young Persons i.e. apprentices/ work experience (16-18)

- 233 Are risk assessments in place for young persons under 18 working within the service?

Approach and External Areas

- 234 Is the home/ house signage visible to emergency services at the entrance?
235 Are paths and walkways level and free from vegetation and other obstructions?
236 Are ramps accessible?
237 Are all external gates on escape routes accessible without the use of a key?
238 Are steps in good condition?
239 Are handrails secure in position?
240 Is there external lighting?
241 Is garden furniture in good condition?
242 Is decking clear and free of slip and trip hazards like moss or mud?
243 Are outbuildings and sheds in a stable and safe condition and secured?
244 Are gas meter cupboards secure?
Are waste bins in a safe condition and a safe distance from the building preferably 6m away or in a
245 fire compartmented area?
246 Are all boundary walls and fences in good condition?
247 Do drains appear clear? (i.e. not overflowing effluent onto walkways)
Are rodent bait boxes inaccessible to vulnerable people or subterranean, or are safety boxes in
248 place?
249 Are appropriate safety controls in place for water features and ponds? (barriers/ mesh covers etc)
Is smoking kept to designated areas externally and are there bins appropriate for smoking
250 materials? (Are tabs outside doors etc or littering paths to show non compliance?)
Are gardening facilities used by residents accessible to all and suitable for use?(i.e. do wheelchair
users get to participate in working in green houses, are their raised beds they can use if they have
251 a gardening hobby etc)
252 Are bird tables suitably managed to prevent falling food attracting rodents?

Corridors, Halls & Stairs

- 253 When tested, are powered door and entry systems in working order?
254 Are floors and floor coverings in good condition and free from slip and trip hazards?
255 Are corridors free from clutter and waste?
256 Is the fire panel free from fault lights?
257 Is the diagram next to the panel easy to read?
258 Are all handrails and banisters secured in position?
259 Is lighting working and at an appropriate level, particularly on stairs?
260 Are safety signs clearly visible and completed where necessary?
261 Where necessary to safeguard relevant persons, are fire extinguishers visible?
262 Does the temperature and humidity feel comfortable?
263 Are all stair coverings and nosing intact?
264 Are all pictures and wall hangings secured in positions?
265 Are notice boards fire retardant and screened?
266 Is there information for the fire service?
267 Are all walls and ceilings free of breaches/ holes?
268 Are all sockets and switches in a good state of repair and not overloaded?

- 269 Are all call points visible?
270 Where necessary to safeguard persons, are escape routes and exits appropriately signed?
271 Is the furniture on escape routes within the scope of local policies- Managed use/ zero tolerance?

Cellars and Basements

- 272 Are doors at the top of basement stairs fire rated?
273 Do cellars have a completely separate set of stairs from the main accommodation stairs?
274 Do they have adequate lighting and back up lighting?
275 Are stair edgings indicated by coloured edging, where appropriate?
276 Are walls and ceilings intact?
277 Are floors level and in a good state of repair?
278 Are banisters secure and in position?
279 Is shelving and racking secure to the walls?

Communal Lounges and Dining Areas

- 280 Are all floor coverings intact?
281 Is upholstered furniture fire retardant, clean and in good condition?
282 Are final exits from lounges unobstructed?
283 Are fire-fighting appliances in communal areas visible unless they are in secure labelled cabinets or rooms by risk assessment?
284 Are all wall hangings and wall mounted equipment secure in position?
285 Are there appropriate controls of sockets and extension leads?
286 Are radiators the low surface temperature type or suitably protected with covers or grilles?
287 Are other hot surfaces and pipe work guarded where necessary?
288 Is the room free of dirt, odour and clutter?
289 Are windows, latches and glazing in good condition?
290 Is any window restriction in good condition?
291 Are curtains and blinds free of hanging cords?
292 Is the temperature and humidity comfortable?
293 Is there adequate natural and artificial lighting?
294 Is the nurse call system in place and visible?
295 Is the room accessible to those who use a wheelchair or walking aid?
296 Where necessary to safeguard residents, are there fire detection and warning systems in place?
297 Is there adequate space for safe movement around furniture?
298 Is all furniture in good condition without sharp edges or exposed springs etc?
299 Are fire doors signed to prevent injury if they automatically close on alarm?

Communal Toilets and Bathrooms

- 300 Are floors intact, slip resistant and sealed?
301 Are grab rails secure in position and located appropriately?
302 Do water outlets operate correctly and clearly marked hot or cold?
303 Where hot outlet temperatures exceed safety limits is it indicated by sign.
304 Are all waste bins and bags suitable for the type of waste handled?
305 Are waste bins foot operated?
306 Is there an adequate standard of hygiene?
307 Are radiators and towels rail temperatures suitably controlled?
308 Are extractor fans free from fluff and debris?
309 Are emergency nurse call systems working?
310 Are sufficient resources in place for toileting and personal hygiene?
311 Are toilet seats, bath chairs, commodes and shower seats clean and maintained in good condition?
312 Is specialist equipment such as parker baths and hoists in good condition?
313 Is there an adequate standard of lighting?
314 Where required, is PPE available?

COSHH Store

- 315 Are COSHH stores kept secure?
- 316 Are COSHH trolleys supervised at all times?
- 317 Are the items stored compatible with one another and stored appropriately?
- 318 Are products stored only in manufacturers own containers?
- 319 Are liquid chemicals and solid products suitably separated?
- 320 Are doors fire rated?

Flat Doors (beyond a flat door is the person's own home)

- 321 Are all doors in good condition and provide 30 minutes fire resistance?
- 322 Do doors have self closers?
- 323 Are letterboxes fire rated or do older doors have a metal spring plate on both sides?

Hazardous Areas - Boiler rooms, lift rooms and electric switch rooms/ cupboards

- 324 Are boiler rooms free from stored combustible items?
- 325 Is a working carbon monoxide detector in situ?
- 326 Are lift rooms free from stored combustible items?
- Are electric cupboards and rooms clear of materials in close proximity to circuit boards and cables?
- 327
- 328 Where there are fire doors in main sites do they have fire door signage?
- 329 Where there is high voltage electrics are warning signs in place?

Kitchens used by staff/ Commercial Kitchens

- 330 Are all food storage areas clean and suitably organised?
- 331 Is shelving and racking secured to the wall?
- 332 Is precooked food appropriately stored and labelled?
- 333 Are all worktops clean and free from damage?
- 334 Are fridge thermometers below 5°C
- 335 Are freezer thermometers colder than -18°C
- 336 Are fridge and freezer seals clean and intact?
- 337 Are pan stores clean?
- 338 Are crockery stores clean?
- 339 Is the cutlery drawer and cutlery clean?
- 340 Are foods that have not been frozen used before the use by date?
- 341 Are all kitchen appliances clean and in a good state of repair?
- 342 Do microwaves have sufficient venting space and are free from items stored near or around them?
- 343 Are there adequate hand hygiene facilities
- 344 Is PPE available for persons who handle food and those entering the kitchen?
- 345 Are bins foot operated?
- 346 Are spray taps free from lime scale?
- Does the temperature at slop sinks and main pot wash reach at least 55°C in commercial
- 347 kitchens?
- 348 Are dishwashers in working order?
- Where required to safeguard staff, are suitable guards in place on commercial slicers, mixers and
- 349 peeling machines?
- 350 For main kitchens are fly screens on windows?
- 351 Is there a chain pest curtain for open doors?
- 352 Are fly zappers in use?
- 353 Are there other pest control measures such as ant traps or mice bait stations?
- 354 Are knives stored and used safely?
- 355 Are external bin areas clean and waste suitably separated and lids closed so not to attract pests?
- 356 Is waste oil for collection suitably stored?
- 357 Are cleaning products suitable for food areas and appropriately stored when not in use?
- 358 Is kitchen cleaning equipment appropriately colour coded where appropriate?

- 359 Are chopping boards colour coded for food safety?
- 360 Are all food service hot trolleys in good condition?
- 361 Are floors, walls and ceilings clean and intact?
- 362 Are emergency stops and shut offs visible and signed?
- 363 Are fire escape routes kept clear?
- 364 Are fire fighting appliances visible and accessible?

Laundry Rooms

- 365 Is there safe separation of clean and dirty linen?
- 366 Are red alginate bags available for soiled laundry?
- 367 Are floors clear of clothing and linen?
- 368 Are suitable hand hygiene facilities in place?
- 369 Are areas segregated / separated from food areas and storage?
- 370 Is there designated clean storage for fresh linen?
- 371 Are boxes available for individuals clothing?
- 372 Is there adequate ventilation?
- 373 Is PPE available for staff use where needed?
- 374 Is the noise level within acceptable levels?
- 375 Is lighting adequate for the tasks undertaken?
- 376 Are heated appliances such as irons switched off and stored safely after use?
- 377 Are any presses suitably guarded?
Are industrial machines capable of reaching the required temperatures for infection control? (71°C x 3minutes or 65°C x 10 minutes)
- 378 x 3minutes or 65°C x 10 minutes)
- 379 Are floors slip resistant and intact?
- 380 Are wet floor signs available for spillages and floor cleaning?
- 381 Is fire detection in place?
- 382 Are appropriate fire fighting appliances in close proximity?
- 383 Are any emergency stops suitably signed and visible?
- 384 Are chemicals used and stored safely?

Lifts

- 385 Do lifts land level with the floor?
Are lifts signed not to be used in the event of fire unless they are a specifically designed evacuation lift?
- 386 Are lifts signed not to be used in the event of fire unless they are a specifically designed evacuation lift?
- 387 Do lift alarms operate when needed?
- 388 In care homes, do lifts have protected lobbies where a progressive evacuation is in place?
- 389 Are refuge areas in place and if so do they have working voice communication systems?
- 390 Where necessary to safeguard persons, is the lift access coded system in working order?

Maintenance Workshops & Sheds

- 391 Are workshops secured to prevent unauthorised access?
- 392 Is potentially hazardous equipment stored safely to prevent injury?
- 393 Are dangerous and hazardous substances stored properly?
- 394 Is PPE appropriate for the job, maintained in good condition and stored properly?
- 395 Are power tools PAT, clean and fit for use?
- 396 Are sockets adequate and free from overloading?
- 397 Is the room protected by a suitable fire door?

Medication Store/ Room- Care Homes

- 398 Is the medication room secure when unoccupied?
- 399 Are trolleys secured to the wall?
- 400 Is the storage of controlled medication appropriate?
- 401 Is the fridge temperature appropriate?
- 402 Are sharps boxes available and full ones appropriately sealed?
- 403 Is there appropriate storage of medication waste and returns?

- 404 Is the room temperature appropriate?
- 405 Is the room in a clean and tidy state?
- 406 Are dispensing pots appropriate for use and clean?
- 407 Are full and empty oxygen cylinders stored separately?
- 408 Are there appropriate hand hygiene facilities in place?

Offices

- 409 Are offices secure when unattended?
- 410 Are care files in an appropriate locker or cupboard?
- 411 Are electrical sockets, leads and extensions used safely?
- 412 Are combustible items kept away from sources of heat? (Min 1 meter)
- 413 Is the temperature and humidity comfortable?
- 414 Is there adequate space to move around safely?
- 415 Are under desk spaces free of stored items?
- 416 Are desks and chairs suitable for the task and in good condition? (5 castor chairs)
- 417 Is there sufficient artificial and natural light?
- 418 Is it covered by the fire warning and detection system?
- 419 Are industrial printers and shredders situated away from desks to prevent paper dust and ozone hazards?
- 420 Is fire loading kept to a minimum?
- 421 Are floor coverings intact and the surface free from slip and trip hazards?
- 422 Are walls and ceiling intact to prevent the spread of fire?
- 423 Is office machinery and equipment in good condition?

Roof Space & Voids (NB - only to be accessed by suitably trained and qualified persons)

- 424 Has staff kept roof spaces clear of combustible items?
- 425 Is there safe access to the roof space by means of pull down ladders or access stairs?
- 426 Is there adequate lighting?
- 427 Is the floor boarded out?
- 428 Does it have detection?
- 429 Is it suitably compartmented?

Riser and Access Ducts

- 430 Are riser cupboards highlighted on escape routes and kept unobstructed?
- 431 Are access ducts for pipework protected by fire rated doors and fire stopped on each floor?

Sluice Rooms

- 432 Are rooms locked when not in use?
- 433 Are mops colour coded and upended when not in use?
- 434 Is the room clean and well organised?
- 435 Is machinery and equipment working?
- 436 Are chemical reagents stored safely?
- 437 Are sluice/ bucket sinks clean and flush systems working?

Service User Rooms - Care homes only

- 438 Are doors fire rated and on automatic/ free swing self-closing devices?
- 439 Is all furniture on a fire door such as kick plates etc fire rated?
- 440 Are carpets and flooring secure in position and in a good state of repair?
- 441 Is bulky furniture secured to the wall to prevent crushing and in a good state of repair?
- 442 Is there adequate space for safe movement?
- 443 Are walls and ceilings in a good state of repair and free of breaches?
- 444 Are wet rooms clean and in a good state of repair?
- 445 Are all grab rails secure in position?
- 446 Is the room free from dirt, odours and clutter?
- 447 Are call systems accessible and in working order?
- 448 Are track hoists and hoists labelled to demonstrate LOLER dates?

- 449 Is the lighting adequate?
- 450 Is the temperature and humidity comfortable?
- 451 Are water temperatures regulated to safe limits?
- 452 Are water outlets free from a build up of lime scale?
- 453 Is seating suitable, clean and maintained in safe condition?
- Wheelchair, Scooter and Equipment Charging Areas/ Rooms**
- 454 Is the room free from overloaded sockets, extensions and trailing cables?
- 455 Are charging rooms suitably fire rated?
- 456 Are floors suitable for charging?
- 457 Is fire detection and warning in place?
- 458 Where a designated room is not available is the H&S advice note followed for safety?
- 459 Is suitable RCD protection in place?