



HEALTH AND SAFETY POLICY

1. Introduction

- 1.1 This policy addresses a range of issues all directed at the management of risk relating to accommodation, equipment and methods of working.
- 1.2 In accordance with the Health and Safety legislation, South Lakeland Mind aims to:
- Maintain safe and healthy conditions for staff, volunteers, service users and visitors.
 - Take all necessary steps to prevent accidents and work-related physical and mental ill health.
 - Ensure staff and volunteers are competent in matters of H and S through the provision of information, training and supervision.
 - To provide adequate control of H and S risks arising from the use of premises, travel and activities.
 - To maintain equipment to the required standards.
- 1.3 The Association has public liability insurance which covers activities and premises. It is essential that good Health and Safety practice is followed in order to comply with the terms of the policy.
- 1.4 This policy should be read in conjunction with the policies for Confidentiality and for Provision and Protection for Service Users, in particular regarding the safeguarding of vulnerable adults.

2. Responsibilities

- 2.1 The overall responsibility for ensuring Health and Safety provision rests with the Trustees. However, in practice, day to day management of risk, record keeping and the condition of premises and equipment used by South Lakeland Mind is the responsibility of the Chief Officer. In addition all staff, volunteers and service users are required to co-operate and to take care not to jeopardise their own health and safety and that of others.
- 2.2 Any potential hazards identified must be reported to the Trustees.

3. Liaison with other Parties

- 3.1 The premises used by South Lakeland Mind are all owned by other bodies and to varying degrees, the responsibility for Health and Safety is shared. It is important in all cases that the precise allocation of responsibilities is fully agreed with the owner and that there is proper liaison if there any matters of doubt or if issues arise.
- 3.2 In addition, every effort must be made to cooperate with statutory bodies specifically responsible for implementing Health and Safety legislation, for example the Fire Officer and local authorities and to seek advice whenever doubt arises.
- 3.3 In the case of activities or transport provided by another organisation or individual, South Lakeland Mind must ensure that proper Health and Safety provision is made by the provider. This applies especially in the case of outdoor activities, see section 4 below.

4. Managing Risk

Purpose, Principles and Process:

The essence of risk management is dealing with uncertainties and reducing or removing the risk factors. It is not about eliminating, avoiding or removing all risk. Guidance from The Health and Safety Executive stresses that 'the law does not expect you to eliminate all risk' but requires organisations to protect people as far as is reasonably practicable. Assessment of risks should be 'suitable and sufficient'.

4.1 Assessing and Information Gathering

Risk Management should be:

- **Comprehensive** – covering every aspect of the organisation
- **Continual** – not just a one-off exercise, it should be something which is at the heart of the organisation, it should be maintained and updated on a regular basis
- **Built-in** – integrated into all operations and systems
- **Suitable** – there is no one size fits all, principles and practices can be adapted to any organisation or activity
- **Proportionate** – keeping a sense of perspective and proportion between benefits and risks

4.2 The process of risk management has three main stages:

Identify risks – have a good look at what you do, where you do it and who.

Ask: Is there a risk involved in the situation or proposed action, what could go wrong here?

Analyse the risks – decide how serious and likely the risks are.

Ask: How likely is it to happen?

How serious would it be if it did?

What are the positive reasons for taking the risk?

Control the risks – do whatever you think is necessary to reduce the chances of things going badly wrong. Decide on your strategies for dealing with the risks.

There are three basic approaches:

Reduce or remove the risk

Minimise the harm

Transfer the liability

Give yourself a breathing space and think before you act as well as consider the points above consider the following:-

- What is the number and level of experience of staff available? How many people are needed to deal with the situation and are they available?
- What are the contingency plans if things go wrong?
- Who in South Lakeland Mind needs to know about the situation and when?
- Do any South Lakeland Mind policies or procedures warn against or prohibit the proposed course of action?

Where a potential risk is identified, the Trustees, with advice from the Chief Officer, will make a decision on whether to proceed with any event.

5. Review and Audit

5.1 Lessons can be learned both by individuals and the organisation as a whole by reflecting on situations where risk has been dealt with well or not so well. It is important, therefore, that Mind has a formal system for review and audit of risk. This is a key purpose of the Risk Register, consideration of which is a standing item on the Board of Trustees' agenda.

5.2 In most areas of Mind's work risk is not a 'one-off' event but is recurring or changing. In some areas (e.g. Health and Safety) a cyclical approach is needed, with regular reviews built into operational planning. In others (e.g. individual clients who pose a risk to themselves or others) staff and volunteers who work with individuals may need to be constantly alert to risk and aware that it can increase or diminish over time.

5.3 If this process is carried out thoroughly in all cases of serious risk familiarity with it should enable staff to go through an equivalent mental process as a matter of course in less serious cases.

5.4 Support and debriefing will be provided for staff, users and volunteers involved in incidents. Mind will also provide help and backing to staff where a decision on risk has gone wrong, provided the above guidelines were followed.

6. Incident Reporting Procedure

1. Immediately an incident has occurred it should be reported to:

The Chief Officer at South Lakeland Mind who will take charge, talk through the incident with those involved and offer support if necessary.

- a) A written account of the incident should be made (see appendix (a) Incident Report Form)
- b) Copies of relevant risk assessments should be forwarded to the manager
- c) A review of the risk assessment process and procedures for the activity will be carried
- d) Any remedial action identified as part of the review will be documented and should be used to inform and update the risk assessment for future activities.

7. Lone Working

7.1 South Lakeland Mind recognises that it has a particular duty of care towards staff and volunteers who might need to work with service users/clients on their own or distant from other people.

7.2 This may involve lone working when no-one else from Mind is present in the building or during outdoor activities or travel with service users. In addition, unplanned absence may occasionally cause a staff member or volunteer worker to work on their own with groups of service users, for example at drop-in sessions or during activities. The risks involved may be small but may include those of aggressive behaviour, violence, verbal abuse, damage, and accident or sudden illness.

7.3 Lone working should take place only when necessary to provide the service. Every effort will first be made to find ways of avoiding the need for lone working, for example by adapting working methods or providing support.

7.4 When lone working has been agreed as necessary, we will, as far as is reasonably practical, support and protect staff and volunteers through training, advice, risk management, providing effective emergency procedures and the recording, monitoring and reviewing of any incidents.

- 7.5 We will provide a set of guidelines to all staff and volunteers who may need to work alone and make every effort to ensure that these are fully understood and adhered to.
- 7.6 The operation and effectiveness of the guidelines will be closely monitored and amended as necessary in the light of experience. Any new service established in the future will, if necessary, be provided with specific guidelines at which point the current guidelines may themselves be reviewed.
- 7.7 For all lone working an appropriate general or particular emergency procedure has been put in place and the worker made aware of this. See 7.10 below.
- 7.8 If required lone working staff or volunteers will be given the use of a mobile phone for use in the charity's service.
- 7.9 At the same time staff and volunteers have the responsibility to take care of themselves and others involved in their work and actions by following safe working guidelines, reporting any incidents, potential dangers or concerns and to take part in any training offered. If lone working staff or volunteers feel at risk, they should not undertake the activity.
- 7.10 The responsibilities for the safety of lone workers are the same as those identified in this policy for Health and Safety as a whole. This includes:
- Management of the risk to and protection of Lone Workers including security and incident detection systems.
 - A bespoke 24 hour security monitoring service for organisations.

The lone workers procedure has been circulated to all staff who undertake lone working. See appendix a post.

7.11 Risk Management

- a) Risk Assessments will be carried out for each situation in which staff and volunteers may need to work with clients alone. These will be carried out and recorded using a Risk Assessment checklist and form.
- b) Prime considerations in risk assessment will be the worker's degree of experience and the client's potential level of risk (especially of violence or emotional instability). Students and other inexperienced workers, especially volunteers, will not be expected to work alone. A client, not previously known to staff or volunteers will not be accepted for lone working unless he/she has been met and assessed as suitable by the Chief Officer or nominee.
- c) Following the assessment, consideration should be given to any necessary and practical action which will minimise any risk.
- d) For lone working which takes place frequently and regularly with the same client, risk assessments for each occasion may be judged to be unnecessary. It may suffice to carry out one initial risk assessment which includes any conditions and requirements. This, however, should be kept closely under review and amended if necessary in the light of experience and circumstances.
- e) If lone working is required unexpectedly (for example a client visiting the office when only one person is present) no prior assessment will be possible. It is then the responsibility of the staff member or volunteer to assess the risk, if possible seeking advice from a senior members of staff or the Chair.

8. Incident Reporting

- a) Lone workers are required to report any unplanned or uncontrolled event which causes or has the potential to cause injury, physical or verbal abuse, ill health or damage. Lone

workers should report their concerns about any incident in which they feel threatened or unsafe, even if this was not a tangible experience.

- b) Any such incidents must be recorded on the incident reporting form and forwarded to the Chief Officer.
- c) If a lone worker becomes involved in a violent incident or accident, the Chief Officer or other member of staff or volunteer should ensure that any necessary medical treatment or advice is provided. If the incident occurs outside normal hours a nominated staff member or trustee should be informed immediately.
- d) Every opportunity should be provided to allow the worker to discuss the incident with the Chief Officer or nominee and to identify any significant learning points. Counselling should also be provided for if required.
- e) The Chief Officer will consider whether the lone worker needs information or help with any legal or insurance aspects.
- f) All incidents arising during lone working will be reported to the Board of Trustees.

9. Support and Training

9.1 Health and Safety will be included in the induction process and at least one member of staff and/or volunteer employed in the Kendal premises should have some training in basic first aid. Other staff and volunteers working elsewhere will be encouraged to undertake similar training.

9.2 The training needs will be assessed of all staff and volunteers who may be engaged in lone working. Particular attention will be given to the handling of situations where they may feel at risk and to the need for workers to recognise how their own actions might influence or trigger aggression.

9.3 Further in-service training will be provided for staff and volunteers if new equipment or premises are acquired, if there are any changes to legislation or requirements or if risk assessment or review suggests that practices need to be amended.

This policy is intended as a statement of intent and does not constitute a binding contractual or personal agreement. But it will be monitored and revised in the light of service user, staff or volunteer experience or comments and any operational changes and legislative or other external considerations. Interpretation and any matters not specifically covered by the policy will be decided by the Chief Officer and / or Trustees.

Policy Approved by Board of Trustees: 10th December 2009

Revision(s) approved: 14th August 2014

Review Date: June 2015

If at any time it seems appropriate to review the policy sooner than the review date, such as through a change in the law, then this should be done without delay.

Appendix A – Lone Working Contact Procedure

All Lone Workers **must** read and follow the procedure as shown below. If the procedure is not followed, an emergency procedure will be instigated.

If there are any difficulties regarding this procedure, staff **must** contact the office for further advice.

1. Call or text the SLM contact to confirm their current location, who they are seeing and set the estimated duration of the meeting.
2. The lone worker then calls or texts again when the meeting has finished.
3. If the lone worker does not phone/text their SLM contact, the contact will phone the lone worker to confirm their whereabouts and status.
4. If the lone worker does not respond, the SLM contact will come to the venue to make sure they are okay.
5. If the contact is unable to get in touch with the lone worker they will contact the emergency services as necessary.



Appendix B - Incident Report Form

Name of staff member / volunteer:	Signature:	Today's date:
Date of incident:	Time of incident:	Location of incident:
Activity being undertaken at the time:	Details of the incident (what happened and any remedial action taken):	Details of any medical assistance required (provided by whom):
Date reported (and to whom):	Recommended follow-up action:	Signed manager: Date:

