

PEMBROKE COLLEGE

HEALTH AND SAFETY POLICY & PROCEDURES



**PEMBROKE COLLEGE · CAMBRIDGE**

**HEALTH AND SAFETY POLICY**

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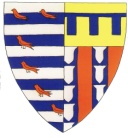
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# 

# ABOUT PEMBROKE COLLEGE



**PEMBROKE COLLEGE · CAMBRIDGE**

HISTORY OF THE COLLEGE

Pembroke College was founded by Marie de St Pol, daughter of Guy de Châtillon and widow of Aymer de Valence, Earl of Pembroke. Pembroke is the third oldest College still in existence, after Peterhouse and Clare. Marie was granted her licence for the foundation by Edward III on Christmas Eve 1347.

The College originally housed up to thirty scholars, and the original buildings – chapel, hall, kitchen, buttery, Master’s lodgings and students’ rooms – were arranged in a single court (now First Court). All the scholars were male and unmarried and would have been priests. The original statutes also provided for four staff – a manciple, cook, barber and laundress – to look after the needs of this small community.

Marie was closely involved with College affairs in the thirty years up to her death in 1377. She seems to have been something of a disciplinarian: the original Foundation documents had strict penalties for drunkenness and lechery, required that all students’ debts were settled within two weeks of the end of term, and gave strict limits on numbers at graduation parties.

Founded on part of its current site, it took over 500 years to accumulate all the land of which it is now comprised. Over succeeding centuries, the College buildings spread out from that first court along Pembroke and Trumpington Streets. One of the earliest major changes to the look of the College came in the turbulent years of the mid-seventeenth century. Matthew Wren, Bishop of Ely, was imprisoned for eighteen years for his support of the King during the Civil War. While languishing in the Tower of London, he vowed that if he was ever freed he would build a new chapel for the College. He kept his promise after his release in 1659, and approached his nephew, then known mainly for his mathematical skills, to build the chapel. Pembroke has gloried ever since in possessing the first building designed by Christopher Wren.

Ivy Court was built during the seventeenth century, but it was not until the end of the nineteenth century that Pembroke started to look much like it does today. A major expansion in student numbers at this time brought about a major building programme – a new Hall, replacing the small medieval hall, Master’s Lodge (N staircase), residential block (Red Buildings) and a new library, all designed by the fashionable architect Alfred Waterhouse. These were followed slightly later by New Court and the Pitt Building. At the same time, Pembroke undergraduates established a Mission in south London, at Walworth: this survives today as Pembroke House, one of the few College missions still in existence.

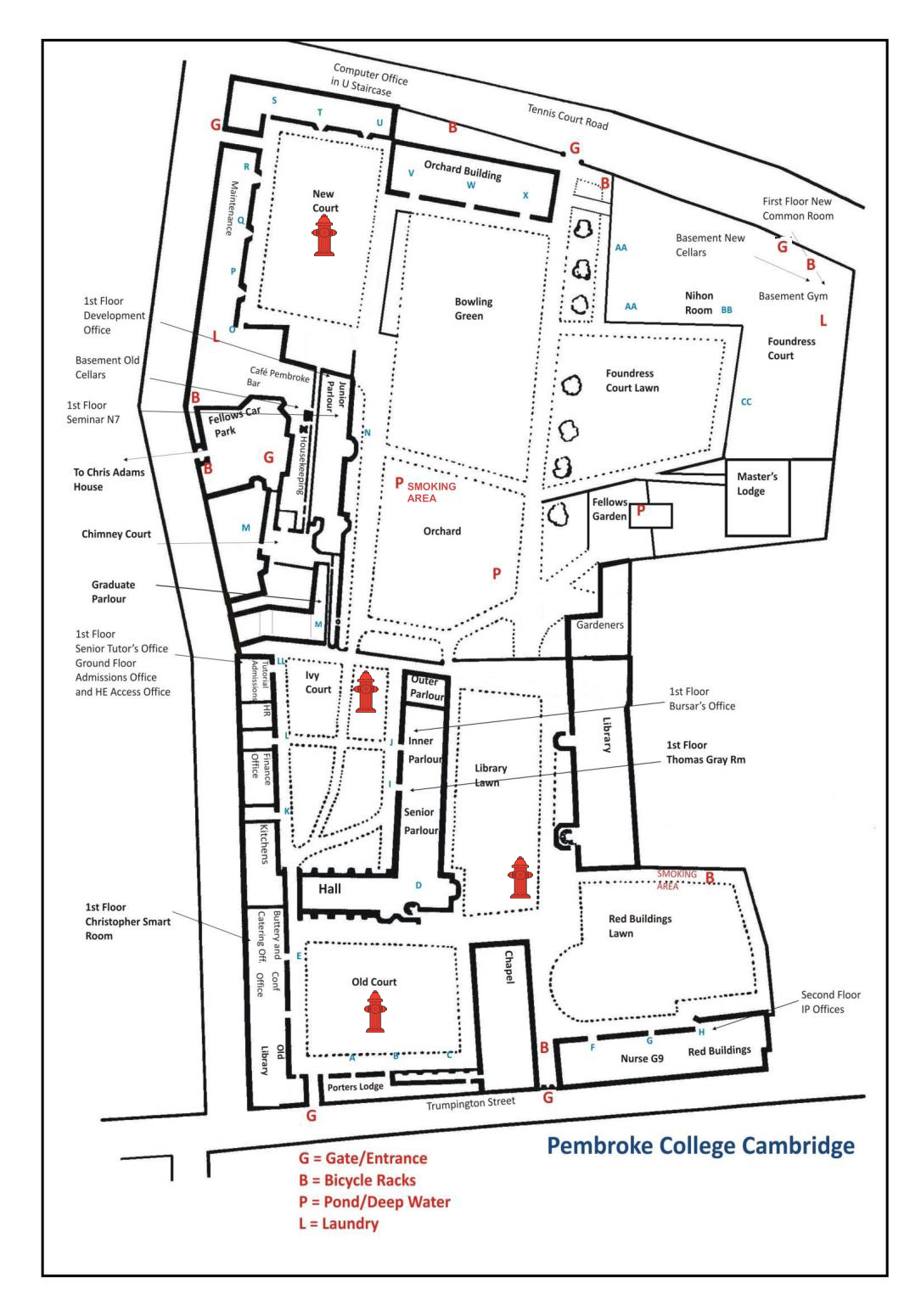
In its early years, Pembroke had a strong reputation for theology: the College produced twenty-two Bishops in 300 years. One of the most famous of these men was Nicholas Ridley, Master during the dangerous times of the Reformation. Ridley’s involvement in Protestant politics led first to his imprisonment by Queen Mary and then burning at the stake in Oxford in 1556. His portrait hangs today next to the fireplace in Hall.

In more recent centuries, the College has produced famous scholars in all disciplines. Notable alumni include the physicist George Gabriel Stokes, the poets Edmund Spenser, Thomas Gray and Ted Hughes; politicians William Pitt the Younger and Rab Butler; musicians Sir Arthur Bliss and Emma Johnson; and entertainers Peter Cook, Clive James, Tim Brooke-Taylor, Bill Oddie and Eric Idle. It also has a strong sporting reputation and has nurtured many outstanding sportsmen and women, including an England cricket captain, Peter May, an England rugby captain Wavell Wakefield, a two-times Wimbledon finalist, H. W. “Bunny” Austin, and most recently an Olympic rowing silver medalist, Cath Bishop.

By the early twentieth century Pembroke had taken on much of its current physical form. Student numbers had continued to grow, particularly the numbers of graduate students, thus contributing to the reputation of the University of Cambridge as one of the finest research universities in the world. Another highly visible change was the admittance for the first time of women undergraduates in 1984. The growth in numbers led to the building in 1997 of Foundress Court, adding 92 student rooms, allowing the College to house for the first time in many years most Junior Members on site; and to the renovation and extension of the Library, which was completed in 2002.

Today the College comprises approximately 442 undergraduates, 260 graduate students, 77 Fellows, and 176 permanent employees. This number is supplemented as necessary at various times of the year by temporary employees. Pembroke contributes to teaching and research across all subjects in the University, and is currently performing very strongly in the academic league-tables. It has a reputation as a friendly college, in which Fellows, students and employees work together to create an environment in which people can excel. The College has also developed extensive development, conference and external study programmes in recent years, which have added much to the financial security of the College and enabled it to undertake many recent initiatives. Surely Marie de St Pol would not recognise the place today – but hopefully she would be pleasantly surprised about the size, scale and character of the College that she founded over 660 years ago.

|  |
| --- |
| COLLEGE MAP |



# OBLIGATIONS OF COLLEGE GOVERNING BODIES

The purpose of this Health and Safety Policy is to define the health and safety management system of the College and ensure it complies with the requirements of the Health and Safety at Work Act 1974.

The overriding aim of the College is to protect Fellows, students, employees and non-employees from the risk of injury or ill health arising from our workplace activities. The objectives are to:

* Provide a framework for the effective management of health and safety at work.
* Detail the College’s position with respect to the health and safety of everyone who may be affected by our work activities.
* Detail the procedures for ensuring that the policy objectives are met.
* Provide the means for monitoring the effectiveness of health and safety at the College.

Breaches of health and safety legislation, including any failure to implement a ‘risk management strategy’, are criminal offences and command unlimited sentences at Crown Court and/or unlimited fines.

In the context of a College, the policy itself and the means of implementing it should be adopted at the highest level within that organisation: the Governing Body. Implementation should encompass all employees i.e. non-academic employees, academic employees including Fellows, whether members of the Governing Body or not. College Officers may be tasked with implementation of defined requirements, but overall responsibility for Health and Safety cannot be delegated. Whatever arrangements are made for delegating implementation, it is the Governing Body that will be answerable in the case of proceedings.

The most effective way to achieve compliance is through what has come to be known as a risk management strategy. Compliance could be achieved by Governing Body oversight of relevant College Officers and/or by the appointment of a competent external person (i.e. a Health and Safety auditor) providing a report not less frequently than annually.

Governing Bodies need to be able to demonstrate that health and safety is being managed effectively. This is a specific requirement of the Management of Health and Safety Regulations 1999. These regulations require Governing Bodies (as employers, but in respect of Fellows, students, employees, visitors, contractors and members of the public) to:

* Carry out a written risk assessment procedure.
* Put in place preventative and protective measures.
* Have arrangements for the ‘effective planning, organisation, control, monitoring and review of the protective and preventative measures’.

**Below are the Regulations and Acts:**

|  |  |
| --- | --- |
| The Health & Safety at Work Act 1974 | The Road Traffic Act 1991 |
| The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 | The Corporate Manslaughter and Homicide Act 2007 |
| The Management of Health and Safety at Work Regulations 1999 | The Misuse of Drugs Act 1971 |
| The Management of Health and Safety First Aid Regulations 1981 | The Health and Safety (Miscellaneous Revocations and Amendments) Regulations 2013 |
| The Regulatory Reform (First Safety) Order 2005 | The Noise at Work Regulations 1989 |
| The Provision and Use of Work Equipment Regulations 1998 | The Health Act 2006 |
| The Manual Handling Operations Regulations 1992 | The Smoke Free (Premises and Enforcement) Regulations 2006 |
| The Control of Substances Hazardous to Health Regulations 2002 (COSHH) | The Protection from Harassment Act 1997 |
| The Confined Spaces Regulations 1997 | The Equality Act 2010 |
| The Workplace Health, Safety and Welfare Regulations 1992 | The Employment Rights Act 1996 |
| The Health and Safety Display Screen Equipment Regulations 2002 | The Work at Height Regulations 2005 |
| The Control of Noise at Work Regulations 2005 | The Control of Asbestos Regulations 2006 |
| The Personal Protective Equipment at Work Regulations 1992 | The Control of Vibration at Work Regulations 2005 |
| The Drug Driving (Specified Limits) (England and Wales) Regulations 2014 | The Safety Representatives and Safety Committee Regulations 1977 |
| The Smoke Free (Private Vehicle) Regulations 2015 | The Furniture and Furnishings (Fire) Safety Regulations 1988/1989 |
| The Road Transport (Working Time) Regulations 2005 | The Fire Precautions (Workplace) Regulations 1997 |
| The Working Time Regulations 1998 | The Construction (Design and Management) Regulations 2015 |
| The Data Protection Act 1998/General Data Protection Regulation | The Control of Lead at Work Regulations 2001 (CLAW) |

**Where a Regulation or Act of Law is stated, it is deemed to include any subsequent updates or amendments****.**

# LIBRARY - ONLINE GUIDANCE

Below are hyperlinks to the Primary Guidance or Primary Legislation which form the basis for this policy.

|  |  |
| --- | --- |
| Guidance/Legislation | Hyperlinks |
| The Health & Safety at Work Act 1974 | <http://www.hse.gov.uk/legislation/hswa.htm> |
| The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 | <http://www.hse.gov.uk/riddor/> |
| The Management of Health and Safety at Work Regulations 1999 | <http://www.hse.gov.uk/pubns/hsc13.pdf> |
| The Health and Safety First Aid Regulations 1981 | <http://www.hse.gov.uk/firstaid/legislation.htm> |
| The Regulatory Reform (Fire Safety) Order 2005 | <http://www.legislation.gov.uk/uksi/2005/1541/pdfs/uksi_20051541_en.pdf> |
| The Provision and Use of Work Equipment Regulations 1998 | <http://www.hse.gov.uk/pubns/indg291.pdf> |
| The Manual Handling Operations Regulations 1992 | <http://www.hse.gov.uk/msd/pushpull/regulations.htm> |
| The Control of Substances Hazardous to Health Regulations 2002 (COSHH) | <http://www.hse.gov.uk/nanotechnology/coshh.htm> |
| The Confined Spaces Regulations 1997 | <http://www.hse.gov.uk/pubns/indg258.pdf> |
| The Workplace Health, Safety and Welfare Regulations 1992 | <http://www.hse.gov.uk/pubns/indg244.pdf> |
| The Health and Safety Display Screen Equipment Regulations 2002 | <http://www.hse.gov.uk/pubns/indg36.pdf> |
| The Control of Noise at Work Regulations 2005 | <http://www.hse.gov.uk/pubns/indg362.pdf> |
| The Personal Protective Equipment at Work Regulations 1992 | <http://www.hse.gov.uk/pubns/indg174.pdf> |
| The Drug Driving (Specified Limits) (England and Wales) Regulations 2014 | <http://www.legislation.gov.uk/uksi/2014/2868/made> |
| The Smoke Free (Private Vehicle) Regulations 2015 | <http://www.legislation.gov.uk/ukdsi/2015/9780111126004/contents> |
| The Road Transport (Working Time) Regulations 2005 | <http://www.legislation.gov.uk/uksi/2005/639/contents/made> |
| The Working Time Regulations 1998 | <http://www.hse.gov.uk/contact/faqs/workingtimedirective.htm> |
| The Data Protection Act 1998/General Data Protection Regulation | <https://www.gov.uk/data-protection/the-data-protection-act> |
| The Road Traffic Act 1991 | <http://www.legislation.gov.uk/ukpga/1991/40/contents> |
| The Corporate Manslaughter and Homicide Act 2007 | <http://www.legislation.gov.uk/ukpga/2007/19/contents> |
| The Misuse of Drugs Act 1971 | <http://www.legislation.gov.uk/ukpga/1971/38/contents> |
| The Health and Safety (Miscellaneous Revocations and Amendments) Regulations 2013 | <http://www.legislation.gov.uk/uksi/2013/1512/contents/made> |
| The Noise at Work Regulations 1989 | <http://www.legislation.gov.uk/uksi/1989/1790/contents/made> |
| The Health Act 2006 | <http://www.legislation.gov.uk/ukpga/2006/28/contents> |
| The Smoke Free (Premises and Enforcement) Regulations 2006 | <http://www.legislation.gov.uk/uksi/2006/3368/regulation/2/made> |
| The Protection from Harassment Act 1997 | <http://www.legislation.gov.uk/ukpga/1997/40/contents> |
| The Equality Act 2010 | <http://www.legislation.gov.uk/ukpga/2010/15/contents> |
| Employment Rights Act 1996 | <http://www.legislation.gov.uk/ukpga/1996/18/contents> |
| The Work at Height Regulations 2005 | <http://www.hse.gov.uk/pubns/indg401.pdf> |
| The Control of Asbestos Regulations 2012 | <http://www.hse.gov.uk/asbestos/regulations.htm> |
| The Control of Vibration at Work Regulations 2005 | <http://www.hse.gov.uk/vIBRAtIon/hav/regulations.htm> |
| The Safety Representatives and Safety Committee Regulations 1977 | <http://www.hse.gov.uk/pubns/indg232.pdf> |
| The Furniture and Furnishings (fire) Safety Regulations 1988/1989 | <http://www.firesafe.org.uk/furniture-and-furnishings-fire-safety-regulations-19881989-and-1993/> |
| The Fire Precautions (Workplace) Regulations 1997 | <http://www.hse.gov.uk/fireandexplosion/workplace.htm> |
| The Construction (Design and Management) Regulations 2015 | <http://www.hse.gov.uk/construction/cdm/2015/index.htm> |
| The Control of Lead at Work Regulations 2001 (CLAW) | <http://www.hse.gov.uk/pubns/indg305.pdf> |

**Where a Regulation or Act of Law is stated, it is deemed to include any subsequent updates or amendments.**

HEALTH AND SAFETY POLICY STATEMENT

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| --- |
| The Governing Body regards health and safety matters to be a high priority and an integral part of all its activities including the maintenance of quality and standards.  The Governing Body considers health and safety to be a management responsibility equal to that of any other function. It is, therefore, the policy of the Governing Body to provide and maintain a working and educational environment that is safe and without risks to health, adequate as regards welfare facilities and that ensures that persons not in the College’s employment are not exposed to risks that may arise from the College’s activities.  The Governing Body is resolved to provide and maintain equipment and systems of work that are safe and will provide such information, training and supervision as is necessary to achieve this aim.  The Governing Body will provide such resources as may be necessary to enable it and its employees or workers to meet their health and safety responsibilities.  In order to implement this policy the commitment of everyone concerned is necessary and it is a condition of employment that all employees or workers will co-operate with the Governing Body by:   1. Following instructions in the safety rules or notices displayed on College property. 2. Complying with any code of practice or guidance that may apply to their work or workplace. 3. Taking reasonable care for the health and safety of themselves and of any other persons who may be affected by their acts or omissions at work.   The Governing Body stresses its commitment to health and safety to the extent that, where disregard of safe working practices by an employee or worker seriously puts at risk the health and safety of him or herself or any other person, this will be considered as gross misconduct and will lead to disciplinary action or dismissal.  The Governing Body firmly believes that the success of this policy relies on the full co-operation of all employees or workers. Therefore, we will ensure that it is brought to their notice. It is our intention for the Health and Safety Department to review this policy annually and amend it as circumstances and legal requirements change. |

# HEALTH AND SAFETY REPORTING STRUCTURE – PEMBROKE COLLEGE

Housekeeper/ Accommodation Manager

Buildings Manager

Director International Programmes

Deputy

Housekeeper

IT Director

Catering and Events Manager

Librarian

Head Porter/Fire Officer

Senior Porters

Sportsground

Manager

Finance Manager/

Deputy Bursar

Boatman

Head Gardener

Front of House & High Table Manager

IT Manager

Deputy Development Director

College

Registrar

Senior Tutor

Admissions Tutor

Admissions Officer

HR Manager/

H&S Officer

Bursar/

Senior H&S Officer

Master

Development Director

PKP

Director

**This flow chart indicates the Heads of Department at Pembroke College and includes Deputies. It is the reporting structure for Health and Safety.**

College Nurse

Head Chef

 High Table Butler

Deputy Building Manager

Sous Chefs (3)

Senior Gardener

Café /Bar Supervisor

# AUDITING AND MONITORING HEALTH AND SAFETY AT PEMBROKE COLLEGE

Background

Each department produces relevant Health and Safety Risk Assessments suitable for the work they carry out and the buildings they occupy. The Health and Safety Officer for the College is responsible for ensuring these are checked and updated annually. Assistance is provided as required.

The College employs a competent contractor to carry out Fire Risk Assessment for all College buildings, Hostels, Sportsground and Boathouse.

Objectives for Monitoring/Auditing

1. To ensure that safety standards are followed.
2. To ensure that staff develop appropriate levels of competence to carry out Risk Assessments.
3. To meet legal requirements.

Arrangements and Responsibilities

Monitoring of health and safety is completed on the following three levels.

Level 1

* Monitoring by Heads of Department/or designated person annually.
* Produce Risk Assessments, which will be reviewed annually.
* Inspection of department using the check list, Monitoring Checklist.
* Completed checklists to be returned to Health and Safety Officer in the HR Office.
* Health and Safety information section in the HR Newsletters issued individually to all staff in January and August.

Level 2

* Auditing on behalf of Bursar by Health and Safety Officer annually (ad hoc selection of department(s)).
* An examination of the management approach to health and safety in selected departments.
* Departments to be selected at random – 3-5 per year. This could be increased if there are current concerns.

Level 3

* An annual audit by an external assessor of the College’s Risk Assessment Management procedures.
* Topics for review will be selected at random and/or on the basis of any current concerns.

# CHANNELS OF COMMUNICATION AND CONSULTATION

The College will ensure that employees will be provided with information, instruction, training and supervision as appropriate to enable them to work safely. A copy of the Health and Safety Policy statement will be placed on every noticeboard throughout the College and Hostels. Risk Assessments will be held in each department and in the H&S Office. The Health and Safety Policy will also appear on the College Website.

Termly meetings will be held by a Health and Safety Committee which will consist of:

* The Bursar – Chair of the Committee.
* Health and Safety Officer.
* Representatives from all departments within the College.

The meetings will be held to discuss health and safety matters that may arise from time to time. Additionally, any relevant information on such matters will be directly communicated to employees via their representative at these meetings. Minutes of all meetings will be produced and placed on the College website. Copies of any minutes can be requested from the Health and Safety Officer.

Employees may also discuss health and safety matters with their Head of Department/Supervisor on an on-going basis. All employees are encouraged to report any health and safety hazards/defects or matters causing concern to the Health and Safety Officer or their Head of Department.

Any relevant information concerning health and safety matters will be brought to the attention of any other persons who may be affected by our work activities, as appropriate.

A review of the Health and Safety Policy will take place annually.

# CHANNELS OF COMMUNICATION AND CONSULTATION

# HEALTH AND SAFETY COMMITTEE

Consult on health and safety issues such as:

* Changes in procedures
* Risk Assessments
* Health and safety training requirements
* Introduction of new technology/processes
* General health and safety matters and trends

Heads of Department take account of any response from employees or workers

Heads of Department/Health and Safety Committee choose to consult directly with employees or workers

The need for consultation with employees on matters of health and safety arise

Heads of Department/Health and Safety Committee members to decide whether informal talk or formal meeting(s) are needed

Details of formal consultations must be minuted and recorded

The Heads of Department decisions taken which may affect the health and safety of employees in the workplace are communicated to the workforce.

Background

The Health & Safety Committee is an integral part of the College structure; the Bursar is the Chairman of the committee. Departments are encouraged to have a staff representative on the Committee. Most departments are represented.

Purpose

The Health & Safety Committee exists:

* To enable formal and informal discussion between staff on the overall impact of current and future health and safety legislation and the College’s health and safety practices.
* To enable Fellows and student concerns for health and safety matters to be voiced at the various committee meetings held for them. The Bursar will bring any health and safety concerns they have to the Health and Safety Committee.

Objectives

The Health & Safety Committee has the following objectives:

1. To review incidents and near-misses, including any notifiable accident or dangerous occurrence.
2. To review the impact of existing and new health and safety legislation.
3. To ensure monitoring and reviews/Risk Assessments are carried out.
4. To consider comments and complaints directly concerning health, safety, environmental and welfare aspects brought to the meetings by committee members, Fellows, or students.
5. To review the effectiveness of health and safety training schemes.

Arrangements

1. Meetings of the Health & Safety Committee are arranged at agreed intervals, usually once per term.
2. The Health & Safety Committee members have a role to play in improving health and safety attitudes amongst the workforce.
3. All members of staff may consult with any member of the Health & Safety Committee on any health and safety issue.
4. Individual items of concern should normally only be considered by the Health & Safety Committee when they cannot be satisfactorily resolved between an employee and their Head of Department.

Membership

The following will be members of the Health and Safety Committee:

* The Bursar.
* The HR Manager/Health & Safety Officer.
* Buildings Manager.
* Head Porter.
* Catering and Events Manager, or designated representative.
* Housekeeper/Accommodation Manager, or designated representative.
* Head Gardener.
* College Nurse.
* Departmental representatives.

Staff/Departmental Representatives

Representatives should take all reasonably practical steps to keep up to date on the following:

1. Legal requirements on health and safety at work.
2. Specific hazards identified by, and associated with, the College and risk prevention or reduction measures in place.
3. The College’s Health & Safety Policy and how it is implemented.
4. Representatives are expected to encourage co-operation between the College and its staff in the promotion and development of health and safety measures and in monitoring their effectiveness.
5. Representatives should bring unsafe or unhealthy practices or conditions to the College’s attention.
6. Staff Representatives will be given facilities and assistance to carry out their duties, time off with pay during working hours to attend adequate training sessions, meetings and carry out their roles.

Records

1. The minutes of all meetings are circulated to members of the Committee.
2. Minutes will be placed on the College website for access by Fellows, students and staff.
3. Paper copies of minutes are available to any member of staff on request to the HR Manager/Health & Safety Officer.

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# ROLES AND RESPONSIBILITIES

The Bursar has overall responsibility for health, safety and welfare on behalf of the Master, Fellows and staff of Pembroke College.

The Health and Safety Officer at Pembroke College reports directly to the Bursar and is responsible for the day-to-day operational activity for health, safety and welfare.

Duties for the Health and Safety Officer:

* Fellows and staff of the College are advised of all appropriate health, safety and welfare legislation.
* Health and safety standards and procedures for all departments are planned, implemented, maintained and audited.
* Health and safety standards and procedures are reviewed annually and updated where necessary and everyone is informed of such changes.
* Risk Assessments are undertaken to identify hazards and to eliminate, minimise or control the level of risk for activities carried out within the College. The assessments are undertaken by each department with the help and assistance of the Health and Safety Officer. All assessments must be reviewed regularly. Risk Assessments will also be reviewed annually by the appointed Health and Safety Consultants for Pembroke College.
* Training in all aspects of health and safety necessary for the job is provided for members of staff.
* Accidents and dangerous occurrences are investigated, recorded and reported to the relevant authority, when appropriate and in accordance with the relevant Regulations.
* Ensure First Aid facilities are sufficient to meet the needs of Fellows, staff, students and visitors.
* Safety concerns are reported, as appropriate, to the relevant person and Health and Safety Committee.

Members of the Health and Safety Committee will:

* Ensure that all relevant persons within their department are aware of the Health and Safety Policy.
* Monitor, audit and review health and safety compliance with the policy and report any problems to the committee at the Health and Safety meetings or the Health and Safety Officer.
* Attend the Health and Safety meetings and participate in making decisions concerning all aspects of health, safety and welfare within Pembroke College.

The College Nurse will:

* Investigate ill health of students and advise as appropriate.
* Control, with the Health & Safety Officer, replenishment of the First Aid boxes periodically/as required.

The Fire Officer will:

* Ensure the College is compliant with fire legislation.
* Review and update, with the Health & Safety Officer, Fire Risk Assessments and General Risk Assessments on all College buildings and hostels.
* Ensure that all fire signage in all College buildings meets legislative requirements.
* Ensure the supply of all keys to doors and exits from the College are adequate.

Heads of Department are expected to:

* Ensure the implementation of all health and safety policies and procedures are adhered to within their own department and the College.
* Maintain, with the Health and Safety Officer, so far as is reasonably practical, a safe working environment within their department.
* Identify hazards in their department and take appropriate measures to assess, eliminate, minimise or control the level of risk in order to comply with statutory duties.
* With the Health & Safety Officer produce and maintain Risk Assessments, safety procedures and first aid reports.
* Make arrangements to monitor and review safety measures introduced.
* Ensure members of staff are informed of all hazards, are properly briefed on the health and safety standards and procedures relevant to their job and receive the necessary training to perform their job safely.
* Monitor members of staff to ensure they comply with health and safety standards, procedures and follow safe working practices.
* Ensure accidents and incidents which occur within their workplace are recorded and the Health & Safety Officer is informed of any reportable accidents or dangerous occurrences, so that they may be reported in accordance with the relevant regulations.
* Ensure all members of staff are familiar with the Fire Evacuation procedures, know where fire equipment and exits are located and take part in fire and emergency training.
* Provide suitable protective clothing and equipment for all members of staff, where appropriate, and instruct and train people in its use and check regularly that it is being used.
* Manage and control contractors and suppliers to ensure their activities are undertaken in a safe manner and safety procedures are followed.
* Notify the HR Manager/H&S Officer when they appoint a new Contractor/Supplier to ensure relevant documentation is sent out concerning H&S regulations which must be adhered to when visiting/working on the College site.

Deputy Heads of Department/Supervisors have a duty to:

* Identify hazards in the work area for which they are responsible and take appropriate measures to assess, eliminate, minimise, record and control the risk in order to comply with statutory duties.
* Ensure that all members of staff for whom they have a duty of care are aware of the hazards and the necessary precautions needed to control and minimise the risk.
* Ensure that members of staff under their supervision receive the necessary training to perform their job safety and are properly briefed on the health and safety standards and procedures relevant to their job.
* Ensure that all accidents that occur in their departments are recorded correctly. They should ensure they report accidents to their Head of Department.

All Members of Staff must:

* Have responsibility in both criminal law and common law, not to endanger themselves or others in connection with their work. In addition, employees have a responsibility under the contract of employment.
* Familiarise themselves with the Health and Safety Policy and Procedures document.
* Follow all work and safety procedures and any training which has been received.
* Co-operate with Heads of Department or Supervisors to ensure that all health and safety standards and work practices are complied with.
* Take care of their own health and safety whilst at work and not compromise the health and safety of any other person who may be affected by their acts and/or omissions.
* Report all accidents that happen to themselves, or that they witness, to their immediate Supervisor or Head of Department as soon as possible.
* Report any hazard to Health and Safety immediately so that action can be taken to remove, minimise or control it.
* Ensure that all personal protective clothing and equipment is well maintained and used for the purpose for which it is intended.
* Not intentionally or recklessly misuse or interfere with anything provided in the interest of health and safety and welfare. If any such abuse is witnessed, it must be reported immediately.

Visitors/Contractors to the College and its premises are expected to:

* Follow any health and safety guidance given to them.
* Report any dangerous occurrence, accident or incident to health and safety to the Porters Lodge immediately.
* Comply with all the health and safety/rules and regulations as outlined in the publication “Health and Safety Code of Practice for Contractors/Sub-Contractors/Couriers/Visitors”, which is sent out annually from the H&S/HR Office.

# ACCIDENT REPORTING AND INVESTIGATION

Self-administer first aid/plaster/bandage from First Aid box/take no further action.

Inform First Aider to replenish stock used

Is the accident RIDDOR reportable?

Assemble and review all collated information of the accident/incident to determine underlying causes.

NO

YES

HR Office files accident in the HSE Accident Book. Copy of First Aid form returned to injured party.

Investigate accident.

First Aider attends, administers first aid and completes First Aid Report form. Send to HR

NO

Call a First Aider from the list of First Aiders on noticeboards. All Porters are First Aid trained

Accident/Incident happens. Is a First Aider required?

Amend Risk Assessment if necessary. Record, monitor and review.

HR notifies the enforcing authority.

YES

Implement additional controls if possible to eliminate hazards or reduce risk.

# ACCIDENT REPORTING POLICY

Introduction

In order to comply with our duties under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, all workplace accidents, however minor, must be recorded, and in some cases accidents may need to be reported to the enforcement authorities. This policy therefore sets out our arrangements for accident reporting and investigation.

This policy is not contractual but indicates the way in which accident reporting will be managed within Pembroke College.

Scope of this Policy

This policy applies to all employees and workers, as well as anyone who may have an accident on our premises, including visitors, suppliers, students and contractors.

Aims of this Policy

This policy aims to ensure that we have clear rules in place; that all accidents are properly recorded and that any necessary remedial action is taken to prevent re-occurrence.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Data Protection Act 1998/The General Data Protection Regulation
* The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

Reporting of Accidents – Fellows and Staff

All workplace accidents, however minor, must be recorded by a First Aider who completes a First Aid Report Form. This form is sent to the HR Office who then transfers the information to the HSE accident book. A copy of the First Aid Report Form is also sent to the injured person for their records. The accident book is kept in the HR Office. Apart from being a legal requirement, this enables us to investigate accidents to see if we can make any adjustments to try and ensure that they do not re-occur.

All accidents will be recorded as soon after the event as possible. Should the accident need to be reported to the enforcement authorities, the relevant form (RIDDOR report) will be completed by the H&S Office (HR Office).

For information a copy of all the forms used for accident reporting have been placed in the forms section at the end of his document.

Reporting of Accidents – Students and Visitors

Accidents and incidents for students and visitors to Pembroke College are recorded on a different report which is titled “Incident/Accident Reporting Form”. These forms are held in the Porters Lodge and are sequentially numbered.

Offsite Accidents

If an employee or worker is working at third party premises, details of any accident should be reported in their accident book as well as ours. This is because host employers have duties under RIDDOR to report any reportable accidents which may occur should an accident take place on premises for which they are responsible.

Home-workers should not use the accident book/form to report an accident which occurred in their own home unless it occurred during work time or relates to an activity which is work-related.

Employee Duties

We expect all employees and workers to assist us in complying with our legal duties under RIDDOR. They are expected to have due regard for their own health and safety and that of their colleagues. If safe systems of work have been introduced, they are expected to follow them, along with any instructions.

All accidents (or "near misses") should be reported in a timely and accurate manner. In the event that an employee fabricates or falsely reports the details of an accident, we reserve the right to take disciplinary action, which could result in dismissal.

Accident Investigation

Unless the accident is trivial, it will be investigated by the H&S Officer, to the appropriate extent. This will help us ensure that the risk of any re-occurrence is minimised.

Where necessary, remedial measures will be introduced and monitored. Details of such accidents will be discussed at our health and safety meetings.

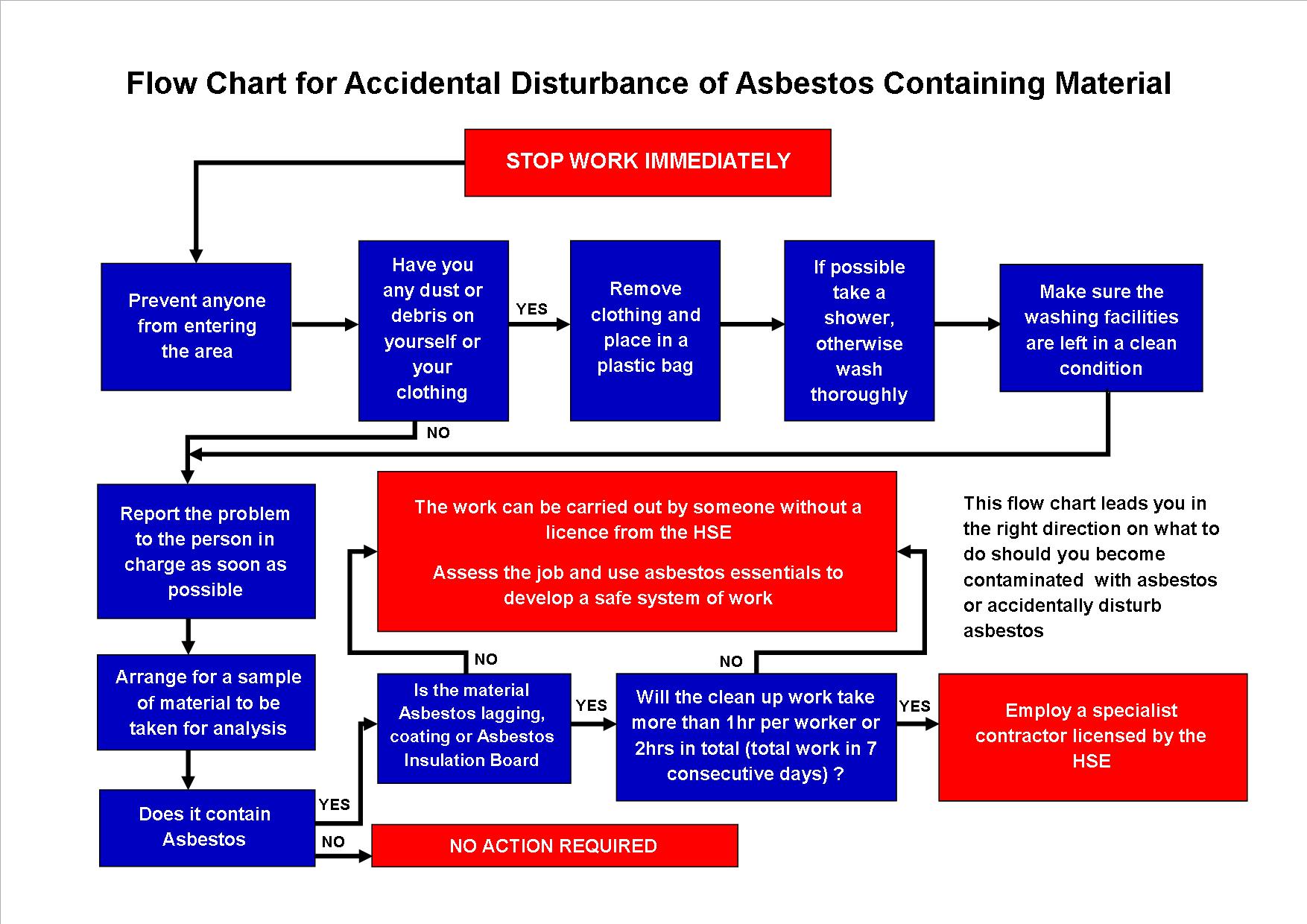
Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# ASBESTOS

Pembroke College has a separate policy for management of asbestos. If you wish to see this policy please contact the Health and Safety Officer in the HR Office. The policy can also be found on the College website.

Below is a flow chart explaining how asbestos is managed at Pembroke College.





# CCTV POLICY AND CODE OF PRACTICE

Introduction

The purpose of this Policy and Code of Practice is to ensure that the College uses CCTV responsibly and with effective safeguards. The intention is:

1. To create a safer working environment for staff and students in the College.

2. To protect property belonging to the College, its students and staff.

3. To provide evidence in support of any internal or external enquiry, disciplinary proceedings or prosecution, especially if associated with the security of the College site and members of the College community, criminal activity committed on College property, or the misuse of College property or equipment.

The cameras should not face into College buildings, except where agreed in advance with student representatives via the College’s Consultative Committee except in exceptional circumstances. Cameras stream video to dedicated CCTV servers, from where they can be viewed on a real time basis in the Porter’s Lodge, Library, and other approved locations. Recordings are made onto the hard disks of the CCTV servers for replay in the event of an incident.

This Policy and Code of Practice sets out the appropriate actions and procedures, which must be followed to comply with the relevant data protection legislation in respect of the use of CCTV surveillance systems managed by the College. This policy and code of conduct intends:

1. To inform all who come onto the College site that CCTV is in use.

2. To keep CCTV data secure and controlled by authorised personnel.

3. To maintain all CCTV equipment in working order.

4. To provide retention of CCTV data within the stated purpose only.

5. To state the manner and means of destroying stored CCTV data.

6. To prevent access by unauthorised individuals or third parties.

Responsibilities

The system is operated by the College and is in use all year round. The Bursar has overall responsibility for the implementation and use of the system. The IT Director and IT department ensures all equipment is maintained and in a suitable condition. The Porters, Library Staff, IT staff, and other College Officers will interrogate the system and its data. Operation of the system is restricted to those named above.

Staff who use the CCTV system have the following responsibilities:

1. To uphold the arrangements of this Policy and Code of Practice.

2. To handle CCTV data securely and responsibly, within the aims of the Policy and Code of Practice.

3. To be aware that they could be committing a criminal offence if they misuse CCTV data.

5. To report any breach of procedure to the Bursar or College Data Protection Lead.

6. To attend training / refresher sessions as required.

Siting the Cameras

Prior to any camera installation the Bursar and the College Data Protection Lead will ensure that the installation complies with the relevant data protection legislation and the CCTV Policy and Code of Practice. It is essential that the location of the equipment is carefully considered; the way in which CCTV captures data will need to consider the privacy of all individuals. All camera locations are visible to public and staff. Signs have been erected at the main entrance to notify all those who enter that they are entering an area that is covered by CCTV cameras.

Processing CCTV data for an in-progress incident

The following procedures concern the viewing and use of the CCTV data in response to an in-progress incident in the College.

1. The Porters, Library staff and IT staff may directly view the live feeds from any camera during their working hours.

2. In response to an in-progress incident the above staff may view recently recorded data to ascertain facts necessary to respond to the event.

3. No recordings or copies of CCTV data is permitted; if this is necessary then the following policy for processing CCTV data for past incidents must be followed.

Processing CCTV data for past incidents

The following procedures concerning the use and retention of recordings should be followed to provide an acceptable level of security and accountability, and to ensure the acceptance of recordings in support of criminal proceedings.

1. Recordings for most cameras are retained on the CCTV server for up to 30 days and are then overwritten.

2. Recordings for cameras covering long term student storage areas (trunk stores, etc.) are retained on the CCTV server for up to 90 days and are then overwritten.

3. If an incident has occurred and it is thought that the CCTV system has some evidence on it, in general, permission must be sought from two authorised College Officers, or one authorised College Officer and the Head Porter or the College Data Protection Lead before the recordings are viewed. Authorised College Officers in this regard are the College Proctor, the Senior Tutor, and the Bursar.

4. Requests must be recorded on the CCTV Request form (Appendix A).

5. Once a valid request has been made the IT department will process the footage and generate a master copy of the recording.

6. All viewings of recordings must be logged in the CCTV Log held by the Head Porter.

7. If any evidence is found, a copy of the relevant part of the recordings will be stored on digital media. The CCTV request form should be held with the digital media in a secure format and handed to the Head Porter immediately.

8. The Head Porter, or a nominated deputy, should mark each item of digital media with a unique reference number.

9. All digital media will be securely stored by the Head Porter until they are passed to a Police Officer, or no longer needed.

10. The IT Department is responsible for destroying all digital copies when they are no longer needed for evidence. Digital copies should be destroyed, by appropriate means for the specific media and disposed of in the confidential waste container. Each disposal should be noted in the CCTV Log (Appendix B).

11. The Head Porter, or a nominated deputy, is responsible for ensuring that the CCTV log is kept up to date.

Access to and Disclosure of CCTV data to Third Parties

Access to, and disclosure of, CCTV data is restricted and carefully controlled to ensure privacy of individuals, but also to ensure that the continuity of evidence remains intact should the data be required for evidential purposes.

IT staff need access to CCTV data for maintaining the CCTV system. Individuals requesting access to CCTV data should complete a CCTV Request form (Appendix A). Any request by a third party to view a CCTV recording **must be approved** by the College Data Protection Lead in consultation with the Bursar, who will determine whether disclosure is necessary, legitimate and lawful. All unsuccessful requests will be retained for 3 months.

Once this has been actioned the details should be recorded in the CCTV Log (Appendix B) held by the Head Porter. Any digital media that is requested by the Police in connection with a criminal enquiry will be released against an Officer’s signature and the completion of CCTV Request form (Appendix A), after authorisation by the Bursar in connection with staff matters and by the Senior Tutor in respect of students.

Any individual wishing to make a subject access request is asked to review the Colleges Data Protection policy at <http://www.pem.cam.ac.uk/the-college/legal-information/data-protection/>.

On no account may CCTV data be viewed by any unauthorised person, or removed from the College without the specific approval of the Senior Tutor, College Data Protection Lead, Bursar or Head Porter. Staff will be informed that any misuse or unauthorised access of live CCTV data will be considered as a serious disciplinary matter.

If the College is asked to retain a recording for evidential purposes, the IT Director will take possession and securely store the relevant digital media for as long as is required, which would normally be until one month after the finalisation of any court proceedings.

Complaints Procedure

Any individual who has concerns about the CCTV system or the control of it at Pembroke College is requested to write to the Bursar or the College Data Protection Lead outlining the reason for the complaint.

Information and Training

A copy of this Policy and Code of Practice will be published on the College website and in the Staff Handbook. The Information Commissioner’s Code of Practice in relation to CCTV will also be published on the College website.

All Porters will be trained in the practical use of the CCTV system. The Head Porter, Senior Porters and IT Personnel will receive additional training in the storage, capture and recording of CCTV data. The Bursar, Head Porter, Senior Porters and IT Staff will be issued with a copy of the Information Commissioner’s CCTV Code of Practice.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 25th May, 2018. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

**APPENDIX A**

|  |  |  |  |
| --- | --- | --- | --- |
| C:\Users\bs3\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\GD1A32ZP\Arms - colour.jpg  REQUEST ID:  *Office Use Only*  **PEMBROKE COLLEGE - CAMBRIDGE** CCTV REQUEST FORM | | |  |
| **1. REQUESTERS PERSONAL DETAILS** | | |
| Applicant’s full name: | | Applicant’s postal address: |
| Applicant’s email address: | |
| **2. INFORMATION REQUIRED** | | |
| **To help us find the CCTV data you require, please complete the following section.** | | |
| Location/position of CCTV camera: | Date and time of incident: | |
| Brief description of the incident to be retrieved, the appearance of any individuals and likely activities captured by CCTV:  **Please give all information that might assist us in finding the incident** | | |
| Purpose of the request: (e.g. Subject Access Request / Evidence for investigation / Police Request / Disciplinary)  **If the purpose of the request is a subject access request ensure the College Data Protection Lead is consulted, for all other requests consult the Bursar.** | | |
| **3. WORKFLOW *(Office Use Only)*** | | |
| Name/Role of Approvers: | Approval status (Confirmed/Denied): | |
| Name/Role of individual consulting CCTV record: | Date Copies Made: | |
| Digital Media Reference Number(‘s): | | |
| Digital Media Destruction Date: | Digital Media Destruction Actioned By: | |
| Name of recipient(‘s): | Organisation of Recipient(‘s): | |
| Badge Number of Recipient(‘s):  **Optional – If digital media is being released to the Police service** | Purpose of release: | |



**APPENDIX B**

**PEMBROKE COLLEGE - CAMBRIDGE**

# CCTV LOG

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| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Badge Number of recipient:** |
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| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Name of recipient(‘s):** | **Organisation of recipient:** | **Signature of recipient(‘s):** |
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| --- | --- | --- | --- | --- | --- | --- |
| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Name of recipient(‘s):** | **Organisation of recipient:** | **Signature of recipient(‘s):** |
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| **Badge Number of recipient:** |
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| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Badge Number of recipient:** |
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| --- | --- | --- | --- | --- | --- | --- |
| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| --- | --- | --- | --- | --- | --- | --- |
| **Request ID:** | **Date of Request:** | **Approval Status:** | **Approvers:** | **Date Actioned:** | **Media Reference Number:** | **Date Media Destroyed:** |
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| **Badge Number of recipient:** |
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# CONFINED SPACES

Introduction

It is our aim to provide a healthy and safe working environment for all our employees and workers. This policy is non-contractual but aims to ensure that any risks associated with confined spaces on our premises are minimised at all times.

Scope of this Policy

This policy should be followed by all employees and workers who need to work in any confined space areas. The general principles also apply to contractors.

Aims of this Policy

It is our aim to ensure, so far as is reasonably practicable that:

* All confined spaces will not be accessed by any personnel in any situation unless under the specific requirements of the confined spaces procedures as listed below.

|  |
| --- |
| *Definition of a confined space:*  *“Confined space” means any place, including any chamber, tank, vat, silo, pit, trench, pipe, sewer, flue, well or other similar space in which, by virtue of its enclosed nature, there arises a reasonable foreseeable specified risk.*  *“Specified risk” means a risk of serious injury to any person from fire or explosion. Other examples given loss of consciousness or asphyxiation from gas, fume, vapour or lack of oxygen. (Regulation 1, Confined Space Regulations 1997).* |

Legal Considerations

The following piece of legislation applies to this policy:

* The Confined Spaces Regulations 1997

Procedure

* All employees or workers will receive full information, instruction, training and supervision on confined space work and the associated risks.
* All confined spaces will be fully risk assessed before they are entered.
* No confined space will be entered if there is foreseeable risk of serious injury.
* Where deemed necessary by the risk assessment an atmospheric test will be conducted before the confined space is entered.
* All confined space work will be conducted by two persons, an “Entrant” and an “Attendant”.
* Safe access to and egress from the confined space will be established and maintained throughout the work.
* The “Attendant” will be present at the entrance to the confined space at all times and under no circumstances enter the confined space.
* Effective channels of communication between “Entrant” and “Attendant” will be maintained throughout the duration of the work.
* Emergency procedures will be in place and followed, whereby an incapacitated “Entrant” can be recovered without additional risk to the rescuers safety.
* Non sparking tools will be used in any potentially flammable or explosive atmospheres.
* Checks will be made to ensure all mechanical and electrical isolations have been completed before work commences.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# CONTRACTOR MANAGEMENT

Engagement and Control of Contractors on Site:

College requirement for an outside contractor

Ensure the necessary paperwork requested in the Code of Practice Contractors/Sub Contractors/

Couriers/Visitors Policy is received back from the Contractor before work commences.

Monitor and review the Contractors safety practices whilst on site.

Ensure Contractor and their employees sign in at the Porters Lodge and obtain a badge which must be displayed at all times.

Select contractor and supply them with the Code of Practice Contractors/Sub Contractors/Couriers/Visitors Policy. Advise HR to send this paperwork.

Ensure when Contractor arrives on site they are aware of Health and Safety procedures and policy of the College.

# CONTRACTOR MANAGEMENT

Policy

The College will ensure, so far as is reasonably practicable that:

Contractors will need to supply us, on a bi-annual basis, with information regarding the company/organisation (see Code of Practice Contractors/Sub Contractors/Couriers/Visitors Policy which is a separate document).

Due consideration is given to health and safety when selecting contractors to undertake work on behalf of Pembroke College.

Contractors will be provided with relevant information of health and safety risks arising from our premises and work activities.

Legal Considerations

The following legislation applies to this policy:

* The Management of Health and Safety at Work Regulations 1999.
* The Construction, Design and Management Regulations 2015.

Procedures

The following procedure will apply to all Contractors who undertake work on our behalf:

Contractors will be asked to complete the following documentation:

* Undertaking
* Contractor/Sub Contractor Assessment
* Organisation Detail
* Health and Safety Arrangements
* Management Arrangements
* Individual Training/Skills/Competency
* Consultants and Design Work (Selection/Monitoring)
* Environment Management

The documents will be reviewed by the Health and Safety Officer or Buildings Manager. Only competent and experienced contractors will be permitted to undertake work at the College.

The College will provide the Contractor with relevant information on any specific health and safety hazards on the premises to which he or his employees may be exposed to in connection with the proposed work. Pembroke College will also inform the Contractor of relevant health and safety arrangements, including procedures for signing in/out, accident reporting, emergencies and welfare facilities. This information is contained in the Code of Practice for Contractors/Sub Contractors/Couriers/Visitors.

Contractors/Couriers/Visitors Policy

Contractors are responsible for providing any equipment, including access equipment that may be required for the project/job. Contractors will not be permitted to use equipment or facilities provided by the College unless agreed in advance with the Buildings Manager or designated person. The College contact will maintain a line of communication with the Contractor’s contact person on an on-going basis.

Contractors will be actively monitored throughout the duration of any contract by the person(s) who requested the work takes place, thus ensuring that all work is completed in a safe manner and they adhere to their own method statements/risk assessments.

Upon request Contractors will be expected to produce any relevant staff training certificates and compliance testing certificates for any equipment being used.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# (COSHH) SUBSTANCES HAZARDOUS TO HEALTH

Procedure for the Safe Handling and use of Substances

Is a hazardous substance in use?

Maintain records of all hazardous substances used and keep manufacturers’ safety data sheets (MSDS)

Record the assessment and review periodically

Has the manufacturer’s product safety data sheet been obtained (MSDS)

Responsible person to carry out a competent COSHH assessment

YES

NO

NO

YES

YES

NO

NO

NO

Monitor exposure to hazardous substances through health surveillance as deemed necessary

Inform, instruct and train employees about the risks and precautions to be taken when using the hazardous substance

Introduce effective control measures to ensure exposure to hazardous substance is eliminated or reduced

Obtain relevant safety data sheet

YES

NO

NO

NO

Has a COSHH assessment been carried out?

# (COSHH) USE OF CHEMICALS AT WORK POLICY

Introduction

It is our aim to provide a healthy and safe working environment for all our employees and workers. This policy is non-contractual but aims to ensure that any risks associated with the storage and use of chemicals on our premises are minimised at all times.

Scope of this Policy

This policy should be followed by all employees and workers who either procure chemicals for use on our premises, or who use chemicals in the course of their duties. The general principles also apply to contractors.

Aims of this Policy

This policy aims to reduce the risks associated with the use of chemicals on site by implementing a series of risk control measures.

Our starting point will be to eliminate the use of hazardous chemicals wherever possible. If this cannot be done, we will take all reasonable steps to find less hazardous chemicals. In the event that hazardous chemicals need to be used, control systems will be introduced. Personal protective equipment (PPE) will only be issued where hazards cannot be effectively managed by other means.

The use of new chemicals will be assessed prior to use and where this expertise is not available in-house, it will be provided by suitably qualified third parties.

Legal Considerations

The following piece of legislation applies to this policy:

* The Control of Substances Hazardous to Health Regulations 2002 (as amended).

Definitions

COSHH (the Control of Substances Hazardous to Health Regulations 2002) require us to:

* Minimise the risks from using chemicals at work.
* Introduce control measures to manage those which may remain.
* Train employees in the safe use of chemicals.
* Monitor the effectiveness of any control measures.
* Store chemicals safely in order to avoid the risks of fire, explosion or environmental damage.

In certain circumstances, we are also required to conduct health surveillance. This will occur if any employee is exposed to a hazardous substance which is known or is likely to cause a disease or be detrimental to health.

Ordering Chemicals

Adequate information about each chemical must be obtained prior to its use. This will take the form of a material safety data sheet (MSDS), which should be provided by the supplier of the chemical. If the intention is to use a chemical for the first time, the relevant MSDS needs to be obtained before the chemical is ordered.

Where necessary, further information will be obtained from the chemical supplier and/or other resource such as the HSE website.

Use of Chemicals On-Site

The use of all chemicals on our premises will be assessed. For those with relatively low-hazard properties, this process will be straightforward. In these cases, it will be assumed that implementation of controls in line with the MSDS will be sufficient.

In the event that high-hazard substances are identified, e.g. potential cancer-causing agents, your Head of Department will try to source less hazardous substitutes. Where this is not possible, strict controls will be required.

If chemicals need to be mixed with other materials, each must be assessed in order to ensure that no adverse reaction will occur. The MSDS will provide information on incompatible chemicals. The importance of this procedure must not be overlooked as even everyday cleaning agents can cause a serious reaction if mixed.

Storage

We will provide appropriate storage according to the properties of each chemical. The type of storage necessary will be determined by reference to the MSDS. Special consideration will be given to flammable liquids, environmentally hazardous chemicals and oxidising agents (due to the risks of explosion).

The suitability of all chemical storage will be reviewed as necessary by the Head of Department/H&S Officer.

Employee Responsibilities

All employees and workers will be expected to co-operate with the College in respect of any controls introduced to ensure the safe use and storage of chemicals on site, and to comply with any instructions as to the safe use and/or storage of such chemicals.

Where PPE has been deemed necessary, this will be issued by us and employees are required to wear and maintain it in line with the manufacturer's recommendations.

We also require all employees and workers to report any concerns to their Head of Department or supervisor. These will be dealt with promptly. Should any further action be required, the employee raising the concern will be informed what form this will take.

Training

All relevant employees will receive information, instruction and training on how to use chemicals safely, repeated as necessary, e.g. on the introduction of new chemicals or processes. Training will be provided in a practical form in which the hazards and controls are clearly understood, e.g. training on operating procedures.

Safety Audits

This policy will be monitored by the H&S Officer and Heads of Department through the carrying out of periodic safety audits. These audits will cover the use of chemicals, the maintenance of control systems, adherence to safe working practices, the provision of information to employees and workers and the storage of chemicals.

Where contractors are engaged on site, they will be monitored to ensure that they do not pose a hazard to employees, workers, visitors or themselves.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# DISPLAY SCREEN EQUIPMENT (DSE)

Procedure for Using/Operating Display Screen Equipment (DSE)

**Monitor and review regularly all assessments, equipment and procedures.**

**Provide Health and Safety training and information:**

* Employees and workers should know how to use their workstation area and DSE safely.
* Appropriate actions are taken to reduce risks.

**On request arrange an eye test with optometrist:**

* Pembroke College offer a corporate eye care scheme which includes a free eye test for all VDU users (computer users). Details listed in the policy below.
* Details of the scheme can be obtained from the HR Office.
* It is recommended that you have an eye test every 12-18 months.

**Plan work so there are breaks or changes of activity:**

* Short frequent breaks are best.
* Operator’s individual discretion when to break is best. However, alight from operator chair at least every hour.
* Refocus eyes at distance every 15/20 minutes

**Ensure work station meets the minimum requirements, such as:**

* Adjustable chair.
* Suitable lighting.
* Suitable desk.
* Suitable screen, keyboard and software.
* Suitable work environment.

**Analyse work station: assess and reduce risks**

Look at:

* The whole work station, including equipment, furniture and the work environment.
* The job being done.
* Any special needs of the employee

# DISPLAY SCREEN EQUIPMENT (DSE) POLICY

Introduction

Specific regulations protect employees and workers who are required to regularly use display screen equipment in order to do their work.

This policy is non-contractual but sets out our procedures for managing use and ensuring compliance.

Scope of this Policy

This policy applies to employees and workers who regularly use a computer or other technology which would be classed as "display screen equipment", in order to do their jobs.

Aims of this Policy

This policy aims to minimise the risks to DSE users by setting out clear procedures for assessment, training and the provision of an eyesight test and corrective appliances (where needed).

Legal Considerations

The following piece of legislation applies to this policy:

* Health and Safety (Display Screen Equipment) Regulations 1992.

Definitions

A "user" is defined as someone who uses a computer (or other display screen equipment) for "continuous spells of an hour or more at a time" on a "more or less daily basis”.

Some roles may be assessed to determine whether the post holders should be classified as "users" for the purposes of the Regulations. This assessment will be carried out initially by the Health and Safety Officer.

Actions to Ensure Compliance

The Health and Safety (Display Screen Equipment) Regulations 1992 set out a series of minimum standards for the workstations used by DSE user, including seating, lighting levels and workstation layout. In order to comply with the Regulations, the following procedures are to be followed:

* All new employees and workers who are required to use display screen equipment on a regular basis will be assessed initially by the Health and Safety Officer. From then onwards, every two years, they will be given a self-assessment DSE questionnaire to complete and return to the HR Office.
* Should a current employee or worker change workstations, major software they use regularly, move his/her desk to a different position or become a DSE user for the first time, they must inform the Health and Safety Officer who will complete a VDU Assessment with them. This should be done at the time of the change in location or job role.
* Where the assessment or the self-assessment questionnaire identifies problems, such as flicker or glare, it is the responsibility of the Health and Safety Officer to ensure that these problems are rectified.
* All employees and workers are encouraged to rotate their job tasks in order to spend at least ten minutes in every hour away from the computer screen. Anyone who feels that his/her workload does not permit adequate breaks should raise this with his/her Head of Department.
* Where necessary, we will provide further training and information in order to help individuals to set up their workstations correctly.

Users Duties

DSE users are expected to complete the self-assessment DSE questionnaire in a timely manner. They are also required to ensure that their workstations are set up correctly. Any difficulties that are experienced with individual workstations should be brought to the attention of the Health and Safety Officer as soon as possible.

Eye Tests

Any employee who has been designated as a DSE user has the right to request an eye test. Pembroke College operate a Corporate Scheme with Boots and Specsavers.

Following the initial eye test, the frequency of any follow-up tests will be decided by the optician. However, it is recommended that an eye test be carried out every 12-18 months. If an employee chooses not to use the Corporate Scheme the College are prepared to contribute the amount that would have been paid for the Corporate Scheme as a contribution towards their chosen optician’s costs.

Conditions of the Corporate Scheme

The benefits of the two schemes are as follows:

**Specsaver Voucher**

* Free Eyesight test.
* One pair of single vision glasses from the £45 range.

**Boots Voucher:**

* Free eyesight test.
* One pair of single vision glasses solely for VDU use.

*The above discounts only apply if the glasses are for* ***VDU use.*** *Vouchers cannot be used with over 60’s voucher, student discount, sale items, easycare or for contact lenses.*

Guidance on Sitting Correctly

Outlined below is a self-help guide whilst working with desktop computers and other types of display screen equipment (DSE) in an office environment.

**Support your back**

Avoid back pain by adjusting your chair so that your lower back is properly supported. A correctly adjusted chair will reduce the strain on your back. Use one that is easily adjustable so that you can change the height, back position and tilt. Have your knees level with your hips. You may need a footrest for this.

**Adjust your chair**

Adjust your chair height so that you can use the keyboard with your wrists and forearms straight and level with the floor. This can help prevent repetitive strain injuries. Your elbows should be by the side of your body so that the arm forms an L-shape at the elbow joint.

**Rest your feet on floor**

Your feet should be flat on the floor. If they’re not, ask if you can have a footrest, which lets you rest your feet at a level that’s comfortable. Don't cross your legs, as this can cause posture-related problems.

**Place your screen at eye level**

Your screen should be directly in front of you. A good guide is to place the monitor about an arm's length away, with the top of the screen roughly at eye level. To achieve this you may need to get a stand for your monitor. If the screen is too high or too low, you'll have to bend your neck, which can be uncomfortable.

**Using the keyboard**

Place your keyboard in front of you when typing. Leave a gap of about four to six inches (100mm-150mm) at the front of the desk to rest your wrists between bouts of typing. Your wrists should be straight when using a keyboard. Keep your elbows vertical under your shoulder and right by your side. Some people like to use a wrist rest to keep their wrists straight and at the same level as the keys.

**Keep your mouse close**

Position and use the mouse as close to you as possible. A mouse mat with a wrist pad may help to keep your wrist straight and avoid awkward bending. If you are not using your keyboard, push it to one side if using the mouse a lot.

**Avoid screen reflection**

Your screen should be as glare-free as possible. If there’s glare on your screen, hold a mirror in front of it to identify the cause. Position the monitor to avoid reflection from overhead lighting and sunlight. If necessary, pull blinds across the windows and replace ceiling lighting with table lights. Adjusting the screen's brightness or contrast can make it much easier to use.

**Working with spectacles**

People with bifocal spectacles may find them less than ideal for computer work. It's important to be able to see the screen easily without having to raise or lower your head. If you can’t work comfortably with bifocals, you may need a different type of spectacles. Consult your optician if in doubt.

**Make objects accessible**

Position frequently used objects, such as your telephone or stapler, within easy reach. Avoid repeatedly stretching or twisting to reach things.

**Avoid phone strain**

If you spend a lot of time on the phone, try exchanging your handset for a headset. Repeatedly cradling the phone between your ear and shoulder can strain the muscles in your neck.

(NHS, 2014)

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The Health and Safety Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# DRIVING ON BUSINESS POLICY

Introduction

Every week more than 20 people are killed and 250 seriously injured in 'at work' road accidents. This figure excludes accidents that occur whilst commuting to/from work.

This policy is non-contractual but seeks to set out how Pembroke College aims to manage driving on business.

Scope of this Policy

This policy applies to all Fellows, students, employees and workers and volunteers who drive on College business, whether in a vehicle owned or leased by Pembroke College or in their own vehicles. It includes those whose business travel is infrequent and those who use their own vehicles or hired vehicles to travel to/from clients, training courses, seminars or work-related functions of any kind.

Aims of this Policy

We aim to ensure that those who drive on business do so safely, and that any risks are identified and reduced as far as is reasonably practicable.

In order to do this, we will:

* Maintain relevant records about those who drive on business, including their annual business mileage; where and when they travel on business; any endorsements on their licences and any health conditions that may affect their ability to drive safely.
* Carry out health and safety risk assessments and establish what their risks and exposures are, and how they can minimise these (this will include route and delivery point assessments).
* Undertake regular checks of driving licences and company vehicles.
* Require those who claim expenses for driving their own vehicle to confirm that their vehicle is taxed, has a valid MOT (where appropriate) and is insured for business use.
* Regularly review our accident reporting procedures and ensure that any accidents whilst driving on business, including in private or hired vehicles, are promptly reported to us.
* Provide safety instruction and driving assessments where we feel this to be necessary.
* Regularly review the time spent driving on business, and ensure that working time and breaks comply with the Road Transport (Working Time) Regulations (or Working Time Regulations for those who drive infrequently on business).

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work etc. Act 1974.
* The Road Traffic Act 1991.
* The Working Time Regulations 1998.
* The Management of Health and Safety at Work Regulations 1999.
* The Road Transport (Working Time) Regulations 2005.
* The Corporate Manslaughter and Homicide Act 2007.
* The Drug Driving (Specified Limits) (England and Wales) Regulations 2014.
* The Smoke-free (Private Vehicles) Regulations 2015.

Definitions

For the purposes of this policy the following definitions apply:

* A “company vehicle” is any car or van that is provided by Pembroke College.
* “Driving on Business” includes any journeys made by an employee or worker driving either a company vehicle or their own personal vehicle on Pembroke business, and covers all journeys other than those between home and their normal place of work.

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Responsibilities

Fellows, students and employees are required to support this policy fully and to ensure that all practical measures are taken and appropriate resources, in the form of equipment, personnel and time, are made available in respect of enhancing safety whilst driving at work.

Heads of Department and supervisors must:

* Bring this policy to the attention of all those who report to them and who are permitted to drive on business and ensure that it is adhered to.
* Ensure that anyone who drives on business is insured to do so.

Drivers are expected to make themselves familiar with this policy to ensure that they practise safe methods of driving at all times, and to inform their Head of Department immediately of any driving offences, health conditions that may affect their ability to drive safely and/or any concerns about their ability to make a particular journey safely for any reason.

Register of Authorised Drivers

All employees who drive on College business, whether in a vehicle that is owned or leased by Pembroke College or a private or hire vehicle, must hold a valid full driving licence and must complete and sign a copy of the Driver Safety Checklist which is available from the HR Office. HR will need to photocopy their full driving licence. A DVLA authorisation form must also be completed and signed for the HR Office. Drivers of private vehicles must also ensure that their insurance covers them for business use. This is a pre-condition to claiming business mileage or other driving-related expenses and is the responsibility of employees.

Driving licences will be rechecked annually,

Risk Assessments and Eyesight Tests

Drivers who are identified as being potentially more at risk may require a Risk Assessment to be carried out. Urgent action will be taken for drivers with severe pain or a medical history of low back injury; an inappropriate vehicle; high driving exposure or other risk factor. These drivers will be offered support until their risk is deemed to be low. Where appropriate, this may include additional training, medical guidance, reduced exposure to driving, change of daily tasks, or specialist advice (e.g. ergonomist, physiotherapist).

We may require all employees who drive on College business, whether this be in their own vehicle or one leased, hired or owned by Pembroke College to have their eyesight checked. If this is a requirement the cost of any eyesight test will be met by Pembroke College through the Corporate Eye Test Scheme.

Driving Standards

Drivers must drive with due care and attention, respecting all local and national traffic regulations and speed limits. They are required to take note of the condition of the vehicle, its loading, the weather and road conditions etc., and take all sensible steps to ensure the safety of the vehicle, its passengers and other road users at all times.

All drivers are reminded of the necessity to carry out regular checks on vehicles, including tyre condition, lights, lubricant levels, level of screen wash and any other check required for the safe operation of the vehicle whilst it is on the road.

The wearing of seatbelts by drivers should be in accordance with the law.

The driver is also responsible for ensuring the maximum safety of the vehicle and contents when it is parked. He/she must ensure that the vehicle is locked and secure, the alarm is switched on and the parking brake is applied.

Minimising Stress and Fatigue

Drivers should not put pressure on themselves to undertake a journey that may cause undue fatigue.

Guidance will also be provided on the importance of ergonomics, as the lack of correct comfort and position whilst driving can lead to poor posture, tiredness, irritability and lack of concentration. The correct footwear will be stressed as an important part of driving ergonomics.

Drivers should try not to drive when they would normally sleep, i.e. early morning or late at night. They should take regular breaks (a minimum break of 15 minutes is recommended after every two hours of driving) and should stop to eat and drink, rather than eating whilst they drive. If feeling tired, they should stop in a safe place and rest for at least 15 minutes, and have a drink containing caffeine if necessary. Loud music and letting air into the car are not effective ways of counteracting signs of fatigue. Where possible the driving should be shared on long journeys.

Where possible, and where other authorised drivers are travelling together, the driving should be shared.

Those who only drive rarely on business are required to use their common sense and ensure that they take breaks in their journeys if necessary. Such employees are also expected to avoid long journeys if alternative transport is available. Note that all travelling time (except for that between home and work) is regarded as working time under the Working Time Regulations 1998. Drivers of vehicles over 3.5 tonnes maximum weight are covered by the [Road Transport (Working Time) Regulations 2005](http://www.legislation.gov.uk/uksi/2005/639/contents/made), and should ensure that they comply with the requirements set out in these regulations for breaks and working hours. Drivers must comply with all legal requirements which regulate maximum permitted driving hours.

Journey Planning

Our Heads of Department will encourage the proper planning of journeys to avoid known problem areas and minimise driver stress. Predicted weather conditions should be taken into account and planned journey times should be realistic. Any employee who we believe to be guilty of driving unlawfully or without courtesy to other road users will be subject to disciplinary action. Drivers should ensure that routes are well planned in advance wherever possible, especially if travelling alone, after dark or in adverse weather conditions and that they have suitable means for contacting us in case of emergency.

Drivers are also required to set their radios to pick up any traffic warnings re accidents etc. en-route so that they may avoid those areas altogether.

Personal Safety

Drivers should be alert for potentially dangerous or competitive situations and avoid them. If such a situation is encountered, they are advised to stay calm and not to react to provocation.

Drivers should use well-lit and frequently used car parking areas. All valuables should be removed from view and, on return to the vehicle the driver should check it for signs of tampering before getting in.

Vehicles should be locked when left unattended or in slow-moving traffic and should be regularly filled with fuel. Drivers should be aware of other drivers signalling faults about the vehicle. Before commencing a journey it is a good idea to check that brake lights are functioning.

Drivers should consider keeping useful items in their car such as a torch, a personal alarm, a map, a coat or blanket, a box of tissues, useful telephone numbers, a charged mobile phone (or car charger) an ice-scraper and a de-mister sponge or cloth.

Breakdown Guidance

Drivers of vehicles owned or leased by us will be issued with the procedures to be adopted in case of breakdown. Risk assessments will review the need for such items as a warning triangle, high visibility clothing to use in case of breakdown, first aid kits or fire extinguishers for vehicles.

Drivers should try to prevent breakdowns by regularly and appropriately maintaining their vehicles and by carefully planning their journeys. Cars should be serviced in accordance with manufacturer instructions. Drivers of private vehicles should consider taking out membership of a recovery service. All drivers should ensure that they leave appropriate contact and location details with their Head of Department.

In the event of a breakdown at night, hazard warning lights and sidelights should be used to warn other road users of the obstruction in the road*.* Lifts should not be accepted from strangers. While waiting for the breakdown services to arrive drivers should stay close to the vehicle but well back form the road. If an unknown vehicle draws up, thedriver should get into the vehicle and lock it. For breakdowns on the motorway, drivers should try to park on the hard shoulder to avoid obstructing the driving lanes*.*

Driving with Courtesy and Care

Whilst on business, all drivers are representatives of Pembroke College and as such their behaviour reflects on our image and reputation. Drivers are expected to be courteous and abide by the Highway Code and other road traffic laws in place (especially speed restrictions).

Mobile Phones

It is a strict rule that mobile phones must **not** be used to make or receive calls or text messages whilst driving or temporarily stationary in busy traffic. Nor must mobile phones be used whilst driving to access any sort of data (e.g. via the Internet), nor to send or receive text messages or other images.

Drivers should ensure that they do not answer mobile phone calls whilst driving and that voicemail messages are attended to during motoring rest breaks. In addition, other Pembroke College employees are advised not to contact colleagues on their mobile phones if they know they will be driving. **This rule also applies to those with "hands-free" equipment.** A driver who needs to use a mobile phone should be properly parked with the engine switched off.

Any drivers who are fined for using a mobile phone whilst driving will be required to pay such fines themselves and may face disciplinary action.

Mobile phones may be issued to staff who do not normally have them as a means of contacting us in case of breakdown, accident, or other risk (e.g. when travelling at night and in unsafe areas).

Smoking

Smoking is not permitted nor is the use of e-cigarettes in the College Van or any vehicles leased by Pembroke College. All of our vehicles have a "no smoking" sticker clearly displayed inside the vehicle. For more guidance, see our smoking policy.

Health Conditions and Medication

Any physical disability or illness that could affect a driver's ability to drive safely must be reported immediately to the HR Manager. Equally, an employee who is concerned that any prescribed drugs may affect his/her ability to drive safely (e.g. by making him/her drowsy or slowing his/her reactions) should always read the label on the medicine, be aware of any possible side effects and must report any concerns to the HR Manager prior to undertaking any driving on business. The HR Manager will decide whether the driver should be temporarily allocated other duties that do not involve driving.

Failure to comply with either of the above requirements will result in disciplinary action, which may include dismissal.

Driving under the Influence of Alcohol or Drugs

It is a strict rule that employees whose work involves driving should not consume alcohol during working hours, and should be aware that heavy drinking during the previous evening can affect their ability to drive safely and may leave them over the legal limit throughtothe next morning.

Whilst driving on business, drivers are expected at all times to keep well within the legal limits for the level of alcohol in the blood whilst driving, including the ‘morning after’ effects of intoxicating substances in the bloodstream. Note: the drivers' breath alcohol levels should not exceed 35ug/100ml; their blood alcohol level should not exceed 80 mg/100ml. Research shows that reactions are impaired and driving ability is reduced even when alcohol levels are well below the legal limit.

Any one of the employees who drive in England and Wales should also note that it is an offence to drive, attempt to drive or be in charge of a motor vehicle on a road or other public place with more than the permitted amount of 16 controlled drugs in the driver's blood which are listed below. Whilst the list of drugs includes illegal drugs (such as cocaine), drivers should note that it also includes drugs found in some medicines which are either legally prescribed or available over the counter. There is therefore a risk that drivers may inadvertently break the law when taking certain commonly used medicines, although they will have a defence if they have taken such drugs legitimately, following the advice of a healthcare professional, but not if they have ignored advice about the dosage or about the amount of time that should lapse between taking the drug and driving. All drivers should therefore ensure that they declare to us any medication they are taking which contains any of the drugs listed below, and also to keep evidence of any legally prescribed medicines with them to speed up the investigation process should they be stopped.

The controlled drugs (and the limits, in micrograms per litre of blood) are as follows:

* Benzoylecgonine 50
* Clonazepam 50
* Cocaine 10
* Delta-9-Tetrahydrocannabinol 2
* Diazepam 550
* Flunitrazepam 300
* Ketamine 20
* Lorazepam 100
* Lysergic Acid Diethylamide 1
* Methadone 500
* Methylamphetamine 10
* Methylenedioxymethamphetamine 10
* 6-Monoacetylmorphine 5
* Morphine 80
* Oxazepam 300
* Temazepam 1000

The consumption of alcohol and/or use of illegal substances is strictly forbidden either just prior to or whilst driving a College vehicle (or a personal or hire vehicle on business). This will be regarded as gross misconduct and will normally result in summary dismissal. Driving whilst under the influence of illegal drugs or other intoxicating chemicals will also be classed as gross misconduct.

Any misuse of prescribed drugs while driving the College van (or a personal or hire vehicle on business), which has any potential adverse effect on the employee's fitness to drive will also render the employee liable to disciplinary action.

We reserve the right to request anyone who drives on business to undertake a drugs/alcohol test at any time.

Parking on our Premises

Vehicles parked on our premises are parked at the owners’ risk. We accept no responsibility for any damage caused to vehicles parked on our premises, however caused. There must be no discharging of tanks on the premises. Drivers must drive and park carefully with respect for their fellow drivers.

Auditing of Vehicles

Regular audits will be undertaken of vehicles owned/leased by Pembroke College. Audits will cover the condition and roadworthiness of the vehicle as well as a check of safety equipment. These checks will be carried out by the Porters Lodge/Maintenance Department.

Drivers of College vehicles are required to undertake a pre-journey check including a visual check of the vehicle, tyre conditions, window, and lights. An inspection sheet will be given to all users by the Porters Lodge when collecting the vehicle keys.

Accident Reporting

Drivers are required to report all accidents and 'near misses' including any accidents or 'near misses' in their own vehicles or in a leased or hired vehicle whilst driving on College business.

Drivers of the College van or any vehicle owned or leased by the College will be supplied with instructions on what to do in case of an accident and given a checklist to be completed at the site of an accident or, where this is not possible due to conditions or injury, then as soon as possible following the accident.

Licence Checks and Driving Offences

We will undertake checks of all drivers' licences from time to time. In addition, we may contact the DVLA or use an independent verification or advisory service to check an employee's driving status or to take advice if we are concerned about the risk of driving with any health condition.

Drivers are required to immediately notify us of any speeding or other offences which may result in points being added to their licence. 'Points swapping' (getting colleagues or other family members to accept points from those who are closer to a driving ban) is illegal and lying about who was driving is seen as 'perverting the course of justice' and could lead to a prison sentence. Insurers viewpoints swapping as fraud and this could invalidate a policy. Points swapping is considered by the College to be gross misconduct and may result in dismissal.

Reimbursement of Expenses

College business mileage will be reimbursed in line with our expenses policy. The journey from a driver’s home to his/her usual place of work does not constitute business mileage.

Fines

Pembroke College does not accept responsibility for any speeding or parking fines and requires that the driver should pay any such fines him/herself. Where fines are levied directly against the College, the amount of the fine will be deducted from the employee's next salary payment.

In addition, employees driving vehicles which are owned or leased by us are responsible for funding the excess on any insurance claim relating to them in the event of an accident caused by careless driving or negligence. In such cases a full disciplinary investigation will take place before imposing such a penalty and the employee will be notified before any deductions are made from pay.

Alternative Means of Transport

We will examine alternative means of transport and encourage these to be used where practical. Where practicable, we encourage the use of public transport, air or rail travel.

In order to reduce travel to external meetings, video and tele-conferencing may be used as an alternative means of communication.

Communication and Enforcement of this Policy

All those who drive on College business will be given a copy of this policy and may be reminded of it from time to time through memos, emails, consultation groups, seminars, training and appraisals.

Breach of this Policy

We will treat offences under the policy as a disciplinary or capability issue within our disciplinary procedure. Where warnings have been issued and an employee fails to improve and puts our vehicles, him/herself or members of the public at risk, then ultimately this may lead to dismissal.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The HR Manager has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Any queries or comments about this policy should be addressed to the HR Manager.

# DRUGS, ALCOHOL AND SUBSTANCE ABUSE POLICY

Introduction

It is our aim to provide a healthy and safe working environment for all employees and workers. This policy is non-contractual but sets out the responsibilities and arrangements for employees and workers within Pembroke College regarding drugs, alcohol and substance abuse on our premises.

Scope of this Policy

This policy applies to all employees and workers, irrespective of status. All employees are engaged on the basis that they will provide Pembroke College with their best endeavours at all times. As judgement and the ability to make decisions are essential elements of all jobs at all levels, and as alcohol and other substances affect judgement and the ability to make decisions, it is important that no category of worker is excluded from this policy.

Aims of this Policy

Pembroke College aims to provide a working environment that is safe, that minimises any risks to health and that makes adequate arrangements for the welfare of employees whilst they are at work. The use or abuse of certain substances, including drugs or alcohol, by any workers may put themselves or others at risk and/or result in harm and/or injury to themselves or others.

This policy therefore aims to clarify our rules relating to the use of alcohol and drugs; to reduce the likelihood of drug/alcohol impairment at work; to raise awareness of the impact of misuse of alcohol and drugs, of how this can be recognised and what support is available; and to clarify at what point we regard alcohol, drug or substance use as a disciplinary matter rather than a health problem.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Misuse of Drugs Act 1971.
* The Health and Safety at Work etc. Act 1974 (with regard to the employer's duty to ensure, where practicable, the health and safety at work of its employees and their duty to take reasonable care for their own safety and that of others who may be affected by their acts or omissions).
* Data Protection Act 1998/The General Data Protection Regulation - (in terms of staff monitoring and health screening).

Definitions

"Alcohol" means any ethyl-alcohol containing product which, if consumed, has the capacity to induce intoxication.

"Drugs or substance abuse" means any substance capable of causing intoxication. This includes all controlled drugs contained in the Misuse of Drugs Act 1971 and specifically includes: cannabis (marijuana), opiates (including heroin), cocaine, any prescription drugs (including amphetamines and barbiturates) which are not obtained and used in a legally issued medical prescription, and any over-the-counter medicine or substance which is deliberately misused so as to impair the individual.

The "workplace" includes all land, property, car parks, buildings, structures, installations, lockers, toolboxes, vehicles or equipment owned, leased or used by Pembroke College for the conduct of its business.

Responsibilities

In applying this policy we recognise our responsibilities by:

* Placing the highest importance on the health, safety and welfare of all employees and workers at Pembroke College.
* Accepting the legal and moral obligation to provide and maintain a safe and healthy workplace
* Providing a commitment to support employees who require help and rehabilitation for their health problems and to ensure that those who place their trust in us by admitting to a substance abuse problem are treated with sensitivity and confidentiality.
* Providing information about the harmful effects of substance abuse to promote preventative action.

Employees and workers must however take personal responsibility for their own health and actions insofar as they affect the health and safety of themselves and others who may be affected by their acts or omissions.

Information on Alcohol Use

The use of alcohol affects individuals in different ways and there are a number of variables (such as size and weight) that mean some people feel the effects more quickly, and to a greater degree than others when drinking the same amount. However, the impact of alcohol (even with a relatively low intake) is likely to affect the drinker's thinking, judgement, mood, co-ordination and speed of reaction.

Increased amounts can lead to significant mood swings and violence. In tandem with this is the physical damage that excessive drinking can cause: consumption of alcohol is known to increase blood pressure and has been linked to heart disease and associated coronary problems. Heavy "binge" drinking may put a strain on the liver and other muscle functions. Once alcohol has entered the bloodstream it can only be removed by the liver. A healthy liver takes out one unit of alcohol per hour. It is therefore possible to be under the influence of alcohol at work even though the alcohol consumed was drunk the evening before: this applies particularly to heavy or "binge" drinkers.

A unit of alcohol is equivalent to 8gm or 10ml (1cl) of pure alcohol. Examples of 1 unit of alcohol include half a pint of beer, lager or cider (3.5% ABV); a single 25ml measure of spirit (40% ABV) or a small glass of wine (9% ABV).

As a guide, the Health and Safety Executive advise that men who regularly drink four or more units a day, and women who regularly drink three or more units a day, have an increasing risk to their health.

Information on the Use of Drugs/Substance Abuse

Like alcohol, drug misuse can lead to changes in behaviour which can have an impact on job performance, absenteeism and relationships with work colleagues.

The effects of illegal substances vary, but can include dizziness, slowing down and feelings of sleepiness, excessive thirst, being detached from reality, suffering from hallucinations etc.

The possession of certain drugs is illegal and could lead to criminal charges being brought against the user. The drugs which are subject to control come under three classifications:

* Class A: includes ecstasy (MDMA), crack cocaine, cocaine, heroin, LSD, magic mushrooms, methamphetamine (crystal meth), methadone.
* Class B: includes oral preparations of amphetamines, barbiturates, cannabis, codeine, methylphenidate (Ritalin), synthetic cannabinoids and synthetic cathinone’s.
* Class C: includes benzodiazepines (diazepam), gamma hydroxybutyrate (GHB), gamma-butyrolactone (GBL), ketamine, piperazines (BZP) and anabolic steroids.

Use of Alcohol and Illegal Drugs whilst at Work

The use, possession, distribution, purchase, sale, consumption or being under the influence of illegal drugs whilst at work is never permitted and will be regarded as gross misconduct. Employees and workers must not under any circumstances bring illegal drugs into the workplace or to any event attended in the course of their employment, including social functions organised by Pembroke College.

In the interests of their own and their colleagues' safety, any employee or worker believed to be under the influence of either alcohol or illegal drugs will be escorted off site pending investigation. Disciplinary action will take place when the employee has had time to become sober or recover from the effects of drugs. This kind of behaviour will normally be treated as gross misconduct and result in summary dismissal.

The only circumstances where the consumption of alcohol is permitted during working hours are SPECIFY e.g. "specialist roles which require entertaining clients" or "celebratory events such as retirement parties that have been approved in advance by SPECIFY WHOM". However, such consumption must be reasonable and Heads of Department must remember their position of responsibility and ensure that anyone consuming alcohol does not then drive or operate machinery when clearly not in a fit state to do so.

Employees and workers are also reminded that they are expected to behave appropriately at events organised by Pembroke College, such as training courses, seminars, Christmas parties or other such functions. Whilst alcohol is permitted in moderation, the taking of illegal drugs or misuse of other substances is never condoned.

This policy extends to those who work from home at any point, including those on standby or callout.

Identifying Potential Problems

Supervisors and Heads of Department play a vital role in the early identification of potential problems. They should note and document any potential concerns: if a pattern begins to appear, reasonable grounds for concern are justified and the issues should be addressed based on deterioration of job performance.

The following characteristics, especially when arising in combinations, may indicate the presence of an alcohol or drug-related problem:

* Absenteeism: instances of unauthorised leave; frequent absences on Fridays and/or Mondays or immediately after pay day; leaving work early; lateness (especially on returning from lunch or unexplained absences from work site more than the job requires); frequent trips to the rest room; excessive or unusually high level of sickness absence; unusual and increasingly suspicious reasons for absence; unscheduled short-term absences, with or without explanation
* High accident level: either at work or elsewhere i.e. driving or at home
* Work performance: deterioration in work standards; difficulty in concentration; work requires increased effort; individual tasks take more time; problems with remembering instructions; increased incidence of mistakes; poor decision making; errors of judgement; loss of interest
* Mood swings: fluctuations in mood in a single day or shift; irritability; nervousness; depression; general confusion
* Physical evidence: multiple bruises; loss of weight and gaunt appearance; injection marks on arms (drugs used intravenously); tremor and sweating hands (alcohol or sedative withdrawal); signs of intoxication (slurred speech, unsteady on feet, confused); bleary eyed (alcohol and cannabis); smell of alcohol; tiredness/exhaustion
* Personal appearance: such as wearing long sleeves in all weathers especially in the morning to cover up injection marks; becoming less neat in dress or appearance or sometimes excessive care about dress
* Financial concerns: borrowing money from other workers
* Relationships with colleagues: deterioration in relations with fellow workers and with management; avoidance of contact with Head of Department/Supervisor.

Medication

From time to time employees or workers will suffer ailments or illnesses for which legally prescribed or legally available drugs are required, either to rectify the ailment itself or to relieve the symptoms. As these drugs may also have some form of side effect, it is important that if this is likely to affect job performance in any way (e.g. drowsiness), anyone taking such medication should notify his or her Head of Department of the details. The aim is to protect everyone's safety and in certain cases it may be necessary to restrict some activities or move the person to other, less risky, work until fully recovered.

Employees and workers with long-term health conditions which require medication to control them are advised to inform us what medication they take so that these details are kept on file and made available to any medical employees or first-aiders called in the event of a medical emergency or accident.

Right of Search

In order to enforce this policy, Pembroke College reserves the right to inspect and search the workplace and, with their consent, any person or personal property. Whilst we have no power to enforce a personal search, failure to comply will be taken into account when considering whether disciplinary action is necessary.

Testing Employees

We reserve the right to conduct or require medical screening on any person working at Pembroke College whilst at work or in the workplace.

Such workers will be advised of the purpose of the screening, exactly what information will be collected and held, and for how long, the reasons for this and the consequences of the tests. Refusal to provide the necessary biological samples will be regarded as gross misconduct and will be dealt with under our disciplinary procedure.

All matters relating to medical assessment, test results and management communications will be treated in a confidential manner. The medical screening results will be supplied to the employees Head of Department and the HR Manager, but will not be given to any other person within Pembroke College or to any other individual seeking information on that person without that person's written permission.

On request individuals have the right to be supplied with a copy of their own test results. In addition, if we suspect that an employees work performance or conduct has been impaired through substance abuse, we reserve the right to require the employee to undergo a medical examination to determine the cause of the problem.

Treatment and Rehabilitation

All employees are encouraged not to cover up for colleagues with a drink or drug problem but to recognise that collusion represents a false sense of loyalty.

Employees who recognise that they have a drink or drug problem, or that they are at risk of developing one, are encouraged to come forward for confidential help. They should seek an appointment, in confidence, with their Head of Department who will, with their consent, make a referral to an approved doctor for advice.

Pembroke College will provide employees with support, internally and through external agencies (where appropriate) for substance abuse.

Employees must recognise that it is their responsibility and in their best interests to seek help at the earliest possible stage, when treatment is more effective and before the problems affect their work sufficiently to become a disciplinary matter. Employees enrolled in a rehabilitation programme will be subject to the normal sickness absence rules.

If we believe that an employee is under the influence of either alcohol or drugs as a result of an abuse problem, the outcome of any disciplinary procedure will generally include requiring that the person seek help from one or more of the national organisations set up to advise on overcoming the addiction.

Where employees who have received treatment suffer a relapse, we will consider the case on its individual merits. Medical advice will be sought in an attempt to ascertain how much more treatment/rehabilitation time is likely to be required to affect a recovery. At our discretion, more treatment or rehabilitation time may be given in order to help the employee to recover fully.

If, after an employee has received treatment, recovery seems unlikely, dismissal may result, but in most cases a clear warning will be given to the employee beforehand and a full medical investigation will have been undertaken.

Continuation in post or the offer of an alternative post during or after treatment will depend upon our employment needs at that time.

If an employee declines the offer of referral for assessment and treatment, discontinues treatment before its satisfactory completion and continues to fall below standards required, or either disobeys an instruction given by Pembroke College with regard to rehabilitation or suffers a relapse during or following treatment, we reserve the right to withdraw our support and will deal with the matter under our disciplinary procedure.

Communication and Training

This policy will be communicated to all employees.

Heads of Department will be briefed in order to develop "early recognition techniques" for identifying employee misuse of alcohol, drugs or other substances and in effective interviewing and counselling skills to ensure any issues are dealt with promptly, tactfully and firmly.

Enforcement of this Policy

Breach of this policy by any employee will be fully investigated and dealt with under our disciplinary procedure. In order to meet legal obligations, Pembroke College will inform the Police and any other appropriate authorities if there is reasonable suspicion that a criminal act has been committed in the workplace.

Any employee or worker concerned about the implementation of this policy, or who has concerns for his/her health and safety, should raise these in the first instance with his/her Head of Department. If appropriate action is not taken to resolve the situation within five working days, he/she should raise the issue with the Health and Safety Officer/HR Manager.

We reserve the right at all times to inform the Police of any suspicions we may have with regard to the use of illegal drugs or other substances by our workers on our premises.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.

# 

# ELECTRICAL SAFETY

Procedure for Identification, Testing and Recording of Electrical Equipment and Installations

**College rules in the Student’s Handbook states:**

Electrical Installations (including Portable Appliance Testing (PAT)).

All portable electrical equipment supplied by the College is PAT tested annually, normally during the vacations.

All privately-owned electrical equipment must be maintained in a safe state. The College may test any such appliance at its own discretion and cost. The College will remove any electrical items that it considers are a health, safety or fire hazard.

Fixed electrical wiring systems are tested at least every five years or after any significant alterations, in accordance with current legislation.

2 pin “continental” plugs MUST NOT be used in 3 pin socket outlets as these will not be earthed which could result in serious injury and fire.

Record details

Tag/label/mark tested equipment

Identify and record in PAT register

Daily before use:

Powered hand tools 3 mths; Hand held power tools 6 mths;

Portable equipment 12 mths;

Moveable equipment 24 mths;

Stationary equipment 48 mths;

IT equipment 48 mths

Failed installation to be replaced by a competent electrician (NICEIC)

Periodic inspection by competent electrician (NICEIC)

Inspect and test by competent person at prescribed intervals

Remove failed equipment from use. Repair or dispose of and replace

Identify (with plans or other means)

Fixed electrical installations and plant

Portable Appliances (including hand tools, office and kitchen equipment)

Pembroke College electrical installations, and work equipment.

# 

# ELECTRICAL SAFETY

Introduction

This policy is non contractual but sets out the responsibilities and arrangements for such employees/workers within Pembroke College regarding electrical safety

Scope of this Policy

This policy covers all the necessary information covering fixed electrical installations.

Aims of this Policy

This policy is designed to furnish employees and workers with information regarding electrical safety and alert them to the possible risks involved if regulations are ignored.

The College will ensure, so far as is reasonably practicable, that:

* The fixed electrical installation (e.g. wiring circuits, sockets and switchgear) is installed and maintained by a competent person.
* Electrical appliances comply with current safety requirements and they are sourced from reputable suppliers. Portable electrical appliances will be maintained in safe working order.
* Ensure employees and workers know what to do if they become aware of defects to the electrical installation and appliances at work.
* Ensure employees and workers are instructed that any repair or maintenance on the electrical system is only to be carried out by a competent person.

Electrical accidents in an office or working environment usually occur as a result of faulty or defective equipment, unsafe installations or misuse of equipment. The following guidelines should be adhered to when installing or using electrical equipment.

* Equipment must be properly earthed to prevent shock injuries.
* A sufficient number of sockets will prevent circuit overloading.
* Avoid the use of poorly maintained or non-approved equipment.
* Cables should not be dragged over nails, hooks, or other sharp objects or abrasive surfaces.
* Receptacles should be installed and electric equipment maintained so that no live parts are exposed.
* Machines should be disconnected before cleaning or adjusting.

Procedures

* The electrical installation will be installed by a competent person in accordance with the latest edition of the Institute of Electrical Engineers Wiring Regulations (IEE Regulations) and practical guidance published by the NICEIC or equivalent.
* Electrical contractors will be vetted prior to the commencement of work to verify their competence to undertake the work.
* A register of portable electrical appliances will be established and annual safety testing carried out by a competent person.
* Where any inspection or test identifies any faults, this must be rectified as soon as practical. If repairs cannot be carried out immediately, equipment must be taken out of use and clearly marked as faulty. Where any equipment cannot be economically repaired then it must be safely disposed of.
* Employees or workers becoming aware of damage to the fixed electrical installation or appliances must report it to their Health and Safety Officer, Supervisor or Head of Department.
* Under no circumstances should any person attempt to repair or maintain the electrical system unless they are competent and trained to do so.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.



# ELECTRONIC DOOR LOCK POLICY AND CODE OF PRACTICE

Introduction

The purpose of this Policy and Code of Practice is to ensure that the College uses any personal data from a physical door access system responsibly and with effective safeguards. The intention is:

1. To create a safer working environment for staff and students in the College.

2. To protect property belonging to the College, its students and staff.

3. To provide evidence in support of any internal or external enquiry, disciplinary proceedings or prosecution, especially if associated with the security of the College site and members of the College community, criminal activity committed on College property, or the misuse of College property or equipment.

Electronic door locks are located throughout the College where it has been deemed important to implement electronic door lock. All online door locks are connected to the network and transmit access logs to a central server, from where they can be viewed on a real time basis as well as historical access. Offline door locks are not connected to the network and only historical access is possible, which is available once the access logs have been transmitted to the central server indirectly.

This Policy and Code of Practice sets out the appropriate actions and procedures which must be followed to comply with the Data Protection Act/ The General Data Protection Regulation in respect of the use of access logs maintained by the College.

1. To keep access logs secure and controlled by authorised personnel.

2. To maintain all electronic door lock equipment in working order.

3. To provide retention of access logs within the stated purpose only.

4. To prevent access by unauthorised individuals or third parties.

Responsibilities

The system is operated by the College and is in use all year round. The Bursar has overall responsibility for the implementation and use of the system. The IT Director and IT department ensures all equipment is maintained and in a suitable condition. The Porters, Tutorial, Finance, International Programmes, and IT staff will interrogate the system. Operation of the system is restricted to those named above.

Staff who use the electronic door lock system have the following responsibilities:

1. To uphold the arrangements of this Policy and Code of Practice.

2. To handle logs and data securely and responsibly, within the aims of the Policy and Code of Practice.

3. To be aware that they could be committing a criminal offence if they misuse personal data.

4. To uphold the recorded procedure for subject access requests.

5. To report any breach of procedure to the Bursar.

6. To attend training / refresher sessions as required.

Installation of the Electronic Door Locks

Prior to any electronic door lock installation the IT Director and the Data Protection/GDPR Officer will ensure that the installation complies with the Data Protection Act 1998/The General Data Protection Regulation and the Electronic Door Lock Policy and Code of Practice. It is essential that the location of the equipment is carefully considered.

Processing live access logs

The following procedures concern the viewing and use of the live access audit in response to a live or on-going event in the College.

1. The Porters Lodge, Tutorial, Finance, and IT staff may directly view the live access logs from any and all electronic door locks during their working hours.

2. No recordings or copies of historic or live logs are permitted; if this is necessary then the following policy for accessing historic access logs must be followed.

Processing historic access logs

The following procedures concerning the use and retention of access logs should be followed in order to provide an acceptable level of security and accountability, and to ensure the acceptance of access logs in support of criminal proceedings.

1. Access logs for all electronic door locks are retained on the door access server indefinitely.

2. Access logs for all electronic door locks are also retained in the Colleges databases indefinitely.

3. If an incident occurs and it is thought that the access logs has some evidence on it, in general, permission must be sought from two authorised College Officers, or one authorised College Officer and a Senior Porter or the Data Protection/GDPROfficer before the logs are viewed. Authorised College Officers in this regard are the Dean, the Senior Tutor, the Bursar or the Graduate Tutor.

4. Requests must be recorded on the Electronic Door Lock Access Request form (Appendix B).

5. Once a valid request has been made the IT department will process the logs and generate a copy of the relevant entries.

6. All viewings of logs must be logged in the Electronic Door Lock log held in the IT Department.

7. If any evidence is found, the copy of the relevant part of the logs will be stored on a common digital media. An Electronic door lock log form should then be completed and placed with the digital media in a sealed envelope, and handed to the Head Porter as soon as possible.

8. The Head Porter, or a nominated deputy, should mark each item of digital media with a unique reference number.

9. All digital media will be securely stored in the Porter’s Lodge until they are passed to a Police Officer, or no longer needed.

10. The IT Department is responsible for destroying all digital copies when they are no longer needed for evidence. Digital copies should be destroyed, by appropriate means for the specific media and disposing of them in the confidential waste container. Each disposal should be noted in the Electronic Door Lock Log (Appendix C).

11. The Director of IT, or a nominated deputy, is responsible for ensuring that the Electronic Door Lock Log is kept up to date.

Access to and Disclosure of Logs to Third Parties

Access to, and disclosure of, logs is restricted and carefully controlled to ensure privacy of individuals, but also to ensure that the continuity of evidence remains intact should the logs be required for evidential purposes.

IT staff need access to the logs for the purpose of maintaining the electronic door lock system. Individuals requesting access to logs from an electronic door lock should be asked to complete a Subject Access Request Form (Appendix A). Any request by a third party to view a electronic door lock logs **must be approved** by the Data Protection/GDPR Officer in consultation with the Bursar, who will determine whether disclosure is appropriate and whether there is a duty of care to protect the personal data of any third parties. Disclosure requests should be addressed to the Data Protection/GDPR Officer. Logs will be provided within 30 calendar days of receiving a request.

Once this has been actioned the details should be noted in the Electronic Door Lock Log (Appendix C) held in the IT Office. Any digital media that is requested by the Police in connection with a criminal enquiry will be released against an Officer’s signature and the completion of Police Access Request and Recording Register (Appendix B), after authorisation by the Bursar in connection with staff matters and by the Senior Tutor in respect of students.

On no account may access logs be viewed by any unauthorised person, or removed from the Porter’s Lodge without the specific approval of the College Proctor, Senior Tutor, Data Protection/GDPR Officer, Bursar or Head Porter. Staff will be informed that any misuse or unauthorised access of live access logs or historical logs will be considered as a serious disciplinary matter.

If the College is asked to retain a recording for evidential purposes, the Head Porter will take possession and securely store the relevant digital media for as long as is required, which would normally be until one month after the finalisation of any court proceedings.

Complaints Procedure

Any individual who has concerns about the Electronic Door Lock system or the control of it at Pembroke College is requested to write to the Bursar or the Data Protection/GDPR Officer outlining the reason for the complaint. The College will accept electronic (e-mail) correspondence.

Information and Training

A copy of this Policy and Code of Practice will be published on the College website and in the Staff Handbook.

All Porters will be trained in the practical use of the Electronic Door Lock system.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

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| C:\Users\bs3\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\GD1A32ZP\Arms - colour.jpg  **APPENDIX A**  **PEMBROKE COLLEGE - CAMBRIDGE** SUBJECT ACCESS REQUEST FORM |  |

Under the terms of the Data Protection Act 1998/ The General Data Protection Regulation an individual has the right to request a copy of any personal information held about him/her by Pembroke College, whether it is in hard copy, or electronic. Should you wish to exercise your right in requesting disclosure of your data please complete this form, providing as much information as possible.

Please note that any request by a third party to view access logs must be approved by the Data Protection/GDPR Officer, who will determine whether disclosure is appropriate and whether there is a duty of care to protect the data of any third parties. Access logs will be provided within 30 calendar days of receiving a request.

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| **1. PERSONAL DETAILS** | | |
| Applicant’s full name: | | |
| Applicant’s postal address: | | |
| Applicant’s email address: | | |
| **2. INFORMATION REQUIRED** | | |
| **To help us find the access log data you require, please complete the following section.** | | |
| Location/position of Electronic Door Lock: | | |
| Date log taken: | Time log taken: | |
| Brief description of the applicant’s details and likely activities captured by the access log: | | |
| Please give any other information that might assist us in finding the information required: | | |
| Do you require a hard copy of the log or would “viewing” the log be sufficient? | Hard copy Viewing | |
| **3. DECLARATION** | | |
| Delete as applicable.  □ I confirm that all of the information I have provided is correct and that I am the Data Subject.  □ I confirm that I am acting on behalf of the Data Subject and have attached proof of my authority to do so. | | |
| Name: | | |
| Postal address: | | |
| Email address: | | |
| Signed: | | Date: |
| **4. PROOF OF IDENTITY** | | |
| If you are applying on someone else’s behalf, please attach documented authority to act on the data subject’s behalf. | | |
| **5. SUBMITTING A REQUEST** | | |
| After completing the application form, please check to ensure that all the information you have provided is accurate and all the required documents and the fee are attached.  **Please return the application form to the Data Protection/GDPR Officer, Pembroke College, Cambridge CB2 1RF.** | | |

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| C:\Users\bs3\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\GD1A32ZP\Arms - colour.jpg  **APPENDIX B**  **PEMBROKE COLLEGE - CAMBRIDGE** POLICE ACCESS REQUEST AND RECORDING REGISTER | | |  |
| Data Protection Act 1998/The General Data Protection Regulation – Disclosure of Personal Data under Section 29(3) of the Data Protection Act 1998/The General Data Protection Regulation . | | |
| **Description of Incident / Person(s) involved:** | **Door or Doors Location:** | |
| **Date of incident:** | **Approximate time of incident (24 hours):** | |
| **Name of person who requested to view the logs:** | **Signature:** | **Date of request:** |
| **Contact Telephone Number:** | **Email:** | |
| **Name of person who recorded the log(s) onto digital media:** | **Signature:** | |
| **Date logs were recorded:** | **Disc reference number:** | |
| **Name of person who received the log(s):** | **Signature:** | **Date received:** |
| **Name of person who received the log(s):** | **Signature:** | **Date received:** |



**APPENDIX C**

**PEMBROKE COLLEGE - CAMBRIDGE**

# ELECTRONIC DOOR LOCK LOG

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Reason Viewed** | **Date Copied** | **Disc No** | **Date Destroyed** | **Signature 1** | **Signature 2** |
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# EQUIPMENT SAFETY

Item of work equipment provided for use, governed by the Provision and Use of Work Equipment regulations (PUWER)

Item of equipment used for lifting/lowering operations, governed by the Lifting Operations and Lifting Equipment regulations (LOLER)

YES

NO

YES

NO

YES

NO

Managers are responsible for ensuring that all work equipment and lifting equipment intended for use has been examined and tested at regular intervals by a competent person

Remove defective equipment from use or isolate, following safe isolation procedure

Inform responsible person or Head of Department

Is the equipment safe to use

Before using any piece of equipment, ensure that it is safe. Visually inspect and check maintenance log details

Use equipment as per manufacturer’s guidelines and training

Monitor and review at regular intervals

Enter plant details into register

Provide information, instruction and training to all staff that use the equipment

YES

NO

Following recommended guidelines – carry out maintenance procedure or examination by a competent person

Check maintenance record/register

Has the work equipment been maintained, inspected and tested as required.

# EQUIPMENT SAFETY

Introduction

This policy is not contractual but sets out the responsibilities and arrangements to ensure that equipment is safe for all employees/workers. Equipment and furniture should only be used in the workplace for the purpose intended.

Scope of this Policy

This policy covers all the necessary information and instructions surrounding equipment safety.

Aims of this Policy

This policy is designed to provide employees and workers with information regarding equipment safety and to the possible risks involved if procedures/instructions are ignored.

The College will ensure, so far as is reasonably practicable, that:

* Safe systems of work are provided and maintained in such a way as to be safe and without risk to health.
* Arrangements are in place for safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Provision and Use of Work Equipment Regulations 1998 (PUWER 1998).
* The Health and Safety at Work etc. Act 1974 (with regard to the employer's duty to ensure, where practicable, the health and safety at work of its employees and their duty to take reasonable care for their own safety and that of others who may be affected by their acts or omissions).

Procedures

In order to ensure the safety of employees and workers we will implement the following procedures with respect to the provision and use of work equipment.

* All work equipment will be purchased from reputable suppliers and where relevant reference will be made to the appropriate industry standard such as British Standards.
* Prior to the purchase of such equipment, due consideration will be given to its intended use, the location and method of use, the user/operator, as well as the likely health and safety risks associated with its use.
* Where equipment is purchased from new, it will be checked to ensure that it carries the CE mark (where appropriate) to indicate compliance with European safety requirements and that it is supplied with any Declaration of Conformity/Incorporation and user’s manual.
* Where equipment incorporates dangerous parts such as rotating components, we will ensure that these are provided with guards or other protective devices and that a safe system of work is implemented in its use.
* Where work equipment requires installation, it will be installed and inspected by a competent person prior to use to ensure that it is safe to use.
* Work equipment will be maintained in accordance with manufacturer’s instructions to ensure that it remains in efficient working order and is safe.
* Work equipment will only be used for operations and under conditions for which it is suitable.
* Users or operators of work equipment will be provided with adequate health and safety information and training. Where appropriate, written instructions will be provided for the safe use of equipment.
* Any damaged equipment will be reported at the first opportunity, removed from service, clearly marked as damaged and will remain out of service until fully repaired by a competent person.

Office Furniture

Defective furniture or misuse of chairs or filing cabinets by office workers can lead to serious injuries. Listed here are controls related to chairs and cabinets:

* Chairs should be properly designed and regularly inspected for missing casters, shaky legs and loose parts.
* Do not lean back in a chair with your feet on a desk.
* Never stand on a chair to reach an object.
* Open only one filing drawer at a time.
* Furniture should only be used for the purpose intended.

Office Machinery

Machines with ingoing nip points or rotating parts, such as shredders, can cause lacerations, abrasions, fractures, and amputations if not adequately guarded.

Machines such as paper shredders with hazardous moving parts must be guarded so that office workers cannot contact the moving part.

Fans must have a substantial base and fan blades must be properly guarded.

Office Tools

Misuse of office tools, such as pens, pencils, paper, letter openers, scissors and staplers can cause cuts, punctures and related infections. Injuries can be prevented by following precautions listed below when using these materials:

* Paper cutters. A guard should be provided and fingers should be kept clear.
* Staplers. Always use a staple remover. Never test a jammed stapler with your thumb.
* Pencils, pens, scissors, etc. Store sharp objects in a drawer or with the point down. Never hand someone a sharp object point first.

Photocopying Machines

Potential health hazards associated with photocopying machines include:

* Toxic chemicals.
* Excessive noise.
* Intense light.
* Paper jams - instructions indicated to you on the machine should be followed.

Photocopying machines can also be a source of indoor air pollution especially when used in smaller offices that are not well ventilated.

Use the controls below to reduce hazards:

* Keep the document cover closed.
* Reduce noise exposure by isolating the machine.
* Place machines in well-ventilated rooms away from workers’ desks.
* Have machines serviced routinely to prevent chemical emissions.
* Avoid skin contact with photocopying chemicals.
* Clean all spills and dispose of waste properly.

Ladders, Stands and Stools

Ladders are inspected regularly at the College by a competent person. Improper use of ladders, ladder stands and stools can lead to falls. In accordance with the Working at Height Regulations the following controls will help reduce ladder related injuries.

* Before use ensure the ladder has the correct inspection colour. If you are in doubt what colour is currently “in date” please contact the Maintenance Department.
* Workers should always face the ladder when climbing up or down it.
* The top of the ladder should not be used as a step.
* Ladders must only be used when they are fully open and the spreaders are locked.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.

# FIRE SAFETY AND EMERGENCIES

Introduction

It is our responsibility to provide a safe place of work, to identify any fire risks, to put measures in place to minimise these and to ensure the safety of everyone concerned in the event of a fire. We take these fire safety duties seriously.

This policy is not contractual but sets out how we plan to manage such issues.

Scope of this Policy

This policy covers all employees, workers, contractors and agency workers, as well as visitors to our premises.

Aims of this Policy

This policy aims to help us to comply with our legal obligations to provide a safe environment where the risks of fire are minimised as far as is practicable.

Legal Considerations

The following piece of legislation applies:

* The Regulatory Reform (Fire Safety) Order 2005.

Employees Duties

All employees have a duty to take reasonable steps to ensure that they do not place themselves or others at risk of harm. They are also expected to co-operate fully in complying with any procedures that we may introduce to protect the safety and well-being of our staff and visitors.

Failure to comply with this policy may be treated as a disciplinary matter.

Procedures

We have introduced the following procedures in order to maintain high standards of fire safety:

* A fire risk assessment has been undertaken which will be reviewed annually. However, more frequent reviews will occur if there are changes that will impact on its effectiveness. These may include alterations to the premises or new work processes.
* The fire evacuation procedures will be practised at least annually.
* Training will be provided, as necessary, to anyone who is given extra fire safety responsibilities (such as fire marshals).
* Sufficient employees will be trained in the safe use of fire extinguishers.
* All new joiners and temporary employees will be informed, as part of their induction training, of how to raise the alarm and the location of available escape routes.
* All escape routes will be clearly signposted and kept free of obstructions at all times.
* All fire-related equipment will be regularly serviced and maintained. If any employee notices defective or missing equipment, this must be reported immediately to Head Porter or Senior Porter.
* Alarm systems will be tested regularly. Employees, workers and visitors will be told when a test is scheduled.
* Any other safety systems (e.g. emergency lighting) will be checked regularly to ensure correct operation.

On Discovering a Fire

Employees and workers who discover a fire should:

* Raise the alarm immediately.
* If trained and it appears safe to do so, attempt to fight the fire using the equipment provided (however, this should not be attempted if it is potentially unsafe, or puts the individual or others at risk).
* If this fails, evacuate immediately.
* Ensure that no-one is left in the room and that the door is closed behind the last person leaving.
* The Duty Porter will ensure that the fire brigade is called.
* Participate in the roll-call so that everyone is safely accounted for.

On Hearing the Fire Alarm

On hearing the fire alarm, all employees and workers should:

* Immediately operate any essential shutdown devices, e.g. machinery.
* Leave using the nearest available fire exit.
* Do not stop to collect personal belongings.
* Use the stairs, not the lifts.
* Report to the assembly point for a roll-call.
* Ensure that any visitors are accompanied out of the building.

Person in Charge

The person in charge should:

* Gather all information regarding the evacuation.
* Establish if it is a genuine fire or false alarm.
* Ensure that the fire brigade has been called.
* Liaise with the fire brigade on its arrival.

Communication

We will inform employees and workers of any changes to our fire safety procedures and fire risk assessment. We will also ensure that all visitors to our premises are briefed on the evacuation procedures and not left alone unless they are aware of, and familiar with, all available escape routes.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# FIRST AID

Assess the number of First Aiders required taking into account the number of employees, specific hazards and type of work undertaken.

Communicate First Aid information to employees and workers at induction.

Display notices identifying First Aiders giving emergency contact details.

Monitor/Review

Provide suitable and sufficient level of training to satisfy requirements.

NO

YES

YES

NO

Is there sufficient First Aid coverage?

# FIRST AID AT WORK POLICY

Introduction

As part of our general health and safety duties, we aim to ensure that appropriate first aid arrangements are in place.

This policy is not contractual but aims to set out how we manage the provision of first aid in the College.

Scope of this Policy

This policy covers all employees, workers, contractors and agency workers, as well as visitors to our premises.

Aims of this Policy

We aim to minimise risk by:

* Providing sufficiently trained first aiders (or appointed persons) to adequately meet our needs.
* Maintaining an adequate provision of first aid equipment and supplies.
* Providing enough information to employees to enable first aid assistance to be sought during normal working hours.
* Where work is regularly undertaken outside normal working hours, to provide adequate first aid cover.
* Periodically reviewing our risk assessment. This will determine what first aid facilities and personnel are necessary to meet the needs of the College. The risk assessment considers a number of factors, including the size of the College and its layout; past history of accidents; proximity to emergency medical services; the needs of travelling and/or lone workers, working patterns and first aid cover in times of sickness or annual leave.

Legal Considerations

The following legislation applies to this policy:

* The Health and Safety (First-Aid) Regulations 1981.
* The Health and Safety (Miscellaneous Revocations and Amendments) Regulations 2013.

Responsibilities of First Aiders

In order to carry out their duties effectively, first aiders have the following duties and responsibilities:

* To responding promptly to all requests for assistance.
* Summoning further help if necessary.
* Looking after the casualty until recovery has taken place or further medical assistance has arrived.
* Reporting details of any treatment provided.

Procedures

The following general first aid related procedures are to be followed by all employees and workers:

* If anyone is taken ill or has an accident on our premises, a First Aider should be called to give assistance. No-one should attempt to give first aid treatment unless suitably qualified.
* No employee should use his/her private car to transport a casualty to hospital. If an ambulance is not required, a taxi is to be used and someone should accompany the casualty to the hospital.
* Anyone who needs access to a first aid kit for personal use should not remove it from its designated place
* Any loss or damage to first aid equipment must be reported to the College Nurse.
* If a first aid kit is poorly stocked, this should be reported to the College Nurse.
* The relevant First Aid Forms should be completed by the First Aider and given to the HR Office.

The College van has a First Aid Kit inside. The Porters are responsible for ensuring it is fully stocked when they carry out checks on the vehicle.

Visitors

Should a visitor feel unwell or have an accident, the employee supervising his/her visit should call for a First Aider/Appointed Person. If the visitor has had an accident, the supervisor is responsible for ensuring that an entry is made in the accident book.

Equipment

A First Aider or a nominated person will check the content of First Aid Boxes situated in the various departments in College. A reminder to check the First Aid Boxes will be sent twice a year by the HR/H&S Office.

Overleaf is a list of the recommended contents for First Aid Boxes. Jan Brighting (College nurse) will replace any items out of date. Please contact her by e-mail on [jan.brighting@pem.cam.ac.uk](mailto:jan.brighting@pem.cam.ac.uk).

|  |  |
| --- | --- |
| **Standard Box for 10 people should have** | **Standard Box for 20 or more people should have** |
| 1. individually wrapped sterile adhesive dressings   2 sterile eye pads  4 individually wrapped triangular bandages  6 safety pins  6 medium sized individually wrapped sterile wound dressings  2 large sized individually wrapped sterile wound dressings  10 moist wipes   1. pair of latex gloves   1 guidance leaflet | 1. individually wrapped sterile adhesive dressings   4 sterile eye pads  6 individually wrapped triangular bandages  12 safety pins  9 medium sized individually wrapped sterile wound dressings  3 large sized individually wrapped sterile wound dressings  10 moist wipes   1. pair of latex gloves   1 guidance leaflet |

Adrenalin Auto Injectors

University guidelines on Anaphylaxis updated February 2017 “at risk areas” including dining areas, Porters Lodge and College Nurse office are suggested to hold Adrenaline Auto Injectors (AAI’s). Pembroke College currently has two Adrenaline Auto Injectors, one situated in the Porters Lodge and the other situated in the Nurses Office/Surgery.

Defibrillator (Location: Porters Lodge and College Sportsground)

The AED needs to be checked on a regular basis. The responsible person will ensure the weekly and monthly maintenance checks are carried out and any issues are reported directly to the College Nurse. A record of the check should be recorded on the checklist provided (see Health and Safety Form – page 83 onwards in this publication).

After every use of the defibrillator, the College Nurse needs to be contacted as soon as possible in order to arrange the replacement of used equipment.

Training

All employees undertaking first aid duties will be given full training in accordance with current legal requirements. Where necessary, Heads of Department will be expected to organise shifts and rosters to enable employees to attend. We will do our best to ensure that sufficient notice of both initial training courses and any refresher training are given to Heads of Department to assist with this planning.

Information on First Aid Provision

First aid arrangements will only operate efficiently where they are understood by employees and others who may be working on our premises. These include part-time, casual and temporary staff.

For this reason, information on how to summon first aid is provided as part of our standard induction. The names and contact details of first aiders/appointed persons are displayed on internal noticeboards and are updated monthly to ensure accuracy. First aid boxes can be found in all departments, the Porters Lodge and gyp rooms of Hostels.

Disposal of Clinical Waste

Body fluids can be a source of infectious micro-organisms, therefore as a precautionary measure all soiled dressings must be placed in a yellow bag which can be provided by the Housekeeping Department. These bags need to be disposed of in the clinical waste bin in the Housekeeping Department/Surgery/Chimney Court. Please do not put sharps into bags.

* When administering first aid ensure that any cuts and abrasions on your skin are covered with waterproof dressing.
* Wash your hands and wear latex-free disposable gloves.
* Wear disposable apron, if necessary.

For small amounts of spilled bodily fluids:

* Use disposable paper towels to absorb any spilled bodily fluids and wipe down any contaminated furnishings and flooring. Contact Housekeeping department for further assistance, if necessary.
* Place soiled disposable towels, wipes, aprons and gloves into yellow sealed bag. This will be disposed of in the clinical waste.
* The spillage kits are available from the Housekeeping Department.

For large amounts of spilled bodily fluids:

* Cordon off the area and contact the Housekeeping Department who will arrange for the appropriate area to be cleaned correctly.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# LONE WORKERS POLICY

Introduction

Lone workers are those who work by themselves without close or direct supervision or support. This policy is not contractual but sets out the responsibilities and arrangements for such workers within Pembroke College and, where the lone worker is based at home, should be read in conjunction with our home working policy.

Scope of this Policy

This policy covers all lone workers, including those who either work alone on separate premises, who work outside of our normal working hours (for example cleaners, security, maintenance or repair workers), those who travel to, and work outside the main College site and those who work from home. It may also include those who work normal working hours but who are physically isolated from other workers, e.g. Porters or College Nurse. It also includes those who travel abroad on College business.

Aims of this Policy

This policy is designed to alert Heads of Department and workers to the risks presented by lone working, to identify individual responsibilities and to describe procedures designed to minimise the risks. It is not intended to overstate the risks of lone working but to give a framework for managing them.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work etc. Act 1974.
* The Management of Health and Safety at Work Regulations 1999.
* The Display Screen Equipment Regulations 1992.
* The Manual Handling Operations Regulations 1992.
* The Provision and Use of Work Equipment Regulations 1998.
* The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH).
* The Data Protection Act 1998/The General Data Protection Regulation.

Responsibilities

Pembroke College has responsibility for the health, safety and welfare of all its employees and workers as well as the health and safety of those affected by the work, e.g. visitors and the self-employed.

These responsibilities extend to those who work alone on our behalf. It is our duty, through Heads of Department, to assess the risks to such workers and to take such steps as are necessary to avoid or control these.

Employees and workers have a duty to take reasonable care of themselves and others affected by their work and to co-operate with Heads of Department in meeting our legal obligations. This includes ensuring that their Heads of Department are constantly aware of their movements/work diaries to allow adequate supervision.

Employees should:

* Report any incidents or failings of safety practice.
* Maintain professional standards and adhere to the code of conduct.
* Keep to recommendations and guidelines.
* Complete a post-trip review if they encounter problems whilst travelling abroad on business for Pembroke College.

Pembroke College offers the following to employees and workers:

Lone Worker Reporting System

If staff work alone in College outside usual office hours Monday to Friday **7.30am – 6.30pm** or Saturday/Sunday (any time) they should telephone the Porters Lodge 01223 (3)38100 and report in. The Duty Porter will record below the date and start time of the lone working, the worker’s name, where they will be working, and appropriate contact detail. The lone worker must give an expected finish time, **if they are able to do so.** Before the expected finish time or when actually finished, the worker should “check back in” with the Porter who will record the actual finish time and sign to complete the record. If working alone for more than 4 hours, the worker must “check in” with the Porter’s Lodge at least every 4 hours.

Library Supervisors are deemed exempt from this ruling as they do not work alone in the Library.

If the worker fails to “check back in” by the time the Porter finishes his/her shift or retires to sleep, he/she should try to make phone contact with the worker. If they cannot be reached, the Porter must take whatever steps are necessary to determine whether or not the worker is safe.

Lone workers who fail to check back in when they should, causing unnecessary alarm, will be reported to HR.

**Lookout Call**

“Lookout Call’ is a lone worker safety monitoring system which is updated by lone workers via their mobile phones. The system is hosted and fully maintained by the leading Cambridge communications company, C3. The system automatically alerts Responders whenever a lone worker appears to be overdue from an appointment, or if the lone worker has proactively raised an instant Emergency alarm.

A Responder is anyone who has been nominated by Pembroke College to take action whenever a lone worker alarm is raised. ‘Lookout Call’ may be set up to include any number of Responders and the system will alert them in the order recommended by the College.

The telephone used for this service is based in the Porters Lodge. Please contact the HR Office if you would like to use this system.

Assessing and Controlling the Risk

There are no legal restrictions on working alone, but the Health and Safety at Work etc. Act 1974 (HASAWA) and the Management of Health and Safety at Work Regulations 1999 apply. These lay a responsibility upon the employer to identify any hazards, assess the risks involved and put measures in place to avoid or control risks.

The Head of Department will carry out a risk assessment of each lone worker upon appointment and thereafter whenever there is a change or when a routine review would take place anyway. The risk assessment will be prepared in consultation with the individual, the H&S Officer for Pembroke College and the H&S Consultant, and will be recorded in writing so that it may easily be reviewed.

We will aim to ensure all relevant hazards are identified and appropriate control measures put in place, including proper instruction, training, supervision and protective equipment.

The risk assessment will determine the correct level of supervision. Where it indicates there is a risk to the safety of a lone worker, but the work is still to be done by one person, the Head of Department will make arrangements to provide help or back up when necessary. Under no circumstances is a lone worker authorised to undertake high risk activities for which an additional person is required to be present (such as working in a confined space or electrical work near live conductors). Where there is any reasonable doubt about the safety of a lone worker in a given situation, consideration should be given to sending a second worker or making other arrangements to complete the task.

All employees working alone who are mobile should be contactable by either a personal mobile phone or one issued by the College.

If a lone worker discovers a building has been broken into, he/she must not enter alone but should contact the Porters Lodge at the College and wait for support.

Safe Working Arrangements

When establishing safe working arrangements for lone workers we will firstly consider whether one person can adequately control the risks of the job. Precautions should take account of normal work and foreseeable emergencies, e.g. fire, equipment failure, illness and accidents.

In particular, we will consider the following:

* Does the workplace present any special risk to the lone worker?
* Are alarm systems regularly tested?
* Is there safe access in and out for one person? Can any temporary access equipment such as a ladder be safely handled by one person? Is a key code required for access? If so, is this changed regularly?
* Can all the equipment, substances and goods involved be handled safely by one person?
* Are telephones and first aid boxes accessible in an emergency situation?
* Women and young workers: are women or young workers especially at risk if they work alone?
* Are personal contact details kept confidential, such as location, email address and telephone number? Employees will be warned that even ex-directory numbers may display on phones with caller-ID so care must be taken to keep the number private.
* Travel: journey time, driver fatigue, vehicle suitability, distance, remoteness of destination and general location of destination.
* Could the employee experience problems such as lack of a mobile phone signal? If so, what other means of communication are available?

Individual Considerations

Once the role has been fully assessed, we will consider whether the individual worker is fit and suitably experienced to work alone, and whether he/she has any medical condition which may create a risk if working alone.

It is important that any existing medical conditions which may make workers unsuitable for working alone are properly considered. Where necessary, advice will be conducted by a medical practitioner appointed by Pembroke College.

Training

Training is particularly important where there is limited supervision to control, guide and help in situations of uncertainty. Training may be critical to avoid panic reactions in unusual situations.

To work alone employees and workers must be sufficiently experienced and fully understand the risks and precautions of each task they undertake. Heads of Department will set limits as to what can and cannot be done while working alone and should ensure employees under their control are familiar with the warning signs of a potential risk; are aware of the location of emergency exits and first aid facilities, and are competent to deal with circumstances which are new, unusual or beyond the scope of training. Employees and workers should be advised of the types of circumstance when they should stop work and seek advice, how to handle aggressive/difficult individuals or when the emergency services should be called.

Supervision for Lone Workers Working from Home

The extent of supervision required will depend upon the tasks involved and the ability of the lone worker to identify and handle health and safety issues. The level of supervision required will be a management decision based on the findings of the risk assessment. It will not be left to individual employees to decide if they need assistance.

Procedures to be put in place to monitor lone workers to ensure the safety of the employee and the College include:

1. Periodic visits from Heads of Department/Supervisors or the HR Manager.
2. Regular contact via telephone/ email as appropriate.
3. A full detailed record of travel/working hours/appointments with regular checks of the lone worker.
4. An agreed plan of action should a worker fail to report in as required.
5. A report to be completed following any incidents so that lessons can be learnt and control measures implemented.
6. Support mechanisms readily available for lone workers affected by an incident.

Illness and Accident

Lone workers must report any illness or accident, however minor, to their Head of Department. Emergency procedures should be established and appropriate training given.

Employers' Liability Insurance

All lone workers will be insured against workplace injury or disease under our Employers' Liability Insurance.

Related Policies and Documents

We also have the following related policies and documents: Health and Safety Policy; Violence at Work Policy.

Implementation, Monitoring and Review of this Policy

This policy will take effect from insert 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

# MANUAL HANDLING

Procedure for Manual Handling Operations

Provide employees involved in the manual handling operations with information regarding the task

Manual handling operation to be carried out

Train employees in the correct manual handling techniques

Consider the use of mechanical handling aids to reduce the need for manual handling

Take appropriate steps, based on the Risk Assessment, to reduce the risk of manual handling injuries

Install equipment, safe system of work or procedure to reduce the risk of injury

Record training on the employees personnel file

Implement steps, inform and train employees as appropriate

Take necessary steps to avoid manual handling operation

Record the assessment

Carry out a Manual Handling Risk Assessment on operations that cannot be avoided

NO

YES

YES

NO

Can the manual handling operation be avoided?

# MANUAL HANDLING

Introduction

This policy is not contractual but sets out the responsibilities and arrangements for employees/workers within Pembroke College regarding Manual Handling of goods and equipment.

Scope of this Policy

The College will ensure, so far as is reasonably practicable, that:

* Plant/equipment and safe systems of work are provided and maintained and are safe and without risks to health. Further, we will take all reasonable precautions to ensure the health and safety of our employees and other persons who may be affected by our work activities.
* All employees/workers will be suitably and sufficiently trained.

Aims of this Policy

This policy is designed to alert employees and workers to the risks presented by manual handling. It is not intended to overstate the risks of manual handling but to give a framework for managing potentially risky situations.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work Act 1974 – Section 2.2, 7 and 8.
* The Management of Health and Safety at Work Regulations 1999 – Regulation 13.
* The Management of Health and Safety at Work Regulations 1999 – Regulations 5 and 14.

What is “Manual Handling”?

The Manual Handling Operations Regulations (MHOR) 1992, which were amended in 2002 to the Regulations define Manual Handling as: “The transporting, supporting of a load including lifting, putting down, pushing, pulling or carrying of a load by hand or bodily force.

Handling and Storage Hazards

Improper lifting can cause musculoskeletal disorders such as sprains, strains, and inflamed joints. Office materials that are improperly stored can lead to hazards such as objects falling on workers, poor visibility, and fires. There are several controls which can reduce handling and storage hazards.

* Materials should not be stored on top of cabinets.
* Heavy objects should be stored on lower shelves and materials stacked neatly.
* Materials should be stored inside cabinets, files or lockers whenever possible.
* Materials must not be stored in aisles, corners, or passageways.
* Fire equipment should remain unobstructed.
* Flammable and combustible materials must be identified and properly stored.
* Material Safety Data Sheets must be provided for each hazardous chemical identified.
* An effective control programme incorporating employee awareness and training and ergonomic design of work tasks can reduce back injuries.

Manual Handling Recommendations for Specific Departments

Improper lifting can cause musculoskeletal disorders such as sprains, strains, and inflamed joints. Manual Handling Risk Assessments must be carried out for all manual handling tasks. Revisit and recheck these assessments annually.

**Housekeeping Department**

* Do not carry any more than 2 bundles (sheets, towels etc.).
* Do not overload buckets. Carry only the necessary products.
* Do not attempt to carry buckets and other items in one hand.
* Empty vacuum cleaner bags regularly to reduce weight.
* Rubbish Bags – assess the weight, split loads into bags you can lift easily.
* When lifting heavy objects and working as a team, make sure one person gives directions. Lift from the hips at the same time to the desired height. Move smoothly together.

# Catering Department

* Rubbish Bags – assess the weight, split loads into bags you can lift easily. Use the mechanical aid **provided to move bags from the Kitchen to the Bin Store. Do not overload this mechanical aid.**
* When lifting heavy objects and working as a team, make sure one person gives directions. Lift from the hips at the same time to the desired height. Move smoothly together.
* Seek assistance when carrying heavy loads containing hot food.

**All Departments**

* Manual handling assessments will be conducted prior to the handling of heavy or awkward loads.
* Assisted/team lifting is encouraged in preference to individual lifting.
* Use mechanical aids whenever possible.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

# MATERNITY, ADOPTION AND PATERNITY

Introduction

Pembroke College Maternity, Adoption and Paternity Policy can be found in the Staff Handbook, please refer to this document for further information.

All employees have the right not to suffer any detriment on the grounds of pregnancy, childbirth, for taking maternity, adoption, paternity or shared parental leave or seeking to take this. We comply with all statutory requirements and offer benefits that are in line with the statutory benefits scheme.

# NOISE

Introduction

This policy is not contractual but sets out the responsibilities and arrangements for such employees/workers within Pembroke College and, where and employee or worker is at risk of noise at work.

Aims of this Policy

This policy is designed to alert employees and workers to the risks presented by noise at work, to identify individual responsibilities and to describe procedures designed to minimise risks.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Noise at Work Regulations, 1989.
* The Health and Safety at Work Act, 1974 (HASAWA).
* The Control of Noise at Work Regulations 2005.

New, tighter regulations (the [Control of Noise at Work Regulations 2005](http://www.legislation.gov.uk/uksi/2005/1643/contents/made)), took effect on 6 April 2006, covering whole new sectors including the leisure industry, call centres etc. (but initially excluding the music and entertainment sectors which were exempted until April 2008).

The College will ensure, so far as is reasonably practicable, that:

* All employees or workers who require hearing protection is supplied with it and that they fully understand its limitations, when it must be used and how to replace it.
* Any areas of work where employees or workers are exposed to levels of noise above 80dB will be issued with the appropriate PPE, which **MUST** be worn at all times.

Risk Assessments

Where the daily personal noise exposure is likely to be 80dB(A) or above, a risk assessment of noise exposure will be completed by a "competent person". As a rough guide, a Noise Risk Assessment is generally required if the employee:

* Is surrounded by intrusive noise for most of the working day.
* Has to raise his/her voice to be heard by someone just two metres away, for at least part of the day.
* Uses noisy powered tools or machinery for more than 30 minutes each day.
* Causes impacts such as hammering, drop forging, pneumatic impact tools etc.

Risk assessments should include sufficient information on both noise levels and work patterns to enable us to identify whatever action is necessary to reduce exposure and the number of employees affected by it.

Affected employees will be informed and given hearing protection (at no cost to the employee).

Should employees be likely to be exposed to noise averaging 80dB or more, Pembroke College will reduce either the level of the noise or the time the employee or worker is exposed to it. This may be achieved through:

* Job rotation.
* Changing machines and/or working methods.

Suitable records should be kept by the department once the assessment is completed, these records should be reviewed either when there has been a significant change in the work to which the assessment relates, or whenever there is reason to believe that the assessment is no longer valid.

Hearing Checks

There is no statutory duty to have our employees hearing checked by compulsory audiometric testing. The facilities provided by the NHS are considered to be sufficiently compliant with the original EC directive concerning audiometric.

Instruction and Training

Pembroke College has a legal obligation to provide information, instruction and training to employees concerning occupational deafness. This will include guidance on:

* Risk of damage to hearing that exposure may cause.
* Possible action to minimise such risk.
* Steps to be taken by employees in order to obtain personal ear protection.
* Employees' obligations under the Regulations.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

# PERSONAL PROTECTIVE EQUIPMENT (PPE) POLICY

**YES**

**NO**

Supervise and monitor employees to ensure PPE is being used correctly and is adequate

Keep a record of all PPE issued

Maintain appropriate inspection records

Provide instruction, information and training for employees on use and maintenance of PPE

**YES**

**NO**

Identify any areas of concern

Review employee requirements and the Risk Assessment

Does PPE adequately protect the individual from the hazard, fits properly, as comfortable as possible and does not interfere with any additional PPE in use

Provide PPE that conforms to relevant British and European Standards

Provide PPE where a Risk Assessment concludes that PPE is required

# PERSONAL PROTECTIVE EQUIPMENT (PPE) POLICY

Introduction

Whilst we take reasonable precautions to reduce exposure to any workplace hazards, there may still be a need for us to provide personal protective equipment (PPE) to our employees and workers where some risks remain that cannot otherwise be controlled.

Where the provision of PPE is necessary, it will be chosen in conjunction with our health and safety officer and consultancy. This will help us to ensure that we obtain the most suitable PPE for our employees' needs and avoid expenditure on equipment that is uncomfortable, unsuitable or a poor fit.

This policy is non-contractual but aims to set out how we manage the provision of PPE in our workplace.

Scope of this Policy

This policy applies to all employees and workers. Our PPE rules do not, however, apply to people walking purely on a defined safe walking route through a building or site.

Aims of this Policy

This policy aims to ensure compliance with Health and Safety legislation and to reduce any risk to our employees and workers.

The legislation requires us to provide PPE to any employee or worker who is exposed to risks to his/her health and safety, despite the introduction of other control measures. In some cases, the provision of PPE may be a set legal requirement, e.g. the provision of hard hats to construction workers.

Legal Considerations

The following piece of legislation applies to this policy:

* The Personal Protective Equipment at Work Regulations 1992 (as amended).

Procedures

When a need for PPE has been identified, e.g. through the introduction of a new working process, we will seek to initially obtain the required item(s) on a trial basis. This is to allow the end user(s) to assess suitability within our working environment and to ensure that the items can be maintained in an efficient state. Employees do not have to pay for any PPE issued to them.

Where PPE is required to be worn, this will be clearly defined in the risk assessment or by the Head of Department.

Whilst cost is obviously a factor, we recognise that the PPE needs to be suitable, not only for its intended purpose, but for the individual user. For this reason, our purchasing decisions will balance both cost and suitability for the individuals concerned. Any issues with the selected items (such as health problems, discomfort etc.) will be allowed for wherever possible in the selection of items, e.g. by purchasing an alternative item.

Items such as footwear and overalls will be provided to employees on a personal basis. However certain other items, such as disposable gloves, will be stored centrally. When these items are required, staff will be required to contact their Head of Department.

Employee Responsibilities

Where a need to wear PPE, whilst working with a particular process or in a certain area, has been identified, all employees are required to comply. Where PPE is mandatory, non-compliance will be treated as a potential disciplinary matter.

Employees are also expected to use and maintain any PPE issued to them in accordance with the manufacturer's instructions. If any defects are found, they should be reported to the relevant Head of Department as soon as possible.

Whilst PPE will be issued free of charge to employees, we do ask that such equipment is kept in good condition. Employees may be required to pay for the replacement of any items of PPE they lose or damage (other than through normal wear and tear) and will also be required to return their PPE on leaving our employment.

Employee Training

Where necessary, we will provide instruction, information and training to staff on how to use and look after the PPE provided. This will include how to obtain it and the process for reporting any suspected defects.

Breach of this Policy

Any breach of this policy will be regarded as a serious matter and will be dealt with under our disciplinary procedure.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# RISK ASSESSMENTS

Risk Assessment Strategy

Outlined below is the College’s Risk Assessment Strategy and details the main prevention and protective measures required to reduce risks.

The ways in which risks can be reduced are many, but start with the College’s intention to comply with the Health and Safety at Work Act 1974 and it’s supporting Acts and Regulations, in particular the Management of Health & Safety at Work Regulations 1999.

Hazards identified, arising out of the College’s activities, include:

* Fire.
* Machinery and Equipment.
* Hazardous Substances.
* Slips, Trips and Falls.
* Working at Height.
* Noise.
* Manual Handling.
* Motor Transport.
* Electricity/Gas.
* Vibration.
* Asbestos.
* Display Screen Equipment.
* Personal Injury.
* Activities involving young persons under the age of 18.

The risk associated with the various hazards identified depends on the employee’s particular task. However, as some tasks are allocated only to certain workers, normally those trained to carry out the tasks, exposure to the hazards associated with those tasks will be limited to those employees who have the knowledge, skill and experience to understand the hazards and guard against them.

In general terms risks will be reduced by the following policies and arrangements:-

* A positive attitude towards health and safety from Senior Members of the College, supported by the statements made in Section A of this policy.
* The College managing health and safety on a structured basis, including a formal health and safety committee, with employees nominated to undertake certain health and safety responsibilities and tasks.
* The establishment of formal arrangements for self-monitoring and inspection of the College’s premises, systems, machinery, equipment, etc. and of a system of reporting to the Health and Safety Officer and/or Heads of Department.
* Removing the hazard by substitution.
* Combating risks at source.
* Adapting work where possible to suit the individual employee.
* Exploiting technological developments to improve and make safer the College’s working practices.
* Progressively examining and identifying means of reducing risks that cannot be altogether prevented.
* Giving priority to measures that protect the whole workplace and all those who work in it.
* By training employees in health and safety awareness with respect to their own tasks and responsibilities.
* By the development of a pro-active health and safety culture.

In addition to approving general measures designed to identify hazards and reduce risk, the College will seek the advice when necessary of a competent person or authority in order to determine and assess hazards and to carry out particular risk assessments.

Health and safety awareness is to be integrated within the College’s overall management arrangements and includes the following four main elements, planning, organisation, control and monitoring.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.



**PEMBROKE COLLEGE**

# HOW TO COMPLETE RISK ASSESSMENTS

**5 STEPS TO RISK ASSESSMENT**

**Identify the hazards**

**STEP 1**

**Decide who might be harmed and how**

**STEP 2**

**Evaluate the risks and decide on precautions**

**STEP 3**

**STEP 4**

**Record your findings and implement them**

**Review your assessment and update if necessary**

**STEP 5**

|  |  |  |
| --- | --- | --- |
| **Step One** | **IDENTIFY THE HAZARD**  How could people be harmed:   * Walk around and look at what could reasonably be expected to cause harm. * Ask staff what they think. They may have noticed things that are not immediately obvious to you. * Check with trade associations, manufacturers’ instructions or data sheets for chemicals and equipment as they can be very helpful in spelling out hazards and putting them in their true perspective. * Look back at accident and ill-health records. They often help identify the less obvious hazards. * Think about long-term hazards to health (e.g. high levels of noise or exposure to harmful substances) as well as safety hazards. | |
| **Step Two** | **DECIDE WHO MIGHT BE HARMED AND HOW**   * For each hazard think about who might be harmed. It will help you identify the best way of managing the risk. Identify groups of people, e.g. people working in the office/storeroom or passers-by. * In each case, identify how they might be harmed, e.g. what type of injury or ill health might occur, e.g. people putting boxes on shelves regularly might suffer back injury from repeating lifting of boxes. * Some workers have particular requirements, e.g. new and young workers, new or expectant mothers and people with disabilities may be at particular risk. | |
| **Step Three** | **EVALUATE THE RISKS AND ASSESS THE EXISTING PRECAUTIONS**   * Having identified hazard(s), decide what to do about them. The law requires you to do everything “reasonably practicable” to protect people from harm. You can work this out for yourself, but the easiest way is to compare what you are doing with good practice. * Look at what is already being done. Think about what controls are in place and how the work is organised, then compare this with good practice and see if there is more you should be doing to bring yourself up to standing. In asking yourself this consider: * Can I get rid of the hazard altogether? * If not, how can I control the risks so that harm is unlikely? * When controlling risks, apply the principles below, and if possible in the following order: * Try a less risky option, e.g. switch to using a less hazardous chemical. * Prevent access to the hazard, e.g. by guarding. * Organise work to reduce exposure to the hazard, e.g. put barriers between pedestrians and maintenance work. * Issue PPE, e.g. clothing, footwear, goggles etc. and provide welfare facilities, e.g. first aid and washing facilities for removal of contamination. * Involve staff, so that you can be sure what you propose will work in practice and will not introduce new hazards. * Ask your staff if they can think of anyone you may have missed. | |
| **Step Four** | **RECORD YOUR FINDINGS AND IMPLEMENT THEM**   * Write down the results of your Risk Assessment and share them with your staff. * When writing down your results keep it simple, e.g. * Tripping over rubbish: bins provided, staff instructed, weekly housekeeping checks or * Trailing cables: cover trailing cables with suitable material to avoid a trip hazard or remove trailing cables by reorganisation of office set-up. * Risk Assessments should be “suitable and sufficient”. You need to be able to show that: * A proper check was made. * You asked who might be affected. * You dealt with all the significant hazards, taking into account the number of people who could be involved. * The precautions are reasonable and the remaining risk is low. * You involved other staff in the process. * If you find that there are quite a lot of improvements that could be made, big and small, do not try to do everything at once. Make a plan of action to deal with the most important things first. Health and Safety Inspectors acknowledge the efforts of businesses that are clearly trying to make improvements. * A good plan of action often includes a mixture of different things such as: * A few cheap or easy improvements that can be done quickly, perhaps as a temporary solution until more reliable controls are in place. * Long-term solutions to those risks most likely to cause accidents or ill health. * Long-term solutions to those risks with the worst potential consequences. * Arrangements for training employees on the main risks that remain and how they are to be controlled, e.g. regular checks to make sure that the control measures stay in place, and clear responsibilities – who is responsible for the action and by what deadline. | |
| **Step Five** | **REVIEW YOUR ASSESSMENT AND REVISE/UPDATE IF NECESSARY**   * Write down the results of your Risk Assessment and share them with your staff. * When writing down your results, keep it simple, e.g. * Tripping over rubbish: bins provided, staff instructed, and weekly housekeeping checks. * Trailing cables: cover trailing cables with suitable material to avoid a trip hazard or remove trailing cables by reorganisation of office set-up. * Speak to staff and ask if they can think of anyone you may have missed. | |
| **Scoring used in Risk Assessments** | Below are the terms and risk calculations used for Risk Assessments at Pembroke College. You will notice they are colour coded to help identify high risk areas easily.  **TERMS DEFINED**   |  |  |  | | --- | --- | --- | | Severity | Score | Likelihood | | **Fatality** | **5** | **Frequent** | | **Major** | **4** | **Regular** | | **Reportable** | **3** | **Occasional** | | **Minor** | **2** | **Remote** | | **Negligible** | **1** | **Very Rare** |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **RISK CALCULATIONS** | | | | | | | **Fatality** | **5** | **10** | **15** | **20** | **25** | | **Major** | **4** | **8** | **12** | **16** | **20** | | **Reportable** | **3** | **6** | **9** | **12** | **15** | | **Minor** | **2** | **4** | **6** | **8** | **10** | | **Negligible** | **1** | **2** | **3** | **4** | **5** | |  | **Very Rare** | **Remote** | **Occasional** | **Regular** | **Frequent** | | |
| **Risk Assessment Form** | The following columns appear on the Risk Assessment Form used at Pembroke College:  **Hazard**   * First you must identify what it is that might be hazardous.   **Those Likely to be affected**   * Who could be harmed by this hazard?   **Injury from hazard**   * This is sometimes the most difficult question to answer. It is suggested you go for the worst case scenario, e.g. Electricity danger could result in a fatality.   **Current controls in place now**   * Summarise existing safety measures in place.   **S Rating**   * This covers the severity of the hazard, e.g. fatality, major, reportable, minor, or negligible.   **L Rating**   * This is the likelihood rating, e.g. frequent, regular, occasional, remote, or very rare.   **Risk Rating**   * This is S Rating x L Rating, severity x likelihood, e.g. if the severity is fatality (= 5) but the likelihood is very rare (=1) the total score is 5 x 1 = 5.   **Additional controls required**   * This is where you list any further additional controls you feel are necessary to monitor the hazard or, if implemented, would improve on the current controls in place. An example might be “regular checks – every three months to be made”. This is an additional extra control which shows you intend to monitor the hazard closely.   **Person Responsible**   * This would indicate the person responsible for implementing and checking the additional controls suggested.   **Date**   * This would indicate the date the additional control details were entered onto the Risk Assessment. | |
| **Possible Hazards** | **Mechanical Hazards**   1. Vibration 2. Crushing 3. Abrasion 4. Cutting/shearing 5. Entanglement 6. Drawing in/trapping 7. Rotating shafts 8. Impact 9. Stabbing | 1. High pressure injection 2. High pressure systems 3. Compressed air 4. Lifting equipment 5. Machinery failures 6. Mobile equipment 7. Sharp surfaces 8. Flying particles |
| **Equipment Hazards**   1. Transport vehicles 2. Failure of equipment 3. VDUs | |
| **Electricity Hazards**   1. Direct contact 2. Indirect contact 3. Short circuit/overload 4. Ignition source 5. Portable tools 6. Trailing leads | |
| **Health Hazards**   1. Dermatitis 2. Respiratory 3. Sensitisers 4. Manual handling 5. Welding flash 6. Rays from the sun | 1. Ingestion of substances 2. Legionella 3. Food poisoning 4. Repetitive strain injuries 5. WRULDs (Workplace Related Upper Limb Disorders) |
| **Security Hazards**   1. Substations 2. Material stores 3. Highly flammable vaults 4. Valuable information | 1. Precious metals 2. Buildings after work 3. Computer installations |
| **Substances/Materials Hazards**   1. Chemicals (COSHH) 2. Fumes/vapours/mist 3. Dust/gases 4. Lead 5. Asbestos 6. Vehicle exhausts | |
| **Fire and Explosion Hazards**   1. Flammable liquids 2. Flammable dust 3. Combustible waste 4. Gas cylinders 5. Flammable atmospheres 6. Smoking/naked flame 7. Ignition sources 8. Electrical overload | |
| **Working Environment Hazards**   * Noise * Ambient temperature * Hot/cold surfaces * Humidity * Ventilation * Lighting (day and night) * Emergency Lighting * Cleanliness * Hygiene | |
| **Process Hazards**   * Methods of Work * Storage of material | |
| **Environmental Hazards**   * Discharge to drains * Disposal of waste * Solvent emissions * Ground contamination * Failure of bunds * Noise nuisance * Drain overflow * Spillages | |
| **Emergency Response Hazards**   * Plans * First Aid * Blocked exits/gangways * Blocked vehicle access * Equipment faulty | |
| **People Aspects**   * Competent * Fit * Informed * Disabilities/restrictions * Hazardous behaviour * Age | |
| **Place of Work Hazards**   * Access/Egress * Obstructed gangways * Falls of persons * Working at heights * Restricted height * Overhead loads * Falling objects * Stability of fixed equipment * Working above liquids * Work near water * Confined spaces * Lack of oxygen | * High risk area * Slips and trips * Falling objects * Holes/pits * Overhead cables * Underground cables * Housekeeping * Piped liquid and gas * Trench collapse * Demolition * Storage of materials |

# SLIPS, TRIPS AND FALLS

Introduction

This policy is not contractual but sets out the responsibilities and arrangements for employees/workers within Pembroke College for Slips, Trips and Falls

Scope of this Policy

The College will ensure, so far as is reasonably practicable, that all reasonable precautions are taken to ensure the health and safety of all employees and anyone on our premises in relation to slips, trips and falls.

Aims of this Policy

This policy is designed to alert employees and workers to the risks presented by slips, trips and falls. It is not intended to overstate the risks of slips, trips and falls but to give a framework for managing potential risk situations.

Legal Considerations

The following piece of legislation applies to this policy:

* The Workplace (Health, Safety and Welfare) Regulations 1992.

Management Issues

Factors that prevent the effective management of slips, trips and falls are:

* People not taking the risks seriously.
* Little understanding of the causes of slipping and tripping.
* Thinking that slips, trips and falls are inevitable.
* Poor application of risk assessment and management controls.

Most incidents can be controlled provided they are afforded sufficient importance and attention is given to the nature of the work environment. Pembroke College will demonstrate it has effectively considered the risks and instituted suitable control measures including:

* Planning to identify potential problem areas.
* Training to ensure employees can identify and take action over potential risks.
* Make staff responsible for specific areas, especially Maintenance and Housekeeping.
* Controlling work practices and processes including cleaning and maintenance work.
* Monitoring and reviewing how measures are working.

Preventing Slips, Trips and Falls

The prevention of slips and trips is based on the following factors:

* Spillages – prevent spillages becoming a trip hazard e.g. oil, wrappings, grease, water getting on to the floor by fitting drip trays under machines. To prevent slippery floor surfaces, use mats at entrances, as necessary. If you cannot prevent spillages constant cleaning of the affected areas is required.
* Obstacles – effective design and maintenance of walkways and traffic routes to eliminate trips. Good housekeeping and storage will eliminate obstacles, e.g. trailing cables, boxes, etc.
* Cleaning – regular and effective cleaning to remove contamination to reduce accidents. Ensure the cleaning process does not create a hazard.
* Environment – ensure that lighting is suitable, that condensation, rain or ice cannot contaminate the floor.
* Footwear – select appropriate footwear for the working environment. This will help reduce accidents.
* Hazard Reporting – staff are requested to report any hazards in the workplace to the Health and Safety Officer.

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Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.

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# SMOKING POLICY

Introduction

Pembroke College aims to provide a working environment that is safe, which minimises any risks to health and which makes adequate arrangements for our employees' welfare whilst they are at work.

Employees who smoke may endanger not only themselves, but also others who do not smoke by passive smoking. Passive smoking (breathing other people's tobacco smoke) is now shown to cause lung cancer and heart disease in non-smokers, as well as many other illnesses and minor conditions. Inhaling other people's tobacco smoke is both a health hazard and a welfare issue. In addition, smoking can constitute a fire risk.

Pembroke College has adopted the following policy concerning smoking within the workplace. This policy is not contractual, but sets out how we intend to manage smoking within our environment.

Scope of this Policy

This policy applies to all employees and workers, regardless of seniority and whether their work environment is shared with others. Visitors are also requested to refrain from smoking in non-smoking areas, as are any other people (e.g. contractors, temporary staff or students) working on our premises.

Aims of this Policy

This policy seeks to guarantee to non-smokers the right to work in air that is free of tobacco smoke, whilst also taking account of the needs of those who do smoke.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health Act 2006.
* The Smoke-free (Premises and Enforcement) Regulations 2006.

In addition, employers have a common law duty to provide a safe place and system of work under the Health and Safety at Work etc. Act 1974 (HASAWA).

Definitions

Section 1 of the Health Act 2006 defines smoking as "smoking tobacco or anything which contains tobacco, or smoking any other substance" and states that "smoking includes being in possession of lit tobacco or of anything lit which contains tobacco, or being in possession of any other lit substance in a form in which it could be smoked".

"Enclosed" means premises that have a ceiling or roof, and (excluding doors, windows and passageways) are wholly enclosed whether permanently or temporarily. Tents and marquees are therefore covered by this definition.

Areas where Smoking is Prohibited

Smoking is prohibited in any enclosed area on our premises. This includes the reception area and entrances, corridors, stairs and lifts, meeting rooms, rest rooms, toilets and around the entrance to our premises. In addition, smoking is not allowed in any of our offices, student/Fellows rooms.

Car Parks and Entrances

In many workplaces, those who smoke do so just outside the entrances and exits to the premises. We believe that this does not present a professional image. Employees and workers are therefore not permitted to smoke in the following areas: any car park, in front of the main entrances, front and rear.

Vehicles

Smoking is not permitted in the College Van.

Areas where Smoking is Allowed

Pembroke College provides two smoking areas for all employees and workers.

Employees and workers may smoke within the designated areas but only during any recognised rest period or lunch break. Smokers will not be allowed longer or more frequent breaks than their non-smoking colleagues and use of the smoking areas must not interfere with their normal job performance.

The smoking area will be kept clean and well ventilated and smokers using this area are expected to keep it tidy and to dispose of any rubbish appropriately. Receptacles are provided for the disposal of cigarette ends and other waste smoking materials. Cigarettes, cigars and pipes must be extinguished, using the receptacles provided, and smokers should ensure that there is no risk of fire. These areas will be monitored to ensure an acceptable standard of housekeeping and adherence to safety. If not maintained properly, the facility may be withdrawn.

Failure to dispose of cigarette litter properly outside Pembroke College can result in the person being fined by the local authority. Refusal to pay can result in a court fine.

Assistance to those who wish to cease Smoking

We recognise that passive smoking adversely affects the health of anyone subjected to this. We are not concerned with whether anyone smokes (which is a personal choice), but with where they smoke and the effect that this has on their non-smoking colleagues.

However, we recognise that some employees may wish to reduce or give up smoking, but may have difficulty in doing so. We endorse the use of any treatments or therapies recommended by a GP or cessation clinic. The College Nurse is also happy to assist employees if they wish to quit smoking. Free advice is available from the NHS smoking helpline and from its website: <http://smokefree.nhs.uk/>.

Electronic Cigarettes

Electronic cigarettes ('e-cigarettes') are battery-powered products that use heat to release a visible vapour that contains liquid nicotine that is inhaled by the user. They are designed to replicate smoking behaviour without the use of tobacco, and some look very similar to conventional cigarettes. However, the use of these would not be classed as "smoking" according to the legal definition of this.

We accept that many users of electronic cigarettes are using these as an aid to give up smoking, and as they are not prohibited, employees and workers may use electronic cigarettes only outside and not inside College buildings.

Visitors, Contractors and Temporary Staff

Visitors, suppliers, contractors and temporary staff are also all expected to comply with this policy. Employees who are meeting visitors, or who are responsible for temporary staff or contractors, are required to politely explain our policy and to ensure such people comply with it. Any refusal to comply with this should be immediately referred to the H&S Officer,

Appropriate "no smoking" signs will be displayed prominently at all entrances to our premises.

Enforcement of this Policy

Smoking in an area other than one designated as a smoking area will be regarded as general misconduct and will be dealt with in accordance with our disciplinary procedure.

Employees and workers are entitled to complain if this policy is breached. No employee or worker shall suffer any detriment as a result of making such a complaint.

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Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.

# STRESS POLICY

Introduction

Being under pressure often improves performance and can be a good thing, but when demands and pressures become excessive they may lead to stress, which can have an adverse impact on both working and personal lives.

We are committed to protecting the health, safety and welfare of our employees. We recognise that workplace stress is a health and safety issue and acknowledge the importance of identifying and reducing workplace stressors.

This policy is not contractual but sets out the way in which Pembroke College plans to deal with the issues of stress at work.

Scope of this Policy

As stress can affect anyone, at any level, this policy applies to all employees.

Aims of this Policy

We aim to provide a working environment where stress is not seen as a sign of weakness or incompetence and, where employees who believe they are suffering from the negative effects of stress, feel able to approach their Head of Department/Supervisor in confidence, in order that the necessary support mechanisms can be put in place. In addition, we aim to assist those who may be suffering from workplace or personal stress by offering confidential support.

This policy therefore seeks to clarify our responsibilities in relation to stress management, raise awareness of this issue, how it can be recognised and outline what support is available.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work etc. Act 1974.
* The Protection from Harassment Act 1997.
* The Management of Health and Safety at Work Regulations 1999.
* The Equality Act 2010.

# 

Definitions

The Health and Safety Executive defines stress as: "the reaction people have to excessive pressures or other types of demands placed on them. It arises when they worry that they cannot cope." In other words, stress occurs when the pressures on a person exceed their ability to deal with them.

Stress can be caused by a variety of problems, including heavy (or light) targets and workloads, insufficient resources, ineffective equipment or tools, long working hours, rapid change and uncertainty, harassment or bullying in the workplace, boredom, ill-health and personal, financial or legal problems.

The symptoms might include frequent short-term absences, reduced efficiency or minor ailments such as headaches/migraines, reduced appetite, tiredness, sleepless nights, anxiety attacks, irritability, increased smoking or drinking, to more serious issues such as heart disease, raised blood pressure, ulcers, excessive drinking and depression.

It is important to bear in mind that stress may come under the definition of "disability". If a medical report confirms this to be the case, as with other disabilities, we will take steps to make reasonable adjustments that have been recommended.

Responsibilities

Legislation requires us to take reasonable steps to look after our employee’s mental health and welfare. This means that we need to ensure they do not have excessive demands placed upon them by their responsibilities. As stress may also be caused by bullying, harassment and violence, we aim to provide a working environment that is, as far as is reasonably practicable, free from these influences. However, we are entitled to assume that all employees can cope with the normal day-to-day pressures of their jobs. If this is not the case, they have a duty to inform us.

In applying this policy we recognise our responsibilities by:

* Placing a high importance on the health, safety and welfare of all employees in the College.
* Accepting the legal and moral obligation to provide and maintain a safe and healthy workplace.
* Providing a commitment to support employees who require help for stress related problems.
* Providing information to employees about the harmful effects of stress and to promote preventative action if requested.
* Requiring our Heads of Department to be ambassadors of this policy and ensuring they set an example themselves in sensible working practices and consider how to get the best out of their teams without affecting their health.

Procedure

Any employee who believes he/she is suffering the negative effects of stress, rather than worrying about it, is encouraged firstly to talk to his/her Head of Department. If the employee does not feel able to talk directly to the Head of Department, then the HR Manager should be contacted. If necessary, we will carry out a stress risk assessment, including a review of the employee's actual duties against those described in his/her job description.

The possibility of changing working conditions or making changes to reduce stress on the employee will be discussed, whilst recognising the needs of the employee and his/her colleagues. Employees should also speak to their GP if there are any health concerns.

All employees should support their colleagues if they believe they are experiencing work-related stress and should encourage them to talk to someone about it.

In all cases, if we are aware that an employee is suffering from stress, we will take such steps as are appropriate firstly to try to manage the situation. This may include reviewing workloads, providing assistance, training or improved equipment, or transferring to other duties, on a temporary or permanent basis, as appropriate. It may also be relevant to request consent for a medical report.

Heads of Department should assess the workload and responsibilities of those returning to work after experiencing work-related stress, to help prevent injury to health. Only as a final stage and where no alternative action is appropriate, would we consider terminating employment on grounds of ill-health.

Risk Assessments

Pembroke College will carry out risk assessments where we suspect or believe that work may cause stress which could consequently lead to ill-health. This involves identifying pressures at work that could cause high and long-lasting levels of stress, identifying who could be affected by these pressures and taking appropriate steps to deal with them, such as lessening workload or transferring to other duties where appropriate.

The results of the risk assessments and the steps taken will be communicated to all relevant employees.

Monitoring

In order to monitor compliance with the policy, we will:

* Monitor working hours and overtime to ensure that employees are not overloaded or overworked.
* Monitor holidays taken to ensure that employees are taking their full entitlement.
* Schedule work and handover periods to ensure that employees are able to take their rest breaks.
* Regularly check any records of "call out" to ensure that appropriate compensatory rest has been provided.
* Analyse our absence records to identify any patterns for absences caused by work-related stress.

Non-Work Problems

We recognise that stress due to circumstances outside of our working environment can also impact on an employee's attendance and work performance. Therefore, we would encourage employees to make us aware of any serious problems that are causing them concern so that we can take this into account when assessing performance.

Professional Advice

As soon as we believe an employee is showing symptoms of stress, we will attempt to establish the cause and take appropriate action, which may include seeking medical advice, particularly if it is thought that work may be causing or adding to the stress.

Employees taking medication to control their condition are advised to inform us what medication they take so that the details may be kept on file and made available to any medical or first-aider called in the case of a medical emergency or accident.

Communication and Training

Heads of Department and Supervisors will be briefed in order to develop "early recognition techniques" for identifying the symptoms of negative stress in both their employees and themselves

In addition, Pembroke College may from time to time organise general health promotion activities within the workplace.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# TRAINING POLICY

Introduction

Pembroke College recognises the value and importance of providing opportunities to all employees to develop their job-related knowledge and skills, and expects that training and development will increase individual effectiveness and enable employees to make a greater contribution to the success of the College.

The College is committed to the development of positive policies to promote equal opportunities in employment regardless of any protected characteristic (race, sex, disability, sexual orientation, religion or belief, age, marital status or civil partnership, pregnancy/maternity or gender reassignment). This principle applies equally to our training and development activities.

This policy is not contractual, but indicates the way in which the College wishes to manage its training and development activities.

Scope of this Policy

This policy covers all employees, including those on fixed-term contracts.

Aims of this Policy

The College aims to equip all employees with the necessary knowledge and skills to be able to carry out their duties safely and without risk to themselves or others, to do their jobs successfully and with confidence, and to support all employees to reach their full potential. We recognise that well-managed development and training can help our employees to: identify and develop their potential; respond positively to change uncertainty and conflict; increase their job satisfaction; improve their self-confidence, motivation and initiative and also extend their range of responsibility. All training and development undertaken must be clearly focused on achieving the College objectives and will normally seek to achieve improvement in one or more of the following areas: team working, customer service, productivity, management competence or safer working practices.

We aim to provide:

1. Development and training that will ensure the implementation of College policies.

2. Planned, consistent induction training for all new starters to help ensure that they understand their role as it relates to the College and their individual responsibilities in the workplace.

3. Support, development and training for those at or near the beginning of their careers to enable them to gain appropriate technical or professional qualifications and/or experience that will assist their subsequent career development.

4. Appropriate career development opportunities and training to help maintain and enhance standards of performance over a period of time - we would expect to provide an average of at least 2 days training and development per employee each year.

5. Regular performance reviews, with a focus on future career progression and personal development plans.

6. Support for development and training for any employees faced now, or in the foreseeable future, with new roles, organisation or environment, to help them to deal competently with their work.

7. Support for continuing professional development.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work etc. Act 1974 (HASAWA).
* The Employment Rights Act 1996.

Training Policy

Full details on the Training Policy can be found in the Staff Handbook.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

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# UNIVERSAL PRECAUTIONS FOR FIRST AIDERS, AND ALL STAFF INCLUDING DOMESTIC, GARDENING, SPORTSGROUND AND MAINTENANCE EMPLOYEES

Introduction

The College takes its duties under the Health and Safety at Work etc. Act 1974 (HASAWA) seriously. These include the provision of a safe place and a safe system of work for our employees, workers and all others who may be affected by our activities.

People suffering from certain infections may have the agent of disease present in their blood. If others are exposed to their blood - or other bodily fluids - the infectious agent may be transferred into their bodies and infect them.

We recognise that it is impossible to identify people who are infected with blood-borne viruses such as HIV, Hepatitis B and C as blood-borne viruses remain ‘silent’ for many years, and many sufferers are unaware that they are infected, or may choose not to tell anyone. Even if we were all informed of any member of staff or student who has a blood borne virus, that would still leave us exposed to infection. For this reason for our own safety and wellbeing we should assume that everyone could be infected.

Scope of this Policy

This policy covers all employees, but is particularly aimed at First Aiders, domestic, gardening, sportsground and maintenance staff. Pembroke College emphasises the importance of following Universal Precautions at all times, but it is especially relevant that employees working in these departments read these guidelines and take them seriously.

Aims of this Policy

The aim of this policy is to outline the Universal Precautions on minimising the risk of infection from blood-borne viruses. It is intended to cover any workplace situation where exposure to blood-borne viruses is possible.

Information, Instruction and Training

Pembroke College has responsibilities under health and safety legislation to provide suitable and sufficient information, instruction and training. Our employees need to know:

* If they could be exposed to blood-borne viruses and how.
* The risks posed by this exposure - including any exposure limit.
* The main findings of your risk assessment.
* The precautions they should take to protect themselves and other employees, staff or visitors.
* How to use and dispose of any personal protective equipment that is provided.
* What procedures to follow in the event of an emergency.

How Blood-borne Viruses are Spread

Blood contact with broken skin or mucous membranes can provide a route of transmission for blood borne viruses and other infections e.g.:

* By contamination of open wounds (e.g. blood injuries during sporting activities).
* By contamination of skin lesions (e.g. eczema).
* Via skin puncture by blood-contaminated sharp objects (e.g. needles, instruments or glass).
* By splashing of the mucous membranes of the eye, nose or mouth.

Precautions

* + - * Healthy skin provides the perfect barrier, but it needs to be kept moisturised and supple as broken skin provides a route for infections.
      * Cuts should always be kept covered when you are working to protect **you** from infection.
      * The use of protective gloves at work, as directed in your training, should be used whenever you have contact with any body fluids, and plastic aprons should be used if you anticipate dealing with body fluids.
      * All waste contaminated with blood or body fluids must be disposed of in yellow clinical waste bags and put in the appropriate container.

Management of Incidents

In the event of an incident where there is potential exposure to a blood-borne virus, the following first aid guidelines should be followed:

* If eyes are splashed with blood/body fluids rinse with plenty of saline fluid.
* In the event that any member of staff should ever experience a needle-stick injury:

1. Encourage bleeding from the wound, but do not scrub or suck.
2. Wash the area thoroughly with running water.
3. Cover with a waterproof dressing.
4. Contact your Head of Department immediately.

Following an incident, an urgent risk assessment will be carried out to establish whether the exposure has the potential to transmit a blood-borne virus – i.e. whether the exposure is considered to be low or high risk. The individual may be advised to undergo the following interventions: blood sampling, Hepatitis B vaccination, administration of PREP (Post Exposure Prophylaxis Regime) which is a combination of anti HIV drugs taken for 1 month.

Where appropriate, the individual who is the source of the blood/body fluid should be approached, given an explanation of the incident and asked for informed consent for them to be tested for HIV, HBV and hepatitis C (HCV), where the status is not already known. Such information will clearly impact on any decisions taken with regard to the management of the recipient. This universal approach to source testing for BBVs normalises the procedure and avoids perceived discrimination.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 9th April, 2018. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# VIBRATION

Introduction

Hand-arm vibration can be caused by operating hand-held power tools such as hammer drills and hand guided equipment such as powered lawnmowers. It can also be caused by holding materials being processed by machines, such as grinders.

Regular and frequent exposure to hand-arm vibration can lead to permanent health effects, known collectively as hand-arm vibration syndrome (HAVS), as well as specific conditions such as carpel tunnel syndrome and vibration white finger (VWF).

There are hundreds of tools which can cause ill health due to vibration, some of the more common ones include hammer drills, chainsaws, powered lawnmowers, strimmers, jigsaws, power hammer and chisels etc. Materials that vibrate whilst being held, for example, items being ground on a pedestal grinder for extensive periods of time, also need to be considered.

Regular and frequent exposure to vibration can lead to various health effects such as:

* Pain, distress and sleep disturbance.
* Finger blanching in cold or damp conditions.
* Loss of touch and temperature sense.
* Loss of grip strength.

These effects can restrict the job employees can do, as well as affect activities away from the work environment.

Scope of this Policy

This policy covers all employees who use vibrating equipment at work, including those on fixed-term contracts.

Aims of this Policy

The College aims to equip all employees with the necessary knowledge and skills to be able to carry out their duties safely and without risk to themselves or others. .

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work Act 1974.
* The Management of Health and Safety at Work Regulations 1999.
* The Control of Vibration at Work Regulations 2005.

The Control of Vibration at Work Regulations 2005

The regulations require employers to adopt a modern risk management approach to vibration in the workplace. Employers need to:

* Assess the vibration risk to employees.
* Ascertain if they are likely to be exposed above the daily exposure action value (EAV). If they are, take action to eliminate or reduce exposure to as low as is reasonably practicable and provide health surveillance.
* Ascertain if employees are likely to be exposed above the daily exposure limit value (ELV). If they are, take immediate action to reduce their exposure below the limit value.
* Provide employees with information and training regarding health risks and actions to control the risk.
* Record the risk assessments and actions taken.
* Retain health records for employees subject to health surveillance.
* Review and update the risk assessment regularly

Employers are required to take action to control vibration risks when employees are subject to exposure above the daily exposure action value (EAV). It should be remembered that increased exposure levels will lead to greater risks, therefore employers will need to take more action to reduce that risk.

The regulations stipulate:

* An exposure action value of 2.5 m/s² A(8), at which level employers should introduce measures to reduce exposure.
* An exposure limit value (ELV) of 5.0 m/s² A(8) which should not be exceeded.

There are two routes of transmission:

* Whole Body Vibration (WBV).
* Hand-Arm Vibration (HAV), which is commonly known as Vibration White Finger (VWF).

Risk Assessment

A risk assessment should be carried out to identify who is at risk and to what extent. It should enable us to ascertain if employees are likely to be above the EAV or ELV, and to highlight which tasks need to be controlled. The assessment should lead to an action plan aimed at reducing the risks from vibration.

The following structured approach could be adopted:

* List equipment that may cause vibration and what it is used for.
* Obtain information about the equipment (make, model, power, vibration risks etc.).
* List employees using the equipment and the jobs they do.
* Note the length of time the equipment is used (e.g. how long persons actually use the equipment while it is vibrating).
* Ask employees about the vibration of equipment and other related issues such as how heavy it is, how it is held and operated etc.
* Record the information and assess who is likely to be at risk.

It should be noted that vibration figures provided by equipment suppliers/manufacturers will not take into account any degenerative factors due to poor maintenance and over-use of the equipment. These factors may increase the vibration magnitude level into the over-exposure level.

Use the information above to decide whether work activities produce a high, medium or low risk of vibration. Take action to reduce the risk from exposure while undertaking the high risk activities, and then address the medium and low risk factors. Vibration data measurements can also be made if more accurate vibration information is required.

There are many techniques for controlling exposure to vibration, these may include:

* Eliminate exposure by adopting alternative work methods.
* Ensuring that equipment is suitable for the task.
* When purchasing new tools, requesting the vibration exposure level figures from the supplier/manufacturer and purchase tools to the lowest vibration grip needed.
* Maintaining and monitoring the condition of tools to ensure that there is no rise in the exposure level as a result of use.
* Planning work activities to reduce exposure, for example, by job rotation.

Keeping the hands and body warm will help to maintain a good blood flow. Control measures such as the following may help:

* Wearing gloves.
* Using heated handles.
* Avoiding pneumatic exhausts which affect workers hands.
* Welfare arrangements provided to allow workers to keep warm during breaks.
* Avoiding smoking.
* Use of massage and exercise techniques.

Regularly check and monitor the measures that have been implemented to ensure they remain effective at controlling the risk. Discuss vibration issues with employees, supervisors etc. and check the results of any health surveillance.

Training

Pembroke College will provide information and training for employees who are exposed to vibration. This should include:

* The health effects of hand-arm vibration.
* Sources of hand-arm vibration.
* The level of risk and whether it is high (above the ELV), medium (above the EAV) or low.
* Risk factors, e.g. level of vibration, exposure duration, frequency etc.
* How to recognise and report symptoms.
* Arrangements for health surveillance.

Ways to reduce the risks may include the tool selected, use and maintenance of tools and use of protective equipment etc.

Health Surveillance

Health surveillance is required for all employees who are likely to be regularly exposed above the EAV, despite any action taken to reduce the risk. The purpose of health surveillance is to:

* Identify employees who may be at particular risk, e.g. smokers.
* Identify symptoms at an early stage so that action can be taken.
* Prevent disease progression.
* Retain employees.
* Monitor the effectiveness of the control measures.

Surveillance may consist of regularly seeking information from employees about the early symptoms of health effects by completing a questionnaire. If an employee reports the onset of any symptoms of this condition we should assume there is a risk of HAVs and refer the employee to an Occupational Health Practitioner and act upon any advice given. Records of medical examinations and reports of diagnostic tests such as finger blanching should be maintained. Due to medical confidentiality you should ensure that these records are kept in a secure location.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# VIOLENCE AT WORK POLICY

Introduction

The College takes its duties under the Health and Safety at Work Act 1974 (HASAWA) seriously. These include the provision of a safe place and a safe system of work for our employees, workers and all others who may be affected by our activities. We recognise that violence at work and threatening behaviour are issues of concern to many and could have health and safety implications for Pembroke College.

Scope of this policy

This policy covers all employees, including casual workers, and also any agency workers and contractors working at our premises.

Aims of this policy

This policy aims to reduce the risk of workplace violence towards our employees and workers, as well as to students, customers and visitors to our premises, and to ensure that a clear "no tolerance" stance is adopted throughout the College.

Legal considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work. Act 1974.
* The Protection from Harassment Act 1997.
* The Management of Health and Safety at Work Regulations 1999.

The Health and Safety at Work Act 1974 provides that "it shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all employees". This duty also extends to visitors such as contractors and suppliers. In order for us to fulfil these duties, we will:

* Carry out a risk assessment in order to assess the risks to employees, workers, students and visitors.
* Decide what control measures, if any, are necessary.
* Implement any control measures if the assessment shows that they are necessary.
* Monitor any arrangements to ensure that they are effective.
* Review this from time to time and update as necessary.

Definitions

Violence at work has been defined as "any incident in which a person is abused, threatened or assaulted in circumstances relating to their work". Whilst this definition applies to everyone, some may be at more risk than others.

In our own workplace, we have identified the following groups of staff as being most at risk:

* Porters.
* College Nurse.
* Those who deal directly with visitors.
* Lone workers.
* Those who work outside of normal working hours.
* Cash handlers.
* Those who work within the College community and with vulnerable individuals.

Heads of Departments responsibilities

All HODs have a responsibility to:

* Be familiar with this policy, implement it and ensure that anyone under their control is aware of it and understands it.
* Perform risk assessments in order to assess the risks to employees, workers and other visitors such as clients, and keep these up-to-date.
* Decide what control measures, if any, are necessary in their areas of operation.
* Implement any control measures if the assessment shows that they are necessary.
* Monitor any arrangements to ensure that they are effective.
* Take any report of work-related violence very seriously, and take immediate action, recording the details in writing.
* Support any employees or workers affected by any incidents or threats.
* Take on board any suggestions from employees or workers to prevent future violence.
* Co-operate with any external investigations (such as by the police or HSE).
* Continue internal investigations concurrently with external ones as necessary.
* Do not incite or increase the likelihood of a violent act nor ignore a violent act.
* Review the risk assessment as well as this policy from time to time and make any suggestions as to how any risk(s) could be better controlled or reduced.

Employees' responsibilities

All employees have a responsibility to take reasonable steps to ensure that they do not place themselves, or others, at risk of harm. They are also expected to co-operate fully with us in complying with any procedures that the College may introduce as measures to protect their safety and well-being, as well as that of visitors. Staff must not incite or increase the likelihood of a violent act nor ignore a violent act.

Our employees are also responsible for ensuring that their family and friends do not get involved in any dispute between us and our workforce. Any relative or friend of an employee who is aggressive or disruptive will be asked to leave our premises and, if necessary, we will call the police. Unless the employee is disabled and in need of additional help and support, we will normally only deal directly with our employees regarding any employment related matters.

Procedures

The following are guidelines on action that we will take to reduce the risk of violence to employees, students and visitors. They are not exhaustive, but are a set of principles to be followed if a risk is perceived or occurs:

* As part of the risk assessment process, we will talk to employees and workers in order to assess what, if any, further preventative measures are required.
* All employees or workers are actively encouraged to discuss with their Head of Department any concerns that they may have. All approaches will be treated sympathetically.
* Where immediate action is required in response to a violent act, the employee or worker should approach his/her Head of Department or a colleague for help. Department heads should respond to the situation by talking to the perpetrator, explaining that their behaviour is not acceptable. They should try to resolve the problem and, if that is not possible, call the Porters Lodge for assistance. They will remove the person where required. Medical assistance should be provided immediately if needed and consideration given to whether the member of staff feels able to continue working or needs to go home (chaperoned if necessary).
* The police should be informed of any serious incident or persistent cases of violence. CCTV footage should be retained to comply with any subsequent investigations (either internal or by the police). Statements should be taken from any witnesses promptly and a copy sent to the HR Manager/H&S Officer.
* Any incident of violence, threats or verbal abuse must be entered in the Porters Lodge book, as well as being reported to the individual's Head of Department.
* If an incident causes death, major injury or more than seven consecutive days off work (including weekends) it should be reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

Dealing with visitors

The safety of our employees and workers is paramount. Any employee or worker who faces rude or aggressive visitors must never return aggression as this is how anger can escalate into violence. Instead they should try to adopt a calm and reassuring attitude and speak slowly and gently. In the unlikely event that a situation escalates, the employee or worker should always withdraw from it, where possible, and seek advice from their Head of Department or Porters Lodge.

Preventing workplace violence

We have CCTV monitoring on the premises which may be used in any investigation of violence in the workplace. Signs are posted around the College informing visitors of this monitoring. These must not be removed, covered over or obliterated by having anything placed in front of them.

All new employees and workers (including agency workers) should be made aware of the CCTV Policy which can be found in the Health and Safety Policy and on the Pembroke College website. Those who have daily direct contact with visitors or members of the public should in particular be given a copy of this policy to read.

Training

Should a risk assessment identify that training for certain groups is necessary in order to reduce the risks, this will be provided.

Protective clothing or aids

Where our risk assessment suggests that protective clothing or aids (such as a panic button under the desk or mobile alarm) would reduce the risk of workplace violence, we commit to providing this.

Advice and counselling

The College recognises that counselling or other specialist help may be appropriate for anyone who suffers an incident of violence at work. We aim to deal with these cases constructively and sympathetically. The HR Manager/College Nurse will give advice and guidance on how to obtain help and assistance with any workplace violence related issue. All requests for help will be treated in the strictest confidence.

Related policies

We also have the following related policies:

* Health and Safety Policy.
* Lone Workers. Policy.
* Working with Children and Vulnerable Adults.

Implementation, monitoring and review of this policy

This policy will take effect from 1st February, 2018. The HR Manager has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

Any queries or comments about this policy should be addressed to the HR Manager.

# WORKING AT HEIGHT

Introduction

The College takes its duties under the Health and Safety at Work etc. Act 1974 (HASAWA) seriously. These include the provision of a safe place and a safe system of work for employees, workers and all others who may be affected by our activities. We recognise that Working at Height might apply to most departments within the College. It is, therefore, important that risk assessments are carried out for all activities where Working at Height exists.

This policy is not contractual but sets out the way in which Pembroke College plans to deal with the issues of Working at Height.

Scope of this Policy

As Working at Height might apply to all departments and employees, at any level, this policy applies to all employees and workers.

Aims of this Policy

We aim to provide a working environment where Working at Height is a safe practice.

This policy therefore seeks to clarify our responsibilities in relation to Working at Height, raise awareness of this issue.

Legal Considerations

The following pieces of legislation apply to this policy:

* The Health and Safety at Work etc. Act 1974.
* The Work at Height Regulations 2005.

Policy

The College will ensure that, so far as is reasonably practicable, that:

* It will take all reasonable precautions to ensure the health and safety of employees, workers and other persons who may be affected by our work activities with respect to work at height.
* All employees/workers will receive adequate information, instruction, training and supervision in relation to working at height.

Procedure

* All work at height carried out at Pembroke College and its buildings will be fully risk assessed and organised in such a way as to be safe and without risk to health.
* All employees or workers who work at height will be competent for the task and appropriately trained.
* The risk from fragile surfaces will be properly controlled by the operative conducting the risk assessment. Any concerns will be communicated to their Head of Department or the Health and Safety Officer for the College.
* Employees or workers working at height will be issued with ladders and it is their responsibility to ensure they have been inspected by a competent person. This check can be made by ensuring any ladder has the correct coloured banding (these details can be obtained from the Maintenance Department).
* All equipment issued for use for working at height will be suitable for use and will carry a valid inspection band. Inspection/service records for equipment are kept in the Maintenance Department.
* It is the responsibility of the employee or worker to check the equipment properly before work commences.
* Ladders will only be used for work of short duration.
* Tower scaffolding can be erected by a competent person but only those employees or workers who have received suitable training are able to use this equipment.

Implementation, Monitoring and Review of this Policy

This policy will take effect from 1st July, 2017. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# HEALTH AND SAFETY FORMS



**PEMBROKE COLLEGE · CAMBRIDGE**

# HEALTH AND SAFETY MONITORING CHECKLIST

|  |  |
| --- | --- |
| Department: | Inspection completed by: |
| Area(s) Checked: | Date of Inspection: |
| Name(s) of staff interviewed: | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **MANDATORY** | | | | | | |
|  | | **Correct Procedure Described**  **YES/NO** | | **Comments** | | **Date Corrective Action Taken** |
| **FIRE SAFETY AWARENESS** | |  | |  | |  |
| Ask the staff member to explain the procedure to be followed if they discover smoke or a fire. | |  | |  | |  |
| Ask the staff member to explain the procedure to follow if they hear a fire alarm. | |  | |  | |  |
| Ask the staff member to point out the nearest fire alarm call point and how to operate it. | |  | |  | |  |
| Ask staff member to tell you the nearest fire escape route, fire exit and emergency assembly point. | |  | |  | |  |
| **FIRE SAFETY** | |  | |  | |  |
| Are all fire extinguishers in their correct places and free from obstruction? | |  | |  | |  |
| Are the correct signs provided near to each extinguisher? | |  | |  | |  |
| Are there tags fitted on all fire extinguishers? | |  | |  | |  |
| Were any items stored or left in fire escape routes? | |  | |  | |  |
| Are any fire doors blocked, obstructed or wedged open? | |  | |  | |  |
| Did all fire doors close properly? | |  | |  | |  |
| Did any fire doors slam shut? | |  | |  | |  |
| Are all fire alarm call points unobstructed, clearly visible and marked with appropriate signage? | |  | |  | |  |
|  | | **Correct Procedure Described**  **YES/NO** | | **Comments** | | **Date Corrective Action Taken** |
| **ELECTRICAL SAFETY** | |  | |  | |  |
| Did you notice any trailing cables? | |  | |  | |  |
| Were there any overloaded sockets or adaptors in use? | |  | |  | |  |
| Did you see any frayed cables or signs of cable damage/wear? | |  | |  | |  |
| Were any appliances left switched on but not in use? | |  | |  | |  |
| Select a member of staff and ask them to demonstrate a visual inspection of an appliance they use. | | Correct procedure described.  Comments: | | | | **YES / NO** |
| **SLIPS,TRIPS AND FALLS** | |  | |  | |  |
| Are there any uneven or raised floor surfaces, worn carpets or rugs? | |  | |  | |  |
| Are any floors wet or slippery and not identified by “Caution Wet Floor Signs”. | |  | |  | |  |
| Are there any trailing leads or other trip hazards? If Yes, please describe hazard(s). | |  | |  | |  |
| **HOUSEKEEPING/GENERAL** | |  | |  | |  |
| Are all areas clean and in good condition? | |  | |  | |  |
| Are handrails in good condition, e.g. not loose or damaged? | |  | |  | |  |
| Are any rubbish or recycling bins overflowing? | |  | |  | |  |
| Are there any areas of accumulated rubbish/waste materials? | |  | |  | |  |
| Are all combustible materials (e.g. newspapers, paper, curtains, plastics, etc.) close to any heat sources (e.g. pips radiators, heaters, hot plates, electrical sockets, etc.)? | |  | |  | |  |
| Is all lighting in good repair and are all bulbs functional? | |  | |  | |  |
| Are any repairs needed that have not been reported to Maintenance? | |  | |  | |  |
| **SUPPLEMENTARY**  **Select a minimum of 2 of the following 5 sections to answer** | | | | | | |
|  | **Correct Procedure Described**  **YES/NO** | | **Comments** | | **Date Corrective Action Taken** | |
| **FIRST AID** |  | |  | |  | |
| Did all staff know what to do if they have an accident in College? |  | |  | |  | |
| **STORAGE AND MANUAL HANDLING** |  | |  | |  | |
| Is shelving secure and in good condition? |  | |  | |  | |
| Are the most commonly used items within easy reach? |  | |  | |  | |
| Are any heavy boxes stored at height or on the floor? |  | |  | |  | |
| Are any heavy boxes marked with warning signs? |  | |  | |  | |
| Are staff aware they should remove individual items instead of moving the box? |  | |  | |  | |
| Were all members of staff following the correct manual handling techniques? |  | |  | |  | |
| Are steps available nearby to reach high selves? |  | |  | |  | |
| **LONE WORKERS** |  | |  | |  | |
| Were any lone workers following the correct procedure, e.g. contacting the Porters Lodge out of office working hours 8am – 6pm – Sunday anytime? |  | |  | |  | |
| **DISPLAY SCREEN EQUIPMENT** |  | |  | |  | |
| Have you or any of your staff noticed any health problems associated with workstations, e.g. backache, eyestrain etc. that have not been reported to the H&S Officer? |  | |  | |  | |
| Did you observe any members of staff sitting at their desks with bad posture or working with an inappropriate workstation set-up? |  | |  | |  | |
| **ENERGY SAVING MEASURES** |  | |  | |  | |
| Were any lights left on at any unattended or unoccupied areas? |  | |  | |  | |
| Were any taps dripping or did you notice any leaks which had not been reported to Maintenance. |  | |  | |  | |
|  | **Correct Procedure Described**  **YES/NO** | | **Comments** | | **Date Corrective Action Taken** | |
| **LADDERS/WORKING AT HEIGHT (if applicable)** |  | |  | |  | |
| Could your staff correctly explain how to visually check the condition of a ladder/foot stool before using it? |  | |  | |  | |
| Were all ladders or foot stools in the area(s) you inspected colour coded. |  | |  | |  | |
| **PLANT AND EQUIPMENT (if applicable)** |  | |  | |  | |
| Were all staff using equipment or tools as instructed? |  | |  | |  | |
| Were all moving parts of machinery properly guarded? |  | |  | |  | |
| **CONTROL OF CONTRACTORS (if applicable)** |  | |  | |  | |
| Have any contractors working in the department signed in at the Porters Lodge? |  | |  | |  | |
| Have all contractors received a Health and Safety Code of Practice for Contractors/Sub Contractor/Courier/Visitors booklet? |  | |  | |  | |
| Have all contractors provided appropriate documentation and is it dated within the last 12 months? |  | |  | |  | |
| **COSHH (if applicable)** |  | |  | |  | |
| Were staff using appropriate eye protection and/or gloves as instructed for the task(s)? |  | |  | |  | |
| Did you see any chemicals in unmarked bottles or containers? |  | |  | |  | |
| Select a chemical and ask the member of staff to explain the precautions they should take when using the product. | Correct procedure described, | | | | **YES/NO** | |
| Comments: | | | |  | |
| **PPE (if applicable)** |  | |  | |  | |
| Were staff wearing the appropriate PPE for their tasks? |  | |  | |  | |
| Was the PPE in use, in a clean and serviceable condition? |  | |  | |  | |
| Please note here any additional health and safety issues that you would like to bring to the College’s attention. | | | | | | |

This checklist has been completed to the best of my knowledge:

Signed: ………………………………………………………………… Date:…………………………………….

PRINT NAME: ………………………………………………… DEPARTMENT:……………………………….

# PEMBROKE COLLEGE RISK ASSESSMENT FORM GUIDE TABLE

**Contents.**

**1. Assessment parameters and objectives.**

**2. Methodology.**

**3. General information (Legislation and Scoring system).**

**4. Risk assessment of General Office Operations Risk Assessment.**

**5. Summary.**

**1. Assessment parameters and objectives.**

………………………. were requested to carry out risk assessments of the work activities that are conducted in the…………………………..

**2. Methodology.**

……………………. is legally required by the Management of Health and Safety at Work Regulations 1999, Regulation 3, to assess the possible risks to health arising from its processes whatever the size, nature or type of business. This is in the form of a risk assessment.

**According to the Health and Safety Executive the assessment follows:**

**Step One:** Identify the hazard.

**Step Two:** Decide who might be harmed and how.

**Step Three:** Evaluate the risks and assess the existing precautions.

**Step Four:** Record your findings.

**Step Five:** Review your assessment and revise if necessary.

**3. General information.**

**Principal enabling legislation / regulations.**

* Health and Safety at Work etc. Act 1974.
* Management of Health and Safety at Work Regulations 1999.
* Provision and Use of Workplace Equipment Regulations 1998.
* Chemicals (Hazard, Information and Packing) Regulations 2002.
* Control of Substances Hazardous to Health Regulations 2005.
* Electricity at Work Regulations 1989.
* Workplace (Health, Safety and Welfare) Regulations 1992.
* Manual Handling Operations Regulations 1992.

**Terms defined**

|  |  |  |
| --- | --- | --- |
| Severity | Score | Likelihood |
| **Fatality** | **5** | **Frequent** |
| **Major** | **4** | **Regular** |
| **Reportable** | **3** | **Occasional** |
| **Minor** | **2** | **Remote** |
| **Negligible** | **1** | **Very Rare** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **RISK CALCULATIONS** | | | | | |
| **Fatality** | **5** | **10** | **15** | **20** | **25** |
| **Major** | **4** | **8** | **12** | **16** | **20** |
| **Reportable** | **3** | **6** | **9** | **12** | **15** |
| **Minor** | **2** | **4** | **6** | **8** | **10** |
| **Negligible** | **1** | **2** | **3** | **4** | **5** |
|  | **Very Rare** | **Remote** | **Occasional** | **Regular** | **Frequent** |



**PEMBROKE COLLEGE**

# HOW TO COMPLETE RISK ASSESSMENTS

**5 STEPS TO RISK ASSESSMENT**

**Identify the hazards**

**STEP 1**

**Decide who might be harmed and how**

**STEP 2**

**Evaluate the risks and decide on precautions**

**STEP 3**

**STEP 4**

**Record your findings and implement them**

**Review your assessment and update if necessary**

**STEP 5**

|  |  |  |
| --- | --- | --- |
| **Step One** | **IDENTIFY THE HAZARD**  How could people be harmed:   * Walk around and look at what could reasonably be expected to cause harm. * Ask staff what they think. They may have noticed things that are not immediately obvious to you. * Check with trade associations, manufacturers’ instructions or data sheets for chemicals and equipment as they can be very helpful in spelling out hazards and putting them in their true perspective. * Look back at accident and ill-health records. They often help identify the less obvious hazards. * Think about long-term hazards to health (e.g. high levels of noise or exposure to harmful substances) as well as safety hazards. | |
| **Step Two** | **DECIDE WHO MIGHT BE HARMED AND HOW**   * For each hazard think about who might be harmed. It will help you identify the best way of managing the risk. Identify groups of people, e.g. people working in the office/storeroom or passers-by. * In each case, identify how they might be harmed, e.g. what type of injury or ill health might occur, e.g. people putting boxes on shelves regularly might suffer back injury from repeating lifting of boxes. * Some workers have particular requirements, e.g. new and young workers, new or expectant mothers and people with disabilities may be at particular risk. | |
| **Step Three** | **EVALUATE THE RISKS AND ASSESS THE EXISTING PRECAUTIONS**   * Having identified hazard(s), decide what to do about them. The law requires you to do everything “reasonably practicable” to protect people from harm. You can work this out for yourself, but the easiest way is to compare what you are doing with good practice. * Look at what is already being done. Think about what controls are in place and how the work is organised, then compare this with good practice and see if there is more you should be doing to bring yourself up to standing. In asking yourself this consider: * Can I get rid of the hazard altogether? * If not, how can I control the risks so that harm is unlikely? * When controlling risks, apply the principles below, and if possible in the following order: * Try a less risky option, e.g. switch to using a less hazardous chemical. * Prevent access to the hazard, e.g. by guarding. * Organise work to reduce exposure to the hazard, e.g. put barriers between pedestrians and maintenance work. * Issue PPE, e.g. clothing, footwear, goggles etc. and provide welfare facilities, e.g. first aid and washing facilities for removal of contamination. * Involve staff, so that you can be sure what you propose will work in practice and will not introduce new hazards. * Ask your staff if they can think of anyone you may have missed. | |
| **Step Four** | **RECORD YOUR FINDINGS AND IMPLEMENT THEM**   * Write down the results of your Risk Assessment and share them with your staff. * When writing down your results keep it simple, e.g. * Tripping over rubbish: bins provided, staff instructed, weekly housekeeping checks or * Trailing cables: cover trailing cables with suitable material to avoid a trip hazard or remove trailing cables by reorganisation of office set-up. * Risk Assessments should be “suitable and sufficient”. You need to be able to show that: * A proper check was made. * You asked who might be affected. * You dealt with all the significant hazards, taking into account the number of people who could be involved. * The precautions are reasonable and the remaining risk is low. * You involved other staff in the process. * If you find that there are quite a lot of improvements that could be made, big and small, do not try to do everything at once. Make a plan of action to deal with the most important things first. Health and Safety Inspectors acknowledge the efforts of businesses that are clearly trying to make improvements. * A good plan of action often includes a mixture of different things such as: * A few cheap or easy improvements that can be done quickly, perhaps as a temporary solution until more reliable controls are in place. * Long-term solutions to those risks most likely to cause accidents or ill health. * Long-term solutions to those risks with the worst potential consequences. * Arrangements for training employees on the main risks that remain and how they are to be controlled, e.g. regular checks to make sure that the control measures stay in place, and clear responsibilities – who is responsible for the action and by what deadline. | |
| **Step Five** | **REVIEW YOUR ASSESSMENT AND REVISE/UPDATE IF NECESSARY**   * Write down the results of your Risk Assessment and share them with your staff. * When writing down your results, keep it simple, e.g. * Tripping over rubbish: bins provided, staff instructed, and weekly housekeeping checks. * Trailing cables: cover trailing cables with suitable material to avoid a trip hazard or remove trailing cables by reorganisation of office set-up. * Speak to staff and ask if they can think of anyone you may have missed. | |
| **Scoring used in Risk Assessments** | Below are the terms and risk calculations used for Risk Assessments at Pembroke College. You will notice they are colour coded to help identify high risk areas easily.  **TERMS DEFINED**   |  |  |  | | --- | --- | --- | | Severity | Score | Likelihood | | **Fatality** | **5** | **Frequent** | | **Major** | **4** | **Regular** | | **Reportable** | **3** | **Occasional** | | **Minor** | **2** | **Remote** | | **Negligible** | **1** | **Very Rare** |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **RISK CALCULATIONS** | | | | | | | **Fatality** | **5** | **10** | **15** | **20** | **25** | | **Major** | **4** | **8** | **12** | **16** | **20** | | **Reportable** | **3** | **6** | **9** | **12** | **15** | | **Minor** | **2** | **4** | **6** | **8** | **10** | | **Negligible** | **1** | **2** | **3** | **4** | **5** | |  | **Very Rare** | **Remote** | **Occasional** | **Regular** | **Frequent** | | |
| **Risk Assessment Form** | The following columns appear on the Risk Assessment Form used at Pembroke College:  **Hazard**   * First you must identify what it is that might be hazardous.   **Those Likely to be affected**   * Who could be harmed by this hazard?   **Injury from hazard**   * This is sometimes the most difficult question to answer. It is suggested you go for the worst case scenario, e.g. Electricity danger could result in a fatality.   **Current controls in place now**   * Summarise existing safety measures in place.   **S Rating**   * This covers the severity of the hazard, e.g. fatality, major, reportable, minor, or negligible.   **L Rating**   * This is the likelihood rating, e.g. frequent, regular, occasional, remote, or very rare.   **Risk Rating**   * This is S Rating x L Rating, severity x likelihood, e.g. if the severity is fatality (= 5) but the likelihood is very rare (=1) the total score is 5 x 1 = 5.   **Additional controls required**   * This is where you list any further additional controls you feel are necessary to monitor the hazard or, if implemented, would improve on the current controls in place. An example might be “regular checks – every three months to be made”. This is an additional extra control which shows you intend to monitor the hazard closely.   **Person Responsible**   * This would indicate the person responsible for implementing and checking the additional controls suggested.   **Date**   * This would indicate the date the additional control details were entered onto the Risk Assessment. | |
| **Possible Hazards** | **Mechanical Hazards**   1. Vibration 2. Crushing 3. Abrasion 4. Cutting/shearing 5. Entanglement 6. Drawing in/trapping 7. Rotating shafts 8. Impact 9. Stabbing | 1. High pressure injection 2. High pressure systems 3. Compressed air 4. Lifting equipment 5. Machinery failures 6. Mobile equipment 7. Sharp surfaces 8. Flying particles |
| **Equipment Hazards**   1. Transport vehicles 2. Failure of equipment 3. VDUs | |
| **Electricity Hazards**   1. Direct contact 2. Indirect contact 3. Short circuit/overload 4. Ignition source 5. Portable tools 6. Trailing leads | |
| **Health Hazards**   1. Dermatitis 2. Respiratory 3. Sensitisers 4. Manual handling 5. Welding flash 6. Rays from the sun | 1. Ingestion of substances 2. Legionella 3. Food poisoning 4. Repetitive strain injuries 5. WRULDs (Workplace Related Upper Limb Disorders) |
| **Security Hazards**   1. Substations 2. Material stores 3. Highly flammable vaults 4. Valuable information | 1. Precious metals 2. Buildings after work 3. Computer installations |
| **Substances/Materials Hazards**   1. Chemicals (COSHH) 2. Fumes/vapours/mist 3. Dust/gases 4. Lead 5. Asbestos 6. Vehicle exhausts | |
| **Fire and Explosion Hazards**   1. Flammable liquids 2. Flammable dust 3. Combustible waste 4. Gas cylinders 5. Flammable atmospheres 6. Smoking/naked flame 7. Ignition sources 8. Electrical overload | |
| **Working Environment Hazards**   * Noise * Ambient temperature * Hot/cold surfaces * Humidity * Ventilation * Lighting (day and night) * Emergency Lighting * Cleanliness * Hygiene | |
| **Process Hazards**   * Methods of Work * Storage of material | |
| **Environmental Hazards**   * Discharge to drains * Disposal of waste * Solvent emissions * Ground contamination * Failure of bunds * Noise nuisance * Drain overflow * Spillages | |
| **Emergency Response Hazards**   * Plans * First Aid * Blocked exits/gangways * Blocked vehicle access * Equipment faulty | |
| **People Aspects**   * Competent * Fit * Informed * Disabilities/restrictions * Hazardous behaviour * Age | |
| **Place of Work Hazards**   * Access/Egress * Obstructed gangways * Falls of persons * Working at heights * Restricted height * Overhead loads * Falling objects * Stability of fixed equipment * Working above liquids * Work near water * Confined spaces * Lack of oxygen | * High risk area * Slips and trips * Falling objects * Holes/pits * Overhead cables * Underground cables * Housekeeping * Piped liquid and gas * Trench collapse * Demolition * Storage of materials |

# RISK ASSESSMENT FORM

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Company name: |  |  | Assessed by: |  |  | Date |
| Activity: |  |  | Position: |  |  |  |

| **Hazard** | **Those likely to be affected** | **Injury from hazard** | **Current controls that are in place** | **S**  **Rating** | **L**  **Rating** | **Risk Rating** | **Additional controls required** | **Person responsible** | **Date** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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**Summary**

|  |  |  |  |
| --- | --- | --- | --- |
| **Action** | **Priority** | **By Whom** | **Date completed** |
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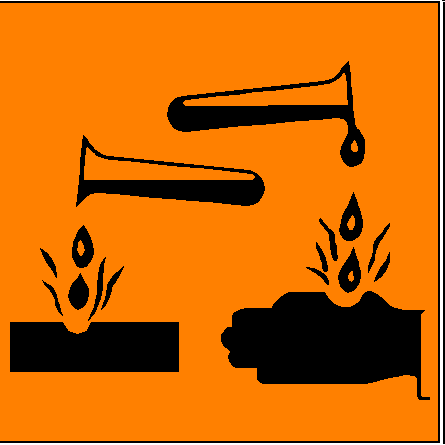
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PEMBROKE COLLEGE COSHH ASSESSMENT FORM | | | | | | | | | | |
| **Product (1):** | |  | | | **Date:** | | |  | | |
| **Substance(s) as Trade Names (1):** | |  | | | **Assessors:** | | |  | | |
| **Location:** | |  | | | **Assessment Ref:** | | |  | | |
| **Hazardous Component of Substances Named** | **Risk Phrase(s) (15)** | | **Workplace Exposure Limits (15)** | **Physical State (9)** | | **Routes of Exposure (4)** | | | | |
|  |  | |  |  | |  | | | | |
| **Work Activity** | **Frequency and Duration of Use** | | **People Exposed and When** | **Existing Controls in Current Use and an Estimate of their Effectiveness** | | | **Likelihood of Exposure** | | **Severity of Exposure** | **Risk Rating** |
|  |  | |  |  | | |  | |  |  |

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| --- | --- | --- |
| **Air Monitoring:**  Is quantified air monitoring required? | Yes/No, If yes | Has it been carried out competently? Yes/No |
| Have the results been interpreted correctly? Yes/No |
| **Local Exhaust Ventilation:**  Is LEV in use as a control? | Yes/No, if yes | Has it been inspected by a competent person? Yes/No |
| Has it been passed as suitable for the task? Yes/No |
| Is it being used effectively? Yes/No |
| **Respiratory Protective Equipment:**  Is the use of RPE required? | Yes/No, if yes | Has it been assessed as providing suitable protection? Yes/No |
| Is it being used effectively? Yes/No |
| Have suitable cleaning and storage facilities been provided? Yes/No |
| **Health Surveillance of Employees:**  Is health surveillance required? | Yes/No, if yes | Have the correct people been identified? Yes/No |
| Has an adequate programme been drawn up? Yes/No |
| Have the results been interpreted correctly? Yes/No |
| **Written systems of work:**  Are operations carried out in accordance with the documented information and systems of work? Yes/No | | |
| **Training and Procedures:**  Are the training provisions and working procedures adequate for the personnel working with this process or product? Yes/No | | |
| **Risk Reduction:**  Can the hazardous substance be substituted for a less hazardous substance? Yes/No | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Local Action Needed: (including additional controls & emergency procedures)** | **By Whom** | **By When** | **Date Actioned** | **Date All Completed** | **Review Date** |
|  |  |  |  |  |  |



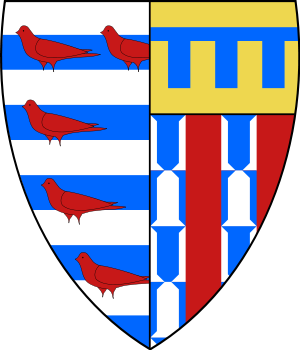
**PEMBROKE COLLEGE**

# RISK ASSESSMENT / COSHH ASSESSMENT – STAFF TRAINING

|  |
| --- |
| **IMPORTANT: Your signature below confirms that you have read the Risk Assessments and COSHH Assessments (if applicable) for your department, understand the hazards identified, the safety measures put in place by the College, and the instructions you must follow.** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activity** | **Risk Assessment** | **COSHH Details** | **Assessed By** | **Date** | **Signed** |
|  |  |  |  |  |  |
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# VDU FIRST ASSESSMENT FORM



**PEMBROKE COLLEGE**

**VDU WORKSTATION ASSESSMENT SHEET**

|  |  |
| --- | --- |
| **USER** | **ASSESSOR** |
| **Name:** | **Name:** |
| **Location:** | **Date:** |
| **Date:** |  |

|  |  |  |
| --- | --- | --- |
|  | **ADVICE** | **ACTION** |
| **THE USER** |  |  |
| 1. Do you wear glasses or contact lenses?   Glasses YES/NO  Contact Lenses YES/NO  Both YES/NO |  |  |
| 1. When did you last have an eyesight test by a qualified optician? |  |  |
| 1. How many hours per day do you work at Pembroke College?   …………………………………. Hours |  |  |
| 1. How long do you work at the computer (VDU) at any one time without a break?   ½ - 1 hour ………………..  1 – 2 hours ………………..  2 – 3 hours ………………..  3 – 4 hours ……………….. |  |  |
| 1. Do you take adequate breaks away from the computer (VDU)?   YES NO |  |  |
| 1. Whilst working at the computer (VDU) do you suffer from any of the following:   Backache ………………..  Headache ………………..  Hand/Wrist pain ………………..  Eye strain ………………..  Nausea ……………….. |  |  |
| 1. Issue booklet “Working Safely with Display Screen Equipment (VDUs) and Laptops”   Discuss the contents. |  |  |
| **EQUIPMENT - SCREEN** |  |  |
| 1. Does your screen   Tilt ………………..  Swivel ………………..  Neither ……………….. |  |  |
|  | **ADVICE** | **ACTION** |
| 1. Are the characters on the screen stable?   YES NO |  |  |
| 1. Are the characters on screen well defined and clear?   YES NO |  |  |
| 1. Is the brightness and/or contrast between characters and background easily adjusted?   YES NO |  |  |
| 1. Is the screen free from reflections?   YES NO |  |  |
| 1. If the answer to 5 is NO, how bad are the reflections?   Very bad ………………..  Bad ………………..  Average ………………..  Just a few ……………….. |  |  |
| 1. What is the cause of reflection?   Lighting ………………..  Windows ………………..  Other (state) ……………….. |  |  |
| **EQUIPMENT - KEYBOARD** |  |  |
| 1. Is the keyboard separate from the screen?   YES NO |  |  |
| 1. Does keyboard have a matt surface to avoid glare?   YES NO |  |  |
| 1. Can keyboard be angled?   YES NO |  |  |
| 1. Is there sufficient space in front of keyboard to provide support for hand and wrist?   YES NO |  |  |
| **EQUIPMENT - CHAIR** |  |  |
| 1. Does your chair swivel?   YES NO |  |  |
| 1. Can the back of your chair be altered?   YES NO |  |  |
|  | **ADVICE** | **ACTION** |
| 1. Can the height of your chair be altered?   YES NO |  |  |
| 1. What sort of condition is your chair in?   Very good ………………..  Good ………………..  OK ………………..  Poor ……………….. |  |  |
| 1. Is a footrest required?   YES NO |  |  |
| **EQUIPMENT – WORK SURFACE** |  |  |
| 1. Is the desk/work surface large enough to allow a flexible and comfortable arrangement?   YES NO |  |  |
| 1. Is the height suitable for use with VDU/Computer/Laptop equipment?   YES NO |  |  |
| 1. Is there sufficient space below the desk to enable a comfortable position to be achieved?   YES NO |  |  |
| **WORKING ENVIRONMENT** |  |  |
| 1. Are there any obstructions under the desk that need to be removed thus allowing a risk free environment?   YES NO |  |  |
| 1. Are the levels of noise/heat and light comfortable?   YES NO |  |  |
| 1. Is an adequate level of humidity maintained (fresh air circulation)?   YES NO |  |  |
| **USER COMMENTS** | | |

|  |  |  |
| --- | --- | --- |
| **Employee (Print Name)** |  | **Signature:** |
| **Completed by (Print Name)** |  | **Signature:** |
| **Date:** |  | |

# 

# SELF ASSESSMENT VDU FORM



**PEMBROKE COLLEGE**

**DSE SELF-ASSESSMENT QUESTIONNAIRE**

*Note: A copy of this questionnaire will be kept for at least three years*

|  |  |
| --- | --- |
| **Employee name:** | **Job title:** |
| **Department:** | **Location of workstation:** |
| **Head of Department:** | **Date:** |

*Under the* ***Health and Safety (Display Screen Equipment) Regulations 1992****, we are required to* ***perform a suitable and sufficient assessment of all workstations used by regular computer users. For*** *the purposes of the Regulations, this is someone who uses computers continuously for an hour or more each day.*

*Please read each question fully and answer by ticking the appropriate box. 'Yes' answers require no further action; 'no' answers will require investigation or remedial action. The action to be taken should be detailed in the action section at the end of the form.*

|  |  |
| --- | --- |
| 1. **Training and information** | **Yes / No** |
| Do you know how to adjust your workstation? |  |
| Have you received adequate training in how to use the software?  *This should help you carry out the task, minimise stress and be user-friendly. It should respond quickly and clearly to user input, with adequate feedback (e.g. clear help messages).* |  |
| 1. **Posture** |  |
| Can you sit comfortably and easily change your posture? |  |
| Do you have sufficient leg room? |  |
| Can you place your feet firmly on the floor?  *Ensure that you have sufficient room under your desk, and move any obstacles this area.* |  |
| If you need a footrest, is one available?  *Your feet should be flat on the floor without too much pressure on the backs of your legs.* |  |
| 1. **Workstation/work surface** |  |
| Have you arranged your workstation to meet your specific needs? |  |
| Is there space in front of the keyboard to support your hands and forearms?  *Try pushing the screen further back to create more room for the keyboard, hands and wrists. A wrist rest may help to achieve a comfortable keying position.* |  |
| Is the desk the right height for you? |  |
| Is your workstation and surrounding area free from obstructions and hazards? |  |
| Are all cables and wires secured?  *Cables should be tidy and not create a slip or trip hazard.* |  |
| Have you enough storage space?  *Rearrange equipment, papers etc. to bring frequently used items within easy reach. Reduce clutter on your desk by removing things into storage areas.* |  |
| Have you enough desk space?  *Create more room by moving printers, reference materials etc. elsewhere.* |  |
| Is the surface matt?  *Consider mats or blotters to reduce reflection and glare.* |  |
| If most of your work requires you to read from hard copy documents, do you use a document holder to ease vision? *This may minimise uncomfortable head and eye movements.* |  |
| 1. **Display screen** |  |
| Is the information displayed on your screen clear, in focus and easy to read?  *Make sure the screen is clean and cleaning materials are available. Check that text and background colours work well together. Check the text size as software settings may need adjusting.* |  |
| Can the brightness and contrast be adjusted easily?  *Separate controls are not essential provided the screen can be read easily at all times.* |  |
| Is the image on the screen stable and free from flicker?  *Try using different screen colours (e.g. a darker background) to reduce flicker.* |  |
| Is the screen free from glare and reflection?  *Use a mirror placed in front of the screen to check where any reflection is coming from. If necessary, move the screen or your desk, or shield the screen from the source of reflections. Dark characters on a light background are less prone to glare and reflection.* |  |
| Does the screen swivel and tilt adequately in each direction?  *Swivel and tilt need not be built in; a mechanism can be added for this.* |  |
| Are your eyes at a comfortable distance from the screen? |  |
| Is the screen placed at a comfortable height for you |  |
| Is the screen suitable for its use?  *Intensive graphic work or work requiring find attention to detail may require a larger display screen.* |  |
| 1. **Keyboard** |  |
| Is the keyboard separate from the screen?  *This is a requirement, unless the task makes it impracticable (e.g. where there is a need to use portable equipment).* |  |
| Can the tilt of the keyboard be altered/adjusted?  *Most keyboards have a built in adjuster underneath. Try using pads to adjust the tilt further if this is more comfortable. Avoid bending your hand up at the wrists - you may wish to tilt the keyboard away from you (negative tilt) to keep your wrists in a neutral position.* |  |
| Are the key symbols easy to read?  *Keyboards should be kept clean and the characters should be clear.* |  |
| Does the keyboard have a matt surface to avoid reflected glare? |  |
| Can you alter the height of the keyboard? |  |
| Do you have a good keyboard technique?  *Try not to bend your hands up at the wrists, not to hit the keys too hard and not to overstretch the fingers.* |  |
| 1. **Mouse** |  |
| If a mouse is necessary, do you have one? |  |
| Is a mouse mat available? |  |
| Are the mouse and mat positioned to prevent over-reaching?  *Most devices are best placed as close as possible, e.g. right beside the keyboard. Try to prevent your arm overreaching. Do not leave your hand on the device when it is not being used. Keep your arm relaxed and your wrist straight.* |  |
| Is there support for your wrist and forearm?  *This can be gained from, for example, the desk surface or arm of a chair.* |  |
| 1. **Work chair** |  |
| Is the chair comfortable? |  |
| Can the height and backrest angle be adjusted? |  |
| If it has arms, do they restrict movement of the chair?  *The arms should not prevent you from getting close enough to use the equipment comfortably.* |  |
| Is the chair stable and in good condition? |  |
| Can the chair swivel freely? |  |
| Can all adjustments be made easily and safely? |  |
| Is your chair adjusted correctly? |  |
| 1. **Lighting/windows/ventilation** |  |
| Does the lighting allow you to work comfortably?  *Adjust light levels by closing/opening blinds or light switches. Local lighting, e.g. desk lamps, may be provided but ensure these don't cause glare by reflecting off walls or other surfaces.* |  |
| Is your equipment situated to avoid direct glare?  *If you sit near a window, are adjustable window coverings provided?*  *Check that blinds work. Blinds with vertical slats can be more appropriate than horizontal ones. If this does not work, consider anti-glare screen filters.* |  |
| Does the air feel comfortable?  *VDUs and other electrical equipment may make the air dry. Circulate fresh air if possible, plants may help. A humidifier may be considered if necessary.* |  |
| Is the temperature comfortable?  *Electrical equipment can give off a lot of heat. Can the temperature be controlled?* |  |
| Is the level of noise comfortable?  *Consider whether sources of noise, such as printers, should be moved further away.* |  |
| 1. **Eyesight** |  |
| Do you require an eyesight test? |  |
| 1. **Personal** |  |
| Are your workstation settings changed for other users in your absence? |  |
| Are you able to take regular breaks from your workstation?  *Frequent short breaks are more beneficial than infrequent long ones. Consider how you can organise your work in order to vary activities. For example, taking breaks from the screen to carry out filing. Try to reduce repetitive tasks such as continual data entry.* |  |
| 1. **Other comments** |  |
| Do you know whom to contact if you experience problems with your workstation? |  |
| Are there any other issues you wish to raise?  *If yes, please give further details below:* |  |
| Signed / emailed by employee: *If returning by email please put your email address* |  |
| Signed by H&S Officer |  |
| To be completed by H&S Officer  Comments / further action required. |  |



**PEMBROKE COLLEGE**

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| **FIRST AID REPORT** |

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| --- |
| ***For HR use***  *Form No*: |

*This form* ***MUST*** *be completed by a First Aider.*

Name of First Aider:

**DETAILS OF THE INJURED PERSON**

|  |
| --- |
|  |

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Name: Home Address

|  |
| --- |
|  |

Department:

|  |
| --- |
|  |

Phone No:

|  |  |
| --- | --- |
| Member of staff | Other (give details |

Injured person? *Please circle*

**DETAILS OF THE ACCIDENT:**

|  |
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Date of the accident: Time: Location:

**ABOUT THE INJURY:**

|  |
| --- |
|  |

Location of the injury on the body, (left / right arm, leg etc.):

|  |
| --- |
|  |

Describe the injury:

|  |
| --- |
|  |

Describe how the accident happened including any substance or equipment

involved:

|  |
| --- |
|  |

Details of first aid administered:

**WITNESSES:** The above accident was witnessed by:

|  |
| --- |
|  |

|  |
| --- |
|  |

Name: Address &

Phone No.

|  |
| --- |
|  |

Job Title:

**SIGNATURE OF FIRST AIDER:** ……………………………………………. **DATE**:…………………………

***Please return this form to the HR Office in the first instance***

**PEMBROKE COLLEGE · CAMBRIDGE**

# HAND ARM VIBRATION (HAV)

|  |  |
| --- | --- |
| **Summary of the Legislation** | The Control of Vibration at Work Regulations 2005 came into force on 6th July, 2005 and this regulation aimed to protect workers from risks to health from vibrating work equipment, vehicles and machinery.  The regulations stipulate:   * An exposure action value of 2.5 m/s² A(8), at which level employers should introduce measures to reduce exposure. * An exposure limit value of 5.0 m/s² A(8) which should not be exceeded.   There are two routes of transmission:   * Whole Body Vibration (WBV). * Hand-Arm Vibration (HAV), which is commonly known as Vibration White Finger (VWF). |
| **Signs of VWF – Vibration White Finger** | Early signs of VWF can be:   * Tingling or numbness in the fingers. * Note being able to feel things properly. * Loss of strength in hands. * Fingers going white (blanching) and becoming red and painful on recovery (particularly in the cold and wet, and probably only in the tips at first.   For some people, symptoms may appear after only a few months of exposure, but for others they may take a few years.  Symptoms can worsen with continued exposure to vibration and may become permanent. |
| **Tools and Equipment which can cause ill-health from Vibration** | With continued used, the following are examples of equipment which could cause ill-health (this is not an exhaustive list):   * Chainsaws. * Hammer Drills. * Hand-held Grinders. * Impact Wrenches. * Jigsaws. * Pedestal Grinders. * Power Hammers and Chisels. * Powered Lawn Mowers. * Powered Sanders. |
| **Assessment of College Machinery and Equipment** | The University Safety Office has provided a report on the equipment and machinery used at Pembroke College.  The report gives the exposure action values for each piece of machinery and equipment and provides the maximum safe exposure times for staff using each piece of equipment.   * Maximum usage timings are given in “traffic light” system (green, amber and red). |
| **Responsibilities of the HR Manager/H&S Officer (Health Screenings)** | To provide all members of staff, if necessary, with information about the possible effects of VWF.  To provide all members of staff with annual health assessment questionnaires.  To refer any member of staff presenting with any symptoms (as noted above) to Occupational Health for assessment. |
| **Responsibilities of Heads of Department** | To ensure all members of staff adhere to the Colleges “traffic light” system for usage of all equipment.   * Staff should be assigned a variety of jobs to ensure they do not exceed the limits given in the report.   To ensure that all equipment purchased is assessed by the University Health and Safety Office and included in the “traffic light” assessment system.  To undertake visual health monitoring for all staff after equipment is used.  To report to the Health and Safety Officer IMMEDIATELY any symptoms of VWF by himself or any of their staff.  To avoid increased vibration by:   * Ensuring all equipment is properly maintained and repaired. * Undertaking regular checks of shock absorbers and hand grips of all hand-held equipment. * Ensuring all cutting equipment is kept sharp, so that they remain efficient. |
| **Responsibilities of all Employees** | To IMMEDIATELY report to the Head of Department any signs of effects of VWF (as noted above).  To undertake visual inspections of all equipment (hand grips and blades) prior to use.  Ensure that defective equipment IS NOT USED.  To IMMEDIATELY report to the Head of Department any problems with equipment during its use.  To promptly complete all HAVS screening questionnaires provided.  To attend health screening assessments with Occupational Health if any symptoms of HAV is noticed. |
| **Information and Training** | All relevant members of staff will:   * Be issued with the HSE booklet “Hand-arm Vibration: A guide for employees, <http://www.hse.gov.uk/pubns/indg296.pdf>. * Receive annual talk, from Head of Department, about the signs any symptoms of HAV – to be carried out by their Head of Department. |
| **Records** | Records of all trigger and usage timings will be kept by the HR Manager/H&S Officer and Heads of Department.  Records of all “traffic light” reports will be kept by the HR Manager/H&S Officer and Heads of Department.  Records of all HAVs screening checks will be held in individual employee personnel files. |
| **Review** | This procedure will be reviewed annually. |



**PEMBROKE COLLEGE · CAMBRIDGE**

# HAVS SCREENING QUESTIONNAIRE

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**IN CONFIDENCE**

**Initial screening questionnaire for workers using hand-held vibrating tools, hand-guided vibrating machines and hand-fed vibrating machines**

|  |  |
| --- | --- |
| **Employee name:** | **Date:** |
| **Job Title:** | **Department:** |
| **Date of birth:** | **National Insurance Number:** |
| **Home Address:** | **Home Telephone Number:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Do you use/have you ever used hand-held vibrating tools, machines or hand-fed processes in your job?** | | Yes | / No |
| **If Yes:**  **(a) List year of first exposure**  ..........................................................................................................................................................  **(b) What year did you last use them?**  .......................................................................................................................................................... | | | |
| **Occupational History:**  Please give details of any previous use of hand-held vibrating tools, machines or hand-fed processes in your job: | | | |
| **Dates (From / To)** | **Job Title** | | |
| **Do you have any tingling of the fingers lasting more than 20 minutes after using vibrating equipment?** | | Yes | / No |
| **Do you have tingling of the fingers at any other time?** | | Yes | / No |
| **Do you wake at night with pain, tingling, or numbness in your hand or wrist?** | | Yes | / No |
| **Does one or more of your fingers go numb more than 20 minutes after using vibrating equipment?** | | Yes | / No |
| **Have your fingers ever gone white\* on cold exposure?**  *\*Whiteness means a clear discoloration of the fingers with a sharp edge, usually followed by a red flush.* | | Yes | / No |
| **If Yes, do you have difficulty re-warming them when leaving the cold?** | | Yes | / No |
| **Do your fingers go white at any other time?** | | Yes | / No |
| **Are you experiencing any other problems with the muscles or joints of your hands or arms?** | | Yes | / No |
| **Do you have difficulty picking up very small objects, e.g. screws or buttons or opening tight jars?** | | Yes | / No |
| **Have you ever had a neck, arm or hand injury or operation?**  **If Yes, give details:** | | Yes | / No |
| **Have you ever had any serious diseases of joints, skin, nerves, heart or blood vessels?**  **If Yes, give details:** | | Yes | / No |
| **Are you on any long-term medication?**  **If Yes, give details:** | | Yes | / No |

**Declaration**

I certify that all the answers given above are true to the best of my knowledge and belief.

**Signed:** ............................................................... **Date:** ..............................................

**RETURN IN CONFIDENCE TO KAREN LAIN, HR MANAGER & H&S OFFICER**

# INCIDENT/ACCIDENT REPORTING FORM

**INCIDENT / ACCIDENT REPORTING FORM**

|  |  |
| --- | --- |
| **Name:** |  |

|  |  |
| --- | --- |
| **Address:** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **For the injured person please select:** |  | Student |  |  | Fellow |  |  | Guest/Visitor |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Gender of injured person:** |  | Male |  |  | Female |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of incident:** | D | D | / | M | M | / | 20 | **Time of incident:** |  |  | **:** |  |  |

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Was First Aider called/present** |  | Yes |  |  | No |

|  |  |
| --- | --- |
| **If ‘yes’ please give name of First Aider called/present** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Was the injured person sent to:** |  | Hospital\* |  |  | Home/Room |

*\* It is College policy that all medical emergencies are sent to hospital by ambulance*

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| **Method of transport used:** |  | Ambulance |  |  | Taxi |  |  | Bus |  |  | Private vehicle |

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| **If sent to hospital by taxi, did the student choose this method of transport:** |  | Yes |  |  | No |

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| --- | --- | --- | --- | --- | --- |
| **Did anyone witness the incident:** |  | Yes |  |  | No |

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| **If ‘yes’ please give name and contact details of the witness:** |

*Following the incident/accident please inform the following:*

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| **For students:** |  | Student’s Tutor |  |  | College Nurse |  |  | Tutorial office |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **For Fellows:** |  | Senior Tutor |  |  | Bursar |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **For guests/visitors:** |  | Bursar |  |  | HR Office |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **For IP students:** |  | IP Office |  |  | College Nurse |  |  | Tutorial office |  |  |  |



**PEMBROKE COLLEGE · CAMBRIDGE**

# ADRENALINE AUTO INJECTORS CHECK SHEET

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| --- | --- | --- |
| **Site of College provided Adrenaline Auto Injectors (AAI)** | **Date of Expiry** | **Checked by - Signed** |
| **Porters Lodge** |  |  |
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| **Nurses Office/Surgery** |  |  |
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**PEMBROKE COLLEGE · CAMBRIDGE**

# DEFIBRILLATOR MONTHLY CHECKLIST

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|  | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** | **Date/ Initials** |
| **Check AED is on standby mode and not showing a warning symbol** |  |  |  |  |  |  |  |  |  |
| **Check the spare pads are sealed and in date** |  |  |  |  |  |  |  |  |  |
| **Check scissors are present** |  |  |  |  |  |  |  |  |  |
| **Check disposable gloves are present** |  |  |  |  |  |  |  |  |  |
| **Check face shield is present** |  |  |  |  |  |  |  |  |  |
| **Signature** |  |  |  |  |  |  |  |  |  |



**PEMBROKE COLLEGE**

|  |  |
| --- | --- |
| **Page(s)** | **Date** |
| 86, 87, 88 | 1st February, 2018 |
| 5, 83-84 | 9th April, 2018 |
| 5,6,7,17,20,21,23,24,25,41,47,48,49,50,51,61,120 | June, 2018 |
| 20, 21, 22, 23, 24, 116 | 3rd August, 2018 |
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