St. Michael's House

SAFETY STATEMENT

Document Approved By:	E.M.T. and Strategic Health and Safety Committee
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Document Issue Date:	December 2017
Document Review Date:	One year from date of issue or a significant change
Updated By:	Anne Clinton, Health and Safety Manager
Distributed To:	All Organisation
Internal Monitoring Mechanism:	Strategic Health and Safety Committee

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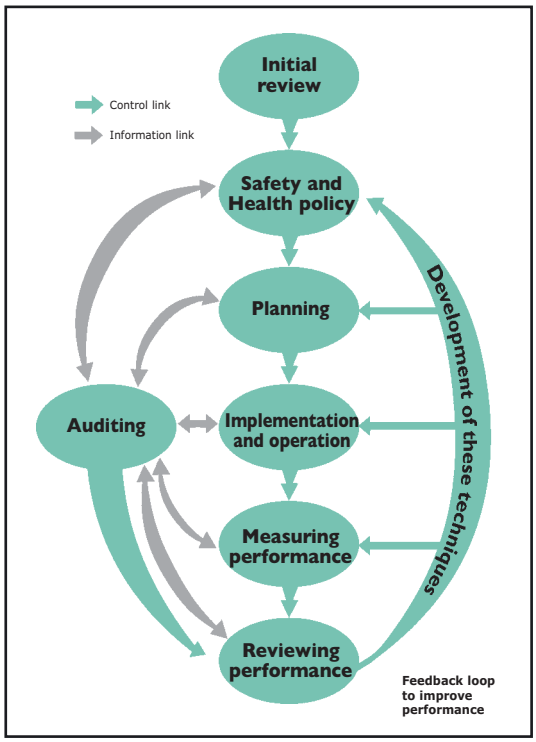
Organisation Structure for Health & Safety

Successful management of health and safety can only be achieved when the participation of employees at all levels in the Organisation and responsibility for health and safety is integrated into all aspects of Service Provision.

Policy & Committment:

The Safety Statement is the organisations safety management systems in writing and sets a clear direction for the organisation. This begins with Chief Executive Officer whose responsibility for H&S is detailed in Section 3 and cascades down through the Organisation. Effective Safety and Health risk management systems are essential to achieve organisations strategic goals and is recognised as an integral element of organisations Quality and Safety framework. The Organisation has adopted the Health and Safety Authority's key elements of a Safety and Health management system model and adapted to our organisation. The organisational structure and reporting structure for implementing these duties is illustrated in the St. Michael's House Organisation Chart in this document *See appendix*



Management review :

Level 1:

- Under Section 80 of the Safety, Health and Welfare at Work Act 2005, the Board of Directors have appointed two Health and Safety Directors. H&S Directors ensure that Senior Management have in place a robust system to proactively manage risks with detailed management and operational systems and procedures. They meet with Director of Operations and Health and Safety Manager twice annually to review comprehensive report on all aspects of safety performance. The Health and Safety Directors present a detailed report to the Board twice yearly.

Level 2:

- The C.E.O. and Executive Management Team (E.M.T.) oversee the implementation of Safety Management Systems. They receive comprehensive health and safety reports twice yearly prepared by the Health and Safety Department. These reports include accident/incident statistics, identify trends/areas of concern, and make recommendations for addressing issues. The E.M.T. reviews overall performance and recommends corrective actions to be implemented by managers and staff.

Level 3:

- The Health and Safety Committee, is the primary consultation mechanism for the Organisation. The Committee structure comprised 3 directorate service area committees which meet on a quarterly basis and area overseen by the Strategic Safety Committee. Membership comprises of representatives including senior management, representatives of departments/ disciplines, Health and Safety Personnel along with appointed Safety Representatives. This mechanism is reviewed to ensure its effectiveness on a periodic basis.

Level 4:

- At each Departmental/location the PIC, Manager, Co-ordinator, Heads of Departments are responsible for implementing site specific safety management systems (see section 4 of this manual). They are responsible for all areas under their direct control. Issues that require additional support are elevated to Services Management Level. Heads of Department are responsible for safe systems and structures in their respective departments around activities which they control.

Planning:

- Legal and other requirements including codes of practice, best practise and other organisational policies
- Risk Assessments and Risk Management
- Organisation objectives and work plans/programmes/strategic plan.

Implementation and operation:

- The Health and Safety Committee, is the primary consultation mechanism for the Organisation. The Committee structure comprised 3 directorate committees which meet on a quarterly basis and area overseen by the strategic Safety committee.
- Emergency preparedness and response
- Training and competency and awareness
- Roles and responsibilities
- Resources and welfare
- Operational control/environment/equipment
- Safe Systems of Work

Reviewing and measuring performance:

- Accident/Incident Managment
- H&S Auditing programme
- Service Area Safety Reports

Statement of Policy

The Management and Employees of St. Michael's House are committed to ensuring their own health & safety and that of others. Safety Management System is monitored and endorsed by the Board of Directors in compliance with the Safety, Health and Welfare at Work Act 2005. St. Michael's House is committed to:

- Process of identifying hazards and assessment of the risks to safety and health of employees and others who may be affected by the activities of St. Michael's House.
- Protecting the safety, health and welfare of employees, Service Users, contractors and visitors.
- Complying with legal and health and safety obligations, including Safety Health & Welfare at Work Act 2005, and any relevant applicable legislation, codes of practice, or safe practice recommendations.
- Continually improving and implementing the highest health and safety management standards.

Our commitment to health and safety is illustrated through:

- Oversight by the Board of St. Michael's House - two Health and Safety Directors who meet regularly with the Director of Operations and the Health and Safety Manager to review in detail the operation of the Health and Safety throughout the organisation and regular reports are provided to the Board arising from these monitoring meetings.
- Process of identifying hazards and assessment of the risks to safety and health of employees and others who may be affected by the activities of St. Michael's House
- St. Michael's House are committed to ongoing monitoring of safety performance and continuous improvement in area of health and safety.
- Integration of safety planning into our core work including care plans, Personal planning system, safe systems of work etc
- Programmes for safety audits and compliance audits
- Through health and safety training and communications programme for all employees
- Requirements for full accountability for and promotion of excellence in health, safety and quality performance
- Safety Committee framework where by representatives of management and staff meet on a regular basis from Service division and Strategic level to contribute to the improvement of safety, health and welfare in St. Michael's House for all.
- Details of safety arrangements specific to each Centre is held on the Centre Safety File. This includes site specific risk assessments, detailing how the risks of that particular Centre are managed. Details of Local Safety Management Systems - see section 4 of this document.

This policy declaration is communicated to all employees, displayed in key locations in St. Michael's House and communicated to contractors

SIGNED _____

Chief Executive Officer

Roles & Responsibilities

Section 3

This section lists the specific safety responsibilities that apply within the organisation. It lists firstly, the responsibilities that apply to all employees at all levels, locations, disciplines etc. It then lists the additional, specific safety responsibly of key positions and roles in the organisation,

3.1 RESPONSIBILITIES OF ALL EMPLOYEES OF ST. MICHAEL'S HOUSE

- Take reasonable care to protect their own safety, health and welfare and that of others who may be affected by the work they do.
- Wear suitable and appropriate footwear and dress appropriate to their duties.
- Co-operate with management to ensure compliance with national safety regulations.
- Reinforce good working practice and end unsafe work methods.
- Help to implement the safety managed system as described in:
  - St. Michael's House Policies and Procedures
  - St. Michael's House Safety Statement and all other safety related documentation for the location department they are working in including; Centre/Department Risk Assessments,Fire and Emergency Plans, safe systems of work including guidelines.
- Attend and actively participate in training sessions and assessment appropriate to the work/duties assigned. Inform line manager of any situation where they do not have training or not competent enough to complete the task safely. A member of staff should carry out no work activity if they are not trained or competent to complete the task safely. Failure to attend training or to undergo assessment will be addressed under HR 'Dignity at Work' Policy, Disciplinary Policy.
- Report without delay any accidents, incidents, near misses that occur at work to their line manager and complete relevant e-form with all information on the event and cooperate fully with any follow-up investigation.
- Be familiar with policies and codes of practice such as covering respect and dignity and other topics.
- Do not engage in improper conduct or behaviour (such as bullying, harassment, sexual harassment, horseplay and so on).
- Do not use or be under the influence of drugs or alcohol at work as per "substance use and/or abuse" HR Policy
- Notify your line manager (when under medical supervision/on prescribed medication and certified fit for work)of any known side effects or temporary physical disabilities which could hinder their work and which may be a danger to either themselves or their fellows workers.
- Maintain their workplace in a clean and tidy manner, in so far as is reasonably practicable, in the interest of health, health and welfare at work.
- Prohibited from smoking in an enclosed workplace, in accordance with the amendment to the Public Health (Tobacco) Act 2002 and The Public Health (Tobacco) (Amendment) Act 2004.
- Contribute to local safety improvement plans and safety services committees.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.2 CEO

The CEO has overall responsibility for the safety, health and welfare of employees in St Michael's House and anyone affected by our activities through service provision.

Specific Responsibilities:

- Provides resources and support for the set up and maintaining an effective system for managing health and safety within HSE allocation.
- Ensure safety requirements are integrated in all service provisions and activities.
- Ensures that management and organisational structure is suitable to properly address health and safety across all levels of the organisation and that management teams and employees actively promote health and safety.
- Ensures that adequate resources such as finance, competent personnel and time allocated to meet the requirements of the Safety Management System.
- Ensure ongoing consultation with employees or their representatives is facilitated.
- Periodically appraise the effectiveness of the Safety Statement and that safety performance is included in the Organisation's Annual Report.
- Ensure that responsibility for health and safety is properly assigned, understood and accepted at all levels.
- Ensure that all staff under their control are held accountable for their performance in relation to occupational health and safety.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.3 DIRECTOR OF OPERATIONS

The Director of Operations oversees and supports the implementation of the Safety Management System and the Safety Statement document throughout the organisation including Shared Services Departments.

Specific Responsibilities:

- Appoints the necessary and competent personnel to the Strategic Safety Committee and Services Safety Committees to ensure compliance with St Michael's House policies and procedures.
- Chairs the Strategic Safety Committees and oversee the work of the Services Safety Committees.
- Makes sure that an adequate and up to date safety statement and risk assessments programme in place.
- Ensures that an adequate programme is in place to monitor how well audit targets and programmes are working.
- Ensures Health and Safety Directors are kept up to date in relation to health and safety performance through regular meetings.
- Ensure safety requirements are integrated in all service provisions and activities.
- Showing through personal behaviour that only the highest standards of safety are acceptable.
- Ensuring that this safety statement is available to and read by all staff within their area of responsibility and appropriate third parties.
- Incorporate health and safety objectives in the performance review system.
- Ensure the necessary resources are made available for the implementation of H&S Policy and good practice recommendations.
- Ensuring that all staff under their control are held accountable for their performance in relation to occupational health and safety.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.4 DIRECTORS OF SERVICES

The three Directors of Services have responsibility for the safety, health and welfare of employees in Adult and Children's Services and anyone else affected by our activities.

Specific Responsibilities:

- To develop a positive Health & Safety culture in their teams
- Monitor the effectiveness of the safety management systems within their respective Services through the:
  - Services Safety Committees work plans,
  - Services Safety Reports and take action where appropriate.
- Actively participates on the Strategic Safety Committee and reports on respective Services Safety performance twice yearly to the Committee.
- Ensure systems, processes and resources, necessary to manage safety, health and welfare, are in place within all locations in their respective Services Area.
- Ensure that timely accident investigations are carried out in line with policy and procedure and ensure recommendations are shared and acted upon promptly.
- Ensuring at all times that competent staff and appropriate materials are available to meet the requirements of the safety legislation.
- Ensure documented work systems and processes in place for all tasks.
- Ensure safety requirements are integrated into all Service activities within the Service Area.
- Incorporate health and safety objectives in the performance review system.
- Ensure that relevant parts of the Safety Statement and its related obligations are communicated to all Staff.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.5 ADMINISTRATIVE MANAGERS

The Administration Managers are responsible for monitoring implementation of the Safety Management Systems and Safety statement in their respective Services Area. In addition they hold responsibility for overseeing arrangements in the Corporate and Administration Offices in Goatstown, Ballymun and Coolock.

Specific Responsibilities:

- Showing through personal behaviour that only the highest standards of safety are acceptable.
- Ensuring the effective working of the Services Safety Committees to address safety issues raised from employees concerns.
- Ensure that employees under their control and others, including contractors, the public and visitors, are made aware of and comply with the health and safety statement and the organisations arrangements for carrying it out.
- Ensuring that all employees have the adequate competence (training, knowledge and experience) for work activities they undertake.
- Ensure that there are adequate emergency plans in place.
- Ensure there are a number of trained fire wardens in the building that will support the fire evacuation plan, regular fire drills will be held for the buildings at least twice per year
- Ensuring that good housekeeping standards are maintained and in particular that fire exit routes are kept clear at all times and that fire signage and equipment are not obstructed.
- Site Specific Safety Statements are developed for all locations within their area of responsibility.
- Monitor work related adverse incident reports to ensure that the H.S.A. is notified of employee absence of greater than 3 days, thereby complying with requirements of the Notification of Accidents and Dangerous Occurrence Regulations 2016.
- Carry out or arrange to have carried out, regular safety inspections in their departments.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.6 CLINIC MANAGER

The Clinic Managers are responsible for evaluating the implementation of the Safety Statement for the clinical services within their respective region.

Specific Responsibilities:

- Ensure they themselves are fully familiar with the Organisation's Safety Statement and ensure it is brought to the attention of all employees who report to them.
- Ensure that all professional clinical practices and procedures within their respective Service Area are in accordance with relevant health and/or safety legislation, guidelines and best practice recommendations.
- Actively promote a health and safety agenda within their area of responsibility and via the Service Area Management Teams.
- Showing through personal behaviour, that only the highest standards of safety are acceptable.
- Ensure health and safety issues are given priority at Team meetings as necessary, within their area of responsibility.
- Take necessary steps to address and resolve any health and safety issues arising within their area of responsibility.
- Report regularly to the Director of Services regarding health and safety within their area of responsibility, and at least annually.
- Develop and ensure that adequate clinical training resources are made available within their area of responsibility.

3.7 HEAD OF ADMINISTRATION FUNCTIONS

Shared Services Managers (includes Human Resources, IT Department, Communications, Training, Finance are responsible for ensuring that the employees under their immediate control and others, including visitors, are made aware of and comply with the Safety Statement and arrangements for carrying it out.

Specific Responsibilities:

- Develop positive safety culture in their teams.
- Ensure they themselves are fully familiar with the Organisation's Safety Statement and ensure it is brought to the attention of all employees who report to them.
- Implement the risk assessment process for all employee activities and implement any necessary improvements and protective measures. Ensure any deviation from health and safety standards is acted upon immediately.
- Actively participates on the Strategic Safety Committee (where applicable) and present department performance reports twice yearly to the Committee.
- Complete any safety critical tasks in a timely manner.
- Show through personal behaviour that only the highest standards of safety are acceptable.
- Ensure that all employees who report to them in their departments receive adequate safety training, instruction and supervision appropriate to their tasks.
- Ensure that all employees who report to them are aware of actions to be taken in case of emergency and that properly maintained fire fighting equipment is available within their area.
- Ensure that good housekeeping standards are maintained and in particular that fire exit routes are kept clear at all times and that fire signage and equipment are not obstructed.
- Ensure that thorough and prompt investigations are carried out into all reported accidents and incidents and that a completed Accident Report e-form is submitted to the H&S department.
- Consider representations about health and safety from employees who report to them.
- Carry out or arrange to have carried out, regular safety inspections in their departments.

3.8 TECHNICAL SERVICES MANAGER

Technical Services Manager is part of the Shared Services Division of the Organisation. In addition, Specific responsibilities include

Specific Responsibilities:

- Ensure all St. Michael's House properties are maintained in good repair through scheduled surveys.
- Complies with all duties under the Safety, Health and Welfare at Work (Construction) Regulations 2013 and the Safety, Health and Welfare at Work (General Application) Regulations 2017.
- Ensure contractor management systems are in place and fit for purpose.
- Oversee the day-to-day implementation and monitoring of policies and plans and procedures, including accident and incident investigation reporting and analysis.
- Ensure that the safety management system is effectively implemented in their teams and that health and safety performance is continually monitored and improved.
- Ensure up-to-date documented safe systems of work and task specific risk assessments are available for all work activities being assigned.
- Ensure plant and equipment is fit for purpose, safe to use and has been inspected in line with legislative requirements and St. Michael's House policy.
- Ensure St. Michael's House employees have the adequate competence (training, knowledge and experience) for work activities they are instructed to undertake.
- Ensure safe storage and handling of chemicals on site and chemical risk assessments and SDS are available where applicable.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.9 TRAINING AND DEVELOPMENT MANAGER

Specific Responsibilities:

- Ensure that Health and Safety training is incorporated and addressed in all strategic planning in the Training and Development Department.
- Ensure the health and safety agenda within the Training and Development Department.
- Ensure that Health and Safety Training is provided for all staff at all levels in the Organisation in compliance with Health and Safety legislative requirements in conjunction with the Health and Safety Department.
- Ensure that proposals for changes to, or new health and safety training programmes are brought to the Strategic Health and Safety Committee for discussion
- Ensure evaluation, monitoring and review of the effectiveness of health and safety training in conjunction with the health and Safety Department.
- Ensure regular information on health and safety training is provided to the Executive Management Team.
- Support the Training Officer(s) to recruit relevant training expertise/freelance trainers as required for Health and Safety courses.
- Ensure the Staff Training and Development Department is represented on the Strategic Health and Safety Committee.

3.10 TRANSPORT OPERATIONS MANAGER

Transport Operations Manager is responsible for the day-to-day management of safe transportation of Service Users on central transport buses and oversees the entire fleet (Central Transport, Centre Vehicles and Maintenance Vans), in respect to arranging and coordinating CVRT's/NCT's, maintenance, and servicing arrangements.

Specific Responsibilities:

- Ensure that the safety management system is effectively implemented and that health and safety performance is continually monitored and improved.
- Ensure up-to-date document safe systems of work and task specific risk assessments are available for all work activities being assigned for central transport.
- Ensure plant and equipment is fit for purpose, safe to use and has been inspected in line with legislative requirements and St. Michael's House policy.
- Ensure St. Michael's House employees have the adequate competence (training, knowledge and experience) for work activities they are instructed to undertake
- Ensure maintenance of key records in relation to the central transport fleet, which includes:
  - Detailed records on each vehicle,
  - Ensure all drivers have appropriate licensing relative to the bus they are assigned to.
  - Register of approved drivers
- Ensure vehicles have the necessary tax and insurance
- Ensure all applicants who complete the Insurance Questionnaire are assessed to ensure prospective drivers meet the necessary standard prior to driving St. Michael's House Transport;
- Ensuring Driver CPC is completed on an annual basis
- Liaise with enforcement authorities in the event of a collision or incident.

3.11 CLINICAL HEADS OF DEPARTMENT

Clinical Heads of Department are responsible for ensuring that the employees under their control and others, including visitors, are made aware of and comply with the Safety Statement and arrangements for carrying it out.

Specific Responsibilities:

- Develop a positive safety culture in their teams
- Ensure up-to-date documented safe systems of work and task specific risk assessments are available for all work activities being assigned.
- Ensure equipment is fit for purpose, safe to use and has been inspected in line with legislative requirements and St. Michael's House policy.
- Ensure St. Michael's House employees have the adequate competence (training, knowledge and experience) for work activities they are instructed to undertake.
- Show through personal behaviour that only the highest standards of safety are acceptable.
- Ensure that all employees who report to them are aware of actions to be taken in case of emergency.
- Ensure that good housekeeping standards are maintained and in particular that fire exit routes are kept clear at all times and that fire signs and equipment are not obstructed.
- Ensure that thorough and prompt investigations are carried out into all reported accidents and incidents and ensure recommendations are communicated and implemented.
- Consider representations about health and safety from employees who report to them.
- Carry out or arrange to have carried out, regular safety checks in their department

3.12 SERVICE MANAGERS

Service Managers are responsible for supporting and monitoring implementation of the safety management systems in all services under their control comply with the Safety Statement and arrangements for carrying it out.

Specific Responsibilities:

- Ensure that the safety management system is effectively implemented in their cluster locations and that health and safety performance is continually monitored and improved.
- Support local Managers and Teams to set up and implement site specific safety management system - see local safety statement template.
- Ensure risk management procedures are implemented and managed in their cluster as per Risk Management Policy
- Show through personal behaviour that only the highest standards of safety are acceptable.
- Ensure timely accident investigation is carried out and ensure recommendations are communicated and implemented.
- Ensure that safety improvement plans are developed, reviewed and implemented.
- Ensure all audits are carried out in their cluster locations, recorded and acted upon promptly.
- Monitor safety performance and benchmark against other locations.
- Complete any safety critical tasks in a timely manner.
- Ensure that Centres under their control have adequate, current and appropriate unit specific Risk Assessments. Ensure any significant risks are brought to the attention of Director of Services and/or Health and Safety Department where appropriate.
- Carry out regular 6 monthly safety and quality audits in the cluster locations to ensure safety systems are working well and where gaps are identified, complete the action plan section on the form and support local manager in implementing agreed actions in a timely fashion. Raise safety issues with senior management and give direction.
- Consider representations about health and safety from employees who report to them.
- Notify the Health and Safety Department of any statutory/third party inspections and ensure a copy of findings are sent without delay. Discuss proposed recommendations and action plan with Health and Safety Department.
- Ensure any recommendations by the Health and Safety Department for centres under their control are acted upon and implemented in a timely fashion.
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.13 PERSONS IN CHARGE/MANAGERS/CO-ORDINATORS

Specific Responsibilities:

- Ensure that the safety management system is effectively implemented in their teams. Including local Safety Statement and ensure it is brought to the attention of all employees who report to them and relevant others including volunteers, students etc.
- Ensure up-to-date documented safe systems of work and risk assessments are available for all work activities/tasks.
- Ensure that all staff(including students, temporary, on-call, volunteers) have adequate competence (training, knowledge and experience) for the activities and tasks they are instructed to undertake.
- Report any defects in the safety management system to their line manager as soon as possible.
- Ensure safety is discussed at staff meetings and actions follow-up.
- Ensure that local safety plans are developed, reviewed and implemented.
- Ensure their teams follow the accident, incident and near miss notification procedure at all times and that investigations and any follow-up actions are performed and communicated promptly.
- Develop a positive health and safety culture in their teams.
- Ensure equipment is fit for purpose, safe to use and has been inspected in line with legislative requirements and organisation policy.
- Carry out or arrange to have carried out, regular safety inspections in their location.
- Ensure that all employees who report to them are aware of actions to be taken in case of emergency and that properly maintained fire fighting equipment is available within their area.
- Ensure that good housekeeping standards are maintained and in particular that fire exit routes are kept clear at all times and that fire signage and equipment are not obstructed.
- Consider representations about health and safety from employees who report to them.
- Ensure that any contractors working within the premises observe reasonable safety considerations and that they are aware that any work carried out must be in accordance with current health and safety regulations and any codes of safe practice governing the work being done as outlined in Section 4.6 Control of Contractors.
- Ensure quarterly fire checklist is completed and records kept in section 2 of the Emergency file
- Ensure responsibilities set out in the fire safety management policy are implemented.

3.14 HEALTH AND SAFETY MANAGER

Specific Responsibilities:

- Makes sure there are adequate and up-to-date safety policies and procedures including the Safety Statement.
- Keep informed of changes in the relevant statutory provisions and assess the implications of such changes for St. Michael's House policies, arrangements and procedures. Also maintain her competency base, through the attendance of training courses, seminars, committees, specialist groups, etc.
- Communicate with managers to ensure safety is our core value and support implementation of the Strategic Plan.
- Monitor the safety performance of the organisation through the H&S audit programme and report regularly to management on procedures required to improve performance.
- Ensures that employee communication, consultation and Safety Committee structures work effectively.
- Support and facilitate managers at all levels in identification of safety risks. Provide advice and support to managers to prioritise minimum control measures to manage risk for ensuring compliance with relevant health and safety legislation and policies within the their areas of responsibility.
- Report to Director of Operations and H&S Directors on H&S performance and compliance on a regular basis.
- Liaise with government and other bodies i.e. HSA, FSA etc on matters pertinent to health and safety as necessary.

3.15 SPECIALIST SUPPORT OFFICERS

Other support roles in the organisation that contribute to the Safety Systems including Health and Safety officer, Training Officers, Fire Safety Officer, HIQA Officer, Clinical Nurse Specialist in Infection Prevention and Control (CNSp IPC) and Nurse Manager on Call (NMOC)who as part of their role supporting line managers on the implementation of the safety management system.

Specific Responsibilities:

- Support line managers and local teams by positive getting involved in matters relating to safety.
- Support development of safety improvement plans where applicable
- Involved in Safety working groups where applicable.
- Contribute to Health and Safety Plan for projects where required.
- Follow-up on issues raised by internal or external audit where applicable.
- Support the rollout of safety training initiatives.
- Report any defects within their remit to their line manager

3.16 SAFETY REPRESENTATIVES

Under the Safety Health and Welfare at Work Act 2005 the Safety Representative's primary role is to make representations to the Employer on safety, health & welfare matters relating to employees in the workplace.

Specific Responsibilities:

- Consulting with Health and Safety Authority Inspectors about any aspect of safety, health and welfare at work
- Making oral or written representations to the Health and Safety Authority
- Notification from the employer that a Health and Safety Inspector is on the premises
- Accompanying an inspector on a tour of the premises. The Safety Representative may accompany the inspector on an investigation of an accident or dangerous occurrence at the discretion of the inspector
- Making representations to the employer on employee health and safety issues
- Investigation of accidents and dangerous occurrences in the place of work, provided he/she does not interfere with the performance of other statutory duties e.g. those of an inspector.
- Carry out inspections in the place of work to identify hazards and risks to safety and health after notice to the employer.
- Access to time off 'as may be reasonable' without loss of remuneration to acquire the knowledge necessary to carry out his/her functions e.g attend training courses and to discharge his/her functions is allocated to the Safety Representative to enable them to carry out their duties.

3.17 BOARD OF DIRECTORS

Under Section 80 of Safety, Health and Welfare at Work Act 2005 the Organisation's non-executive Board are responsible for Health and Safety Management.

Specific Responsibilities:

- Ensure sufficient resources to implement Safety Management Systems.
- Receive regular reports on progress, performance and implementation of Safety Management Systems.
- Ensuring Senior Management and the workforce are actively involved in the management of Health & Safety.
- Develop a communications plan to show the Board's commitment to its Health & Safety Policy.
- Making sure that the necessary organisational structures exist to ensure that Health & Safety is properly managed
- Undertaking such training in safety and health as is necessary to ensure that they have full understanding of the legal obligations of the role.

The responsibilities of the Board are fulfilled through the appointment of two 'Health and Safety Directors' who monitor the Executive's performance in relation to Health and Safety as follows:

- Ensuring that the Board is kept aware of all matters in relation to health and safety, especially major accidents and changes in legislation.
- Meeting twice a year with the Director of Operations and the Health and Safety Manager to review the Health and Safety Programme.
- Following these meetings, the presentation of a detailed report on Health and Safety performance to the Board of Directors twice yearly.

Site Specific Safety Management System

Section 4

The Organisation provides day, residential and respite services for people with intellectual disability throughout out the greater Dublin area. All Centres maintain workplace safety folders that describes all relevant information regarding, workplace hazards, risks particular to each site and details the safety arrangements in each site.

All folders contain site and corporate safety statement and supplementary relevant local documentation such as organisational roles and responsibilities, safe systems of work, policies, safety plans and so on. Each PIC must make sure that the site specific safety statement is up to date. They must also make sure that the safety statement and any local documentation associated with the safety management system reflect current practices, if they do not the PIC must notify the Health and Safety document owner of any necessary changes.

- Special National Schools have local Safety Statements in accordance with Health and Safety Authority Guidance ' Guidelines on Managing Safety and Health in post primary schools, part 1&2' and comply with the Organisation's Corporate Safety Statement where applicable.'.
- Site-specific Risk Assessments outlining the workplace hazards and associated risks in that Centre, department or service, all those who are at risk and the necessary preventative control measures to manage the risks present. Record of all employees confirming they have read and understood local Risk Assessments. Individual Manual Handling Risk Assessments for service users where applicable, held on the Service Users File
- Record of all employees confirming when they read and that they understood the Safety Statement.
- Safe Systems of Work documentation for the centre including Manual Handling Guidelines, Positive Behaviour Guidelines Support Plans etc
- Completed Health and Safety Inspection and action plans.
- Completed Service Manager Quality & Safety 6 monthly checks reports and action plans
- H&S Department audit reports and submitted action plans
- Up-to-date Training Records including names of staff, training courses attended, dates courses were attended, refresher etc
- Master list of all chemicals, including household chemicals and cleaning agents, and relevant safety data sheets identifying any Personal Protective Equipment required etc.
- Register of all assistive and domestic equipment, including records of regular maintenance and servicing, instruction on safe use of equipment records. In addition relevant instruction manuals are held, readily accessible to staff
- Emergency File which includes site specific to that building, also arrangements in place to deal with emergencies including fire, injury etc including training first aiders
- Any other relevant information specific to that Centre necessary for the protection of workplace

Organisation Safety Management System

Section 5

St Michaels House recognises that a successful safety culture can only be achieved when management and employee are involved in health and safety in the workplace. There are 3 Service Area Safety Committees made up of staff and management representatives who meet on a quarterly basis to discuss safety improvement. These committees report into the Strategic Safety Committee which is made up of high level managers who oversee implementation of safety management system. The Health and Safety Committee frameworks aim

- taking account of employee and safety representative communications on matters of safety.
- having a place on the Service Area Services Safety Committee.
- promoting and open environment where information is shared to improve the safety, health and welfare of all.
- providing appropriate training and facilities to safety representatives to enable them to perform their duties.
- promoting safety committees to help with consultation and communication.
- who oversee implementation of safety management system.

Its purpose is:

- To monitor the implementation of the Safety Statement as part of St. Michael's House Safety Management Systems.
- A forum for consultation on health and safety between Management and Staff so that accidents and ill health are prevented as specified in Section 25 & 26 of the Act.
- To ensure effective communication regarding Safety, Health and Welfare issues throughout the Organisation.
- Assist in the development, review and revision of Health and Safety Policies and Procedures.
- Review accident and incident statistics and make recommendations to ensure controls are in place.
- Identify Safety training needs taking account of mandatory training guidelines.
- Make recommendations to St. Michael's House Management Teams on issues relating to Safety, Health and Welfare.

The Strategic Safety Committee advises and contributes to the work of the Executive Quality and Safety Committee. It includes representatives of management and Service Area Safety Committees.

Safety Committees both Strategic and Local/Service Area are supported strongly by management and are encouraged to bring forward any safety, health and welfare matters for discussion.

Full terms of reference and membership details are located on the H&S Downloads on the intranet

The Organisation recognises that is that no employee or service user should be subjected to any preventable injury. Therefore, it is important that all accidents and incidents are reported promptly. The purpose of this procedure is to

- Ensure appropriate medical attention is given where required,
- Regulatory reporting requirements are met, and
- Identification of hazards so that the appropriate measures can be taken to prevent the accident from reoccurring.

All incidents, no matter how trivial must be reported immediately to the manager/PIC/co-ordinator on duty as soon as possible
Information regarding any accident/incident is recorded on the appropriate e-form, which staff can access on the intranet. complete an incident report form as soon as is practicable after the event occurs and within one working day **Instruction note on how to complete Accident/Incident Reports** is available on the Health and Safety Downloads

These are the main categories of events that are to be captured on the accident/incident e-form.

Accidents - An Accident is an unplanned event that causes personal injury or damage.

Near Miss - A Near Miss is an unplanned event that could have but didn't either by chance or timely intervention

Challenging Behaviour - is an incident involving challenging behaviour, with or without injury

The HOU or deputy shall ensure Accident Protocol is followed and all pertinent information (including the conditions of the accident scene, relevant weather conditions, housekeeping in the area, equipment involved etc) regarding circumstances of the incident is gathered as part of local investigation. Any additional intimate observations are included on the manager/PIC/HOD section of eform accident where applicable. In addition, any relevant equipment shall be retained safely and stored for further investigation where applicable

The decision whether to have a more in depth investigation will be taken by the Health and Safety Manager/Officer in consultation with the Administration Manager. Where an accident investigation is necessary, all employees are obliged to co-operate fully with such an investigation and to provide any information, which may be useful in establishing the circumstances leading up to the accident/incident. The PIC/manager/co-ordinator/HOD/Service Manager (where applicable) shall implement any corrective actions required arising from the accident investigation.

Where an injury results in employee absent form work he/she should furnish a 'fitness to work' certificate from his/her doctor. In some circumstances St. Michael's House reserve the right to request employees to attend nominated Occupational Medical Physician for review in the interest of assisting the employee to get back to work.

Where there is an investigation by a Statutory Authority (i.e. Health and Safety Authority), the scene of an accident or fatality shall not be disturbed and staff will co-operate with the relevant personnel.
It is a statutory requirement (S1 No.351 2016) that formal notice is given to the Health & Safety Authority regarding See section 5.3 'Notifiable Accidents and Incidents' for details of how to proceed.

Critical Incidents are managed according to St. Michael's House Incident Management Policy and Section

The Safety Health and Welfare at Work (General Application) Regulations, 2016 part 10 ' Notification of Accidents and dangerous occurrences' requires that certain accidents/incidents are report to the Health and Safety Authority.

1 A workplace incident causes the death of an employee
2 Employees are injured at a place of work and cannot perform their normal work for more than 3 consecutive days, not including the day of the accident
3 Employees are injured while driving or riding in a vehicle in the course of work, and cannot perform their normal work for more than 3 consecutive days, not including the day of the accident
4 Any person in a place of work, or as a result of a work activity, requires treatment from a medical practitioner.

Under the Safety, Health and Welfare at Work (Biological Agents) Regulations 2013, the HSA must be notified immediately of any work related sharps injury that could cause severe human infection/human illness. The IR3 Form of Notification of a Dangerous Occurrence must be used.

5.3.1 PIC/manager/co-ordinator must notify their respective Service Manager as soon as they are aware that the accident that occurred is reportable.

5.3.2 Service Manager should notify the relevant Administration Manager and Health and Safety Department that the incident is notifiable to the H.S.A.

5.3.3 Administration Manager ensures that the incident is notified to the H.S.A on their website login as soon as possible and sends a copy of the H.S.A confirmation notification and unique reference number to the Health and Safety Department and inform the insurance liaison person (Accounts Department) in these instances.

5.3.4 Health and Safety Manager maintains a file of reportable accidents/incidents available for inspection for a ten-year period, and includes the statistics in the Trans-regional Reports for Senior Management.

5.3.5 In the case where

- The injured party (with > 3 days absence) is undergoing training for employment/work experience/volunteering then the responsibility is with the Head of Department/Head of PIC to ensure the reportable accident is notified as per 4.4.1
- The injured party (with > 3 days absence) is employed by third party i.e., Third Party Contractor etc notification to the H.S.A. is the responsibility of their Employer.

5.3.6 Within any departments that fall outside of the Service Areas or Shared Services, the relevant Heads of Department/Services will notify the Health and Safety Manager for H.S.A reporting purposes who will liaise with the relevant Administration Manager.

5.3.7 **Late notification of notifiable accidents may result in an unannounced visit from a H.S.A. inspector and/or prosecution.**

St. Michael's House recognises its responsibilities to ensure, as far as is reasonably possible of all who come in contact with our activities and services including visitors, volunteers and third parity service while on the site.

Volunteers are unpaid members of the community who contribute their time, energy and skills to complement the work of paid staff. They may work across the Organisational a variety of services but should not fill temporary or vacant Positions. Corporate Volunteers are unpaid employees from other Organisation who as part of philanthropic ideals come out to our units on pre-agreed projects work with set duties and timelines for the project.

Third Party Providers are individuals who provide additional services to the Centre from individual therapies to cleaning duties on site for agreed terms and conditions.

To that end the following policies will apply:

- Volunteers/Third Party Service Providers should always report on and off duty on each occasion to the PIC/manager/co-ordinator or deputy.
- Manager/Deputy will brief the Volunteer//Third Party Contractor duties and operational requirements including on all local Safety arrangements including
  - Emergency procedures
  - Relevant sections of the Safety Statement
  - Relevant site specific Risk Assessments
  - Safe systems of work where applicable including guidelines
- All Visitors, Volunteers and Third Party Service Providers are to obey the safety rules and emergency procedures at all times.
- Volunteers are required to wear suitable clothing and footwear for the work situation and be neat and tidy at all times.
- Site Specific Risk Assessments are in place in all centres which take account of volunteers, visitors and Third Party Service Providers ensuring that appropriate safeguards and controls are in place to ensure the health and safety of the all individuals. PIC/manager/co-ordinator can seek guidance from the H&S Department where there is specific risk to the individual not covered within the collective controls in place.
- Every workplace has its own hazard and volunteers/Third Party Service Providers are expected to act responsibly at all time and take care not to expose themselves, or others to risk. Volunteers should not operate machinery unless they have been trained in its use and should not attempt to lift heavy or awkward objects without formal manual handling training. If in doubt, ask.
- While in the building, visitors are to obey the safety rules and emergency procedures at all times. Their host, who in the event of a fire alarm will be responsible to bring their visitor to the appropriate assembly point, should accompany all visitors.
- In the event of an accident, Volunteers/Visitors/Third Party Service Providers are expected to inform the PIC/HOD/manager/co-ordinator immediately and complete an accident form if they sustain an injury at work.

Other Relevant Policies:

a) Organisational Volunteer Policy and Procedures

b) Corporate Volunteer Policy and Procedures

c) Control of Contractors and Third Party Service Providers

The Organisation's aim is to ensure that all third parties and their employees are competent, have appropriate safe systems of work and adhere to St. Michael's House requirements to safe guard the safety of Service Users and Staff when carrying out work on St. Michael's House premises.

St. Michael's House under the remit of the Buildings and Property Manager has systems in place for the selection of competent approved contractors, which is reviewed on a regular basis. The framework process involves a detailed analysis and assessment of proposed contractors suitability under the approved criteria. Each response is noted and marked with a view to establishing a panel of competent Contractors available to tender for small building works at short notice and from this a selection of an approved panel of contractors based on agreed criteria, key safety documentation, and references and involvement of Architects and other key stakeholders as needed.

Selected Contractors are appointed based on approval criteria, characteristics of the site and complexity of the job. Supervision and overseeing of projects is managed by Technical Services Supervisors in liaison with local management. Strict criteria are followed in the commissioning and handover phases. Panel contractors performance is reviewed by Technical Services on a regular basis. Prior to the commencement of any work on the premises the following criteria should be observed:

- An assessment of the likely safety hazards and risks involved in or associated with the proposed work. Provide method statement and risk assessment to demonstrate how works will be carried out safety
- The degree of risk assessment that must be carried out before work begins will depend on the nature and extent of activities associated with each individual contract.
- No work, not matter how minor, should commence without some form of prior consultation, hazard identification and risk assessment.
- For major contracts, the provisions of the Safety, Health and Welfare at Work (Construction) 2013 Regs must be adhered to.
- In the event that contractors are working on sites when Service Users are present at the time of works, PIC/manager/co-ordinator shall ensure that contractors and their employees are briefed on the local site specific health and safety precautions that might affect their work on site including challenging behaviour (where applicable).

Third Party Service Providers are an essential element to the provision of quality care to our Service Users and are the responsibility of the HOU/HOD to ensure that

- Third Party Service Providers must have adequate safety procedures in place and comply with them at the time of entering into the contract.
- Have adequate Employer and Public Liability Insurance. When submitting Insurance details Third Party Service Providers are required to notify St. Michael's House of any specific exemptions or limits to the policy(s).
- Insurance policies must contain indemnity to St Michael's House
- Must ensure that the equipment they bring on site is in good condition and tested if required by statute (e.g. Lifting equipment). No equipment is provided by St. Michael's House to the third party for completion of the work

When on-site all Contractors and Third Party Service Providers must

- Liaise with a Technical Services Supervisor and HOU to discuss and agree the safety precautions deemed necessary by either party.
- Report into the PIC/manager/co-ordinator or deputy on arrival for working on St. Michael's House premises and when leaving to ensure that the works have been left in a safe and secure manner.
- Must take all due care of their own safety; the safety of their employees and all others affected by their work.
- Co-operate with PIC/manager/co-ordinator or deputy on local health and safety arrangements including, emergency plans and procedures, safe systems of work, etc
- Report any accidents, near misses or dangerous occurrences on St. Michael's House premises without delay and cooperate with any investigation into the circumstances of the event. All accidents involving third party employees should follow St. Michael's House accident/incident reporting procedure see section 5.2

The Organisation recognises the importance of active monitoring as a mechanism for ensuring the implementation and compliance with the safety management systems in all our centres/services. St. Michael's House has a three-tiered Safety Monitoring system detailed below

5.6.1 All Unit Heads/ Head Departments must carry out health regular safety inspections of their unit/centre to ensure the local safety systems and housekeeping standards are satisfactory. The Health and Safety Checklist (see template on the h&s download,) lays out clear criteria for the inspection. Any issues identified are logged on the checklist action plan or QIP for follow-up and resolution (where practicable) at local level. Where an issue requires external expertise or resources outside of the unit/department, the Unit Head alerts his/her Service Manager for support in resolution of the issue. Feedback on the inspections is discussed at Team meetings. Records of completed monthly inspections are held at unit level for review and sign off by the Service Manager on a quarterly basis and are available for inspection by the Health and Safety Manager.

5.6.2 At Service Area each Cluster Manager carry regular Health and Safety Review in each of the centre/services under their remit as part of Six monthly Quality and Safety Review).Any issued /corrective actions identified, are recorded on the review form action plan/QIP. Where an issue requires additional expertise or resources outside the remit of the Service Manage, the requirements should be brought to the attention of the Administration Manager for support in resolution of the issue. Records of the completed quarterly review are held at unit level and are available for inspection by the Health and Safety Manager.

5.6.3 Formal Health and Safety Audits are carried out to monitor compliance to the overall Safety Management Systems. The audit evaluation template includes critical areas of unit Safety requirements from environmental arrangements to the safety management systems to confirm areas of compliance and identify areas for improvement the units/departments

A detailed report with scoring levels and recommendations is issued for PIC/Head of Department to address the issues identified. On receipt of an audit report, PIC/HOD will develop and implement a Quality Improvement Plan

Audit reports are reviewed at Services Safety Committee and findings included in the Services Safety Report

In accordance with the Safety, Health and Welfare at Work (General Applications) Regulations 2007 specify the legal obligations for employers to accommodate and provide protection to employees to accommodate and provide protection to employees identifies sensitive worker groups which the employer to provide specific protections

Pregnant Employees

The Safety, Health & Welfare at Work (General Application) Regulations 2007, Chapter 2 of Part 6:Protection of Pregnant, Post Natal and Breastfeeding Employees (commonly referred to as The Pregnancy Regulations). St Michaels House is committed to such protection for its employees.

5.7.1 The Pregnant Employees are obliged to inform the Head of Unit/Head of Department as soon as is possible and furnish a medical certificate confirming her condition. St Michaels house management will treat this information in a confidential manner.

5.7.2 As part of our Safety Management Systems all unit specific workplace risk assessments take account of risks to pregnant employees and other vulnerable groups as a general rule

5.7.3 Once a manager becomes aware that an employee is pregnant, they must assess the specific risks from the employment to that employee and take action to ensure that she is not exposed to anything, which would damage either her health or that of her developing child. See sample Risk Assessment Form and guidance on the H&S downloads. The PIC/manager/co-ordinator must consider all the risks to the Pregnant Employee in that particular environment. The PIC/manager/co-ordinator must detail what specific arrangements/control measures will be put in place to support the Pregnant Employee and minimise the Risk to her and her unborn child.

5.7.4 The PIC/manager/co-ordinator must inform the Pregnant Employee of the risk and control measures in place to protect her while at work. Once the Pregnancy Risk Assessment is completed, it shall be signed off by Head of Unit and the Pregnant Employee. The Risk Assessment shall be reviewed at regular intervals or where new risks are identified.

5.7.5 Where the risk identified cannot be eliminated/adjust the work. the employee must do the following:

- Change or adapt the work practices to eliminate the risk, including changes to shift patterns or work location.
- Be provided with suitable alternative employment if not possible then,
- The employee must be granted Health and Safety Leave in accordance with Section 18 of the Maternity Protection Act, 1994 revised 2004

The PIC/manager/co-ordinator, Service Manager must discuss solutions with HR Department.

Other Groups include

Nightworkers

Safety, Health and Welfare at Work Act (General Application) Regulations 2007 Part 6 chapter 2 defines a nightworker as An employee who normally works at least three hours of their working day during night

time (i.e. between midnight and 7am the following day and Who's 'night time' working hours each year is equal to or exceeds 50% of the total number of hours worked by him or her during that year

There is nothing specific in general legislation that prohibits a person from working alone at night. Therefore, in general, an employer must assess whether an employee is at significantly higher risk when working at night, and determine what measures should be put in place to eliminate or minimise such risks. Contact the H&S Department for advice and support

Young Persons

Safety, Health and Welfare at Work (General Application) Regulations 2007, Chapter 1 of Part 6: Protection of Children and Young Persons which defines a young person as a person who has reached 16 years of age but is less than 18 years of age.
it is the duty of every employer to carry out at risk assessment prior to a Young Person commencing employment and when there is a major change in the place of work or the work to be carried out which could affect the safety or health of the young person.
The employer must assess any risk and any specific risks to the safety, health & development defined in the regulations Contact the H&S Department for advice and support

The Organisation shall ensure that all employees are provided with personal protective equipment (PPE) where deemed necessary.

PPE stands for personal protective equipment. PPE means 'any device or appliance designed to be worn or held by an individual for protection against one or more health and safety hazards'.

Personal Protective Equipment is provided taking account of the specific hazards in our workplace to ensure it is appropriate and suitable for use. PPE shall be selected and procured in accordance with the Safety Health and Welfare at Work (General Applications) Regulations 2007.

Employees must wear/use PPE properly whenever it is needed.

Employees are provided with information, instruction and training (including training in the use, care or maintenance of PPE). This is proportionate with the type of PPE required to enable them to make proper and effective use of any PPE provided for their protection.

Responsibility for ensuring that the equipment is used properly rests with PIC/HODs who will ensure that all employees/Trainees within their area of responsibility are properly instructed in the maintenance and use of protective clothing and safety equipment.

Personal Protective Equipment includes;

Hand protection

Gloves used shall be appropriate to the activity being carried out.

- Sterile and Non-sterile gloves for medical and personal care.
- Waterproof gloves for cleaning and washing i.e. marigold or equivalent.
- Impervious gloves for chemical handling activities at the swimming pool.

Safety Footwear

Safety footwear is required in limited circumstances. It is required to be worn where there is a risk of injury to feet from heavy objects falling, feet becoming entrapped under equipment etc. In addition it can be required due to the nature of the work being carried out i.e. Industrial kitchen duties or construction /maintenance activities.

Eye and Face Protection

Face masks may be required to be worn when spraying pesticides
Face masks may be required as per medical condition
Eye and face protection is worn when handling Swimming pool chemicals

Aprons

Staff are provided with plastic aprons to be worn when

- Providing personal care.
- Handling clinical waste, blood and body fluids.
- Impermeable aprons to be work when refilling forklift batteries or chemical handling activities at the swimming pool.
- Kitchen Aprons to be worn when carrying out food handling. duties - never use plastic aprons when cooking.

Hi-Visibility Clothing

Reflective clothing is shall be worn by staff involved in transport duties.

All Sites and centres are owned/leased by St Michael's House are constructed, fitted and maintained taking account of legislative guidance and codes of practice to ensure safety and security of Staff and Service Users. The systems in place include:

5.9.1 All building requirements are managed by the Technical Services Department. Team compromises of competent technical grade staff who carryout both reactive and preventative maintenance and repairs on site.

5.9.2 All staff are aware that they should report promptly any faults or deflects to the PIC/Responsible person as soon as is practicable and take steps to limit the risk, i.e. isolate and label the defective equipment/area.

5.9.3 QFM system in place which logs all reported problems/defects and repairs that occur from time to time which is tracked and managed by Technical Services Department. Issues are prioritised and tasks are issued to the relevant competent maintenance staff to address as soon as is practicable.

5.9.4 Technical Services Department provide out-of hours- emergency service to our centres 24/7 365days per year. List of services and contacts are available on the intranet.

5.9.5 Environmental safety detection systems are provided in centres/homes to monitor and detect gases/substances which could dangerous to health and wellbeing including carbon monoxide detectors, fire alarm systems, slam-shut valves for gas leaks, etc

5.9.6 PIC/Responsible Person to notify Technical Services ASAP. In the interim the PIC should put in place arrangements to ensure the risk is minimised until repair work is carried out. PIC must ensure that these interim arrangements are communicated to all the team including relief staff.

5.9.7 Local contingency plans at each site detail specific actions to be taken the event of such unplanned events such as flood, fire, power cut etc which have been developed in conjunction with Technical Service Department

5.9.8 Preventative Maintenance Programme is managed with approved Service Providers is in place in relation to

- 5.9.8.1 Maintenance department equipment and tools
- 5.9.8.2 Heating systems are serviced annually
- 5.9.8.3 Active fire safety measure
- 5.9.8.4 Swimming pool complexes at Baldoyle and Belcamp
- 5.9.8.5 Assistive Equipment for Service Users

5.9.9 In the event of faults or defects in relation to Assistive Equipment, the HOU should contact the Supplier/Servicing Company and notify Occupational Therapy Department or Physiotherapy Department where applicable.

5.9.10 Where the Irish Medicines Board issue a notification (medical device alerts), these are circulated to Clinic Managers to notify the relevant clinician to follow up locally with the units.

St Michael's House is committed to ensuring that the health and safety of all employees are of the highest standard. Stress is an increasingly common feature of day to day life and work and we want to help our employees manage stress and promote a healthy working environment.

The purpose of the policy is to help managers and employees recognise the signs of stress, provide guidance on how to avoid stress and, if necessary, deal with stress in the work environment.

LEGAL FRAMEWORK

The Safety Health and Welfare at Work Act (2005) requires employers to put in place systems of work, which protect employees from hazards, which would lead to mental or physical ill-health.
There are also obligations on employers and employees in common law in terms of duty of care to protect others from avoidable harm as well as legal obligations under industrial relations legislation.

WHAT IS STRESS?

Stress is a complex phenomenon, which incorporates aspects of the individual, the situation and a person's response to the situation. Stress occurs when there is a mismatch between the person's perception of the demands existing or arising, and their ability to cope with such demands.
We all experience stress but it is when it begins to have a negative impact that it becomes a problem. Unless we learn to manage our stress, it can have severe implications on our health.

Not every stressor has a negative outcome. e.g. eustress (or good) stress, has been examined from the perspective of what makes a person healthy as against what makes a person sick. Examples of positive effects from stressors is fitness training, succeeding in challenging circumstances and success in exams.

WHAT CAUSES STRESS

Stress can be caused by factors related to home and/or work. It is both the responsibility of Managers and each employee to ensure that reasonable care is taken to ensure that their health and safety is not jeopardised whilst at work. It must be emphasised however that every job has its own individual pressures and responsibilities and these demands are part of working life, it is only when they become excessive that they are a hazard to health. The following is a brief list of common examples of factors that may cause stress:

AT WORK:

- Working environment e.g. poor lighting, noise, ventilation.
- Balancing home life with work.
- Increase in working hours.
- Lack of training and lack of trained staff.
- Lack of communication.
- Workload.
- Too much responsibility
- Job insecurity.
- Uncertainty of individual job role.
- Poor relationship with colleagues and / or managers including bullying and harassment.

AT HOME:

- Difficulties with personal / domestic relationships.
- Financial concerns.
- Illness within the family.
- Increased family responsibilities
- Death within the family or social circle.

WHAT ARE THE WARNING SIGNS?

An individual may find it difficult to recognise that they are suffering from stress and therefore it is necessary to be aware of the warning signs in order to help you and others.

The following is a brief list of some of the symptoms of stress that individuals suffering from stress may exhibit. It is important to note however that if you experience any of these for a short period it does not necessarily mean that you are suffering from stress, it is only if these symptoms linger that you should have cause for concerns:

EMOTIONAL

- Irritability / impatience.
- Low self esteem.
- Withdrawn or unsociable.
- Anxiety / panic attacks e.g. bursting into tears.

PHYSICAL

- Tension headaches.
- Sleep problems.

BEHAVIOURAL

- Increased sickness absence.
- Increase in poor time keeping.
- Poor quality in work / Drop in usual standard of work.
- Uncharacteristic reaction to normal event.
- Increased alcohol intake.
- Increased smoking.
- Lack of concentration.
- Eating disorders.
- Aggressive behaviour.

HOW TO REDUCE AND CONTROL STRESS

- Prioritise your workload; make a list of things you must do and place in order of priority.
- Deal with one problem at a time; use time effectively by trying not to do everything at once.
- Do not worry about things outside your control.
- Learn to talk to others and ease the burden on yourself - colleagues, management, family, professional assistance.
- Learn to relax; balance work and leisure time.

- Take regular exercise, eat healthily and get enough sleep.
- Remember everyone needs a break. Try to ensure that you do not work excessive hours and take regular breaks
- Listening to music on the way home in the car.
- Reading a book can also help you to unwind.

MANAGEMENT APPROACH:

- The Organisation will ensure good job design, effective communication and problem-solving processes and support for personal development.
- Employees will be given information on their role, function and the specific requirements of the job.
- Employees will be given opportunities, where they arise to further their career within the organisation.
- Wherever possible and practical employees are encouraged, to use their experience and reasonable discretion in prioritising and organising the carrying out and completion of tasks assigned to them, having regard at all times for the exigencies of the job.
- The company is committed to encouraging and supporting an excellent working relationship among all employees,
- A written risk assessment has been carried out in the work environment to ensure that all physical and environmental risks are controlled or reduced, as far as is reasonably practicable. This involves the provision of good ventilation, adequate space and lighting and the provision of welfare facilities. Risk assessments will be carried out in accordance with the Safety, Health and Welfare at Work (General Application) Regulations 2007.
- All employees are entitled to receive feedback on their performance. Any failure to meet the required performance by an employee will be dealt with in a fair and reasonable manner under the company normal disciplinary policy.
- Work demands as they apply to particular posts are consistent with each employees job description.
- Every effort will be made to accommodate where possible and practical scheduling of work in an effort to avoid conflicting demands.
- St Michaels House has a bullying and harassment policy in place, Dignity at Work policy.
- St Michaels House will ensure that each and every employee has access to, information, advice and guidance either from colleagues or supervisors, in the event of operative difficulties arising.

In a situation where an employee experiences symptom of work related stress the company / management will:

- Seek to establish the source or sources of the work-related stress.
- Reviews the job content or workload and consider the possibility of an adjustment to the work situation.
- Any adjustment may involve a temporary or permanent change in the manner in which the work is carried out. All such arrangements would need to be considered in the context of the organisation's operational requirements taking account of established precedents.
- Where physical-working conditions, appears to be the case the manager will follow initial reviews, and arrange an ergonomic assessment
- Where the cause of the stress is relationships with other managers or co-workers then management will establish whether or not the employee wishes to make a complaint in this regard.

- The company may provide in certain circumstances, dependent on the particular situation, Medical Practitioner/Employee Assistance Programme on a self-referral basis if they so wished.
- St Michaels House encourages staff to avail of the Employee Assistance Programme which is a free confidential service available to staff and their families

At all time the company will treat in confidence and with sensitivity all cases where employees experience symptoms associated with potentially injurious stress arising from their work activities.

HOW TO DEAL WITH STRESS IN THE WORKPLACE

- Do not wait until the problems becomes worse or more serious; talk to someone as soon as you have a problem or anxiety. Do not suffer in silence.
- Speak to a friend or relative - discussing problems with someone you can trust often helps to resolve them or put them in perspective.
- Speak to your supervisor or manager. They may be able to help by making some adjustments to your work environment if appropriate, or even just provide moral support at work.
- If you feel unable to talk to your supervisor / line manager, contact may be made with your HR.
- Speak to your union representative if you are a member of the union.
- Consult your GP.
- Contact the Employee Assistance Programme (EAP) - This is a confidential 24-hours free phone counselling and life management service. All calls are answered by professional and experienced counsellors and can remain anonymous if you wish. Individual follow-up counselling sessions will be arranged if appropriate. The Employee Assistance Service can be used by you or any of your immediate family.
- The EAP can be contacted on: 1800 995 955

If stress is affecting your attendance or performance at work, St Michaels House will refer you to the Occupational Health Provider CHI This will also provide information on what support you may need..

WHAT DO YOU DO IF YOU SUSPECT A COLLEAGUE IS SUFFERING FROM STRESS

- Speak to them if you feel that it is appropriate and make them aware of the help that is available.
- Speak to their supervisor / manager as they may wish to speak with the person directly.
- Encourage them to avail of the Employee Assistance Programme
- If you are a manager and require further assistance contact HR.

RETURNING TO WORK AFTER A STRESS RELATED ILLNESS

In some cases stress can result in a period of absence from work. St Michael's House recognises that employees may require additional support when returning to work following a period of stress related absence and will endeavour to make the return to work manageable.
Depending on individual circumstances, Corporate Health Ireland advice and discussions with the employee, a number of options may be considered.

5.11.1 St Michael's House is committed to providing a work environment free of any kind of bullying or harassment. Management at the highest level will not tolerate bullying or harassment, and will take appropriate steps to resolve any existing problems.

5.11.2 In accordance with legislative requirements and obligations St. Michael's House have put in place a 'Dignity at Work' Disciplinary Policy. See section 3 of the HR Policies and Procedures Manual. It is the responsibility of all employees, particularly those in management positions to ensure the day-to-day practical application of the policy

5.11.3 In addition, all employees are informed that any instance of bullying or harassment should be reported to their Manager.

St Michaels House recognises that manual handling activities can be an important element of service delivery and the management of this is essential to maintaining a healthy and safe work environment for Staff and Service Users alike. St Michael's House through its Risk Assessment Programme, Assistive Equipment Management System, Environmental factors and staff training programme seeks to avoid or reduce risk from Manual Handling activities wherever possible within Services.

Purpose: to promote a safe manual handling and people handling culture to reflect current best practice and legislation. The purposes of this policy are to provide guidance to staff and managers:

1. To reduce, so far as is reasonably practicable, the risks to staff and service users
2. Provide the highest quality of care to the Service Users.
3. To ensure compliance with relevant statutory requirements and standards and guidelines such as those published by the Health and Safety Authority (HSA)

Scope: This policy applies to all services, activities and departments within St Michael's House.

This policy applies to all employees, at all levels within the Organisation to avoid/reduce Manual Handling Activities and to follow safe work practices at all times. It also applies to agency workers, contractors or any other persons who carry out manual handling and people handling activities as part of their work on behalf of St Michael's House.

There are two main categories of Manual Handling activities in St Michaels House, these are Person moving and handling activities and handling of inanimate loads. For all significant Manual Handling tasks, Manual Handling risk assessments should be completed. These include existing and required control measures, and individuals responsible for overseeing the implementation of agreed control measures named on the Person Manual Handling Risk Assessment form.

Person moving and handling Activities

- Each person who needs assistance with moving and handling will be individually assessed as part of the Assessment of Need system taking into account their individual needs, capabilities and circumstances including their understanding of the movement and their ability to communicate. A balanced approach will be followed which considers the wishes of the person as well as the need to protect staff from injury.
- Assessment of need will consider the following non-exhaustive list of risk factors when moving or handling a person. These include:
  - How much help the Person needs,
  - The weight and height of the Person,
  - Any health condition, which the person may have that might affect moving and handling.
  - The Person's ability to understand instruction and to communicate
  - Medication or behaviour that could affect moving and handling tasks History of falls etc
- A problem solving approach will be adopted involving relevant Multi-disciplinary staff including Physiotherapist / Occupational Therapist and Manual Handling Trainer where necessary, which considers the use of a variety of handling methods and equipment to reduce the risk of injury. The independence of the Service User will be encouraged at all times.

- Following completion of assessment, a Person Handling Risk Assessment will be produced for each service user where manual handling risk have been identified.
- Risk Assessment details appropriate protective measures to be used including specific guidelines to be followed when supporting the Service Users. Minimal moving and handling approach will be applied in all situations, with strategies agreed on the basis of a full risk assessment, Manual Handling aids should be used to ease the task and reduce the effort whenever possible.
- Full body lifting shall be avoided, except in exceptional or emergency situations where Service Users or staff are at risk of serious injury if immediate action is not taken
- Person Handling Risk Assessments are reviewed at appropriate intervals in line with the care plan or when circumstances change. All staff involved in Person Handling Activities will take account and follow the recommendations detailed in the individual's Person Manual Handling Risk Assessment and any accompanying guidelines.

Handling of inanimate loads

when assessing ensure

- A minimal lifting approach will be applied to local handling situations based on a site specific risk assessment, which takes account of factors such as size, shape, weight and design of the load and puts in place collective controls and arrangements to protect all.
- Mechanical aids should be used to ease the task and reduce the effort whenever possible.
- Safe systems of transportation will be readily available for the movement of goods, supplies and equipment.

2.0 Responsibility

2.1 The CEO is responsible for ensuring that

1. The need for hazardous manual handling and people-handling operations by employees is avoided, as far as is reasonably practicable.
2. The risk of injury from any unavoidable manual handling and people handling operations is assessed.
3. The risk of injury is reduced so far as is reasonably practicable.
4. Risk assessments are reviewed at appropriate intervals and when changes occur.
5. Training, information and supervision are provided to employees.
6. Staffing levels that are adequate for safe handling practices are maintained.
7. Suitable equipment is provided and maintained for manual handling and people handling.
8. Staff are supported in the case of occupational injury and/or ill-health.

2.2, Directors of Services, Admin Managers Service Managers shall:

1. In consultation with staff ensure that a plan is developed to support the implementation of this manual handling and people handling policy.
2. Support and promote the concept of safer handling and any initiatives that would facilitate the implementation of the policy and plans.
3. Ensure this policy is brought to the attention of all staff.
4. Ensure that appropriate resources are available to support the implementation of this policy in their area.
5. Ensure that appropriate systems are in place to assess risk and communicate the results to all relevant employees and other persons who may be exposed to the risk.

6. Identify training needs for staff, review as necessary and facilitate the release of staff to attend such training.
7. Ensure appropriate systems are in place that staff are adequately supervised and that onsite training is ongoing, so that skills taught at Manual Handling/People Moving and Handling training are translated into practice. Also ensure that Service Agreements for Agency Staff cover Manual Handling and People Handling training requirements.
8. In order to help minimise the potential for handling related injuries adopt an ergonomic approach when planning refurbishments or the construction of buildings by consulting with wide group of professionals/employees at the planning and implementation stages.

2.3 Person in charge / Department Managers have responsibility in ensuring that the policy is implemented in their respective areas , as follows'

1. Where hazardous manual handling and/or people handling activities cannot be avoided, ensure that appropriate written risk assessments are carried out in consultation with staff, taking account of the working environment, systems of work and any control measures put in place to reduce the level of risk as far as is reasonably practicable.
2. Ensure the findings of the written risk assessment are recorded, implemented and communicated to staff undertaking the tasks in question. Section 10.10 in the SMH Safety Statement gives good practice guidance on management of manual handling good practise
3. Develop safe systems of work and set good standards in their area as required and take account of staff falling into any of the "sensitive risk" groups to ensure they are protected against dangers which may affect them specifically in relation to the manual handling of loads.
4. Identify training needs for all staff, facilitate the release of staff to complete training and ensure all training is in date.
5. Ensure any staff working have received adequate Manual Handling Training in such circumstances where:
    i. staff are redeployed or relocated to a new work location.
    ii. on the introduction of new work equipment, systems of work or changes in existing work, equipment or systems of work.
    iii. on the introduction of new technology
6. Ensure employees are adequately supervised and use the principles of good manual handling and people handling in the performance of their work tasks.
7. Ensure working environments and systems of work are as far as is reasonably practicable safe.
8. In consultation with staff ensure sufficient suitable equipment is provided to facilitate safe handling. This equipment must be easily accessible and properly maintained. Service records should be retained.
9. Ensure that employees receive training on the correct use of manual handling and people handling equipment in line with local guidelines (e.g. hoists, profiling beds, trolleys). Training on the use of other work equipment should cover manual handling where necessary. Ensure that induction for Agency Staff covers local Manual Handling and People Handling issues.
10. Report unsafe environments and systems of work to the relevant senior manager and take immediate action that may be required to render the area safe.
11. Managers and disciplines involved in the procurement and introduction of equipment into the workplace shall take account of any handling risks that may be associated with the equipment.
12. Ensure that appropriate assistance/advice is sought where necessary

13. Ensure that defective equipment is identified and removed from service and Occupational Therapy /Physiotherapy departments notified
    I. whenever an item of equipment prescribed by them has become faulty;
    II. whenever there are concerns about it's suitability for the purpose it was intended; or
    III. whenever it has been involved in a manual handling near miss or injury situation.
14. Maintaining an Equipment file for all equipment used in the service including:
    I. Certificates of Conformity
    II. Instruction Manuals
    III. Records of repairs/servicing from approved contractor Records of statutory inspections (where applicable) are carried out on all lifting equipment as required under the SHWW(General Applications) Regulations 2007
    IV. Records of staff instruction/training on the use of assistive equipment
15. Ensuring staff are aware of the safe operating load values of their moving or handling equipment. They must not exceed the capacity of their equipment by using it to handle very heavy loads

2.4 Clinical Departments

Physiotherapy and Occupational Therapy Departments support staff teams in the managing of moving and handling issues as part of Service User care, this can include where applicable :

1. assess and make recommendations on Service Users' manual handling needs,
2. provide advice and support to the PIC in relation to Person Manual Handling risk assessments and assist with problem solving when requested.
3. assess, prescribe and make recommendations on the selection and procurement of appropriate moving and handling aids for the Persons In Charge
4. when selecting moving handling equipment, will take account, all the environments/services accessed by the individual Service User so that a consistent and holistic approach is taken to their manual handling needs.
5. Provide written manual handling guidelines where applicable to support safe systems of work for people moving and handling tasks
6. provide instruction on safe use of assistive equipment prescribed /supplied by them.
7. review suitability and appropriateness of equipment on request and make recommendations of changes to the Person In Charge.
8. provide advice and support to Person In Charge to source suitable alternative assistive equipment in an emergency
9. Where Manual Handling risks involve behaviour or medical issues, the wider clinical team should be consulted where appropriate.

2.5 Procurement Manager

- Reviewing service agreements, in conjunction with Physiotherapy and Occupational Therapy Departments are reviewed on an annual basis, to monitor the standard of delivery against contract arrangements
- Sourcing and selection in consultation with the Occupational Therapy and Physiotherapy Departments, (where appropriate)
- Include in contracts where appropriate the provision of training for staff on the safe use of manual handling equipment at agreed intervals
- Emsuring the inclusion of breakdown and out-of-hours arrangements with relevant service contract(s) in consultation with occupational therapy and physiotherapy departments.

2.6 Buildings and Property

Buildings and Property Manager is responsible for:

- Ensuring the provision of safe and suitable storage facilities for the storage of assistive equipment for future usage.
- Ensuring suitable transportation is provide for transfer of assistive equipment safely from location to location as requested by the Person in Charge/ OT/Physio

2.7 Manual Handling Trainers

In addition to delivering Initial and Refresher Manual Handling training, the Manual Handling trainers provide support to PICs/Department Heads in the following way:

- Acting as a point of reference for moving and handling expertise and assist with problem solving when requested.
- Alerting PIC to any gaps/areas for improvement on manual handling practices in the centres that they attend to provide training
- Providing guidance to the PIC to enable them to develop a Person moving and handling risk assessment as required.

2.8 Health and Safety Department

- Investigate accidents, incidents and near misses relating to handling practice and recommend control measures to management where appropriate.
- Monitor incident rates and communicate advice on the management of any associated risks or issues identified to the relevant managers for action.
- Provide advice and assistance regarding Manual Handling practice and documentation as part of the annual Health and Safety Audit Programme
- Provide information to Service Area Management and Senior Management on statistics.
- Assist with the assessment of handling equipment prior to purchase, as required.
- Provide assistance to Technical Services Dept and during the planning, building and/or refurbishment of any workplace to ensure an ergonomic approach as required..
- Sensitive risk groups may require input from Occupational Health/Specialists in the area.

2.9 Employee Responsibility

Employees must

- It is the responsibility of all staff to identify and report all hazardous tasks, which involve Manual Handling, Staff should co-operate with the line manager in performing Person MHRA where applicable.
- Comply with the Organisation's Manual Handling Policy
- Complete manual handling training within required timelines.
- Assess loads prior to any moving and handling task.
- Ensure they adhere to their legal duty to take reasonable care for their own health and safety and that of their co-workers. They must not engage in unsafe practices at any time.
- Work within their own capabilities and limitations and not carry out any activity or use any equipment for which they have not been trained.

- Report any medical conditions, which may affect their ability to perform moving and handling tasks, and if pregnant, must immediately inform their Line-Manager,
- Wear suitable clothing and footwear for Manual Handling tasks.
- Follow training and instructions provided on Manual Handling Training e.g. manual handling protocol/techniques, guidance from training courses
- Perform a visual inspection and brief check to ensure that moving and handling equipment/aids are in safe working order prior to each use and must use assistive equipment only for its intended purpose, and in line with the guidelines for use provided.
- Report any unsafe systems of work that may cause a hazard to his/her health
- Report defects in equipment to Heads of Department/Managers.

3.0 Risk Assessment Programme

The regulations require that both general and specific Risk Assessments be carried out with regard to Manual Handling activities in the workplace. The Persons in Charge/Head of Department is responsible for ensuring these are done in consultation with the staff and to involve necessary stakeholders from the multi-disciplinary team as required. Refer to Section 10 of the Safety Statement for guidance on general workplace manual handling tasks

4.0 Training and Instruction

Training is only one component of the comprehensive strategy to reduce the risk of injury and in particular back injury within the workplace. All training programmes aim to change attitudes and behaviour and facilitate safe handling activities in the workplace.

- All new staff receive Initial Manual Handling training prior to commencement of placement.
- Refresher Manual Handling training takes place every three years.
- Training includes general instruction on safe use of key moving and handling equipment i.e. wheelchair, hi-low beds and hoists. The Training Department in consultation with the relevant manager will arrange Manual Handling training and will maintain a central record of this training.
- Manual Handling Trainers have attained FETAC Level 6 Manual Handling Instructor award.
- Any staff member who is unable to attend the training must notify the Training Department so that an alternative arrangement can be made.

5.0 Procedure - refer to Manual Handling Procedure on H&S Downloads

6.0 Monitoring and Record Keeping

PIC/Manager must ensure that they keep the following documentation:

- Equipment inspections/maintenance records are to be kept on site including reports of thorough examination (where applicable) to check that sufficient suitable equipment is properly maintained and readily available for staff use. See Equipment Records file in the centres.
- Completed Person Manual Handling Risk Assessment Forms for Service Users where required. Shall be reviewed at least annually for adequacy or more frequently if required.

It is the policy of St. Michael's House to ensure that all work equipment is suitable for the work intended, must comply with the minimum requirements of the Fifth Schedule to the SHWW (General Applications)Regulations 2007 and may be used by employees without risk to their safety and health.

Before purchasing new workplace and household equipment for St. Michael's House Services, the PIC /HOD should seek advice and approval from St. Michael's House Technical Services Department to ensure it is suitable and compatible for centres work equipment including .

- Be assessed to ensure so far as is reasonably practicable, that they are without significant hazard,
- Be appropriate to the task intended and
- Take account of the relevant EC/EU technical standards Directives and where applicable EN standards.such work equipment must be 'CE' marked, where there is no relevant EN standard,

In relation to Assistive Equipment, the Physiotherapy & Occupational Therapy Departments are responsible for the prescribing, selection and procurement of Service User related equipment. This takes into account regulatory and legislative requirements and includes liaison with key stakeholders i.e. PIC, Transport and other Services the Service User attends. All documentation regarding equipment must be maintained at centre level in an equipment file, including, certificates of conformity, instruction manuals and records of maintenance carried out etc. In the case of equipment requiring statutory inspection this may include: Hoists and lifts and other lifting machines where applicable.

All assistive equipment is serviced and inspected (including reports of thorough examination where required) to ensure it is in good repair from approved service contractor at prescribed intervals.. Staff must also carry out visual inspections of equipment before every use and utilise equipment as appropriate.
An inventory of all assistive equipment in the unit (including slings, batteries, belts etc) should be maintained and PIC/manager/co-ordinator should liaise with Physiotherapy and Occupational Therapy Departments when equipment is no longer required, or when a new piece of equipment needs to be assessed.

Employees receive appropriate information, instruction and training on the safe use of all assistive equipment and workplace machinery. Staff must report any defects in equipment to the PIC/manager/co-ordinator as soon as they are identified.

Risk Assessments must be carried out for all work equipment and machinery. Guidance on completing Assessments are contained in Section 11 of the St. Michael's House Safety Statement. PIC/manager/co-ordinator must ensure all equipment is maintained in safe working order and take action to correct

St Michael's House recognises that some staff are required to work by themselves sometimes in isolated work areas or out of office hours. Lone workers come within the "vulnerable group" category.under Section 19 of the Safety, Health and Welfare at Work Act 2005 and Safety Health and Welfare at Work (General Application) Regulations) 2007. Employers are obligated to think about and deal with any heath and safety risks associated with Lone Working.

The aim of this policy and the guidelines are to ensure managers and staff are aware of risks and to provide:

- guidance on managing the potential risks associated with lone working. and
- appropriate protective measures are in place to ensure safe systems of work for those who work alone in St Michael's House Services.

This Policy and the associated Lone Working Guidelines document have been developed to provide guidance to staff regarding best practice in order to maintain personal safety while working alone.

Definitions Lone workers are those who work by themselves without close or direct supervision.
Source: Health and Safety Authority

Scope This policy applies to all employees. The Organisation recognises that there are different situations where an employee is a lone worker.
Lone workers include those who:

- work outside normal working hours
- work away from their base
- work separately from others
- are the only person on the premises
- visit or work with people in their homes

4.0 Responsibility

Working alone can be part of normal working duties and can be essential to quality service provision. The legislation requires employers to think about and deal with any health and safety risk to staff by conducting a risk assessment and where the risk is significant, put in place protective measures.

Person in Charge (Person In Charge) and Head of Department (Head of Department) will identify and assess key lone working tasks (some examples are outlined in the Lone Working Appendix) and where risk is significant compete Lone Working Risk Assessment and include local Safe System of Work guidelines as part of the protective measures for the service/department. With more complex/infrequent/ new lone working activity Persons In Charge / Heads of Departments should use the Lone Working checklist (see Lone Working Appendix) to assess whether it is practicable for the task to be completed by lone worker or alternative arrangements be made .i.e. additional protective measures put in place to minimise the risk and support service provision.

All employees have a responsibility to take reasonable care of their own safety, the safety of others and to co-operate with the Employer (Section 13 of the Safety Health and Welfare at Work Act 2005). Employees should not knowingly place themselves in situations which expose them to additional risk by working alone and without the full knowledge of their line Manager.

Specific responsibilities are as follows:

4.1 Operations Management (including Regional Directors, Clinic Managers) are responsible to:

i) Support Line Managers in managing of lone working tasks including development of Safe systems of work procedures/arrangements in order to implement the policy and guidelines for those staff lone working.

ii) Facilitate the provision of appropriate supports/ resources that improve personal safety for lone workers.

iii) To ensure that arrangements exist for the reporting and investigation of any incident involving lone workers that have or could have resulted in a health and safety issue for a lone worker and to make appropriate recommendations to prevent recurrence of such incidents.

4.2 Heads of Department/ Line Managers (including Service Managers, Specialist Support Departments, Individualised Services and Support Services, Person In Charges where appropriate etc) are responsible to

i) Identify tasks - which involve lone working within their department/unit and identify employees who are involved in lone working, (some examples are outlined in the Lone Working Appendix)

ii) Ensure that comprehensive risk assessment (where required) is conducted in consultation with the relevant personnel, including the Service User (where appropriate) to ensure that all risks from lone working are identified and adequate protective measures have been introduced to minimise or mitigate the risks before staff complete the lone working activity.

iii) To ensure the centre /department has a robust "safe system of work" relative to lone workers by developing local guidelines/Safe systems of work where there are Lone Working activities, in consultation with staff involved including contingency plan

iv) Ensure that employees are aware of the incident / accident reporting system and that all incident/accidents are reported on the relevant E-form when needed to ensure that appropriate support is provided to staff involved in any incident in terms of both immediate and follow up support.

v) Ensure all staff receive appropriate training in accordance with the risks associated with their work activities.

4.3 Lone Workers/Employees Responsibility:

i) Read and follow the Lone Working policy and any other relevant local/departmental SOP guidelines to their lone working task(s)

ii) Take reasonable care to look after their own Safety and Health and that of others who may be affected by their work activities.

iii) Co-operate with St. Michael's House and Safe systems of work and undertake all relevant training necessary.

iv) Inform the Line Manager of the work itinerary and expected time schedules as needed.

v) Seek advice from their line manager and follow procedures and instruction to avoid putting themselves or their colleagues at risk.

vi) Having regard to training and the instructions given by the Organisation make correct use of any article or substance provided for use by the employee at work or for the protection of his or her safety

vii) Inform the Line Manager of any medical conditions/ circumstance that may affect the employee's suitability for lone working.

viii) Report all incidents, accidents, near-misses and other dangerous occurrences to the Line Manager.

ix) Report to their managers if there are any issues with the implementation of the policy and procedures.

4.4 Health and Safety Department Responsibility.

i) Provide support to Department Heads/ Line Management on the development of Risk Assessments for Lone Working activities (where required).

ii) Provide support to Department Heads/ Line Management on the development of local guidelines/SOPs for Lone Working activities.

iii) Ensure that Heads of Department/Line Management are aware of their responsibilities.

iv) Review SOPs/arrangements for Lone Working activities to ensure compliance as part of Health and Safety audit Programme.

v) Provide training on lone working policy and procedures (see section 5).

5.0 Training

The Health and Safety Department will provide awareness sessions on the lone working policy and its implementation to Persons in Charge / Heads of Department and Service Managers in liaison with the Training Department. The Heads of Dept/PIC will then communicate arrangements in relation to the local safe system of work/guidance to their respective team/department team once completed.
Lone Workers are to be trained in the safe use of equipment, the safe system of work and emergency procedures. All records to be documented and retained on file.

6.0 Monitoring and Review

Regional Management in conjunction with the Health and Safety Department will monitor compliance with this document. This document will be reviewed on a 3 yearly basis or where there are changes in legislation, additional requirements or a revision identified.

7.0 References

- Safety, Health and Welfare at Work Act, 2005
- Safety, Health and Welfare at Work (General Application) Regulations, 2007
- Health and Safety Authority (2011) Guidelines on Lone Working in the Healthcare Sector
- Health and Safety Authority (2012), Health and Safety at Work in Residential Care Facilities

- Health Services Executive (2012), HSE Policy for Lone Working
- Health Services Executive (2012), HSE Guidelines for Lone Working
- Health Information and Quality Authority (HIQA), National Standards - Safer Better Healthcare (2012) H.I.Q.A., National Standards for Residential Services for Children and Adults with Disabilities (2013).
- Health and Safety Executive UK Working Alone in Safety
- www.hse.gov.uk
- www.hsa.ie

RELEVANT ASSOCIATED DOCUMENTATION

St Michael's House Safety Statement - Section 11.16 Lone Working
Lone Working Guidelines Appendix

APPENDICES

Lone Working Appendix:

- Developing lone working procedures
- Lone working activities
- Checklist
- RA template

It is the policy of St. Michael's House to operate vehicles in a safe, efficient and effective manner and to minimise risks to employees and others affected by our operations.

1.0 Scope:

The following policy applies to all Staff that drive on St. Michael's House business, who may be either.

- Employees who are required to drive vehicles as an integral part of their work.

OR

- Employees who use their own vehicles or hired vehicle to carry out some element of their work role

2.0 Introduction:

This Policy document has been prepared to assist the Organisation's Services in meeting their legal responsibilities to effectively manage on-the-road work activities. The document reflects current legislation and best practice with regard to ensuring that drivers are appropriately qualified and trained.

The policy and associated guidance will be revised from time to time to reflect changes in the law and good practice. This guidance does not diminish in any way employee's responsibilities to comply with legislation when driving on the public highway.

3.0 Definitions:

For the purposes of this policy the following definitions apply;

3.1 Driving at Work

Refers to any work carried out that involves the employee in time spent driving a vehicle on St. Michael's House business and covers all journeys other than commuting to their normal place of work. It is a requirement of St. Michael's House Insurance that minibus drivers must be over the age of 23 with full clean driver's licence for 2 years.

Any vehicle owned, leased or hired by St. Michael's House for the provision of transport for Services Users to access the community

3.2 Private Vehicle

Any vehicle used by a person driving on St. Michael's House business which is not owned, leased or hired by St. Michael's House

4.0 Responsibilities:

St. Michael's House recognizes that driving can be an integral part of service delivery. This section sets out responsibilities for Driving at Work Policy within the Organisation as detailed below:

4.1 Persons in Charge / Heads of Units / Departments

PICS/managers/co-ordinators/Departments are responsible for;

1) Ensuring that staff within their remit are aware of and follow this policy and associated guidance commensurate with their driving duties.
2) Ensuring all unit vehicles whether purchased or hired are supplied in a safe and legally compliant condition
3) Ensure that unit vehicles are maintained in roadworthy condition including statutory inspections including N.C.T. and servicing.
4) Ensure appropriate Risk Assessments are carried out for managing driving activities
5) Develop local safe system of work for all driving at work carried out including ensuring appropriate emergency procedures / contingency plan are in place
6) Ensure these Safe Systems of Work are brought to the attention of all staff involved in driving duties.
7) Ensuring that staff are appropriately trained and hold the necessary licenses and insurances.
8) Ensure the Service User Travel Information sheets are reviewed regularly, updated as required and relevant parties notified.
9) All collisions and incidents are reported on the appropriate form available on the intranet
   a. Accident / Incident e-form and
   b. Transport incident form for insurance purposes
10) Ensuring transport duties are practical and workable within the resources of the unit, and discussed with the Service Manager.

4.2 Staff

Responsibilities and duties of drivers are outlined in the Drivers Handbook and in addition all staff should;

a) complete the insurance questionnaire and submit the necessary documentation for approved drivers listing to the Central Transport Department on an annual basis.
b) submit annually relevant information to Transport Department, i.e., necessary licenses, and insurance information before taking up driving duties.
c) Comply with St. Michael's House Policies regarding 'Mobile Phone" and 'Substance Use and/or Abuse Policy (Alcohol and Drugs).
d) Are medically fit to drive.
e) Adhere to the rules of the road at all times.
f) Are alert to safety of Passengers at all times and ensure guidelines followed with regard the wearing of seatbelts and clamping of wheelchairs whilst driving.
g) Carry out daily driving checks in compliance with RSA regulations to ensure that the vehicle they are driving is fit for its purpose and roadworthy. Inform the relevant people if they become aware of any faults with the Vehicle (see drivers handbook for details).
h) Report any accidents or incidents whilst driving on St. Michael's House business on the appropriate forms available on the Intranet; A) Accident / Incident Eform and B) Transport Motor Incident Form (for insurance purposes).
i) Comply with local safe systems and risk assessment requirements for driving at work activities.
j) Staff driving for work in their own vehicle must ensure that it always complies with the law, is in safe and roadworthy condition and is suitable for its purpose.

4.3 Service Managers:

Are responsible for the successful integration of transport duties for the benefit of Service Users by:

a) Ensure Local safe systems of work and Risk Assessments in place in their unit clusters (where applicable) are adequate and practicable.

b) Ensuring that local emergency procedures/contingencies are in place for units in their clusters and that staff are aware of them.

c) Ensuring all Road Traffic Accidents that occur in the cluster are investigated and corrective action planned.

d) Ensuring transport duties are reviewed as part of Quality & Safety Service Review.

4.4 Administration Manager:

Administration Managers are responsible for ensuring safe transport operations in their region by:

- Liaising with Transport Operations Manager regarding feasibly plans for local transport operations.
- Regular reviews with Service Managers regarding local transport operations to ensure operations are running safely and effectively
- Ensure, where transport issues cannot be resolved, these are identified and notified to relevant parties for action as soon as practicable.

4.5 Transport Operations Manager

- Provide advice to Persons in Charge and Heads of Department when purchasing or hiring new vehicles to ensure they are safe and legally compliant.
- Ensure that all the vehicle and lifting equipment are maintained in a roadworthy condition and complies with legal requirements.
- Represent Transport at any operational meeting and support local team in relation to safe service provision
- Liaise with Person in Charge and Head of Department to ensure statutory inspections are carried out including NCT, etc.
- Provide in-house driving assessments for staff prior to taking up driving duties
- Roadside emergency assistance is provided
- Liaise with relevant parties and insurance where any Road Traffic Accidents occur.
- Ensuring that there is an appropriate process for reviewing emerging Trends for Road Traffic Accidents and that corrective action is taken.
- Collate and manage staff insurance forms and copy licences for staff driving St. Michael's House vehicles.

4.6 Training Department:

The Training Department is responsible for the provision of appropriate driving skills training for staff commensurate with their driving duties in liaison with the Person In Charge / Head of Department including:

- Driver CPC Training
- D1 Class license application training
- Advanced Driver Training and assessment
- Safe use of Equipment Training including clamping

4.7 Health and Safety Department

The Health and Safety Department is responsible for:

- The provision of advice and guidance in the provision of services for St. Michael's House.
- Review of incident / accident reports in relation to transport activities and where appropriate ensuring that road traffic collisions and incidents are investigated.

5.0 Guidance:

5.1 Risk assessment:

- Risk assessments for work-related driving activities should follow the same principles as those for any other work activity as outlined in Section 10.9 Vehicle Transport in the St. Michael's House Safety Statement.
- A work-related driving risk assessment should be drawn up for each Centre / Department that outlines measures to prevent harm so far as reasonably practicable will be sufficient for most journeys. For journeys or driving activities that present additional risks a more detailed assessment should be completed and recorded. Examples of where this would be appropriate include;
    - Non-routine long distance journeys
    - Trips that include driving overseas
- Driving that is expected to take place in severe weather conditions, reference Transport Department severe weather policy.

5.2 Local Safe System of lWork Guidelines:

- All Units/Department should have in place local safe system of work detailing the arrangements to ensure any work-related driving are managed effectively including,
    - Breakdown plan, including emergency contacts etc See Driver Handbook
    - Service User Travel Information sheets,
    - Clamping protocols,
    - Seating plans(where required),
    - Contingency plan for transporting Service Users, etc.

5.3 Use of Own Vehicles:

The law states that it is the responsibility of the driver to ensure that any vehicle driven on the public highway is safe and fit for use. In the case of employees who use their own private vehicle for work business it is their responsibility to ensure that the vehicle is roadworthy, has motor tax and has the appropriate insurance cover to use vehicle for work. Staff must have the appropriate licence and their insurance policy must include business use commensurate with the driving duties carried out, i.e., Class 1, 2 or 3 as appropriate (including the requirement of Indemnifying St. Michael's House on their insurance policy).

5.4 Individual Medical Conditions Affecting the Ability to Drive:

Drivers of St. Michael's House vehicles must declare to their line manager immediately if they are suffering from any medical condition that would legally prevent them from driving on the public highway or if they have any reason to believe they have any other condition that might adversely affect their ability to drive safely. See appendix or Transport manual

The line manager is responsible for taking action by relieving the person from driving duties as appropriate and reporting to the Service Manager.

5.5 Dealing with employees who have incurred additional convictions or disqualification:

Where employees are required to drive St. Michael's House owned, leased or hired vehicles, or their own vehicle as an essential part of their duties, they must inform their line manager of any convictions (including penalty points) or periods of disqualification immediately. If managers are notified that an individual has been disqualified from driving due to a motoring offence they must relieve the person of all driving duties with immediate effect and seek advice from their Human Resources on the most appropriate course of action.

For any other motoring offence such as points on a licence for speeding, it is the responsibility of the member of staff to update their driver's declaration form through their department system.

5.6 Minibus Drivers:

- A higher level of competence is required to drive a minibus, as the vehicle is larger/heavier (requires greater stopping distances).
- All departments must comply fully with the above legal requirements with regard to driving licence entitlement.
- Departments are also required to ensure that; any member of staff who is required to drive a minibus as part of their job must undertake appropriate training regardless of when they attained their full driving licence which is organise by the Training Department. Training is deemed to be appropriate if the training outlines the skills required to drive a minibus safely and candidates are assessed for competency.

5.7 Local/Departmental Vehicle Checks:

The driver has primary responsibility for the operation of any vehicle and must be satisfied that the vehicle is fit for its purpose and roadworthy. Details of the type of checks, frequency of checks and recording of checks are detailed in the Drivers Handbook. It would then be the driver's responsibility to ensure that the record of weekly checks was up to date and then to undertake their own driver basic safety checks and adjustments.

5.8 Departmental Vehicle Maintenance:

Vehicle inspections and maintenance should only be conducted by a competent person. Central Transport Department co-ordinates preventative maintenance and other legally required vehicle checks in line with manufacturers' recommended service intervals and warranties, i.e. C.R.V.T. in liaison with Person In Charge / Head of Department where applicable. The maintenance schedule must also include the annual N.C.T. test. A maintenance log must be kept up to date for each unit vehicle containing all information relating to

that vehicle. Records are maintained in each centre for inspection for at least 3 years.
A Service Schedule is in place for specialist equipment including wheelchair lifts on a 2 yearly basis records are maintained in each centre for inspection.

5.9 Accidents and Incidents:

Where employees who are driving on St. Michael's House business are involved in road traffic accidents or incidents, which result in damage to vehicles, loss or damage to property or persons they must complete the necessary forms St. Michael's House accident/incident form and insurance forms where applicable. Forms should be completed for accidents in a St. Michael's House owned or leased vehicle as well as in an individual's private vehicle. Please refer to Section 5.2) Accident / Incident Reporting of the Safety Statement for information.

6.0 Relevant Associated Documents:

(available in St. Michael's House Policies and Procedures Section and the Downloads section on the Intranet)

- Driving at Work Handbook
- St. Michael's House Safety Statement Section 10.9 Transport Guidance
- Advanced Driving Support Stages Training Protocol
- Emergency Response Plan
- Bad Weather - Severe Weather Contingency Policy
- Lone Working Policy
- Mobile Phone Policy (H.R. Policy)
- Substance Use and/or Abuse (H.R. Policy)
- Road Safety Authority 'Safe Driving for Work' Drivers Handbook (available from www.RSA.ie)

consultation & Information

Workplace consultation is an essential component of the Safety Management System in St Michael's House. Our consultation framework takes account of Section 25 of the Safety Health and Welfare at Work Act 2005. In order to facilitate consultation between Management and Staff on workplace health and safety issues, a number of designated Safety Representatives are elected/nominated by the employees of St. Michael's House.

All employees are encouraged to take an active role in the consultation process and to forward any suggestions for the improvement of health and safety to their Safety Representative where it will be raised as part of the Safety Representative's Report at relevant Service Area Health and Safety Committee Meeting.

St Michaels House have a number of appointed Safety Reps currently, which represent the wide spectrum of Services we offer. Due to the size, diversity and locations of our centres, each Safety Rep is assigned a cluster of centres to which they provide support and advice in relation to Health & Safety matters. Cluster lists have been drawn up and circulated to all units and are posted on the staff notice board.The Safety Representatives are supported in their role by the Health and Safety Department

The main duties of the Safety Rep include:-

- Provision of advice and support to staff who approach them in relation to Health & Safety matters. Safety Reps must take account of the organisation's reporting procedure for addressing employee health and safety issues when dealing with queries.

- Attendance at the Safety Representatives Meetings, with the Health & Safety Manager and Health & Safety Officer. These meetings are essential to providing support to the Safety Representatives:-

  a) To give a forum to discuss issues

  b) To ensure there is positive and effective consultation within St. Michael's House

  c) For briefing on new legislation and policy changes.

  d) Training and up-skilling

- Attendance at Service Area Health and Safety Committees (Adult and Children's Services) meetings. Safety Reps provide a report on their work and are encouraged to participate as much as possible during the committee meetings.

Employees can seek information on health and safety matters from their designated Safety Representative contact details for the reps are available on the intranet including phone and email contacts

Welfare & Resources

St. Michael's House recognises that a successful safety culture can only be achieved when management and employees co-operate with each other

7.1 St. Michael's House is committed to providing arrangements to the highest possible standards for employees. Staff must co-operate in maintaining a high standard of hygiene in these areas.

7.2 The provision of welfare facilities required by legislation will be provided in accordance with the Safety, Health and Welfare at Work (General Application) Regulations 2007, and the Safety Health and Welfare at Work (Miscellaneous Welfare Provisions) Regulations 1995.

7.3 Promotion of an open environment where information is shared to improve the safety, health and welfare of all.

7.4 Fostering employee health and wellbeing through promotion of national wellbeing day, mental health week initiatives and encouraging staff to participate in all areas

7.5 Safety Committees both Service Area and Strategic are supported strongly by management and encouraged to bring forward any safety, health and welfare matters for discussion. Strategic Safety Committee advises and contributions to the work of CEO's Executive Q&S Committee,

7.6 Organisation ensures that competent people are employed to advise line management on safety issues . These people have the necessary knowledge and experience to carryout these roles

St. Michael's House undertakes to provide resources in so far as is reasonably practicable, for the following:

7.7 Provision of health and safety training in accordance with current relevant legislation and good practice recommendations as per minimum training standards document (where applicable)

7.8 Facilitating and supporting the selection and appointment of Safety Representatives . Providing appropriate training and facilities to safety reps to enable them to perform their duties

7.9 Designating emergency response employees (first aid attendants, fire marshals etc)

7.10 Provision of equipment and machinery in safe, good working order and appropriate for the task involved.

7.11 Purchase and maintenance of emergency equipment, including first aid kits, fire safety equipment (fire alarm systems and emergency lighting) and other appliances deemed necessary for emergency purposes.

7.12 Maintenance required to ensure safe access and egress for all employees and others affected by our activities.

7.13 Provision of a Safety Statement for all areas of employment and provision of updated safety information via the h&s downloads as required.

7.14 Occupational Health Services, as appropriate, to include pre-employment medicals, EAP Programme, health surveillance, vaccination against and testing for the hepatitis B virus, eye tests for regular VDU users.

7.15 Smoking in any enclosed workplace is prohibited, in accordance with the amendment to the Public Health (Tobacco) Act 2002 and the Public Health (Tobacco) (Amendment) Act 2004)

First Aid

Section 8

Introduction

This policy outlines St Michael's House first aid arrangements in accordance with the relevant health and safety legislation: Section 11 of the Safety, Health and Welfare at Work Act 2005

Policy Statement

St Michael's House recognises its duty of care under the regulations to provide necessary first aid equipment, materials and first-aid trained staff at work in the event of an emergency.

The aim of first aid training is to ensure that all relevant staff are equipped to administer "treatment for the purpose of preserving life or minimising the consequences of injury or illness until the services of a practitioner or nurse are obtained" (HSA Document, Guidelines on First Aid at Places of Work, 2008).
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St Michael's House has put in place appropriate first aid provisions in all our services and locations taking account of:

- Guidance from Health and Safety Authority' including "Guidelines on First Aid at Places of Work 2008" and 'Health and Safety at Work in Residential Care Facilities'
- Analysis of recorded First Aid events and the nature and type of injuries to Staff and Service Users
- Analysis of accident/incident trends of nature and severity of injuries and the origins of the incidents.

First Aid Provisions

1. Section 7 of the Health and Safety Statement: First Aid Policy(introduced as part of the Organisational Orientation Training Programme)
2. Minimum Required Training
3. Equipment and Materials
4. Signs and Posters

1. Health and Safety Statement

Section 8 outlines the St Michael's Policy on First Aid

2. Minimum Required Training

All front line staff are required to attend a one day bespoke emergency first aid course and nominated staff in the headquarter buildings are required to attend the standard PHECC FAR Occupational First Aid Course. The courses are described in full in the Staff Training and Development Department document entitled "Minimum Required Training for Staff". This document is updated annually.

3. Equipment and Materials

Every St Michael's House site has at least one first aid kit with basic essentials for first aid provision (see content list on the H&S Downloads). The contents are based on the recommended guidelines by the Health and Safety Authority. All buses have first aid kits that are regularly checked and replenished as required.

Automated External Defibrillators (AEDs) are prominently placed in each headquarter building also in Belcamp Campus, The Leisure Centre and Baldoyle Campus. Persons in Charge/Administration Manager oversee installation, testing and maintenance.

4. Signs and Posters

First aid signs and posters are prominently displayed in every St Michael's House site informing staff, service users and visitors of:

- the first aid procedure in the event of an emergency
- the names of the designated staff.

Staff Responsibilities

- Complete first aid training as required
- Become familiar with local health and safety arrangements (important contact numbers) and Accident Protocol - See health and safety downloads
- Complete 'Accident/Incident Report Form' in the event of a first aid emergency
- Complete stock check of first aid kit within specified timelines using relevant recording template and report any missing stock items to manager.

Written records of the dates of all first aid training, including refresher training should be kept at the workplace and be made available on request to the Health and Safety Authority Inspector.

Records of all cases treated by the first aider should be kept in a suitable secure place, respecting their confidential nature and be made available on request to the Health and Safety Authority Inspector.

Training

Section 6

St Michael's House provides safety training for all our employees All health and safety Training including refresher training is provided in accordance with legislation details of which are contained in the Training Minimum Standards document, which is reviewed annually.

St Michael's House is committed to ensuring that all our employees are trained to a level of competence that allows them to carry out their work competently and safely. Training is provided by St Michael's House Training Department.
Health and safety training including manual handling, food safety is included in 3-day Organisation Orientation Training followed by local induction training for employees in relation to site specific safety requirements.

The Head of Unit/ Person in Charge/ Manager is responsible to ensure staff receive appropriate instruction and supervision. The Head of Unit/ Person in Charge/ Manager is expected to follow-up on any training received, in order to ensure that any practices taught are fully implemented in day-to-day tasks at unit level by staff reporting to him/her

Employees are expected to complete training as provided and implement fully the training recommendations in their day to day practice Failure to attend training will be addressed under the HR 'Dignity at Work' Policy.

Training records are maintained including attendance sheets . Detailed records of all training are maintained in the Training Department and available for inspection at any time.

Staff Training Manager and Health and Safety Manager shall discuss requirements for new or changes to health and safety training programmes (based on gap analysis, trends in accident stats etc). Health and Safety Committee will be consulted on this as required.

communication & distibution of safety information

Section 10

The Organisation recognises the importance of clear effective communication of safety information as part of our Safety Management systems.

10.1 The safety statement is the Organisation's safety management system in writing and is reviewed (i.e. as necessary and at least annually) by the Health and Safety Manager who shall make the necessary changes to the safety statement to take account of any of the following changes: Names of responsible persons, Changes in service provision/process ,New Machinery/ technology, Changes in premises, Legislative changes

10.2 The responsibility of implementing the safety statement rests with management team at all levels however, individuals also have a responsibility in implementing the safety statement. The safety statement will be brought to the attention of all employees through the following means

- Briefings are held with all line, divisional, clinical and senor management on the changes to the safety statement to ensure effective implementation at all levels .
- The PIC/Head of Dept at team meeting will bring the safety statement to the attention of all staff. Health and safety will be an agenda item at all team meetings.
- Orientation and local induction training, for new staff
- Safety Briefings held periodically by H&S Department
- Relief and agency will be briefed on relevant local safety systems prior to commencement on shift.
- Specific elements of the safety statement will be brought to the attention of outside contractors where required by the PIC/Head of Department specific to the work that they are carrying out.

10.3 The Health and Safety Manager consults with key stakeholders in the organisation on proposed changes and final draft will be reviewed and approved by the Strategic Health and Safety Committee

10.4 The Service Area Safety Committees (Adults and children) advises and contributes to the work of the Strategic Safety Committee. It includes members of management and safety representatives Safety Committees both service area and strategic are supported strongly by management and are encouraged to bring forward any safety, health and welfare matters

10.5 Safety information is shared through two-way information between employees and management at St Michael's House

- All staff have access Information, news and updates on safety systems and procedures via the Health and Safety Downloads on the Organisation's Intranet.
- In addition safety alerts are issued to Persons in charge to share learning from critical events.
- Analysis of accident/incident reporting trends and triggers
- Work of the Safety Committees and Safety Representatives Reports
- Cluster meeting safety briefings
- Audit Suggestions
- Informal discussions

10.6 In accordance with the Safety, Health and Welfare at Work Act, update on health and safety performance shall be included in the organisation's annual report

Hazard Identification & Risk Assessment

In accordance with Section 18 & 19 of the Safety, Health and Welfare at Work Act 2005 St. Michael's House recognises its responsibilities as an employer to identify hazards, assess the risk presented by those hazards and put in place protective and preventative measures to remove or at least reduce the risk as part of its safety management systems.

All PICs/ Heads of Department receive training in Risk Assessment principles and methodologies, which is organised by the Training Department. PICs/HODs should consult with all stakeholders including staff, service users and others where applicable in the development of site-specific risk assessments, which should include routine and non-routine activities and tasks.

Risk Assessments in St. Michael's House fall into the following categories

- Workplace Risk Assessments
- Service User Specific Risk Assessments linked to their support plans
- Site Specific Risk Assessments

Once completed, PIC/HOD must ensure that the content of site-specific risk assessments are communicated to their staff team, signed off and implemented going forward. Risk Assessments should be reviewed

- at least annually or in situations where new risks are identified,
- an accident/incident has occurred,
- In light of changes - i.e. to the work environment, introduction of new equipment or substance, system of work, practice issues moving premises or following changes in legislation.

It is the responsibility of line managers (PIC)s and Heads of Departments to carryout risk assessments based on the careful examination of all activities (within their remit). This should take account of the hazards to employees and others affected by the organisations' activities (including Service Users, visitors, members of the public and contractors) and ensure all necessary protective and preventative measures are documented on the Risk Assessments template - risk assessment must take account of the safety of all including Service Users in the provision of services taking account of the requirements of HIQA Guidance on Risk Management Safety Management System acknowledges that in the support of our Service Users, risk is an ever-present component in the routine and complex activities of daily life. Risk management is a key component in ensuring the necessary supports are in place for all Service Users to aspire to or reach their potential. Proactive Risk taking as referenced in risk management policy aims to reach a balance between opportunities and risk minimisation..

Service Managers review local Risk Assessments for adequacy in the units for which they manage. Where required the service manager should provide additional support to the PIC/line manager in the completion and implementation of Risk Assessments. Where all avenues have been exhausted risks are escalated to relevant parties for action - See Risk Management Policy for details

Organisation's Safety Statement contains recommended Risk Assessment methodology and Matrix to assist responsible persons to evaluate risks identified and put in place suitable and appropriate measures to reduce the risk as low as is reasonably practicable

Scoring the Impact/Consequences of the Risk

The organisation has adopted the HSE Integrated Risk Management Policy which identifies the following risk impact areas to be managed.

Risk Category	Descriptor
Harm to a Person	Physical or psychological injury related to a person i.e. service user, staff member or member of the public.
Service User Experience	Negative service user experience that may have a negative impact on outcome, limit their engagement with a service or lead to a complaint.
Compliance (Statutory, Clinical, Professional and Management)	Failure to comply with HIQA/MHC standards, Codes of Practice or Conduct set by professional regulators, relevant legislation e.g. Safety, Health and Welfare at Work Act, Financial Regulations etc.
Objectives and Projects	Project slippage and failure to meet objectives of projects.
Business Continuity	Issues that would affect an organisations ability to provide service e.g. deregistration, fire flood ICT or electric outage, industrial strikes.
Adverse Publicity/ Reputation	Adverse publicity in the media, loss of public confidence in a service or the organisation e.g. poor service performance.
Financial Loss	Fraud, claims, budgetary overruns.
Environment	Releases of substances that would have a detrimental environmental impact e.g. chemical spills, poor waste management practices, radiological leaks.

In scoring the impact/consequences of a risk there are two steps:

Step 1: Decide on the primary area of impact. (Appendix 5 HSE Risk Assessment Tool)

For example, if the risk was described as one relating to failing to comply with the National Standards for Prevention and Control of Healthcare Acquired Infection then the primary impact area would be Compliance with Standards.

Secondary impact areas might relate to injury to service users/staff/public if they acquired an infection; adverse publicity if the service got a poor inspection report or financial loss if there was a claim. The secondary impacts however would not occur if the primary impact area was well managed in the first instance.

Though you may record the secondary impacts as part of your assessment process, you will rate the impact on the primary area of impact.

Step 2: Now that you have identified the **primary** area of impact, refer to that area of impact on the impact table of the HSE's risk assessment tool. **(See Appendix 5)**

You will note that each risk impact area has been assigned descriptors over 5 levels ranging from negligible to extreme harm. For the primary impact area, consider the controls that **are in place** that is the existing controls and pick the descriptor which best describes the impact of the risk if it occurred.

Make a note of the score attaching to that descriptor as set out on the Impact Scoring Table 1 below.

Table 1. IMPACT SCORING TABLE:

Score	Impact
1	Negligible
2	Minor
3	Moderate
4	Major
5	Extreme

Scoring the Likelihood of the Risk

The likelihood of a particular risk materialising depends upon the effectiveness of the existing controls. The better the controls the lower the likelihood of the risk occurring. In assessing the likelihood, consideration should be given to the range and adequacy of controls that are in place.

Scoring the likelihood of the risk should be done by reference to the likelihood table of the HSE's risk assessment tool **(see Appendix 5 and the likelihood table below).**

Table 2. LIKELIHOOD TABLE:

Rare/Remote (1)		Unlikely (2)		Possible (3)		Likely (4)		Almost Certain (5)	
Actual Frequency	**Probability**	**Actual Frequency**	**Probability**	**Actual Frequency**	**Probability**	**Actual Frequency**	**Probability**	**Actual Frequency**	**Probability**
Occurs every 5 years or more	1%	Occurs every 2-5 years	10%	Occurs every 1-2 years	50%	Bi-monthly	75%	At least monthly	99%

Likelihood scoring is based on the expertise, knowledge and actual experience of the person/group scoring the likelihood. Ask yourself how likely is the risk to occur? How frequently has this occurred previously in our service?

Similar to the impact scoring, assessment of likelihood involves the assignment of a number from 1-5, with 1 indicating that there is a remote possibility of it occurring and 5 indicating that it is almost certain to occur (see table above).

Initial Risk Rating

Having established the likelihood and impact scores, the scores should be plotted on the HSE's Risk Matrix (see table 3 below). For example, if a risk has been assigned likelihood score of 3 (Possible) and an impact score of 5 (extreme) the risk rating will be a **Red 15.**

- High risks are scored between 15 and 25 and are coloured**Red.**
- Medium risk are scored between 6 and 12 and are coloured**Amber.**
- Low risks are scored between 1 and 5 and are coloured**Green.**

Table 3. RISK MATRIX

	Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Almost Certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Rare/Remote (1)	1	2	3	4	5

Top Tip: The numeric value attached to the rating is important when ranking your assessed risks in terms of which risk is most risky to that which is least risky. This can assist in making decisions in relation to which risk should attract primary management focus.

How do I evaluate the risk?

The purpose of risk evaluation is to make decisions based on the outcome of the risk rating whether the risk requires further management action that is the treatment of the risk.

For example, if you have assessed a risk as being high it is likely that you as a manager will need to ensure that actions required to reduce the risk are identified and implemented.

Risk evaluation also allows you to look at the totality of risks assessed and prioritising of these, i.e. which risks require the most urgent action or treatment.

As a rule of thumb the following applies;

- Risks rating **red** (high risk) are intolerable that is they cannot be accepted and require significant management focus to mitigate them. Risk action (treatment) plans should be developed; the actions required assigned to action owners and their completion should be monitored by the relevant Management Team.
- Risks rating **amber** (medium risk) are trickier, in that on the one hand they are not intolerable (high risk) or acceptable (low risk). Whilst all reasonable efforts should be taken to reduce the risk to a low rating this may not be possible given constraints within the overall system or indeed by applying the additional effort required to mitigate it further other opportunities will be lost. Such risks require consideration by the Management Team and it may be that a decision is taken to accept the risk but keep it under review (monitor) with an option to open it for further management in the future.
- Risks rating as **green** (low risk) are acceptable in that the additional effort required to reduce the risk further may be disproportional to the level of inherent risk and management efforts and resources may be better placed elsewhere. Alternatively the Management Team may consider not to accept it but rather that some additional action is indicated and justified

How do I treat the risk?

If a decision is taken that further control (treatment) is required this may take the form of;

i. **Avoiding the risk** for example, stopping the activity associated with the risk. This is not often an option for public services.

ii. **Transferring the risk** for example, outsourcing the activity to another agency that will be responsible for the activity and the attending risks. Managers, however, retain governance responsibility for the monitoring of such contracting or outsourcing arrangements to include the arrangements for risk management.

iii. **Controlling the risk** for example, putting in place actions to mitigate or minimise the risk. When considering additional controls the following hierarchy should apply:

   - If practicable, eliminate the risks altogether, or combat the risks at the source, (for example, use a safe substance instead of a dangerous one).
   - If elimination of the risk is not practicable, try to reduce the risk at source by substituting the material or process with a less hazardous one or installing or using additional equipment, (for example, by use of a low voltage electrical appliance, changing the drug packaging).
   - Finally reduce the risk via administrative controls and safe systems of work. For example, policies, procedures and guidelines or by, use of personal protective equipment (PPE). Use of PPE is the weakest control measure on the hierarchy and should, if being employed, be used in conjunction with other control measures. See principles of prevention **Appendix 7**

11.0 Hazard Identification & Risk Assessment

This section of the Safety Statement identifies common workplace hazards and associated risks presented to employees of St. Michael's House, and others affected by our activities. Recommended control measures are detailed in the following section to assist the Head of Unit/Department Manager to put in place local controls to minimise or eliminate the risks. Staff must be briefed on control measures pertinent to their duties and must co-operate with all measures put in place for health and safety.

SUB-SECTION

A. Physical

Fire
Electricity
Access and egress
Slips, trips and falls
Machinery and equipment
Challenging behaviour (physical injury)
Violence at Work
Ergonomics (VDU)
Vehicular transport
Manual Handling
Working at Height

B. Chemical

Household chemicals
Cleaning Agents
Safe use Transportation and storage of
Compressed gasses (Oxygen)

C. Biological

Blood-borne diseases
Infection Control
Food Safety
Clinical Waste

D. Human Factor:

Psychological effect of challenging behaviour
Lone workers
Stress

SUB-SECTION A: PHYSICAL HAZARDS

Fire is a serious hazard and can result in death or serious injury to human life, property and the environment. Due to the risk that this hazard poses St. Michael's House strives to ensure that all staff are aware of general fire safety prevention measures and are trained in evacuation procedures specific for their unit. The main causes of fire include electrical wiring/equipment, smoking, open flames, flammable liquid/gases, placing of combustibles close to hot surfaces and arson.

Control Measures:

11.1.1 Each unit is issued with an Emergency file on opening. The Emergency file is issued by the St Michael's House Fire Prevention Officer. This File contains information in relating to the following:

- St. Michael's House fire safety policy
- St. Michael's House fire safety management guide
- Fire checklists - Daily/Monthly/Quarterly
- Emergency Procedures including emergency numbers
- Fire Evacuation Plan including Personal Evacuation plans
- Records of Servicing

This file is the units record of compliance in relation to fire safety and as such needs to be kept up to date at all times.

11.1.2 As part of a staff members local induction the PIC/Manager needs to ensure that the emergency file is brought to the staff members attention. Staff member must read and signoff on the St Michael's House Policy

11.1.3 Any changes in relation to fire safety documentation in the unit is communicated to the staff team as soon as possible.

11.1.4 All staff are responsible for implementing fire prevention measures in their workplace

11.1.5 A general fire evacuation procedure is available on the fire safety downloads on the intranet. There is a specific template for day services and one for residential. This document needs to be tailored to the site arrangements and reviewed on a regular basis - at least annually or when changes arise in the unit. The plan is complimented by the personal evacuation plans which are completed on all service users that have a support need in order to evacuate. There is an accessible version of the template for service users who wish to be involved in the development of their own plan.

11.1.6 In large training centres where there are larger numbers of service users who attend the service the assessment of need document is used to determine if a personal evacuation plan is required.

11.1.7 Fire safety training is provided to all staff on a regular basis. Frontline staff receive fire training annually within their unit and staff are required to attend this training. The Fire Prevention Officer completes residential services with a third party completing fire training in non- residential services. Mop up fire extinguisher session is held quarterly for staff that miss team based training.

11.1.8 Staff are required to complete daily fire checks and record these on the St Michael's House Daily fire checklist. Records are maintained in the Emergency file

11.1.9 Fire Prevention Officer completes site specific inspections on a regular basis. Following the inspection, reports are completed and sent ot all stakeholders including Technical Services Department. Actions that fall under the remit of the Technical Services Department will be scheduled for completion. Works that require capital in order to address are added to the organisational fire risk register.

11.1.10 St Michael's House has an organisational fire risk register system in place which streams environmental fire actions arising from inspections into categories and each is prioritise using key criteria. This register is prioritised and managed by the Fire Prevention Officer and Technical Services Manager on a regular basis

11.1.11 A local unit fire officer and deputy is assigned to each unit. This is to ensure that they support the PIC/PPIM in ensuring that all documentation in the emergency file is up-to-date. They are required to complete a monthly checklist to ensure that all actions over the month have been dealt with appropriately. Any issues are reported to the PIC in their quarterly check. The Local fire officer supports the management of fire safety in the unit, at no time is the responsibility for management of fire transferred onto the local fire officer, fire safety management is the responsibility of the PIC

11.1.12 The PIC is the person responsible for fire safety management in the unit. They are required to complete a quarterly fire checklist , on a six monthly basis they report on fire safety management to their service Manager as part of the 6 monthly quality and safety checks.

11.1.13 Fire drills are completed on a regular basis - units are required to complete at least two fire drills per year and two fire walks(latter are completed without the fire alarm being activated) One day and one night in residential and two day in day services. Regional offices are required to complete two drills per year. Units are required to meet three minute evacuation time limit. Where a drill exceeds this the unit are required to notify the St Michael's House Fire Prevention Officer for advice on how to proceed in future drills. Simulated drills can only be completed upon prior approval from St Michael's House Fire Prevention Officer

11.1.14 In some units evacuation aids are in place such as Evac chairs/Ski sheet/Ski pad/Ski slide pad and training is arranged for staff on an annual basis by an approved company. These devices are not used as part of a fire drill with the exception of the evacuation chair.

11.1.15 In the regional offices there are assigned fire wardens for the building. These staff have a specific role to play in the event of an evacuation. They are provided with fire training annually in order to fulfil this role. The nomination and management of the fire warden team in each of the offices is the responsibility of the Administration Manager.

11.1.16 If issues are noted with a service user's evacuation that will cause a difficulty to staff safely evacuating them in a fire, it must be reported to the St Michael's House Fire Prevention Officer as soon as possible.

11.1.17 An L1 Fire detection system is installed in all residential services. This offers the optimal coverage and ensures early activation which should increase time for evacuation. Day Services generally have a lower level of coverage L2/3 system as there is no sleeping risk.

11.1.18 Fire extinguishers are provided in all St Michael's House services . Staff are trained annually in their use and are expected to intervene in a single burning item and not at the expense of life safety

11.1.19 The fire alarm system, fire extinguishers and emergency lighting is on a preventative maintenance programme and serviced regularly. Records kept in section 4 of the emergency file

11.1.20 There is No smoking inside any St. Michael's House premises. Suitable locations are identified outside the unit with appropriate receptacles in place.

11.1.21 There is a no naked flame policy within St. Michael's House

11.1.22 The use of deep fat fryers is not allowed in our services. The only exception to this is in industrial kitchens in Baldoyle and the school(s). There are specific measures in place to compensate for this.

11.1.23 All escape routes are kept clear at **all** times.

In accordance with the Safety Health and Welfare at Work (General Application) Regulations 2007. Electricity is a serious hazard in any occupation or domestic setting, so respect for electricity is essential. Accidental overloading of electrical sockets is a common cause of fires. The associated risks are of burns, shock, asphyxiation and even death.

Control Measures:

11.2.1 Electrical installations shall comply with the latest edition of the IEE Wiring Regulations and be well maintained by qualified electricians only and tested on a regular basis.

11.2.2 All installations and repairs shall be carried out by a competent person e.g. member of Technical Services Department or approved contractor.

11.2.3 Only approved equipment installed by a competent person shall be used, and all equipment should be used according to manufacturers' instructions.

11.2.4 All fuse boards are installed in a safe area and circuits clearly identified. Access to the fuse board is limited to authorised personnel only.

11.2.5 Circuit breakers are provided for all sockets to protect against electrical overload, faults to earth and short circuit..

11.2.6 'Double-adapter' type units shall not be used. If additional sockets are required for low power items, suitable four-way gang sockets or similar should be used. Items requiring high power, such as irons, kettles and heaters should always be powered directly from a wall socket.

11.2.7 Staff shall visually inspect equipment before using and where defects are spotted ensure its put out of use and should be reported.

11.2.8 All electrical equipment should be checked for loose or damaged plugs, sockets, leads or cables by staff weekly.

11.2.9 Any defective equipment should be isolated immediately, removed from use and reported immediately to the appropriate department (e.g. maintenance/technical services) or manufacturer.

11.2.10 The Head of Unit is responsible for contacting the relevant supplier/service company regarding defects in domestic appliances.

11.2.11 Adequate lighting is provided and maintained by the Technical Services Department.

In compliance with Section 8 (c) (ii) of the Safety, Health and Welfare at Work Act 2005, the Organisation shall provide and maintain safe access and egress to places of work. The associated risks with the failure to provide safe access and egress are slips, trips and falls; traffic accidents.

Control Measures:

11.3.1 Emergency exits should be kept clear and unobstructed at all times.

11.3.2 The area at the rear of buses should be kept clear of obstructions at all times and all designated bus set-down areas are kept clear.

11.3.3 Care should be exercised at all times by those driving buses or other vehicles on the property of St. Michael's House.

11.3.4 Entrances and exits should be clearly marked. All aisles, stairways, landings reception areas, corridors and doorways allow safe access and egress, and are to be kept free from obstructions at all times.

11.3.5 Adequate external and internal lighting is provided.

11.3.6 Any difficulties relating to access or egress should be reported to the Unit Manager and rectified or referred to the appropriate third party (e.g. the Technical Services or Maintenance Department).

11.3.7 Wheelchair ramps are provided at main entrances and exits.

11.3.8 Extra wide doorways are provided for wheelchair accessibility.

11.3.9 Carpets, tiles and floors are maintained in good condition and are free from damage, which could cause employees and patrons to slip, trip or fall.

11.3.10 Steps or stairways are maintained in good sound condition to afford protection from slips, trips and falls. Handrails are available on all staircases and adequate lighting is also provided.

Keep external traffic routes free from obstructions
Keep pathways free from algae, leaves etc
Cut back /control plants and trees that overhang pathways
Trailing cables??/

An accident involving slips/trips or falls can result in a serious personal injury resulting in much physical and psychological pain for an individual.

Control Measures:

11.4.1 All spillages, including wet floors, must be restricted from further increasing the risk of a slip, trip or fall by use of 'wet floor' cones. All spillages to be wiped up as soon as possible.

11.4.2 All employees must wear suitable, non-slip, enclosed footwear, whilst carrying out their duties.

11.4.3 Non-slip flooring should be used in the bathroom, toilet and kitchen areas.

11.4.4 Non-slip mats shall be provided at all entrances if required. Loose mats and rugs must not be used.

11.4.5 Floor washing should be carried out at end of day and if required more frequently, when other staff and service users are not in the area in question. Regular cleaning of floor surfaces is included in the Centre Cleaning Schedule. Suitable cleaning materials appropriate to the floor surfaces should be used.

11.4.6 Corridors, passageways and doorways must be kept clear of obstructions at all times.

11.4.7 Staff should take additional care when walking on play-mats.

11.4.8 A system should be in place regarding the reporting of any defects (including any loose, uneven or damaged flooring) to the Maintenance Department, and the Manager/Head of Unit shall ensure that all reported defects are addressed and rectified.

11.4.9 In the event of a slip, trip or fall occurring; the Risk Assessment shall be reviewed and corrective action to prevent re-occurrence shall be taken.

11.4.10 All Service Users with epilepsy should be supervised while taking baths. The level of supervision required may vary depending on the severity of the epilepsy, and the independence of the Service User (conduct a Risk Assessment to determine precise control measures required).

In accordance with the Safety, Health and Welfare at Work (General Application) Regulations, 2007 and Machinery Regulations 2008. The associated risks with the machinery and equipment include; danger of injury resulting from contact with moving parts, electric shock.

Control Measures:

11.5.1 All new equipment being purchased must be assessed to ensure so far as is reasonably practicable, that they are without significant hazard, appropriate to the task intended and take account of the relevant EC/EU Technical Standards Directives, and where applicable, EN standards. Such work equipment must be 'CE' marked. Where there is no relevant EN standard, work equipment must comply with the minimum requirements of the Machinery Regulations 2013.

11.5.2 Regular appropriate maintenance must be carried out on all work equipment and machinery. Records must be kept in the Unit of all maintenance carried out. In the case of equipment requiring statutory inspection these may include; hoists and lifts, cranes and other lifting machines, steam boilers and air receivers. Inspections must be carried out on an annual basis and records of inspection must be kept in the Unit.

11.5.3 Employees must receive appropriate information, instruction and training in the hazards associated with and the safe use of such equipment and machinery.

11.5.4 Risk Assessments must be carried out for all work equipment and machinery. Guidance on completing Assessments is contained in Section 10 of the St. Michael's House Safety Statement.

11.5.5 All equipment should be serviced annually by an authorised contractor and documentation of annual services kept together in a separate folder, where they can be easily accessed and/or inspected. This includes hoists, high-low beds, other mechanical assistive equipment, electrical pallet trucks, fire extinguishers, safety equipment on buses and other equipment.

11.5.6 Fixed heating installations should be used rather than portable equipment, where possible. If portable heaters are provided, they must stand on a non-combustible surface. Portable heaters, especially fan and bar type units, should be treated as high-risk items and at no time left unsupervised. They should be protected by guards fixed to the wall or floor. Follow the manufacturer's instructions.

11.5.7 Register/inventory of equipment on site should be maintained and in particular details of servicing and certificates of conformance should be kept on site for inspection.

11.5.8 All machinery and equipment shall be regularly inspected at Unit level, at least on a monthly basis. The PIC/manager/co-ordinator/Department Head is responsible for ensuring such inspections take place.

11.5.9 Ensure good air-circulation around machines and housekeeping standards are maintained. Keep combustible materials at a safe distance from machinery. Moving machine parts shall be guarded to prevent access while operating. Safeguards should comply with relevant standards, should be of durable material, firmly secured and not create any new hazards.

11.5.10 All machinery and equipment is subject to routine servicing and regular maintenance and inspection by a qualified and competent person based on a preventative maintenance schedule.

11.5.11 The PIC/manager/co-ordinator/Department Head is responsible for co-ordinating the servicing of machinery.

11.5.12 Any defects shall be reported to the Manager, who shall implement any additional control measures required to prevent injury or harm and ensure that the defect is reported to and rectified by a competent person.

11.5.13 No employee will operate equipment or machinery unless they have been trained /instructed on how to do so.

St. Michaels House recognises that working with people with intellectual disability and supporting them to reach their potential is rewarding both for staff and for individual service users. Additionally St Michael's House recognises that while the majority of challenging behaviour poses no physical risk to staff, there is occasionally the potential for physical injury. Therefore a number of key control measures / supports have been identified to minimise the risk, which are detailed below.

Control Measures:

11.6.1 SMH have in place a detailed Positive Behaviour Support Policy [2013]. The roles and responsibilities of all staff in relation to this Policy are outlined in Appendix 3, which all staff must follow.

11.6.2 PICS must ensure that staff are familiar with the Positive Behaviour Support Policy and that it is implemented locally.

11.6.3 All Staff receive training on this policy as part of their induction Training

11.6.4 All Staff working directly with Service Users must attend the QQI Level 5 training on Positive Behaviour Support developed and run collaboratively by the Psychology Department and the Open Training College.

11.6.5 Staff working with Service Users whose behaviour may have a risk of injury are offered further training in Physical Intervention. Therapeutic Interventions Promotion Safety (TIPS) if working with adults or CALM if working with children

11.6.6 Each Centre has access to the support of a Multidisciplinary Team allocated to their relevant cluster to support local staff in supporting and managing Service Users with Challenging Behaviour

11.6.7 Where required, Positive Support Behaviour guidelines or Multi-Element Positive Behaviour Support Plans are drawn up by the Clinic Team to assist staff in supporting positive behaviour of Service Users. These guidelines and plans outline both proactive and reactive strategies for the management of challenging behaviour.

11.6.8 Positive Support Behaviour Guidelines are reviewed on a regular basis, annually as part of an individual's Person Centred Plan and following a significant behavioural incident and then updated as required

11.6.9 Regular meetings are held involving the Multidisciplinary Team to assist local staff in the planning and implementation of behaviour management programmes

11.6.10 Local Staff monitor behaviours regularly and record issues on the appropriate forms as recommended by the relevant Psychologist to measure frequency and duration of behaviours so that any significant trends can be identified and new interventions can be put in place

11.6.11 Staff complete Challenging Behaviour e-forms for incidents of Challenging Behaviour. These forms are analysed and reviewed by the organisations Positive Behaviour Support and Quality and Safety Committees.

11.6.12 Support structures are in place [see Appendix 5 & 7 of the PBS Policy] for staff and service users who are affected by the Challenging behaviour of others

This section deals with the concept of 'external' workplace violence and generally covers insults, threats, physical or psychological aggression exerted by people outside the organisation, against a person at work that endangers their health, safety or well-being. Associated risks include de-motivation, loss of confidence, anxiety, stress, and injury to physical or psychological health.

Control Measures:

11.7.1 Control measures relating to the work place environment are implemented (physical security measures, including adequate lighting, reception desks, emergency exits, out-of-hours contacts, regular security monitoring, alarms systems etc).

11.7.2 Control measures relating to work organisation and job design shall be considered and implemented, where necessary. Measures include the avoidance of lone working and where this is not possible, ensuring contact systems are in place. Also, accompanying staff where necessary, and ensuring appropriate staffing levels are in place.

11.7.3 Control measurers relating to staff training and information shall be considered and implemented, where necessary (how to recognise early signs of aggression; management of difficult situations; the need to follow procedures set up to protecting employees such as, how to apply security instructions, breakaway techniques, instruction in emergency procedures and emergency contact numbers).

11.7.4 After violent incidents: the primary aim is to prevent further harm and limit the damage suffered. It is important:

- Not to leave the worker who has been a victim of violence, or witnessed an act of violence, alone in the hours following the events.
- That senior management are sympathetic, become involved and support the victim.
- To provide the victim with psychological support immediately, and later on in the event of post-traumatic stress, i.e. debriefing, counselling, etc.
- To provide the victim with supports for administration and legal procedures (e.g. reporting)
- To inform the other workers to avoid spreading rumours.
- To review Risk Assessments to identify what additional measures are necessary.

11.7.5 These incidents should be fully investigated, with a 'no blame' environment for the victim. The facts should be recorded, including incidents of a psychological nature, and an assessment made of how the incident happened in order to be able to improve prevention measures.

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In accordance with the Safety, Health and Welfare at Work (General Application) Regulations 2007. St. Michael's House is committed to protecting the safety and health of employees who habitually use display screen equipment (VDUs) as a significant part of their normal work.

The following control measures are in place for employees covered by these regulations:

Control Measures:

11.8.1 All employees who are defined as habitual DSE users' have a work station assessment carried out by a competent person

11.8.2 Where recommendations are made by the ergonomic assessor, corrective action shall be taken by the Departmental Manager.

11.8.3 St. Michael's House will make available suitable and appropriate eye and eyesight test, carried out by a competent person to those employees while working at VDU's at regular intervals.

11.8.4 If special corrective appliances are required exclusively for working with a VDU, the basic cost shall be met by St. Michael's House.

11.8.5 All new workstation components (chair, keyboard, display screen, desk etc.) shall meet minimum standards laid down in the above-mentioned VDU Regulations.

11.8.6 All new buildings shall meet the requirements laid down in the VDU Regulations relating to lighting, heat, humidity etc.

11.8.7 Work is arranged so that VDU users can take regular breaks and have changes of activity.

As part of service provision, St. Michael's House provides transportation for Service Users to enable them to access the community as much as is practicable. This is facilitated in two specific ways.

Central Transport is managed by the Transport Operations Manager, which provides daily collection of Service Users from their respective homes to the day/respite services and return journey as needed. . Escorts are provided on buses to attend to Service Users where required.

Unit Transportation. Unit Teams undertake driving duties including transportation of Service Users to and from their respective day service as well as at weekends and evenings to enable Service Users access the community.

Control Measures:

11.9.1 All Staff must read and familiarise themselves with the organisations Driving For Work Policy and Driver Handbook where applicable.

11.9.2 Provide support and advice to Persons In Charge/Managers on procurement and selection of vehicles to ensure suitability for the type of work and service users requirements.

11.9.3 A Comprehensive Vehicle preventative maintenance programme is in place, which is co-ordinated by central transport dept

11.9.4 All Vehicles are provided with appropriate and suitable safety belts, which must be worn by all travelling on the bus.

11.9.5 Frontline Staff who are carrying out driving duties must successfully complete insurance requirements questionnaire form and an in-house driver assessment programme on initial driving a St. Michael's House vehicle.

11.9.6 Further driver assessment can be carried out when requested or where required.

11.9.7 Central transport staff in addition must maintain to CPC responsibilities. Copies of current driver licences are held on file with insurance questionnaire on site for inspection.

11.9.8 Drivers carryout and tick journey logbook to confirm completion of daily checks and complete the weekly checklist for buses and notify the Transport Department of any issues.

11.9.9 Drivers must adhere to the rules of the road at all times and drive within the speed limits and to the speed dictated by conditions, which can be less than the limit.

11.9.10 Drivers must comply with St. Michael's House Policies including Driving for Work', 'Mobile Phone Usage' and 'Consumption of Alcohol and Drugs when driving at St. Michael's House'

11.9.11 Drivers must report any collisions or incidents to the relevant Head of Unit and complete the St. Michael's House e-form and Motor incident form as appropriate and cooperate in any investigations related to Road Traffic Incidents

11.9.12 Seating plan is put in place on the bus if required and staff must adhere to this when groups are travelling together.

11.9.13 Ensure all staff are fully aware of the unit contingency plan and what action they need to take in an emergency when they are travelling on the bus.

11.9.14 Staff are provided with Hi-Vis jackets/waistcoats to wear when visibility is poor.

11.9.15 Transport information record forms are completed by HOU for all Service Users travelling on transport and maintained on the bus. These are reviewed on a yearly basis and all relevant staff informed of changes.

11.0 Hazard Identification & Risk Assessment

St Michaels House recognises that Manual Handling activities can be an important element of service delivery and the management of this is essential to maintaining a healthy and safe work environment for Staff and Service Users alike. St Michael's House through its Risk Assessment Programme, Assistive Equipment Management System and Staff Training Programme seeks to avoid or reduce Manual Handling activities wherever possible within the Service.

In accordance with the Safety Health and Welfare at Work (General Applications) Regulations 2007 St Michaels House recognises its obligations to firstly avoid the need for Manual Handling and where this cannot be avoided put in place key guidelines for our Services to adhere to.

The primary manual handling tasks within St Michaels House involve the care of Service Users due to the complexity of their conditions. Therefore there can be risks to employees resulting in back and other musculoskeletal injuries

Control Measures:

11.10.1 All staff must read and familiarise themselves with the St. Michael's House Manual Handling Policy and must comply with safe manual handling practises and guidelines

11.10.2 Assistive Equipment is provided to minimise the need for manual handling. and it is recommended that whenever possible it is used in preference to manual handling tasks Risk Assessments of all assistive equipment are carried out and staff must familiarise themselves and follow key controls

11.10.3 All PIC/Heads of Department must identity any activities that pose a risk of injury and ensure that they are addressed in the site specific and individual Manual Handling Risk Assessments where applicable. Consideration is given to Sensitive Risk Groups including Pregnant Employees

11.10.4 All Staff receive safe lifting techniques training at Induction and must follow safe manual handling guidelines at all times

11.10.5 Refresher training is provided every three years for all staff by the Manual Handling Instructor

11.10.6 All staff must wear flat, enclosed appropriate footwear with slip-resistant sole, suitable for the task to be carried out.

11.10.7 All Service User related lifting tasks are identified in the Person Manual Handling Risk Assessments and appropriate control measures put in place to minimise the risk

11.10.8 Manual Handling Instructors can provide advice (where applicable) to support Centre Teams in regards to complex manual handling issues

11.10.9 All HOU/Department Head should be aware of poor practise in manual handling and should remind employees of proper techniques whenever necessary.

11.10.10 Assistive equipment is checked prior to every use and is annually serviced and maintained. Any defect should be reported to the PIC immediately and equipment put out of use until it is repaired. Where this is not possible PIC should contact the OT Department to agree an interim plan.

11.10.11 Regular visual checks should be carried out on all moving and handling equipment including checking tyres, thumb screws, brakes, footplates of wheelchairs. Any defects must be reported to the PIC or Deputy to be rectified.

11.10.12 All hoist slings are visually inspected prior to use and any defects reported to the PIC. Any defective slings are removed from use immediately and the OT informed

11.10.13 All defects should be reported by staff as soon as possible and PIC should inform the appropriate Clinical Department who can work with the unit to put a contingency plan into action to take unsafe equipment out of use and provide a safe alternative until equipment is repaired/replaced

11.10.14 Staff are trained to use all relevant assistive equipment Any staff unsure of how to operate assistive equipment must notify their PIC/manager/co-ordinator immediately.

Practical Guidelines

Service User Moving and Handling

All Assistive Equipment must be selected with the involvement of the relevant Clinician, so as to take account of the Individual Service User's requirements and safety criteria

Maintenance programme is in place to ensure that assistive equipment is maintained in good working order. Larger assistive equipment / moving and handling devices must be thoroughly examined by a competent person and records maintained. St. Michael's House have in place an approved maintenance contractor to carry out this work.

Staff involved in Service User moving and handling by hoist with a service user are required to have training in the use of the hoist and sling by a competent person. Different hoists and accessories have different features and staff should receive the necessary instruction and information to use the equipment safely.

Individual Manual Handling Risk assessment must be carried out in relation to all Service User moving and handling needs, (where applicable) to determine if manual handling can be avoided and if not what controls are required to reduce the risk. Involve relevant Clinicians, Manual Handling Trainer and H&S, department where required. These Risk Assessments should be reviewed at least annually or as needs change.

Manual lifting/full body lifting of Service Users should be avoided at all times unless in a life threatening situation e.g. fire, risk of drowning or electrocution.

Staff should not attempt to 'catch' a falling person as this could pose a greater risk to all concerned.

Instruction on how to deal with this situation is covered in specific guidance ' Fallen Person' document and covered in detail on the manual handling training.

In the event that the Service User refuses to rise from the ground (whether in the community or in St. Michael's House premises) ,staff should make the Service User comfortable and contact HOU or senior staff for assistance. Instruction on how to deal with this situation is covered in specific guidance ' Fallen Person' and covered in detail on the manual handling training. The psychologist may also have provided guidelines to deal with this behaviour, staff must be aware and adhere to these

In the event of the service user falling and being unable to get up, staff should make the Service User comfortable and call an ambulance in addition to contacting the head of unit and family. Staff should not attempt to lift the fallen person.

St. Michael's House have a 'no linking policy' to ensure the safety of both Staff and the Service Users they support. HOU should seek advice from relevant clinicians (OT & Physiotherapy) regarding guidance on how to safely guide the Service User or what assistive equipment could help manage the situation.

Hoists should never be used to transport Service Users for any distance e.g. one room to another, except in some circumstances where they are designed to do so (e.g. ceiling tracking hoists). If in doubt, consult written guidelines, if available, or seek guidance from an occupational therapist.

When working with children, careful attention to posture is essential. Staff should facilitate children to move themselves whenever possible.

Inanimate manual handling and good housekeeping

Organise work practises to minimise manual handling and repetitive tasks.

Store heavy materials or goods at or near waist level, avoid repeated manual handling above shoulder and below the knee.

Loads should be carried for the minimum practicable distance. Trolleys or similar equipment to be used to transport load where necessary. Stepladder used to access items at a height see specific guidance in section 11.18

Mechanical aids such as pallet trucks, trolleys, forklift truck, electrical and gravity-controlled conveyors are provided where required. These should be used whenever required. All equipment should be checked prior to use and serviced on an annual basis/ as per manufacturer's instructions (more frequently if any defects or faults are noted). Regular checks are carried out and any defects reported to the HOU.

Staff are required to follow safe techniques at all times when carrying out manual handling tasks.

SUB-SECTION B: CHEMICAL HAZARDS

Detergents, bleaches and disinfectants are commonly used in St. Michael's House Units as part of environmental cleaning programme. In addition some of the workshop environments have usage for industrial chemicals on a very small scale. However, Chemicals have the potential to cause harm if handled and stored incorrectly by staff or come into contact with Service Users. Potential risks include burns, poisoning, accidental ingestion and dermatitis. To minimise the risk to Staff and Service Users the following precautions should be put in place (where appropriate)

Control Measures:

11.11.1 All chemicals shall be kept in locked cupboards and away from any ignition sources or foodstuffs.

11.11.2 Chemicals with a flammable symbol shall be stored separate to other chemicals.

11.11.3 Overstocking of chemicals shall be avoided.

11.11.4 Chemicals should never be moved from their original containers. They should always be kept in their original container with the original label intact.

11.11.5 Chemicals should never be mixed.

11.11.6 Particular care should be exercised regarding the usage and disposal of substances used for gardening (weedkiller etc). All gardening substances must be locked away and kept out of reach of Service Users.

11.11.7 Personal Protective Equipment shall be used, where required, and as directed by the product supplier/manufacturer.

11.11.8 The Unit/Department Head is responsible for ensuring that the MSDSs are obtained for all hazardous chemicals substances used, and these must be brought to the attention of staff using them.

11.11.9 Prior to the introduction of any new chemical, the Unit Head/Supervisor or Manager must provide the relevant MSDS to the Health and Safety Manager for approval, at least 2 weeks in advance.

11.11.10 All chemicals shall be handled, used, stored and disposed of as per the chemical label and/or the MSDS.

11.11.11 Consult St. Michael's House Environmental Hygiene Guidelines for information on recommended suitable products and usage.chemicals not covered in this policy.

Portable Medical Oxygen Cylinders and oxygen compressors are utilised throughout to provide a temporary uninterrupted portable oxygen supply to Service Users as part of their care plan in the home environment and out in the community. Risks associated with them include explosion, injury from physical contact and fires.

- No freestanding cylinders allowed, always place the cylinder in an appropriately designed holder: - i.e. appropriate trolleys with secured chains/storage bracket. If placed in a press (portable oxygen) the door of the press must be labelled accordingly
- Ensure the Oxygen cylinders are stored in safe secured area where they cannot fall over and cause injury. All spare cylinders stored in designated storage area
- When carrying portable oxygen cylinder in transport they must be secured as per manufactures instructions. Oxygen cylinders over a certain size carry additional instructions-these need to be adhered too
- Oxygen cylinders are rotated first in first out basis and stored in designated storage area with adequate ventilation Smoking is not permitted in the vicinity where cylinders are used or stored.
- All staff visually inspect cylinders before use any defects noted are reported to manager and cylinder taken out of use and collected by Medical Gases Company
- It is not acceptable to place portable oxygen cylinders at the back of wheelchairs
- Ensure labels remain clearly visible at all times. Label must not be removed or covered and unauthorised label must not fitted to cylinders.
- Copy of Summary of Product Characteristics (SPC) and Patient Information Leaflets (PIL) available to staff regarding safe handling of cylinder
- Keep cylinder away from flammable materials or soft furnishing as an oxygen leak could lead to oxygen enrichment of the materials making them vulnerable to ignite.
- A weekly check, need to be carried out by staff as per Appendix 4 SAM Policy -Auditing and Disposal of Medications

SUB-SECTION C: BIOLOGICAL HAZARDS

In accordance with the Safety, Health and Welfare at Work (Biological Agents) Regulations, 2013.

St. Michael's House aims to prevent the risk of infection by blood or body fluids through the provision of education, training and information about blood-borne diseases, the adoption and monitoring of good infection control practices, and through the widespread adoption of universal and standard precautions.

Blood-borne diseases include: Human Immunodeficiency Virus (HIV), Hepatitis C virus (HCV) and Hepatitis B virus (HBV)

St. Michael's House has a written policy for the management of persons who sustain needle-stick injuries, or exposures to blood or body fluids entitled "Guidelines for the management of Occupational

Blood Exposure (OBE) in St. Michael's House". All management and staff must familiarise themselves with this policy.

Control Measures:

11.12.1 Policy of Prevention:

- Guidelines are as per Department of Health Guidelines (February 2005 'The Prevention of Transmission of Blood-Borne Diseases in the Health-Care Setting''.
- Gloves shall be worn when there is a potential of exposure to blood, body fluids, non-intact skin of clients, or handling items contaminated with blood or body fluids.
- St. Michael's House has a policy to offer vaccinations to staff members against Hepatitis B, who are not naturally immune to infection with the Hepatitis B virus.
- The Hepatitis B vaccination programme is managed by a private occupational health service provider.
- Exposed or potentially exposed staff members are informed of the benefits of immunisation and the importance of testing for response to the vaccine, and are strongly encouraged to be vaccinated for their own protection, the costs of which will be met by St. Michael's House.
- Exposed staff members who decide not to be vaccinated against the Hepatitis B virus are required to sign a statement of fact that vaccination has been advised for their own protection, but that they have decided not to be vaccinated.
- It is advisable that female staff members who are pregnant, think they maybe pregnant or are planning to become pregnant are not vaccinated at this time. Advice should be sought from the maternity hospital and occupational health service.
- All cases of viral Hepatitis are statutorily notifiable contact Health & Safety Department/INC Nurse for advice.

11.12.2 Safe handling and disposal of sharps:

- In accordance with S.I. No. 135 of 2014, St Michael's House have introduced safety needles for the drawing of blood.
- A sharps injury is one in which there has been skin penetration by a sharp (needle, broken glass, scalpel, bite, etc.), which has been used on a patient or been in contact with a patient's body fluids.
- Avoid using sharps, where possible.
- The sharps bin shall be carefully and properly assembled. The persons assembling and closing the sharps bin shall sign the label on the sharps bin as indicated.
- The person closing the sharps bin shall ensure the lid is properly secured. Personnel will follow St. Michael's House Waste Management Policy in relation to the storage and collection of sharps.
- Sharps should not be passed from hand to hand.
- Do not keep syringes with needles attached in your pocket.
- Never re-sheath needles.
- All needles, syringes and sharps must be disposed of immediately into the sharps disposal bin provided. Never into refuse sacks.
- It is the personal responsibility of the person using a sharp to dispose of it safely.
- Discard needles and syringes as a single unit, where possible.
- Drop sharps into bin. Do not push down into bin or allow your hands or fingers past the level of the lid.
- Do not overfill sharps bins. Fill only to the marks indicated on the box or half-full. Close when half-full to prevent overfilling.
- Position the sharps bins in strategic, safe locations near to the users, where they will not be accidentally knocked over. Keep bins out of reach of children and vulnerable adults.
- Staff working with sharps or in areas where sharps are used, must wear closed-toe footwear at all times.

11.12.3 Summary of management of accidental exposure to blood or body fluids:

- Determine if exposure is significant.
- Initiate first aid measures immediately.
- Report the incident without delay to the Unit Head or the most senior person in charge.
- The person in charge will contact the Infection Control Nurse or Nurse-Manager-on-Call.
- The incident will be managed as per steps outlined in the "or exposures to blood or body fluids entitled "Guidelines for the management of Occupational Blood Exposure (OBE) in St. Michael's House".
- Follow-up counselling and support of the exposed person will be arranged by the Occupational Health Service Provider, and where necessary, the HR Department.

Treat the affected staff member as you would expect to be treated.
Remember that these incidents cause anxiety and worry.

Infection Control refers to keeping Service Users and Healthcare Workers in healthcare settings protected from infectious diseases. Staff have an important role to play in the prevention and control of infection.

Control Measures:

11.13.1 Hand washing is considered to be the most important means of prevention the spread of infection and its importance is emphasised throughout all the units in St. Michael's House. All staff should be familiar with St. Michael's House Hand Hygiene Policy

11.13.2 All staff must attend 'Hand Hygiene' training. Failure to attend training will be addressed under the HR 'Dignity at Work' policy.

11.13.3 Protective clothing and equipment i.e. single use disposable gloves are provided to protect staff from exposure to contamination from bodily fluids. Disposable gloves and aprons must be worn if contact with blood or bodily fluids are anticipated. These should be discarded as soon as the task for which they are worn is completed

11.13.4 All staff should be familiar with all St. Michael's House Policies and Guidelines around Infection Control.

11.0 Hazard Identification & Risk Assessment

At St Michaels House we must ensure that the food we prepare and serve is of highest quality, freshness and safe for consumption to safeguard the health and wellbeing of Service Users and Staff

Control Measures:

11.14.1 All planned construction work/renovation/alterations undertaken which has implications for Food Safety must take account of the St. Michael's House Food Safety Manual which details Environment and Equipment legislative requirements.

11.14.2 All Staff involved in food preparation and serving must read and follow the St. Michael's House Food Safety Manual which meets H.A.C.C.P requirements.

11.14.3 All Staff receive food hygiene training, commensurate with their duties.

11.14.4 In-house Team based training is carried out by In-house trainers.
Training is refreshed every 3 years.

11.14.5 Units must maintain records of key food checks including ie

- Fridge and Freezer daily temperatures
- Core food temperature checks of High Risk Foods (Meats, Fish, Poultry etc)
- Transportation checks of prepared foods (not sandwiches) - on departure and on receipt at destination

Records of all Food checks must be kept in the unit and available for inspection by EHO or other Parties where requested.

11.14.6 Each Unit shall maintain Cleaning schedule for all cleaning activities and monitor cleaning standards

11.14.7 All Staff involved in the preparation and serving of food shall follow the personal hygiene requirements as laid down in the Food Safety Manual including

- Wearing of appropriate protective clothing and headwear
- Washing of hands
- No jewellery (except for plain band and sleeper/stud earrings)

11.14.8 All Staff should use heat resistant gloves when handling hot substances

11.14.9 Staff who have

- symptoms of vomiting and diarrhoea
- an infection of the mouth, nose or ears
- an infectious skin disorder

must report this to their Manager and shall not be involved in food related duties.

11.14.10 Treat cuts, sores and grazes and cover with a washable dressing (blue)

11.14.11 Food thermometer should be used for checking core temperature of food. Probe must be calibrated annually or replaced.

11.14.12 Colour coded chopping boards are provided and staff must use appropriately when preparing foods.

11.14.13 Medicines that require refrigeration must not be stored in the kitchen fridge. A separate locked temperature controlled refrigeration unit must be provided on site (away from the kitchen) for this purpose - in adherence with St Michaels House Storage, Audit and Disposal of Medications Policy

Clinical waste is defined as the solid or liquid waste arising from healthcare. The associated risk to employees is that of acquiring an infectious disease transmitted via blood or body fluids

All staff should be familiar with St. Michaels House Waste Management Policy

Control Measures:

11.15.1 The four categories of waste identified in St Michaels House are:

- **Sharps**: For the disposal of used sharp instruments or items, e.g., needles and syringes
- **General Infectious Waste:** Blood and any items visibly soiled with blood, e.g., swabs, wound dressings.
- **Medication:** Medications that are no longer in use, out-of-date or require disposal for any other reason.

  If there is liquid medication for disposal St. Michael's House nominated contractor will provide disposal bin for bottles on collection.
- **Chemicals:** These refer to industrial chemicals, such as those used in the workshops, and not to normal household chemicals.

11.15.2 These waste streams must be collected and segregated in appropriate colour coded containers supplied by St. Michael's House nominated contractor as follows:

Waste Category	Container Type and Colour	Container Lid Colour
SHARPS	Yellow Rigid Bin	Blue or Red Lid
Medicines & Chemicals For Disposal	Yellow Rigid Bin	Purple Lid
Infectious Waste	Yellow Bag	_____

11.15.3 The transfer of sharps boxes containing used sharps by vehicle is not authorised

11.15.4 Nappies are not classified as clinical waste unless contaminated with blood or hazardous body fluids or if a Service User has, or is suspected to have an infectious disease, e.g. infectious diarrhoea.

The Organisation recognises its duty to identify all hazards, assess the risks and put measures in place to avoid or control the risks as per Section 19 of the *Safety, Health and Welfare at Work Act 2005* and the Safety Health and Welfare at Work (General Application) Regulations 2007.
However, all employees have a responsibility to take reasonable care of their own safety, the safety of others and to co-operate with the Employer. Employees should not knowingly place themselves in situations which exposes them to additional risk by working alone, and without the full knowledge of their line Manager.

Control Measures:

11.16.1 All Staff involved in lone working activities must read and follow the St. Michael's House Lone Working Policy .

11.16.2 Staff working alone are briefed on local lone working protocols at Centre level on the risks involved in their work and contingency plan in place

11.16.3 All employees are trained in the safe use of equipment, the safe system of work and emergency procedures. All records to be documented and retained on file.

11.16.4 All staff have access to Emergency contact numbers, including doctor-on-call and nurse-manager-on-call when working alone Ensure that employees who work alone have access to sufficient PPE (including alarms) and means of communication (e.g. in activity alarm, mobile phone) in the case of an emergency where required.

11.16.5 Staff working alone receive training and/or instruction on how to respond in emergency situations

11.16.6 Ensure that any issues reported by employees is documented, investigated and corrective actions undertaken.

11.16.7 Ensure that all the relevant trained staff undertake regular reviews of hazards and associated risks to make sure that all measures are effective and continue to meet the requirements of the lone worker.

11.16.8 See *Lone working policy and guidance*

11.0 Hazard Identification & Risk Assessment

St Michaels House recognises the impact of workplace stress and has developed a policy, which is included in Section 5 .10 of the Safety Statement.

Stress at work results from the interaction between an aspect or many aspects of the working environment and the individual concerned. Head of Units should have a Risk Assessment in place to demonstrate how stress in the workplace is managed to minimise risk to staff.

Control Measures:

11.17.1 St. Michael's House have in place a rigorous through the recruitment policy and procedure which is followed for filling all vacancies See HR Policies and Procedures Manual, Section 2.1 ' Recruitment and Selection Policy and 2.2 'Probation Policy'

11.17.2 Appropriate training is provided for staff through the St. Michael's House Training Programme to equip them to carryout their duties effectively

11.17.3 St. Michael's House has in place a proactive structure to deal with grievances concerns regarding Bullying and Harassment. See HR Policies and Procedures Manual; Section 3.1 'Dignity at Work Policy'.

11.17.4 Clear detailed role descriptions are in place for front line positions in the organisation to decrease ambiguity around jobs/roles

11.17.5 PIC/managers/co-ordinators have regular role reviews and feedback to personnel through Support Meetings

11.17.6 St. Michael's House encourage staff to take Opportunities for career development

11.17.7 Changing the design of work where stress levels have been identified as too high

11.17.8 Job rotation opportunities are available so that personnel are altering between different jobs

11.17.9 Flexibility in working conditions. See HR Policies and Procedures Manual, Section 6.

11.17.10 St Michaels House provide Employee Assistance Programme through our Occupational Health Provider which staff can access.

11.17.11 Ensuring Risk Assessments have been carried out on all aspects of our workplace to safeguard our staff, service users and all who come in contact with our service

11.17.12 St. Michael's House Workplace Stress policy and guidelines section 4.12 detail the supports and initiatives that can be put in place to minimise the effects on staff.

11.17.13 St. Michael's House provide a comprehensive support structure for any staff involved in a significant incident (which may or may not involve a physical injury) and for any staff who may need additional support from working in an environment of high challenging Behaviour on an ongoing basis.

- **Immediate Support** - support from colleagues, time out from the situation, or short term support from the Head of Unit and Clinical Team
- **Long Term Support** through the St. Michael's House Occupational Medical Provider The appropriateness of the support will be decided on an individual basis reallocation to a different area/unit.

See Section 5.10 Stress Policy, 11.06 Challenging Behaviour

St. Michael's House acknowledges that working at a height does occur on occasion and certain precautions need to be taken to ensure the safety of those carrying out the work and anyone who may be affected by the work activity.

Work at height, is work in any place, including a place at, above or below ground level, where a person could be injured if they fell from that place. This can also include means of access and egress to a place of work.

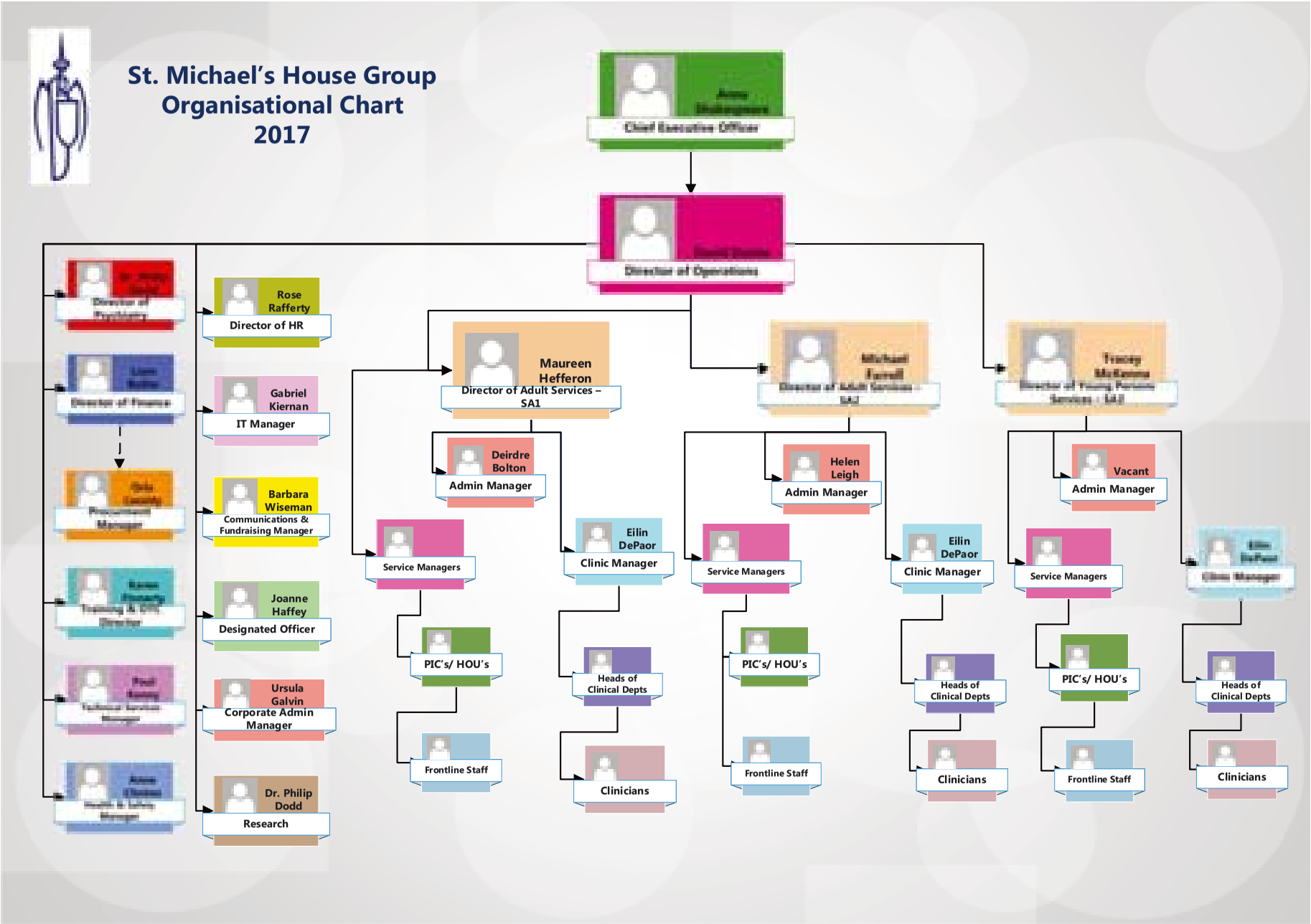
St. Michael's House will work in accordance with the General Application Regulation
Part 4: Working at Height regulations.

- Work at a height should be avoided where at all possible.
- Ensure that all work at height is properly planned, organised and supervised at all times
- A safe system of work should be developed if it is a regular occurrence and poses a risk of personal injury
- Ensure that all necessary equipment is available for use when working at a height and that it is properly maintained with service records available for review
- Always inspect equipment before use
- If appropriate equipment for working at a height is not available then work should not commence and an outside competent contractor sourced if that is deemed the necessary course of action.
- Ensure the area where work at height is done is safe
- Ensure the risk from work on fragile surfaces is properly controlled
- Ensure all work at height takes account of weather conditions
- Where necessary ensure those that are working at a height are properly instructed and trained
- Ensure injury from falling objects is prevented
- There should be no improper conduct or horseplay when working at a height
- All staff should ensure they follow all precautions that are in place and adhere to any local dept/unit guidance that is place regarding working at a height

Appendices

Appendices 12.0

APPENDIX 1: ORGANISATIONAL HEALTH AND SAFETY CHART



APPENDIX 2: SAMPLE FORMS

All health and safety record templates are available on the intranet where they can be downloaded. Any queries contact the Health and Safety Department.

- Sign off sheet for Safety Statement
- Site Specific Safety Statement Template
- Risk Assessment Template
- Risk Assessment Review sign off sheet
- Pregnancy Risk Assessment Template
- Health and Safety inspection Checklist
- Person Manual Handling Risk Assessment Form
- Register of Assistive Equipment Template
- Lone Working Checklist
- Accident Protocol
- Accident reporting instruction sheet
- First Aid Kit Content List
- H&S Audit Action Plan Template

CLINICAL/RISK WASTE

1.0 Sharps

For the disposal of used sharp instruments or items, excluding cytotoxic waste.

Examples: needles, syringes, sharp end-tips of intravenous sets; broken glass and cartridges, stitch cutters and razors.

2.0 General infectious waste

Blood and any items visibly soiled with blood

Examples: swabs, tissues, wound dressings, disposable aprons, gloves, soft disposables.

2.2 Contaminated waste from Service Users with transmissible infectious diseases

Examples: suction catheters; tissues or sputum containers from patients with Tuberculosis.

2.3 Incontinence wear/nappies from Service Users with known or suspected infectious diseases or illnesses

Examples Infective diarrhoea, Salmonella, Hepatitis.

2.4 Items contaminated with body fluids other than faeces, urine or breast milk

Examples: suction containers, suction tubing and other suction related equipment; gowns, gloves, tissues.

N.B: Bagged material shall not contain any free liquids nor any item, which may tear the bag e.g. glass or sharp edged items etc.

3.0 Chemical Waste

Refers to pharmaceutical waste and discarded chemicals.

Examples: **Medicines for disposal** (medicines that are no longer in use, out-of-date or require disposal for any other reason).

Discarded chemicals refer to industrial chemicals, such as those used in the workshops, and not to normal household chemicals.

NON-RISK WASTE:

1.0 Potentially offensive material

Which is assessed as non-infectious i.e. not contaminated with blood or hazardous body fluids.

Examples: incontinence wear, stoma bags, urinary drainage bags/tubing,/catheters, eg tubes; unless visibly stained with blood.

Note: Nappies/incontinence wear should be double-bagged and securely tied. This waste can be disposed of as normal domestic waste thereafter (unless the client has a known or suspected infectious disease).

2.0 Medical equipment

Examples: oxygen tubing, oxygen facemasks, enteral feeding bags, administration sets and I.V. solution bags (excluding sharp tips which should be discarded into yellow sharps boxes.

3.0 Domestic waste: Refers to normal household and catering waste e.g. newspapers, aerosol cans.

4.0 Confidential material: Includes shredded waste documents of a confidential nature.

SEGREGATION OF CLINICAL (RISK) WASTE

Waste Category	Container type and colour	Container Lid colour
Sharps	Yellow Rigid Bin	Blue or Red Lid
Medicines & Chemicals for Disposal	Yellow Rigid Bin	Purple Lid
Infectious Waste	Yellow Bag	———

APPENDIX 5: HSE RISK ASSESSMENT TOOL

1. IMPACT TABLE

	Negligible	Minor	Moderate	Major	Extreme
Harm to a Person	Adverse event leading to minor injury not requiring first aid. No impaired Psychosocial functioning.	Minor injury or illness, first aid treatment required. <3 days absence. <3 days extended hospital stay. Impaired psychosocial functioning greater than 3 days less than one month.	Significant injury requiring medical treatment e.g. Fracture and/or counselling. Agency reportable, e.g. HSA, Gardaí (violent and aggressive acts). >3 Days absence. 3-8 Days extended hospital Stay. Impaired psychosocial functioning greater than one month less than six months.	Major injuries/long term incapacity or disability (loss of limb) requiring medical treatment and/ or counselling. Impaired psychosocial functioning greater than six months.	Incident leading to death or major permanent incapacity. Event which impacts on large number of service users or member of the public. Permanent psychosocial functioning incapacity.
Service User Experience	Reduced quality of service user experience related to inadequate provision of information.	Unsatisfactory service user experience related to less than optimal treatment and/or inadequate information, not being to talked to & treated as an equal; or not being treated with honesty, dignity & respect – readily resolvable.	Unsatisfactory service user experience related to less than optimal treatment resulting in short term effects (less than 1 week).	Unsatisfactory service user experience related to poor treatment resulting in long term effects.	Totally unsatisfactory service user outcome resulting in long term effects, or extremely poor experience of care provision.
Compliance (Statutory, Clinical, Professional & Management)	Minor non compliance with internal PPPGs. Small number of minor issues requiring improvement.	Single failure to meet internal PPPGs. Minor recommendations which can be easily addressed by local management.	Repeated failure to meet internal PPPGs. Important recommendations that can be addressed with an appropriate management action plan.	Repeated failure to meet external standards. Failure to meet national norms and standards/ Regulations (e.g. Mental Health, Child Care Act etc). Critical report or substantial number of significan finding and/or lack of adherence to regulations.	Gross failure to meet external standards. Repeated failure to meet national norms and standards/regulations. Severely critical report with possible major reputational or financial implications.
Objectives/Projects	Barely noticeable reduction in scope, quality or schedule.	Minor reduction in scope, quality or schedule.	Reduction in scope or quality of project; project objectives or schedule.	Significant project over-run.	Inability to meet project objectives. Reputation of the organisation seriously damaged.
Business Continuity	Interruption in a service which does not impact on the delivery of service user care or the ability to continue to provide service.	Short term disruption to service with minor impact on service user care.	Some disruption in service with unacceptable impact on service user care. Temporary loss of ability to provide service.	Sustained loss of service which has serious impact on delivery of service user care or service resulting in major contingency plans being involved.	Permanent loss of core service or facility. Disruption to facility leading to significant 'knock on' effect.
Adverse Publicity/ Reputation	Rumours, no media coverage. No public concerns voiced. Little effect on staff morale. No review/ investigation necessary.	Local media coverage – short term. Some public concern. Minor effect on staff morale/public attitudes. Internal review necessary.	Local media – adverse publicity. Significant effect on staff morale & public perception of the organisation. Public calls (at local level) for specific remedial actions. Comprehensive review/investigation necessary.	National media/adverse publicity, less than 3 days. News stories & features in national papers. Local media – long term adverse publicity. Public confidence in the organisation undermined. HSE use of resources questioned. Minister may make comment. Possible questions in the Dáil. Public calls (at national level) for specific remedial actions to be taken possible HSE review/investigation.	National/International media/adverse publicity, > than 3 days. Editorial follows days of news stories & features in National papers. Public confidence in the organisation undermined. HSE use of resources questioned. CEO's performance questioned. Calls for individual HSE officials to be sanctioned. Taoiseach/ Minister forced to comment or intervene. Questions in the Dáil. Public calls (at national level) for specific remedial actions to be taken. Court action. Public (independent) Inquiry.
Finance	0.33% budget deficit	0.33-0.5% budget deficit	0.5-1.0% budget deficit	1.0-2.0% budget deficit	>2.0% budget deficit
Environment	Nuisance Release.	On site release contained by organisation.	On site release contained by organisation.	Release affecting minimal off-site area requiring external assistance (fire brigade, radiation, protection service, etc.).	Toxic release affecting off-site with detrimental effect requiring outside assistance.

2. LIKELIHOOD SCORING

Rare/Remote (1)		Unlikely (2)		Possible (3)		Likely (4)		Almost Certain (5)	
Actual Frequency	Probability	Actual Frequency	Probability	Actual Frequency	Probability	Actual Frequency	Probability	Actual Frequency	Probability
Occurs every 5 years or more	1%	Occurs every 2-5 years	10%	Occurs every 1-2 years	50%	Bimonthly	75%	At least monthly	99%

3. RISK MATRIX

	Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Almost Certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Rare/Remote (1)	1	2	3	4	5

Glossary of Terms

Accident an unplanned event that results in an undesired consequence e.g. **injury, ill-health**, damage to the environment, damage to or loss of property, plant and materials.

Access: Entrance to a building/area or workplace.

Approved Code of Practice: A standard, a specification, and any other written or illustrated form of practical guidance, instruction or control, issued or approved by the Health and Safety Authority.

Contractor means a person or firm who contracts to supply materials (any machinery, appliance, apparatus, tool or installation for use at work as defined by General Applications Regulations 2007) or labour

Competent Person A person is deemed to be a competent person where, having regard to the task he or she is required to perform and taking account of the size or hazards (or both of them) of the undertaking or establishment in which he or she undertakes work, the person possesses sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken (Safety, Health and Welfare at Work Act 2005)

Dangerous Occurrence The uncontrolled release or escape of any substance or agent, in circumstances liable to cause damage to the health of , or major injury to any person, is a notifiable dangerous occurrence.

Employee means a person who has entered into or works under (or, where the employment has ceased, entered into or worked under) a contract of employment and includes a fixed-term employee and a temporary employee and references, in relation to an employer, to an employee shall be construed as references to an employee employed by that employer (Safety, Health and Welfare at Work Act 2005)

Employer in relation to an employee-
(a) means the person with whom the employee has entered into or for whom the employee works under (or, where the employment has ceased, entered into or worked under) a contract of employment,
(b) includes a person (other than an employee of that person) under whose control and direction an employee works, and
(c) includes where appropriate, the successor of the employer or an associated employer of the employer; (Safety, Health and Welfare at Work Act 2005)

Egress: Means of exiting a building/area or workplace.

Ergonomics: The scientific study and analysis of the human, the machine, and/or working environment interface and an investigation of those elements in the system that affect optimum human performance on a given task or set of tasks. Ergonomics is concerned with the design of objects, systems and environments, for human use.

First-Aid: First-Aid is the immediate treatment given in life threatening situations (e.g. heart stoppage or severe bleeding) pending the arrival of medical help; or the treatment for minor injury (e.g. cuts, bruises etc.).First-Aid does not involve the administration of medicines,.

HSA: (National Authority for Occupational Safety and Health in Ireland) is the national body charged with overall responsibility for promotion of occupational safety and health and for the administration and enforcement of the relevant statutory provisions on safety and health.

Hazard: anything that has the potential to cause harm on a person/persons

Intoxicant includes alcohol and drugs and any combination of drugs or of drugs and alcohol (Safety, Health and Welfare at Work Act 2005)

Near Miss: An occurrence that had the potential to result in serious injury, damage, or both, but didn't either by chance or timely intervention

Manual Handling: Any transporting or supporting a load by one or more employees, and includes lifting, putting down, pushing, pulling, carrying or moving a load, which, by reasons of its characteristics or of unfavourable ergonomic conditions, involves risk, particularly of back injury, to employees (HSA).

Means of Escape: Structural means whereby a safe route is provided for persons to travel unaided from any point in a building to a place of safety.

Safety Representative means a person selected and appointed under section 25 as a safety representative (Safety, Health and Welfare at Work Act 2005)
Personal Protective Equipment (PPE): Means all equipment (including clothing) which is intended to be worn or used by a person at work and which protects him/her against one or more risks to his/her health and safety, and any addition or accessory designed to meet that objective. For example: gloves, eye protection, ear plugs/muffs, safety footwear, , high visibility clothing, safety helmets etc.

Policy: A statement of an Organisation's strategy for achieving a safe and healthy working environment and the responsibility, organisation and arrangements for pursuing and implementing the strategy.

Risk: The combination of the likelihood and consequence of the hazard occurring.

Risk Assessment: A formal estimation of the likelihood that persons may suffer injury or adverse health effects as a result of identified hazards.

Risk Matrix: Tool for ranking and displaying risks by defining ranges of consequences and likelihood

Risk Rating: the estimated level of risk taking into consideration the existing controls in place

Risk Management: The introduction of a change or control measures with the intention of eliminating or bringing the level of risk associated with a hazard within acceptable limits.

Safe System of Work: A safe system of work is a formal procedure which results in the systematic examination of a task in order to identify the hazards and assess the risks, and which identifies safe methods of work to ensure the hazards associated with the task are either eliminated or minimised.

Safety Audit: Monitoring of the implementation of a safety policy by subjecting each area of an activity to a critical systematic examination with the purpose of minimising loss, and providing a quantified assessment of performance.

Safety Culture: This term has no widely agreed definition. It may be described as a product of the individual and group values, attitudes, competencies and patterns of behaviour to determine the commitment to, and the style and proficiency of an organisations health and safety programmes.

Safety Inspections: Safety Inspections are a method of investigating the health and safety performance of an organisation (i.e. equipment, machinery, environment, processes etc.)

Safety Monitoring: Periodic checks on observance of corporate safety standards and procedures.

Safety Statement: A Safety Statements is an organisation's written programme for safeguarding the health and safety of all employees. It represents the employer's commitment to health and safety and should state how the employee's health and safety will be ensured, what necessary resources, equipment and procedures will be provided to prevent accidents and ill health in the workplace, while complying with the appropriate legislation (HSA).

SDS (Safety Data Sheet)/MSDS (Material Safety Data Sheet): Suppliers of chemicals and other materials used in the workplace must provide users with the appropriate safety information. The SDS gives the information required under prescribed headings on the safe use, handling and storage of a chemical and any other specific precautions to be taken with the chemical.

Welfare: Welfare facilities is a wide term embracing both sanitary and washing accommodation at workplaces, provision of drinking water, clothing, accommodation (including facilities for changing clothes) and facilities for rest and eating meals.

Workplace: The workplace may be described as any place where people are at work.

Principles of Prevention

The Health, Safety and Welfare at Work At Work Act 2005 schedule 3 outlines the key steps in the hierarchy of controls which the Employer is expected to follow when identifying means of treating / managing risks. These are as follows:

1. **Avoid the risk:**
   The first step in the hierarchy is to avoid or eliminate the risk so that people are protected and are not exposed to the risks e.g. the use of equipment to eliminate staff carryout manual handling tasks themselves.

2. **Evaluate unavoidable risks:**
   If it is not possible to avoid the risk then the risk must be assessed and the remaining principles worked through until the risk has been reduced to as low as is reasonably practicable; in most situations this will be through a combination of protective measures.

3. **Combat the risks at source:**
   This control tries to address the risk at its source. For example, if the floor is slippery because water is leaking from a machine, fixing the leak is combating the risk at source (rather than putting down mats or providing safety footwear).

4. **Adapt the environment to the individual:**
   This control tries to arrange the environment and activities to take into account the people who interact with the environment and to reduce any adverse effect of the environment e.g. habitual DSE users must have a workstation assessment and their workstation adjusted to their individual requirements where applicable.

5. **Adapt the activities in line with technical progress:**
   Safer systems of work are constantly being developed, for example equipment updates, technology, alert systems etc. This control promotes keeping up-to-date with new systems so that they can be employed.

6. **Replace dangerous systems with safer alternatives:**
   This control applies to dangerous articles, substances or systems; if there are safer alternatives then they should be used instead. For example, we use domestic type cleaning products rather than industrial strength products, less toxic, less corrosive etc.

7. **Give priority to collective protective measures:**
   By law it is preferable to put controls in place that protect everyone, than controls which only address one person's safety (e.g. handing out personal protective equipment that will only protect the person wearing it).

8. **Develop a Prevention Policy:**
   This Organisation must stipulate in their policies and procedures, how people in the setting/environment are going to be protected against the risks in the setting/environment. This control takes account of technology, work structures, working conditions, social factors and the influence of factors related to the working environment.

9. **Give Training and Instruction:**
   Once the risks have been assessed and controls decided on in line with the above principles, it is essential to the success of safety systems to communicate them effectively to all relevant stakeholders e.g. staff, service users and others, and to make sure that they are competent to interact with and work in the environment