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TITLE:

General Health and Safety SOP

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Summary of Contents:

Procedures and guidance in relation to the College's commitment and legal responsibility to ensuring the health, safety and welfare of its staff, students and others (visitors and contractors) so far as is reasonably practicable.

Date Created:
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Last CMT Approval Date:
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Responsible Owner
Head of Health and Safety

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Previous Reference (for control purposes):

065-09-2013: Fire Evacuation
063-09-2013: First Aid
034-06-2013: COSHH
078-01-2014: Animals on Campus
031-06-2013: New and Expectant Mothers
064-09-2013: Accident and Incident Reporting
038-06-2013: Notifiable Infectious Diseases
021-04-2013: Lone Workers
104.03-2014: Risk Assessment
173-12-2014: Health and Safety Audits

1.0   Background

1.1   The Principal and Chief Executive and Governing Body of South Eastern Regional College (SERC) accept their responsibility under regulation and legislation including the Health and Safety at Work Act 1974; the Management of Health & Safety at Work Regulations 1999; the Disability Discrimination Act 1995; the Regulatory Reform (Fire Safety) Order 2005; the Fire and Rescue Services (Northern Ireland) Order 2006; the Fire Safety Regulations (Northern Ireland) 2010 and the Health and Safety (First Aid) Regulations (Northern Ireland) 1982.

1.2   Although staff have day-to-day prime responsibility for safe working practices within the areas under their control, this does not preclude the responsibilities of all staff or students of their legal duties to safe working practices and a safe environment under the Health and Safety at Work (NI) Order 1978.

1.3   Staff and students have a duty to take reasonable care of their own health and safety and that of others who may be affected by their acts or omissions at work. To this end, staff and students should correctly use all work items and procedures provided in accordance with their training and the instructions they receive. Individuals should also understand the implications of ignoring their responsibilities as laid out in the SERC Health and Safety Policy, which may lead to disciplinary or legal action being taken against them.

1.4   This SOP acknowledges the College's duties under the Special Educational Needs and Disability Order (SENDO) 2005 and the Disability Discrimination Act 1995 (DDA) and the Disability Discrimination (NI) Order 2006 (DDO). However, where there is a conflict between the need to make reasonable adjustments and the duty of care, then Health and Safety will be the priority. Link to SERC Learning Support

2.0   Scope

2.1   The following procedural sections apply to SERC staff, students, visitors and contractors.
    Section 3   Fire Evacuation
    Section 4   First Aid
    Section 5   Control of Substances Hazardous to Health (COSHH)
    Section 6   Animals on Campus
    Section 7   New and Expectant Mothers

2.2   In addition to the above, the following procedures are applicable to staff:
    Section 8   Accident and Incident Reporting
    Section 9   Notifiable Infectious Diseases
    Section 10   Lone Workers
    Section 11   Risk Assessment
    Section 12   Health and Safety Audits

3.0   Fire Evacuation

3.1   __Introduction__

⟩ This section sets out procedures for the safe and quick evacuation of all students, staff, contractors and visitors from the campus in the event of a fire evacuation, fire drill or any other emergency. It also sets out the procedures for the development of Personal Emergency Evacuation Plans (PEEPs) to enable staff and students with disabilities to respond to an alarm and either leave the building or move to a designated place of safety within each building in an emergency without the direct intervention of the Fire and Rescue Service.

⟩ All staff must be given a fire safety briefing as part of the induction process. Staff must also complete mandatory Fire Evacuation online training.

⟩ All students must be given a fire safety briefing as part of the student induction process. All teaching staff must ensure that they have adequately covered fire evacuation procedures in their Health and Safety induction programme with students at the start of each term. For students who are confined to wheelchairs or have restricted movement, the lecturer must also provide a detailed personal emergency evacuation plan to each individual.

⟩ Outside theatre companies, individuals or organisations who hire or carry out performances involving the general public in any of SERC's premises/auditorium must be issued with Fire Evacuation instructions on booking and prior to any performance taking place.

⟩ All staff and students should be aware of the nearest fire escape route and any specialist Fire Evacuation Lifts (currently Downpatrick and Lisburn campuses only).

⟩ Notices will be clearly displayed to inform all visitors of the evacuation procedures.

⟩ This section is subdivided into:
Roles
Evacuation Procedure
Personal Emergency Evacuation Procedures (PEEPS)

3.2   Roles Relating to Fire Evacuation

- **All Staff Role**

⟩ Staff (full time and part time) whose escape route takes them through Reception **must** take on the role of Fire Marshall (bib wearer) immediately.

⟩ **The first staff member arriving at reception will take on the role of Evacuation Co-ordinator, wearing the Orange bib contained in the Red Fire Box** (see Appendix 1 for location in main campuses).

The Evacuation Co-ordinator (Orange bib wearer) should:

- Issue yellow bibs to staff members, designating them as Fire Marshalls.

- Issue Fire Marshalls with 'Walkie Talkie' communication devices from the Red Fire Box as deemed appropriate.

- Assign Fire Marshalls to duties – directing evacuees, manning Assembly Points, and ensuring no vehicles enter or leave car parks.

- Remain at the main door and direct all staff, students and visitors to the Assembly Points.

- Note the location of disabled students/staff/visitors, informing the emergency services as soon as possible.

- Make arrangements to have those individuals who are located at refuge points removed to the nearest fire assembly/safe point using EVAC chairs or "Fire Evacuation lift" NB Only those suitably trained in their use shall perform this operation.

- Time the procedure and record this and any other comments in the Fire Evacuation Report Form stored within the Red Fire Box located at reception. **NB:** Only one report form now required and to be completed by the Orange Bib Wearer on duty.

› **NB: Senior Management** should approach reception and offer assistance if required.

› There should be adequate Fire Marshalls (staff members wearing yellow bibs) to move evacuees safely away from the building to the Assembly Points, ensure that each Assembly Point is manned to check with lecturers that all students in their charge are safely accounted for; and to help prevent cars entering or leaving the car parks.

› In the event of a fault or false alarm, a member of College Management Team or Campus Management Team or other designated College staff (following liaison with the caretakers and NIFRS) will declare the building safe to re-enter.

› On completion of the Fire Evacuation, those staff Fire Marshalls (yellow bib wearers) directly involved in co-ordinating the evacuation of the building MUST report immediately any concerns or health and safety issues they may have observed during the evacuation to the Orange Bib wearer. The Orange Bib wearer will then complete the appropriate "Fire Report", found in the Red Fire Box or alternatively on the Health and Safety Team site in the Forms and Templates folder. On completion, the "Fire Report" must be forwarded to the College's Head of Health and Safety immediately via internal email.

- **Class Lecturer Role**

  › When in class or in charge of students, staff must evacuate rooms as quickly as possible, closing the door behind them (NOT locking them), escorting their students to the nearest Assembly Point and remaining there until further notice.

  › Class Lecturers must ensure that any Personal Emergency Evacuation Plans (see Section 5.4 re PEEPs) held by disabled students are implemented. Any disabled student not having a PEEP must be assisted down stairwells (where possible) and escorted to the nearest Assembly Point. If this is not possible, an EVAC chair should be used if trained to do so. SERC Staff members have been trained in the use of evacuation chairs and will be available to assist during an evacuation of the building. In the event of an EVAC chair not being available, they should be escorted to a fire-protected zone between two fire doors which is clearly marked as a Refuge Point and has a communication system linked to reception.

> Staff/carers must report such cases and the locations to the Evacuation Co-ordinator (red bib wearer) in reception. Class Lecturers must be able to account for all class members.

- **Reception Staff Role**

  > Reception staff should direct other staff to the Red Fire Box in reception, which contains Fire Marshall bibs and required and Walkie Talkie devices. **If safe to do so**, they should remain at the telephone switchboard until the alarm company calls, when they should inform them of a false alarm or a genuine emergency (as informed by caretakers) before evacuating the building.

- **Caretaker Role**

  > Caretakers should scrutinize the main fire panel and establish the location and reason for the activation of the alarm (break glass or smoke detector activation). They should then investigate if the alarm is a genuine emergency or a false alarm and advise the Evacuation Co-ordinator (Orange bib wearer) and Reception Staff. Before evacuating the building themselves, the caretakers may act as Fire Marshalls and sweep the building, (only if it is safe to do so), to ensure that it is clear. **They must never endanger themselves** or put their own lives at risk whilst sweeping the building.

  > Once the building has been evacuated, available caretakers can assist yellow bib wearers to ensure that no vehicles either leave or enter the car parks and that roadways are kept clear.

  > In the event of a planned fire drill, the caretakers may, on occasion, sweep each floor to ensure all occupants have left the building and all rooms have been left unlocked. Any evidence of occupants 'straggling' or not vacating rooms should be reported to the Evacuation Co-ordinator (Orange bib wearer).

  > Caretaking staff should reactivate the fire alarm panel on completion of the fire drill/evacuation.

- **NIFRS Role**

  > In the event of a fire, the Northern Ireland Fire and Rescue Service (NIFRS) will be responsible for tackling the fire and declaring the building safe to re-enter.

- **Head of Health and Safety Role**

  > The Head of Health and Safety will have the responsibility for evaluating the fire evacuation of the building from the Fire Report submitted by the Orange Bib wearer. The Head of Health and Safety may introduce corrective measures to ensure that the Fire Evacuation procedures are updated and effective.

3.3   Evacuation Procedure

> Anyone **discovering a fire** must raise the alarm using the nearest Break Glass call point which will activate the building's main fire alarm panel. This will trigger the fire alarm and may also alert the NI Fire and Rescue Service (NIFRS). Only if the fire is deemed manageable, should it be tackled using the appropriate fire extinguisher. Only trained and competent personnel should use fire extinguishers. **Individuals**

should never put themselves or others in a position of danger as a result of attempting to extinguish a fire. If there is any doubt, the fire should be left for the NIFRS to deal with.

› When the **alarm sounds (continuous tone of the siren or bell) ALWAYS <u>treat it as a genuine emergency and follow these procedures to evacuate the building immediately:</u>** on hearing the alarm, everyone should evacuate the building by the nearest fire escape exit and proceed to the nearest Assembly Point. NB: The Fire Alarm "tone" may differ from campus to campus. – see Appendix 2. Locations of Assembly Points will be displayed throughout the buildings.

› **DO NOT LOCK DOORS to classrooms, stores or offices on evacuation.**

› **LIFTS MUST NOT BE USED** apart from those specifically designed and installed as 'Fire Evacuation Lifts' to assist people with disabilities. (A number of specialised 'Fire Evacuation Lifts' are currently installed at Lisburn and Downpatrick Campuses). **NB:** Staff should familiarise themselves of the location of Fire Evacuation Lifts and include this as part of any induction programme.

› Class lecturers must evacuate the room as quickly as possible, <u>closing</u> the door behind them, escorting their students to the nearest Assembly Point and remaining there until further notice.

› Class Lecturers must ensure that any Personal Emergency Evacuation Plans (see Section 5 re PEEPs) held by disabled students are implemented. Any disabled student not having a PEEP must be assisted down stairwells (where possible) and escorted to the nearest Assembly Point. If this is not possible, an EVAC chair should be used. SERC Staff members have been trained in the use of evacuation chairs and will be available to assist during an evacuation of the building. In the event of an EVAC chair not being available, they should be escorted to a fire-protected zone between two fire doors which is clearly marked as a Refuge Point and has a communication system linked to reception. Arrangements should then be made to have individuals removed by fire wardens (yellow bib wearers).

› Staff/carers must report such cases to the Evacuation Co-ordinator (red bib wearer) in reception. Class Lecturers must be able to account for all class members.

› All instructions given by Fire Marshalls (wearing orange or yellow bibs) must be followed.

› Any student out of the classroom when the alarm sounds should proceed directly to the nearest exit and join their class outside the building and register their attendance to the Class Lecturer at the Assembly Point.

› All other staff, students, contractors and visitors must proceed to the nearest Assembly Point and remain there until further notice. No-one must leave the Assembly points during an evacuation, either by foot or by vehicle – as this will make accountability very difficult and create problems for emergency services vehicles arriving at the campus.

› **NEVER RE-ENTER BUILDINGS** for any reason until advised to do so.

3.4   Personal Emergency Evacuation Plans (PEEPs)

⟩ A Personal Emergency Evacuation Plan (PEEP) is a means by which arrangements are made to ensure that an individual's physical or mental abilities or other circumstances do not prevent their safe emergency evacuation.

⟩ It is College procedure to generate a PEEP for every member of staff or student with a disability which may affect their ability to respond in an emergency. A PEEP is appropriate for people with various disabilities, including those with temporary health problems such as a broken leg.

⟩ The PEEP is a personal plan so it must be drawn up with the active participation of the person concerned. It explains the method of evacuation to be used by the disabled person in each area of a building, recording the safety plan e.g. routes, corridors, stairs or refuges etc., identify those persons who will assist (if required) and any training or practice required.

⟩ It should not be assumed that because a person has a disability that they will need or ask for a PEEP. Many may not be aware that a PEEP is required. Of those who do know about the PEEP, some will be confident that they can get out of the building unaided. It should be highlighted that people with "hidden impairments" such as a heart condition or epilepsy may also require assistance in an emergency situation.

⟩ All staff and students (Buddies) who could be expected to aid the evacuation of a disabled person should receive a copy of the relevant PEEP.

- **Responsibilities for PEEPs**

⟩ **Staff or Students with a permanent or temporary disability that affects mobility** will be asked to inform the College at the earliest opportunity if they need assistance in an emergency and be involved in discussions about how their needs will be met.

⟩ **Learning Support** is responsible for ensuring that the HOSDU and Class Lecturer is informed of any student who has declared a disability and/or indicated the need for a PEEP. Learning Support will maintain appropriate records on the student's personal file. Where a member of SERC Leaning Support staff is assigned to look after a particular student on a permanent basis, they MUST carry out the Emergency Evacuation Assessment (and PEEP if required) and include it in the student's Individual Education Plan.

⟩ **Human Resources** will inform the HOSDU and Line Manager of any staff member who has declared a disability and/or given notification of the need for a PEEP, arrange any occupational health assessments to provide advice about any medical actions required to enable a PEEP to be put in place, advise the HOSDU of any employment issues should there be a conflict of opinion about reasonable adjustments. They will maintain appropriate records on the staff member's personal file.

⟩ **Heads of School/Department/Unit (HOSDU)** are responsible for ensuring the completion of required PEEPs for both their students and staff (by the relevant Class Lecturer and Line Manager respectively). However, if the HOSDU believes there is any other student or member of staff who may need a PEEP, they must ensure this is properly assessed.

› **Course Co-ordinators, in conjunction with Class Lecturers** (full and part time) are responsible for carrying out Emergency Evacuation Assessments and, if required, developing a PEEP for all disabled students as informed by Learning Support. However, if the Class Lecturer believes there is any other student who may need a PEEP, the same action should be taken immediately and Learning Support informed.

› **Line Managers** are responsible for carrying out Emergency Evacuation Assessments, and, if required, developing a PEEP for individual staff members, as informed by Human Resources. However, if the Line Manager believes there is any other member of staff who may need a PEEP, the same action should be taken and Human Resources informed.

› **Health and Safety Department** will, on request, provide specialist advice and arrange staff training in relation to evacuation procedures and completing a PEEP

› **Estates Department** can advise on building issues and investigate, where reasonably practicable, the modification of a building where requested (although the design of some buildings may preclude this option) and to arrange for authorised works to be carried out as instructed. The Estates Department is responsible for informing the HOSDU if there is any work that will affect the disabled person's ability to exit a building in an emergency. The Estates Department will also ensure that individual PEEP arrangements are incorporated into the Fire Risk Assessments and that refuge areas are identified and clearly marked as part of the building Fire Risk Assessment.

- **Procedures for PEEPs**

    On becoming aware of any student or staff member with a temporary or permanent disability which may affect their ability to evacuate SERC premises in an emergency:

    › **In relation to STUDENTS:**

    Course Co-ordinators (or their nominated Class Lecturer) should, with input from the student, complete the Emergency Evacuation Assessment (Student) form which is located in the 'Forms' section of the Health and Safety Team Site (see example at Appendix 3). This will establish if the student has any particular needs to enable safe evacuation from SERC premises.

    If a particular need is identified, the Course Co-ordinator (or their nominated Class Lecturer) must develop a Personal Emergency Evacuation Plan with the student, using the Student PEEP form located in the 'Forms' section of the Health and Safety Team site (see example at Appendix 4).

    However, where a member of SERC Leaning Support staff is assigned to look after a particular student on a permanent basis, they must carry out the Emergency Evacuation Assessment (and PEEP if required) and include it in the student's Individual Education Plan.

    The **Course Co-ordinator** will provide a copy of the PEEP to:
    - The student
    - Any 'Buddy' assigned to the student
    - All the student's class lecturers
    - Learning Support
    - All persons designated to assist in executing the evacuation plan

The PEEP must be reviewed on an annual basis (at least) and/or when any significant changes occur (to the building or student).

⟩ **In relation to STAFF**

Line Managers should complete the Emergency Evacuation Assessment (Staff) form located in the 'Forms' section of the Health and Safety Team Site (see completed example at Appendix 3). This will establish if the member of staff has any particular needs to enable safe evacuation from SERC premises.

If a particular need is identified, the Line Manager must develop a Personal Emergency Evacuation Plan with the member of staff using the Staff PEEP form located in the 'Forms' section of the Health and Safety Team site (see completed example at Appendix 4).

The Line Manager will provide a copy of the PEEP to:
▪ The employee
▪ Human Resources
▪ All persons designated to assist in executing the evacuation plan

The PEEP must be reviewed on an annual basis (at least) and/or when any significant changes occur (to the building or employee).

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4.0 First Aid

4.1 SERC's Duty

⟩ SERC has a duty to make provision for first aid at all times throughout the College by:

▪ ensuring there is adequate and appropriate equipment and facilities to provide first-aid to staff, students and visitors who become injured or ill; and

▪ ensuring that there are a sufficient number of 'suitable persons' able to administer first-aid to staff, students and visitors who become injured or ill.

⟩ SERC also has a statutory duty to comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 and will follow the College's Standard Operating Procedure for reporting accidents.

4.2 First Aid

⟩ First-aid given promptly and effectively can save lives; often it can assist in the prevention of minor injuries deteriorating into serious injuries. In many incidents or accidents, it is the only treatment necessary.

⟩ First aid means:

▪ The initial assistance or treatment given to a casualty for any injury or sudden illness before the arrival of an ambulance, doctor or other qualified person, to preserve life, prevent worsening and promote recovery;

▪ Treatment of minor injuries which would otherwise receive no treatment or which do not need treatment by a medical practitioner or nurse.

4.3   Assessment of Need

〉 The regulations do not lay down precise numbers of first aiders required. To ensure the availability of appropriate first aid provision, the Head of Health and Safety, in conjunction with Human Resources, will conduct an assessment of need for first aid requirements on every campus. This assessment will be conducted in accordance with the guidance published by the Health and Safety Executive (HSE) and will ensure that appropriate first aid personnel and equipment are available to give immediate attention to an employee, student or visitor suffering from common injuries and illness and those likely to arise from specific hazards on campus.

〉 In assessing first aid need, the following will be taken into account:

- Specific hazards or risks, both on and off site (eg educational visits)
- Numbers of staff and students
- Staff or students with special health needs or disabilities
- Whether they are on split sites and/or levels
- Their location(s)
- Accident statistics
- Remote or lone staff and those working out of hours
- Adequate provision in practical subjects, such as PE and science
- Absences of First Aiders or the appointed person

〉 Notices will be posted to inform staff, students and visitors who and where the College First Aiders are and the location of the nearest First Aid kit. Suitable notices will be displayed near to the entrance of premises and repeated at strategic locations within buildings. The current "Rota" of first aiders will also be made available on the college home page.

4.4   College First Aiders

- **Recruitment and Training**

〉 As the need arises, the College will seek and register expressions of interest from staff who are interested in becoming First Aiders. Staff selected from this register will undertake accredited training and gain a First Aid at Work certificate (from an organisation approved by the Health and Safety Executive) before they can be appointed as a College First Aider. Some College First Aiders will require particular first aid training if their work area or activity has specific hazards.

〉 The selection of College First Aiders should take into consideration the individual's ability to learn new skills, their communication skills, their availability and their capacity to cope with stressful and physically demanding emergency procedures. They should be reliable and able to go rapidly and immediately to an emergency. First Aid recruits should also be aware that their name will be added to a Campus Rota stating their availability at certain times. Non-compliance with this arrangement may result in removal from First Aider list and withdrawal of remuneration.

〉 When appointed as a College First Aider, a small payment is made on a monthly basis. First Aid at Work certificates are valid for 3 years and must be refreshed and renewed before expiry for staff to continue as College First Aiders.

〉 **Nb**: By becoming a qualified SERC First Aider you have agreed that your name can and will be added to the campus rota and you are consenting to make yourself available on an agreed day and time. (Morning or afternoon session)

〉 It is the First Aider's responsibility to be "on-campus" when they are listed on the rota. There are no exceptions to this rule.

〉 In addition to the above mentioned First Aiders the college will also provide emergency First Aid response training to all SERC Duty Managers who can also be called upon to offer practical guidance and support in the absence of the regular SERC first aiders.

〉 SERC will provide opportunity for all College First Aiders to update qualifications on a regular basis and may offer additional training such as epilepsy, anaphylaxis and Epi-Pen, defibrillators etc.

- **Duties of College First Aiders**

    The duties and responsibilities of College First Aiders is set out in Appendix 5. In addition to being aware of their duties, all College First Aiders should be familiar with the following:

    〉 Location of their designated first aid kit as well as the location and facilities of any First Aid room on their base campus.
    〉 Procedure for calling an ambulance.
    〉 Guidance on Infection Control www.hse.gov.uk/pubns/infection.pdf
    〉 Guidance of personal protection against blood borne infections in the workplace (see Appendix 6) as well as http://www.hse.gov.uk/pubns/indg342.htm
    〉 Accident/Incident and First Aid Administered reporting procedures.
    〉 Procedure for obtaining replacement first aid materials.
    〉 Their current listing and timing on the college First Aid Rota.

- **Campus Managers and Duty Managers**

    The College plans to provide an Emergency First Aid at Work course to Campus and Duty Managers to compliment First Aid cover, especially during evening opening.

- **Insurance**

    All fully trained, in certificate, College First Aiders will be covered by SERC's Public Liability/Indemnity Insurance whilst administering first aid. However, First Aiders must ensure that their certificate is current and that they operate within the scope of their training and standard operational procedures for the delivery of First Aid at Work.

- **First Aid Materials, Equipment and Facilities**

    〉 The appropriate number of suitably marked containers (a white cross on a green background) will be available on each campus (according to the risk assessment of each campus).

    〉 As a minimum, there should be a fully stocked first aid kit for each site. The HSE recommends that each kit should contain the following:

    - general guidance card on first aid
    - 20 individually wrapped, sterile adhesive dressings (assorted sizes)
    - 2 sterile eye pads
    - 4 individually wrapped triangular bandages
    - 6 safety pins
    - 6 medium sized, individually wrapped, sterile unmedicated wound dressings
    - 2 large, sterile, individually wrapped, unmedicated wound dressings
    - 1 pair of disposable gloves.

⟩ The content and selection of first aid kits may vary in circumstances where the assessment of first aid need indicates that this is appropriate (e.g. an alternate container for use in offsite activities).

⟩ College First Aiders may request a **portable First Aid Kit** from the Head of Health and Safety.

⟩ In areas such as **workshops and laboratories**, at least one litre of sterile water in a sealed disposable container should be provided for eye irrigation. These and eye wash bottles must be replaced immediately the seal is broken or when the expiry date is exceeded.

⟩ A first aid kit must be carried on each **College minibus**.

⟩ During the First Aid need assessment at each Campus, consideration will be given to the provision of **Automated External Defibrillators** (AED) and the training of relevant First Aiders in their use. All College First Aiders should be acquainted with access to the list of appropriately trained AED users should an incident arise. Training in the use of AEDs will be carried out in accordance with the latest guidelines from the UK Resuscitation Council. NB: All college First Aiders should make themselves aware of the location of their nearest defibrillator. A complete list is available on the H&S team Site. A link is available below.

⟩ https://serc2.sharepoint.com/sites/na/has/Pages/First-Aiders.aspx

4.5 In the event of Injury or Sudden Illness

- **Call for Assistance**

  ⟩ If a staff member, student or visitor to the College suffers an injury or sudden illness, assistance should be sought by the nearest staff member or responsible person.

  ⟩ **If it appears to be a life-threatening or serious emergency, call an ambulance immediately by dialling 9(999).** Remain on the telephone and follow any pre-arrival medical advice in advance of the ambulance arriving, while also summoning a College First Aider. The College First Aider should remain with the casualty until an ambulance crew take over responsibility.

  ⟩ Send someone to alert campus caretakers or facilities management to enable easy access to the campus and assist with locating the incident area.

  ⟩ The Northern Ireland Ambulance Service advise that clinical/medical emergencies include (by are not limited to):
    - Difficulty in breathing
    - Chest pains
    - Heart problems
    - Unconsciousness
    - Fitting or choking
    - Severe loss of blood
    - Severe allergic reactions
    - Abdominal pains
    - Overdose/poisoning
    - Traumatic falls

〉 If a College First Aider within the department is unavailable, summon any College First Aider based on the campus. A list of current College First Aiders is available online on the Health and Safety Team site, which may be accessed via this link: College First Aiders

〉 If no College First Aider is on the premises when required, any Senior Manager or Director coming into contact with an emergency situation must assume control of an accident or illness situation and summon assistance e.g. an ambulance where necessary. However, they must not administer any First Aid unless they have been specifically trained to do so.

- **Administering First Aid**

  〉 **ONLY** College First Aiders and suitably trained Duty Managers are allowed to give first aid and they must only give the first aid treatment for which they have been trained.

  〉 Following initial assessment, the College First Aider should take appropriate action and administer first aid as trained.

  〉 If the casualty needs hospital attention, the College First Aider should contact Ambulance Control by dialling 9(999) and follow any pre-arrival medical advice in advance of the ambulance arriving. The College First Aider should remain with the casualty until an ambulance crew take over responsibility.

  〉 If the injury is minor and doesn't require an ambulance, the College First Aider may administer initial first aid and advise the casualty to attend the nearest hospital A&E department or to visit their GP.

  〉 The College First Aider may treat minor injuries which do not need treatment by a medical practitioner or nurse or which would otherwise receive no treatment.

- **Transport to Hospital, GP or Home**

  〉 Casualties should **not be transported** to hospital, their GP or home by staff, students or visitors in their own vehicles. Where an ambulance is not required, a taxi should be arranged through Campus reception staff. The cost will be covered/reimbursed by the College.

  〉 College First Aiders are not expected to accompany a casualty to hospital, their GP or home.

- **Initial Notification and Reporting**

  〉 In the event of a more serious injury or illness, the casualty's emergency contact or parent/guardian should be notified without delay. The College First Aider should liaise with Human Resources in relation to staff members or with Learning Support in relation to students.

  〉 ALL serious injuries and illnesses MUST be reported immediately to the Head of Health and Safety:

    Head of Health and Safety (John Gault)
    Mobile: 07919 597728
    jgault@serc.ac.uk

  〉 Having dealt with the situation at hand, the attending College First Aider **MUST** record details of all First Aid given on the official First Aid Administered form on the College's Health and Safety team site: First Aid Report Form

> It is essential that the lecturer complete the [Accident or Incident Form](#) in full, gathering witness statements where appropriate. The form must be completed by the lecturer/tutor/witness to accident. Information contained on completed forms is essential in establishing the immediate and underlying cause(s) of the accident or incident and allowing corrective or preventative action to be taken by the College to reduce risk of recurrence. Information contained on the form may be required by the College insurers.

> The attending College First Aider should notify the employee's Line Manager or student's course co-ordinator that an accident/incident has occurred, resulting in First Aid being administered.

- **Follow up Action**

> If required under the RIDDOR Regulations, the Head of Health and Safety will use the information contained in online report forms to immediately notify the HSE.

> The Head of Health and Safety will immediately forward reports of serious accidents or incidents to College Management Team (CMT), making them aware of any legal or other implications and any proposed corrective action. Before corrective action is taken, CMT approval must be obtained.

> The Head of Health and Safety will monitor accidents and incidents, complete investigations, maintain records and carry out statistical analysis.

> Online accident or incident report forms will also be used as the basis for any further investigation by the College. The seriousness of an accident or incident will determine the level of investigation required. In many cases, the official report form will contain sufficient information as to constitute an investigation; in other cases a more thorough investigation may be required to determine if non-compliance to SERC Health and Safety Policy. This decision will be made by Head of Health and Safety.

> Reported accidents and incidents will be monitored by the College's Health and Safety Committee, CMT and the Governing Body.

4.6   Public Relations

> In the event of a serious incident, only authorised personnel can deal with the press on behalf of the College. This includes sending out any form of information, pictures or press releases.

> In line with the College's 'PR Protocol' SOP, the Head of Health and Safety will notify the PR and Communications Officer of any sensitive internal or external communications which may impact on PR and will assist in planning for any proactive or reactive information for the media.

> The Principal and Chief Executive will normally act as the spokesperson for SERC. Only members of the Senior Management Team or staff **authorised and briefed by** the PR and Communications Officer may also act as spokespersons for the College. Any member of staff authorised to talk to the media must discuss the content with the Marketing Department.

> All media queries should be sent directly to the PR and Communications Officer.

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5.0   COSHH

5.1   Scope and Regulation

> These procedures apply to all SERC staff and students and relate to all aspects of College activity which are liable to expose staff, students or others to substances hazardous to health.

> Substances which are hazardous to health are regulated by the Control of Substances Hazardous to Health Regulations (Northern Ireland) 2003 (COSHH); there are specific regulations which deal with asbestos, lead and ionising radiation. It is also vital that individuals are familiar with the labelling of chemicals classified in Chemicals (Hazard Information and Packaging for Supply) Regulations 2009, commonly referred to as "CHIP". A substance is hazardous if it has the potential to cause harm, it only becomes a risk if it is used in such a way as to actually cause that harm.

> Reference should be made to The Control of Substances Hazardous to Health Regulations (Northern Ireland) 2003 and associated Codes of Practice EH40/2005 for more information.

5.2   Requirements

> Activities which may expose staff, students or others to substances hazardous to health should not be carried out unless a current risk assessment to comply with COSHH regulations has been made.

> NO ONE should handle any equipment or substance unless they have been authorised and trained to do so.

> Students should NOT be allowed to handle hazardous substances unless they are assessed to have the necessary maturity and competence and are adequately supervised.

> Heads of School/Unit should ensure that, where relevant, their staff are adequately trained in COSHH Regulations, associated Approved Code of Practice and related guidance. On identifying a staff training need, Heads of School/Unit should contact the Head of Health and Safety to arrange suitable training.

> Staff members should **not** transport or move chemicals between campuses in their own vehicles or should **not** ask Estates members of staff/caretakers to assist them using SERC minibus. A specialist company should be contacted.

> **Authorised staff and students must be trained in the safe handling and use of hazardous substances and know the location of COSHH Material Safety Data Sheets. This training must be recorded.**

> Any workshop or room in which hazardous substances are stored or handled must contain a working COSHH Register which:

> - Contains an indexed list of separate loose Materials Safety Data Sheets (MSDS) for all hazardous substances (in a ring-binder type file which allows loose sheets to be easily removed and replaced as necessary to ensure the register is up to date at all times).

> - Is kept up to date by the allocated member of staff.

> - Is prominently located in the room.

- ALL users (including students) of the workshop or room must be fully aware of the location of the COSHH Register and its relevance.

› MSDS information (including handling and storage instructions) and control measures for harmful substances <u>must be complied with</u> in addition to the procedures set out below.

5.3 <u>Risk Assessment</u>

- **COSHH Assessors**

    › Trained staff deemed to be competent will be SERC COSHH Risk Assessors with an understanding of:

    - the hazards of the substances in use;

    - the processes in which the substance is used and its required control measures;

    - the College COSHH Risk Assessment form (Appendix 7);

    - their own personal limitations and the point at which further help is required; and

    - their responsibility to inform and alert the relevant staff members if a problem or situation occurs ie the Head of Health and Safety/Estates Manager/Line Manager.

- **COSHH Risk Assessments**

    › SERC COSHH Risk Assessors (Assessors) will be given sufficient time and resources to complete the COSHH assessments and ensure that the COSHH Register is up to date, correctly formatted and prominently located in a convenient and accessible location, readily available for reference and inspection.

    › Material Safety Data Sheets (MSDS) should be obtained for **each** product used in the College. This must be used by the Assessor to complete a COSHH risk assessment using the form at Appendix 1 and any required action should be carried out. The assessment should take into account any control measures in place before the risk is rated.

    › The Head of Health and Safety and external consultants (if deemed necessary) will provide back-up support to Assessors as necessary.

    › Assessors should ensure that the people using the substances are informed of the outcome of the assessments.

    › The Line Manager must ensure that any follow-up action is carried out.

    › The Head of Health and Safety, Heads of School/Department/Unit should ensure that any required review is carried out as necessary.

    › The Head of Health and Safety should be given a list of any obsolete, out of date or unwanted substances and what arrangements have been made to dispose of these in accordance with the manufacturers' guidelines and ensuring compliance with the Controlled Waste and Duty of Care Regulations (Northern Ireland) 2013.

    › Anyone using hazardous substances should be notified of the findings of the COSHH assessment. The Heads of School/Department/Unit must ensure that this takes place.

    › All new substances should be COSHH risk assessed.

〉 COSHH assessments shall be reviewed **annually** or on the introduction of new substances, a change in the working environment or if the assessment is no longer valid. The Head of Health & Safety in co-operation with SERC Health and Safety appointed Union representatives will monitor the review process to ensure that it is carried out when required.

〉 Where necessary, health surveillance should be introduced, this should be clearly identified on the COSHH assessment and Head of School/Department/Unit should maintain a register of people within their faculty who require health surveillance.

5.4   Procedure

〉 **Always refer to the COSHH register before using any substance or product**, and follow the procedures set out in the relevant MSDS.

〉 **Store products securely as instructed in the MSDS**, away from the main work area in a cool, dry, dark place, capable of keeping in spills and under lock and key if required. Don't store far more than is needed.

〉 Don't store more than a total of 50 litres of **flammable liquid** indoors. Use a flammables store.

〉 Only use **products** for purposes for which they are designed.

〉 Always **read and follow the instructions** on the product label carefully. Replace caps on containers immediately. Never decant substances into an unlabelled container.

〉 **Look for signs** of leaks, wear and damage. If you find any problems, tell your line manager or tutor immediately. Do not just carry on working.

〉 The appropriate **PPE** for the substance and task must be worn eg safety glasses, steel toe capped boots, ear defenders, coveralls, barrier cream and vinyl or nitrile gloves cream. (Single use gloves should be thrown away every time they are taken off.) NB: The wearing of faulty or inadequate PPE will not be tolerated and disciplinary action will be taken.

〉 Avoid undue exposure to vapours and ensure good **ventilation** when working with toxic or flammable substances. Local exhaust ventilation systems must be used and regularly checked and tested.

〉 Keep **flammable** substances away from sources of ignition and take measures against electrostatic charging if appropriate. Do not carry cloths soaked in flammable liquids in pockets.

〉 **Keep the work area clean** - use a vacuum cleaner. Never use compressed air to clear dust.

〉 Keep hazardous substances away from **food and drink**. Remove contaminated clothing and PPE before entering areas where food is consumed.

〉 **Hand washing** – wash and dry hands before breaks, before and after eating, drinking, smoking or using the lavatory and at the end of work using the skin cleanser provided, ensuring residue is washed off with soap and water. Use an after-work cream to replace skin oils. Check skin regularly for dryness or soreness tell your line manager or tutor if these symptoms appear. If warts appear, seek medical advice.

〉 **Never clean hands** with concentrated cleaning products, solvents or fuel.

- › **Fire extinguishing** equipment must be available. Be aware of suitable and unsuitable extinguishing media as set out in the MSDS.

- › **Avoid contact** with skin (this does not apply to hand cleaning products or barrier cream). Avoid contact with eyes and clothing.

- › **No "horseplay"** of any kind is acceptable - students who misbehave will be dismissed from the area and may be disciplined.

- › Clean up **spills** safely and promptly as specified in the relevant MSDS. Absorb liquid with a specialist spill kit 'soak up' medium such as sand, earth or other recommended absorbent material. Sweep up and remove to suitable, clearly marked lidded containers for disposal in accordance with local regulations. Do not disperse using water or detergent.

- › When any sort of **spillage, accident or incident occurs**, the Head of Health and Safety MUST be contacted immediately. Initial reports can be made by any member of staff (by telephone or email) but this be followed up with an electronic report using the College Accident/incident Report Form available on the SERC Health and Safety Team Site available via the intranet.

- › Where control measures are in place for the purposes of COSHH (eg local exhaust ventilation) these should be maintained appropriately and records kept.

- › The correct **system for disposal** must be followed**:**

  - Collect hazardous waste materials in suitable, dedicated, clearly labelled containers. These should be as specified in each MSDS and stored away from the workshop in a separate building or cage enclosure.

  - Do not pollute the soil, water or environment with the waste product.

  - Hazardous waste must be recycled/disposed of through a specialist, licenced handler in accordance with local and national regulation.

  - Records of hazardous waste collection, including consignment notes and related paperwork, must be retained for official inspection by for 5 years.

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6.0   Animals on Campus

Animals are **not normally permitted within any SERC property**. This restriction recognises that animals pose potential risks related to disruption in the educational and work environments, health, safety, and hygiene.

6.1   Definitions

Animal: Domestic birds, reptiles, fish, or mammals.

Property: SERC controlled, leased, or owned campus or building.

Handler: Individual who brings an animal or support animal into a College building or onto SERC property. The handler may also be the animal's owner.

6.2   Exceptions

〉 Animals are only allowed within any SERC campus or building in the following circumstances:

▪ Animals used in approved teaching, research clinical activities within SERC's Animal Care/Animal Management Courses.

▪ Assistance dogs, trained to assist a person with a specific disability and qualified by an organisation registered as a member of Assistance Dogs (UK) (See Types of Assistance Dogs and Membership at Appendix 8.)

▪ PSNI/Police security dogs on duty.

▪ Special events: in special circumstances, approval may be obtained from SERC Head of Department/School/Unit for animals to be brought on campus for a singular event involving the display or demonstration of specialised skills or natural behaviours. Written permission must be sought and gained from the relevant Head of Department/School prior to such an event.

▪ **NB** Students and visitors may be asked to leave with their animals from SERC grounds if written permission is not available when requested.

6.3   Responsibilities

〉 The responsibility to maintain and enforce this SOP rests with each Head of Department/School/Unit in conjunction with the Head of Health and Safety. They will act on behalf of SERC Senior Management and Governing Body.

〉 It is the responsibility of each animal handler to follow this procedure and to respect the rights and concerns of others while on campus property. Any assistance and clarifications with this procedure can be obtained from College Management Team (CMT) and/or the Head of Health and Safety within SERC.

6.4   Procedures

〉 For those animals permitted on College controlled, leased, or owned property under the following conditions:

• The animal shall be restrained at all times.

- The animal handler or owner shall be responsible for the immediate disposal of animal waste and ensure that their feeding requirements are met. In the event that the owner becomes unable to continue with this responsibility, it is legitimate to contact the PSNI or local Council Dog Warden for help with an Assistance Dog. Members of SERC staff are not responsible for the care of an Assistance Dog.

- Animals may not be tethered to SERC buildings, structures, motor vehicles, trees, railings, light poles, benches, posts, etc. nor shall they be left in cars/motor vehicles parked within the College car parks even for relatively short periods of time.

- The handler or owner shall assume all financial responsibility for damage to property or injury to individuals caused by the animal.

6.5   To report violations and disturbances:

⟩ On SERC campus property, the Campus Duty Manager Head should be contacted immediately to deal with the situation. Should they not be available, a member of the College Management Team should be contacted. Failing that, the Head of Health and Safety should be contacted.

⟩ Examples of instances when SERC staff might remove an animal from College property include, but are not limited to: an unrestrained animal; incessant noise; disruptive, harassing, aggressive, or intimidating behaviour; damaging property; or other health, safety, or hygiene concerns. SERC staff may attempt to contact the animal's handler and/or owner. If the handler and/or owner are unreachable after a short period of time, depending on the climate conditions and the availability of a holding facility, the animal will be picked up by or taken to the USPCA or other appropriate animal shelter or contact made with the local council Dog Warden.

6.6   Non-compliance

⟩ Any animal on SERC property that is not restrained, detracts from the educational or work environment, or poses a health, safety or hygiene risk may be impounded and removed from campus property by USPCA or if required and deemed necessary the PSNI.

⟩ **Students:** Disciplinary actions involving student handlers and student owners in non-compliance with this procedure will be enforced through the SERC Student Code of Conduct process.

⟩ **Employees:** Disciplinary actions are the responsibility of the direct line manager/supervisor of the employee in non-compliance of this procedure. SERC Senior Management will deal promptly and effectively with any member of staff who blatantly fails to comply with this procedure in regards "having animals in the workplace."

⟩ **Guests and Visitors:** Disciplinary actions are the responsibility of SERC Senior Management and the College Board of Governors.

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7.0   New and Expectant Mothers

7.1   Scope and Background

⟩ This section provides all female employees and students who are (or in the future could be) new or expectant mothers; have given birth within the previous six months; or are breastfeeding with guidance and procedures to ensure they are kept safe from harm so far as is reasonably practicable when working or studying at SERC.

⟩ It also applies to:

- Line managers; tutors/course co-ordinators/supervisors of the above;
- Human Resources Officers
- Head of Health and Safety
- Health and Safety Officers
- Pastoral Care Officers

⟩ A 'new or expectant mother' is defined as a woman who is pregnant, who has given birth within the previous six months or who is breastfeeding. The term 'given birth' means a woman who has delivered a living child or, after 24 weeks of pregnancy, a stillborn child.

⟩ Although the College regularly reviews its general workplace risk assessments, working conditions generally considered acceptable may no longer be so during pregnancy and while breastfeeding and the College will carry out a separate, specific risk assessment when it receives notification from individuals.

⟩ All female staff will be made aware of the importance of reporting pregnancy to the College's Human Resources (HR) department as soon as it is known. This information will be held in confidence. While staff do not have to inform SERC that they are pregnant, have given birth in the last six months or are breastfeeding, for their own and their child's health and safety protection, it is important that written notification is provided to the HR department as early as possible.

⟩ All female students will be made aware that it is their responsibility to inform the College of their pregnancy as soon as possible as there may be particular chemical or physical hazards associated with their course. This information will be held in confidence. Although there is no specific statutory requirement to assess risk in these cases, there is a duty of care not to expose students to undue risk.

⟩ Until SERC receives written notification of a staff or student pregnancy, it is not required to take any action other than those resulting from the risk assessment for all their employees.

⟩ This SOP should be read in conjunction with SERC's New and Expectant Mothers Policy (available on the SERC Intranet) and the College Employers' Forum Circular: CEF 2012-02 Maternity Leave Scheme for employees in FE Colleges (available on the HR Public Site CEF Cir 2012-02 Maternity Leave Scheme). **NB:** Line managers completing the relevant Risk Assessment for their should also make themselves familiar with SERC's Data Protection Policy.

7.2   Procedure: STAFF

⟩ Staff who are pregnant should provide written notification to their Line Manager and Human Resources (HR) department at the earliest opportunity to ensure appropriate

measures are put in place to protect them and their unborn child(ren).   (If an employee does not wish to involve their line manager initially, they can arrange a confidential discussion with the HR department.)

> The maternity leave process (including employee's obligations and entitlements) is detailed in the CEF Maternity Leave Scheme document referred to in Section 9.1, but employees <u>must</u> notify the HR department in writing using the Maternity Leave Application Form (available on the HR Public Site of the SERC Intranet) by the end of the 15th week before the expected week of childbirth (EWC).   Employees must provide a certificate from their GP or midwife confirming pregnancy.

> **Until SERC receives written notification, it is not required to take any further action, such as altering working conditions or hours of work.**

> Upon notification by the employee, the HR department will contact the relevant Line Manager to inform them (if not already made aware by the employee) and ask them to make arrangements to carry out a specific, separate New and Expectant Mother Risk Assessment with the employee at the earliest opportunity to allow appropriate measures to be put in place to protect new and expectant mothers' health and that of their unborn child(ren). The employee should provide any medical advice they have received that could impact on the assessment.

> The risk assessment should be carried out using the New and Expectant Mother Risk Assessment Checklist at Appendix 9; the Risk Assessment Form at Appendix 10; and the Hazards and Related Controls Guidance Checklist at Appendix 11, all of which are available in Word format within Health and Safety Teamsite: Forms .   Employees are encouraged to look at the risk assessment document in advance and to identify the hazards which may apply to them.

> The completed New and Expectant Mother Risk Assessment will be reviewed by the HR department and (if required) the Head of Health and Safety. Where there are particular risks identified (e.g. regarding exposure to toxic substances, substantial manual handling or work with radiation) a more detailed risk assessment may be carried out by the Health and Safety department, including discussion with the individual and a visit to the workplace as required. Any additional control measures will be reported back to the line manager, who will have responsibility for ensuring that they are implemented and that the situation is kept under review as the pregnancy progresses.

> The risk assessment should be reviewed at least every two months, and any additional control measures put in place.

> This specific risk assessment must be reviewed if the employee returns to work within 6 months of the birth of her baby, or if she is breastfeeding when she returns to work. Control measures may involve making temporary changes to an individual's job or working conditions.

7.3   Procedure: STUDENTS

> It is the responsibility of students to inform their course tutor of their pregnancy as soon as possible, particularly if there may be particular hazards associated with their course. Students may be asked to provide a certificate from their GP or midwife confirming pregnancy.

> The tutor must inform the course co-ordinator and make arrangements to carry out a specific, separate New and Expectant Mother Risk Assessment with the student at the earliest opportunity to allow appropriate measures to be put in place to protect

the new or expectant mother's health and that of their unborn child(ren). The student should provide any medical advice they have received that could impact on the risk assessment. Information regarding a student's pregnancy must be held in complete confidence by the tutor and course co-ordinator, unless the situation gives cause for concern, when it should be officially reported to SERC's Pastoral Care team, or until the student themselves makes it publicly known.

⟩ The New and Expectant Mother Risk Assessment Checklist at Appendix 9; the Risk Assessment Form at Appendix 10; and the Hazards and Related Controls Guidance Checklist at Appendix 11 should be used. These are available in Word format within Health and Safety Teamsite: Forms. The Health and Safety department can offer guidance if particular concerns arise.

⟩ There will only be two copies of the risk assessment - one copy should be kept with the course co-ordinator so that they can show tutors if required and the other (second) copy sent to the Head of Pastoral Care where it should be retained for at least 3 years.

⟩ The College tutor/lecturer may also, at this stage, need to contact SERC Examinations section to discuss issues relating to sitting exams, potential impact on performance etc. This may **only** be done with the student's permission.

⟩ The risk assessment should be reviewed at least every two months, and any additional control measures put in place.

7.4   Roles and Responsibilities

- **Pregnant Staff** should:

    ⟩ Provide written notification to the HR department and their line manager that they are pregnant at the earliest opportunity, providing a medical certificate confirming pregnancy if requested. (If an employee does not wish to involve their line manager initially, they can arrange a confidential discussion with the HR department.) However, in compliance with the maternity leave obligations referred to in Section 9.1 the HR department must be notified in writing using the Maternity Leave Application Form (available on the HR Public Site of the SERC Intranet) by the end of the 15th week before the expected week of childbirth (EWC).

    ⟩ Assist with the specific, separate risk assessment process, providing any medical advice they have received that could impact on the assessment.

    ⟩ Comply with any measures identified through this specific risk assessment to reduce the risks to their health and that of their unborn child(ren).

    ⟩ Advise their line manager or HR department if the specific risk assessment needs to be reviewed more frequently than every two months during pregnancy due to changes in their health or to their role; and notify the HR department and/or their line manager, in writing, if they return to work within 6 months of the birth of the baby, or if they are still breastfeeding when they return to work.

- **Human Resources** will:

    ⟩ Hold all personal information in confidence.

    ⟩ Ensure all female staff of childbearing age are made aware of the importance of reporting pregnancy to the Human Resources (HR) department as soon as known.

> Arrange for a specific, separate risk assessment to be carried out with the staff member, ensuring that the Pregnancy Risk Assessment documentation is issued to the line manager for them to complete and return.

> Record the results on to the appropriate personnel file (which should be retained for at least 3 years), copy to the individual and their line manager.

> Ensure the Pregnancy Risk Assessment is monitored and reviewed at least every two months.

> Immediately refer to, or seek advice or guidance from, the Health & Safety Department regarding any areas of concern.

- **The Head of Health and Safety** will:

  > Hold all personal information (relating to any health and safety query) in confidence.

  > Together with their tutors, ensure that all <u>female students</u> of childbearing age are made aware of the importance of reporting pregnancy to their tutor/supervisor as soon as it is known.   This will be included in the student induction process.

  > Provide guidance and assistance to the HR department and all staff in relation to the health and safety of female staff and students of childbearing age, those who are pregnant, have recently given birth or are breastfeeding.

  > Assist with the completion of specific, separate risk assessments for new and expectant mothers when help is sought and requested by line managers and/or the HR department.

  > Review and ensure that all risk assessments have been adequately recorded and filed by HR department.

  > Review risk assessments carried out by academic staff in respect of students, only when requested to do so.

  > Ensure action is taken to reduce, remove or control any identified risk.

  > If called upon, assist staff to monitor and review risk assessments (for staff and students) where appropriate.

- **Line Managers** will:

  > Keep all personal staff information confidential.

  > Carry out a specific risk assessment with the staff member, using the Pregnancy Risk Assessment documentation and guidelines, taking account of any medical advice provided by their GP or midwife (with assistance from the Head of Health and Safety if required).

  > Return the completed documentation to HR department.

  > Implement actions to reduce, remove or control any identified risk.

  > Monitor and review the risk assessment at least every two months throughout the pregnancy, or sooner if changes occur in the workplace, working practices, or the individual's medical condition.

  > Refer back to the HR department (in relation to staff only) or the Head of Health and Safety for guidance as necessary.

- **Pregnant Students** are expected to:

〉 Inform their tutor or supervisor of their pregnancy as soon as possible; provide any advice received from their GP or midwife that could impact on the risk assessment; and comply with any measures recommended to control risk.

〉 Comply with any measures identified through their specific risk assessment to reduce the risks to their health and that of their unborn child(ren).

〉 Advise their tutor/supervisor if the specific risk assessment needs to be reviewed more frequently than every two months during pregnancy due to changes in their health or course activities.

- **Tutors or Supervisors** will:

  〉 Inform the course co-ordinator immediately and both will hold information regarding a student's pregnancy in complete confidence, unless the situation gives cause for concern, when it should be officially reported to SERC's Pastoral Care team.

  〉 Carry out a specific risk assessment with the student (and Head of Health and Safety if particular Health and Safety concerns arise), ensuring that the information is recorded, using the Pregnancy Risk Assessment documentation.

  〉 Forward one signed and completed copy of the forms to the Head of Pastoral Care.

  〉 If necessary, and only with the student's permission, contact SERC Examinations section to discuss issues relating to sitting exams and potential impact on performance.

  〉 Ensure recommended control measures are implemented and the specific risk assessments reviewed at least every two months or sooner if changes occur in the workplace, working practices, or the individual's medical condition.

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8.0 Accident and Incident Reporting

8.1 Background

› The College is required to ensure that there is an official record of all accidents and incidents. In compliance with legislation and the College's risk assessment process, this Standard Operating Procedure (SOP) sets out the practical implementation of SERC's Health and Safety Policy in relation to reporting accidents and incidents involving staff, students, visitors or contractors.

› The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (NI) 1997 (RIDDOR) require organisations to report certain types of accident to the Health and Safety Executive (HSE); in some circumstances, this needs to be done immediately.

› '**Accident**' means an occurrence which is unplanned, undesired and usually results in some sort of loss (eg injury, damage to equipment or property or both).

› '**Incident**' means an occurrence which is unplanned, undesired but does not usually result in loss but had the potential to do so (eg a ladder falling down or a breach in security). An incident may also be a near miss. By investigating near misses, there is an opportunity to put corrective action in place which may prevent an accident occurring. If near misses are not investigated the occurrences will normally happen again and at some stage someone will be injured because of it.

8.2 Notify Health and Safety Immediately

› ALL accidents and incidents involving SERC staff and students (on or off campus), contractors or visitors to the College MUST be reported immediately to the Head of Health and Safety: using the app on the college website. For serious accidents telephone the

Head of Health and Safety (John Gault)
Mobile: 07919 597728
jgault@serc.ac.uk

› The Head of Health and Safety will determine if the accident or incident is reportable to the HSE under the RIDDOR regulations. If reportable, the Head of Health and Safety will decide who should immediately inform the HSE (i.e. the Training Organisation, Employer or the Head of Health and Safety) and advise them accordingly, providing information on the correct form to be used.

8.3 Submit Online Report Form

› While an initial accident or incident report can be made by any member of staff by telephone or email, it MUST be followed up with an official online report using the appropriate form on the College's Health and Safety site: Accident or Incident Reports

› Online forms can be completed and submitted by any member of staff who has sufficient knowledge about the accident or incident. (Only in exceptional circumstances where it is impossible to submit the electronic form for a valid reason, may a printed and signed copy of the form(s) be submitted directly to the Head of Health and Safety.)

› It is essential to complete the form in full, gathering witness statements where appropriate. Information contained on completed forms is essential in establishing the immediate and underlying cause(s) of the accident or incident and allowing corrective or preventative action to be taken by the College to reduce risk of

recurrence. Information contained on the form may be required by the College insurers. Investigation may also be required to determine non-compliance to SERC Health and Safety Policy.

8.4   Further Action by Health and Safety Department

⟩ The Head of Health and Safety will immediately forward reports of serious accidents or incidents to College Management Team (CMT) via the Head of Corporate & Economic Development, making them aware of any legal or other implications and any proposed corrective action. Before corrective action is taken, CMT approval must be obtained.

⟩ The Head of Health and Safety will monitor accidents and incidents, complete investigations, maintain records and carry out statistical analysis as deemed necessary.

⟩ Online accident or incident report forms will also be used as the basis for any further investigation by the College.   The seriousness of an accident or incident will determine the level of investigation required. In many cases, the official report form will contain sufficient information as to constitute an investigation; in other cases a more thorough investigation may be required. This decision will be made by Head of Health and Safety.

⟩ Reported accidents and incidents will be monitored by the College's Health and Safety Committee, CMT and the Governing Body.

8.5   Public Relations

⟩ In line with the College's 'Marketing and Communications SOP', in the event of a serious accident or incident, only authorised personnel can deal with the press and media on behalf of the College. This includes sending out any form of information, pictures, press releases or conducting interviews.

⟩ The Head of Health and Safety will notify the PR and Communications Officer (or in their absence, a member of CMT) of any sensitive internal or external communications which may impact on PR and will assist in planning for any proactive or reactive information for the media.

⟩ The Principal and Chief Executive will act as the spokesperson for the College. Members of the Senior Management team will also represent the College.

⟩ There will be instances where the Marketing Department will call upon spokespeople for particular issues or College departments/areas of expertise. Full training will be provided.

⟩ Any member of staff authorised to talk to the media must discuss the content with the Marketing Department.

⟩ All media queries should be sent directly to the PR and Communications Officer.

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9.0   Notifiable Infectious Diseases

› To control and prevent the spread of 'notifiable' infectious diseases, this section provides all staff with guidance and procedures which must be followed if a student or member of staff informs them of a suspected or confirmed case of a notifiable disease within the College.

› New staff members must be fully inducted in the procedures for notifiable infectious diseases within an agreed time period, preferably before commencement of classes/duties.

› All staff will be required to complete the mandatory Notifiable Disease online training programme annually in accordance with the staff development programme. The Head of Health and Safety, in conjunction with HR, will keep staff informed (by email and further training if deemed necessary) of any changes that are made to its standard operating procedures and any new infection control measures.

9.1   Infectious Diseases

› Infectious Diseases (also known as communicable diseases) are caused by micro-organisms such as bacteria, viruses, fungi and parasites, able to invade and reproduce in the human body, causing harmful effects. Infectious diseases are spread directly or indirectly from one person to another, transmitted by various routes and with varying degrees of infectivity.

› The infectivity of certain infectious diseases determines the type of infection control strategy applied to prevent further infections. Many of these diseases are more common in children and an infection usually produces immunity, therefore there is a reduced likelihood of adults becoming infected.

› Immunisation programmes are available for many diseases, which have acted as a preventative measure. However, there are some diseases for which there are no vaccinations (Covid-19) and others where there are gaps in the vaccination programmes that have rendered some groups of people vulnerable.

› More detailed information is available on the Public Health Agency website

› Most infectious diseases are contagious for some days before symptoms develop. Therefore it is difficult to prevent the spread of the disease during this period, as the infected person may not be aware they are incubating the disease.

› In light of the current worldwide pandemic relating to the Covid-19 virus and because of the need to continually update guidance to the general public, the latest information and advice can be found at www.gov.uk/guidance/wuhan-novel-coronavirus-information-for-the-public

9.2   Notifiable Diseases

› Notifiable diseases are those infectious diseases required by law to be reported to government authorities. There are 36 diseases (including Covid-19) currently classified as 'notifiable' (see Appendix 12).

› When a general practitioner (GP) or other medical doctor in attendance suspects that a patient is suffering from a notifiable disease such as Covid-19, he or she is legally required to promptly inform the Director of Public Health. The prime purpose of the

notifications system is to detect possible outbreaks, to initiate contact tracing, eg tuberculosis and meningococcal disease, and to trigger rapid investigation, eg food poisoning, while also allowing disease outbreaks to be monitored by the public health agency. It also enables legal measures to be taken when necessary to control infection, eg the exclusion of a food handler suffering from salmonella infection.

› Accuracy of diagnosis is secondary and clinical suspicion of a notifiable infection is all that is required. If a diagnosis later proves incorrect, the notification can be amended.

9.3   Being Informed of a Notifiable Disease

SERC may be informed of a notifiable disease directly or indirectly.

› **Indirectly**
By the Director of Public Health – when they are informed (by a GP or other public health doctor) of any suspected or confirmed case of a notifiable disease in a College student or staff member, they contact the College. The Head of Health & Safety will then ensure that the appropriate action is taken.

› **Directly**
By a student or staff member (or their relative/guardian/friend) - members of SERC staff may be informed directly of a suspected or confirmed case of a notifiable disease. In such cases, the following procedures must be followed.

9.4   Roles and Responsibilities

- **All Staff**

  › All staff must be vigilant and take action immediately if they suspect the possible outbreak of a notifiable disease amongst students or staff members. Covid-19 reporting protocol is now in place within the college and should be strictly adhered to.

  › Staff are also responsible for gathering all relevant information relating to the individual's symptoms and their personal contact details. It is vital that the name of the affected individual's GP is accurately recorded together with their Medical Practice/Health Centre address and telephone number.

  › The Head of School/Department/Unit must be immediately informed of the situation approval given before any student or class is dismissed.

- **The Head of Health and Safety**

  › The Head of Health and Safety is responsible for collating information from the staff member or Head of School (HOS) relating to the suspected or confirmed notifiable disease before contacting the official medical department.

- **The Head of School/Department/Unit (HOS/D/U)**

  › The HOS/D/U is responsible for all decisions in regards to agreeing and approving the temporary dismissal of the student or class. The HOS/D/U will immediately inform and regularly update the Campus Director and the Head of Health and Safety.

- **The Campus Director /Manager**

  › The Campus Director is responsible for contacting and reporting the current medical situation and control measures in place to the Department for Employment and Learning (DEL) and for keeping the Principal and Chief Executive fully informed.

〉 The Campus Director has overall responsibility for decision making should a stage be reached where it may become necessary to close down a Section, Department, Unit or campus for a set period of time to restrict further infection.

〉 The Campus Director, in conjunction with the PR and Communications Officer must keep students, staff, parents and the general public suitably informed of the situation through appropriate means eg individual letters, emails, website, press release or other media.

9.5   Procedure

Staff may be informed directly by a student or staff member (or their relative/friend) that they have a suspected or confirmed notifiable disease.

> **PLEASE NOTE:**
>
> **Staff must treat the affected student/staff information as <u>confidential</u> unless otherwise instructed by the Head of Health and Safety.**
>
> **<u>It is essential not to create alarm or cause rumour</u> amongst other students or staff members.**

- **When informed by telephone:**

   i)   Complete the form at [Appendix 13](#). Remain calm and treat the individual with respect, consideration and privacy.

   ii)   Immediately contact the Head of Health and Safety so that the notifiable disease can be confirmed and reported to the appropriate authorities. The Head of Health and Safety will initiate any appropriate action within the College. (If unable to contact the Head of Health and Safety, contact the Chief HR Officer).

   > ***Head of Health & Safety (John Gault)***
   > *Mobile: 07919 597728*
   >
   > ***Chief Human Resources Officer (Paul Smyth)***
   > *Mobile: 07825 146991*

   iii)   Notify Head of School/Department/Unit.

   iv)   Notify class tutor/line manager and Human Resources.

   v)   You **MUST** consult the Head of School/Department/Unit or the Head of Health and Safety before dismissal of any other student/class.

   vi)   The Head of School/Department/Unit should contact the student/staff member within 24 hours to enquire about the condition of the student/staff member.

- **When Informed in College or During a Planned Educational Visit:**

   i)   Calmly take the individual aside from other students and staff. At all times treat the individual with respect, consideration and privacy.

   ii)   Listen carefully to their symptoms and any additional evidence which leads them or you to suspect they may have contracted a notifiable infectious disease (eg recent contact with a confirmed case). If you think that the individual <u>may</u> have the symptoms of a notifiable disease then **immediately** take further action.

   iii)   If it is considered a medical emergency, call 999.

iv) Complete the form at [Appendix 13](#).

v) If the student has any special educational needs or an existing medical condition, contact Learning Support for any additional guidance (if on an educational visit, the Risk Assessment should already contain this information).

vi) Immediately contact the Head of Health and Safety so that the notifiable disease can be confirmed and reported to the appropriate authorities. The Head of Health and Safety will initiate any appropriate action within the College. (If unable to contact the Head of Health and Safety, contact the Chief HR Officer)

Head of Health & Safety (John Gault)
Mobile: 07919 597728

Chief Human Resources Officer (Paul Smyth)
Mobile: 07825 146991

vii) Contact the student's parent/guardian or staff member's next of kin and make arrangements for them to be collected from the College and request that they visit their GP as soon as possible.

viii) If in College, the Campus Manager must remain with the student or staff member until they are collected.

ix) Give consideration to contacting parents of the remaining student group, especially those with respiratory conditions or low immune system.

x) In conjunction with Learning Support, give consideration to those other students in the class with existing medical conditions to be released from class. Ensure that parents/guardians of these students are contacted in same method as above.

xi) Instruct student (and parent/guardian) or staff member that they **MUST** inform the College of the outcome of the visit to the GP. Request that they provide a note from their GP to say that they are medically fit and infection free before they can return to College/work.

xii) Do not create alarm or cause rumour amongst other students or staff members. At this stage a notifiable disease has not been confirmed.

xiii) Notify Head of School/Department/Unit, class tutor/line manager and Human Resources.

xiv) You **MUST** consult the Head of School/Department/Unit or the Head of Health & Safety before dismissing any student/class.

xv) The Head of School/Department/Unit should contact the student / staff member within 24 hours to enquire about the condition of the student / staff member.

xvi) Outside College Hours (off-campus educational visit only): if the above staff members are not available on their mobiles and you have serious medical concerns about any of your students as regards an infectious disease then contact the emergency services for urgent assistance by telephoning 999.

- **If a Household Member has a Notifiable Infectious Disease**

    If someone in your household takes ill and shows symptoms of, or is confirmed as having, a notifiable disease, follow the procedures below.

    i) Immediately contact the person's GP or medical practice and seek professional guidance.

ii) If the person is officially confirmed by a medical doctor or hospital as having a notifiable disease, carry out the following actions:

iii) Seek confirmation from the medical source (GP or above) if you can continue with your work commitments at the College and ask if there is any additional risk of infection to students, staff/work colleagues by your continued attendance at work. If you work closely with special needs students or those with low immune systems or respiratory medical conditions please highlight this to your GP.

iv) In the unlikely event that your GP believes and confirms in writing that you are a risk to others; notify the HR Department by telephone at the earliest opportunity.

v) Following SERC's Sickness Absence Notification procedures, telephone contact should also be made with your line manager or Head of School/Department/Unit to update them on the situation and to discuss your estimated date of return to work.

vi) On return to work please confirm that you are medically fit to return and infection free by supplying HR with a medical certificate from your GP.

vii) A return to work interview will also need to be completed.

9.6 Preservation of Documents

⟩ The gathering of factual information is very important and will be needed when contact is later made with the relevant official reporting authority. Clarity of information is crucial.

⟩ Following a case(s) of a notifiable disease, the College may be required to provide evidence to an appropriate enforcement agency (HSENI or Public Health Agency), a judicial inquiry, a coroner's inquest, the Police or a civil court hearing compensation claims. In the course of any or each of these, the College may well be obliged or advised to give access to documents produced prior to, during and as a result of the incident.

⟩ Under no circumstances must any document, which relates or may in any way relate (however slightly) to the incident, be destroyed, amended, held back or mislaid. For these purposes "documents" mean not only letters and memos, but notes of meetings, pieces of paper, photographs, and information held electronically e.g. e-mails on computers or other electronic devices.

9.7 Reducing the Risk of Contracting and Transmitting Disease

⟩ Students or staff intending to travel abroad **outside** Western Europe, USA, Canada, Australia and New Zealand, whether or not on College business, are advised and expected to:

- Check The Department of Health website for the latest travel advice: https://www.gov.uk/foreign-travel-advice

- Check the National Travel Health Network and Centre website for recommended immunisations: http://travelhealthpro.org.uk/country-information/

- Take advice from their GP or the Communicable Diseases Section of their local Department of Public Health Medicine.

- Take the precautions and/or preventative measures that are advised or required.

- Take medical advice on return to the UK in respect of any medical condition contracted whilst abroad, ensuring the doctor is informed of the visit abroad.

9.8   <u>Returning to Study/Work</u>

〉 Students and staff returning to College after recovering from a notifiable disease (officially confirmed by a medical doctor or hospital) must be interviewed by the appropriate course tutor/lecturer or HR manager. The aim of this interview will be to establish any further issues that may need to be considered in respect of working conditions/improvements and general support.

〉 The course tutor/lecturer or HR Manager will compile a report and submit it to their relevant Head of School/Department/Unit as part of the overall review of control measures.

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10.0 Lone Workers

Some SERC staff are required to work alone for significant periods of time without close or direct supervision. The following procedures have been put in place to ensure the safety of lone workers, so far as is reasonably practicable, through:

> Increasing awareness of safety issues
> Assessing risks
> Implementing safe systems and work methods
> Providing relevant support
> Full reporting and recording of all incidents, near misses, and injuries
> Constantly monitoring to identify weakness and improve methods of controlling the risk

10.1 Roles and Responsibilities

The roles and responsibilities of staff are shown in the table below:

Area of Lone Working Responsibility	Senior Management	Head of School and Unit Management	Lone Workers
Develop and implement policy and procedure	✓		
Communicate policies and procedures, ensuring staff awareness	✓	✓	
Ensure risks are identified, evaluated and managed	✓		
Risk Assessments		✓	
Monitor compliance	✓		
Implement safe systems of work	✓	✓	
Inform and train staff (eg conflict management)	✓	✓	
Provide support to staff involved in incidents		✓	
Ensure incidents are monitored	✓		
Report, investigate and record incidents		✓	
Take reasonable care of themselves and others	✓	✓	✓
Follow policies, procedures, guidelines and safe systems of work	✓	✓	✓
Report dangers, incidents, accidents and near misses	✓	✓	✓
Seek advice when necessary	✓	✓	✓
Undertake training	✓	✓	✓
Monitor compliance, review and update/improve policy and procedure	✓		

10.2   Manager's Checklist

Managers should ensure that staff who may be working alone are aware of relevant policies and procedures, ensuring they:

> ⟩ appreciate their responsibilities for their own safety
> ⟩ are aware of Risk Assessments and Safe Methods of Working
> ⟩ are issued with appropriate safety equipment
> ⟩ know how to obtain support and advice from management in and outside normal working hours
> ⟩ know the requirements for reporting and recording incidents

10.3   Risk Assessment

Using the Lone Worker Risk Assessment guidance and template at Appendix 14, Heads of School and/or Unit Managers, with the assistance of other trained staff as appropriate, should identify risks to individual lone workers to allow documented safe methods of working to be put in place. The following must be included in the risk assessment process:

For all lone workers:

> ⟩ Decide whether systems can be adopted to avoid workers carrying out tasks on their own.
> ⟩ Evaluate individual physical capability to carry out lone working, such as medical conditions, disability, being pregnant or inexperienced.
> ⟩ Assess the working practice of the lone worker and any other contributory factors (e.g. physical security of the workplace).
> ⟩ Assess necessary equipment and the capacity of the lone worker to handle the amount of equipment themselves.
> ⟩ Estimate and assess emergency equipment that may be required, such as a torch, map of the local area, telephone numbers for emergencies, including a 'Buddy' and the Police, a first aid kit or mobile phone chargers.
> ⟩ Assess risk of physical and non- physical assault

In addition to the above, the following assessment of risk must be made:

For Campus Based Lone Workers:
> ⟩ Safe access and egress
> ⟩ Security arrangements on Site (CCTV, lighting etc.)
> ⟩ Security arrangements in buildings (Alarm systems, Panic alarms, communication systems, CCTV etc.)
> ⟩ Level of supervision

For Mobile Lone Workers:
> ⟩ Staff to client risk
> ⟩ Travelling between appointments
> ⟩ Communication (e.g. mobile phones) and traceability (e.g. visit log at base)

10.4   Safe Systems of Work

There are a number of practical steps that can be followed to help Lone Workers minimise the risk of incident. It is essential that where technology fails, appropriate back-up procedures are in place to ensure the safety of the Lone Worker at all times.

Under no circumstances should Staff compromise their safety. **Lone Workers have a duty to discuss any safety concerns with their Line Manager.** However, if they feel unsafe at any point, while in a lone working situation, they should remove themselves from the situation immediately.

- **Campus-based Lone Workers**

    Individual requirements should be discussed with their line manager and a workable arrangement agreed and implemented. As a minimum, during the campus-based Lone Worker's daytime shift, they should be **contacted at least once during the day by their line manager** (or other appointed person) to check that all is well and ensure their safety.

    If at any time the campus-based Lone Worker feels that their safety is being compromised they should contact their line manager (if available) or, if they are under immediate threat, contact the Police direct on 999 for immediate assistance.

- **Mobile Lone Workers – Buddy System**

    Lone Workers must keep in contact with colleagues and ensure that they make another colleague (or 'Buddy') aware of their movements.

    The Mobile Lone Worker should:

    › Leave and update a visit log with a manager or colleague(s).
    › Leave written details of their movements with their 'Buddy' including full address, person/s they will be working with or visiting, telephone numbers (if known) and indications of how long they expect to be at those locations (both arrival and departure time). To comply with data protection legislation, this information **must be kept confidential** and must not be left in a place where those who do not need to have this information, or members of the public can access it.
    › Leave details of their vehicle with a colleague, for example, registration number, make, model, and colour.
    › Leave contact details with their 'Buddy' including personal and emergency contact details.
    › Notify their 'Buddy' of planned breaks or rest periods.
    › Agree arrangements for regular contact with their 'Buddy', particularly if they are delayed or have to cancel an appointment.

    The Buddy should:

    › Be fully aware of the movements of the Lone Worker. To comply with data protection legislation, this information **must be kept confidential** and must not be left in a place where those who do not need to have this information, or members of the public can access it.
    › Have all the necessary contact details from the Lone Worker, including personal and emergency contact details, such as next of kin.
    › Have details of the Lone Worker's known breaks or rest periods.
    › Attempt to contact the Lone Worker, if they do not contact the 'buddy' as agreed.
    › Follow the agreed escalation procedure for alerting their senior manager or the Police if the Lone Worker cannot be contacted, or they fail to contact their 'buddy' within agreed and reasonable timescales.

    To make the Buddy system effective:

〉 The 'buddy' must be made aware that they have been nominated and what the procedures and requirement for their role are.

〉 Contingency arrangements should be in place for someone else to take over the role of the 'buddy' in case the nominated person is called away.

〉 There must be procedures in place to allow someone else to take over the role of the 'buddy' if the lone working situation extends past the end of the nominated person's normal working day or shift.

The following applies to both campus-based and mobile lone workers:

10.5   Personal Protective Equipment

If a Lone Worker has been given personal protective equipment, such as mobile phone or similar device, they must ensure that it is in full working order (with sufficient charge) and they have it with them and that they use it before entering into a situation, where they have prior knowledge of risk or, at that point in time, consider themselves to be at risk.

10.6   Raising Concern

If any member of staff feels that their safety is being compromised they should contact their line manager or, if they are under immediate threat, contact the Police direct on 999 for immediate assistance.

Depending on the circumstances and whether contact through normal means (mobile phone) can or cannot be made; the manager or colleague should involve the Police if necessary.

It is important that matters are dealt with quickly, after consideration of all the available facts, where it is thought that the Lone Worker may be at risk. If Police involvement is needed, they should be given full access to information held and personnel who may hold it, if that information contains data that might help trace the Lone Worker and provide a fuller assessment of any risks they may be facing.

10.7   Extreme Importance of Adhering to Arrangements

It is extremely important that contact and appointment arrangements, once in place, are adhered to and do not fail simply because staff forget to make the necessary call when they finish their shift. The result is chaos and unnecessary escalation and expense, which undermines the integrity of the process.

Being alert to these warning signs will allow the Lone Worker to consider all the facts at their disposal, allowing them to make a personal risk assessment and, therefore, a judgement as to their best possible course of action, for example, to continue with their work, or to withdraw. At no point should the Lone Worker place themselves, their colleagues at risk or in actual danger.

10.8   Training

As part of the staff induction process, all new staff will be briefed on the College's Health and Safety policies and procedures in addition to employee responsibilities including security arrangements, risk management and safe systems of work.

Specific safety and security training will provide Lone Workers with the skills to identify and manage risks arising from lone working, including communication skills to manage challenging or potentially violent behaviour.

10.9   Incident Reporting & Review

All incidents presenting a risk or a potential risk to Lone Workers must be reported in accordance with the procedures set out in the College's Accident and Incident SOP.

It is primarily the responsibility of the person/persons involved in an incident to report the incident as soon as practicable to:

⟩ their Line Manager/team leader following the incident.

⟩ the Police (employees needing Police assistance whilst off site, travelling, or in a non-SERC building should dial 999).

⟩ the SERC Incident Reporting System.

All reported incidents will be reviewed and analysed by the Head of Health and Safety.

10.10   Support & Counselling

Lone Workers may be affected emotionally following a physical or non-physical assault and may need active support counselling, especially after an incident and on resuming or returning to work. This is particularly important given the potential impact of stress on the employee's current or future health.

It is essential that Line Manager conduct a full debriefing of Lone Workers who received or experienced an incident while working alone. This should include information on accessing professional counselling via the Staff Counselling service.

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11.0   Risk Assessment

11.1   Background

⟩ This section provides staff with guidance and procedures for carrying out risk assessments, required under the Management of Health and Safety at Work Regulations (Northern Ireland) 2000. The assessments need to address risks to employees and other people, for example, students, visitors and contractors.

⟩ The purpose of a risk assessment is to make sure that no one gets hurt or becomes ill as a result of activities which take place at any SERC Campus. A risk assessment is identifying what could cause harm to people, assessing what is in place to prevent that harm from occurring and improving those measures where necessary.

⟩ Risk assessments must be undertaken prior to any new or changed operation.

11.2   Documents & Records

⟩ Copies of all current Risk Assessments must be made available at the workplace. Persons performing a task are expected to have read the relevant assessment prior to commencing that task. This requirement also covers students engaged in construction/engineering project work both inside and outside the SERC Campus.

⟩ Students working and studying within the workshop/classroom should also be made aware of the Risk Assessments for that particular area and the importance and purpose of such documentation fully discussed with them during their Health and Safety induction programme.

⟩ As soon as signed off by the Head or Assistant Head of School/Department/Unit, all completed Risk Assessments must be uploaded to the Health and Safety Team Site. **NB:** Even though an Assistant HOS may sign the Risk Assessment on behalf of the Head of School/Department/Unit, the responsibility for H&S remains with the appointed HOS.

⟩ Records of the Assessments must be retained for referral and inspection during regular audits of the workplace carried out by the Head of Health and Safety and duly elected College Union Health and Safety representatives.

11.3   Responsibilities

- **All Staff**

  ⟩ **All** staff have a duty to take reasonable steps to ensure that they do not place themselves or others at risk of harm.

  ⟩ **All** staff must make themselves aware of the risk assessments for their area.

  ⟩ Any serious Health and Safety risk or concern must be immediately reported to the appropriate HOS/D/U and Head of Health and Safety.

  ⟩ Staff must fully comply with any procedures that the College may introduce as a measure to protect the safety and well-being of all College staff members, students, contractors and visitors.

  ⟩ Staff who have been allocated a room, workshop, or other area where they are not fully aware of assessed risk should immediately update themselves of **all** risks and hazards within that area. This information is available on the Health and Safety Team Site or directly from the "responsible" person who compiled the Risk Assessments.

  ⟩ Should the area be used for *"any other purpose"* other than that specified by the current Risk Assessments, *"additional"* assessment may be required. If such planned activities or events in any way comprise the health, safety and well-being of individuals then it is the responsibility of that person organising the new activity/event to compile and provide additional risk assessments. They must also seek approval from their Line Manager/HOS **prior** to carrying out any such activities.

  ⟩ All staff should attend Risk Assessment training at least once every three years.

- **Head of School/Department/Unit**

  ⟩ HOS/HOU will, in consultation with their staff, nominate an appropriate and capable person from their staff on each campus who will be **responsible** for compiling, updating and uploading of Risk Assessment and relevant COSHH documentation to the Health and Safety Team Site. Risk assessments can be carried out by any member of staff with a good knowledge of the area which they are assessing, who has received adequate Risk Assessment training through staff development and understands the process of completing the Risk Assessment form.

  ⟩ It is the responsibility of the HOS/HOU to ensure that their nominated staff are suitably trained and equipped to carry out Risk Assessments.

  ⟩ HOS/HOU must ensure that **all** tasks and work areas under their control are adequately risk assessed, are current and completed by the responsible person(s), as appropriate:

- Task based
- Work based/ training
- Equipment and Machinery
- COSHH
- PPE
- Rooms under their remit
- Offices under their remit
- Contactors
- Staff with disabilities
- Students with disabilities
- Buildings and grounds/common areas
- First aid
- Fire
- Asbestos
- Contractors
- Stress
- Expectant mothers
- Violence in the Workplace
- Child Protection

⟩ HOS/HOU must consider the financial and operational costs against safety benefits to ensure the action to be taken is reasonably practical. The aim is to prioritise the actions to firstly reduce the likelihood of an occurrence, then to reduce the seriousness of the consequences.

⟩ HOS/HOU must ensure that Risk Assessments are kept under review by the responsible person(s) and are updated periodically or if changes to procedures/equipment dictate. Current College requirements are that all assessments are reviewed at least annually.

⟩ HOS/HOU (or their nominated Assistant HOS) will ensure that their appointed responsible person(s) have the necessary risk assessments in place; they are relevant, signed, dated and uploaded to the Health and Safety Team Site.

- **Line Managers and HOS/HOU**

  ⟩ When Risk Assessments have been completed it is the **responsibility of the immediate line manager and HOS/HOU** to monitor their implementation and check that the required control measures are actually in place.

- **Head of Health & Safety**

  ⟩ The Head of Health and Safety will ensure that adequate training is provided to those staff members who may require additional Risk Assessment training and for new members of staff in their induction programme.

  ⟩ The Head of Health and Safety in close co-operation with College H&S elected Union Representatives will carry out annual audits (and unannounced audits if deemed necessary) of Risk Assessments, COSHH registers, workshops, classrooms and offices and keep management informed of any concerns or irregularities.
  NB: Risk assessments may also be requested in the event of an accident or incident within the workplace.

- **Estates Department**

  ⟩ The Estates Department, in conjunction with the Head of Health and Safety, will ensure that all contractors are familiar with the risk procedures and they do not put their lives or that of others at risk at any time.

- **Appointed Risk Assessors (Responsible Person(s)**

  ⟩ By completing and signing the Risk Assessment, individual staff members do not make themselves personally liable; the whole process is initiated, enforced and monitored by SMT.

  ⟩ Risk Assessors must use the approved form available on the Health & Safety Team Site on the College intranet. Existing assessments should be revised to the new format (see Appendix A) when they are next reviewed and re-issued.

  ⟩ Ensure that **all** documentation related to H&S is dated and signed by the appropriate Line Manager/HOS//D/U or their nominated assistant.

  ⟩ Completed and signed off Risk Assessments should be immediately uploaded to the Health and Safety Team Site by the appointed responsible person/persons.

- **Human Resources**

  ⟩ The Staff Development Department in conjunction with the Head of Health and Safety will ensure that adequate training is provided to those staff members who may require additional Risk Assessment training and for new members of staff in their induction programme.

  ⟩ Staff will be trained/up-skilled on Risk Assessment procedures whenever new Health and Safety practices are implemented or changes in circumstances or equipment dictate. All staff however, should attend Risk Assessment training at least once every three years.

11.4   Disciplinary Action

  ⟩ Those members of staff who fail to comply with, or chose to ignore, the Risk Assessment procedures and in doing so knowingly put their own lives and that of other staff/students at risk will be called to explain their actions at a disciplinary meeting. This meeting will include the Campus Directorate, the Head of Health and Safety.

11.5   Risk Assessment Procedure

  ⟩ Use the relevant SERC Risk Assessment form (downloaded from the Health and Safety Team Site of the College Intranet.)

  Follow the **5-step process** as follows:

  1. Divide your work into manageable categories
  2. Look for the hazards
  3. Evaluate the risks
  4. Record your findings and prepare an action plan where necessary
  5. Review and revise the assessment
  6.

› **Step 1 – Divide work into manageable categories**
Either divide up the work into separate work areas or defined tasks (dependent on the work environment).

› **Step 2 – Look for hazards**
A hazard is anything which can cause harm or has the potential to cause harm e.g. chemicals, electricity, working at height, poor lighting, equipment etc. For example, the blade of a circular saw machine has the potential to cause severe cuts to a person so the blade is therefore a hazard.

Concentrate only on the significant hazards that could result in genuine injury, ignoring trivial risks. **Take note** however, what may appear trivial to some can result in accidents and injury to those less experienced.

A hazard checklist at Appendix 15 may assist with this process.

› **Step 3 – Evaluate the risk**
The risk is the chance or likelihood that someone will be harmed to some extent by the hazard. If the risks are well controlled and suitable precautions put in place then the chance of injury will be low, if suitable precautions are not in place then the chance of injury will be higher.

Examples of risk control measures might be guarding, personal protective equipment (PPE), ventilation, training or a safe system of work. The recorded control measures should be precautions that are **actually in place** rather than measures which may be introduced.

Hazards and mitigating actions should be identified in a logical and common sense way, prioritised and given a realistic timeframe for implementation.

› **Step 4 – Record the findings**
Record the significant findings of the Risk Assessment. The College's risk assessment form should be used to record findings:

- Activities or work areas examined
- Hazards identified
- Persons exposed to the hazards
- Existing control measures and their effectiveness
- Evaluation of risks and their prioritisation
- Additional precautions needed
- Who is to take action and when
- Review date

› **Step 5 – Review and revise the assessment**
Risk assessment should be seen as a continuous process to ensure that it is up to date and **relevant**. A review needs to be carried out when:

- Other activities or hazards are introduced
- Changes in the processes take place
- New methods of work are introduced
- There are new employees
- An accident occurs

11.6 **Communication of the Results of the Risk Assessments**

› For risk assessments to be relevant rather than simply paperwork exercises, the findings need to be communicated to everyone concerned.

> Once the risk assessments for an area have been completed, there should be a consultation period (approximately two weeks) where other members of staff in the area cab comment or contribute to them. (Tabled at team meeting/briefing perhaps).

> Following this period, amendments should be made before being sent to the appropriate Head of School/Department/Unit (or their nominated assistant) to be signed. Once signed, the risk assessments should be placed in a prominent position where everyone (including students) can refer to them as necessary.

> The appointed responsible person(s) must ensure that completed Risk Assessments and COSHH Registers are uploaded unto the Health and Safety Team Site immediately documentation is signed and dated.

11.7   Risk Assessments for Vulnerable Individuals

Additional risk assessments should be carried out for vulnerable individuals, including:

- Pregnant women*
- People with disabilities
- Students who are currently in the school system

*Under the Sex Discrimination Act 1975, if an employer fails to protect the health and safety of their pregnant workers it is automatically considered sex discrimination. (See SERC Health and Safety Policy for New and Expectant Mothers.)

11.8   Safe Systems of Work (SSOW)

Following the assessment for work/task based assessments including COSSH, equipment and machinery and PPE a SSOW must be written by the nominated person or named Health and Safety individual within construction projects, detailing the control measures to be adopted.   These SSOW must be provided to all staff, students, contractors and visitors as necessary. SSOW should include:

- Job specification
- Induction information for staff and students
- Signs near equipment or machinery
- Signs near chemicals used
- Lesson plans
- Contractors procedures/site rules
- Lock-Out Procedures
- Travel procedures
- Service Level agreements
- Any other specific assessment e.g. lone working, disability, expectant mother

12.0   Health and Safety Audits

> In compliance with current legislation this Standard Operating Procedure (SOP) sets out the practical implementation of SERC's Health and Safety Policy and risk assessment process in relation to ensuring the highest health and safety standards at all SERC campuses and all project work carried out by students on or off campus.

> The purpose of formal Health and Safety audits is to systematically review and critically examine current Health & Safety procedures across the College (and all student placements), recording findings and providing guidance on how procedures may be improved.

> Those staff members (and students) who fail to comply with the H&S policy and procedures, may be subject to college disciplinary action.

> These procedures apply to all SERC staff with Health and Safety Audit responsibilities, outlined below.

12.1   Responsibilities

- **Head of Health and Safety:**

  > Ensure that all Risk Assessments have been carried out by the appointed 'Responsible Person' within each School/Department/Unit.
  > Develop the annual Audit Academic Year Planner in consultation with Heads of School/Department/Unit and Union Health and Safety Representatives.
  > Regularly review and update all audit documentation in conjunction with the Head of School/Department/Unit.
  > Co-ordinate the audit programme in conjunction with the Union Health and Safety Representatives.
  > Carry out audits in conjunction with Union Health and Safety Representatives.
  > Ensure that completed audit reports are uploaded to the appropriate Team Site on the College intranet.
  > Review/update the SERC Audit Proforma yearly to reflect any changes in legislation and/or College procedures.
  > Meet monthly with the Chief HR Officer to review the H&S audit of their area and to discuss any corrective or remedial action deemed necessary.

- **Head of School/Department/Unit:**

  > Ensure that all Risk Assessments, COSHH registers and documents relating to H&S are accurate, complete, signed, dated and uploaded to the H&S team Site.
  > Regularly review and update all audit documentation in conjunction staff within their School/Department/Unit and with the Head of Health and Safety for clarification if necessary.
  > Ensure that identified and appropriate corrective action is implemented.
  > Actively promote a health and safety culture with staff at team meetings and stress the importance and consequences of Health and Safety Audits throughout the campuses.
  > Meet with the Chief HR Officer and the Head of Health and Safety to discuss any relevant issues highlighted in the audit report and to act upon any findings or take agreed corrective measures with immediate effect.

- **Union Health and Safety Representative:**

  > Co-ordinate the audit programme in conjunction with the Head of Health and Safety.
  > Carry out audits in conjunction with the Head of Health and Safety
  > Offer advice and guidance to staff on all areas relating to Health and Safety and actively promote a health and safety culture to all.

- **Responsible Person:**

  > Ensure that all Risk Assessments and COSHH Registers are carried out, are current, signed, dated and uploaded to the Health and Safety Team Site on the College intranet.

> Ensure that all classrooms, workshops and training areas are safe places to work and study for all staff, students and visitors to the college.

12.2   Audit Programme

> The audit programme will be conducted at regular intervals between October and August of each academic year, with each School/Department/Unit being audited annually (or as deemed necessary) by the Head of Health and Safety in conjunction with H&S Union representatives.

> In September of each academic year, an Audit Academic Year Planner (AAYP) will be produced by the Head of Health and Safety. This programme of audits and inspection shall be agreed by the Chief HR Officer before being forwarded to CMT for further consultation and approval if deemed necessary.

> Following approval, Heads of School/Department/Unit will be sent a link to the agreed AAYP (Audit Academic Year Planner) and attention drawn to this SOP.

> Following completion of H&S audits, Heads of School/Department/Unit may be asked to attend a meeting arranged by the Chief HR Officer to discuss the findings. The Head of Health and Safety will be in attendance to explain and clarify the audit report.

12.3   Health & Safety Committees

> SERC's Health and Safety Committees (Bangor/Ards; Downpatrick; and Lisburn) are established to operate in accordance with good practice to enable consultation between management, trade union representatives, staff and students on all aspects of health and safety. Following each quarterly meeting, the Chair of each Committee will report any matters of concern to the next CMT meeting.

> It is the duty of the H&S Committees to consider reports of any formal audits of College work places and activities.

> It is the responsibility of the Chief HR Officer (in consultation with the Head of Health and Safety) will prepare and present an annual report and Assurance Statement to CMT and onward to the Governing Body at the end of each academic year. This report will summarise the work of the three Health and Safety Committees.

12.4   Post Audit Action

Following Health and Safety Audits, all programmes of work should be approved by the Chief HR Officer in the first instance, with CMT being informed. However, should the Chief HR Officer deem that wider discussion is required to determine if approval is to be granted, consultation with the CMT will take place.

12.5   Audit

> **Stage 1: Pre Audit Contact** by the Head of Health and Safety and Trade Union H&S Representative (the 'auditors') to HOS/Department /Unit confirming times and dates when auditors will be carrying out inspections. NB: The exact location of rooms, and workshops will not be disclosed due to the nature of the audit.

> **Stage 2: Auditor's Inspection and verification** of the information provided by reviewing the relevant documentation requested (i.e. Risk Assessments) and checking random physical conditions of the area in question. This verification inspection also allows the auditors to gain a general view of the health and safety culture which exists within the department/school/unit.

⟩ **Stage 3: Audit Report** uploaded to the Health and Safety Team site (within 2 weeks of the audit inspection) and made available to all staff. At the same time, the report and details of any 'Non-Conformance' and/or 'Corrective Actions' will be discussed with the Chief HR Officer at monthly meetings with the Head of Health and Safety. **NB** If deemed necessary, a further meeting with HOS/U/D may be required to clarify audit results and the findings may also be raised and discussed at Campus Health and Safety Committee meetings.

12.6   Audit Report

The Audit Report contains a summary of the audit findings (including photographic evidence if required) and gives the overall audit score using a traffic light warning system (Green = safe. Amber = some changes required and Red=immediate intervention required). If necessary, it may also include:

⟩ **Non-Conformance Notice** which detail any identified issues (See Appendix 16)
A 'Non-Conformance' notice highlights areas where, in the opinion of the auditors, College policy and/or health and safety legislation/guidance is not being adequately adhered to.

⟩ **Corrective Action Form** (see Appendix 17) which details any required corrective action for the responsible person and target date for implementation. This form will be issued (if deemed necessary) to the appropriate Head of School/Department/Unit following the scheduled meeting of the Chief HR Officer and Head of Health and Safety. This form may also highlight other responsibilities and remedial action aimed at Estates and H&S Department.

12.7   Audit Review Meeting

⟩ In the event of corrective action being required, this will be discussed during the monthly meeting held between the Chief HR Officer and the Head of Health and Safety. the appropriate HOS/U may be invited to this meeting, to determine the status of required corrective action, review due dates and offer further assistance.

⟩ **NB:** It may be necessary to have a meeting with the HOS/U scheduled much sooner depending on the urgency and potential risk to staff/students.

12.8   CMT / Governance

⟩ At the end of each academic term, the Head of Health and Safety shall compile a report and forward it to CMT (via the Chief HR Officer) for their consideration. This report will provide the following details so that all parties are suitably informed on progress on all areas relating to Health and Safety Audits:

- The number of audits carried out per term
- The Schools/Departments where the audits took place
- A brief description of the relevant findings
- A breakdown of which department is responsible for resolving the issues
- A brief description of unresolved and outstanding issues
- A simple colour code and categorisation of the faults. (**Green** = Minor, **Amber** = Action required and **Red** = Urgent or Immediate action to be taken)

⟩ Every month during the academic year, the Head of H&S will meet with the Chief HR Officer to review, access and sign-off completed audits. At the end of each academic year, the Head of Health and Safety will forward a mHealth and Safety Report to the Chief HR Officer which will include all relevant statistical information relating to Health

and Safety Audits carried out during that academic year. This report may then be forwarded to the CMT/Governing Body for approval.

13.0   Communication Plan

These procedures will be communicated to all staff and students via the College intranet and also during the induction process. Some will be further communicated to staff via mandatory online training modules.

14.0   Review

These procedures will be reviewed (and updated if necessary) biannually or sooner to reflect changes in legislation or circumstance.

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Red Fire Box Locations in Main Campus Receptions

BANGOR – Main Campus Building

BANGOR – SPACE Building. (Reception area)

DOWNPATRICK

LISBURN
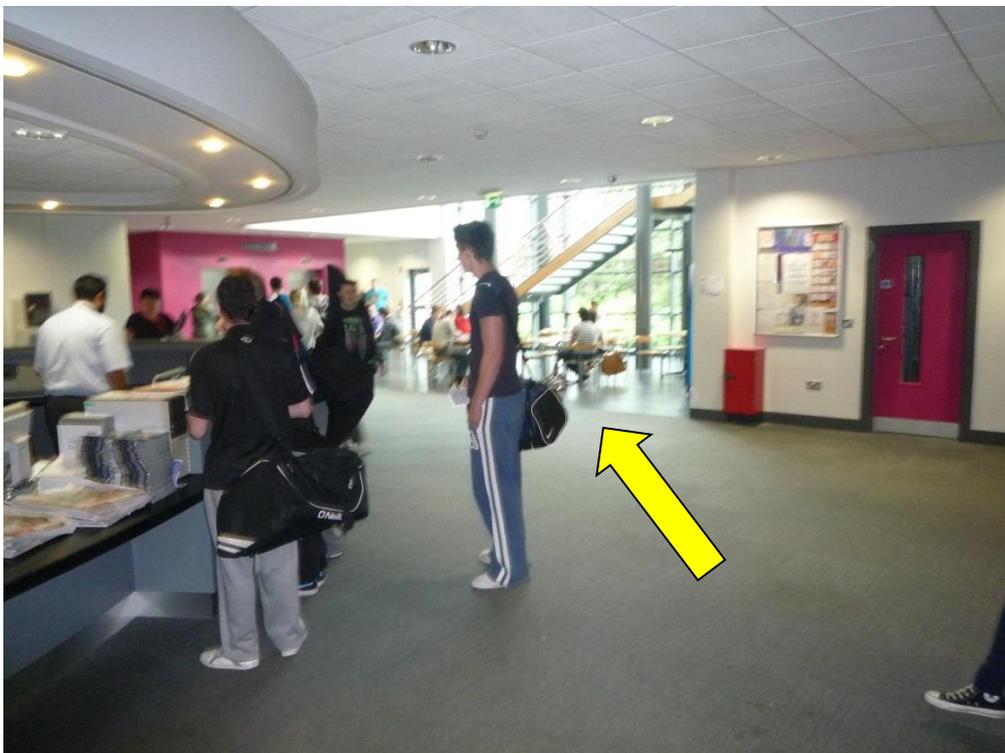
NEWTOWNARDS

Ballynahinch

Newcastle

<div align="right">**Appendix 2**</div>

Assembly Points at Main Campuses

BANGOR CAMPUS

Fire Assembly Point

Fire Assembly Point

CASTLE PARK ROAD

FIRE ASSEMBLY POINT

GRANSHA ROAD
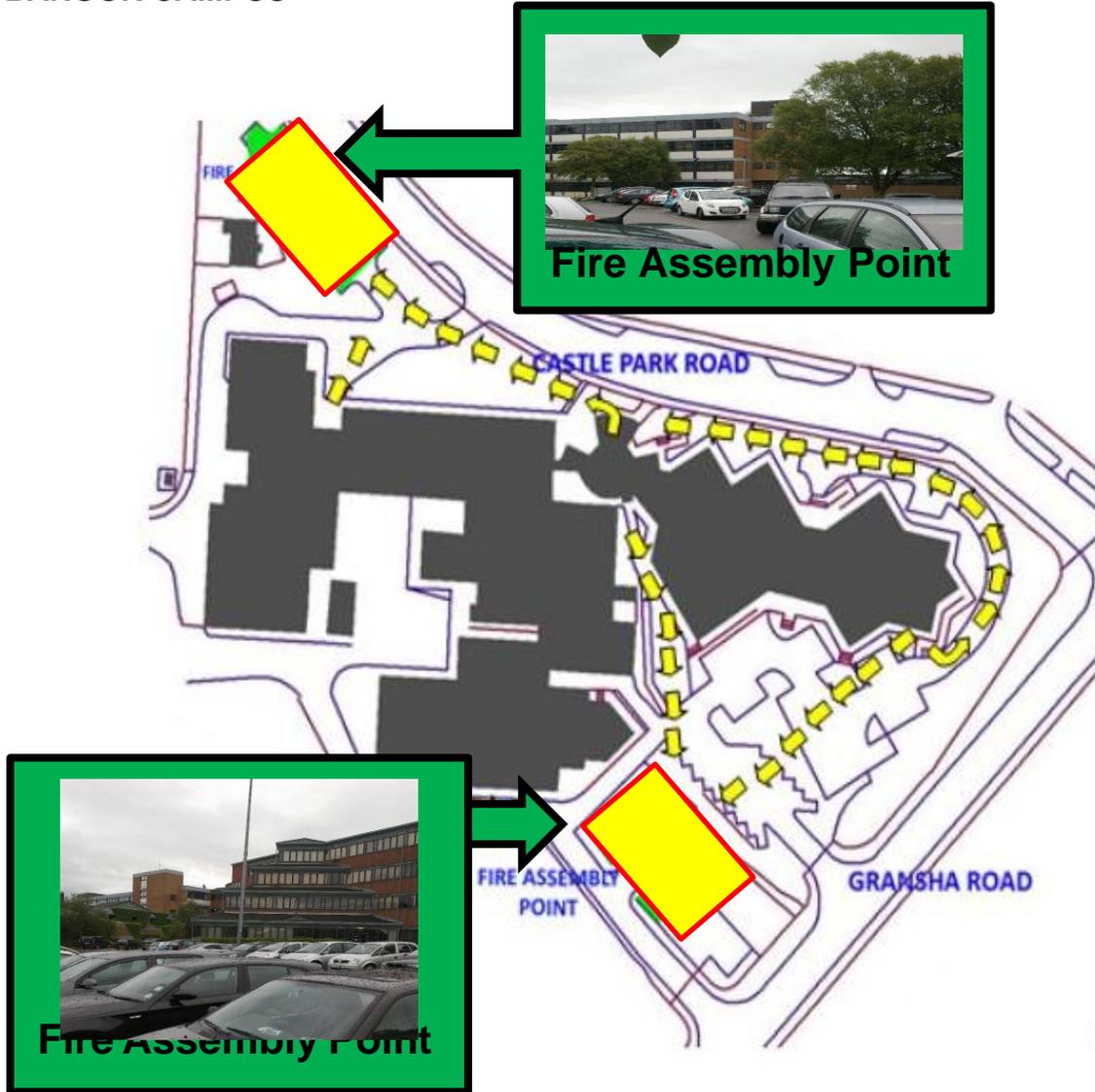
DOWNPATRICK CAMPUS
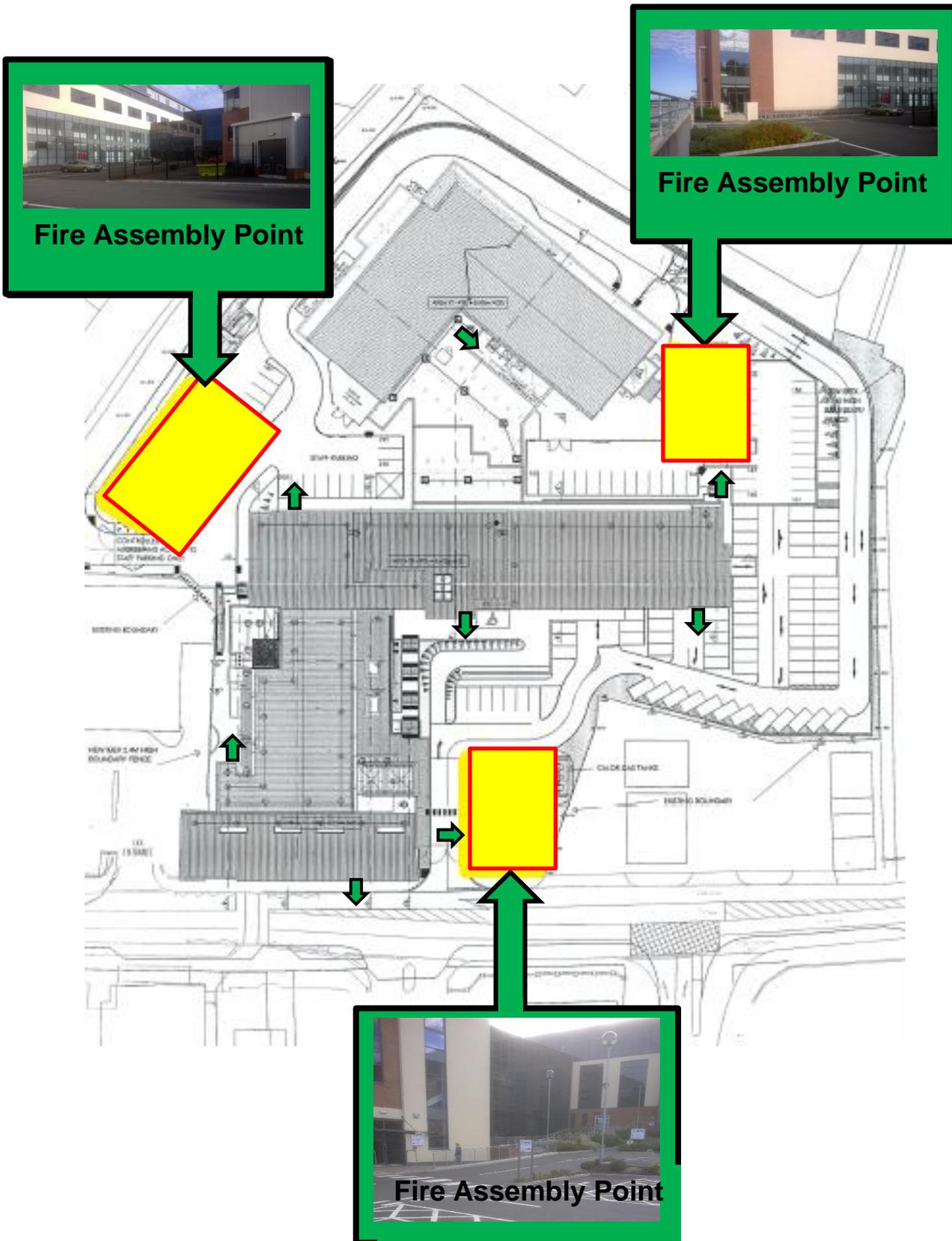
LISBURN CAMPUS

NEWTOWNARDS CAMPUS

Fire Assembly Point

Fire Assembly Point

BALLYNAHINCH CAMPUS

Fire Evacuation Assembly Point.

NEWCASTLE CAMPUS

Fire Evacuation Assembly Point.

EXISTING BOUNDARY FENCE

CONCRETE BASE FOR OIL TANK WITH TIMBER BOARDED FENCE SURROUND

Recyclable waste area and Bin Store

N

CASTLEWELLAN ROAD

EXISTING BOUNDARY FENCE

TREATMENT TO ROAD FRONTAGE TO BE REINSTATED TO MATCH EXISTING AND BE CONSTRUCTED SO AS NOT TO INTERFERE WITH THE PROPOSED VISIBILITY SPLAYS

Back to Fire Evacuation Procedures

SPACE Fire Assembly Point (Bangor)

SPACE
External Boundary

Main
Entrance

Bangor Academy &
Sixth Form College

CASTLE PARK
ROAD

Fire
assembly
point
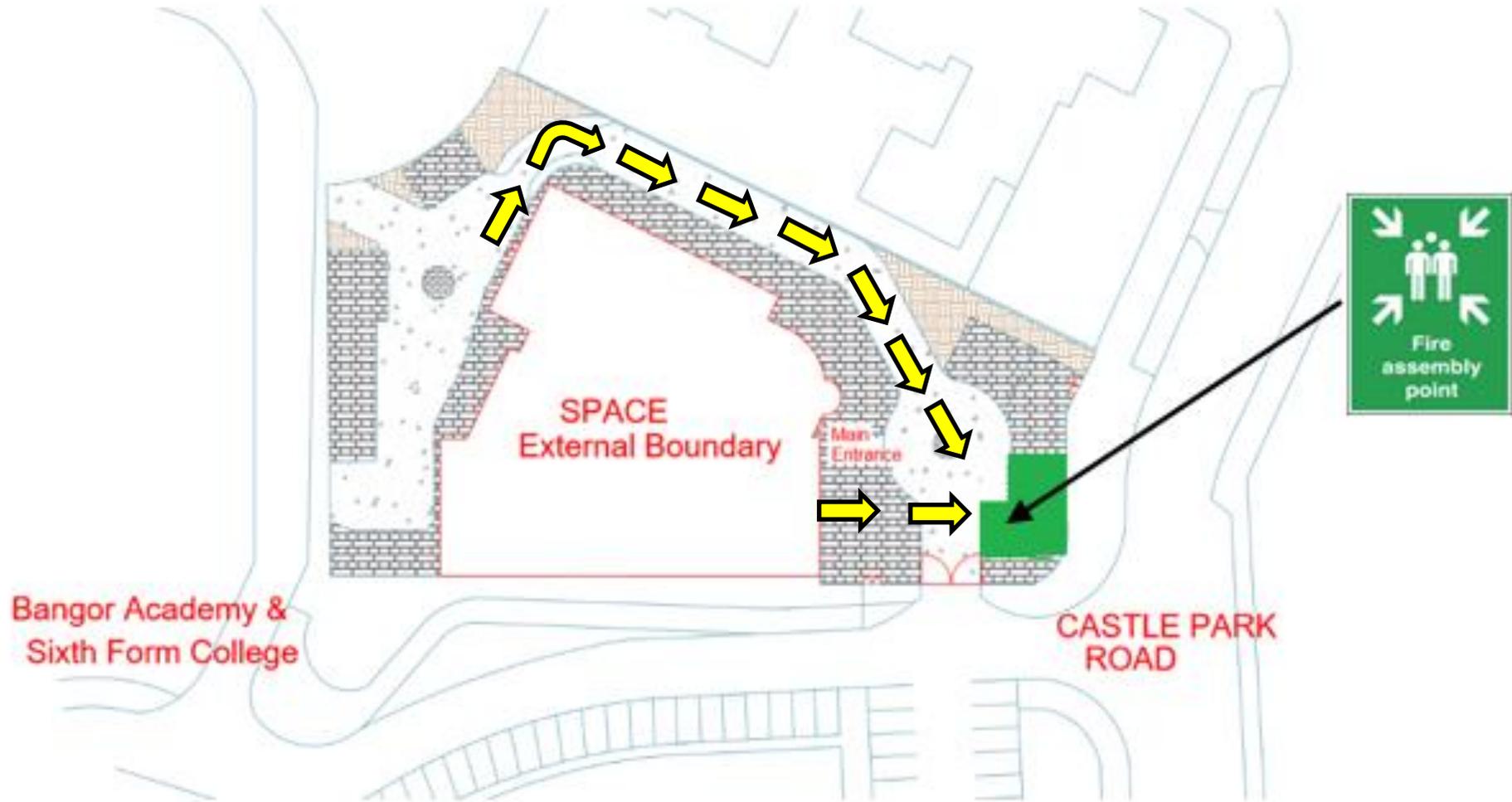
Completed Assessment EXAMPLE

Emergency Evacuation Assessment: STUDENT

This form has been developed so that the College can establish any particular needs that a student may have to enable safe evacuation from the building.

Any detail provided will be handled in confidence and shared only with the necessary parties required to ensure the person's safety and that of others. All information provided will be stored and kept in accordance with the Data Protection Act.

This information on this form will be confidential.

Student Name: Jim Blair	**Tel:** 0771234567
Class: Plumbing 1st Year	
Campus: Lisburn Campus	
Type of Disability: Severe hearing disability	
Description of activities undertaken during the course: Jim is able to cope with almost all aspects of the plumbing practical course. The only areas that create some difficulty are when he is using electrical and mechanical power tools. He is unable to hear that they are operating and relies a lot of the vibration of the equipment to tell him if it is actually running etc. There is also a problem when other students are using equipment nearby that he may not be able to distinguish if machinery is on or off. Welding is a problem in that although he can clearly see that the flame at the welding torch is suitable adjusted he cannot hear if it is making any serious noises when malfunctioning. For this reason, Jim has been allocated a buddy at times to work with him to prevent any serious issues or injury.	
Date Form Completed: 08/09/2013	

A: Normal Place(s) of Study					
	Building 1	**Day/Time**	**Building 2**	**Time**	**Comments**
Building:	Lisburn Block 3 Level C	Mon, Wed, Fri 09:00 – 17:30	Lisburn Block B Level B	11:00 – 11:15 13:00 – 13:30	Buddy scheme in operation during lunch and tea breaks
Floor:	B Floor		B Floor		

Room:	3C-16	1B-3 (cafeteria)	

B: Evacuation Details

Describe the locations in the building where access is required:

The student (Jim) is located mainly in the plumbing workshop on C Floor at the top of the building. He has been given induction on where the nearest fire evacuation exit is and has also been allocated a buddy (fellow student) to assist him if required. He uses the restaurant/canteen at the front of the building but again a buddy is there if assistance is needed.

Jim needs to be immediately informed if an alarm sounds. He must then be taken from the plumbing workshop via the fire evacuation exit and down the outside stairs to the back of Block C. The fire assembly point is located at the rear of the campus at Wallace Avenue.

Continue on a separate sheet if required.

Would it help if a written personal emergency evacuation procedure was in place?

Yes: ☒   No: ☐

Does the emergency evacuation procedure need to be provided in an alternative format e.g. BSL, Braille, tape, large print etc?

Yes: ☐   No: ☒

Does the student have any difficulty with reading and/or identifying the signs that mark the emergency exits and evacuation routes to the emergency exits?

Yes: ☐   No: ☒

Does the student have any difficulty hearing the fire alarm(s) provided in the place(s) of work?

Yes: ☒   No: ☐

Would the student experience any difficulty raising the alarm if a fire was discovered?

Yes: ☒   No: ☐

Is anyone designated to assist the student to get out in an emergency such as a helper/buddy?

Yes: ☒   No: ☐

Is the student likely to experience difficulties independently traveling to the nearest emergency exit for a safe and timely evacuation?

Yes: ☐   No: ☒

Does the student find the stairs difficult to use?

Yes: ☐   No: ☒

Is the student dependent on a wheelchair for mobility?

Yes: ☐   No: ☒ If the student uses a wheelchair would they have problems being able to transfer from their wheelchair without assistance? Yes: ☐   No: ☐
General Comments (to include any relevant information not already identified above): Jim is a very capable and intelligent young individual and one may not recognize that he actually has a disability on first meeting him. His lip reading skills are excellent but one must ensure that you are facing him when giving verbal instruction or warnings about equipment etc. It is easy to forget that the student cannot hear the alarm sounding in the event of a fire or emergency siren.

If you have ticked 'YES' to any of the above then the Personal Emergency Evacuation Plan (Student) MUST be completed.

Completed PEEP EXAMPLE

Personal Emergency Evacuation Plan: STUDENT

This form should be completed for a SERC student who requires assistance with ANY aspect of emergency evacuation. The plan should include assistance required from the point of raising the alarm to passing through the final exit of the building.

Any detail you provide will be handled in confidence and with your consent stored only with the necessary parties required to ensure your safety and that of others.

A copy of the completed form will be held by:

• The student

• All Class Lecturers for the student's course

• Learning Support

Note: This plan must be reviewed on an annual basis (at least) and/or when any significant changes occur (of the building or employee).

A: Alarm System

1. The student is able / ~~unable~~ to raise the alarm (delete as appropriate).

    If unable to raise the alarm independently, please detail agreed alternative procedures.

    The student would be able to set the alarm off but he would have no way to tell if the siren is actually being sounded.

2. The student will be informed of an emergency evacuation by:

    Existing audible alarm system: ☐
    Vibrating pager: ☒
    Visual alarm system: ☒
    Other (please specify below): ☐

    Jim has been issued with a vibrating "Deaf Alert System" which vibrates should the alarm go off. In addition to this an additional flashing beacon has been installed in the welding booth when he is working alone.

B: Evacuation Procedure

(step by step account from when alarm is raised to final exit)

- The lecturer in charge will immediately stop all operations on hearing the alarm sound and go directly to the student (Jim).

- It is important that the lecturer makes good eye contact and stands in front of the student to assist lip reading/communication. Remember that the student has to lip read and fully understand what is actually happening during the evacuation of the building.

- Jim will remain beside the lecturer in charge at all times unless instruction has been agreed that his fellow buddy/student will take him to the fire assembly point as rehearsed during induction.

C: Designated Assistance

(details of the roles of persons designated to assist in executing the evacuation plan)

Jim has been allotted a "Buddy"/student assistance and this assists him get to the restaurant at lunchtime and ensures that he is heard when placing orders for meals etc.

D: Equipment Provided and its Location

(evacuation chairs etc)

Jim has been issued with a Deaf Alert vibrating card by the Learning Support Team. It is checked each morning that it is functioning and that the battery is full.

D: Safe Routes

(description of the primary and secondary routes)

A building layout plan should be attached to this form with routes clearly marked.

See below.

Fire Assembly Point
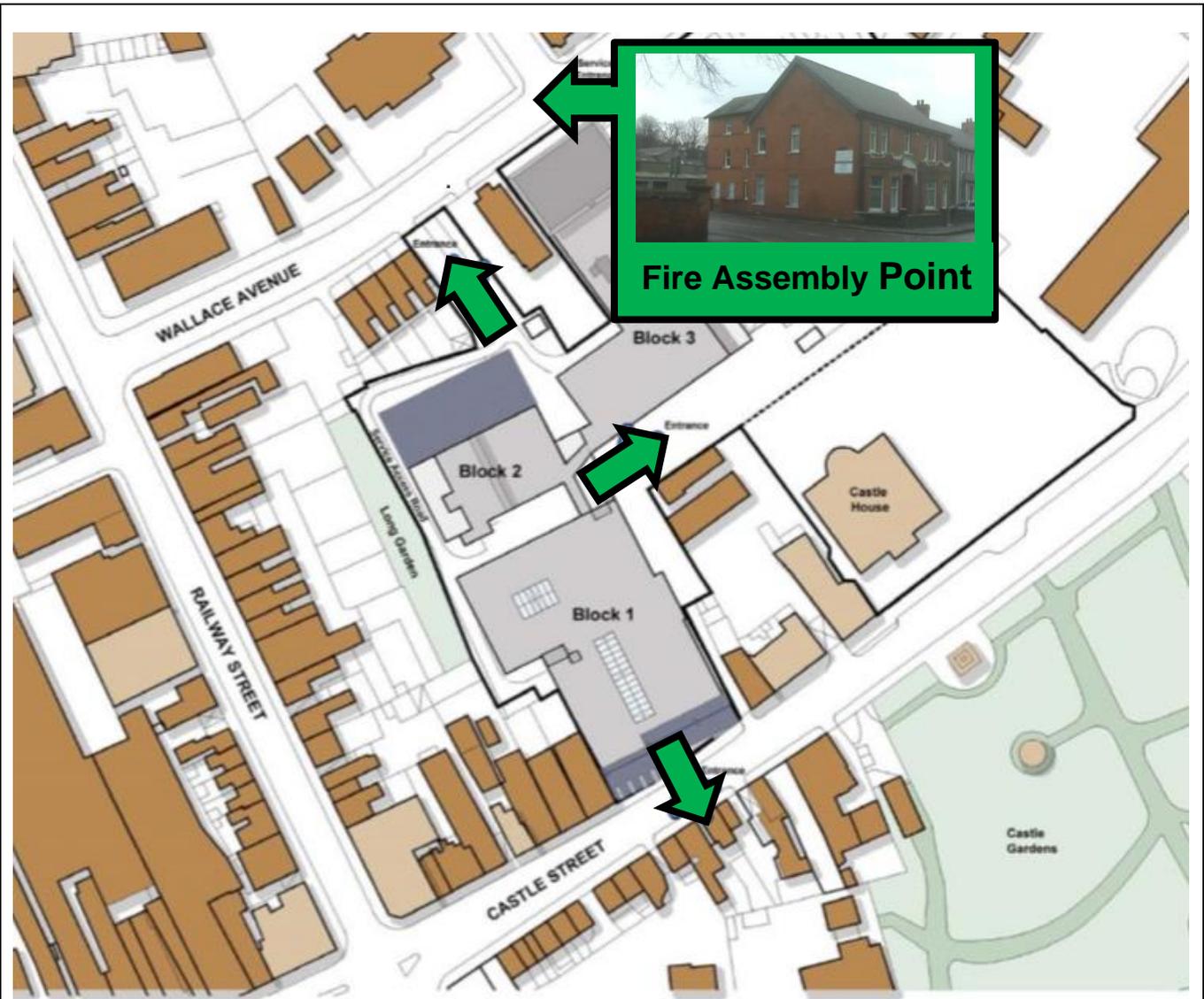
The Fire Assembly Point for all plumbing students is located at back of the College on Wallace Avenue. This is accessed via Block 3 using the fire evacuation route detailed below.
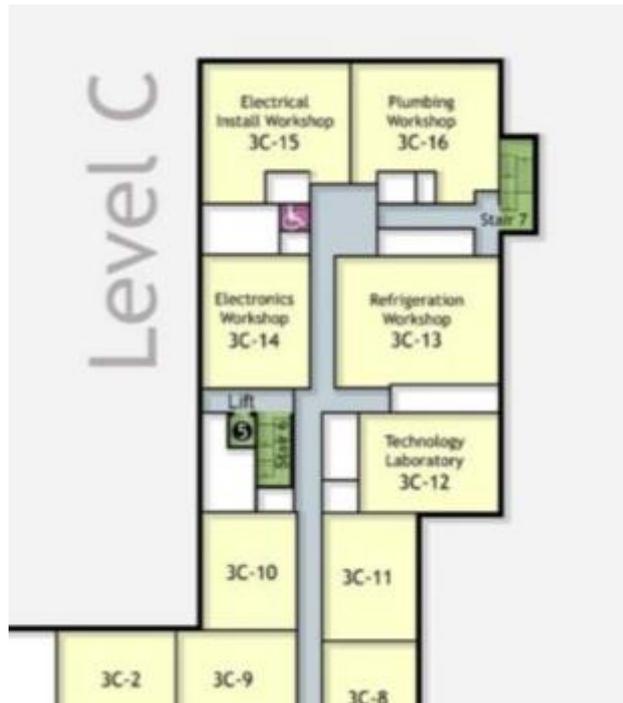
In the unlikely event of a fire alarm being raised students using the plumbing workshop (3C-16) should follow the lecturer's instructions and leave the workshop immediately.

The escape route is via stairwell 7 adjacent to the workshop. Students should walk to the ground level and proceed to the Fire Assembly Point located at Wallace Avenue. (See above.)

Should the alarm be raised whilst dining in the cafeteria, students should leave immediately by the main entrance to the campus via Castle Street and wait at the Fire Assembly Point immediately in front of the Fire and Rescue Service building. (See location map below).

They should remain at the Assembly Point until they have been informed by SERC fire wardens or rescue services to return.

The Fire Assembly Point is located immediately in front of the Fire and Rescue Service building located on Castle Street. Use the main entrance of the campus (Level B, Block 1) when evacuating the building in the event of a fire alarm being raised.

Back to Fire Evacuation Procedures (PEEPs)

Duties and Responsibilities of College First Aiders

⟩ Attend **ALL** calls for first aid assistance.

⟩ Ensure their own safety at all times.

⟩ Provide assistance at all times in compliance with their 'First Aid at Work' training.

⟩ Be aware of the limits of their competency and when to call for an ambulance or assistance.

⟩ Take charge of the casualty until a satisfactory level of recovery has been achieved or until the emergency services have arrived.

⟩ Ensure that the condition of the casualty does not deteriorate as far as reasonably practicable by implementing their first aid training.

⟩ Refer the patient onto hospital or to their own GP as appropriate if they are in the opinion that further treatment/attention is required.

⟩ Complete appropriate online forms upon discharging first aid duties in **ALL** cases where treatment has been rendered in line with Accident and Incident Reporting SOP.

⟩ Keep designated first aid boxes fully stocked and ensure that all items are within their expiry date. Replacement items are available through the Head of Health and Safety.

⟩ Frequently check first aid rooms in their area to ensure that they are fully equipped and tidy/clean. Any problems should be reported immediately to the Head of Health and Safety.

Minimising the Risk of Exposure to
Blood Products and BBV (Blood Borne Viruses)

⟩ Do avoid contact with blood or bodily fluids.

⟩ Do take all necessary precautions to prevent puncture wounds, cuts and abrasions in the presence of blood and body fluids.

⟩ Do avoid use of, or exposure to, sharps (needles, glass, metal etc) when possible and discard sharps directly into the sharps container immediately after use, and at the point of use.

⟩ Do take particular care in handling and disposal if use of sharps is unavoidable – one use only contaminated sharps must be discarded in to an approved sharps container. This must be constructed to BS 7320; 1990 / UN 3291, and used containers must be disposed of through a waste management company who will dispose of them safely as **'waste for incineration only'**.

⟩ Do protect all breaks in exposed skin by means of waterproof dressings and/or gloves.

⟩ Do protect the eyes and mouth by means of a visor or goggles.

⟩ Do apply good, basic hygiene practices including hand-washing before and after glove use, and avoid hand-to-mouth/eye contact.

⟩ Do control surface contamination by blood and body fluids by containment and appropriate decontamination procedures.

⟩ Do dispose of all contaminated waste safely and refer to relevant guidance if you are uncertain how to classify and dispose of your waste.

In the event of a needle stick injury or contamination from blood or bodily fluids to cuts, eyes, mouth, the employee must attend Accident and Emergency within 1-2 hours, in order for clinical risk assessment and prophylactic measures to be undertaken if indicated as appropriate. This injury must be reported to management and health and safety notified.

Back to First Aid Procedures

COSHH Risk Assessment No:	SERC INSPIRING. TRANSFORMING. ENRICHING.

Department /School:	Date:

Describe the activity or work process. *(Include how long and how often this is carried out and the quantity of substance used)*	
Location of process being carried out?	

Identify the persons at risk:	Employees *(including trainees)* ☐	Contractors ☐	Public *(including students)* ☐

Name the substance involved in the process and its manufacturer. *(A copy of a current safety data sheet for this substance should be attached to this assessment)*	

Classification *(state the category of danger)*

☐ Flammable Gases, liquids & solids	☐ Gas under pressure	☐ Acute Toxicity 4, skin 2 & eye 2
☐ Unstable Explosives	☐ Corrisive to metals/skins and eye	☐ Respiratory specific target organ
☐ Oxidizing Gases & liquids	☐ Acute Toxicity oral category 1, 2 &3	☐ Hazardous aquatic, acute & cronic.

Hazard Type

☐	☐	☐	☐	☐	☐	☐	☐	
Gas	Vapour	Mist	Fume	Dust	Liquid	Solid	Other	(State)

Route of Exposure

☐	☐	☐	☐	☐	
Inhalation	Skin	Eyes	Ingestion	Other	(State)

Workplace Exposure Limits (WELs) *please indicate n/a where not applicable*

Long-term exposure level (8hrTWA):	Short-term exposure level (15 mins):

State the Risks to Health from Identified Hazards

Control Measures: *(for example extraction, ventilation, training, supervision). Include special measures for vulnerable groups, such as disabled people and pregnant workers. Take account of those substances that are produced from activities undertaken by another employer's employees.*

Is health surveillance or monitoring required?		Yes ☐	No ☐

Personal Protective Equipment *(state type and standard)*

Dust mask ☐		Visor ☐	
Respirator ☐		Goggles ☐	
Gloves ☐		Overalls ☐	
Footwear ☐		Other ☐	

First Aid Measures

Storage

Disposal of Substances & Contaminated Containers

Hazardous Waste ☐   Skip ☐   Return to Depot ☐   Return to Supplier ☐   Other ☐

(If Other Please State): _____

Is exposure adequately controlled?	Yes ☐	No ☐

Risk Rating Following Control Measures

High ☐	**Medium** ☐	**Low** ☐

Assessed by: Date: Review Date:

Types of Assistance Dogs

- **Guide Dogs:** assist people who are blind or are visually impaired.

- **Hearing Dogs:** assist people who are deaf or are hearing impaired

- **Support Dogs/Dogs for the Disabled:** can be trained to do many other tasks which their owner may find difficult or impossible.

- **Support Dogs:** also train dogs for people with disabilities and Seizure Alert dogs for people with Epilepsy.

Members of Assistance Dogs

The following are registered members of Assistance Dogs (UK)

- Guide Dogs for the Blind Association (GDBA)
- Hearing Dogs for Deaf People
- Support Dogs
- Dogs for the Disabled
- Canine Partners

Back to Animals on Campus

SERC NEW & EXPECTANT MOTHER RISK ASSESSMENT

HEALTH & SAFETY CHECKLIST

Hazards identified below can be entered on the College standard risk assessment form (Appendix 10) along with suitable control measures to reduce any risk to an acceptable level. See the risk assessment guidance notes and hazards and controls checklist at Appendix 11.

Further recommended guidance can also be found at www.womens-health.co.uk

1. Physical Demands	Y	N
Does the work involve lifting or pushing heavy objects?	☐	☐
Does the work involve standing or squatting for long periods?	☐	☐
Does the role involve a lot of walking?	☐	☐
Does the work involve working at height or climbing steep steps?	☐	☐
Does the woman need to access confined spaces?	☐	☐
Will any tasks become more hazardous as the woman changes shape and size?	☐	☐
Does the role involve shift work?	☐	☐
If so, does it involve working at night?	☐	☐

2. Mental Demands	Y	N
Does the role involve meeting challenging deadlines?	☐	☐
Does the role involve rapidly changing priorities and demands?	☐	☐
Does the role require a high degree of concentration?	☐	☐

3. Working Conditions – General	Y	N
Does the work involve lone working or working in remote locations?	☐	☐
Does the role involve any home working?	☐	☐
Will the woman have difficulty accessing toilet facilities?	☐	☐
Does the role prevent the woman from taking rest breaks when needed?	☐	☐
Does the role prevent the woman from controlling the pace of work?	☐	☐
Are there any risks of violence at work?	☐	☐
Does any part of the job involve dealing with members of the public?	☐	☐
If so, does it involve dealing with distressed or troubled people?	☐	☐
Does the role involve contact with young children or sick people?	☐	☐
Does the role involve dealing with emergencies?	☐	☐
Does the role involve working unpredictable hours?	☐	☐
Are there any obstacles in College or offices that could cause problems for	£	☐

pregnant women, e.g. in the event of a fire evacuation? ……………………………

	Y	N
Does the work involve extremes of hot or cold? …………………………………….	☐	☐
Is the temperature in her working environment unreasonable? ……………………	☐	☐
Does the woman use Display Screen Equipment? If so: ………………………….		
Does the woman have difficulty getting in and out of the workstation?	☐	☐
Will this become a problem as the pregnancy develops? …………………………	☐	☐
Is the woman prevented from using a seat that is adjustable, with a backrest?...	☐	☐

4. Specific hazards

	Y	N
Does any part of the job involve the use of chemicals? ……………………………..	☐	☐
Could the woman come into contact with any biological risks such as Rubella or Chicken Pox? ………………………………………………………………………….	☐	☐
Does the job involve working with cats & sheep? (Lambing – Toxoplasmosis) …	☐	☐
Is there any exposure to vibration, e.g. through the use of hand tools?	☐	☐
Does the woman need to wear personal protective clothing? ……………………	☐	☐
If so, will this present a problem as the pregnancy develops? ……………………	☐	☐
Does the work expose the woman to ionizing radiation? ………………………….	☐	☐
Does the work involve exposure to electromagnetic fields & waves? ……………	☐	☐
Will any of the hazards listed above still be a risk during the breastfeeding period?	☐	☐

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

Signed……………..………………………………… Date: …………………….……..
(Line Manager)

Signed……………..………………………………… Date: …………………………..
(HR)

Signed: ……………………………………………. Date: ………………………………
(Employee or Student)

Note: This checklist is to be kept on the employee's personal file for at least three years. (In the case of students, it should be retained by the Health and Safety department.)

Back to New and Expectant Mothers

![SERC logo - INSPIRING. TRANSFORMING. ENRICHING.]

Risk Assessment

Name of person carrying out Risk Assessment ………………..……………… **Date assessment carried out**……………….….
Review Date …………………..….

Area / Activity	Hazards	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom	Date of Action	Done ✓

Assessment approved by: ………………………………………….. (Head of School/Campus Management)

Date Assessment forwarded to Human Resources : ………………………

Date Assessment forwarded to Head of H&S Department (If applicable): ……………….

Appendix 11

SERC New & Expectant Mother Risk Assessment

Hazards and Controls Guidance Checklist

Examples of Potential Hazards	Suggested Control Measures *The list below is not exhaustive and is given as guidance only. Add additional control measures as appropriate to the work area.*	Checklist (Action or Not Applicable?)
1. Physical Demands		
Lifting / Pushing heaving objects	⟩ Advise woman to seek assistance when lifting / pushing heavy objects. ⟩ If the above is not possible, undertake a full manual handling risk assessment.	
Standing or squatting for long periods	⟩ Ensure woman has regular breaks to undertake moderate exercise / relaxation.	
Excessive walking	⟩ Use of transportation.	
Working at height	⟩ Review necessity for working at height or provide assistance / partner where unavoidable.	
Confined spaces	⟩ Areas to be checked and assistance to be provided in all cases where woman accesses a confined space.	
Changing size / shape of the employee	⟩ Continuous checks to be undertaken as pregnancy progresses.	
2. Mental Demands		
Challenging deadlines	⟩ Flexible deadlines where possible. ⟩ Continuous communication between employee and line manager or student and tutor/supervisor.	
Changing priorities / demands	⟩ Provision of information to the woman as soon as available. ⟩ Continuous communication between employee and line manager or student and tutor/supervisor.	

Examples of Potential Hazards	Suggested Control Measures *The list below is not exhaustive and is given as guidance only. Add additional control measures as appropriate to the work area.*	Checklist (Action or Not Applicable?)
Work requiring a high degree of concentration	⟩ Ensure woman has regular breaks to undertake moderate exercise / relaxation.	
3. General Working Conditions		
Lone working / remote areas	⟩ Reschedule work to avoid lone working. ⟩ Implement a reporting system at set time periods.	
Toilet breaks / facilities	⟩ Ensure that there are adequate facilities available.	
Rest Breaks	⟩ Ensure the woman has the facility to take a break when required.	
Pace of work	⟩ Flexible deadlines where possible. ⟩ Regular checks by line manager or tutor/supervisor to ensure pace of work is not affecting the woman's health.	
Risk of violence	⟩ Review operations and procedures to eradicate possibility of violence. ⟩ Provide assistance when required.	
Working with members of the public; distressed / troubled people; or young children / sick people	⟩ Re-arrange tasks to avoid / minimise contact where possible. ⟩ Provide assistance when required.	
Obstacles in the way of escape eg in the event of a fire	⟩ Remove obstacle. ⟩ If this is not feasible, relocate activity to a different area.	
Indoor air pollution	⟩ Relocate where possible. ⟩ Restrict time allowed in this location. ⟩ Provide Personal Protective Equipment.	
Extremes of hot / cold or unreasonable temperatures	⟩ Withdraw the necessity to work in these extremes ⟩ Limit time spent in these extremes ⟩ Provide respite breaks as appropriate ⟩ Provide Personal Protective Equipment	
Display screen equipment	⟩ Ensure that a DSE Assessment has been undertaken on the workstation.	

Examples of Potential Hazards	Suggested Control Measures *The list below is not exhaustive and is given as guidance only. Add additional control measures as appropriate to the work area.*	Checklist (Action or Not Applicable?)
	〉 Locate the woman on a suitable workstation where space is not a problem. 〉 Seat changed to suit the specific individual.	
4. Specific Hazards		
Use of chemicals	〉 Ensure COSHH Risk Assessments have been undertaken on all hazardous substances.	
Biological risks	〉 If the woman is not immune from chicken pox, avoid contact with known cases of chicken pox or shingles. 〉 Ensure the woman is fully briefed of the risks involved and the precautions to take. 〉 Follow any procedures laid down by placement providers. 〉 Advise the woman to seek guidance from their own GP / midwife if they have any concerns.	
Working in agriculture / horticulture or with cats and sheep	〉 Avoid contact with sheep at lambing times. 〉 Wear gloves and wash hands thoroughly if emptying cat litter trays. 〉 Avoid handling raw meat if possible. 〉 If handling raw meat, wash hands thoroughly and wash down any work surfaces which raw meat has touched. 〉 Always cook meat thoroughly. 〉 Wear gloves for gardening. 〉 Wash vegetables thoroughly before eating.	
Exposure to vibration	〉 Avoid / limit the use of hand tools where vibration is a problem.	
Ionizing radiation	〉 Avoid the use of radioactive materials where possible. 〉 Reschedule lab experiments until they are safe to undertake.	
Electromagnetic fields / waves	〉 Avoid the use of electromagnetic fields / waves where possible. 〉 Reschedule lab experiments until they are safe to undertake.	

<u>Notifiable Infectious Diseases</u> under the Health Protection (Notification) Regulations 2010

Acute Encephalitis/Meningitis Bacterial
Acute Encephalitis/Meningitis Viral
Anthrax
Chickenpox
Cholera
COVID-19
Diphtheria
Dysentery
Food Poisoning
Gastroenteritis (< 2years)
Hepatitis A
Hepatitis B**
Hepatitis Unspecified
Legionnaires' Disease
Leptospirosis
Malaria
Measles
Meningococcal Septicaemia
Mumps
Paratyphoid Fever
Plague
Poliomyelitis (Paralytic)
Poliomyelitis (Acute)
Rabies
Relapsing Fever
Rubella
Scarlet Fever
Smallpox
Tetanus
Tuberculosis (Pulmonary)
Tuberculosis (Non Pulmonary)
Typhoid
Typhus
Viral Haemorraghic Fever
Whooping Cough
Yellow Fever

Report other diseases that may present significant risk to human health under the category 'other significant disease'.

Food poisoning notifications include those formally notified by clinicians and reports of Salmonella, Campylobacter, Cryptosporidium, Giardia, Listeria and E Coli O 157 informally ascertained from laboratories.

[Back to Notifiable Infectious Diseases](#)

Notifiable Infectious Disease (Suspected or Confirmed)

Clarity and accuracy of recorded information is crucial. It will be needed should contact be made with the relevant reporting authority (HSENI or Health Promotion Agency).

Information Received about a Suspected or Confirmed Notifiable Infectious Disease
Date: Time:
Information received by:
Method of notification:
Details of person providing information: Name: Contact No:
AFFECTED STUDENT / STAFF DETAILS
Name of Student or Staff Member:
Date of birth: Student ID / Staff No:
Contact Details and Telephone No(s):
Address:
Class or Department:
Class Tutor or Line Manager:
Special Educational Needs (if any):
Existing Medical Condition (if any):
GP / Medical Practice Details
Name:
Telephone Number:
Diagnosing Doctor's name (if applicable):
Type and Symptoms of the Disease (if known):
The period of time that the Doctor/GP has stipulated that the individual must remain at home/away (self-isolation) from College/work place (if known):
Any other relevant information:

Guidance Sheet for Lone Working Risk Assessment

Address where work is to take place: ………………………………………

Work activity being undertaken: ………………………………………..

Brief description of work: ………………………………………………..

Hazard identification:
Identify all the hazards specific to the lone working activity; evaluate the risks and record the appropriate risk grading; describe all existing control measures and identify any further measures required.

Specific hazards may need to be assessed for an individual Lone Worker e.g. pregnancy risk assessment. These assessments should be completed using the relevant SERC recording forms and should be cross referenced with this document.

Hazard(s) Risk Grading
Control Measures (include alternative work methods, training, supervision, protective equipment, alarms)

Workplace:
Identify any hazards specific to the workplace or work environment which may create particular risks for lone workers e.g. confined spaces, lack of emergency call systems

Process:
Identify any hazards specific to the work process which may create particular risks for lone workers e.g. electrical systems, use of dangerous substances

Equipment:
Identify any hazards specific to the work equipment which may create particular risks for lone workers e.g. manual handling aids, mechanical failure

Violence:
Identify the potential risk of violence – you may find it helpful to review recent and past incidents to assess the "true" picture

Hazard(s) Risk Grading
Control Measures (include alternative work methods, training, supervision, protective equipment, alarms)

Individual:
Identify any hazards specific to the individual which may create particular risks for lone workers e.g. medical conditions, pregnancy/breastfeeding, young workers.

Work pattern:
Consider how the lone worker's work pattern integrates with those of other workers in terms of both time and geography

Other:
Please specify

Persons at Risk: Identify all those who may be at risk.

Receptionists On-call Staff
Office Staff Estates Engineers
Visitors /Others (please identify)

Training: Identify the level and extent of information, instruction, and training required.
Consider experience of workers.

SERC Induction and Local Induction
Conflict Resolution
Cultural Awareness
Manual Handling
Fire Safety and Evacuation
Personal Safety Training
Task / professional training
Other - please list
Supervision: identify the level of supervision required.
Identify all necessary supervisory measures

Is suitable supervision in place?
Periodic telephone contact with lone workers necessary?
Periodic location visits to lone workers?
Regular contact (e.g. telephone, radio etc.)
Automatic warning devices e.g. motion sensors
Manual warning devices e.g. emergency call buttons, panic alarms etc.
End of task / shift contact
Other – please specify

Additional Information: Identify any additional information relevant to the lone working activity, including emergency procedures.

Name(s) of Lone Worker(s): …..…………………………………………………………

Job Role: ………………………………………………………………………………….

Assessment Review Date (at least annually): ……………………………………..

Assessor: …………………………………………………………………………………

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

Comments:

Back to Lone Worker Assessment

HAZARD CHECKLIST

1. **Mechanical**
   Entanglement
   Friction/abrasion
   Cutting
   Shearing
   Stabbing/puncturing
   Impact
   Crushing/trapping
   Ejection

2. **Transport**

3. **Access**
   Slips, trips and falls
   Falling or moving objects
   Obstructions or projections
   Confined spaces

4. **Handling/Lifting**

5. **Electricity**

6. **Chemicals**
   Toxic
   Irritant
   Sensitising
   Flammable
   Corrosive
   Explosive
   Carcinogenic

7. **Fire and Explosion**

8. **Particles and Dust**
   Inhalation
   Ingestion
   Abrasion of skin or eye

9. **Radiation**
   Ionising
   Non-ionising

10. **Biological**
    Bacterial
    Viral
    Fungal

11. **Workplace Factors**
    Noise
    Vibration
    Light
    Humidity
    Ventilation
    Temperature
    Pressure/vacuum

12. **Organisational**
    Poor maintenance
    Lack of supervision
    Lack of training
    Lack of information
    Unsafe systems
    Provision of unsuitable equipment

13. **The Individual**
    Individual not suited to high work rate
    Unsafe behaviour of individual

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Non-Conformance Observation Report (NCOR)

NCOR No. :	Date:	Audit No. :

Description of Non-conformance
Raised due to: Internal Audit / Staff/student Complaint / Normal Working (delete not applicable)
Reported by :

Remedial Action
Action by :   To be completed by :   (date)

Action to Prevent Recurrence
Action by :   To be completed by :   (date)

Corrective Action Form

Responsibility	Please ✔	Description of risk/hazard	Action required.	"Corrective action" completion date.
HOS/Dept/Unit				
Estates				
Health and Safety Dept				
Other (Graham's etc)				
Proposed Date of Review Meeting: Month: _____ Day _____ Time am / pm				

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