

Compton Verney House Charity

Health and Safety Policy – April 2022

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1. Corporate Health & Safety Policy Statement

The Board of Trustees of Compton Verney House Charity (the Board) acknowledges its legal and moral responsibilities for the safety, health and welfare of its staff, volunteers and visitors and all other persons whose health and safety may be affected by the Trust's activities.

The Board accepts overall responsibility for policy formulation and implementation. In turn, all levels of management are responsible for carrying out health and safety duties placed upon them. Peter Wilson is the Trustee representative for H&S for the Board.

The Board will ensure that there are sufficient resources for the successful implementation of the health and safety management policy through active monitoring and review, as well as committing adequate financial, human and other resource to ensure the effective implementation of this policy.

The primary element of the policy is to prevent, as far as is reasonably practicable, injury or ill health to members of staff, volunteers and visitors who may be affected by the actions of the Trust.

The policy will be communicated to members of staff, volunteers and people engaged on a contractual basis and all others who may be using or visiting the site. All personnel will be directed to the policy detail to ensure their understanding of carrying out required work in a manner that does not expose themselves or others to risk.

The requirement to communicate all relevant safety matters will be facilitated by whatever means is deemed to be the most effective for particular situations and will include the use of electronic communication, meetings / departmental briefings, notice boards or consultation with individual members of staff and will be supported by documented means where necessary or appropriate, e.g. minutes of meetings. Equally, the demonstration of good practice by senior management is considered essential in order to reinforce the safety culture of this organisation.

The Trust actively encourages participation in matters relating to health and safety by ensuring that the appropriate means for reporting of safety and welfare issues are provided and suitable arrangements for consultation.

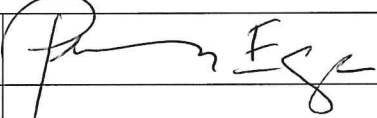
Appropriate action will be taken should there be any breaches of established health and safety regulations or rules by any person(s).

Where appropriate, the monitoring and review of the Trust's health and safety management policy will be carried out under the direction of the appointed competent person(s) to determine performance against stated aims and objectives and will be amended where legislation, changes to working practices or new hazards necessitate this.

The aim of our Safety Management System is to ensure that we continue to improve our health and safety performance year on year through the setting and monitoring of health and safety objectives.

Policy Authorisation:

As the undersigned Chair of the Board of Trustees of the Compton Verney House Charity, I accept full responsibility for the implementation of this Health & Safety Policy and will ensure that working practices conform to the statement of intent.

PENNY EGAN		26/4/22
Name P	Signature: Chair of the Board	Date

Non – Observance

It is the duty of all staff and volunteers to comply with all systems put in place at work to protect their health and safety. Members of staff found to be in repeated breach of this policy are liable, therefore, to have disciplinary action taken against them.

2. The Organisation

2.1 Trust Overview

Compton Verney Art Gallery is a charity originally set up and funded by the Peter Moores Foundation. The gallery (buildings and landscape) is owned and managed by the Compton Verney House Charity, an independent charity, supported by self-generated income (admissions, retail, hire and fundraising) and income from our endowment fund. The artworks however are owned and managed by the Compton Verney Collection Settlement.

Approximately 125,000 people visit Compton Verney each year. There are: 41 full time equivalent staff, 31 casual staff and 158 volunteers, including staff working in the shop in the gallery and in the visitor welcome centre housed in the car park, selling tickets, merchandise and refreshments.

Catering services for the Restaurant and Café are contracted out to Fosters and there are roughly 12 full time equivalent people working for the caterers. In addition there are a variety of contracted service engineers, builders, cleaners, technicians, conservators and art specialists on site at various times.

2.2 Health & Safety Objectives 2022

- Carry out an independent health and safety audit annually
- Quarterly health and safety committee meetings
- Annual review of risk assessments or more frequently where regularly
- Full site health and safety inspections to be undertaken quarterly
- Encourage 'near miss' reporting as part of induction

2.3 Roles & responsibilities & Safety Arrangements

Compton Verney House Charity Health & Safety Reporting Structure

Primary Guidance: [What you need to know](#)

Primary Guidance: [Directors Responsibility for Health and Safety](#)

The **Board of Trustees** are ultimately responsible for health and safety and will liaise with the CEO-Director to:

- a) ensure there is an effective policy for health and safety within the Trust and adequate resources are provided to fulfil the policy;
- b) ensure that responsibility is properly assigned, accepted, and implemented at all levels;
- c) set personal objectives for health and safety for the Directors and Managers and review health and safety performance of their area with each respective department;
- d) include health and safety as an agenda item at board meetings.

The Facilities Manager has responsibility for day to day management of health, safety and welfare on behalf of the CEO-Director and Board of Trustees. Duties include ensuring that:

- members of staff are advised of all appropriate health, safety and welfare legislation;
- health and safety standards and procedures for all departments are planned, implemented, maintained and audited;
- health and safety standards and procedures are reviewed annually and updated where necessary, and members of staff are informed of any such changes;
- risk assessments are undertaken to identify hazards and to eliminate, minimise or control the level of risk for activities carried out within the Trust. All assessments must be reviewed regularly, monitored and findings communicated to affected members of staff;
- training in all aspects of health and safety necessary for the job is provided for members of staff;
- accidents and dangerous occurrences are investigated, recorded and reported to the relevant authority (when appropriate) in accordance with the relevant Regulations;
- undertaking the care and maintenance of the Trust's buildings and grounds in order to comply with fire, health and safety legislation.
- first aid facilities are sufficient to meet the needs of staff, volunteers and visitors;
- safety concerns are reported to the Executive Team and the Health and Safety Committee.

The **Health and Safety Committee** will:

- familiarise themselves with the Health, Safety and Welfare policy
- ensure the health and safety policy is managed and implemented;
- monitor, audit and review health and safety compliance with the policy;
- advise on all health, safety and welfare matters;
- meet regularly to discuss and advise on actions that are needed to comply with health and safety legislation;
- investigate and record any accidents, unsafe conditions and ill health.

Heads of Departments are expected to:

- familiarise themselves with the Health, Safety and Welfare policy;

- ensure the implementation of all health and safety policies and procedures;
- maintain, so far as is reasonably practical, a safe and healthy working environment;
- identify hazards in their department and take appropriate measures to assess, eliminate, minimise or control the level of risk in order to comply with statutory duties;
- produce and maintain risk assessments, safety procedures and accident and incident reports;
- make arrangements to monitor and review safety measures introduced;
- ensure members of staff are informed of all hazards, are properly briefed on the health and safety standards and procedures relevant to their job and receive the necessary training to perform their job safely;
- monitor members of staff to ensure they comply with health and safety standards, procedures and follow safe working practices;
- record accidents and incidents which occur within their workplace and inform the Facilities Manager of any reportable accidents or dangerous occurrences, so that they may be reported in accordance with the relevant regulations;
- ensure that arrangements are made for the safe use, handling, storage and transport of plant, equipment, materials and substances used in their department, including that which may be brought in and used by external contractors;
- ensure all members of staff are familiar with the Fire Evacuation procedures, know where fire equipment and exits are located and take part in fire and emergency training;
- provide suitable protective clothing and equipment for all members of staff where appropriate. Instruct and train people in its use and check regularly that it is being used;
- manage and control contractors and suppliers to ensure their activities are undertaken in a safe manner and safety procedures are followed.
- Copy and repeat all incidents to the Executive Team and CEO-Director

All Members of Staff must:

- familiarise themselves with the Health, Safety and Welfare policy;
- follow all work and safety procedures and any training which has been received;
- co-operate with heads of departments to ensure that all health and safety standards and work practices are complied with;
- take care of their own health and safety whilst at work and not compromise the health and safety of any other person who may be affected by their acts and omissions;
- report all accidents that happen to themselves, or that they witness, to their immediate supervisor or head of operations as soon as possible;
- report any hazard to health and safety immediately so that action can be taken to remove, minimise or control it;
- ensure that all personal protective clothing and equipment is well maintained and used for the purpose intended;
- not intentionally or recklessly misuse or interfere with anything provided in the interest of health, safety and welfare. If any such abuse is witnessed, it must be reported immediately.

Office Visitors / Contractors are expected to:

- follow any health and safety guidance given to them whilst on the premises;
- report any dangerous occurrence, accident or incident to health and safety to the Facilities Manager immediately.

- to comply with terms and conditions in contractors pre-qualification assessments and work to risk assessments and method statements provided
- provide copies of their insurance where required

General Public

- Compton Verney has a Duty of Care to ensure that the welfare of the visiting public and to take all practicable actions to ensure their safety while on Trust property.

3. Health and Safety Arrangements

3.1 Training

Primary Legislation: [Health and Safety at Work etc Act 1974 – legislation explained](#)

It is a legal requirement for employers to train members of staff on processes, equipment and arrangements they will need in the course of their work.

Compton Verney puts great store in maintaining a safe working environment and views the training of staff, in the correct and safe way of doing their jobs, as a key contributing factor.

The factors that determined the scope and frequency of training have been governed by:

- Risk Assessment;
- Legal Requirement;
- Individual job reviews and appraisals;
- Health and Safety audits;
- Accident investigations; and
- Individual training requests.

3.2 Risk assessments & written systems of work

Primary Legislation: [Managing risks and risk assessment at work](#)

Compton Verney recognises that risk assessments are not only a legal requirement but are fundamental in identifying risk control measures including safe systems of work, training requirements, engineering and management controls.

The concept of risk assessment is to focus on the risks that **really matter** in the workplace – the ones with potential to cause real harm.

In principle a risk assessment is simply a careful examination of what in the workplace could cause harm to people, so that the company can weigh up whether we have taken enough precautions or should do more to prevent harm.

It is Compton Verney policy that risk assessments will be carried out by a competent person but will be performed in such a way that will encourage staff involvement. The importance of keeping staff informed not only assists in the identification hazards but provides assurance that what we propose to do will not only work in practice but will not introduce any new hazards. In general members of staff are more likely to embrace risk control strategies if they have been involved in the process.

In all cases, when deciding on precautions, our existing control measures should be compared with good practice. In order to assist a library of HSE 'good practice' guidance documents have been prepared and are available to all our staff on the internal intranet.

In certain circumstances, and in accordance with specific legislation, it may be necessary to employ a competent person to undertake specialist risk assessment where these have been identified by the general risk assessment process;

These include, but are not limited to:

- Manual Handling
- Pregnant workers
- Fire
- Display Screen Equipment
- Hazardous Substances
- Noise
- Vibration
- First Aid
- Personal Protective Equipment
- Work at Height
- Confined Spaces
- Asbestos

Compton Verney will ensure that members of staff will be consulted on the content of the risk assessments and that they are easily accessible for review. Copies of risk assessments are retained and filed in a formalised, accessible manner on the organisations internal intranet system.

Risk assessments will be reviewed periodically (at least annually) or in special circumstances, which may include:

- A change in legislation
- The introduction of a new process, equipment or new working practices;
- A change in personnel;
- As the result of an accident;
- Change in seasons if the activity is based outdoors
- In light of new technology or information.
- Weather as it affects site operations

Method Statements

Where a specific procedure (method statement) is required it will be drafted by a competent person with the

assistance of one or more of those whose job involves carrying out the task concerned and with reference to specific risk assessments.

Once the specific task method statement is agreed, it will be signed and dated by both the competent person and those who have helped him or her put it together. As from that date, no person may undertake the task concerned other than by following the procedure. No person may follow the procedure unless they have been trained in it. They will be considered to have been trained in it only when a copy has been signed and dated, both by the trainee and by the trainer, and then placed on the individual's personal file.

Deviation from a method statement is only permissible following an appropriate level of assessment on the safety implications of any such change, and with authorisation of the Department Head.

3.3 Communication & Consultation

Primary Legislation: [The Information and Consultation of Employees Regulations 2004](#)

The most common definition of communication is *'the right information, to the right people at the right time to enable them to make appropriate decisions' (on health and safety issues)*.

All staff are given an appropriate health and safety induction when they first join the company which includes:

- Individual responsibilities.
- Emergency procedures.
- General arrangements for health and safety, e.g. welfare facilities; first aid arrangements, accident reporting, PPE etc.

Other methods of communication:

- Notice boards are used as a visual way of providing information from a variety of sources, which may include security and safety alerts.
- Posters for immediate visual impact.
- Individual consultation if requested is available
- Heads of Departments acting and leading by example.

Communicating with staff

Health and safety matters will be communicated to staff by a combination of electronic communication, e.g. e-mails, notice boards, group meetings / departmental briefings or individual consultation.

When communicating with staff allowance will be made for those persons who have reading and writing difficulties and for those may not understand English. In such situations written instruction will be supported by images and symbols and where necessary the use of a translator may be considered.

3.4 Accident Reporting and Investigation

Primary Legislation: <http://www.hse.gov.uk/RIDDOR/>

Accidents and incidents

Whilst the prevention of accidents, ill health and dangerous occurrences is the primary objective of this health and safety policy, it is recognised that they can still occur. In the event of an accident/incident or instance of ill health arising from a work related activity, the following will apply:

All accidents and significant incidents will be recorded in the accident book. Accident statistics for the quarter are reviewed by the Health and Safety Committee as well as compared to the equivalent period the previous year in order to recognise any trends.

The details of any such record will be reported to the Facilities Manager within 24 hours of the occurrence:

- The Facilities Manager or other nominated person will be notified immediately of accidents that result in significant harm or damage.
- The Facilities Manager is responsible for informing the relevant authorities under the regulations of Reporting of Incidents, Dangerous Occurrences and Diseases Regulations.

Reporting requirements under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

- Fatality or Specified Injury
- Accidents resulting in a person being off work for more than 7 days.
- In the event of an employee suffering from a reportable work related disease.
- Dangerous occurrences may not necessarily result in harm or a reportable injury but nevertheless they must be reported immediately

All notifications must be made via the HSE reporting website <http://www.hse.gov.uk/riddor/report.htm>

- **Accident Investigation**

All accidents or incidents resulting in injury or damage, or having the potential to cause harm, disease or damage will be investigated by the company. The investigation and subsequent findings will be appropriate to the scale and significance of the incident.

In the event of a serious incident, accident, near miss or dangerous occurrence the company will liaise with its insurers and carry out an investigation to:

- a. Make safe any equipment or substances involved.
- b. Prevent recurrence.
- c. Obtain full details of the incident to enable a report to be compiled, or to assist the investigating Inspector, or provide information for insurance purposes.

3.5 First Aid Provision

Primary Legislation: <http://www.hse.gov.uk/pubns/priced/l74.pdf>

Under the terms of the Health and Safety (First Aid) Regulations 1981 and their corresponding approved code of practice and guidance, we are required to provide equipment, facilities and people adequate and

appropriate for treating individuals who are injured or who fall ill at work.

Arrangements to apply:

An appropriate number of first aiders have been appointed and their details can be found located at all notice boards and on first aid stations.

Record Keeping Arrangements

First aiders and/or appointed persons should enter details of all incidents that occur on the accident record sheets held at the Shop Desk, during open hours and the Visitor Experience Manager's Office during the closed hours. There are also accident record sheets held in the Welcome Centre, Forest School and the security office. The type of details that should be recorded are as follows:

- the date and time at which an incident occurred;
- its location;
- the injured or ill person's name;
- the nature of the injury or illness;
- the nature of the first aid assistance provided (if provided);
- the outcome immediately after the first aid was provided, if provided (e.g. the person was taken to hospital and by whom); and
- the name and signature of the person completing the record and the date on which the entry was made.

Reassessments will be conducted at regular intervals to ensure the continuing adequacy of all first aid provisions.

3.6 Fire Precautions

Primary Legislation: [The Regulatory Reform \(Fire Safety\) Order 2005](#)

Under the terms of the Regulatory Reform (Fire Safety) Order 2005, the Trust is required to undertake a fire risk assessment to determine all potential fire hazards related to our premises, our type of work and the way in which this work is performed. The Trust is then required to take action to reduce all risks to a reasonable minimum and to ensure that all members of Compton Verney are protected from remaining hazards and the dangers associated with fire should one break out for some other reason. The Trust is required to do this by providing:

- an appropriate fire detection and warning system;
- safe means of escape; and
- appropriate fire fighting equipment.

The Trust will also devise a means for testing and maintaining the above arrangements.

3.7 Welfare Arrangements

Primary Legislation: [Workplace \(Health, safety & Welfare\) Regulations 1992](#)

Staff Handbook: [Employee Handbook Compton Verney](#)

The Trust recognises its duty to ensure that suitable welfare facilities are provided for everyone while at work. Adequate rest facilities, drinking water and staff welfare facilities will be provided and maintained as required under legislation.

3.8 Stress

Primary Legislation: <http://www.hse.gov.uk/pubns/indg424.pdf>

The Health and Safety Executive (HSE) define stress as *“an adverse reaction people have to excessive pressures or other types of demands placed on them”*.

Life places demands and pressures on all of us, but if these stressors become too great or exist for a prolonged period of time they can affect our health. Stressors can originate from within the workplace or from our lives outside the office, e.g. bereavement; break up of a relationship; financial situation.

The Trust recognises that stress is not the same as ‘pressure’. Pressure can be motivating and challenging and can actually improve performance and whilst each member of staff has a different ability to cope with pressure this can fluctuate according to individual personal situations. Additionally, each role carries with it a performance level which the member of staff is expected to meet. However, if the individual’s ability to cope decreases and/or the expectations upon him or her are too high, potential health risks can result.

The Trust recognises that stress, especially chronic stress, can be a considerable risk to both physical and mental health so is committed to promoting a healthy environment and a supportive climate.

The Trust will:

- undertake regular risk assessments and take action to reduce risks once identified;
- raise awareness of stress and mental health issues by improving the quality and accessibility of information;
- help members of staff at all levels develop their knowledge and skills in this area through the provision of appropriate training opportunities; and
- provide services that support staff with stress-related issues.

3.9 Display Screen Equipment

Primary Legislation: [The Health and Safety \(Display Screen Equipment\) Regulations 2002](#)

Guidance: <http://www.hse.gov.uk/pubns/indg36.pdf>

Under the Regulations, display screens are defined to include any screen that provides information in a numbers, words or images format. Workplace display screens, therefore, include not only VDUs but also microfiche readers and machine control screens as well as smart technology such as laptops and smartphones.

According to the Regulations, we are required to assess all workstations that include DSE, with the aim of reducing any health risks found.

In general these health risks will fall into two categories.

Ergonomic risks - risks associated with the posture of a member of staff when using the equipment in question. For instance, do they have to remain still for lengthy periods, and, are the controls of the equipment (for example a keyboard) in an awkward position in relation to where the employee sits or positions their hands? These kinds of risk can give rise to work-related upper limb disorders and are dealt with under that policy.

Eye strain - In this respect any habitual user of DSE may request to have his or her eyes tested. Habitual users are considered to be those who use display screens for more than three-and-a-half hours each day. The cost of each basic eye test (to be undertaken by a suitably qualified person) will be met by the Trust upon presentation of a receipt.

Further tests should be carried out at periodic intervals. It will be for the qualified person undertaking the first test to determine what these periodic intervals should be.

All office based staff will be required to carry out an e-learning training module regarding best Display Screen Equipment (DSE) practice followed by an assessment to ensure that they are working in an ergonomically sound way and to highlight any issues which may require further investigation.

3.10 Work Equipment

Primary Legislation: [Provision and Use of Work Equipment Regulations 1998](#)

Definition: Work equipment is generally *any equipment used by a person at work*, i.e. any machinery, appliance, apparatus, tool or installation for use at work (whether exclusively or not). The definition is equally applicable to **the grounds department**, e.g. using tools and machinery, or in an **office environment** using office equipment, e.g. photocopiers, computers, printers and lighting.

- Work equipment will be purchased based on its suitability to carry out work safely and effectively, not on a cost only basis;
- All tools/equipment will be inspected each working day **prior to use** to determine that they are fit for purpose. Any item found to be faulty will not be used until either repaired by a competent person or replaced;
- Where specialised equipment is used for grounds or catering departments, only sufficiently trained competent people shall operate such equipment.

3.11 Manual Handling Operations

Primary Legislation: [The Manual Handling Operations Regulations 1992](#)

Under the Manual Handling Operations Regulations 1992, the Trust is required to assess its workplace and identify where manual handling takes place in the course of what it does.

The Regulations require the Trust to ensure, where reasonably practicable, that manual handling is avoided – for example by changing work processes or by the introduction of mechanical aids. Where it is not reasonably practicable to make such changes, the Trust is required to identify the risks associated with a manual handling task and make arrangements to reduce these. The Trust is also required to provide members of staff with instruction in the correct techniques to use when manually handling an object to ensure that, as far as possible, injuries are not sustained.

The Trust will ensure that training in correct procedures will be provided to all staff. All office staff will be required to carry out an e-learning Manual Handling training module where other staff or office staff with regular heavy manual handling responsibilities will be provided with a hands-on course delivered by an external professional.

3.12 Working at Height

Primary Legislation: [Work at Height Regulations 2005](#)

Working at height is deemed to be any work related activity carried out above ground level. *A place is 'at height' if a person could be injured falling from it, even if it is at or below ground level.*

The Work at Height Regulations 2005 apply to all work undertaken at height wherever there is the potential for a fall to occur which may cause personal injury. No height limits are specified in the Regulations in recognition that all work undertaken at height has the ability to result in injury.

Work at height will range from the routine use of a stepladder to retrieve files on shelving to potentially higher risk activities undertaken such as work on the roofs of buildings.

The Work at Height Regulations requires that we do all that is reasonably practicable to prevent anyone falling and sets out the following simple hierarchy for managing and selecting equipment for work at height:

- avoid work at height wherever possible;
- use work equipment or other measures to prevent falls where working at height cannot be avoided;
- where the risk of a fall cannot be eliminated, use work equipment or other measures to minimise the distance and consequences of a fall should one occur.

Heads of departments must ensure that:

- no work is undertaken at height if it is safe and reasonably practicable to do it other than at height;
- the work is properly planned, appropriately supervised and carried out in as safe a way as is reasonably practicable;
- they take account of the findings of the risk assessment referred to above.

Heads of department must ensure that everyone involved in work at height is competent to do so, having received suitable and sufficient information, instruction and training and is supervised by a competent person.

3.13 Hazardous Substances

Primary Legislation: [Control of Substances Hazardous to Health Regulations 2002 \(COSHH\)](#)

Under the Control of Substances Hazardous to Health Regulations 2002, the company is required to assess all substances kept at work to determine what risks there are to employees from their use.

Where possible, we are required to substitute all harmful substances for less harmful ones or, if this is not practicable, to change the way that things are done so that we no longer need to use the substance concerned.

Where it is not possible to do either of the above, the Trust is required to consider such things as:

- isolating the substance and process away from general work areas;
- reducing the amount of the substance used and the number of people exposed to it, as well as the length of time the exposure occurs.

Where use of a substance cannot be avoided, the Trust must control exposure by way of ventilation so as to extract fumes and dust away from a process.

No member of staff shall undertake a procedure involving use of a hazardous substance unless trained.

3.14 Asbestos

Primary Legislation: <http://www.hse.gov.uk/asbestos/regulations.htm>

Many buildings contain asbestos in various forms for purposes of heat or acoustic insulation, for fire protection.

Hazard identification and risk assessment are the basis for introducing practical preventive policies and control measures in the workplace.

Guidance notes and procedures provide more detailed information on the hazards, risks and appropriate preventive control measures required in order to fulfil the Trusts obligations under the Control of Asbestos Regulations 2012

To control the risks to staff, building users, contractors and other persons, the following measures will be adopted:

- The Trust shall ensure that a survey will be carried out to identify any areas that are likely to contain asbestos. This will be reviewed prior to undertaking works.
- The Trust shall ensure that an Asbestos Management Plan is developed, maintained and reviewed annually.
- Where existing buildings contain asbestos containing material which is sound, in good condition and has not been, or is not likely to be subject to abrasion or deterioration, the material shall be labelled and left undisturbed, its position noted in the Asbestos Management Plan and its condition monitored and periodically reassessed.
- Where existing installations or parts of property contain damaged, deteriorating or inadequately sealed asbestos containing material, the material shall be:
 1. enclosed, sealed or encapsulated;
 2. removed and replaced by suitable material not containing asbestos.

3.15 Confined Spaces

Primary Legislation: [*The Confined Spaces Regulations 1997*](#)

Definition of a confined space includes enclosed rooms such as basements, pits, open manholes, trenches, pipes, flues, ducts, ceiling voids, tanks and other places where there is inadequate natural ventilation.

Dangers can arise in confined spaces through:

- Lack of oxygen
- Poisonous gas, fumes or vapour
- Liquids and solids suddenly filling the confined space, or releasing gases into it when disturbed
- Fire and Explosions
- Residues left behind which can give off gas, fumes or vapours
- Dust
- Hot working conditions

Work will only be carried out within a confined space when absolutely necessary or where it cannot be undertaken from outside. All confined space works will be subject to a Permit to Work Procedure outside of the chamber, vessel etc. By planning tasks adequately and utilising the correct tools and equipment, the need for confined space working should be eliminated.

The Trust strictly prohibits lone working in confined spaces.

3.16 Noise

Primary Legislation: [The Control of Noise at Work Regulations 2005](#)

In accordance with the Control of Noise at Work Regulations 2005 the Trust is required to take action to protect members of staff where, throughout any eight-hour period of work, they are likely to be exposed to noise averaging 80 decibels or more. Where this is the case, the Trust must inform those members of staff affected and provide hearing protection for those affected.

Where staff are likely to be exposed to noise averaging 85 or more decibels, the Trust is required to reduce either the level of this noise or the time exposed to it.

Where it is not practical or possible to reduce noise level over an eight-hour period in any work area to below 85 decibels, the Trust must mark the area concerned with recognised signs and ensure that no one enters these areas unless wearing hearing protection.

3.17 Vibration

Primary Legislation: [The Control of vibration at Work Regulations 2005](#)

Under the Control of Vibration at Work Regulations the Trust is required to undertake a risk assessment of all processes that result in operators experiencing hand-arm vibration and then take action to help protect those undertaking these tasks from developing hand-arm vibration syndrome (HAVS). Training will be provided to relevant members of staff by competent persons.

3.18 Lone Working

Primary Legislation: [Working alone safely](#)

There is no specific piece of legislation which says that people cannot work on their own, however the Health and Safety at Work places a duty on the employer to ensure that all work activities are carried out safely.

Lone workers are people who work on their own with little or no supervision. Thus in the event of an emergency there is no one to give assistance, or summon help. There is no time limit attached to working alone. It may be for the whole work period, or only for several minutes. This can take place in a number of situations. For example; people working outside normal hours e.g. cleaners, maintenance and repair staff; or mobile workers working away from the main building e.g. grounds staff.

Factors to be considered in assessing lone working situations will include:

- the health of the individual concerned;
- who would be contacted in an emergency situation and how?
- provision in the event of an accident or illness - Note: is the person medically fit and suitable for carrying out the work?
- actions in the event of fire;
- workplace conditions e.g. access and egress, excesses of temperature;
- manual handling;
- hazardous substances;
- is there a risk of violence?

Further risk assessments, in full or in part as relevant, will be undertaken:

- should the health or the personal circumstances of the individual change;
- if any process or procedure is altered;
- no later than 12 months after a previous assessment.

Those undertaking lone working will be required to use the 'lone worker' option on radios as a form of contact. This reminds the lone worker to 'check-in' at regular intervals to ensure their safety.

3.19 Legionella

Primary Legislation: [HSE - Legionella and Legionnaires' disease](#)

Legionnaires' Disease or Legionellosis is the term used for infections caused by Legionella pneumophila and other related bacteria. Legionella bacteria are only dangerous in respirable form and generally only to susceptible individuals where inhalation of the bacteria in aerosols or water droplets (typically <5mm) may cause severe pneumonia and, in extreme cases, death.

Legionella bacteria are widespread and found naturally in many aquatic environments, where they feed on algae and organic matter in sludge, sediment and silt. They tolerate a range of temperatures, although below 20°C and above 50°C they are dormant and above 60°C they will not survive.

When Legionella bacteria enter man-made water systems they may proliferate under favourable conditions. If water droplets are then created and dispersed into the atmosphere then people in the vicinity may be at risk of

inhaling the bacteria. To eliminate or reduce the risk, control measures must be in place to prevent the proliferation of the organism in water systems, and to minimise the generation of water droplets and aerosols.

Control measures that Compton Verney will implement for controlling Legionella bacteria in water systems are:

- Appointment of a responsible person (in a managerial rather than technical grade). This person is: Facilities Manager.
- Formal Legionella risk assessment with suitable and sufficient documentation of findings, including schematics detailing the water system.
- Ongoing review and reassessment of Legionella exposure risk.
- Development of a risk minimisation programme, a prioritised action plan and a mechanism for escalating remedial work where risk assessment and monitoring data indicate a risk.
- Implementation and management of the programme.
- development of formal procedures for inspection, maintenance and disinfection of water systems
- Training of staff.
- Maintenance of suitable records.

4. Performance Monitoring and Measuring

Key Guidance: [*Successful Health and Safety Management*](#)

The content of this Policy and its effectiveness in terms of health and safety performance is the subject of an annual review by the Facilities Manager via the Committee for Safety with input from the senior management team, as identified in the organisation section of the policy.

Health and safety performance will be monitored at senior level and on a scheduled basis as an agenda point at Senior Staff Meetings.

Accident/incident data and other relevant statistical analysis, results from safety initiatives with specific objectives, or the findings of management inspections will be reviewed at the meetings.

Senior personnel shall regularly monitor and record whether health and safety responsibilities in their areas are being properly identified and discharged correctly and address any failings accordingly. Items to be monitored include:

- Staff awareness of health and safety rules;
- That duties are complied with and executed as a primary objective;
- Appropriate health and safety training for all staff;
- Ensuring that statutory requirements are being met.

Measuring

The Trust will make provision for periodic inspections of workplace activities and internal auditing (at least annually) of the HSG65 safety management system as a means of measuring the success, or otherwise, of

policy objectives and the commitment to continued improvement, thereby identifying any requirement for corrective actions at source, or further opportunities for improvement. This audit will be carried at least annually and the results will be discussed at management level so that a strategy for continuing improvement can be developed.

Additional information – library of “online” guidance

Please note that under the title of each section of this policy there is a “hyperlink” by the side of “Primary Guidance” or the “Primary Legislation”. When this policy is read “online” the reader can double click the “hyperlink” to access all the background information on the legislation and /or guidance documents which form the basis of this policy. A summary of these “links” are shown below:

- Section 2.3 Primary Guidance: [What you need to know](#)
- Section 2.3 Primary Guidance: [Directors Responsibility for Health and Safety](#)
- Section 3.1 Primary Legislation: [The Health & Safety at Work etc. Act 1974](#)
- Section 3.2 Primary Guidance: [Managing risks and risk assessment at work](#)
- Section 3.3 Primary Legislation: [The Information and Consultation of Employees Regulations 2004](#)
- Section 3.4 Primary Legislation: <http://www.hse.gov.uk/RIDDOR/>
- Section 3.5 Primary Legislation: [The Health and Safety \(First Aid\) Regulations 1981.](#)
- Section 3.6 Primary Legislation: [Fire safety in the workplace - GOV.UK](#)
- Section 3.7 Primary Legislation: [Workplace \(Health, safety & Welfare\) Regulations 1992](#)
- Section 3.8 Primary Legislation: <http://www.hse.gov.uk/pubns/indq424.pdf>
- Section 3.9 Primary Legislation: [The Health and Safety \(Display Screen Equipment\) Regulations 2002](#)
<http://www.hse.gov.uk/pubns/indq36.pdf>
- Section 3.10 Primary Legislation: [Provision and Use of Work Equipment Regulations 1998](#)
- Section 3.11 Primary Legislation: [The Manual Handling Operations Regulations 1992](#)
- Section 3.12 Primary Legislation: [Work at Height Regulations 2005](#)
- Section 3.13 Primary Legislation: [Control of Substances Hazardous to Health Regulations 2002 \(COSHH\)](#)
- Section 3.14 Primary Legislation: [Control of Asbestos Regulations 2012](#)
- Section 3.15 Primary Legislation: [The Confined Spaces Regulations 1997](#)
- Section 3.16 Primary Legislation: [The Control of Noise at Work Regulations 2005](#)
- Section 3.17 Primary Legislation: [The Control of vibration at Work Regulations 2005](#)
- Section 3.18 Primary Legislation: <http://www.hse.gov.uk/pubns/indq73.pdf>
- Section 3.19 Primary Legislation: [HSE - Legionella and Legionnaires' disease](#)
- Section 4 Primary Guidance: [Successful Health and Safety Management](#)