

# Health and Safety Management Procedure

The Health and Safety Management Procedure outlines and details the organisation and arrangements in place to implement Young Epilepsy's Health and Safety Policy Statement

Version 1.1

## Introduction and scope

The model for the governance of occupational safety and health, including fire safety and environmental safety, at Young Epilepsy, is; a **central** function which owns and manages relevant procedures which give effect to the organisation and arrangements needed to manage occupational safety and health; and, the **local** (directorates and team) implementation, management and improvement of that organisation and those arrangements. Directorates and teams are provided with advice, guidance and technical expertise to support the local implementation, management and improvement of health and safety management organisation and arrangements by the Health and Safety Advisor.

The Health and Safety central function also provides a reactive and active monitoring service comprised of; internal and external audits, investigation of adverse events, Safety Tours and Inspections. Along with the Health and Safety Policy Statement, the Health and Safety Management Procedure (HSMP) sets out how Young Epilepsy ensures, so far as reasonably practicable, the health, safety and welfare of its employees and those not in its employment who might be affected by its undertaking.

The HSMP applies to all parts of Young Epilepsy's undertaking including the London Office and national projects.

The Health and Safety function (Health and Safety) is owned by the Director of HR.

The Health and Safety function is managed by the Health and Safety Advisor who acts as Young Epilepsy's (internal) Competent Person.

Unless otherwise specified, reference to 'Health and Safety' and 'health and safety management' are inclusive of the organisation and arrangements related to the management of fire safety, the management of contractors and environmental management.

## Definitions and terminology

For the purpose of this Procedure, the following definitions and terminology apply unless otherwise specified.

**Adverse event;** an accident or incident including a near miss, unsafe act, unsafe condition, incident of work-related ill-health or major incident.

**Employee;** for the purpose of this Procedure, and unless otherwise stated, 'employee' is a reference to any of the following; employee, agency worker, other worker, person on work experience or volunteer.

**Health and Safety year;** for the purpose of health and safety management, the health and safety year runs from August to July. The year starts in August with the publication of the Health and Safety Plan. See appendix 7.

**Management;** for the purpose of this Procedure, management is defined as, 'tactical and operational control over a distinct function or area with responsibility for meeting set objectives.'

**Ownership;** for the purpose of this Procedure, ownership is defined as, 'strategic control over a distinct function or area with ultimate responsibility for outcomes.'

**Competent Person;** an employee, or other person or organisation, who supports the owner and manager of a specific area of compliance with; technical knowledge, ability and experience and is usually responsible for day to day compliance actions and control measures as detailed in the relevant procedure.

## Relevant legislation

The primary pieces of applicable legislation are the Health and Safety at Work etc. Act 1974 (the Act) and the Management of Health and Safety at Work Regulations 1999. Other regulations, generally those given effect under the Act, are listed in the Occupational Safety and Health Risk (and Legal) Register (OSHRR).

The Environmental Protection Act 1990 and the Environment Act 1995 are relevant specifically to elements of environmental policy and management as outlined in the Environmental Policy Statement and detailed in the Environmental Management Procedure.

The Regulatory Reform (fire safety) Order 2005 is relevant specifically to elements of fire safety policy and management as outlined in the Fire Safety Policy Statement and detailed in the Fire Safety (preventative and protective measures) Procedure. Elements of the Housing Act 2004 which pertain to fire safety and health and safety are also relevant.

## **Health and Safety Policy Statement**

The Health and Safety Policy Statement is owned by the Trust Board and managed by the Health and Safety Advisor on behalf of the Executive Board and Director of HR.

The Health and Safety Policy Statement is reviewed annually and signed by the Chief Executive Officer (CEO). Annual reviews will consider the objectives of Young Epilepsy and changes to relevant legislation.

The latest copy of the Health and Safety Policy Statement is available for viewing on the intranet and posted on Health and Safety Noticeboards.

## **Environmental Policy Statement**

To ensure that Young Epilepsy complies with all applicable legislation related to the protection of the environment, an Environmental Policy Statement is implemented with the required organisation and arrangements detailed in the Environmental Management Procedure.

## **Fire Safety Policy Statement**

To ensure that Young Epilepsy complies with all applicable legislation related to fire safety, a Fire Safety Policy Statement is implemented with the required organisation and arrangements detailed in the Fire Safety (preventative and protective measures) Procedure.

The Health and Safety Advisor will act as Young Epilepsy's Competent Person for fire safety as defined by the Regulatory Reform (fire safety) Order 2005.

## **Contractor Management Policy Statement**

To ensure Young Epilepsy manages the use of contractors a Contractor Management Policy Statement is implemented with the required organisation and arrangements detailed in relevant departmental contractor management procedures.

Where the Construction (design and management) Regulations 2015 apply, Health and Safety will cooperate with Facilities to ensure Young Epilepsy complies with all relevant obligations.

The Health and Safety Advisor will lead on advising Young Epilepsy in its role as client under the Construction (design and management) Regulations 2015.

### **Plan Do Check Act (PDCA) Model**

Young Epilepsy has adopted the Health and Safety Executive (HSE) management model; 'Plan Do Check Act' (PDCA) as set out in the HSE publication HSG65 – Managing for Health and Safety. See appendix 1.

### **Occupational Safety and Health Risk (and Legal) Register (OSHRR)**

Young Epilepsy maintains an Occupational Safety and Health Risk (and Legal) Register (OSHRR).

The OSHRR is owned by the Director of HR.

THE OSHRR is managed by the Health and Safety Advisor.

The OSHRR will be updated continuously by the Health and Safety Advisor.

The OSHRR will be audited annually by the external audit provider. See appendix 2.

Review of the OSHRR will be a standing agenda item on the Health and Safety Committee agenda.

### **Health and Safety Plan**

The Health and Safety Advisor will prepare an annual Health and Safety Plan on behalf of the Director of HR, to be published no later than the end of July to cover the following year August to July. See appendix 3.

The Health and Safety Plan will be informed by the following:

- Recommendations from internal audits
- Recommendations from external audits
- Results from the Health and Safety Culture Survey
- Analysis of adverse event data
- Legislative changes
- Direction from the Executive and Trust Board
- The Occupational Safety and Health Risk (and Legal) Register (OSHRR)
- Direction from the Health and Safety Committee

## **Health and Safety Management Procedure**

The Health and Safety Management Procedure (HSMP) will be reviewed annually during the external audit. Gaps in the provision of organisation and arrangements set out in the HSMP will be identified by the external audit and included as actions in the Health and Safety Plan for the following year.

The HSMP is owned by the Director of HR and managed by the Health and Safety Advisor.

## **Roles and Responsibilities**

Without prejudice to the general and specific health and safety responsibilities set out in relevant legislation, the following roles have additional responsibilities related to the management of health and safety at Young Epilepsy (inclusive of environmental management and fire safety):

**Trust Board;** The employer, with ultimate responsibility for ensuring the health, safety and welfare of employees and any other people who may be affected by Young Epilepsy's activities, acts or omissions including young people, visitors, contractors and members of the public.

**Chief Executive Officer (CEO);** principal responsible person. The CEO is responsible for signing the Health and Safety Policy Statement, and other relevant policy statements, on behalf of the Trust Board annually and ultimately responsible for ensuring their implementation on behalf of the Trust Board.

**Trust Board Health and Safety Champion;** responsible for ensuring health and safety matters are given due consideration by the Trust Board and chairing the Finance Audit and Risk Committee (FARC).

**Director of HR;** owns the Health and Safety function (inclusive of environmental management and fire safety) and is responsible for ensuring health and safety matters are given due consideration at Executive level.

**Health and Safety Advisor;** manages the Health and Safety function (inclusive of environmental management and fire safety) and acts as Young Epilepsy's Competent Person for health and safety as defined in Regulation 7 of the Management of Health and Safety at Work Regulations 1999.

**Directors;** take responsibility for ensuring their directorate implement and maintain the organisation and arrangements given effect by this Procedure and associated policy statements and procedures.

**Senior Leadership Team and Senior Managers;** take responsibility for managing the organisation and arrangements given effect by this Procedure and associated policy statements and procedures. They also manage resources within their teams to ensure the required organisation and arrangements are implemented and maintained. Report health and safety issues, concerns and significant adverse events to their Director.

**Managers and supervisors;** take responsibility for the day to day implementation and maintenance of the organisation and arrangements given effect by this Procedure and associated policy statements and procedures. Engage with their direct reports on a regular basis regarding health and safety issues and concerns. Report health and safety issues, concerns and significant adverse events to Senior Leadership Team and Senior Managers.

**Employees;** engage and participate with the organisation and arrangements given effect by this Procedure and associated policy statements and procedures. Report health and safety issues, concerns and adverse events, including near-misses and unsafe acts and conditions, to their line manager. Engage and participate with their line manager and Representatives of employee safety when consulted about health and safety issues and concerns. Comply with the organisation and arrangements given effect by this Procedure and associated policy statements and procedures including; health surveillance; the wearing of personal protective equipment and the following of safe systems of work.

### **Finance Audit and Risk Committee**

The Finance Audit and Risk Committee (FARC) meets 5-6 times per year and is a subcommittee of the Trust Board. FARC will ensure health and safety is a standing item on its meeting agenda. FARC will receive reports from the Health and Safety Advisor, the Director of HR and the Health and Safety Committee on; the progress of the Health and Safety Plan; the significant findings of internal and external audits; the significant findings of Safety Tours and Safety Inspections; any significant changes to the Occupational Safety and Health Risk (and Legal) Register (OSHRR); significant conclusions and recommendations following the annual Health and Safety Culture Survey and significant and major adverse events.

### **Insurance**

The Director of Finance and IT will be responsible for ensuring that Young Epilepsy has suitable and sufficient Employer's Liability Insurance and Public Liability Insurance.

### **Health and Safety Advisor**

The Health and Safety Advisor must be an employee of Young Epilepsy. In addition to any other requirements that the Director of HR may include in the role profile of the Health and Safety Advisor, the Health and Safety Advisor must meet the following criteria:

- Hold the NEBOSH Diploma in Health and Safety Management or a similar or higher-level qualification
- Be eligible for Graduate Membership of the Institute of Occupational Safety and Health (IOSH)

### **External Competent Person**

To support the audit of the organisation and arrangements in place to manage health and safety, inclusive of fire safety and environmental management, Young Epilepsy will retain the services of an external Competent Person for health and safety. See appendix 2.

The contract with the external Competent Person will be subject to an annual review on the anniversary of the contract by the Health and Safety Advisor. The review will seek to ensure that the terms of the contract continue to be met by both parties. When applicable (contract end) the extension, or not, of the contract will also be considered during the review.

As a minimum, any external Competent Person retained by the Health and Safety Advisor to provide strategic health and safety advice and consultancy must be a member of the Occupational Safety and Health Consultants Registers (OHSCR).

### **Cooperation and Coordination with Facilities**

The Facilities Department manage day to day estates and facilities-based functions and risk including; facilitating visits from, and access to buildings by, contractors for the purpose of testing, inspecting, maintaining and servicing of plant and equipment and managing the scheduling of those visits. This includes gas and electrical plant and equipment including providing an in-house portable appliance testing (PAT) service; equipment to which the Lifting Operations and Lifting Regulations (LOLER) 1998 apply; management of the asbestos register; management of water testing and inspection of water systems to control legionella and other associated risks to health; and the testing, inspecting, maintaining and servicing of fire detection, fire alarm, emergency lighting and associated plant and equipment including fire extinguishers

and fire doors. Where appropriate, Facilities may delegate these duties to local managers e.g. a House Manager responsible for weekly fire alarm test however the responsibility for completion cannot be delegated.

The Facilities Department is responsible for fleet management and own and manage associated procedures. (The Health and Safety (driving at work) Procedure is part of the Health and Safety function and focusses on the driver and driving at work regardless of the vehicle owner i.e. Young Epilepsy or privately owned).

For projects undertaken at Young Epilepsy where the Construction (design and management) (CDM) Regulations 2015 apply, the Health and Safety Advisor will provide advice to project managers e.g. Maintenance Manager to ensure compliance with those regulations and the Health and Safety (construction; design and management) Procedure).

The Health and Safety Advisor will provide advice and act as a critical friend to the Facilities Department on a reactive basis; investigating relevant adverse events and conducting Inspections, Safety Tours and internal audits as per the internal audit schedule. See appendix 4.

### **Cooperation and Coordination with Human Resources (HR)**

The Health and Safety Advisor will act as an advisor to the HR Department on matters related to the management of occupational safety and health.

Human Resources (HR) manage the following:

- Procedures related to adverse weather where this does, or may, affect an employees' ability to attend work
- Procedures related to employee capacity i.e. alcohol and drug policies and procedures
- Procedures related to reasonable adjustments with advice from the Health and Safety Advisor where these pertain to occupational health and safety
- Procedures related to return to work including phased return to work and reasonable adjustments with advice from the Health and Safety Advisor where these pertain to occupational health and safety
- Procedures related to misconduct and poor performance with advice from the Health and Safety Advisor where issues of health and safety compliance are concerned



- Procedures related to health surveillance with specific guidance from the Health and Safety Advisor as to what health surveillance is required by role
- The provision of, and procedures related to, the Employee Assistance Programme (EAP)

### **Cooperation and Coordination with Education, Quality, Safeguarding and Compliance**

The Director of Integrated Care owns compliance specifically related to Care Quality Commission (CQC) requirements and OFSTED requirements where these relate to the Residential and Health provision. The Head of Residential Services and Head of Health are responsible for managing these requirements with support from relevant senior managers including the Head of Quality, Operational Leads in Residential, Registered Managers and the Safeguarding and Compliance Manager.

The Principal owns compliance with OFSTED requirements where these relate to the education provision across School and College. The Vice and Assistant Principals are responsible for managing these requirements with support from the education senior leadership team.

The Health and Safety Advisor will act as a critical friend to the relevant departments on a reactive basis; investigating relevant adverse events and conducting Inspections, Safety Tours and internal audits as per the internal audit schedule. See appendix 4.

### **Cooperation and Coordination Health and Wellbeing**

The Health and Safety Advisor's cooperation with the Health and Wellbeing departments may include working collaboratively on relevant initiatives, particularly where employees may benefit.

The Health and Safety Advisor will act as a critical friend to the Health and Wellbeing departments on a reactive basis; investigating relevant adverse events and conducting Inspections, Safety Tours and internal audits as per the internal audit schedule. See appendix 4.

## **Risk Universe**

The organisation and arrangements in place to manage health and safety risks are set out in the Health and Safety (risk management) Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

The Health and Safety (risk management) Procedure includes the following:

- Designation of certain areas, activities, plant and equipment at Young Epilepsy as higher risk for which the Health and Safety Advisor will compile separate risk registers
- A 'Risk Universe' which illustrates how general, specific, statutory, individual and student focussed risk assessments are defined and used
- The definition and use of Safe Systems of Work (SSoW) as an organisational control measure
- The definition and use of Checklists as an organisational control measure

## **Information, instruction, training and supervision**

The organisation and arrangements in place to manage health and safety information, instruction and training for, and supervision of, employees are set out in the Health and Safety (information, instruction, training and supervision) Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

The Health and Safety (information, instruction, training and supervision) Procedure includes the following:

- Definitions of health and safety information, instruction, training and supervision
- Training Matrix for all health and safety, and associated, training

## **Special Populations**

For the purpose of managing health and safety and for the purpose of this Procedure, Young Epilepsy recognises the following special populations of employee:

**New and expectant mothers;** inclusive of 'women of childbearing age' as required by the Management of Health and Safety at Work Regulation 1999.

**Young people;** as identified by the Management of Health and Safety at Work Regulations 1999 as a person who has not attained the age of 18.

**Returns to work;** employees who require reasonable adjustments to allow them to return to work or continue at work.

**Reasonable adjustments under the Equality Act 2010;** employees with protected characteristics, particularly disability, as set out in the Equality Act 2010, for whom reasonable adjustments are a legal obligation.

## **First Aid**

The organisation and arrangements related to compliance with the Health and Safety (first aid) Regulations 1981 are set out in the Health and Safety (first aid arrangements) Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

The Health and Safety (first aid arrangements) Procedure includes the following:

- Organisation and arrangements in place to undertake a first aid needs assessment
- Organisation and arrangements in place to ensure adequate provision of first aid to all employees

## **Adverse Events**

The organisation and arrangements in place to manage adverse events are set out in the Health and Safety (adverse events) Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

The Health and Safety (adverse events) Procedure includes the following:

- Definitions of the various types of adverse events
- Organisation and arrangements related to the reporting of adverse events
- Organisation and arrangements related to the recording of adverse events
- Organisation and arrangements related to the analysis of adverse events
- Organisation and arrangements related to fact-finding (investigation)
- Organisation and arrangements related to the reporting of adverse events statistics to the Executive and Trust Board

- Organisation and arrangements related to the management of adverse events that meet the specification for reporting to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) 2013

Employees are able to report adverse events, including near misses, unsafe acts and conditions, independently without having to report via their line manager.

### **Engagement and Participation**

The organisation and arrangements in place to promote and manage employee engagement and participation are set out in the Health and Safety (engagement and participation) Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

The Health and Safety (engagement and participation) Procedure includes the following:

- Terms of Reference of the Health and Safety Committee
- Role profile of Representative of employee safety
- The organisation and arrangements in place for cooperation with recognised trade unions and their members
- The organisation and arrangements in place for consulting and communicating with employees including; Health and Safety Culture Survey, Health and Safety Signpost (half termly newsletter) and the use of Health and Safety Noticeboards.

### **Personal Protective Equipment**

The use of personal protective equipment (PPE), including Respiratory Protective Equipment (RPE) and Hearing Protective Equipment (HPE) will be subject to a suitable and sufficient risk assessment. PPE will be employed as a control measure only after more effective measures have been considered first. See appendix 6.

The Health and Safety Advisor will publish, and keep under review the following guidance which covers the selection, procurement, use, maintenance and storage of personal protective equipment including RPE and HPE:

- Health and Safety (personal protective equipment) Guidance
- Health and Safety (respiratory protective equipment) Guidance
- Health and Safety (hearing protective equipment) Guidance

The Guidance documents above are applicable to any department that uses equipment which meets the definition of personal protective equipment as set out in the Personal Protective Equipment at Work Regulations 1992. Specifically relating to PPE, the Control of Substances Hazardous to Health (COSHH) Regulations 2002 apply. Specifically relating to HPE, the Control of Noise at Work Regulations 2005 apply.

### **Health and Safety Library**

The Health and Safety Advisor manages a library of the health and safety related policy statements, procedures, guidance documents and checklists. The organisation and arrangements in place to manage this library are set out in the Health and Safety (library) Procedure.

The Health and Safety (library) Procedure includes the following:

- Organisation and arrangements in place to manage document and version control of the relevant health and safety documents
- Organisation and arrangements in place to comply with Young Epilepsy's general procedures for document and version control
- A register of health and safety documents currently in effect include policy statements, procedures, guidance documents and checklists
- Definitions and styles to be used for consistency across the library including definitions of; policy statement, procedure and guidance

### **Major incidents and service continuity**

To prevent and protect against major incidents, events or other impacts which risk service continuity, Service Continuity Procedure gives effect to relevant preventative and protective measures.

The Service Continuity Procedure is not part of the Health and Safety function however the relevant organisation and arrangements overlap considerably.

The Service Continuity Procedure is owned by the Executive and managed by the Health and Safety Advisor on behalf of the Major Incident Management Team.

The Service Continuity Procedure includes the following:

- Definition of a 'major incident'

## **Fire Safety**

The organisation and arrangements in place to manage fire safety at Young Epilepsy are set out in the Fire Safety (preventative and protective measures) Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

## **Environmental Management**

The organisation and arrangements in place relating to environmental management at Young Epilepsy are set out in the Environmental Management Procedure. The Procedure is owned by the Director of HR and managed by the Health and Safety Advisor.

## **Contractor Management (departmental)**

In accordance with the Contractor Management Policy, any department that retains the services of contractors must document and implement suitable arrangements for the management of those contractors with particular regard to health and safety.

The management of contractors by individual departments will be subject to internal and external audit.

Agency staff are also classed as contractors for the purpose of contractor management procedures.

## **Visitor Management**

Due to the particularly vulnerable nature of our children and young people, visitor management procedures will be owned by the Director of Integrated Care. The Safeguarding and Compliance Manager manages procedures related to the management of visitors to Campus. Where applicable, visitor management procedures should apply to the London office, and the appropriate guidance followed.

Contractors are classed as visitors for the purpose of visitor management procedures.

## **Procedures given effect by the Health and Safety Policy Statement, the Environmental Policy Statement, the Fire Safety Policy Statement and the Contractor Management Policy Statement**

Inclusive of those procedures and guidance referenced specifically elsewhere in this Procedure, the following procedures are given effect by the relevant Policy Statements.

Where required, specific procedures can give effect to relevant guidance, checklists, forms and templates which have equal standing to those listed below.

The procedures and guidance listed below are all owned by the Director of HR and managed by the Health and Safety Advisor:

- **Health and Safety (adverse events) Procedure**
- **Health and Safety (engagement and participation) Procedure**
- **Service Continuity Procedure**
- **Health and Safety (working at home) Procedure**
- **Health and Safety (control of noise at work) Procedure**
- **Health and Safety (library) Procedure**
- **Health and Safety (competence and supervision) Procedure**
- **Health and Safety (first aid arrangements) Procedure**
- **Health and Safety (control of vibration at work) Procedure**
- **Health and Safety (risk management) Procedure**
- **Health and Safety (working at height) Procedure**
- **Health and Safety (workplace welfare) Procedure**
- **Health and Safety (control of substances hazardous to health) Procedure; to include specific details related to management of Radon risk, use of veterinary medicines and management of sharps**
- **Health and Safety (driving at work) Procedure; exclusive of fleet management**
- **Health and Safety (manual handling) Procedure**
- **Health and Safety (food hygiene) Procedure**
- **Health and Safety (lone working) Procedure**

- **Health and Safety (violence at work) Procedure**
- **Health and Safety (stress management) Procedure**
- **Health and Safety (display screen equipment) Procedure**
- **Health and Safety (lifting equipment and lifting operations) Procedure**
- **Health and Safety (electricity at work) Procedure**
- **Health and Safety (gas safety) Procedure**
- **Health and Safety (asbestos management) Procedure**
- **Health and Safety (water systems) Procedure**
- **Health and Safety (construction; design and management) Procedure**
- **Health and Safety (personal protective equipment) Guidance**
- **Health and Safety (respiratory protective equipment) Guidance**
- **Health and Safety (hearing protective equipment) Guidance**
- **Health and Safety (Safe System of Work) Guidance**
- **Environmental Management Procedure**
- **Fire Safety (preventative and protective measures) Procedure**
- **Contractor Management Procedures (departmental)**
- **Health and Safety (contract management) Guidance**

### **Internal Audit**

To ensure the organisation and arrangements set out in this Procedure, and the other relevant procedures given effect by the Health and Safety Policy Statement, the Environmental Policy Statement, the Fire Safety Policy Statement and the Contractor Management Policy Statement, are maintained and subject to ongoing review and improvement, a schedule of internal audit is owned by the Director of HR and Managed by the Health and Safety Advisor.

The Internal Audit Schedule is published annually and set out in the (annual) Internal Audit Schedule. See appendix 4.

The Health and Safety Advisor will undertake Internal Audits.



The Internal Audit Schedule will be published in July for the following year providing the relevant departments with advance notice of internal audits.

For the purpose of this Procedure, **audit** is defined as; a structured inspection and review of a specific management system or department followed by a conclusion of its performance and effectiveness measured against relevant policy and procedure with recommendations for improvement.

Internal audit could include; inspection of relevant documents, inspection of plant and equipment, interviews with relevant employees and walk-arounds. Where required or appropriate, audits may be conducted as desk-top exercises.

### **External Audit**

To ensure the organisation and arrangements set out in this Procedure, and the other relevant procedures given effect by the Health and Safety Policy Statement, the Environmental Policy Statement the Fire Safety Policy Statement and the Contractor Management Policy Statement, are maintained and subject to ongoing review and improvement, a schedule of external audit is owned by the Director of HR and Managed by the Health and Safety Advisor.

The External Audit Schedule is published annually and set out in the (annual) External Audit Schedule. See appendix 5.

The external health and safety Competent Person will undertake External Audits. See appendix 2.

The External Audit Schedule will be published in July for the following year providing the relevant departments with advance notice of external audits.

For the purpose of this Procedure, **audit** is defined as; a structured inspection and review of a specific management system or department followed by a conclusion of its performance and effectiveness measured against relevant policy and procedure with recommendations for improvement.

External audit could include; inspection of relevant documents, inspection of plant and equipment, interviews with relevant employees and walk-arounds. Where required or appropriate, audits may be conducted as desk-top exercises.

### **Safety Tours and Inspections**

The Health and Safety Advisor will conduct reactive Safety Tours and Inspections in response to adverse events, recent changes to policy, procedure or legislation or

whenever there is a concern that health and safety management is lacking in a particular department.

The purpose of Safety Tours and Inspections is to support relevant directors, senior managers, managers and employees to maintain and improve health and safety management.

Safety Tours and Inspections are not part of the Young Epilepsy Disciplinary or Performance Management Procedures.

Advance notice to, and cooperation from, the relevant management will always be sought before a Safety Tour or Inspection is undertaken.

For the purpose of this Procedure, a **Safety Tour** is defined as; a walk-around of a specified area to include conversation with relevant employees and general observation of health and safety management in operation.

For the purpose of this Procedure, an **Inspection** is defined as; examination of a specified area, plant, equipment or activity against a specification e.g. operating instructions or a Safe System of Work for the purpose of confirming compliance with the relevant specification.

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**This procedure is agreed by the Director of HR and will be implemented by all departments.**

**Signed:** .....

**Director of HR**

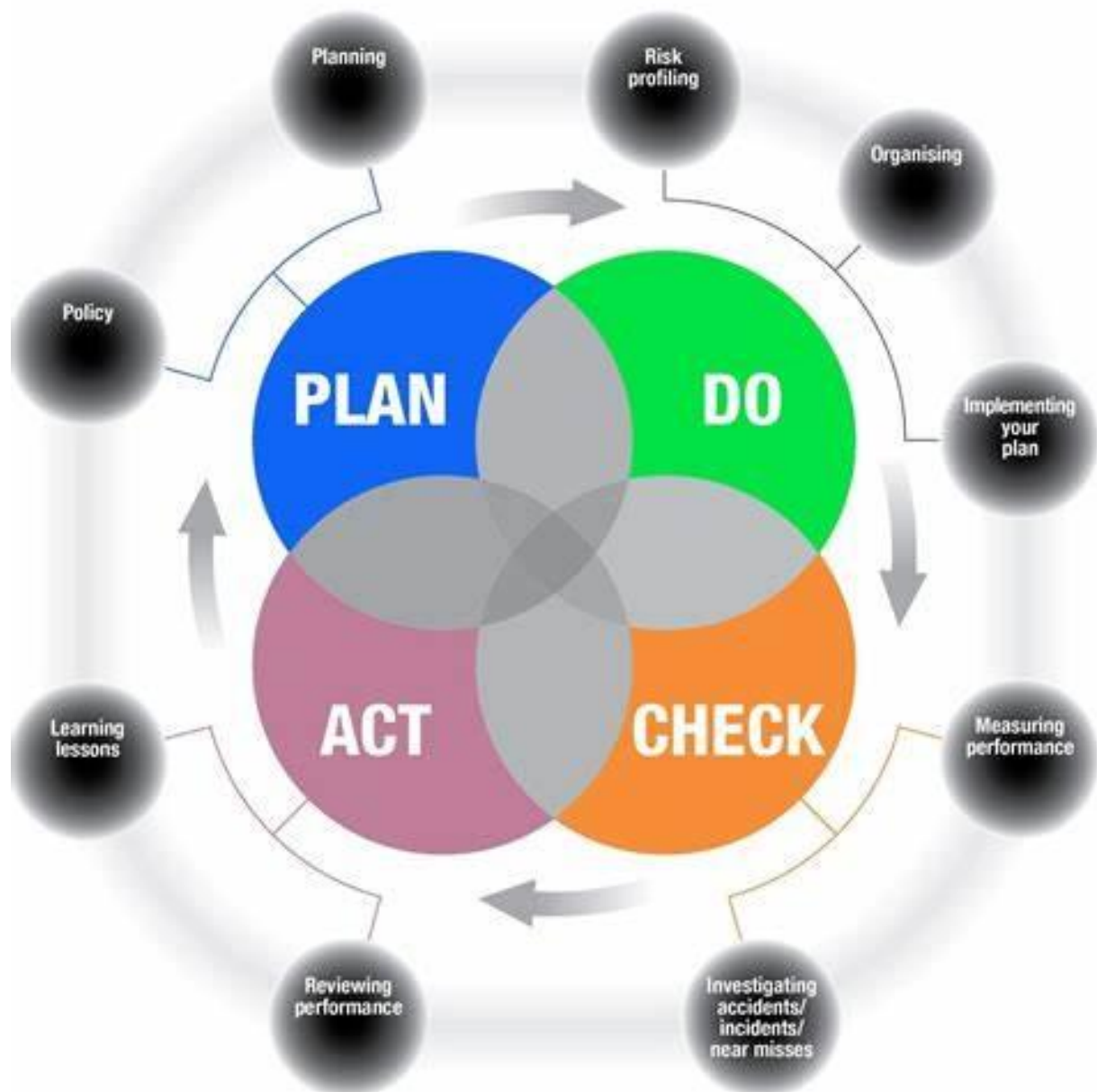
**Date:** .....July 31<sup>st</sup> 2020.....

Date of next review: August 31<sup>st</sup> 2021

**Author:** Andrew Beales

## Appendix 1 – Plan Do Check Act (PDCA) Management model

Taken from the Health and Safety Executive (HSE) publication HSG 65 – Managing for Health and Safety:



## Appendix 2 – external health and safety Competent Person

Assurity Consulting Ltd.

26 Redkiln Way

Horsham

RH13 5QH

01403 269375

Account Manager: Vicki Filby-Filson

[www.assurityconsulting.co.uk](http://www.assurityconsulting.co.uk)

**Appendix 3 – (annual) Health and Safety Plan**

**As a separate document**

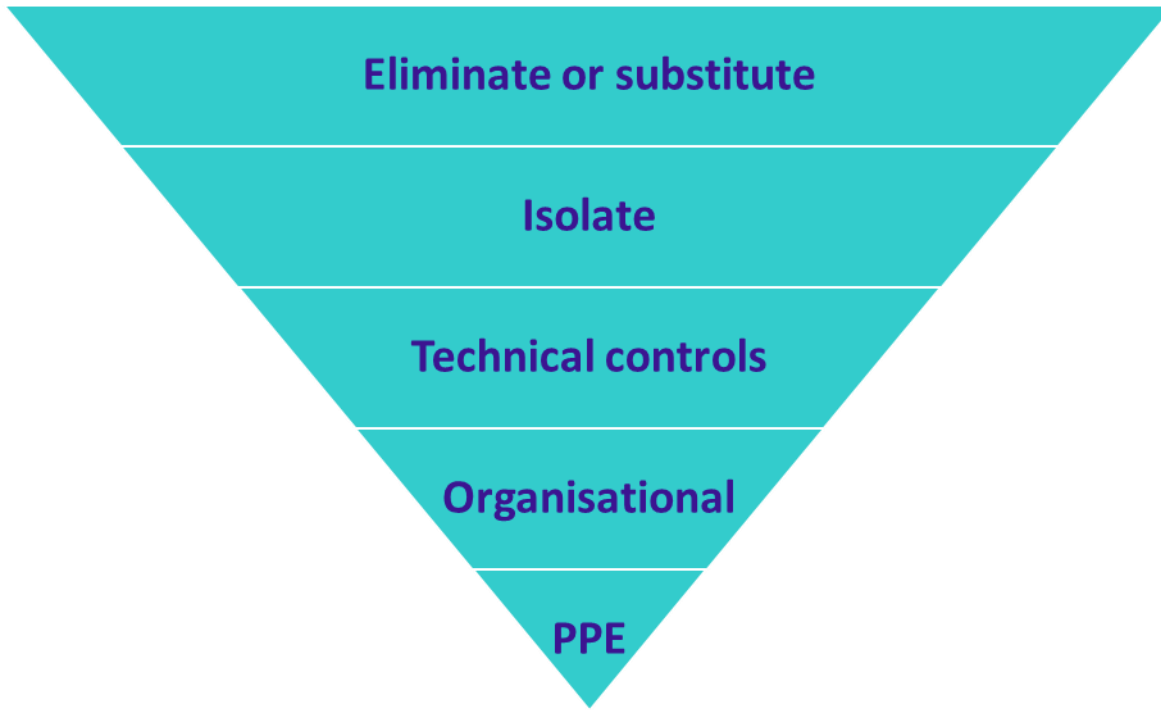
**Appendix 4 – (annual) internal audit schedule 2020/21**

<b>When</b>	<b>Audit focus</b>	<b>Rationale</b>
Q2  July to September 2020	Fire Safety Preventative and Protective Measures	<p>To ensure the organisation and arrangements given effect by the Fire Safety Policy Statement and detailed in the Fire Safety (preventative and protective measures) Procedure have been implemented.</p> <p>To ensure effective cooperation and coordination between Health and Safety and Facilities</p> <p>To review the provision of fire safety information, instruction and training</p>
Q3  October to December 2020	Environmental Management Procedure	Gap analysis of the organisation and arrangements set out in the new Environmental Management Procedure
Q4  January to March 2021	Management of Legionella and associated risks in water systems	Following an incident in Farm House where levels of legionella bacteria exceeded safe limits
Q1  April to Jun 2021	Departmental Contractor Management Procedures	To ensure the departmental implementation of the organisation and arrangements given effect by the Contractor Management Policy Statement

**Appendix 5 – (annual) external audit schedule 2020/21**

When	Audit focus	Rationale
Q2  July to September 2020	Fleet Management	Following issues related to license and competence requirements of minibus drivers.  To ensure effective cooperation and coordination between Health and Safety (driving at work) Procedure and Fleet Management Procedures.
Q3  October to December 2020	PE and Outdoor Learning	Higher risk area already showing signs of good management of health and safety – to improve and set as standard/example for other departments.
Q4 January to March 2021	Food hygiene within the Granary, Residential and midday meals in School and College	In line with current schedule (Food Hygiene Audit in March 2020)
Q1  April to June 2021	Health and Safety Management  Health and Safety Plan progress  Performance of the Health and Safety Advisor (Health and Safety function) against role profile  Occupational Safety and Health Risk Register and Legal Register  Performance of the Health and Safety Committee against its Terms of Reference and action tracker	To ensure effective management of health and safety arrangements  To provide assurance that Young Epilepsy is compliant with internal policies and procedures and any relevant legislation and regulation  To inform the Health and Safety Management Plan for the following year (August to July)

## Appendix 6 – hierarchy of controls



<b>Eliminate or substitute</b>	Removing the hazard or substituting it for something less hazardous e.g. swapping a bleach-based cleaner for a non-bleach based cleaner
<b>Isolate</b>	Place physical barriers around the hazard e.g. installing a screen on a work machine to protect against flying objects
<b>Technical controls</b>	Use guards and other technology to protect from hazards e.g. using a vacuum to reduce dust levels during housekeeping tasks or changing flooring to prevent slips by adding a slip resistant finish
<b>Organisational</b>	Signage, training, information, instruction including safe systems of work
<b>PPE</b>	Including safety goggles, safety boots, high visibility clothing and gloves



**Appendix 7 – Health and Safety Year (calendar)**

<b>Month</b>	<b>Audit Phase (internal and external)</b>	<b>Milestones</b>
<b>July</b>	<b>Q2</b>	<ul style="list-style-type: none"> <li>▪ Publication of (annual) Health and Safety Plan</li> <li>▪ Review of Health and Safety Management Procedure</li> <li>▪ Publication of (annual) Internal Audit Plan</li> <li>▪ Publication of (annual) External Audit Plan</li> </ul>
<b>August</b>		<ul style="list-style-type: none"> <li>▪ Health and Safety Year Starts</li> <li>▪ Health and Safety Plan commences</li> </ul>
<b>September</b>		
<b>October</b>	<b>Q3</b>	<ul style="list-style-type: none"> <li>▪ Health and Safety Committee meeting</li> </ul>
<b>November</b>		
<b>December</b>		
<b>January</b>	<b>Q4</b>	<ul style="list-style-type: none"> <li>▪ Health and Safety Committee meeting</li> </ul>
<b>February</b>		
<b>March</b>		
<b>April</b>	<b>Q1</b>	<ul style="list-style-type: none"> <li>▪ Anniversary of external Competent Person contract (contract review)</li> <li>▪ Health and Safety Committee Meeting</li> </ul>
<b>May</b>		<ul style="list-style-type: none"> <li>▪ Elections of Representatives of employee safety</li> <li>▪ Health and Safety Culture Survey (2-week window)</li> </ul>
<b>June</b>		<ul style="list-style-type: none"> <li>▪ First meeting with new members of the Health and Safety Committee</li> </ul>

**Appendix 8 – interpretation of ‘month’ and other schedule and anniversary markers and timeframes set out in relevant legislation.**

Unless otherwise specified in specific legislation or internal procedure, for the purposes of Health and Safety, Young Epilepsy will interpret month(s), where this pertains to a period set for testing, inspection or check etc. as follows:

**“Corresponding date rule;”** e.g. 6 months from the 7<sup>th</sup> of July is the 7<sup>th</sup> of January. Where such a corresponding date falls on a date which does not exist in the calendar e.g. 31<sup>st</sup> April, the deadline shall fall on the nearest, existing preceding date i.e. 30<sup>th</sup> April.