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# Health, Safety & Welfare

## Key Learning Outcomes:

### The learner will:

- Understand the organisation's commitment to delivering services safely
- Understand the importance of acting in ways that are consistent with legislation, policies and procedures for maintaining own and others' health and safety
- Know the organisation's arrangements for consulting with employees on health and safety matters
- Be able to locate the organisation's health and safety policy and the arrangements for implementing it
- Understand the meaning of hazard, risk and risk assessment
- Be able to recognise common work place hazards including:
  - Electricity
  - Slips and trips, falls
  - Chemicals and substances
  - Stress
  - Physical and verbal abuse
  - Traffic routes
  - Display screen equipment (DSE), workstations and the working environment.
- Understand how any identified risks might be managed through balanced and appropriate preventive and protective measures
- Understand how they could apply and promote safe working practices specific to their job role
- Know the actions they should take to ensure patient safety
- Understand the importance of reporting health and safety concerns
- Know the reporting processes used and how the organisation uses the information gathered to help manage risks
- Know how to raise health and safety concerns
- Understand individual responsibilities in reporting incidents, ill health and near misses.

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### Health and Safety

Health and Safety legislation in the UK is made under the power of various **Acts of Parliament**. The Health and Safety at Work etc. Act 1974 (HASAW) is the main Act which allows the Health and Safety Commission (HSC), to bring in new legislation as appropriate.

Some pieces of legislation are initiated by **European Directives** which have been agreed by all European Union (EU) Member States.

Health and safety legislation does not apply to the whole of the United Kingdom (UK). Separate arrangements exist for: **Northern Ireland, Isle of Man, Channel Islands**.

Every organisation will have its own arrangements for consulting with its employees/contractors on health and safety matters, it is your responsibility to ensure that you are aware of those arrangements and how to report. You are also responsible for ensuring that you are informed on how to locate that organisation's health and safety policy and any specific requirements that relate to your job role.

You have a duty of care to report any concerns that you have regarding health and safety matters and patient safety and how to report this via the processes of the organisation within which you are working. This information will form part of the organization's effective risk management and data gathering process ensuring a healthy and safe environment for all.

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If during the course of your work you feel you could promote safer working practices it is your duty to consult with your line manager on these matters.

## What Health and Safety Law Requires?

The basis of British health and safety law is the **Health and Safety at Work etc. Act 1974**. The Act sets out the general duties which employers have towards employees and members of the public and employees have to themselves and to each other. These duties are qualified in the Act by the principle of '*so far as is reasonably practicable*'. In other words, an employer does not have to take measures to avoid or reduce the risk if they are technically impossible or if the time, trouble or cost of the measures would be grossly disproportionate to the risk. What the law requires here is what good management and common sense would lead employers to do anyway: that is, to look at what the risks are and take sensible measures to tackle them.

Principle 8 of the NHS Principles and Values document states 'the NHS aspires to the highest standards of excellence and professionalism in the provision of high quality care that is safe, effective and focus on patient experience', as its commitment to quality standards of care, embracing health and safety for patients and staff.

## The Management of Health and Safety at Work Regulations 1999

The Management of Health and Safety at Work Regulations 1999 generally make it more explicit what employers are required to do to manage health and safety under the Health and Safety at Work Act. Like the Act, they apply to every work activity.

The main requirement on employers is to carry out a **risk assessment**. Employers with five or more employees need to record the significant findings of the risk assessment. Risk assessment should be straightforward in a simple workplace such as a typical office. It should only be complicated if it deals with serious hazards such as those in a high dependency situation.

Besides carrying out a risk assessment, employers also need to:

- Make arrangements to implement health and safety measures identified as necessary by the risk assessment
- Appoint competent people (themselves or company colleagues) to help them to implement the arrangements
- Set up emergency procedures
- Provide clear information and training to employees
- Work together with other employers sharing the same workplace

*Other regulations* require action in response to particular hazards or in industries where hazards are particularly high. Many are not qualified by 'reasonable practicability'. All employees must be aware of any risks which may affect their health and safety.

A risk assessment is an organised look at what could cause harm to people and allows us to ensure that we take enough precautions to avoid such harm. The important thing to decide from a risk assessment is whether a hazard is significant and whether it is covered by satisfactory precautions so that any risk is acceptably low.

**A HAZARD IS SOMETHING THAT HAS THE POTENTIAL TO DO HARM**

**A RISK IS THE CHANCE (HIGH, MEDIUM OR LOW) OF THAT HARM OCCURRING**

**There are 5 steps that need to be taken in risk assessment:**

1. Identify potential hazards in the workplace
2. Decide who might be in danger
3. Evaluate the risks arising from the hazards and decide whether the existing precautions are adequate or whether more should be done to get rid of the hazard or to control the risks
4. Record the findings and details of any actions taken
5. Keep the assessment under review and revise it as necessary

## TRAINING & CONSULTANCY LTD **European Law**

In recent years much of Britain's health and safety law has originated in Europe. Proposals from the European Commission may be agreed by Member States, who are then responsible for making them part of their domestic law. Modern health and safety law in this country, including much of that from Europe, is based on the principle of risk assessment as described above.

### Regulations

Regulations are law, approved by Parliament. These are usually made under the Health and Safety at Work Act, following proposals from HSC. This applies to regulations based on EC Directives as well as 'home-grown' ones.

The Health and Safety at Work Act, and general duties in the Management Regulations, are goal-setting and leave employers freedom to decide how to control risks which they identify. But some

risks are so great, or the proper control measures so costly, that it would not be appropriate to leave employers discretion in deciding what to do about them.

Regulations identify these risks and set out specific action that must be taken. Often these requirements are absolute - to do something without qualification by whether it is reasonably practicable.

### How Regulations Apply

Some regulations apply across all companies, such as the Manual Handling Regulations which apply wherever things are moved by hand or bodily force, and the Display Screen Equipment Regulations which apply wherever VDUs are used. Other regulations apply to hazards unique to specific industries, such as mining or nuclear.

### What Form Do They Take?

The HSC will, where appropriate, propose regulations in **goal setting** form: that is, setting out **what** must be achieved, but not **how** it must be done. Sometimes it is necessary to be **prescriptive**, that is spelling out in detail what should be done. Some standards are absolute. For example, all mines should have two exits; contacts with live electrical conductors should be avoided.

Sometimes European law requires prescription. Some activities or substances are so inherently hazardous that they require **licensing**, for example explosives and asbestos removal. Certain big and complex installations or operations require 'safety cases', which are large-scale risk assessments subject to scrutiny by the regulator. For example, railway companies are required to produce safety cases for their operations.

## The Provision and Use of Work Equipment Regulations 1998 (PUWER)

These regulations were introduced to ensure the provision of safe working equipment and its safe use.

Employers have a duty to provide and maintain work equipment and to ensure that the users of the work equipment receive suitable health and safety training.

Many workplace tasks involve the use of equipment, for example in the caring profession, lifting hoists, mechanical bath aids, resuscitation equipment, respirators, blades, needles, photocopiers, tin opener etc. The list of work equipment is non-exhaustive.

You are responsible for ensuring that the equipment you use is in good working order, cleaned according to the manufacturer's instructions, stored away safely after use and only used for the purpose it was designed for.

## Manual Handling Operations Regulations 1992

These regulations were introduced in order to cut down the number of accidents in the workplace.

Employers have to do all they can to avoid the manual handling of objects by their employees. Within the caring profession this involves ensuring all patients undergo a mobility risk assessment and hoists, slide sheets, slings etc. are provided by the employer.

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You are responsible for following the risk assessment plan that has been undertaken on clients/patients. Failure to do so will put you and your clients/patients at risk. If you feel a client's/patient's mobility risk assessment needs updating you must report this to the person in charge.

**Never attempt to undertake a task that you are not capable of doing.**

## Personal Protective Equipment at Work 1992

Employers are required to supply personal protective equipment to employees who may be exposed to a risk to their health or safety while at work. Within the caring profession the equipment employers are expected to supply are:

**Gloves, masks, gowns, aprons, goggles, sinks & hand decontaminates**

The purpose of using such equipment is to protect the employee from infection or in some cases to protect the service user from infection.

## RIDDOR

It stands for the **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995** - sometimes referred to as **RIDDOR 95** or **RIDDOR** for short, these Regulations came into force on 1 April 1996.

### Why do you need to know about RIDDOR?

RIDDOR requires that some work-related accidents, diseases and dangerous occurrences must be reported to the appropriate authority. It applies to all work activities.

### When does an employee need to make a report?

Accidents that arise out of or in connection with a work activity must be recorded in the accident book of the establishment where the accident happened. Accidents to clients/patients must also be recorded in the accident book and in the Service User's Care Plan.

## What should the employer report?

Reporting accidents and ill health at work is a legal requirement. The information enables the Health and Safety Executive (HSE) and local authorities (referred to as '*the enforcing authorities*') to identify where and how risks arise and to investigate serious accidents. They can then help you and give advice on how to reduce injury, ill health and accidental loss.

## Death or major injury

If there is an accident connected with work where someone is killed or suffers a major injury (including as a result of physical violence); or a member of the public is killed or taken to hospital; the person in charge of Health and Safety within that environment must notify the enforcing authority without delay (e.g. by telephone). They will ask for brief details about the business, the injured person and the accident; and within ten days a completed accident report must be sent to the authority.

### Definition of major injuries, dangerous occurrences and diseases reportable are:

- Fracture other than to fingers, thumbs or toes
- Amputation
- Dislocation of the shoulder, hip, knee or spine
- Loss of sight (temporary or permanent)
- Chemical or hot metal burn to the eye or any penetrating injury to the eye
- Injury resulting from an electric shock or electrical burn leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours
- Any other injury: leading to hypothermia, heat-induced illness or unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours
- Unconsciousness caused by asphyxia or exposure to a harmful substance or biological agent
- Acute illness requiring medical treatment, or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin; acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

## Over-seven-day injury

If there is an accident connected with work (including an act of physical violence) and anyone working as an employee or a self-employed person working on the premises, suffers an over-seven day injury an accident report form must be sent to the authority within ten days. An over-seven-day injury is one which is not major but results in the injured person being away from work **or** unable to do the full range of their normal duties for more than seven days (including any days they wouldn't normally be expected to work such as weekends, rest days or holidays) not counting the day of the injury itself.

## Disease

If a doctor notifies the employer that an employee suffers from a reportable work-related disease a report form must be completed.

### Reportable diseases include:

- Certain poisonings
- Some skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne

- Lung diseases including occupational asthma, farmer's lung, pneumoconiosis, asbestosis, mesothelioma
- Infections such as leptospirosis, hepatitis, tuberculosis, anthrax, legionellosis and tetanus; and more recently MRSA

### What records must be kept?

A record of any reportable injury, disease or dangerous occurrence for three years after the date on which it happened, to include:

- The date and method of reporting
- The date, time and place of the event
- Personal details of those involved
- A brief description of the nature of the event or disease

## Control of Substances Hazardous To Health

### What is COSHH?

**COSHH** stands for the **Control of Substances Hazardous to Health Regulations 1998**.

Using hazardous substances can put people's health at risk. COSHH requires employers to control exposures to hazardous substances to protect both employees and others who may be exposed from work activities.

### What are hazardous substances?

Hazardous substances are anything that can harm your health when you work with them if they are not properly controlled e.g. by using adequate ventilation. They are found in nearly all work places e.g. factories, shops, healthcare establishments, mines, farms and offices.

### They can include:

- Substances used directly in work activities e.g. glues, paints, cleaning agents
- Substances generated during work activities e.g. fumes from soldering, welding and mixing cleaning substances together
- Naturally occurring substances e.g. grain dust, bodily fluids, bacteria

For the vast majority of commercial chemicals, the presence (or not) of a warning label will indicate whether COSHH is relevant. For example, household washing up liquid doesn't have a warning label but bleach does - so COSHH applies to bleach but not washing up liquid when used at work.

### Chemicals can enter your body in 4 main ways:

1. **Skin absorption or eye contact** —this is especially true of liquid chemicals
2. **Inhaling hazardous fumes**, vapours, mists, or dust. These can be taken into the lungs and travel from there into the bloodstream and to other organs of the body
3. **Swallowing or ingestion**. Even though you may not intentionally swallow hazardous chemicals, chemicals can be transferred onto food if your hands are contaminated, and then swallowed accidental



4. **Direct penetration**, such as when a chemical enters the body through an open cut or skin puncture.

#### Types of Hazardous Waste in the healthcare sector:

- Human tissue
- Contaminated disposable sharp instruments or items
- Urine, blood, vomit, faeces, sputum
- Items used to dispose of urine, faeces and other bodily secretions or excretions, including used disposable bed pans, bed pan liners, incontinence pads, stoma bags and urine containers
- Cleaning fluids, powders such as bleach and disinfectant

**Disposal of Hazardous Waste** is governed by The Waste (England and Wales) (Amendment) Regulations 2012. All waste must be disposed of by using the correct bags:-



**Swabs and Dressings** - swabs, wound dressings, bandages, blood contaminated waste (excluding sharps)



**Phlebotomy Sharps** - sharps used to take blood samples or administer saline



**Sharps with Medicinal Residue** - sharps waste from dispensing medicine with traces of medicine



**Cytotoxic and Cytostatic Waste** - waste relating to the dispensing of cytotoxic and cytostatic drugs only



**Pharmaceutical Waste** - medicines, controlled drugs once denatured by specialist disposal kits



**Offensive Waste** - incontinence waste, nappies

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**Anatomical Waste** - surgical waste, tissue, solidified embalming fluid

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- Yellow bags for the disposal of sanitary or clinical waste in service users own home can be ordered from the Council and will be collected weekly
- When service users use needles and syringes in their home they will be supplied with a yellow plastic sharps box. Used needles must be discarded in these boxes. Under no circumstances should needles be put into ordinary household rubbish

### Following the 8 steps to COSHH

Employers must....

- **Step 1** Work out what hazardous substances are used in your work place and find out the risks from using these substances to people's health.
- **Step 2** Decide what precautions are needed before starting work with hazardous substances.
- **Step 3** Prevent people being exposed to hazardous substances, but where this is not reasonably practicable, control the exposure.
- **Step 4** Make sure control measures are used and maintained properly and that safety procedures are followed.
- **Step 5** If required, monitor exposure of employees to hazardous substances.
- **Step 6** Carry out health surveillance where your assessment has shown that this is necessary or COSHH makes specific requirements.
- **Step 7** If required, prepare plans and procedures to deal with accidents, incidents and emergencies.
- **Step 8** Make sure employees are properly informed, trained and supervised.

### What next?

The subsequent reviews of COSHH regulations since 1998 have concluded that the present system of health and safety regulation generally works well, though it identified several areas where improvements can be made.

Although the Review has ended, work in support of "Better Regulation" continues. The Review Program has formed an important basis for long-lasting successes in improving workplace health and safety. Policies and initiatives following from it continue to support priority aims and objectives, and will be refined in the coming years, adapting and evolving to take account of changes in technology, workplace trends and the needs of those involved.

## Work Space Safety

Where people are employed in positions where they use computers or other desktop equipment, then a work station assessment should be completed. The Health and Safety (Display Screen Equipment) Regulations 1992 – Amended 2002 requires employers to minimise the risks in DSE work by ensuring that workplaces and jobs are well designed

This assessment should include (at a minimum) chair position, height of the desk and the position of any computer /other equipment and accessories. This assessment is to ensure an ergonomically safe working environment.

### Who Is Affected By These Regulations?

These regulations apply where staff habitually use Display Screen Equipment (DSE) as a significant part of their normal work – for continuous periods of one hour or more. Other people, who use DSE only occasionally, are not covered by the requirements in the regulations (apart from work station requirements). However, employers still have general duties to protect them under other health and safety at work legislation.

Display Screen Equipment (DSE) covers a wide range of computer equipment that you would use at work and at home and includes:

- A computer monitor or screen
- Mouse
- Keyboard
- Processor Unit (Tower)
- Laptops and other portable computer equipment

There are possible health problems associated with using all types of equipment including DSE. When injuries do occur, for most of the time it is as a result of how you have been using the DSE equipment, rather than the DSE equipment itself. It can cause injuries if used the wrong way, or has not been set up properly.

Long periods concentrating and focusing on the screen can cause eyestrain.

Sitting in one position for a long time and using hands, wrists and fingers can cause musculoskeletal strains such as backache and upper limb problems.

### What Do Employers Have To Do To Comply?

- Analyse work stations and assess and reduce risks
- Make sure controls are in place
- Provide information and training
- Provide eye and eyesight tests on request, and special spectacles if needed
- Review the assessment when the user or DSE changes

## What 5 elements of the above workstation need to be taken into account for the work station assessment?

1. **The Chair:** What should we be looking at?
  - The backrest – adjustable, so that it gives firm and comfortable support to the lower back.
  - The seat – non-slip surface. It is essential that the elbows should be at approx. 90 degrees when hands are on the keyboard – if this means feet are no longer on the floor then a footrest will be needed.
  - The castors – should be stable, but should be able to swivel and glide in order to reach drawers, printers etc.

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2. **The Desk** - There is little control that we have over the desk but there should be enough room on it!! It should be deep enough to accommodate the computer and allow a distance of 50cm between the screen and your eyes. The recommended minimum size is 1200mm x 600mm. There should be enough room under it for the operator's legs, the recommended space opening (minimum requirements are:

- Height 620mm
- Width 580mm
- Depth 450 mm

The area should be free of clutter, no cables or sockets that can be trodden on. Make sure the operator's legs are not pressed up against the underside of desk once chair is correct height.

3. **The Keyboard**

- Should be set back enough on the desk to allow user to rest their forearms on the space in front.
- The wrists should be more or less flat/level
- Things that help are tilt adjustment, a wrist rest and a numeric keypad on the keyboard

4. **The Mouse** - Should be set back enough on the desk to allow user to rest their forearms on the space in front.

- The wrists should be more or less flat/level
- Things that help are tilt adjustment, a wrist rest and a numeric keypad on the keyboard.
- Use a non-slip surface/mouse mat so that the ball of the mouse does not skid. Make sure there is enough room on the desk to move the mouse freely.
- Clean the ball rollers regularly.
- Keep the mouse close so that you do not have to over-extend the arm.

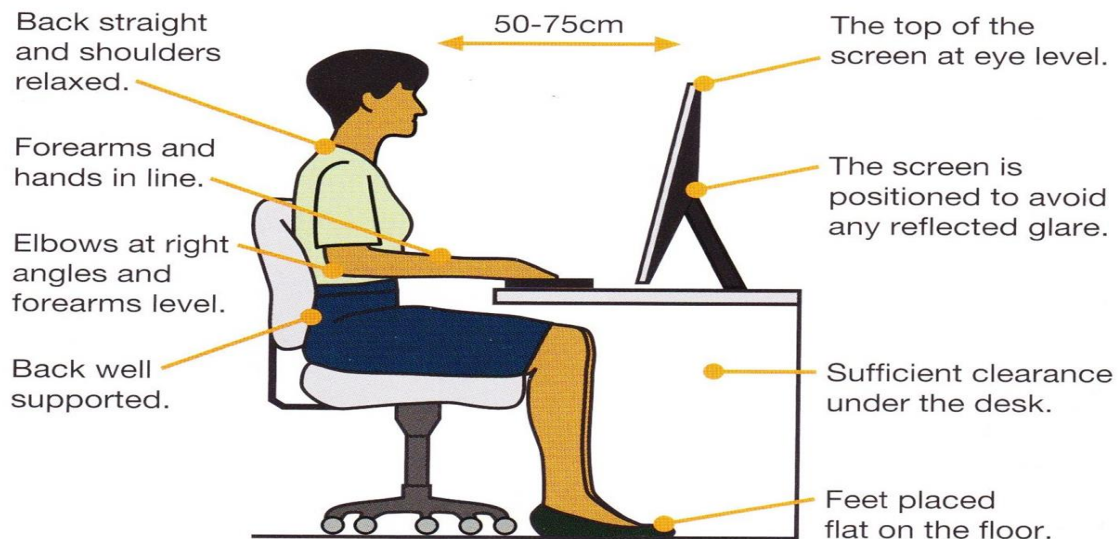
Using the mouse can put a strain on you because its use is usually concentrated on one hand. This can be very repetitive so make sure you use the correct techniques to avoid strain:

- Try to rest your hand lightly, do not grip, and press the buttons lightly.
- Move the mouse using your whole arm, not just the wrist and take regular breaks moving your hand away from the mouse.

#### 5. **The Screen** – Factors are:

- The size
- Definition of Image – contrast and brightness adjustment
- Height of the screen – may need a monitor stand
- Angle of the screen – should be able to swivel and tilt as needed.
- The screen should be large enough to read or for you to display enough of the document you are working on.
- The usual definition is 800 x 600 pixels on a 16" to 18" screen.
- You should not have to lean forwards or backwards
- If the image is blurred or flickering the screen should be replaced.
- The distance the screen needs to be away from the user will depend on their eyesight – if they need it nearer than 50 cm or further than 75cm, they may need an eye test.
- The height should be at eye level so that they don't have to bend their head to see the screen.
- The surface of the screen should be at right angles – as it is easier to see all parts without having to constantly re-focus the eyes.
- It is a legal requirement that the screen is adjustable – that it can tilt up/down/swivel.

#### **The Best Position for Working with Your DSE**



## Electrical Safety

Under UK law the Health and Safety at Work etc. Act 1974 (HSW Act) in Great Britain or the Health and Safety at Work (Northern Ireland) Order 1978 in Northern Ireland employers are responsible for ensuring the safety and health of their employees and also the public, if they are at risk from those work activities. This includes electrical safety.

Electrical Inspectors aim to reduce the number of electrical accidents by enforcing the law, providing advice on good working practices, and developing guidance in response to technical changes in equipment and working methods. Electrical Inspectors work in cooperation with other responsible bodies including The Department for Energy and Climate Change (DECC), Local Authority Standards departments and The Office of Gas and Electricity Markets (Ofgem).

Electricity can kill or severely injure people and cause damage to property. Every year many accidents at work involving electric shock or burns are reported to the Health and Safety Executive (HSE). Most of the fatal incidents are caused by contact with overhead power lines. Even non-fatal shocks can cause severe and permanent injury.

Those using or working with electricity may not be the only ones at risk – poor electrical installations and faulty electrical appliances can lead to fire, which may also cause death or injury to others. Most of these accidents can be avoided by careful planning and straightforward precautions.

### What are the hazards?

#### The main hazards are:

- Contact with live parts causing shock and burns – normal mains voltage, 230 volts AC, can kill
- Faults which could cause fire
- Fire or explosion where electricity could be the source of ignition in a potentially flammable or explosive atmosphere.

### Assessing the Risk

The risk of injury from electricity is strongly linked to where and how it is used. The risks are greatest in harsh conditions, for example:

- In wet surroundings – unsuitable equipment can easily become live and can make its surroundings live
- Outdoors – equipment may not only become wet but may be at greater risk of damage
- In cramped spaces with a lot of earthed metalwork such as inside a tank – if an electrical fault developed it could be very difficult to avoid a shock.

Some items of equipment can also involve greater risk than others. Extension leads are particularly liable to damage – to their plugs, sockets, connections and the cable itself. Other flexible leads, particularly those connected to equipment which is often moved, can suffer from similar problems.

## Reducing the Risk

Once you have completed the risk assessment, you can use your findings to reduce unacceptable risks from the electrical equipment in your workplace.

Ensure people working on or with your electrical equipment or systems are 'competent' for the task.

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'Competent means having suitable training, skill, and knowledge for the task to prevent injury to themselves and others.'

## Ensure the Electrical Installation Is Safe

### Make sure that:

- New electrical systems are installed to a suitable standard e.g. BS 7671 Requirements for electrical installations, and then maintain them in a safe condition
- Existing installations are maintained in a safe condition
- Enough socket outlets are provided and used because overloading socket outlets by using adaptors can cause fire.

## Safe and Suitable Equipment

- Choose equipment that is suitable for its working environment.
- Electrical risks can sometimes be eliminated by using air, hydraulic or hand powered tools which are especially useful in harsh conditions.
- Make sure that equipment is safe when supplied and that it is then maintained in a safe condition.
- Provide an accessible and clearly identified switch near each fixed machine to cut off power in an emergency.
- For portable equipment, use socket outlets which are close by so that equipment can be easily disconnected in an emergency.
- The ends of flexible cables should always have the outer sheath of the cable firmly clamped to stop the wires (particularly the earth) pulling out of the terminals.
- Replace damaged sections of cable completely.
- Use proper connectors or cable couplers to join lengths of cable. Do not use strip connector blocks covered in insulating tape.
- Some types of equipment are double insulated. These are often marked with a 'double-square' symbol. The supply leads have only two wires – live (brown) and neutral (blue). Make sure they are properly connected if the plug is not moulded.
- Protect light bulbs and other equipment which could easily be damaged in use.
- In potentially flammable or explosive atmospheres, only special electrical equipment designed for these areas should be used. You may need specialist advice.

### An appropriate system of maintenance is strongly recommended. This can include:

- User checks by employees, e.g. a pre-use check for loose cables or signs of fire damage



- A visual inspection by someone with more knowledge, e.g. checking inside the plug for internal damage, bare wires and the correct fuse
- Where necessary, a portable appliance test (PAT) by someone with the necessary knowledge and experience to carry out a test and interpret the results.

Damaged or defective equipment should be removed from use and either repaired by someone competent or disposed of to prevent its further use.

## Traffic Route

Healthcare environments are very busy in terms of the number of people i.e. staff and patients, who are a part of the internal traffic. We need to ensure that these traffic routes are kept clear of obstructions and hazards that could cause harm. Any vehicles e.g. trolleys, laundry carts, wheelchairs, dinner trolleys must have adequate assess and egress, and where necessary, audible alarms to alert people of their presence, or warning signs along the route.

All staff need to be aware of the layout of the environment that they are working in some cases, for example agency workers it may be useful to ask for a layout map of the environment

## Slips, Trips and Falls

Slips and trips are the most common cause of injury at work. On average, they cause 40 per cent of all reported major injuries and can also lead to other types of serious accidents, for example falls from height. Slips and trips are also the most reported injury to members of the public.

The Health and Safety at Work etc. Act 1974 (HSW Act) requires employers to ensure the health and safety of all employees and anyone who may be affected by their work, so far as is reasonably practicable. This includes taking steps to control slip and trip risks.

Employees have a duty not to put themselves or others in danger, and must use any safety equipment provided.

The Management of Health and Safety at Work Regulations 1999 require employers to assess risks (including slip and trip risks) and, where necessary, take action to address them. The Workplace (Health, Safety and Welfare) Regulations 1992 require floors to be suitable, in good condition and free from obstructions. People should be able to move around safely.

### Employees have a responsibility to:

- Inform your employer of any work situation you consider dangerous, or of any shortcoming in their protection arrangements for health and safety
- Use all work items provided by your employer correctly, in accordance with your training and the instructions you received to use them safely

### You can help to prevent slips and trips in your workplace by:

- Report near misses and accidents promptly to your employer, this information can be used to prevent future accidents.
- If you see slip and trip risks, try to sort them out or inform your employer
- Help to keep floors clean and dry
- Clear up spillages straight away or make arrangements for it to be cleaned.
- If you think of ways of preventing contamination (water, oils, cardboard, waste etc.) from getting onto the floor, suggest them to your employer
- Avoid causing trailing cables
- Keep place of work clear of obstacles
- Ask your employer to mark slopes and changes of levels
- If there isn't adequate lighting, report it
- Follow all safety advice
- Consider the correct foot wear
- Report any damaged floors or mats.
- Play your part and keep the workplace tidy.
- If you see items on the floor where someone could trip over them, remove them or arrange for them to be removed or for the situation to be made safe.
- If you are given PPE, wear it and look after it. Report any faults or damage to your employer and make arrangements for a replacement.
- Tell your employer about any work situation that you think is dangerous, or if you notice that something has gone wrong with their health and safety arrangements.

## Stress

The Health and Safety Executive (HSE) define stress as "the adverse reaction people have to excessive pressures or other types of demand placed on them".

Don't confuse positive pressure, which can create a 'buzz', and the harmful effects of pressure that is beyond a person's ability to cope.

- Stress affects one in five of the working population from the newest recruit in the post room to the board of directors.
- It is now the single biggest cause of sickness in the UK.
- Over 105 million days are lost to stress each year – costing UK employers £1.24 billion.

(Health & Safety Executive)

Stress takes many forms. As well as leading to anxiety and depression it can have a significant impact on an employee's physical health. Research links stress to heart disease, back pain, headaches, gastrointestinal disturbances and alcohol and drug dependency.

Employers have a legal duty to assess the risk of work-related stress and to take measures to control these risks.

**HSE have identified six main causes of stress or 'stressors' in organisations.**

Main Causes of Stress	What Employers can do about it
<b>Demands:</b> employees often become overloaded if they cannot cope with the amount of work or type of work they are asked to do	Pay attention to the way the job is designed, training needs and whether it is possible for employees to work more flexible hours
<b>Control:</b> employees can feel disaffected and perform poorly if they have no say over how and when they do their work	Think about how employees are actively involved in decision making, the contribution made by teams and how reviewing performance can help identify strengths and weaknesses and misconduct, and for tackling bullying and harassment
<b>Support:</b> levels of sick absence often rise if employees feel they cannot talk to managers about issues that are troubling them	Give employees the opportunity to talk about the issues causing stress, provide a sympathetic ear and keep them informed
<b>Relationships:</b> a failure to build relationships based on good behaviour and trust can lead to problems related to discipline, grievances and bullying	Check the organisation's policies for handling grievances, unsatisfactory performance, poor attendance and misconduct, and for tackling bullying and harassment
<b>Role:</b> employees will feel anxious about their work and the organisation if they don't know what is expected of them	Review the induction process, work out an accurate job description and maintain a close link between individual targets and organisational goals
<b>Change:</b> change needs to be managed effectively or it can lead to huge uncertainty and insecurity	Plan ahead so change doesn't come out of the blue. Consult with employees so they have a real input, and work together to solve problems

As an employee you have a right to have your health and safety at work protected.

#### To protect your rights at work you should:

- Familiarise yourself with HSE's risk factors and Management Standards so you can contribute more fully to discussions.
- Talk to your union safety representative or your employee representative (where you have one) about your employer's approach to the Management Standards. If you don't have a union or staff association you could also talk to your line manager, a colleague, your human resources department or someone you trust that can help.
- Help to develop and put in place effective plans by taking part in discussions or stress risk assessments. Your manager will need information from you, so make sure you complete any questionnaires when you are asked to and give open and honest answers. If you are worried about confidentiality or any other part of the process speak to your trade union safety representative, your employee representative or your manager. They will be able to give you assistance or advice.
- Volunteer to attend discussion groups, action planning meetings etc. They're for your benefit, and your managers will need your help in deciding what will work and what will not.
- Remember that consultation is a two-way process. Your managers must take your opinions into consideration when deciding what actions to take, and must communicate the reasons for their decisions.
- Read all communications. Make sure you understand the reason for decisions and provide feedback if required.
- Attend any stress management training courses arranged by your employer, which will help you understand stress and how to deal with it.

#### What should I do if I'm becoming stressed?

Try to identify the causes and what you can do to make things better. Ideally, tell your manager at an early stage. If your stress is work-related, this will give them the chance to help and prevent the situation getting worse. Even if it isn't work-related, they may be able to do something to reduce some of your pressure. If the source of pressure is your line manager, find out what procedures are in place to deal with this.

If there aren't any, talk to your trade union representative or employee representative who can provide advice on a range of work-related topics.

Alternatively, you can speak to your HR department or Employee Assistance Programme/counselling service if either exists. Many employees are reluctant to talk about stress at work, due to the stigma attached to it. They fear they will be seen as weak. But stress is not a weakness, and can happen to anyone.

***Remember: no employer should subject their employees to work-related stress, and this is an issue both you and your employer should take seriously.***

## Physical and Verbal Abuse

Your employer has a legal duty under the Health and Safety at Work etc. Act 1974 to provide a safe place of work for staff. This includes protection from violence and the risk of violence.

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This obligation is known as a 'duty of care'. It does not mean that the employer should guarantee your safety but rather that they should take all reasonable steps to protect you from reasonably foreseeable risks.

Conflicts can occur in any working environment and in a healthcare setting there are a vast number of factors that can provoke a challenging situation. All staff have the right to feel safe whilst working. It is therefore vital that all staff have an understanding of how to manage a conflict situation. It is preferable to prevent a situation from arising but if a conflict does occur then the priority becomes one of safety.

### Physical assault is defined as:

The intentional application of force against the person without lawful justification resulting in physical injury or personal discomfort. Spitting is included in the definition of a physical assault.

### Non-physical assault is defined as:

The use of inappropriate words or behaviour causing distress and/or constituting harassment.

### Non-physical assault includes:

- Offensive or obscene language
- Verbal abuse and swearing
- Brandishing weapons, or objects which could be used as weapons
- Attempted assaults
- Offensive gestures
- Threats
- Intimidation
- Harassment or stalking
- Damage to buildings, equipment or vehicles which causes fear for personal safety
- Offensive language or behaviour related to a person's, race, gender, nationality, religion, disability, age or sexual orientation
- Inappropriate sexual language or behaviour.

### De-Escalating Conflict

If a conflict does arise your aim will be to de-escalate it as soon as possible. Below are two de-escalation models that you could use. Before deciding on any approach there are some factors you will need to consider as every situation is different and your safety is paramount.

Before deciding on how you react to the situation you will need to assess the following:

- **Policies and Procedures**, are you aware the guidelines for dealing with conflicts in your workplace?
- **Patterns of Behaviour**, is the person likely to physically attack you?
- **The patient**, do they have a medical or mental health issue that needs to be considered? Are they on medication?
- **Communication**, could you use a communication model? Will there be any communication difficulties?
- **Other people**, are there other people in the area? Do you need to consider their safety?
- **The environment**, where are the exits? Is there is an audience? If so can you remove them as a person is much less likely to back down in front of other people?
- **Staffing**, what staff do you have around you? Are you on your own?
- **Security**, can you raise the alarm and get further help if necessary?
- **Moving**, if you move to a different room allow the person to go into the room first and you to follow. This will ensure that you are the one closest to the exit.

### R.E.L.A.T.E

A structured approach to de-escalating conflict.

**Step 1:** Resist reacting and stay calm

**Step 2:** Establish a structure for the conversation

**Step 3:** Listen and ask questions

**Step 4:** Acknowledge the key facts and feelings

**Step 5:** Tell the person what you have heard them say

**Step 6:** Explain your position/point of view.

### De-Escalating conflict - F.L.A.G.

The **FLAG** model is an approach to handling single issue conflict situations. Sometimes staff can get involved in a conflict situation when there are limited opportunities to investigate why the customer is angry (e.g. customer complaining that the car park is full).

#### F - Face the person.

By stopping what you are doing and facing the customer you are indicating that they have your full attention and you are not ignoring them.

**L - Listen** to the person and ask a question if appropriate. Be willing to listen to the customer and ask a question if appropriate in the situation. Again by asking questions you are demonstrating that you are interested in what they are saying.

**A - Acknowledge** that you have heard and understood their complaint. Acknowledge or repeat what you have heard - "Yes, parking outside is a nightmare today", "I understand you are really upset about...", "I can hear this is very important to you...", "Watching your Dad being lifted like that can be distressing".

## G - Give an explanation

Sometimes an explanation is needed and sometimes it is not. If a person is just trying to tell you they are unhappy then giving lots of reasons why something has happened can sound like an excuse (particularly if they already know why it has happened which is often the case).

# Conflict Situation and Challenging Behaviour

If you are dealing with a conflict situation and the person starts demonstrating challenging behaviour the priority becomes your safety and the safety of others rather than resolving the conflict.

Consider the following:

- **Managing Distance** – when a person become angry their personal space increases. For your own safety you can also increase the distance between you and the person. This makes it harder for the person to hit you. If you thought the person was going to throw something at you retreat to another room.
- **Exits** – make sure you know where your exits are. Preferably have your exit behind you so you can continue to face the person as you are backing out of the exit. Never let them get between you and your exit.
- **Stand up** - do not sit down if the other person is standing as it will put them at a physical advantage.
- **Raise the Alarm** – alert your colleagues or security for help, call 999

## Personal Safety

**The Health and Safety Executive (HSE) define violence as:**

*"Any incident, in which a member of staff on duty is verbally abused, threatened or assaulted by a patient or member of the public, or another member of staff."*

Violence and aggression incidents include verbal or non-verbal abuse (e.g. stalking), threatening behaviour (even if no physical injury results) and physical attack. The following information will help you identify and evaluate your personal safety and suggests controls that could be adopted in order to reduce any risk to you.

### Assessing the risks to personal safety

All NHS Trusts will ensure that they have a suitable system in place to be able to assess any risks to personal safety by following the simple process of:

1. Identifying any potential violent or aggressive situation/hazards
2. Identifying those whose situation might place them at risk
3. Evaluating the level of risk and reviewing existing control measures
4. Recording any significant findings from risk assessments undertaken
5. Taking any appropriate action to suitably manage the risk

## 6. Reviewing the assessment and situation as necessary

# Working in Isolation

Lone working in buildings should be avoided, wherever possible. However, some staff may find they have to work in isolated buildings with few or no other staff immediately on hand. In such circumstances it is recommended that the following precautions be taken:

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- Ensure that another professional is present when treating patients who it is known may present a risk and ensure that a plan of action is discussed for dealing with any incidents of violence or aggression
- Where a member of staff is working alone but other colleagues are in the building, ensure that prior arrangements have been made to summon assistance
- Remember, problems do not just occur after dark, and proper measures should be introduced to protect staff working alone in isolated areas during day time hours
- Make full use of any security measures provided, i.e. lock access doors behind you, where appropriate

### Advice on travelling alone - By Car

- Keep your car regularly maintained and serviced (if possible, join a breakdown organisation)
- Carry out basic vehicle checks
- Carry a torch, loose change/phone card and useful telephone numbers
- Vary your routine occasionally if you have a regular routine and avoid areas of heavy traffic congestion
- Lock all doors whilst travelling
- Conceal any valuables, e.g. purses, mobile telephones
- Remove any items which identify your sex or profession
- Don't get boxed in whilst driving or stopped in traffic
- Do not pull up directly alongside a vehicle if you feel the driver/occupants are pestering you and  
AVOID EYE CONTACT

### On Foot

- Choose busy, well-lit routes; avoid dark deserted roads, alleyways, waste ground
- Walk in the middle or carriage-way side of the pavement
- Consider crossing the road, rather than using subways
- If need be, try to "tag on" to other people, preferably couples going your way
- Walk facing the traffic. If this is not possible and a car pulls up, turn around and walk in the opposite direction
- Walk deliberately and assertively
- Do not look at maps/A-Z in full view of the public
- Carry your keys, money and means of identification on your person



- GET AWAY. Walking fast is usually safer than trying to run. If you think someone is following you, check by crossing and re-crossing the street. If they persist, move quickly to the nearest place with people and call the police
- If a vehicle stops next to you and you are threatened, turn and move quickly in the opposite direction. You can turn faster than a car. Make for the nearest public place and phone the police

### Parking

- Choose somewhere well lit, with plenty of people and public buildings around
- Visualise what your parking space may look like if you have to return in the dark
- Try to avoid multi-storey car parks (if this is impossible try to park near to the attendant, or near to entrance/exit)
- Always reverse into a parking space (the doors will act as a barrier, and it's quicker for driving away)
- Have a good look around before you get out of your car
- If possible retract your aerial, engage your steering lock
- Conceal any items of clothing or bags, put all valuables in the boot, wind up all windows, secure sun roof, lock all doors, even if for a few seconds, e.g. on a garage forecourt
- Consider carrying a torch and personal alarm
- Have your keys ready on returning to your car
- On approach to your car, check for any persons loitering about your vehicle
- Do not leave bags on the roof or bonnet whilst you open your car door
- Look for any signs of tampering before you get in and check there is no one inside

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