

St Padarn's Institute Health and Safety Policy



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ST PADARN'S INSTITUTE

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The St Padarn's Institute is part of the Representative Body of the Church in Wales, and as such comes under its policies. The Church in Wales operates under one Health and Safety Policy, which follows:

The Representative Body of the Church in Wales

Health and Safety – Our Policy and Our Commitment to Keeping People Safe

The Representative Body believes that the effective management of the health, safety and welfare of its staff, and all other users of its services, is a key organisational priority. Ensuring the health, safety and welfare of its people is a moral, legal and financial imperative for the organisation.

Moral: the ministry of Jesus Christ is hallmarked by His care for others and we too want our people to be safe and their lives to be enhanced by their work.

Legal: we are committed to meeting our legal obligations as a responsible registered Charity

Financial: A safe workforce and people who access our services contributes to an effective, efficient and financially stable organisation. This is a fundamental part of good stewardship of charitable funds.

Specifically, we will

- Prevent accidents and cases of work-related ill health by managing the health and safety risks in the workplace
- Provide clear instructions and information, and adequate training, to ensure employees are competent to do their work
- Engage and consult with employees on day-to-day health and safety conditions
- Implement emergency procedures – evacuation in case of fire or other significant incident.
- Maintain safe and healthy working conditions, provide and maintain plant, equipment and machinery, and ensure safe storage/use of substances

Above all, we are committed to 'Keeping People Safe'.

We will implement this policy through our Health and Safety Management System set out below.

Our Health and Safety Management System

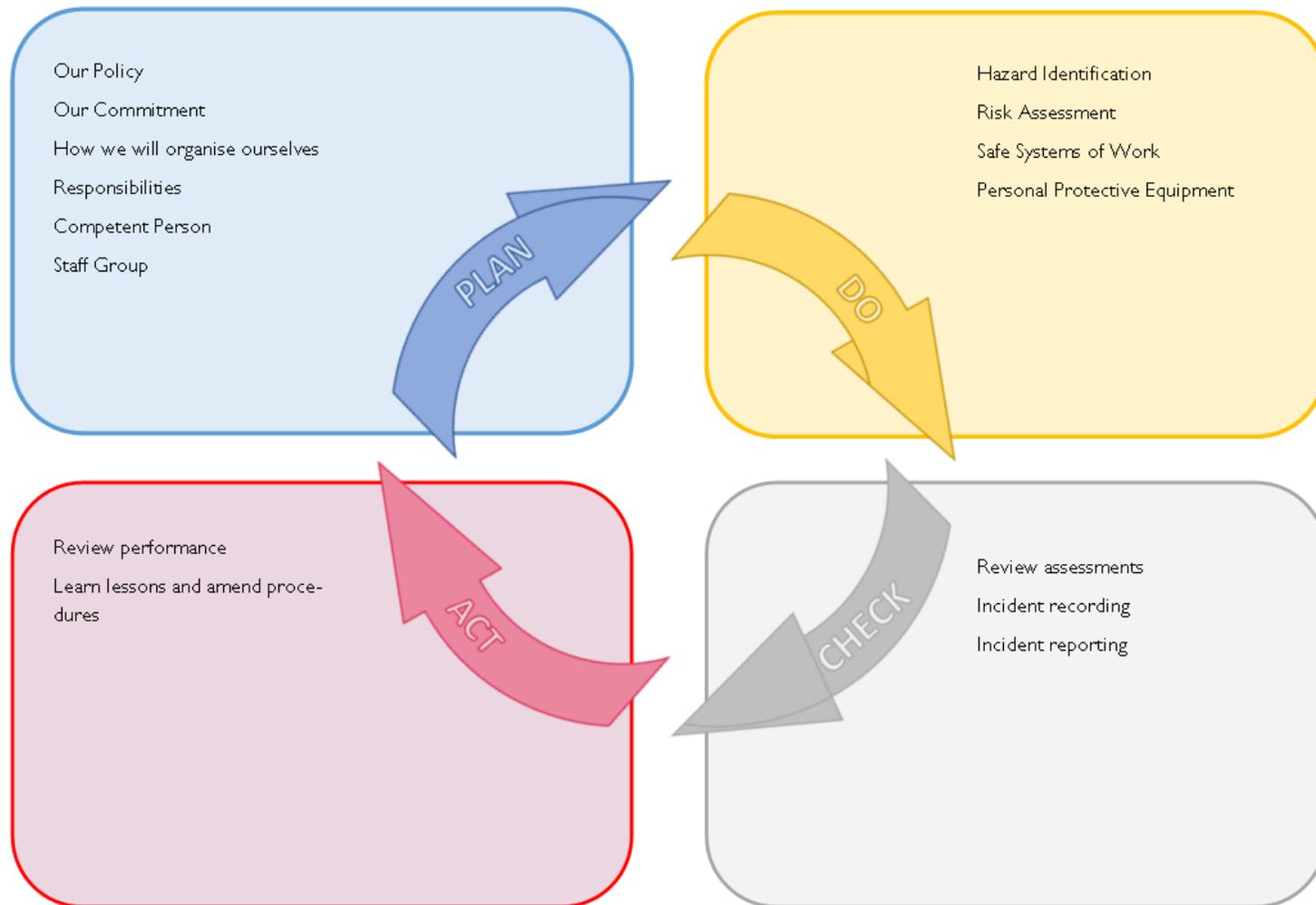
1. Principles

Our management of health and safety will be based on three key principles:

- a. Strong and active leadership from the top
 - Trustees will approve and monitor this management system
 - Senior Staff will be accountable for the proper administration of this management system
 - Downward communication, linked to resourcing of training will be a hallmark of our system
- b. Staff Involvement
 - This management system will be explained and promoted to staff and we will seek to regularly engage with staff on it
 - There will be clear mechanisms for staff to communicate up through the organisation
 - High quality training will be a central pillar of the system
- c. Assessment and Review
 - the core of our management system will be the identification of hazards, assessment of risks and the appropriate management of them
 - competent advice will be sought and followed (internal and external)
 - we will monitor, report and review performance

2. Overall Approach

Our health and safety management will be organised through the: PLAN DO CHECK ACT cycle. The following diagram explains this cycle and the core elements of our system based on this cycle.



PLAN DO CHECK ACT

Section I: PLAN

I.1 Structure and Organisation

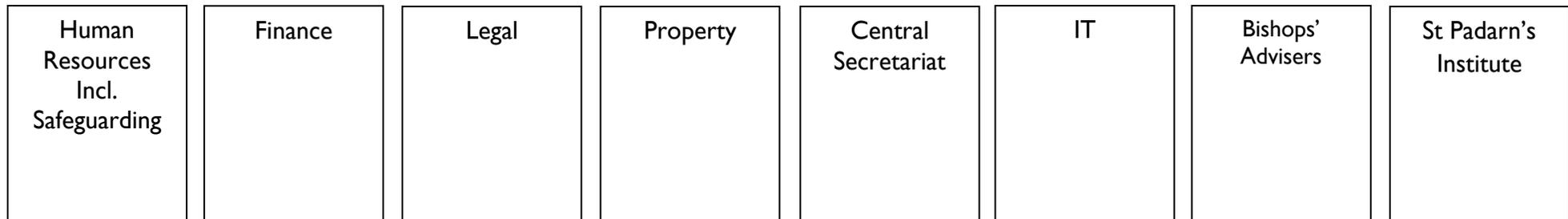
A summary of the Representative Body's organisational structure is set out below:

THE REPRESENTATIVE BODY

*The trustee body with overall responsibility for the organisation.
It sets strategy and budgets and is the employer of staff to manage
its activities.*

Provincial Secretary

*(the organisation's chief executive officer who oversees various
departments each with a departmental head)*



The Provincial Secretary, with the Heads of Department, form the Senior Staff team of the organisation.

The activities of the organisation are conducted on two principal sites: offices at 4th Floor 2 Callaghan Square, Cardiff CF10 5BT and St Padarn's Institute 54 Cardiff Rd, Llandaff Cardiff CF5 2YJ.

The Representative Body is owner of most of the property assets of the Church in Wales. The majority are managed, day-to-day, by local Church Councils or Diocesan Boards of Finance (all separate legal entities linked by the Constitution of the Church in Wales). As such some RB staff are required to visit locations across Wales (sometime alone) and some staff are permitted to work from home.

The RB employs six staff each based in a Diocesan office to organise the repair of clergy housing. Whilst these staff are office based within offices managed by separate organisations, the RB will ensure these staff are covered by the management system.

In addition, the Representative Body employs secretaries for each of the six diocesan Bishops based in offices attached to each of the Bishop's residences.

1.2 Staffing and Organisation of Health and Safety Management

The Trustees delegate responsibility for Health and Safety to the Provincial Secretary who shall be accountable to them for the performance of the organisation on this matter.

The Senior Staff team will actively support the Provincial Secretary to ensure each department complies with and achieves this management system.

One member of the Senior Staff Team will act as Health and Safety Manager and be the competent person for the organisation. They will be trained to at least IOSH Managing Safely Certificate level. (Alex Glanville, Head of Property Services as at February 2019)

A Health and Safety Staff Group shall be formed to advise the Senior Staff team on these matters. This Group will consist of up to 2 members of each department nominate by each Head of Department. The Health and Safety Manager will convene and chair the group's meetings. The group shall meet as necessary but, at least, four times each year. Each meeting will be minuted and the reports submitted to the Senior Staff team. As far as possible, each member of the Group shall undertake IOSH training (either Managing Safely or Working Safely).

All staff will be made aware of the members of the Health and Safety Staff Group by the names being clearly displayed on staff notice boards and the Intranet. It will be made clear, through contracts and job descriptions that all staff have a shared responsibility for the health, safety and welfare of themselves, colleagues and those who use our services. Health and Safety updates will feature at regular all staff meetings.

The systematic identification of hazards and careful risk assessments will be at the heart of our Health and Safety Management System combined with processes to monitor and review.

Section 2: DO

2.1 Work Areas

In considering hazards and appropriate risk assessments, we will review our activities by work area. The main work areas for our activities are:

- Office-based activities
- Lone workers (including site visits)
- Property Maintenance
- Grounds Maintenance
- Catering activities
- IT installation and management

2.2 Hazard Identification

We will identify hazards reasonably likely to cause harm within our areas of work using the following headings to help us:

- i. Mechanical: created by the operation of powered apparatus or tools.
- ii. Physical: created by physical things or spaces
- iii. Chemical: chemicals whose properties can cause harm
- iv. Biological: organic substances or organisms that pose a threat
- v. Environmental: created by overall conditions in the work place
- vi. Organisational: associated with behaviour, time constraints, workload or culture

2.3 Risk Assessment

For each identified hazard, we will conduct a written risk assessment using the Form at Appendix I. Risk Assessment will be assigned to each relevant department by the Health and Safety manager, with duplication avoided where possible, and completed by that department. At least one member of each department will be IOSH trained. The completed risk assessments will be reviewed by the Health and Safety Staff group and approved by the Senior Staff team. Each Risk Assessment will be stored physically on the relevant site and on the organisation intranet. The Health and Safety Manager shall maintain a diary of review dates from each Risk Assessment so that the Staff group can check that reviews are being undertaken. Each risk assessment must be dated, signed and have a clear date for next review.

Risk Assessment may take the form prescribed by other regulations and processes for specific types of risk including Fire Risk Assessment, COSHH (Control of Substances Hazardous to Health), Display Screen Equipment Regulations.

Risk Assessments will prescribe actions to manage each hazard. These actions will be devised according to the following hierarchy:

- i. Remove the hazard altogether
- ii. Reduce the hazard
- iii. Protect people from the hazard
- iv. Institute Safe Systems of Work
- v. Provide PPE

Risk Assessments may identify Safe Systems of Work for particular hazards (otherwise known as Procedures). These will be written by the relevant department (using expert advice as necessary). Safe Systems of Work will be held physically in the relevant workplace and be available via the Intranet.

Risk Assessments may identify the need to wear Personal Protective Equipment (PPE). This will be provided as necessary to comply with the relevant risk assessment for the staff member concerned.

Section 3: CHECK

3.1 Recording Incidents

The Representative Body will actively seek to investigate incidents. An incident includes accidents (incidents that caused injury) as well as near misses (incidents where an injury could have resulted).

3.2 Accidents

We will record and report accidents in accordance with statutory requirements. An Accident Book will be maintained at our principle sites and serious accidents and ill health at work will be reported under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) <http://www.hse.gov.uk/riddor>.

When an accident occurs, we will adopt the following procedure:

- i. We shall make sure the injured person is looked after
- ii. We will preserve the scene of the incident
- iii. We will report the incident to relevant managers (with statutory reporting as necessary)
- iv. We will form an incident investigation team of relevant people
- v. The team will conduct a structured approach to the investigation by

- a. Gathering information
- b. Analysing information
- c. Reviewing risk control measures
- d. Planning appropriate action
- e. Sharing and communicating to staff and others
- vi. Deal with external bodies including enforcement authorities, trustees, media and residents

Incidents will be recorded on the form at Appendix 2 and investigated using the form at Appendix 3. These forms will be analysed and reported to Senior Staff and Trustees. This analysis will enable decisions to be taken to improve safety.

3.2 Near Misses

Staff must report any near miss incidents to their manager or a Head of Department and completed the form at Appendix 4. The Health and Safety Manager shall be informed and shall conduct an investigation following the procedure for accidents but focussing on the structured approach under v. above.

All near miss incidents shall be recorded, analysed and reported to Senior Staff and the Health and Safety Staff Group.

3.2 Trends

Analysis of incidents will identify trends and weaknesses in systems of control.

Staff sickness records will be analysed to identify common issues or trends.

Section 4: ACT

Performance on ensuring the health, safety and welfare of staff and those who access our services will be reviewed regularly to ensure a process of continual improvement. This review will be conducted, at least annually, by the Senior Staff team and reported to trustees.

This review will consist of measuring:

- i. Success in conducting risk assessments across all identified hazards and workplaces
- ii. Success in reviewing risk assessments in accordance with the identified timescales
- iii. Success in investigating incidents and implementing follow up recommendations

iv. Feedback from staff

This review will be used to make changes to the Health and Management System as necessary.

Appendix I: Representative Body of the Church in Wales - Risk Assessment Proforma

Name of Assessor:	Date:	Time:
Work Area:		

What are the hazards?	Who might be harmed and how? (Colour-coded as below)	What are we already doing to manage the risks?	What else we will do to manage this risk?	Action by whom?	Action by when?	Done
	High Risk of Harm					
	Medium Risk of Harm					
	Low Risk of Harm					

Review Date:	Signature:
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Appendix 2: Incident Report

Representative Body of the Church in Wales - Incident Report

Date and Time of Event:	Location:
Reported by:	Position:

Type of Event:	Injury / Ill Health / Other (please specify) <i>(delete as appropriate)</i>
Harm or potential for harm:	Fatal or major / Serious / Minor / Damage to property only <i>(delete as appropriate)</i>
Employee involved in incident	<i>Name, Address, Position, Contact details</i>
Brief Description of Event:	<i>Details of what happened, when, where, and emergency action takes</i>
Details of witnesses:	<i>Name, position, contact details</i>
Investigation required:	Yes / No <i>If yes, then complete Incident Investigation Report</i>
Investigation level:	High / Medium / Low / Minimal
Leader of Investigation:	
Reportable:	Yes / No <i>If yes, Date/time reported:</i>
Entry in Accident Book:	<i>Date and time entered:</i>
Date:	
Signature:	

Appendix 3: Representative Body of the Church in Wales - Incident Investigation Report

Date and Time of Incident	Location of Incident	
Event Details	Employee(s) involved: Injuries or health effects, if any:	
Investigations Details:	<i>Include:</i> <i>Overview of the event</i> <i>Activities being performed</i> <i>Equipment used</i> <i>Working conditions</i> <i>Safety of working procedures</i> <i>Maintenance</i> <i>Competence of people involved</i> <i>Workplace layout</i> <i>Safety equipment used</i> <i>Any other conditions which may have influenced the event</i>	
Causes of the Event:		
Immediate <i>Unsafe action or lack of action or unsafe conditions</i>	Underlying <i>Factors that allowed it to happen e.g lack of supervision or training</i>	Root <i>From which the whole thing springs e.g poor management, culture, lack of investment</i>
Risk Control Measures to be implemented to prevent recurrence:		
Risk Control	By When?	By Whom?

Risk Assessments to be reviewed:		
Details of Assessment	By When?	By Whom?
Further details/information:		
Members of Investigation Team:	Name:	Position:
Signed by:	Name:	Position:
Date:		
Report Accepted by:	Name:	Position
Date:		
Wider Communication of Findings to:		

Appendix 4: Representative Body of the Church in Wales – Near Miss Report

If you have experienced or witnessed a ‘near miss’ incident, please provide full information below and return this form to your manager:

Person(s) involved in the near-miss incident.	Name:	
	Role:	
	Contact number:	
Date & time of the near-miss incident.	Date	Time
Location of the near-miss incident.		
Brief description of what happened.		
Incident reported to/date	Name	Date
Do you have any suggestions for improvements to the way we do things?		
For office use only Action taken, by whom and date		