



# PEMBROKE COLLEGE CAMBRIDGE

## HEALTH AND SAFETY POLICY AND PROCEDURES



**PEMBROKE COLLEGE  
HEALTH AND SAFETY POLICY**

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## ABOUT PEMBROKE COLLEGE – HISTORY OF THE COLLEGE

Pembroke College was founded by Marie de St Pol, daughter of Guy de Châtillon and widow of Aymer de Valence, Earl of Pembroke. Pembroke is the third oldest Cambridge College still in existence, after Peterhouse and Clare. Marie was granted her licence for the foundation by Edward III on Christmas Eve 1347.

The College originally housed up to thirty scholars, and the original buildings – chapel, hall, kitchen, buttery, Master's lodgings and students' rooms – were arranged in a single court (now First Court). All the scholars were male and unmarried and would have been priests. The original statutes also provided for four staff – a manciple, cook, barber and laundress – to look after the needs of this small community.

Marie was closely involved with College affairs in the thirty years up to her death in 1377. She seems to have been something of a disciplinarian: the original Foundation documents had strict penalties for drunkenness and lechery, required that all students' debts were settled within two weeks of the end of term, and gave strict limits on numbers at graduation parties.

Founded on part of its current site, it took over 500 years to accumulate all the land of which it is now comprised. Over succeeding centuries, the College buildings spread out from that first court along Pembroke and Trumpington Streets. One of the earliest major changes to the look of the College came in the turbulent years of the mid-seventeenth century. Matthew Wren, Bishop of Ely, was imprisoned for eighteen years for his support of the King during the Civil War. While languishing in the Tower of London, he vowed that if he was ever freed he would build a new chapel for the College. He kept his promise after his release in 1659, and approached his nephew, then known mainly for his mathematical skills, to build the chapel. Pembroke has gloried ever since in possessing the first building designed by Christopher Wren.

Ivy Court was built during the seventeenth century, but it was not until the end of the nineteenth century that Pembroke started to look much like it does today. A major expansion in student numbers at this time brought about a major building programme – a new hall, replacing the small medieval hall, Master's Lodge (N staircase), residential block (Red Buildings) and a new library, all designed by the fashionable architect Alfred Waterhouse. These were followed slightly later by New Court and the Pitt Building. At the same time, Pembroke undergraduates established a mission in South London, at Walworth: this survives today as Pembroke House, one of the few College missions still in existence.

In its early years, Pembroke had a strong reputation for theology: the College produced twenty-two Bishops in 300 years. One of the most famous of these men was Nicholas Ridley, Master during the dangerous times of the Reformation. Ridley's involvement in Protestant politics led first to his imprisonment by Queen Mary and then burning at the stake in Oxford in 1556. His portrait hangs today next to the fireplace in Hall.

In more recent centuries, the College has produced famous scholars in all disciplines. Notable alumni include the physicist George Gabriel Stokes, Nobel Laureates Sir John Sulston and Rodney Porter, ophthalmologist Sir Harold Ridley, audio technology pioneer Ray Dolby, the poets Edmund Spenser, Thomas Gray and Ted Hughes, writers Tom Sharpe, Clive James and Robert Macfarlane; politicians William Pitt the Younger, Rab Butler, Lord Smith of Finsbury and Jo Cox; musicians Sir Arthur Bliss and Emma Johnson; and entertainers Peter Cook, Tim Brooke-Taylor, Bill Oddie, Eric Idle, Tom Hiddleston and Naomie Harris. It also has a strong sporting reputation and has nurtured many outstanding sportsmen and women including an England cricket captain, Peter May, an England rugby captain Wavell Wakefield, a two-times Wimbledon finalist, H. W. "Bunny" Austin, and most recently an Olympic silver medalist, Cath Bishop.

By the early twentieth century Pembroke had taken on much of its current physical form. Student numbers had continued to grow, particularly the numbers of graduate students, thus contributing to the reputation of the University of Cambridge as one of the finest research universities in the world. Another significant change was the admittance for the first time of women undergraduates in 1984. The growth in numbers led to the building in 1997 of Foundress Court, adding 92 student rooms, allowing the College to house for the first time in many years most Junior Members on site; and to the renovation and extension of the Library, which was completed in 2002.

In 2017 Pembroke announced its intention to purchase and redevelop land owned by the University, directly across the road from the College. Thanks to a very generous gift of £35 million from Ray Dolby and his family, Pembroke will be able to build Ray and Dagmar Dolby court, which will house 90 students. The Mill Lane Project also includes plans for a new café bar, student facilities, partnership facilities, an art gallery and a second Porters' Lodge. The recent purchase of Emmanuel United Reformed Church, adjacent to this site, will finally provide the College with an auditorium (220 seats), which can support large lectures and musical performances. In February 2019 the College completed the first phase of the project, with the relocation of three departments and the Master's Office across the road into a refurbished 74 Trumpington Street. Planning permission for the project was granted in June 2019. The total cost of the project is estimated at around £75 million. Money for this project, as well as a further £15 million for student support and student activities, is being raised under the banner of the £90 million *The Time and The Place* Campaign. The estimated completion of the project is 2024.

Today the College comprises approximately 442 undergraduates, 260 graduate students, 84 Fellows, and around 220 staff. This number is supplemented as necessary at various times of the year by temporary staff. Pembroke contributes to teaching and research across all subjects in the University, and is currently performing very strongly academically. It has a reputation as a friendly college, in which Fellows, students and staff work together to create an environment in which people can excel. The College has also developed extensive development, conference and international study programmes in recent years, which have added much to the financial security of the College and enabled it to undertake many recent initiatives. Surely Marie de St Pol would not recognise the place today – but hopefully she would be pleasantly surprised about the size, scale and character of the College that she founded over 660 years ago.

COLLEGE MAP



## OBLIGATIONS OF COLLEGE GOVERNING BODY

The purpose of this Health and Safety Policy is to define the health and safety management system of the College and ensure it complies with the requirements of the Health and Safety at Work Act 1974.

The overriding aim of the College is to protect Fellows, students, employees and non-employees from the risk of injury or ill health arising from our workplace activities. The objectives are to:

- Provide a framework for the effective management of health and safety at work.
- Detail the College’s position with respect to the health and safety of everyone who may be affected by our work activities.
- Detail the procedures for ensuring that the policy objectives are met.
- Provide the means for monitoring the effectiveness of health and safety at the College.

Breaches of health and safety legislation, including any failure to implement a ‘risk management strategy’, are criminal offences and command unlimited sentences at Crown Court and/or unlimited fines.

In the context of a College, the policy itself and the means of implementing it should be adopted at the highest level within that organisation: the Governing Body. Implementation should encompass all employees i.e. non-academic employees, academic employees including Fellows, whether members of the Governing Body or not. College Officers may be responsible for implementation of defined requirements, but overall responsibility for Health and Safety cannot be delegated. Whatever arrangements are made for delegating implementation, it is the Governing Body that will be answerable in the case of proceedings.

The most effective way to achieve compliance is through what has come to be known as a risk management strategy. Compliance could be achieved by Governing Body oversight of relevant College Officers and/or by the appointment of a competent external person (i.e. a Health and Safety auditor) providing a report not less frequently than annually.

Governing Bodies need to be able to demonstrate that health and safety is being managed effectively. This is a specific requirement of the Management of Health and Safety Regulations 1999. These regulations require Governing Bodies (as employers, but in respect of Fellows, students, employees, visitors, contractors and members of the public) to:

- Carry out a written risk assessment procedure.
- Put in place preventative and protective measures.
- Have arrangements for the ‘effective planning, organisation, control, monitoring and review of the protective and preventative measures’.

Below are the Regulations and Acts:

The Health & Safety at Work Act 1974	The Road Traffic Act 1991
The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995	The Corporate Manslaughter and Homicide Act 2007
The Management of Health and Safety at Work Regulations 1999	The Misuse of Drugs Act 1971
The Management of Health and Safety First Aid Regulations 1981	The Health and Safety (Miscellaneous Revocations and Amendments) Regulations 2013
The Regulatory Reform (First Safety) Order 2005	The Noise at Work Regulations 1989
The Provision and Use of Work Equipment Regulations 1998	The Health Act 2006
The Manual Handling Operations Regulations 1992	The Smoke Free (Premises and Enforcement) Regulations 2006
The Control of Substances Hazardous to Health Regulations 2002 (COSHH)	The Protection from Harassment Act 1997
The Confined Spaces Regulations 1997	The Equality Act 2010
The Workplace Health, Safety and Welfare Regulations 1992	The Employment Rights Act 1996
The Health and Safety Display Screen Equipment Regulations 2002	The Work at Height Regulations 2005
The Control of Noise at Work Regulations 2005	The Control of Asbestos Regulations 2006
The Personal Protective Equipment at Work Regulations 1992	The Control of Vibration at Work Regulations 2005
The Drug Driving (Specified Limits) (England and Wales) Regulations 2014	The Safety Representatives and Safety Committee Regulations 1977
The Smoke Free (Private Vehicle) Regulations 2015	The Furniture and Furnishings (Fire) Safety Regulations 1988/1989
The Road Transport (Working Time) Regulations 2005	The Fire Precautions (Workplace) Regulations 1997
The Working Time Regulations 1998	The Construction (Design and Management) Regulations 2015
The Data Protection Act 1998/General Data Protection Regulation	The Control of Lead at Work Regulations 2001 (CLAW)

**Where a Regulation or Act of Law is stated, it is deemed to include any subsequent updates or amendments**

## LIBRARY – ONLINE GUIDANCE

Below are hyperlinks to the Primary Guidance or Primary Legislation which form the basis for this policy.

Guidance/Legislation	Hyperlinks
The Health & Safety at Work Act 1974	<a href="http://www.hse.gov.uk/legislation/hswa.htm">http://www.hse.gov.uk/legislation/hswa.htm</a>
The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013	<a href="http://www.hse.gov.uk/riddor/">http://www.hse.gov.uk/riddor/</a>
The Management of Health and Safety at Work Regulations 1999	<a href="http://www.hse.gov.uk/pubns/hsc13.pdf">http://www.hse.gov.uk/pubns/hsc13.pdf</a>
The Health and Safety First Aid Regulations 1981	<a href="http://www.hse.gov.uk/firstaid/legislation.htm">http://www.hse.gov.uk/firstaid/legislation.htm</a>
The Regulatory Reform (Fire Safety) Order 2005	<a href="http://www.legislation.gov.uk/ukxi/2005/1541/pdfs/ukxi_20051541_en.pdf">http://www.legislation.gov.uk/ukxi/2005/1541/pdfs/ukxi_20051541_en.pdf</a>
The Provision and Use of Work Equipment Regulations 1998	<a href="http://www.hse.gov.uk/pubns/indg291.pdf">http://www.hse.gov.uk/pubns/indg291.pdf</a>
The Manual Handling Operations Regulations 1992	<a href="http://www.hse.gov.uk/msd/backpain/employers/mhor.htm">http://www.hse.gov.uk/msd/backpain/employers/mhor.htm</a>
The Control of Substances Hazardous to Health Regulations 2002 (COSHH)	<a href="http://www.hse.gov.uk/nanotechnology/coshh.htm">http://www.hse.gov.uk/nanotechnology/coshh.htm</a>
The Confined Spaces Regulations 1997	<a href="http://www.hse.gov.uk/pubns/indg258.pdf">http://www.hse.gov.uk/pubns/indg258.pdf</a>
The Workplace Health, Safety and Welfare Regulations 1992	<a href="http://www.hse.gov.uk/pubns/indg244.pdf">http://www.hse.gov.uk/pubns/indg244.pdf</a>
The Health and Safety Display Screen Equipment Regulations 2002	<a href="http://www.hse.gov.uk/pubns/indg36.pdf">http://www.hse.gov.uk/pubns/indg36.pdf</a>
The Control of Noise at Work Regulations 2005	<a href="http://www.hse.gov.uk/pubns/indg362.pdf">http://www.hse.gov.uk/pubns/indg362.pdf</a>
The Personal Protective Equipment at Work Regulations 1992	<a href="http://www.hse.gov.uk/pubns/indg174.pdf">http://www.hse.gov.uk/pubns/indg174.pdf</a>
The Drug Driving (Specified Limits) (England and Wales) Regulations 2014	<a href="http://www.legislation.gov.uk/ukxi/2014/2868/made">http://www.legislation.gov.uk/ukxi/2014/2868/made</a>
The Smoke Free (Private Vehicle) Regulations 2015	<a href="http://www.legislation.gov.uk/ukdsi/2015/978011126004/contents">http://www.legislation.gov.uk/ukdsi/2015/978011126004/contents</a>
The Road Transport (Working Time) Regulations 2005	<a href="http://www.legislation.gov.uk/ukxi/2005/639/contents/made">http://www.legislation.gov.uk/ukxi/2005/639/contents/made</a>
The Working Time Regulations 1998	<a href="http://www.hse.gov.uk/contact/faqs/workingtimedirective.htm">http://www.hse.gov.uk/contact/faqs/workingtimedirective.htm</a>
The Data Protection Act 1998/General Data Protection Regulation	<a href="https://www.gov.uk/data-protection/the-data-protection-act">https://www.gov.uk/data-protection/the-data-protection-act</a>
The Road Traffic Act 1991	<a href="http://www.legislation.gov.uk/ukpga/1991/40/contents">http://www.legislation.gov.uk/ukpga/1991/40/contents</a>
The Corporate Manslaughter and Homicide Act 2007	<a href="http://www.legislation.gov.uk/ukpga/2007/19/contents">http://www.legislation.gov.uk/ukpga/2007/19/contents</a>
The Misuse of Drugs Act 1971	<a href="http://www.legislation.gov.uk/ukpga/1971/38/contents">http://www.legislation.gov.uk/ukpga/1971/38/contents</a>
The Health and Safety (Miscellaneous Revocations and Amendments) Regulations 2013	<a href="http://www.legislation.gov.uk/ukxi/2013/1512/contents/made">http://www.legislation.gov.uk/ukxi/2013/1512/contents/made</a>
The Noise at Work Regulations 1989	<a href="http://www.legislation.gov.uk/ukxi/1989/1790/contents/made">http://www.legislation.gov.uk/ukxi/1989/1790/contents/made</a>
The Health Act 2006	<a href="http://www.legislation.gov.uk/ukpga/2006/28/contents">http://www.legislation.gov.uk/ukpga/2006/28/contents</a>
The Smoke Free (Premises and Enforcement) Regulations 2006	<a href="http://www.legislation.gov.uk/ukxi/2006/3368/regulation/2/made">http://www.legislation.gov.uk/ukxi/2006/3368/regulation/2/made</a>
The Protection from Harassment Act 1997	<a href="http://www.legislation.gov.uk/ukpga/1997/40/contents">http://www.legislation.gov.uk/ukpga/1997/40/contents</a>
The Equality Act 2010	<a href="http://www.legislation.gov.uk/ukpga/2010/15/contents">http://www.legislation.gov.uk/ukpga/2010/15/contents</a>
Employment Rights Act 1996	<a href="http://www.legislation.gov.uk/ukpga/1996/18/contents">http://www.legislation.gov.uk/ukpga/1996/18/contents</a>
The Work at Height Regulations 2005	<a href="http://www.hse.gov.uk/pubns/indg401.pdf">http://www.hse.gov.uk/pubns/indg401.pdf</a>
The Control of Asbestos Regulations 2012	<a href="http://www.hse.gov.uk/asbestos/regulations.htm">http://www.hse.gov.uk/asbestos/regulations.htm</a>
The Control of Vibration at Work Regulations 2005	<a href="http://www.hse.gov.uk/vibratlon/hav/regulations.htm">http://www.hse.gov.uk/vibratlon/hav/regulations.htm</a>
The Safety Representatives and Safety Committee Regulations 1977	<a href="http://www.hse.gov.uk/pubns/indg232.pdf">http://www.hse.gov.uk/pubns/indg232.pdf</a>
The Furniture and Furnishings (fire) Safety Regulations 1988/1989	<a href="http://www.firesafe.org.uk/furniture-and-furnishings-fire-safety-regulations-19881989-and-1993/">http://www.firesafe.org.uk/furniture-and-furnishings-fire-safety-regulations-19881989-and-1993/</a>
The Fire Precautions (Workplace) Regulations 1997	<a href="http://www.hse.gov.uk/fireandexplosion/workplace.htm">http://www.hse.gov.uk/fireandexplosion/workplace.htm</a>
The Construction (Design and Management) Regulations 2015	<a href="http://www.hse.gov.uk/construction/cdm/2015/index.htm">http://www.hse.gov.uk/construction/cdm/2015/index.htm</a>
The Control of Lead at Work Regulations 2001 (CLAW)	<a href="http://www.hse.gov.uk/pubns/indg305.pdf">http://www.hse.gov.uk/pubns/indg305.pdf</a>

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## HEALTH AND SAFETY POLICY STATEMENT

The Governing Body regards health and safety matters to be a high priority and an integral part of all its activities including the maintenance of quality and standards.

The Governing Body considers health and safety to be a management responsibility equal to that of any other function. It is, therefore, the policy of the Governing Body to provide and maintain a working and educational environment that is safe and without risks to health, adequate as regards welfare facilities and that ensures that persons not in the College's employment are not exposed to risks that may arise from the College's activities.

The Governing Body is resolved to provide and maintain equipment and systems of work that are safe and will provide such information, training and supervision as is necessary to achieve this aim.

The Governing Body will provide such resources as may be necessary to enable it and its employees or workers to meet their health and safety responsibilities.

In order to implement this policy the commitment of everyone concerned is necessary and it is a condition of employment that all employees or workers will co-operate with the Governing Body by:

- a. Following instructions in the safety rules or notices displayed on College property.
- b. Complying with any code of practice or guidance that may apply to their work or workplace.
- c. Taking reasonable care for the health and safety of themselves and of any other persons who may be affected by their acts or omissions at work.

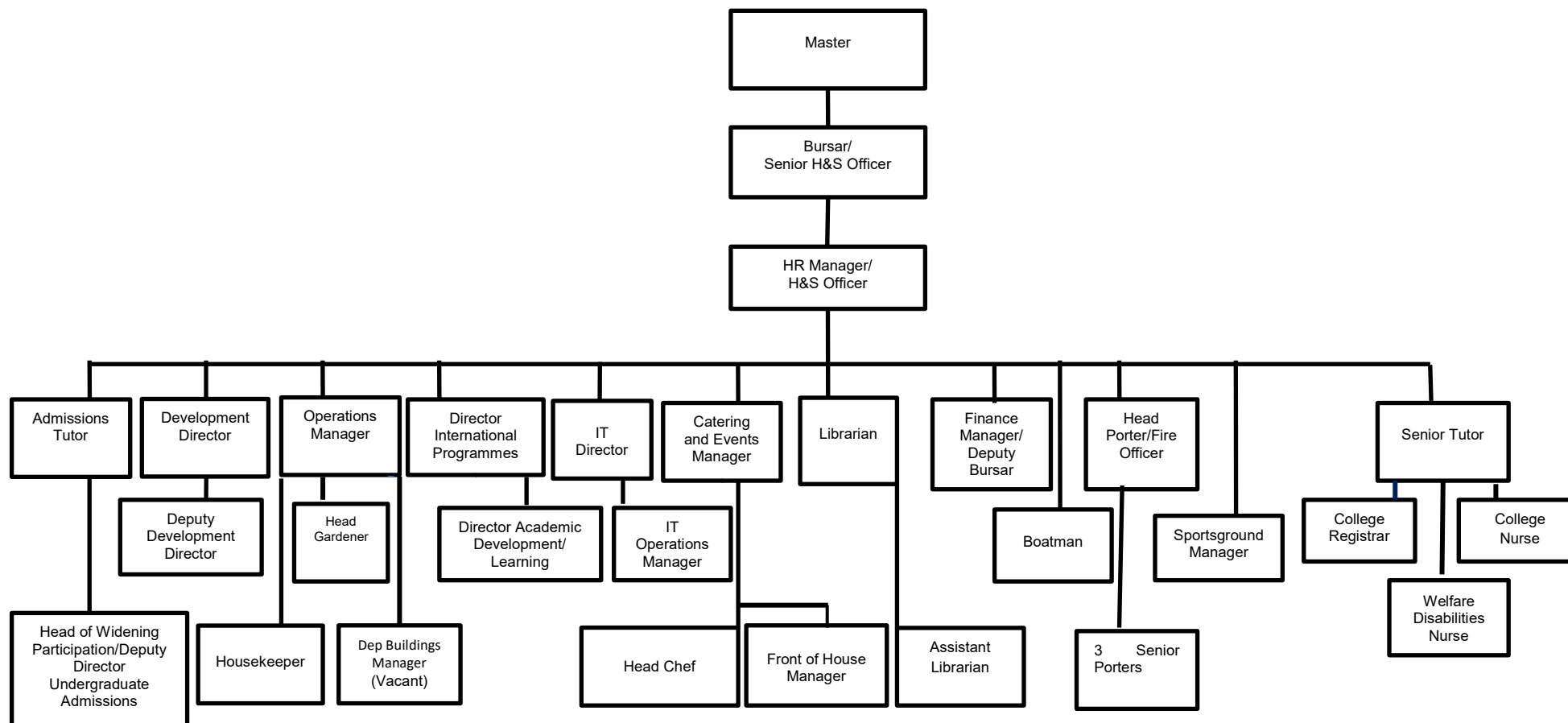
The Governing Body stresses its commitment to health and safety to the extent that, where disregard of safe working practices by an employee or worker seriously puts at risk the health and safety of them or any other person, this will be considered as gross misconduct and will lead to disciplinary action or dismissal.

The Governing Body firmly believes that the success of this policy relies on the full co-operation of all employees or workers. Therefore, we will ensure that it is brought to their notice. It is our intention for the Health and Safety Department to review this policy regularly and amend it as circumstances and legal requirements change.

Signed: ..... Date: .....

Name: ..... Position: .....

## HEALTH AND SAFETY REPORTING STRUCTURE FOR PEMBROKE COLLEGE



This flow chart indicates the Heads of Department at Pembroke College and includes Deputies. It is the reporting structure for Health and Safety.



## AUDITING AND MONITORING OF HEALTH AND SAFETY AT PEMBROKE COLLEGE

### Background

Each department produces relevant Health and Safety Risk Assessments suitable for the work they carry out and the buildings they occupy. The Health and Safety Officer for the College is responsible for ensuring these are checked and updated annually. Assistance is provided as required.

The College employs a competent contractor to carry out Fire Risk Assessment for all College buildings, Hostels, Sportsground and Boathouse.

### Objectives for Monitoring/Auditing

- To ensure that safety standards are followed.
- To ensure that staff develop appropriate levels of competence to carry out Risk Assessments.
- To meet legal requirements.

### Arrangements and Responsibilities

Monitoring of health and safety is completed on the following three levels.

#### Level 1

Monitoring by Heads of Department/or designated person annually.

Produce Risk Assessments, which will be reviewed annually.

Inspection of department using the monitoring checklist.

Completed checklists to be returned to Health and Safety Officer (HR Office).

Health and Safety information may appear on Notice Boards/Intranet/Staff Bulletins.

#### Level 2

Auditing on behalf of Bursar by Health and Safety Officer annually (ad hoc selection of department(s)).

An examination of the management approach to health and safety in selected departments.

Departments to be selected at random, 3-5 per year. This could be increased if there are current concerns.

#### Level 3

An annual audit by an external assessor of the College's Risk Assessment Management procedures.

Topics for review will be selected at random and/or on the basis of any current concerns.

## CHANNELS OF COMMUNICATION AND CONSULTATION

The College will ensure that employees will be provided with information, instruction, training and supervision as appropriate to enable them to work safely. A copy of the Health and Safety Policy statement will be placed in every department throughout the College. Risk Assessments will be held in each department and in the H&S Office. The Health and Safety Policy will also appear on the College Website.

Termly meetings will be held by a Health and Safety Committee which will consist of:

- The Bursar or the Deputy Bursar – Chair of the Committee.
- Health and Safety Officer (HR Manager).
- Representatives from all departments within the College.

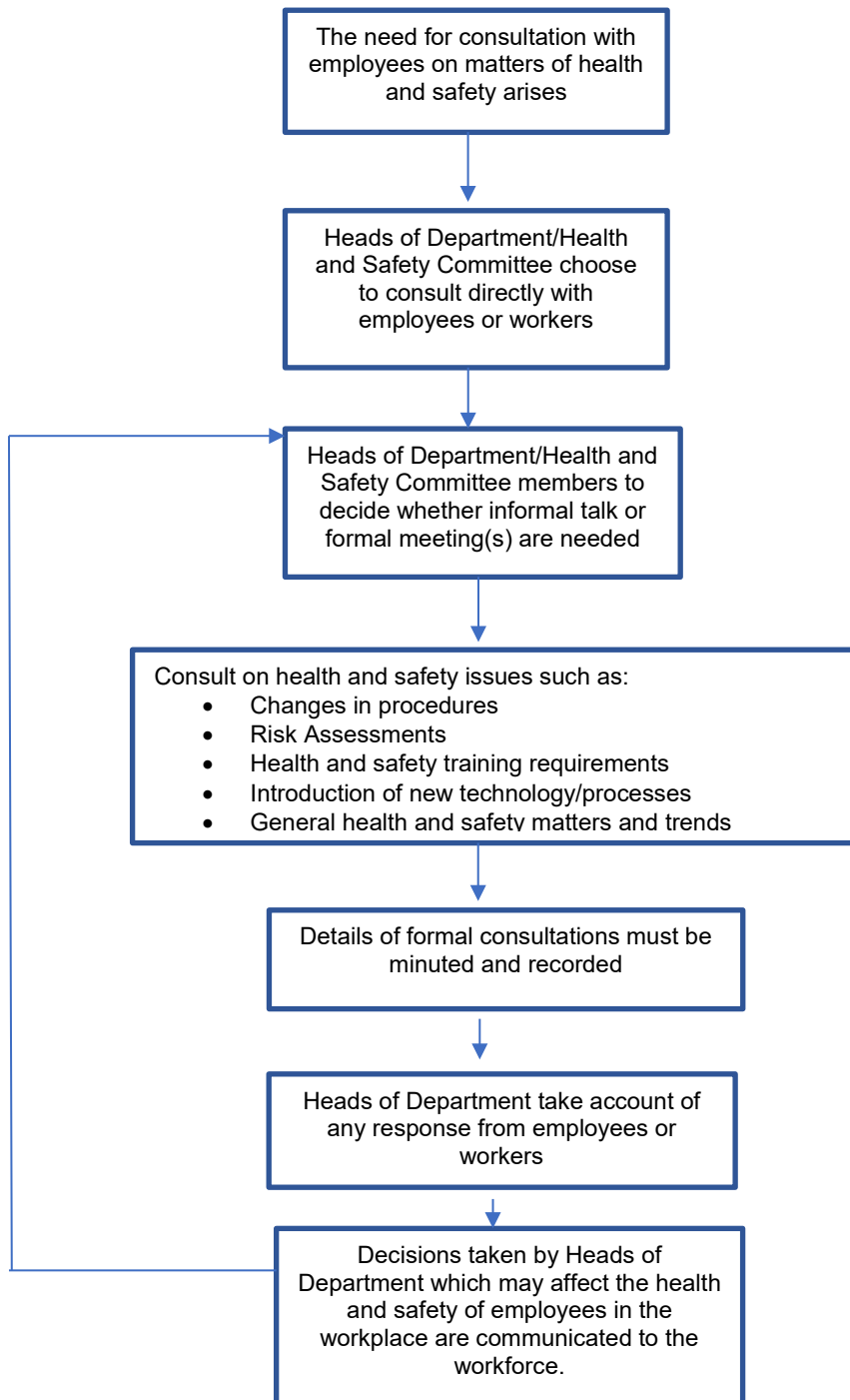
The meetings will be held to discuss health and safety matters that may arise from time to time. Additionally, any relevant information on such matters will be directly communicated to employees via their representative at these meetings. Minutes of all meetings will be produced and placed on the College website. Copies of any minutes can be requested from the Health and Safety Officer.

Employees may also discuss health and safety matters with their Head of Department/Line Manager on an on-going basis. All employees are encouraged to report any health and safety hazards/defects or matters causing concern to the Health and Safety Officer or their Head of Department/Line Manager.

Any relevant information concerning health and safety matters will be brought to the attention of any other persons who may be affected by our work activities, as appropriate.

A review of the Health and Safety Policy will take place regularly.

## CHANNELS OF COMMUNICATION AND CONSULTATION PROCEDURE



## HEALTH AND SAFETY COMMITTEE

### Background

The Health & Safety Committee is an integral part of the College structure; the Bursar, and in his absence the Deputy Bursar is the Chair of the Committee. Departments are encouraged to have a staff representative on the Committee.

### Purpose

The Health & Safety Committee exists:

- To enable formal and informal discussion between staff on the overall impact of current and future health and safety legislation and the College's health and safety practices.
- To enable Fellows and student concerns for health and safety matters to be voiced at the various committee meetings held for them. The Bursar/Deputy Bursar and Committee members will bring any health and safety concerns they have to the Health and Safety Committee.

### Objectives

The Health & Safety Committee has the following objectives:

- To review incidents and near-misses, including any notifiable accident or dangerous occurrence.
- To review the impact of existing and new health and safety legislation.
- To ensure monitoring and reviews/Risk Assessments are carried out.
- To consider comments and complaints directly concerning health, safety, environmental and welfare aspects brought to the meetings by committee members, Fellows, or students.
- To review the effectiveness of health and safety training schemes.
- To ensure best practice in all activities.

### Arrangements

- Meetings of the Health & Safety Committee are arranged at agreed intervals, usually once per term.
- The Health & Safety Committee members have a role to play in improving health and safety attitudes amongst the workforce.
- All members of staff may consult with any member of the Health & Safety Committee on any health and safety issue.
- Individual items of concern should normally only be considered by the Health & Safety Committee when they cannot be satisfactorily resolved between an employee and their Head of Department/Line Manager.

### Membership

The following will be members of the Health and Safety Committee:

- The Bursar/Deputy Bursar.
- The HR Manager/Health & Safety Officer.
- Operations Manager.
- Head Porter.
- Catering and Events Manager, or designated representative.
- Housekeeper, or designated representative.
- Head Gardener.
- College Nurse.
- Departmental representatives.

### Staff/Departmental Representatives

Representatives should take all reasonably practical steps to keep up to date on the following:

- Legal requirements on health and safety at work.
- Specific hazards identified by, and associated with, the College and risk prevention or reduction measures in place.
- The College's Health & Safety Policy and how it is implemented.
- Representatives are expected to encourage co-operation between the College and its staff in the promotion and development of health and safety measures and in monitoring their effectiveness.
- Representatives should bring unsafe or unhealthy practices or conditions to the College's attention.
- Staff Representatives will be given facilities and assistance to carry out their duties, time off with pay during working hours to attend adequate training sessions, meetings and carry out their roles.

### Records

- The minutes of all meetings are circulated to members of the Committee.
- Minutes of every H&S Meeting will be sent to the Buildings Committee.
- Paper copies of minutes are available to any member of staff on request from the HR Manager/H&S Officer.

## ROLES AND RESPONSIBILITIES

The Bursar has overall responsibility for health, safety and welfare on behalf of the Master, Fellows and staff of Pembroke College.

The Health and Safety Officer at Pembroke College reports directly to the Bursar and is responsible for the day-to-day operational activity for health, safety and welfare.

### Duties for the Health and Safety Officer:

- Fellows and staff of the College are advised of all appropriate health, safety and welfare legislation.
- Health and safety standards and procedures for all departments are planned, implemented, maintained and audited.
- Health and safety standards and procedures are reviewed annually and updated where necessary and everyone is informed of such changes.
- Risk Assessments are undertaken to identify hazards and to eliminate, minimise or control the level of risk for activities carried out within the College. The assessments are undertaken by each department with the help and assistance of the Health and Safety Officer as necessary. All assessments must be reviewed regularly. Risk Assessments will also be reviewed annually by the appointed Health and Safety Consultants for Pembroke College.
- Training in all aspects of health and safety necessary for the job is provided for members of staff.
- Accidents and dangerous occurrences are investigated, recorded and reported to the relevant authority, when appropriate and in accordance with the relevant regulations.
- Ensure First Aid facilities are sufficient to meet the needs of Fellows, staff, students and visitors.
- Safety concerns are reported, as appropriate, to the relevant person and Health and Safety Committee.

### Members of the Health and Safety Committee will:

- Ensure that all relevant persons within their department are aware of the Health and Safety Policy.
- Monitor, audit and review health and safety compliance with the policy and report any problems to the committee at the Health and Safety meetings or the Health and Safety Officer.
- Attend the Health and Safety meetings and participate in making decisions concerning all aspects of health, safety and welfare within Pembroke College.

### The College Nurse will:

- Investigate ill health of students/staff and advise as appropriate. With the H&S Officer/Housekeeping/Porters ensure First Aid boxes in hostels are checked and replenished periodically as required.

### The Fire Officer will:

- Ensure the College is compliant with fire legislation.
- Review and update, with the H&S Officer, Operations Manager and departmental representatives Fire Risk Assessments and General Risk Assessments on all College buildings and hostels.
- Ensure that all fire signage in all College buildings meets legislative requirements.
- Prepare any PEEP's necessary in conjunction with individual and ensure the H&S Officer has a copy of all PEEP's.
- Ensure the supply of all keys to doors and exits from the College are adequate.

### Heads of Department are expected to:

- Ensure the implementation of all health and safety policies and procedures are adhered to within their own department and the College.
- Maintain, with the H&S Officer, so far as is reasonably practical, a safe working environment within their department.
- Identify hazards in their department and take appropriate measures to assess, eliminate, minimise or control the level of risk in order to comply with statutory duties.
- With the H&S Officer produce and maintain Risk Assessments, safety procedures and Accident/Incident reports.
- Make arrangements to monitor and review safety measures introduced.
- Ensure members of staff are informed of all hazards, are properly briefed on the health and safety standards and procedures relevant to their job and receive the necessary training to perform their job safely.
- Monitor members of staff to ensure they comply with health and safety standards, procedures and follow safe working practices.
- Ensure accidents and incidents which occur within their workplace are recorded and the H&S Officer is informed of any reportable accidents or dangerous occurrences, so that they may be reported in accordance with the relevant regulations.
- Ensure all members of staff are familiar with the fire evacuation procedures, know where fire equipment and exits are located and take part in fire and emergency training.
- Provide suitable protective clothing and equipment for all members of staff, where appropriate, and instruct and train people in its use and check regularly that it is being used.
- Manage and control contractors and suppliers to ensure their activities are undertaken in a safe manner and safety procedures are followed.
- Notify the HR Manager/H&S Officer when they appoint a new Contractor/Supplier to ensure relevant documentation is sent out concerning H&S regulations which must be adhered to when visiting/working on the College site.

### Deputy Heads of Department/Line Managers/Supervisors have a duty to:

- Identify hazards in the work area for which they are responsible and take appropriate measures to assess, eliminate, minimise, record and control the risk in order to comply with statutory duties.
- Ensure that all members of staff for whom they have a duty of care are aware of the hazards and the necessary precautions needed to control and minimise the risk.
- Ensure that members of staff under their supervision receive the necessary training to perform their job safely and are properly briefed on the health and safety standards and procedures relevant to their job.

- Ensure that all accidents/incidents that occur in their departments are recorded correctly. They should ensure they report accidents/incidents to their Head of Department/Line Manager.

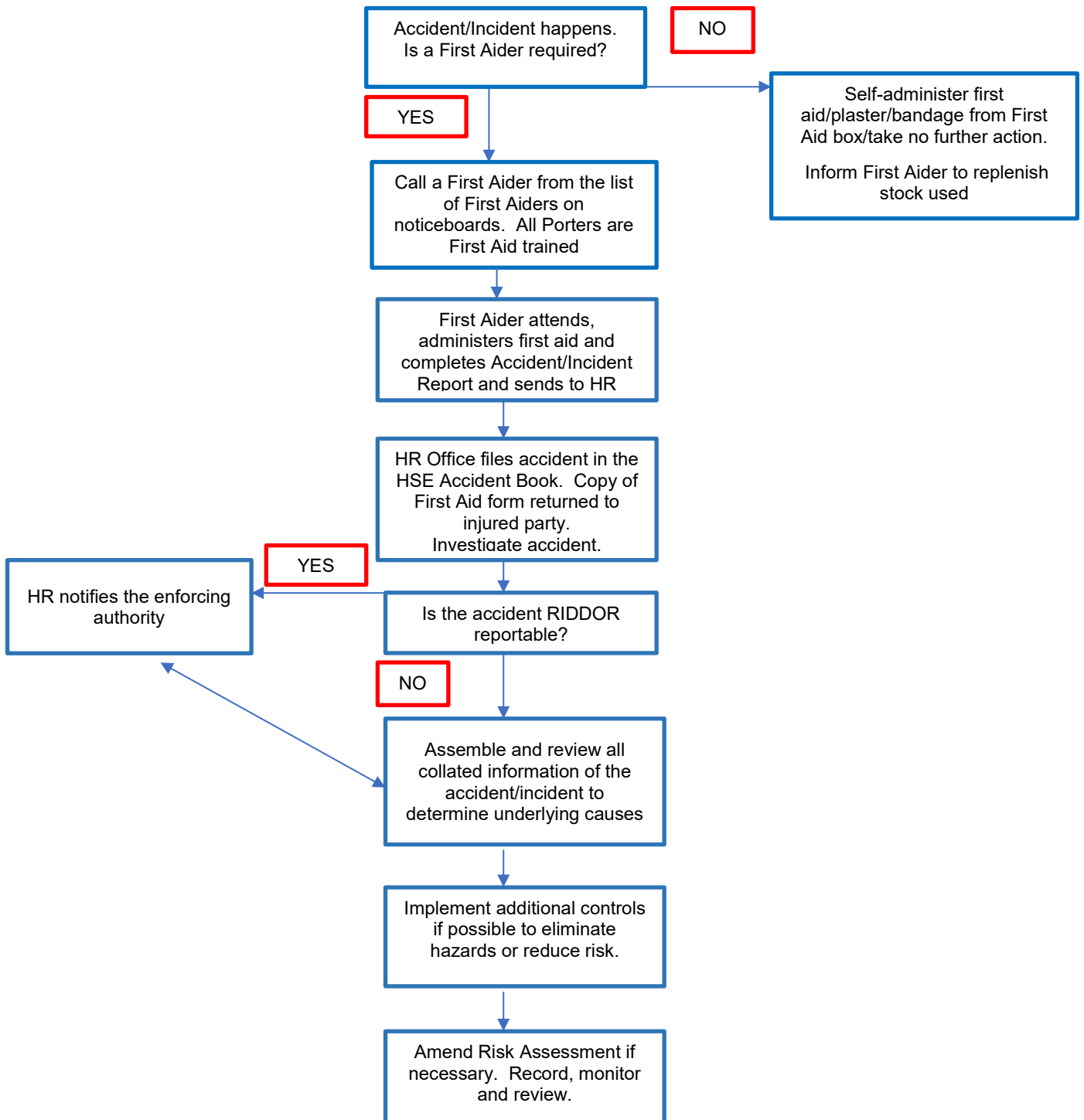
#### **All Members of Staff must:**

- Have responsibility in both criminal law and common law, not to endanger themselves or others in connection with their work. In addition, employees have a responsibility under their contract of employment.
- Familiarise themselves with the Health and Safety Policy and Procedures document.
- Follow all work and safety procedures and any training which has been received.
- Co-operate with Heads of Department/Line Manager/Supervisors to ensure that all health and safety standards and work practices are complied with.
- Take care of their own health and safety whilst at work and not compromise the health and safety of any other person who may be affected by their acts and/or omissions.
- Report all accidents/incidents that happen to themselves, or that they witness, to their immediate Line Manager/Supervisor/Head of Department as soon as possible.
- Report any hazard to Health and Safety immediately so that action can be taken to remove, minimise or control it.
- Ensure that all personal protective clothing and equipment is well maintained and used for the purpose for which it is intended.
- Not intentionally or recklessly misuse or interfere with anything provided in the interest of health and safety and welfare. If any such abuse is witnessed, it must be reported immediately.

#### **Visitors/Contractors to the College and its premises are expected to:**

- Follow any health and safety guidance given to them.
- Report any dangerous occurrence, accident or incident to health and safety to the Porters Lodge immediately.
- Comply with all the health and safety/rules and regulations as outlined in the publication "Health and Safety Code of Practice for Contractors/Sub-Contractors/Visitors", which is sent out from the H&S/HR Office.

## ACCIDENT REPORTING AND INVESTIGATION PROCEDURE



## ACCIDENT REPORTING POLICY

### Introduction

In order to comply with our duties under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, all workplace accidents, however minor, must be recorded, and in some cases accidents may need to be reported to the enforcement authorities. This policy therefore sets out our arrangements for accident reporting and investigation.

This policy is not contractual but indicates the way in which accident reporting will be managed within Pembroke College.

### Scope of this Policy

This policy applies to all employees and workers, as well as anyone who may have an accident on our premises, including visitors, suppliers, students and contractors.

### Aims of this Policy

This policy aims to ensure that we have clear rules in place; that all accidents are properly recorded and that any necessary remedial action is taken to prevent re-occurrence.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Data Protection Act 1998/The General Data Protection Regulation
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

### Reporting of Accidents – Fellows and Staff

All workplace accidents, however minor, must be recorded by a First Aider who completes a First Aid Form. First Aid Forms are available from the Porters Lodge, the College Website or the HR Office. This form is sent to the HR Office, when completed, who then transfers the information to the Health and Safety Executive Accident Book. A copy of the First Aid Form is also sent to the injured person for their records. The accident book is kept in the HR Office. Apart from being a legal requirement, this enables us to investigate accidents to see if we can make any adjustments to try and ensure that they do not re-occur.

All accidents will be recorded as soon after the event as possible. Should the accident need to be reported to the enforcement authorities, the relevant form (RIDDOR report) will be completed by the H&S Office (HR Office).

For information a copy of all the forms used for accident reporting have been placed in the forms section at the end of this document.

### Reporting of Accidents – Students and Visitors

Accidents and incidents for students and visitors to Pembroke College are recorded on a different report which is titled "Incident/Accident Reporting Form". These forms are held in the Porters Lodge and are sequentially numbered.

### Offsite Accidents

If an employee or worker is working at third party premises, details of any accident should be reported in their accident book as well as ours. This is because host employers have duties under RIDDOR to report any reportable accidents which may occur should an accident take place on premises for which they are responsible.

Home-workers should not use the accident book/form to report an accident which occurred in their own home unless it occurred during work time or relates to an activity which is work-related.

### Employee Duties

We expect all employees and workers to assist us in complying with our legal duties under RIDDOR. They are expected to have due regard for their own health and safety and that of their colleagues. If safe systems of work have been introduced, they are expected to follow them, along with any instructions.

All accidents (or "near misses") should be reported in a timely and accurate manner. Recommendations will be communicated to the injured person if deemed appropriate. In the event that an employee fabricates or falsely reports the details of an accident, we reserve the right to take disciplinary action, which could result in dismissal.

### Accident Investigation

Unless the accident is trivial, it will be investigated by the H&S Officer, to the appropriate extent. This will help us ensure that the risk of any re-occurrence is minimised.

Where necessary, remedial measures will be introduced and monitored. Details of such accidents will be discussed at our health and safety meetings.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

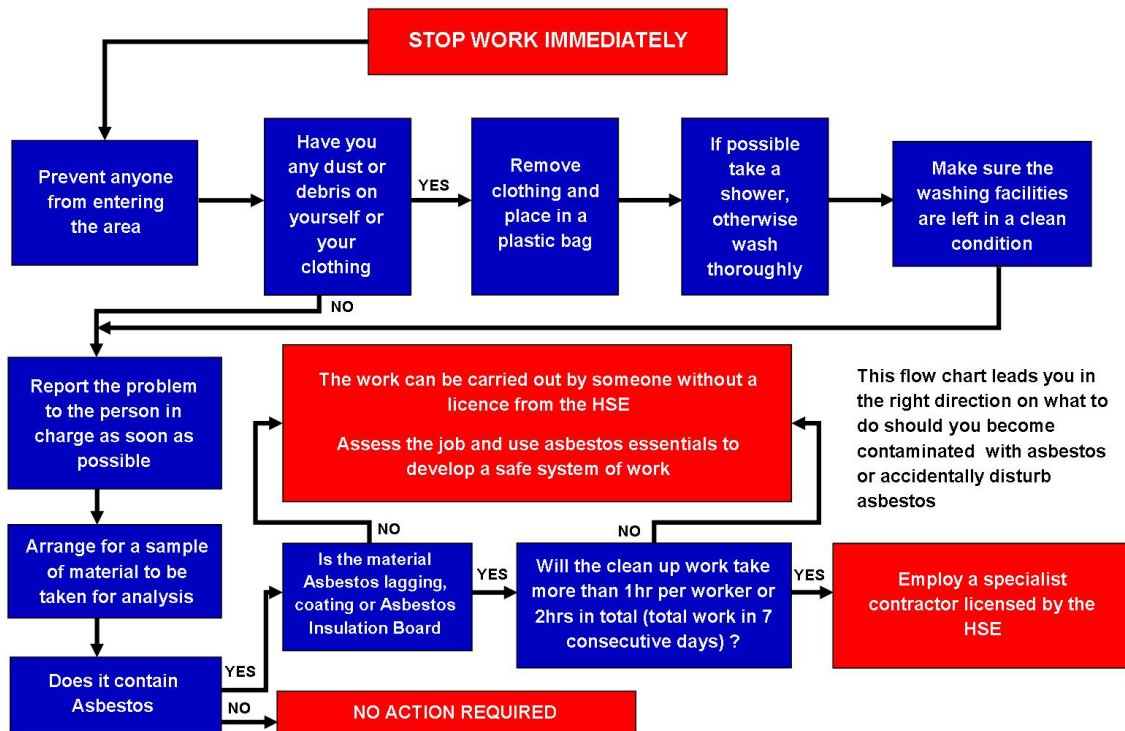


## ASBESTOS POLICY/PROCEDURE

Pembroke College has a separate policy for management of asbestos. If you wish to see this policy please contact the Health and Safety Officer in the HR Office. The policy can also be found on the College website.

Below is a flow chart explaining how asbestos is managed at Pembroke College.

### Flow Chart for Accidental Disturbance of Asbestos Containing Material





### Introduction

1. To create a safer working environment for staff and students in the College.
2. To protect property belonging to the College, its students and staff.
3. To provide evidence in support of any internal or external enquiry, disciplinary proceedings or prosecution, especially if associated with the security of the College site and members of the College community, criminal activity committed on College property, or the misuse of College property or equipment.

The cameras should not face into College buildings, except where agreed in advance with student representatives via the College's Consultative Committee except in exceptional circumstances. Cameras stream video to dedicated CCTV servers, from where they can be viewed on a real time basis in the Porter's Lodge, Library, and other approved locations. Recordings are made onto the hard disks of the CCTV servers for replay in the event of an incident.

This Policy and Code of Practice sets out the appropriate actions and procedures, which must be followed to comply with the relevant data protection legislation in respect of the use of CCTV surveillance systems managed by the College. This policy and code of conduct intends:

1. To inform all who come onto the College site that CCTV is in use.
2. To keep CCTV data secure and controlled by authorised personnel.
3. To maintain all CCTV equipment in working order.
4. To provide retention of CCTV data within the stated purpose only.
5. To state the manner and means of destroying stored CCTV data.
6. To prevent access by unauthorised individuals or third parties.

### Responsibilities

The system is operated by the College and is in use all year round. The Bursar has overall responsibility for the implementation and use of the system. The IT Director and IT department ensures all equipment is maintained and in a suitable condition. The Porters, Library Staff, IT staff, and other College Officers will interrogate the system and its data. Operation of the system is restricted to those named above.

### Staff who use the CCTV system have the following responsibilities:

1. To uphold the arrangements of this Policy and Code of Practice.
2. To handle CCTV data securely and responsibly, within the aims of the Policy and Code of Practice.
3. To be aware that they could be committing a criminal offence if they misuse CCTV data.
4. To report any breach of procedure to the Bursar or College Data Protection Lead.
5. To attend training / refresher sessions as required.

### Siting the Cameras

Prior to any camera installation the Bursar and the College Data Protection Lead will ensure that the installation complies with the relevant data protection legislation and the CCTV Policy and Code of Practice. It is essential that the location of the equipment is carefully considered; the way in which CCTV captures data will need to consider the privacy of all individuals. All camera locations are visible to public and staff. Signs have been erected at the main entrance to notify all those who enter that they are entering an area that is covered by CCTV cameras.

### Processing CCTV data for an in-progress incident

The following procedures concern the viewing and use of the CCTV data in response to an in-progress incident in the College.

1. The Porters, Library staff and IT staff may directly view the live feeds from any camera during their working hours.
2. In response to an in-progress incident the above staff may view recently recorded data to ascertain facts necessary to respond to the event.
3. No recordings or copies of CCTV data is permitted; if this is necessary then the following policy for processing CCTV data for past incidents must be followed.

### Processing CCTV data for past incidents

The following procedures concerning the use and retention of recordings should be followed to provide an acceptable level of security and accountability, and to ensure the acceptance of recordings in support of criminal proceedings.

1. Recordings for most cameras are retained on the CCTV server for up to 30 days and are then overwritten.
2. Recordings for cameras covering long term student storage areas (trunk stores, etc.) are retained on the CCTV server for up to 90 days and are then overwritten.
3. Requests for the retention and/or disclosure of CCTV material should be made to the Head Porter and be recorded on the CCTV Request form (Appendix A).
4. The Head Porter may view or authorise a Porter to view past recordings stored on the service to establish if the CCTV system has recorded images relevant to a request for disclosure or retention, and for this reason alone. All viewings of recordings, and the reason for viewing, must be logged in the CCTV Log held by the Head Porter.

5. If it appears that relevant material is held and that CCTV recordings need retaining or disclosing permission must be sought from two authorised College Officers, or one authorised College Officer and the Head Porter. Authorised College Officers in this regard are the College Data Protection Lead, the College Proctor, the Senior Tutor and the Bursar. As part of this process authorised College Officers may view the CCTV material in question.
6. Once a valid request has been made the IT department will process the footage and generate a master copy of the recording.
7. A copy of the relevant part of the recordings will be stored on digital media. The CCTV request form should be held with the digital media in a secure format and handed to the Head Porter immediately.
8. The Head Porter, or a nominated deputy, should mark each item of digital media with a unique reference number.
9. All digital media will be securely stored by the Head Porter until they are no longer needed by the college, are passed to the Police or are passed to a third party with approval of the College Data Protection Lead.
10. The IT Department is responsible for destroying all digital copies when they are no longer needed for evidence. Digital copies should be destroyed, by appropriate means for the specific media and disposed of in the confidential waste container. Each disposal should be noted in the CCTV Log.
11. The Head Porter, or a nominated deputy, is responsible for ensuring that the CCTV log is kept up to date.

### Access to and Disclosure of CCTV data to Third Parties

Access to, and disclosure of, CCTV data is restricted and carefully controlled to ensure privacy of individuals, but also to ensure that the continuity of evidence remains intact should the data be required for evidential purposes.

IT staff need access to CCTV data for maintaining the CCTV system. Individuals requesting access to CCTV data should complete a CCTV Request form (Appendix A). Any request by a third party to view a CCTV recording **must be approved** by the College Data Protection Lead in consultation with the Bursar, who will determine whether disclosure is necessary, legitimate and lawful. All unsuccessful requests will be retained for 3 months.

Once this has been actioned the details should be recorded in the CCTV Log held by the Head Porter. Any digital media that is requested by the Police in connection with a criminal enquiry will be released against an Officer's signature and the completion of CCTV Request form (Appendix A), after authorisation by the Bursar in connection with staff matters and by the Senior Tutor in respect of students.

Any individual wishing to make a subject access request is asked to review the Colleges Data Protection policy at <http://www.pem.cam.ac.uk/the-college/legal-information/data-protection/>.

On no account may CCTV data be viewed by any unauthorised person, or removed from the College without the specific approval of the Senior Tutor, College Data Protection Lead, Bursar or Head Porter. Staff will be informed that any misuse or unauthorised access of live CCTV data will be considered as a serious disciplinary matter.

If the College is asked to retain a recording for evidential purposes, the Head Porter will take possession and securely store the relevant digital media for as long as is required, which would normally be until one month after the finalisation of any court proceedings.

### Complaints Procedure

Any individual who has concerns about the CCTV system or the control of it at Pembroke College is requested to write to the Bursar or the College Data Protection Lead outlining the reason for the complaint.

### Information and Training

A copy of this Policy and Code of Practice will be published also in the Staff Handbook.

All Porters will be trained in the practical use of the CCTV system. The Head Porter, Senior Porters and IT Personnel will receive additional training in the storage, capture and recording of CCTV data. The Bursar, Head Porter, Senior Porters and IT Staff will be issued with a copy of the Information Commissioner's CCTV Code of Practice.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

**CCTV REQUEST FORM**

**APPENDIX A**

REQUEST ID:  
*Office Use Only*



**PEMBROKE COLLEGE - CAMBRIDGE**

1. REQUESTERS PERSONAL DETAILS	
Applicant's full name:	Applicant's postal address:
Applicant's email address:	
2. INFORMATION REQUIRED	
<b>To help us find the CCTV data you require, please complete the following section.</b>	
Location/position of CCTV camera:	Date and time of incident:
Brief description of the incident to be retrieved, the appearance of any individuals and likely activities captured by CCTV:	
<b>Please give all information that might assist us in finding the incident</b>	
Purpose of the request: (e.g. Subject Access Request / Evidence for investigation / Police Request / Disciplinary)	
<b>If the purpose of the request is a subject access request ensure the College Data Protection Lead is consulted, for all other requests consult the Bursar.</b>	
3. WORKFLOW ( <i>Office Use Only</i> )	
Name/Role of Approvers:	Approval status (Confirmed/Denied):
Name/Role of individual consulting CCTV record:	Date Copies Made:
Digital Media Reference Number('s):	
Digital Media Destruction Date:	Digital Media Destruction Actioned By:
Name of recipient('s):	Organisation of Recipient('s):
Badge Number of Recipient('s):	Purpose of release:
<b>Optional – If digital media is being released to the Police service</b>	

## CONFINED SPACES POLICY

### Introduction

It is our aim to provide a healthy and safe working environment for all our employees and workers. This policy is non-contractual but aims to ensure that any risks associated with confined spaces on our premises are minimised at all times.

### Scope of this Policy

This policy should be followed by all employees and workers who need to work in any confined space areas. The general principles also apply to contractors.

### Aims of this Policy

It is our aim to ensure, so far as is reasonably practicable that:

- All confined spaces will not be accessed by any personnel in any situation unless under the specific requirements of the confined spaces procedures as listed below.

#### *Definition of a confined space:*

*“Confined space” means any place, including any chamber, tank, vat, silo, pit, trench, pipe, sewer, flue, well or other similar space in which, by virtue of its enclosed nature, there arises a reasonable foreseeable specified risk.*

*“Specified risk” means a risk of serious injury to any person from fire or explosion. Other examples given loss of consciousness or asphyxiation from gas, fume, vapour or lack of oxygen. (Regulation 1, Confined Space Regulations 1997).*

### Legal Considerations

The following piece of legislation applies to this policy:

- The Confined Spaces Regulations 1997

### Procedure

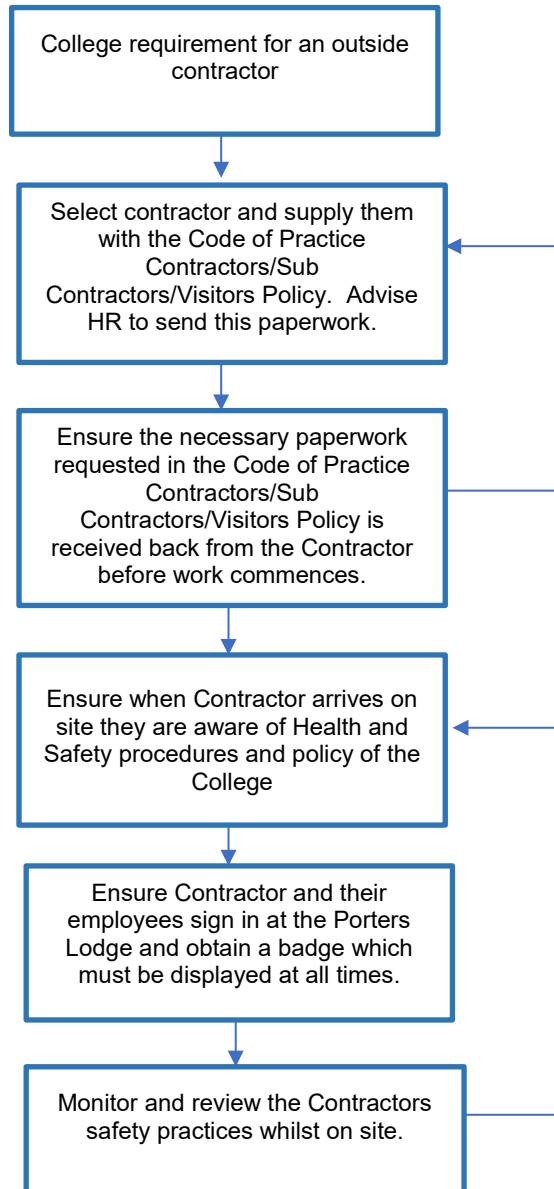
- All employees or workers will receive full information, instruction, training and supervision on confined space work and the associated risks.
- All confined spaces will be fully risk assessed before they are entered.
- No confined space will be entered if there is foreseeable risk of serious injury.
- Where deemed necessary by the risk assessment an atmospheric test will be conducted before the confined space is entered.
- All confined space work will be conducted by two persons, an “Entrant” and an “Attendant”.
- Safe access to and egress from the confined space will be established and maintained throughout the work.
- The “Attendant” will be present at the entrance to the confined space at all times and under no circumstances enter the confined space.
- Effective channels of communication between “Entrant” and “Attendant” will be maintained throughout the duration of the work.
- Emergency procedures will be in place and followed, whereby an incapacitated “Entrant” can be recovered without additional risk to the rescuers safety.
- Non sparking tools will be used in any potentially flammable or explosive atmospheres.
- Checks will be made to ensure all mechanical and electrical isolations have been completed before work commences.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

## CONTRACTOR MANAGEMENT PROCEDURE

### Engagement and Control of Contractors on Site:



## CONTRACTOR MANAGEMENT POLICY

### Policy

The College will ensure, so far as is reasonably practicable that:

Contractors will need to supply us, on a bi-annual basis, with information regarding the company/organisation (see Code of Practice Contractors/Sub Contractors/Visitors Policy which is a separate document).

Due consideration is given to health and safety when selecting contractors to undertake work on behalf of Pembroke College.

Contractors will be provided with relevant information of health and safety risks arising from our premises and work activities.

### Legal Considerations

The following legislation applies to this policy:

- The Management of Health and Safety at Work Regulations 1999.
- The Construction, Design and Management Regulations 2015.

### Procedures

The following procedure will apply to all Contractors who undertake work on our behalf:

Contractors will be asked to complete the following documentation:

- Undertaking
- Contractor/Sub Contractor Assessment

The documents will be reviewed by the Health and Safety Officer or Operations Manager. Only competent contractors will be permitted to undertake work at the College.

The College will provide the Contractor with relevant information on any specific health and safety hazards on the premises to which he or his employees may be exposed to in connection with the proposed work. Pembroke College will also inform the Contractor of relevant health and safety arrangements, including procedures for signing in/out, accident reporting, emergencies and welfare facilities. This information is contained in the Code of Practice for Contractors/Sub Contractors/Visitors.

### Contractors/Visitors Policy

Contractors are responsible for providing any equipment, including access equipment that may be required for the project/job. Contractors will not be permitted to use equipment or facilities provided by the College unless agreed in advance with the Buildings Manager or designated person. The College contact will maintain a line of communication with the Contractor's contact person on an on-going basis.

Contractors will be actively monitored throughout the duration of any contract by the person(s) who requested the work takes place, thus ensuring that all work is completed in a safe manner and they adhere to their own method statements/risk assessments.

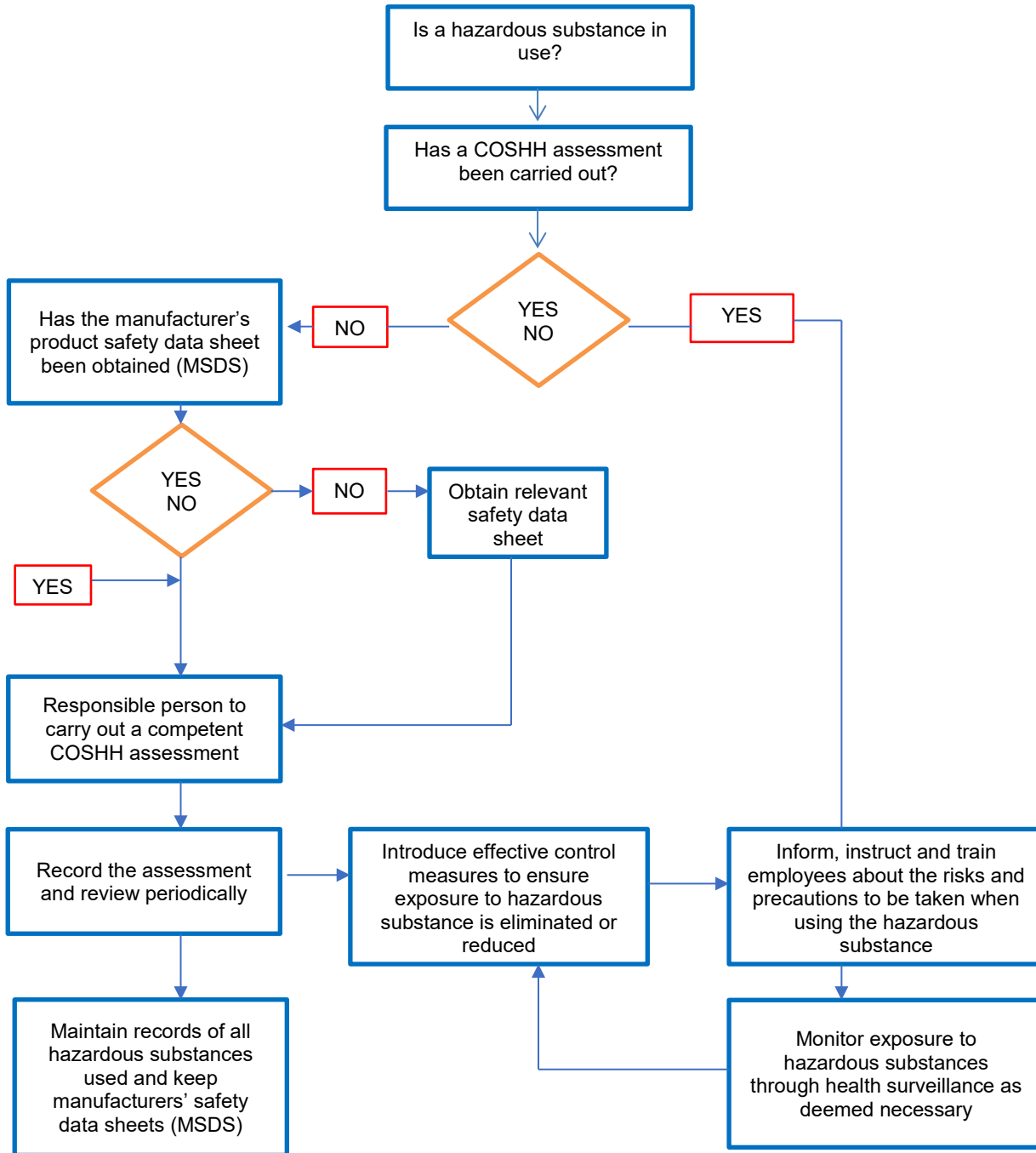
Upon request Contractors will be expected to produce any relevant staff training certificates and compliance testing certificates for any equipment being used.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

# (COSHH) SUBSTANCES HAZARDOUS TO HEALTH PROCEDURE

## Procedure for the Safe Handling and use of Substances





## **(COSHH) USE OF CHEMICALS AT WORK POLICY**

### **Introduction**

It is our aim to provide a healthy and safe working environment for all our employees and workers. This policy is non-contractual but aims to ensure that any risks associated with the storage and use of chemicals on our premises are minimised at all times.

### **Scope of this Policy**

This policy should be followed by all employees and workers who either procure chemicals for use on our premises, or who use chemicals in the course of their duties. The general principles also apply to contractors.

### **Aims of this Policy**

This policy aims to reduce the risks associated with the use of chemicals on site by implementing a series of risk control measures.

Our starting point will be to eliminate the use of hazardous chemicals wherever possible. If this cannot be done, we will take all reasonable steps to find less hazardous chemicals. In the event that hazardous chemicals need to be used, control systems will be introduced. Personal protective equipment (PPE) will only be issued where hazards cannot be effectively managed by other means.

The use of new chemicals will be assessed prior to use and where this expertise is not available in-house, it will be provided by suitably qualified third parties.

### **Legal Considerations**

The following piece of legislation applies to this policy:

- The Control of Substances Hazardous to Health Regulations 2002 (as amended).

### **Definitions**

COSHH (the Control of Substances Hazardous to Health Regulations 2002) require us to:

- Minimise the risks from using chemicals at work.
- Introduce control measures to manage those which may remain.
- Train employees in the safe use of chemicals.
- Monitor the effectiveness of any control measures.
- Store chemicals safely in order to avoid the risks of fire, explosion or environmental damage.

In certain circumstances, we are also required to conduct health surveillance. This will occur if any employee is exposed to a hazardous substance which is known or is likely to cause a disease or be detrimental to health.

### **Ordering Chemicals**

Adequate information about each chemical must be obtained prior to its use. This will take the form of a material safety data sheet (MSDS), which should be provided by the supplier of the chemical. If the intention is to use a chemical for the first time, the relevant MSDS needs to be obtained before the chemical is ordered.

Where necessary, further information will be obtained from the chemical supplier and/or other resource such as the HSE website.

### **Use of Chemicals On-Site**

The use of all chemicals on our premises will be assessed. For those with relatively low-hazard properties, this process will be straightforward. In these cases, it will be assumed that implementation of controls in line with the MSDS will be sufficient.

In the event that high-hazard substances are identified, e.g. potential cancer-causing agents, your Head of Department/Line Manager will try to source less hazardous substitutes. Where this is not possible, strict controls will be required.

If chemicals need to be mixed with other materials, each must be assessed in order to ensure that no adverse reaction will occur. The MSDS will provide information on incompatible chemicals. The importance of this procedure must not be overlooked as even everyday cleaning agents can sometimes cause a serious reaction if mixed.

### **Storage**

We will provide appropriate storage according to the properties of each chemical. The type of storage necessary will be determined by reference to the MSDS. Special consideration will be given to flammable liquids, environmentally hazardous chemicals and oxidising agents (due to the risks of explosion).

The suitability of all chemical storage will be reviewed as necessary by the Head of Department/Line Manager/H&S Officer.

### **Employee Responsibilities**

All employees and workers will be expected to co-operate with the College in respect of any controls introduced to ensure the safe use and storage of chemicals on site.

Where PPE has been deemed necessary, this will be issued by us and employees are required to wear and maintain it in line with the manufacturer's recommendations.

We also require all employees and workers to report any concerns to their Head of Department/Line Manager. These will be dealt with promptly. Should any further action be required, the employee raising the concern will be informed what form this will take.

## **Training**

All relevant employees will receive information, instruction and training on how to use chemicals safely, which will be repeated as necessary, e.g. on the introduction of new chemicals or processes. Training will be provided in a practical form in which the hazards and controls are clearly understood, e.g. training on operating procedures.

## **Safety Audits**

This policy will be monitored by the H&S Officer and Heads of Department through the carrying out of periodic safety audits. These audits will cover the use of chemicals, the maintenance of control systems, adherence to safe working practices, the provision of information to employees and workers and the storage of chemicals.

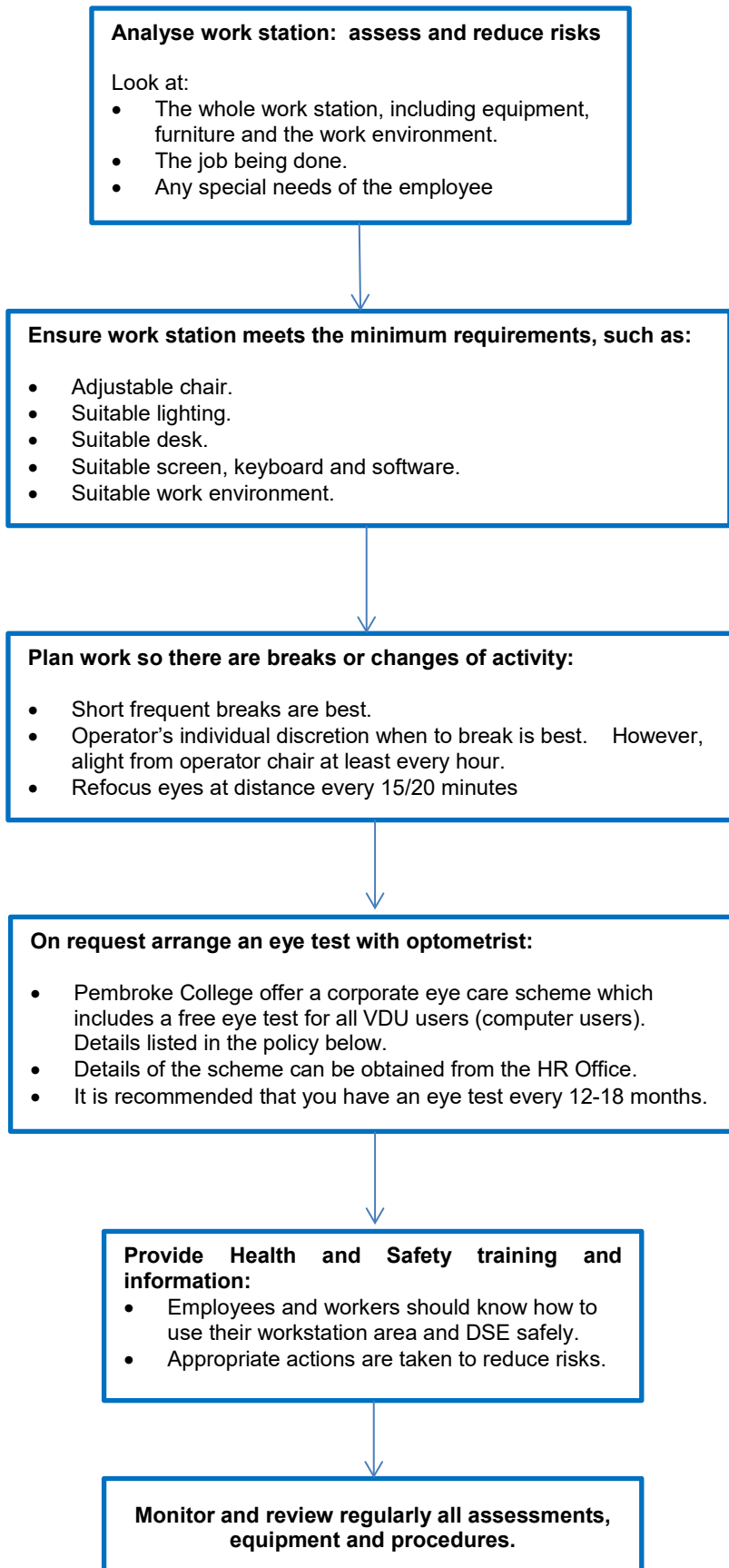
Where contractors are engaged on site, they will be monitored to ensure that they do not pose a hazard to employees, workers, visitors or themselves.

## **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

## DISPLAY SCREEN EQUIPMENT (DSE) PROCEDURE

### Procedure for Using/Operating Display Screen Equipment (DSE)



## DISPLAY SCREEN EQUIPMENT (DSE) POLICY

### Introduction

Specific regulations protect employees and workers who are required to regularly use display screen equipment in order to do their work.

This policy is non-contractual but sets out our procedures for managing use and ensuring compliance.

### Scope of this Policy

This policy applies to employees and workers who regularly use a computer or other technology which would be classed as "display screen equipment", in order to do their jobs.

### Aims of this Policy

This policy aims to minimise the risks to DSE users by setting out clear procedures for assessment, training and the provision of an eyesight test and corrective appliances (where needed).

### Legal Considerations

The following piece of legislation applies to this policy:

- Health and Safety (Display Screen Equipment) Regulations 1992.

### Definitions

A "user" is defined as someone who uses a computer (or other display screen equipment) for "continuous spells of an hour or more at a time" on a "more or less daily basis".

Some roles may be assessed to determine whether the post holders should be classified as "users" for the purposes of the Regulations. This assessment will be carried out initially by the Health and Safety Officer.

### Actions to Ensure Compliance

The Health and Safety (Display Screen Equipment) Regulations 1992 set out a series of minimum standards for the workstations used by DSE user, including seating, lighting levels and workstation layout. In order to comply with the Regulations, the following procedures are to be followed:

- All new employees and workers who are required to use display screen equipment on a regular basis will be assessed initially by the Health and Safety Officer. From then onwards, every two years, they will be given a self-assessment DSE questionnaire to complete and return to the HR Office.
- Should a current employee or worker change workstations, major software they use regularly, move their desk to a different position or become a DSE user for the first time, they must inform the Health and Safety Officer who will complete a VDU Assessment with them. This should be done at the time of the change in location or job role.
- Where the assessment or the self-assessment questionnaire identifies problems, such as flicker or glare, it is the responsibility of the Health and Safety Officer to ensure that these problems are rectified.
- All employees and workers are encouraged to rotate their job tasks in order to spend at least ten minutes in every hour away from the computer screen. Anyone who feels that their workload does not permit adequate breaks should raise this with their Head of Department/Line Manager.
- Where necessary, we will provide further training and information in order to help individuals to set up their workstations correctly.

### Users Duties

DSE users are expected to complete the self-assessment DSE questionnaire in a timely manner. They are also required to ensure that their workstations are set up correctly. Any difficulties that are experienced with individual workstations should be brought to the attention of the Health and Safety Officer as soon as possible.

### Eye Tests

Any employee who has been designated as a DSE user has the right to request an eye test. Pembroke College operate a Corporate Scheme with Boots and Specsavers.

Following the initial eye test, the frequency of any follow-up tests will be decided by the optician. However, it is recommended that an eye test be carried out every 12-18 months. If an employee chooses not to use the Corporate Scheme the College are prepared to contribute the amount that would have been paid for the Corporate Scheme as a contribution towards their chosen optician's costs.

### Conditions of the Corporate Scheme

The benefits of the two schemes are as follows:

#### Specsaver Voucher

- Free Eyesight test.
- One pair of single vision glasses from the £45 range for VDU use.

#### Boots Voucher:

- Free eyesight test.
- One pair of single vision glasses solely for VDU use.

*The above discounts only apply if the glasses are for VDU use. Vouchers cannot be used with over 60's voucher, student discount, sale items, easy care or for contact lenses.*

## **Guidance on Sitting Correctly**

Outlined below is a self-help guide whilst working with desktop computers and other types of display screen equipment (DSE) in an office environment.

### **Support your back**

Avoid back pain by adjusting your chair so that your lower back is properly supported. A correctly adjusted chair will reduce the strain on your back. Use one that is easily adjustable so that you can change the height, back position and tilt. Have your knees level with your hips. You may need a footrest for this.

### **Adjust your chair**

Adjust your chair height so that you can use the keyboard with your wrists and forearms straight and level with the floor. This can help prevent repetitive strain injuries. Your elbows should be by the side of your body so that the arm forms an L-shape at the elbow joint.

### **Rest your feet on floor**

Your feet should be flat on the floor. If they're not, ask if you can have a footrest, which lets you rest your feet at a level that's comfortable. Don't cross your legs, as this can cause posture-related problems.

### **Place your screen at eye level**

Your screen should be directly in front of you. A good guide is to place the monitor about an arm's length away, with the top of the screen roughly at eye level. To achieve this you may need to get a stand for your monitor. If the screen is too high or too low, you'll have to bend your neck, which can be uncomfortable.

### **Using the keyboard**

Place your keyboard in front of you when typing. Leave a gap of about four to six inches (100mm-150mm) at the front of the desk to rest your wrists between bouts of typing. Your wrists should be straight when using a keyboard. Keep your elbows vertical under your shoulder and right by your side. Some people like to use a wrist rest to keep their wrists straight and at the same level as the keys.

### **Keep your mouse close**

Position and use the mouse as close to you as possible. A mouse mat with a wrist pad may help to keep your wrist straight and avoid awkward bending. If you are not using your keyboard, push it to one side if using the mouse a lot.

### **Avoid screen reflection**

Your screen should be as glare-free as possible. If there is a glare on your screen, hold a mirror in front of it to identify the cause. Position the monitor to avoid reflection from overhead lighting and sunlight. If necessary, pull blinds across the windows and replace ceiling lighting with table lights. Adjusting the screen's brightness or contrast can make it much easier to use.

### **Working with spectacles**

People with bifocal spectacles may find them less than ideal for computer work. It's important to be able to see the screen easily without having to raise or lower your head. If you can't work comfortably with bifocals, you may need a different type of spectacles. Consult your optician if in doubt.

### **Make objects accessible**

Position frequently used objects, such as your telephone or stapler, within easy reach. Avoid repeatedly stretching or twisting to reach things.

### **Avoid phone strain**

If you spend a lot of time on the phone, try exchanging your handset for a headset. Repeatedly cradling the phone between your ear and shoulder can strain the muscles in your neck.

## **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The Health and Safety Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

## DRIVING ON BUSINESS POLICY

### Introduction

Every week more than 20 people are killed and 250 seriously injured in 'at work' road accidents. This figure excludes accidents that occur whilst commuting to/from work.

This policy is non-contractual but seeks to set out how Pembroke College aims to manage driving on business. This policy can be found in the Staff Handbook.

## DRUGS, ALCOHOL AND SUBSTANCE ABUSE POLICY

### Introduction

It is our aim to provide a healthy and safe working environment for all employees and workers. This policy is non-contractual but sets out the responsibilities and arrangements for employees and workers within Pembroke College regarding drugs, alcohol and substance abuse on our premises.

### Scope of this Policy

This policy applies to all employees and workers, irrespective of status. All employees are engaged on the basis that they will provide Pembroke College with their best endeavours at all times. As judgement and the ability to make decisions are essential elements of all jobs at all levels, and as alcohol and other substances affect judgement and the ability to make decisions, it is important that no category of worker is excluded from this policy.

### Aims of this Policy

Pembroke College aims to provide a working environment that is safe, that minimises any risks to health and that makes adequate arrangements for the welfare of employees whilst they are at work. The use or abuse of certain substances, including drugs or alcohol, by any workers may put themselves or others at risk and/or result in harm and/or injury to themselves or others.

This policy therefore aims to clarify our rules relating to the use of alcohol and drugs; to reduce the likelihood of drug/alcohol impairment at work; to raise awareness of the impact of misuse of alcohol and drugs, of how this can be recognised and what support is available; and to clarify at what point we regard alcohol, drug or substance use as a disciplinary matter rather than a health problem.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Misuse of Drugs Act 1971.
- The Health and Safety at Work etc. Act 1974 (with regard to the employer's duty to ensure, where practicable, the health and safety at work of its employees and their duty to take reasonable care for their own safety and that of others who may be affected by their acts or omissions).
- Data Protection Act 1998/The General Data Protection Regulation - (in terms of staff monitoring and health screening).

### Definitions

"Alcohol" means any ethyl-alcohol containing product which, if consumed, has the capacity to induce intoxication.

"Drugs or substance abuse" means any substance capable of causing intoxication. This includes all controlled drugs contained in the Misuse of Drugs Act 1971 and specifically includes: cannabis (marijuana), opiates (including heroin), cocaine, any prescription drugs (including amphetamines and barbiturates) which are not obtained and used in a legally issued medical prescription, and any over-the-counter medicine or substance which is deliberately misused.

The "workplace" includes all land, property, car parks, buildings, structures, installations, lockers, toolboxes, vehicles or equipment owned, leased or used by Pembroke College for the conduct of its business.

### Responsibilities

In applying this policy we recognise our responsibilities by:

- Placing the highest importance on the health, safety and welfare of all employees and workers at Pembroke College.
- Accepting the legal and moral obligation to provide and maintain a safe and healthy workplace issues and to ensure that those who place their trust in us by revealing a substance abuse problem are treated with sensitivity and confidentiality.
- Providing information about the harmful effects of substance abuse to promote preventative action.

Employees and workers must however take personal responsibility for their own health and actions insofar as they affect the health and safety of themselves and others who may be affected by their acts or omissions.

### Use of Alcohol and Illegal Drugs whilst at Work

The use, possession, distribution, purchase, sale, consumption or being under the influence of illegal drugs whilst at work is never permitted and will be regarded as gross misconduct. Employees and workers must not under any circumstances bring illegal drugs into the workplace or to any event attended in the course of their employment, including social functions organised by Pembroke College.

In the interests of their own and their colleagues' safety, any employee or worker believed to be under the influence of either alcohol or illegal drugs will be escorted off site pending investigation. Disciplinary action will take place when the employee has had time to become sober or recover from the effects of drugs. This kind of behaviour will normally be treated as gross misconduct and result in summary dismissal.

The only circumstances where the consumption of alcohol is permitted during working hours are roles which require entertaining guests or events such as retirement parties that have been approved in advance by the College. However, such consumption must be reasonable and Heads of Department must remember their position of responsibility and ensure that anyone consuming alcohol does not then drive or operate machinery when clearly not in a fit state to do so when they are aware of those facts.

Employees and workers are also reminded that they are expected to behave appropriately at events organised by Pembroke College, such as training courses, seminars, Christmas parties or other such functions. Whilst alcohol is permitted in moderation, the taking of illegal drugs or misuse of other substances is never condoned.

This policy extends to those who work from home at any point, including those on standby or callout.

### Identifying Potential Problems

Supervisors and Heads of Department play a vital role in the early identification of potential problems. They should note and document any potential concerns: if a pattern begins to appear, reasonable grounds for concern are justified and the issues should be addressed based on deterioration of job performance.

The following characteristics, especially when arising in combinations, may indicate the presence of an alcohol or drug-related problem:

- Absenteeism: instances of unauthorised leave; frequent absences on Fridays and/or Mondays or immediately after pay day; leaving work early; lateness (especially on returning from lunch or unexplained absences from work site more than the job requires); frequent trips to the rest room; excessive or unusually high level of sickness absence; unusual and increasingly suspicious reasons for absence; unscheduled short-term absences, with or without explanation
- High accident level: either at work or elsewhere i.e. driving or at home
- Work performance: deterioration in work standards; difficulty in concentration; work requires increased effort; individual tasks take more time; problems with remembering instructions; increased incidence of mistakes; poor decision making; errors of judgement; loss of interest
- Mood swings: fluctuations in mood in a single day or shift; irritability; nervousness; depression; general confusion
- Physical evidence: multiple bruises; loss of weight and gaunt appearance; injection marks on arms (drugs used intravenously); tremor and sweating hands (alcohol or sedative withdrawal); signs of intoxication (slurred speech, unsteady on feet, confused); bleary eyed (alcohol and cannabis); smell of alcohol; tiredness/exhaustion
- Personal appearance: such as wearing long sleeves in all weathers especially in the morning to cover up injection marks; becoming less neat in dress or appearance or sometimes excessive care about dress
- Financial concerns: borrowing money from other workers
- Relationships with colleagues: deterioration in relations with fellow workers and with management; avoidance of contact with Head of Department/Line Manager.

### Medication

From time to time employees or workers will suffer ailments or illnesses for which legally prescribed or legally available drugs are required, either to rectify the ailment itself or to relieve the symptoms. As these drugs may also have some form of side effect, it is important that if this is likely to affect job performance in any way (e.g. drowsiness), anyone taking such medication should notify their Head of Department/Line Manager of the details. The aim is to protect everyone's safety and in certain cases it may be necessary to restrict some activities or move the person to other, less risky, work until fully recovered.

Employees and workers with long-term health conditions which require medication to control them are advised to inform us what medication they take so that these details are kept on file and made available to any medical employees or first-aiders called in the event of a medical emergency or accident.

### Right of Search

In order to enforce this policy, Pembroke College reserves the right to inspect and search the workplace, staff lockers and, with their consent, any person or personal property.

### Testing Employees

We reserve the right to conduct/require an appropriate external medical screening on any person working at Pembroke College.

Such workers will be advised of the purpose of the screening, exactly what information will be collected and held, and for how long, the reasons for this and the consequences of the tests. Refusal to provide the necessary biological samples may be regarded as gross misconduct and will be dealt with under our disciplinary procedure.

All matters relating to medical assessment, test results and management communications will be treated in a confidential manner. The medical screening results will be supplied to the employees Head of Department/Line Manager and the HR Manager, but will not be given to any other person within Pembroke College or to any other individual seeking information on that person without that person's written permission.

On request individuals have the right to be supplied with a copy of their own test results. In addition, if we suspect that an employees work performance or conduct has been impaired through substance abuse, we reserve the right to require the employee to undergo a medical examination to determine the cause of the problem.

### Treatment and Rehabilitation

All employees are encouraged not to cover up for colleagues with a drink or drug problem but to recognise that collusion represents a false sense of loyalty.

Employees who recognise that they have a drink or drug problem, or that they are at risk of developing one, are encouraged to come forward for confidential help. They should seek an appointment, in confidence, with their Head of Department/Line Manager who will, with their consent, make a referral to an approved doctor for advice.

Pembroke College will provide employees with support, internally and through external agencies (where appropriate) for substance abuse.



Employees must recognise that it is their responsibility and in their best interests to seek help at the earliest possible stage, when treatment is more effective and before the problems affect their work sufficiently to become a disciplinary matter. Employees enrolled in a rehabilitation programme will be subject to the normal sickness absence rules.

If we believe that an employee is under the influence of either alcohol or drugs as a result of an abuse problem, the outcome of any disciplinary procedure will generally include requiring that the person seek help from one or more of the national organisations set up to advise on overcoming the addiction.

Where employees who have received treatment suffer a relapse, we will consider the case on its individual merits. Medical advice will be sought in an attempt to ascertain how much more treatment/rehabilitation time is likely to be required to affect a recovery. At our discretion, more treatment or rehabilitation time may be given in order to help the employee to recover fully.

If, after an employee has received treatment, recovery seems unlikely, dismissal may result, but in most cases a clear warning will be given to the employee beforehand and a full medical investigation will have been undertaken.

Continuation in post or the offer of an alternative post during or after treatment will depend upon our employment needs at that time.

If an employee declines the offer of referral for assessment and treatment, discontinues treatment before its satisfactory completion and continues to fall below standards required, or either disobeys an instruction given by Pembroke College with regard to rehabilitation or suffers a relapse during or following treatment, we reserve the right to withdraw our support and will deal with the matter under our disciplinary procedure.

### **Enforcement of this Policy**

Breach of this policy by any employee will be fully investigated and dealt with under our disciplinary procedure. In order to meet legal obligations, Pembroke College will inform the Police and any other appropriate authorities if there is reasonable suspicion that a criminal act has been committed in the workplace.

Any employee or worker concerned about the implementation of this policy, or who has concerns for their health and safety, should raise these in the first instance with their Head of Department/Line Manager. If appropriate action is not taken to resolve the situation within five working days, they should raise the issue with the Health and Safety Officer/HR Manager.

We reserve the right at all times to inform the Police of any suspicions we may have with regard to the use of illegal drugs or other substances by our workers on our premises.

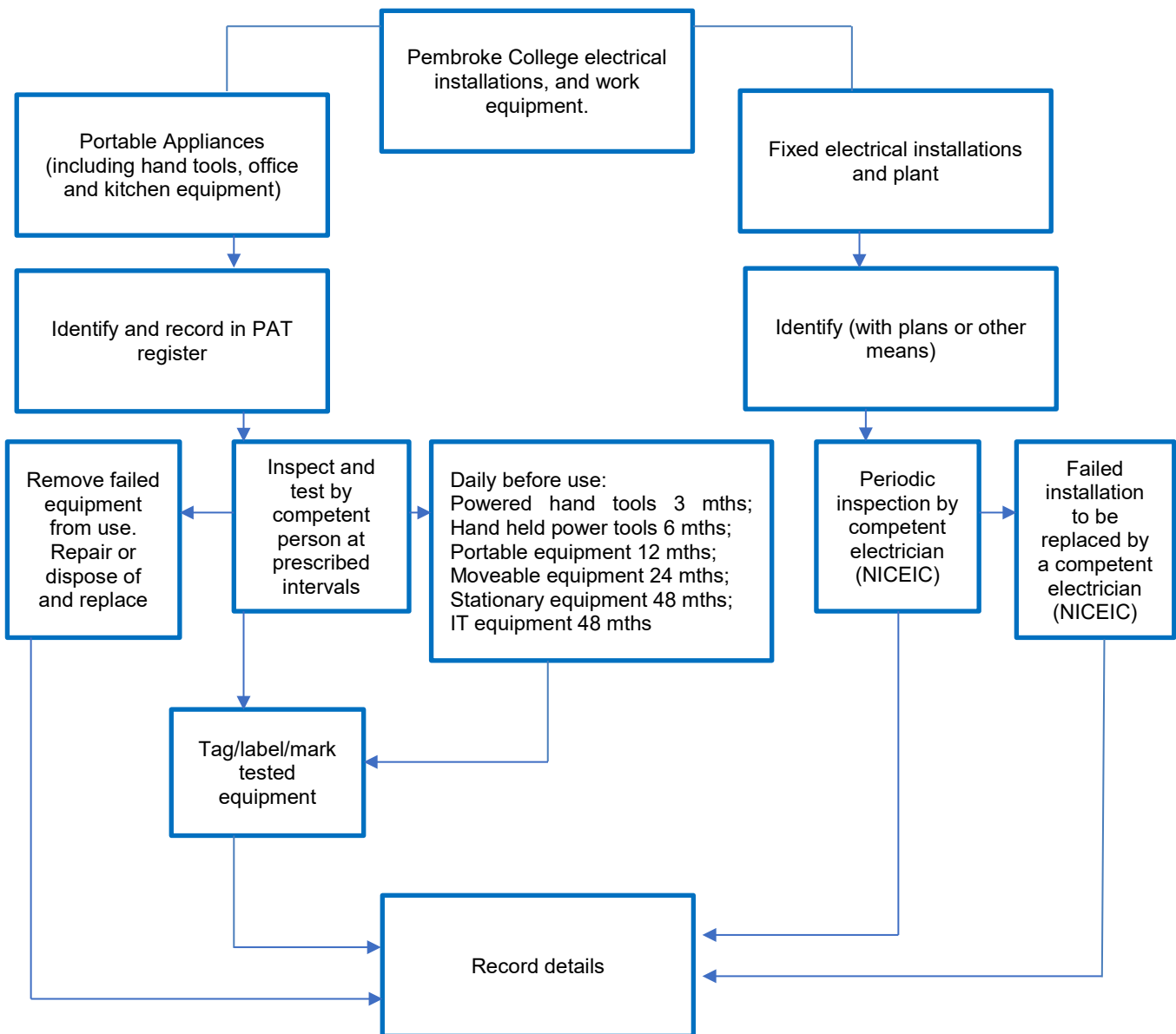
### **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.

## ELECTRICAL SAFETY PROCEDURE

### Procedure for Identification, Testing and Recording of Electrical Equipment and Installations.

**PLEASE NOTE: NO EMPLOYEE OTHER THAN A QUALIFIED ELECTRICIAN SHOULD FIX ELECTRICAL APPLIANCES IN THE WORKPLACE**



#### College rules in the Student's Handbook states:

Electrical Installations (including Portable Appliance Testing (PAT)).

All portable electrical equipment supplied by the College is PAT tested annually, normally during the vacations.

All privately-owned electrical equipment must be maintained in a safe state. The College may test any such appliance at its own discretion and cost. The College will remove any electrical items that it considers are a health, safety or fire hazard.

Fixed electrical wiring systems are tested at least every five years or after any significant alterations, in accordance with current legislation.

2 pin "continental" plugs **MUST NOT** be used in 3 pin socket outlets as these will not be earthed which could result in serious injury and fire.

## ELECTRICAL SAFETY POLICY

### Introduction

This policy is non contractual but sets out the responsibilities and arrangements for such employees/workers within Pembroke College regarding electrical safety

### Scope of this Policy

This policy covers all the necessary information covering fixed electrical installations.

### Aims of this Policy

This policy is designed to furnish employees and workers with information regarding electrical safety and alert them to the possible risks involved if regulations are ignored.

The College will ensure, so far as is reasonably practicable, that:

- The fixed electrical installation (e.g. wiring circuits, sockets and switchgear) is installed and maintained by a competent person.
- Electrical appliances comply with current safety requirements and they are sourced from reputable suppliers. Portable electrical appliances will be maintained in safe working order.
- Ensure employees and workers know what to do if they become aware of defects to the electrical installation and appliances at work.
- Ensure employees and workers are instructed that any repair or maintenance on the electrical system is only to be carried out by a competent person.

Electrical accidents in an office or working environment usually occur as a result of faulty or defective equipment, unsafe installations or misuse of equipment. The following guidelines should be adhered to when installing or using electrical equipment.

- Equipment must be properly earthed to prevent shock injuries.
- A sufficient number of sockets will prevent circuit overloading.
- Avoid the use of poorly maintained or non-approved equipment.
- Cables should not be dragged over nails, hooks, or other sharp objects or abrasive surfaces.
- Receptacles should be installed and electric equipment maintained so that no live parts are exposed.
- Machines should be disconnected before cleaning or adjusting.

### Procedures

- The electrical installation will be installed by a competent person in accordance with the latest edition of the Institute of Electrical Engineers Wiring Regulations (IEE Regulations) and practical guidance published by the NICEIC or equivalent.
- Electrical contractors will be vetted prior to the commencement of work to verify their competence to undertake the work.
- A register of portable electrical appliances will be established and annual safety testing carried out by a competent person.
- Where any inspection or test identifies any faults, this must be rectified as soon as practical. If repairs cannot be carried out immediately, equipment must be taken out of use and clearly marked as faulty. Where any equipment cannot be economically repaired then it must be safely disposed of.
- Employees or workers becoming aware of damage to the fixed electrical installation or appliances must report it to their Health and Safety Officer, Line Manager/Head of Department.
- Under no circumstances should any person attempt to repair or maintain the electrical system unless they are competent and trained to do so.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.



## ELECTRONIC DOOR LOCK POLICY AND CODE OF PRACTICE

### Introduction

The purpose of this Policy and Code of Practice is to ensure that the College uses any personal data from a physical door access system responsibly and with effective safeguards. The intention is:

1. To create a safer working environment for staff and students in the College.
2. To protect property belonging to the College, its students and staff.
3. To provide evidence in support of any internal or external enquiry, disciplinary proceedings or prosecution, especially if associated with the security of the College site and members of the College community, criminal activity committed on College property, or the misuse of College property or equipment.

Electronic door locks are located throughout the College where it has been deemed important to implement electronic door lock. All online door locks are connected to the network and transmit access logs to a central server, from where they can be viewed on a real time basis as well as historical access. Offline door locks are not connected to the network and only historical access is possible, which is available once the access logs have been transmitted to the central server indirectly.

This Policy and Code of Practice sets out the appropriate actions and procedures which must be followed to comply with the Data Protection Act/ The General Data Protection Regulation in respect of the use of access logs maintained by the College.

1. To keep access logs secure and controlled by authorised personnel.
2. To maintain all electronic door lock equipment in working order.
3. To provide retention of access logs within the stated purpose only.
4. To prevent access by unauthorised individuals or third parties.

The system is operated by the College and is in use all year round. The Bursar has overall responsibility for the implementation and use of the system. The IT Director and IT department ensures all equipment is maintained and in a suitable condition. The Porters, Tutorial, Finance, International Programmes, and IT staff will interrogate the system. Operation of the system is restricted to those named above.

Staff who use the electronic door lock system have the following responsibilities:

1. To uphold the arrangements of this Policy and Code of Practice.
2. To handle logs and data securely and responsibly, within the aims of the Policy and Code of Practice.
3. To be aware that they could be committing a criminal offence if they misuse personal data.
4. To uphold the recorded procedure for subject access requests.
5. To report any breach of procedure to the Bursar.
6. To attend training / refresher sessions as required.

### Installation of the Electronic Door Locks

Prior to any electronic door lock installation the IT Director and the Data Protection/GDPR Officer will ensure that the installation complies with the Data Protection Act 1998/The General Data Protection Regulation and the Electronic Door Lock Policy and Code of Practice. It is essential that the location of the equipment is carefully considered.

### Processing live access logs

The following procedures concern the viewing and use of the live access audit in response to a live or on-going event in the College.

1. The Porters Lodge, Tutorial, Finance, and IT staff may directly view the live access logs from any and all electronic door locks during their working hours.
2. No recordings or copies of historic or live logs are permitted; if this is necessary then the following policy for accessing historic access logs must be followed.

### Processing historic access logs

The following procedures concerning the use and retention of access logs should be followed in order to provide an acceptable level of security and accountability, and to ensure the acceptance of access logs in support of criminal proceedings.

1. Access logs for all electronic door locks are retained on the door access server indefinitely.
2. Access logs for all electronic door locks are also retained in the Colleges databases indefinitely.
3. If an incident occurs and it is thought that the access logs has some evidence on it, in general, permission must be sought from two authorised College Officers, or one authorised College Officer and the Head Porter or the Data Protection/GDPR Officer before the logs are viewed. Authorised College Officers in this regard are the Dean, the Senior Tutor, the Bursar or the Graduate Tutor.
4. Requests must be recorded on the Electronic Door Lock Access Request form (Appendix B).
5. Once a valid request has been made the IT department will process the logs and generate a copy of the relevant entries.
6. All viewings of logs must be logged in the Electronic Door Lock Log held in the IT Department.

7. If any evidence is found, the copy of the relevant part of the logs will be stored on a common digital media. An Electronic door lock log form should then be completed and placed with the digital media in a sealed envelope, and handed to the Head Porter as soon as possible.
8. The Head Porter, or a nominated deputy, should mark each item of digital media with a unique reference number.
9. All digital media will be securely stored in the Porter's Lodge until they are passed to a Police Officer, or no longer needed.
10. The IT Department is responsible for destroying all digital copies when they are no longer needed for evidence. Digital copies should be destroyed, by appropriate means for the specific media and disposing of them in the confidential waste container. Each disposal should be noted in the Electronic Door Lock Log (Appendix C).
11. The Director of IT, or a nominated deputy, is responsible for ensuring that the Electronic Door Lock Log is kept up to date.

### Access to and Disclosure of Logs to Third Parties

Access to, and disclosure of, logs is restricted and carefully controlled to ensure privacy of individuals, but also to ensure that the continuity of evidence remains intact should the logs be required for evidential purposes.

IT staff need access to the logs for the purpose of maintaining the electronic door lock system. Individuals requesting access to logs from an electronic door lock should be asked to complete a Subject Access Request Form (Appendix A). Any request by a third party to view an electronic door lock logs **must be approved** by the Data Protection/GDPR Officer in consultation with the Bursar, who will determine whether disclosure is appropriate and whether there is a duty of care to protect the personal data of any third parties. Disclosure requests should be addressed to the Data Protection/GDPR Officer. Logs will be provided within 30 calendar days of receiving a request.

Once this has been actioned the details should be noted in the Electronic Door Lock Log (Appendix C) held in the IT Office. Any digital media that is requested by the Police in connection with a criminal enquiry will be released against an Officer's signature and the completion of Police Access Request and Recording Register (Appendix B), after authorisation by the Bursar in connection with staff matters and by the Senior Tutor in respect of students.

On no account may access logs be viewed by any unauthorised person, or removed from the Porter's Lodge without the specific approval of the College Proctor, Senior Tutor, Data Protection/GDPR Officer, Bursar or Head Porter. Staff will be informed that any misuse or unauthorised access of live access logs or historical logs will be considered as a serious disciplinary matter.

If the College is asked to retain a recording for evidential purposes, the Head Porter will take possession and securely store the relevant digital media for as long as is required, which would normally be until one month after the finalisation of any court proceedings.

### Complaints Procedure

Any individual who has concerns about the Electronic Door Lock system or the control of it at Pembroke College is requested to write to the Bursar or the Data Protection/GDPR Officer outlining the reason for the complaint. The College will accept electronic (e-mail) correspondence.

### Information and Training

A copy of this Policy and Code of Practice will be published on the College website and in the Staff Handbook. All Porters will be trained in the practical use of the Electronic Door Lock system.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

## SUBJECT ACCESS REQUEST FORM

APPENDIX A



### PEMBROKE COLLEGE - CAMBRIDGE

#### SUBJECT ACCESS REQUEST FORM

Under the terms of the Data Protection Act 1998/ The General Data Protection Regulation an individual has the right to request a copy of any personal information held about them by Pembroke College, whether it is in hard copy, or electronic. Should you wish to exercise your right in requesting disclosure of your data please complete this form, providing as much information as possible.

Please note that any request by a third party to view access logs must be approved by the Data Protection/GDPR Officer, who will determine whether disclosure is appropriate and whether there is a duty of care to protect the data of any third parties. Access logs will be provided within 30 calendar days of receiving a request.

#### 1. PERSONAL DETAILS

Applicant's full name:

Applicant's postal address:

Applicant's email address:

#### 2. INFORMATION REQUIRED

To help us find the access log data you require, please complete the following section.

Location/position of Electronic Door Lock:

Date log taken:

Time log taken:

Brief description of the applicant's details and likely activities captured by the access log:

Please give any other information that might assist us in finding the information required:

Do you require a hard copy of the log or would "viewing" the log be sufficient?

Hard copy

Viewing

#### 3. DECLARATION

Delete as applicable.

- I confirm that all of the information I have provided is correct and that I am the Data Subject.
- I confirm that I am acting on behalf of the Data Subject and have attached proof of my authority to do so.

Name:

Postal address:

Email address:

Signed:

Date:

#### 4. PROOF OF IDENTITY

If you are applying on someone else's behalf, please attach documented authority to act on the data subject's behalf.

#### 5. SUBMITTING A REQUEST

After completing the application form, please check to ensure that all the information you have provided is accurate and all the required documents and the fee are attached.

Please return the application form to the Data Protection/GDPR Officer, Pembroke College, Cambridge CB2 1RF.

#### ACCESS REQUEST AND RECORDING REGISTER



## PEMBROKE COLLEGE – CAMBRIDGE

## ACCESS REQUEST AND RECORDING REGISTER

Data Protection Act 1998/The General Data Protection Regulation – Disclosure of Personal Data under Section 29(3) of the Data Protection Act 1998/The General Data Protection Regulation.

<b>Description of Incident / Person(s) involved:</b>	<b>Door or Doors Location:</b>
<b>Date of incident:</b>	<b>Approximate time of incident (24 hours):</b>
<b>Name of person who requested to view the logs:</b>	<b>Signature:</b> <b>Date of request:</b>
<b>Contact Telephone Number:</b>	<b>Email:</b>
<b>Name of person who recorded the log(s) onto digital media:</b>	<b>Signature</b>
<b>Date logs were recorded:</b>	<b>Disc reference number:</b>
<b>Name of person who received the log(s):</b>	<b>Signature:</b> <b>Date received:</b>
<b>Name of person who received the log(s):</b>	<b>Signature:</b> <b>Date received:</b>

## ACCESS REQUEST AND RECORDING REGISTER

### APPENDIX B



### PEMBROKE COLLEGE – CAMBRIDGE

### ACCESS REQUEST AND RECORDING REGISTER

Data Protection Act 1998/The General Data Protection Regulation – Disclosure of Personal Data under Section 29(3) of the Data Protection Act 1998/The General Data Protection Regulation.

<b>Description of Incident / Person(s) involved:</b>	<b>Door or Doors Location:</b>
<b>Date of incident:</b>	<b>Approximate time of incident (24 hours):</b>
<b>Name of person who requested to view the logs:</b>	<b>Signature:</b> <b>Date of request:</b>
<b>Contact Telephone Number:</b>	<b>Email:</b>
<b>Name of person who recorded the log(s) onto digital media:</b>	<b>Signature</b>
<b>Date logs were recorded:</b>	<b>Disc reference number:</b>
<b>Name of person who received the log(s):</b>	<b>Signature:</b> <b>Date received:</b>
<b>Name of person who received the log(s):</b>	<b>Signature:</b> <b>Date received:</b>



**ELECTRONIC DOOR LOCK LOG**

**APPENDIX C**

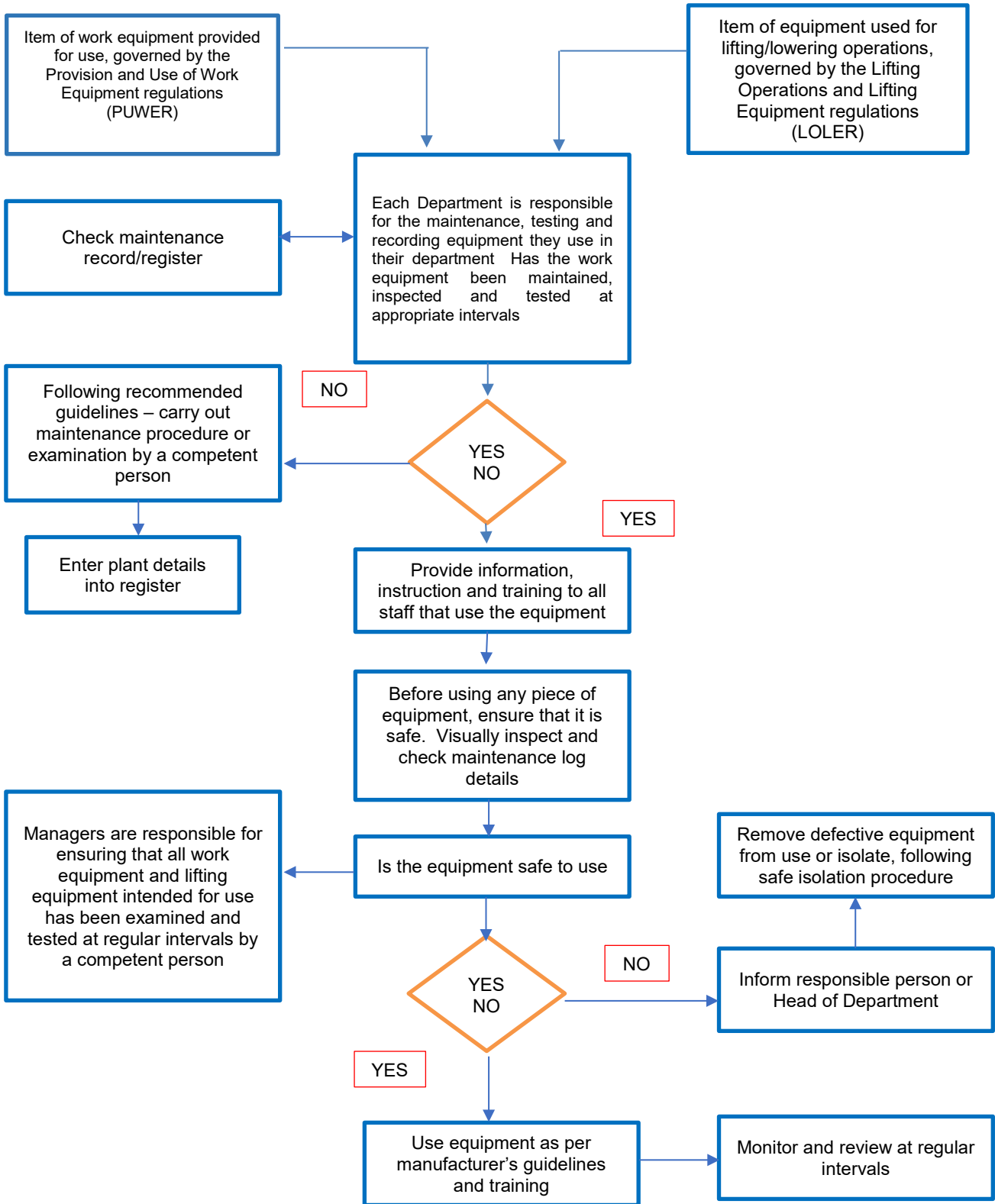


**PEMBROKE COLLEGE - CAMBRIDGE**

**ELECTRONIC DOOR LOCK LOG**

<b>Date</b>	<b>Reason Viewed</b>	<b>Date Copied</b>	<b>Disc No</b>	<b>Date Destroyed</b>	<b>Signature 1</b>	<b>Signature 2</b>

# EQUIPMENT SAFETY PROCEDURE



## EQUIPMENT SAFETY POLICY

### Introduction

This policy is not contractual but sets out the responsibilities and arrangements to ensure that equipment is safe for all employees/workers. Equipment and furniture should only be used in the workplace for the purpose intended.

### Scope of this Policy

This policy covers all the necessary information and instructions surrounding equipment safety.

### Aims of this Policy

This policy is designed to provide employees and workers with information regarding equipment safety and to the possible risks involved if procedures/instructions are ignored.

The College will ensure, so far as is reasonably practicable, that:

- Safe systems of work are provided and maintained in such a way as to be safe and without risk to health.
- Arrangements are in place for safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Provision and Use of Work Equipment Regulations 1998 (PUWER 1998).
- The Health and Safety at Work etc. Act 1974 (with regard to the employer's duty to ensure, where practicable, the health and safety at work of its employees and their duty to take reasonable care for their own safety and that of others who may be affected by their acts or omissions).

### Procedures

In order to ensure the safety of employees and workers we will implement the following procedures with respect to the provision and use of work equipment.

- All work equipment will be purchased from reputable suppliers and where relevant reference will be made to the appropriate industry standard such as British Standards.
- Prior to the purchase of such equipment, due consideration will be given to its intended use, the location and method of use, the user/operator, as well as the likely health and safety risks associated with its use.
- Where equipment is purchased from new, it will be checked to ensure that it carries the CE mark (where appropriate) to indicate compliance with European safety requirements and that it is supplied with any Declaration of Conformity/Incorporation and user's manual.
- Where equipment incorporates dangerous parts such as rotating components, we will ensure that these are provided with guards or other protective devices and that a safe system of work is implemented in its use.
- Where work equipment requires installation, it will be installed and inspected by a competent person prior to use to ensure that it is safe to use.
- Work equipment will be maintained in accordance with manufacturer's instructions to ensure that it remains in efficient working order and is safe.
- Work equipment will only be used for operations and under conditions for which it is suitable.
- Users or operators of work equipment will be provided with adequate health and safety information and training. Where appropriate, written instructions will be provided for the safe use of equipment.
- Any damaged equipment will be reported at the first opportunity, removed from service, clearly marked as damaged and will remain out of service until fully repaired by a competent person.

### Office Furniture

Defective furniture or misuse of chairs or filing cabinets by office workers can lead to serious injuries. Listed here are controls related to chairs and cabinets:

- Chairs should be properly designed and regularly inspected for missing casters, shaky legs and loose parts.
- Do not lean back in a chair with your feet on a desk.
- Never stand on a chair to reach an object.
- Open only one filing drawer at a time.
- Furniture should only be used for the purpose intended.

### Office Machinery

Machines with ingoing or rotating parts, such as shredders, can cause lacerations, abrasions, fractures, and amputations if not adequately guarded. Machines such as paper shredders with hazardous moving parts must be guarded so that office workers cannot contact the moving part.

Fans must have a substantial base and fan blades must be properly guarded.

### Office Tools

Misuse of office tools, such as pens, pencils, paper, letter openers, scissors and staplers can cause cuts, punctures and related infections. Injuries can be reduced by following precautions listed below when using these materials:

- Paper cutters. A guard should be provided and fingers should be kept clear.
- Staplers. Always use a staple remover. Never test a jammed stapler with your thumb.
- Pencils, pens, scissors, etc. Store sharp objects in a drawer or with the point down. Never hand someone a sharp object point first.

## Photocopying Machines

Potential health hazards associated with photocopying machines include:

- Toxic chemicals.
- Excessive noise.
- Intense light.
- Paper jams - instructions indicated to you on the machine should be followed.

Photocopying machines can also be a source of indoor air pollution especially when used in smaller offices that are not well ventilated.

Use the controls below to reduce hazards:

- Keep the document cover closed.
- Reduce noise exposure by isolating the machine.
- Place machines in well-ventilated rooms away from workers' desks.
- Have machines serviced routinely to prevent chemical emissions.
- Avoid skin contact with photocopying chemicals.
- Clean all spills and dispose of waste properly.

## Ladders, Stands and Stools

Ladders are inspected regularly at the College by a competent person. Improper use of ladders, ladder stands and stools can lead to falls. In accordance with the Working at Height Regulations the following controls will help reduce ladder related injuries.

- Before use ensure the ladder has the correct inspection colour. If you are in doubt what colour is currently "in date" please contact the Maintenance Department.
- Workers should always face the ladder when climbing up or down it.
- The top of the ladder should not be used as a step.
- Ladders must only be used when they are fully open and the spreaders are locked.

## Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices. Employees will be consulted about any proposed changes, and adequate notice given of these.

## **FIRE SAFETY AND EMERGENCIES POLICY**

### **Introduction**

It is our responsibility to provide a safe place of work, to identify any fire risks, to put measures in place to minimise these and to ensure the safety of everyone concerned in the event of a fire. We take these fire safety duties seriously.

This policy is not contractual but sets out how we plan to manage such issues.

### **Scope of this Policy**

This policy covers all employees, workers, contractors and agency workers, as well as visitors to our premises.

### **Aims of this Policy**

This policy aims to help us to comply with our legal obligations to provide a safe environment where the risks of fire are minimised as far as is practicable.

### **Legal Considerations**

The following piece of legislation applies:

- The Regulatory Reform (Fire Safety) Order 2005.

### **Employees Duties**

All employees have a duty to take reasonable steps to ensure that they do not place themselves or others at risk of harm. They are also expected to co-operate fully in complying with any procedures that we may introduce to protect the safety and well-being of our staff, students, Fellows and visitors.

Failure to comply with this policy may be treated as a disciplinary matter.

### **Procedures**

We have introduced the following procedures in order to maintain high standards of fire safety:

- Fire risk assessment are undertaken and reviewed every three years. However, more frequent reviews will occur if there are changes that will impact on its effectiveness. These may include alterations to the premises or new work processes.
- The fire evacuation procedures drill will be undertaken twice per year for overnight accommodation and once a year for non-residential accommodation.
- Where overnight accommodation and non-residential accommodation are shared the practice of two per year will be undertaken.
- Training will be provided, as necessary, to anyone who is given extra fire safety responsibilities (such as fire marshals).
- Sufficient employees will be trained in the safe use of fire extinguishers.
- All new joiners and temporary employees will be informed, as part of their induction training, of how to raise the alarm and the location of available escape routes.
- All escape routes will be clearly signposted and kept free of obstructions at all times.
- All fire-related equipment will be regularly serviced and maintained. If any employee notices defective or missing equipment, this must be reported immediately to Head Porter or Senior Porter.
- Alarm systems will be tested weekly. Employees, workers and visitors will be told when a test is scheduled.
- Any other safety systems (e.g. emergency lighting) will be checked regularly to ensure correct operation.

### **On Discovering a Fire**

Employees and workers who discover a fire should:

- Raise the alarm immediately.
- If trained and it appears safe to do so, attempt to control the fire using the equipment provided (however, this should not be attempted if it is potentially unsafe, or puts the individual or others at risk).
- If this fails, evacuate immediately.
- Ensure that no-one is left in the room and that the windows and door are closed behind the last person leaving.
- The Duty Porter will ensure that the fire service is called.
- Participate in ensuring everyone is safely accounted for.

### **On Hearing the Fire Alarm**

On hearing the fire alarm, all employees and workers should:

- Immediately operate any essential shutdown devices, e.g. machinery/gas shut off valves.
- Leave using the nearest available exit.
- Do not stop to collect personal belongings.
- Use the stairs, not the lifts.
- Report to the assembly
- Ensure that any visitors are accompanied out of the building, if able to do so.

### **Person in Charge of Office/Event**

The person in charge should:

- Gather all information regarding the evacuation.
- Establish if it is a genuine fire or false alarm.
- Ensure that the fire service has been called, if required.
- Liaise with the fire service or duty Porter on their arrival.

## **Communication**

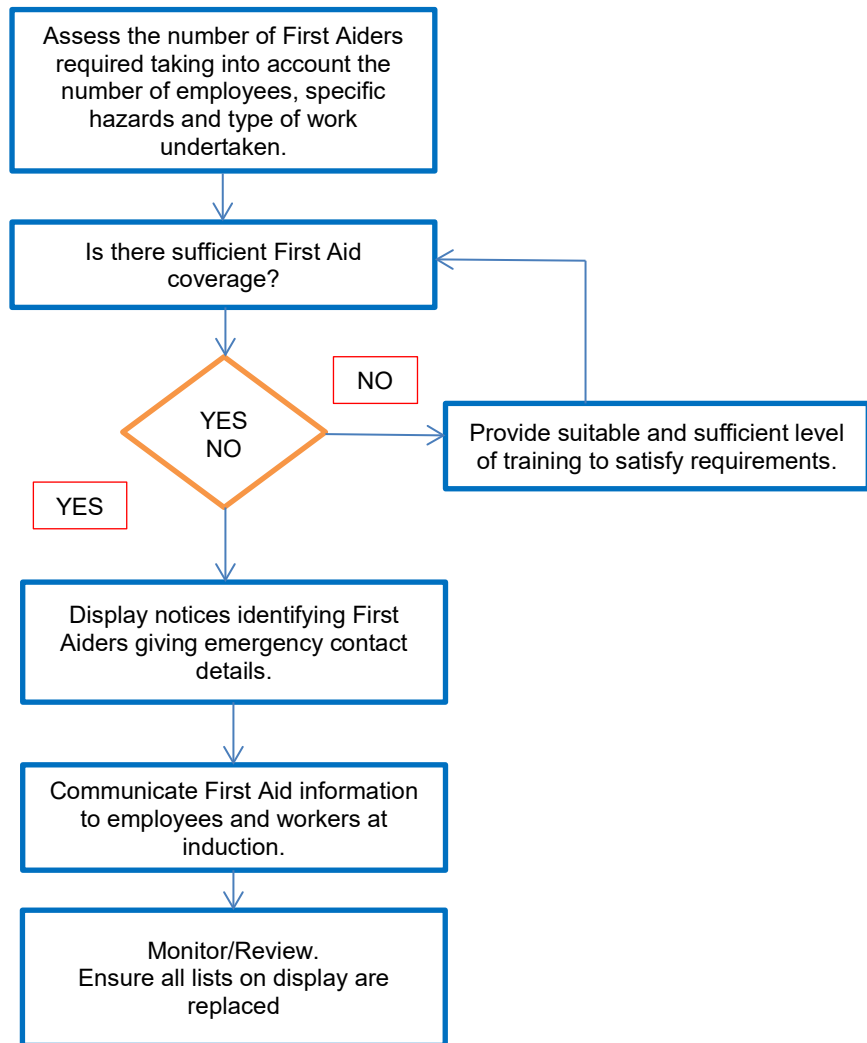
We will inform employees and workers of any changes to our fire safety procedures and fire risk assessment. We will also ensure that all visitors to our premises are briefed on the evacuation procedures and not left alone unless they are aware of, and familiar with, all available escape routes.

## **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

You can request to view/read the College Fire Evacuation Plan. Copy held in the Porters' Lodge.

## FIRST AID PROCEDURE



# FIRST AID AT WORK POLICY

## Introduction

As part of our general health and safety duties, we aim to ensure that appropriate first aid arrangements are in place.

This policy is not contractual but aims to set out how we manage the provision of first aid in the College.

## Scope of this Policy

This policy covers all employees, workers, contractors and agency workers, as well as visitors to our premises.

## Aims of this Policy

We aim to minimise risk by:

- Providing sufficiently trained first aiders (or appointed persons) to adequately meet our needs.
- Maintaining an adequate provision of first aid equipment and supplies.
- Providing enough information to employees to enable first aid assistance to be sought during normal working hours.
- Where work is regularly undertaken outside normal working hours, to provide adequate first aid cover.
- Periodically reviewing our risk assessment. This will determine what first aid facilities and personnel are necessary to meet the needs of the College. The risk assessment considers a number of factors, including the size of the College and its layout; past history of accidents; proximity to emergency medical services; the needs of travelling and/or lone workers, working patterns and first aid cover in times of sickness or annual leave.

## Legal Considerations

The following legislation applies to this policy:

- The Health and Safety (First-Aid) Regulations 1981.
- The Health and Safety (Miscellaneous Revocations and Amendments) Regulations 2013.

## Responsibilities of First Aiders

In order to carry out their duties effectively, first aiders have the following duties and responsibilities:

- To responding promptly to all requests for assistance.
- Summoning further help if necessary.
- Looking after the casualty until recovery has taken place or further medical assistance has arrived.
- Reporting details of any treatment provided.

## Procedures

The following general first aid related procedures are to be followed by all employees and workers:

- If anyone is taken ill or has an accident on our premises, a First Aider should be called to give assistance. No-one should attempt to give first aid treatment unless suitably qualified.
- No employee should use their private car to transport a casualty to hospital. If an ambulance is not required, a taxi is to be used and someone should accompany the casualty to the hospital.
- Anyone who needs access to a first aid kit for personal use should not remove it from its designated place
- Any loss or damage to first aid equipment must be reported to the College Nurse.
- If a first aid kit is not fully stocked, this should be reported to the College Nurse.
- The relevant First Aid Form should be completed by the First Aider and given to the HR Office.

The College vans have first aid kits.

## Visitors

Should a visitor feel unwell or have an accident, the employee supervising their visit should call for a First Aider/Appointed Person. If the visitor has had an accident, the supervisor is responsible for ensuring that an appropriate form is completed.

## Equipment

A First Aider or a nominated person will check the content of First Aid Boxes situated around the College. A reminder to check the First Aid Boxes will be sent twice a year by the HR/H&S Office.

Overleaf is a list of the recommended contents for First Aid Boxes. The College Nurse will replace any items out of date. Please contact her by e-mail on [sarah.winder-worsley@pem.cam.ac.uk](mailto:sarah.winder-worsley@pem.cam.ac.uk).

<b>Standard Box for 10 people should have</b>	<b>Standard Box for 20 or more people should have</b>
20 individually wrapped sterile adhesive dressings	40 individually wrapped sterile adhesive dressings
2 sterile eye pads	4 sterile eye pads
4 individually wrapped triangular bandages	6 individually wrapped triangular bandages
6 safety pins	12 safety pins
6 medium sized individually wrapped sterile wound dressings	9 medium sized individually wrapped sterile wound dressings
2 large sized individually wrapped sterile wound dressings	3 large sized individually wrapped sterile wound dressings
10 moist wipes	10 moist wipes
1 pair of latex gloves	2 pair of latex gloves
1 guidance leaflet	1 guidance leaflet



## **Defibrillator (Location: Porters Lodge and College Sportsground)**

The Defibrillator needs to be checked on a regular basis. A weekly check should be recorded online.

After every use of the defibrillator, the College Nurse needs to be contacted as soon as possible in order to arrange the replacement of used equipment.

## **Training**

All employees undertaking first aid duties will be given full training in accordance with current legal requirements. Where necessary, Heads of Department will be expected to organise shifts and rosters to enable employees to attend. We will do our best to ensure that sufficient notice of both initial training courses and any refresher training are given to Heads of Department to assist with this planning.

## **Information on First Aid Provision**

First aid arrangements will only operate efficiently where they are understood by employees and others who may be working on our premises.

For this reason, information on how to summon first aid is provided as part of our standard departmental induction. The names and contact details of first aiders/appointed persons are displayed on internal noticeboards and are updated to ensure accuracy. First aid boxes can be found in all departments, the Porters Lodge and in Hostels.

## **Disposal of Clinical Waste**

Body fluids can be a source of infection, therefore as a precautionary measure all soiled dressings must be placed in a yellow bag which can be provided by the Housekeeping Department. These bags need to be disposed of in the clinical waste bin in the Housekeeping Department/Surgery/Chimney Court. Please do not put sharps into bags.

- When administering first aid ensure that any cuts and abrasions on your skin are covered with waterproof dressing.
- Wash your hands and wear latex-free disposable gloves.
- Wear a disposable apron, if necessary.

### For small amounts of spilled bodily fluids:

- Use disposable paper towels to absorb any spilled bodily fluids and wipe down any contaminated furnishings and flooring. Contact Housekeeping department for further assistance, if necessary.
- Place soiled disposable towels, wipes, aprons and gloves into yellow sealed bag. This will be disposed of in the clinical waste.
- The spillage kits are available from the Housekeeping Department.

### For large amounts of spilled bodily fluids:

- Cordon off the area and contact the Housekeeping Department who will arrange for the appropriate area to be cleaned correctly.

## **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes in legislation or to our working practices.

## LONE WORKERS POLICY

### Introduction

Lone workers are those who work by themselves without direct supervision. This policy is not contractual but sets out the responsibilities and arrangements for such workers within Pembroke College and, where the lone worker is based at home, should be read in conjunction with our home working policy.

### Scope of this Policy

This policy covers all lone workers, including those who either work alone on separate premises, who work outside of our normal working hours (for example cleaners, security, maintenance or repair workers), those who travel to, and work outside the main College site and those who work from home. It may also include those who work normal working hours but who are physically isolated from other workers, e.g. Porters or College Nurse. It also includes those who travel abroad on College business.

### Aims of this Policy

This policy is designed to alert Heads of Department and workers to the risks presented by lone working, to identify individual responsibilities and to describe procedures designed to minimise the risks. It is not intended to overstate the risks of lone working but to give a framework for managing them.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work etc. Act 1974.
- The Management of Health and Safety at Work Regulations 1999.
- The Display Screen Equipment Regulations 1992.
- The Manual Handling Operations Regulations 1992.
- The Provision and Use of Work Equipment Regulations 1998.
- The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH).
- The Data Protection Act 1998/The General Data Protection Regulation.

### Responsibilities

Pembroke College has responsibility for the health, safety and welfare of all its employees and workers as well as the health and safety of those affected by their work, e.g. visitors and the self-employed.

These responsibilities extend to those who work alone on our behalf. It is our duty, through Heads of Department, to assess the risks to such workers and to take such steps as are necessary to avoid or control these.

Employees and workers have a duty to take reasonable care of themselves and others affected by their work and to co-operate with Heads of Department in meeting our legal obligations. This includes ensuring that their Heads of Department are constantly aware of their movements/work diaries to allow adequate supervision.

Employees should:

- Report any incidents or failings of safety practice.
- Maintain professional standards and adhere to the code of conduct.
- Keep to recommendations and guidelines.
- Complete a post-trip review if they encounter problems whilst travelling abroad on business for Pembroke College.

### Lone Worker Reporting System

If staff work alone in College outside usual office hours Monday to Friday 7.30am – 6.30pm or Saturday/Sunday (any time) they should telephone the Porters Lodge 01223 (3)38100 and report in. The Duty Porter will record the date and start time of the lone working, the worker's name, where they will be working, and appropriate contact detail. The lone worker must give an expected finish time, if they are able to do so. Before the expected finish time or when actually finished, the worker should "check back in" with the Porter who will record the actual finish time and sign to complete the record. If working alone for more than 4 hours, the worker must "check in" with the Porter's Lodge at least every 4 hours. Library Supervisors are deemed exempt from this ruling as they do not work alone in the Library.

If the worker fails to "check back in" by the time the Porter finishes their shift, they should try to make phone contact with the worker. If they cannot be reached, the Porter must take whatever steps are necessary to determine whether or not the worker is safe. Lone workers who fail to check back in when they should, causing unnecessary alarm, will be reported to HR.

### Assessing and Controlling the Risk

There are no legal restrictions on working alone, but the Health and Safety at Work etc. Act 1974 (HASAWA) and the Management of Health and Safety at Work Regulations 1999 apply. These lay a responsibility upon the employer to identify any hazards, assess the risks involved and put measures in place to avoid or control risks.

The HR Office will carry out a risk assessment of each lone worker. The risk assessment will be prepared in consultation with the individual, the H&S Officer for Pembroke College and the H&S Consultant, and will be recorded in writing so that it may easily be reviewed.

We will aim to ensure all relevant hazards are identified and appropriate control measures put in place, including proper instruction, training, supervision and protective equipment.

The risk assessment will determine the correct level of supervision. Where it indicates there is a risk to the safety of a lone worker, but the work is still to be done by one person, the Head of Department/Line Manager will make arrangements to provide help or back up when necessary. Under no circumstances is a lone worker authorised to undertake high risk activities for which an additional person is required to be present (such as working in a confined space or electrical work near live conductors). Where there is any reasonable doubt about the safety of a lone worker in a given situation, consideration should be given to sending a second worker or making other arrangements to complete the task.

All employees working alone who are mobile should be contactable by either a personal mobile phone or one issued by the College. If a lone worker discovers a building has been broken into, they must not enter alone but should contact the Porters Lodge at the College.

### **Safe Working Arrangements**

When establishing safe working arrangements for lone workers we will firstly consider whether one person can adequately control the risks of the job. Precautions should take account of normal work and foreseeable emergencies, e.g. fire, equipment failure, illness and accidents.

In particular, we will consider the following:

- Does the workplace present any special risk to the lone worker?
- Are alarm systems regularly tested?
- Is there safe access in and out for one person? Can any temporary access equipment such as a ladder be safely handled by one person? Is a key code required for access? If so, is this changed regularly?
- Can all the equipment, substances and goods involved be handled safely by one person?
- Are telephones and first aid boxes accessible in an emergency situation?
- Are personal contact details kept confidential, such as location, email address and telephone number? Employees will be warned that even ex-directory numbers may display on phones with caller-ID so care must be taken to keep the number private.
- Travel: journey time, driver fatigue, vehicle suitability, distance, remoteness of destination and general location of destination.
- Could the employee experience problems such as lack of a mobile phone signal? If so, what other means of communication are available?

### **Individual Considerations**

Once the role has been fully assessed, we will consider whether the individual worker is fit and suitably experienced to work alone, and whether they have any medical condition which may create a risk if working alone.

It is important that any existing medical conditions which may make workers unsuitable for working alone are properly considered. Where necessary, advice will be provided by a medical practitioner appointed by Pembroke College.

### **Training**

Training is particularly important where there is limited supervision to control, guide and help in situations of uncertainty. Training may be critical to avoid panic reactions in unusual situations.

To work alone employees and workers must be sufficiently experienced and fully understand the risks and precautions of each task they undertake. Heads of Department will set limits as to what can and cannot be done while working alone and should ensure employees under their control are familiar with the warning signs of a potential risk; are aware of the location of emergency exits and first aid facilities, and are competent to deal with circumstances which are new, unusual or beyond the scope of training. Employees and workers should be advised of the types of circumstance when they should stop work and seek advice, how to handle aggressive/difficult individuals or when the emergency services should be called.

### **Supervision for Lone Workers Working from Home**

The extent of supervision required will depend upon the tasks involved and the ability of the lone worker to identify and handle health and safety issues. The level of supervision required will be a management decision based on the findings of the risk assessment.

Procedures to be put in place to monitor lone workers to ensure the safety of the employee and the College include:

1. Periodic visits from Heads of Department/Supervisors or the HR Manager.
2. Regular contact via telephone/email as appropriate.
3. A full detailed record of travel/working hours/appointments with regular checks of the lone worker.
4. An agreed plan of action should a worker fail to report in as required.
5. A report to be completed following any incidents so that lessons can be learnt and control measures implemented.
6. Support mechanisms readily available for lone workers affected by an incident.

### **Illness and Accident**

Lone workers must report any illness or accident, however minor, to their Head of Department/Line Manager. Emergency procedures should be established and appropriate training given.

### **Employers' Liability Insurance**

All lone workers will be insured against workplace injury or disease under our Employers' Liability Insurance.

### **Related Policies and Documents**

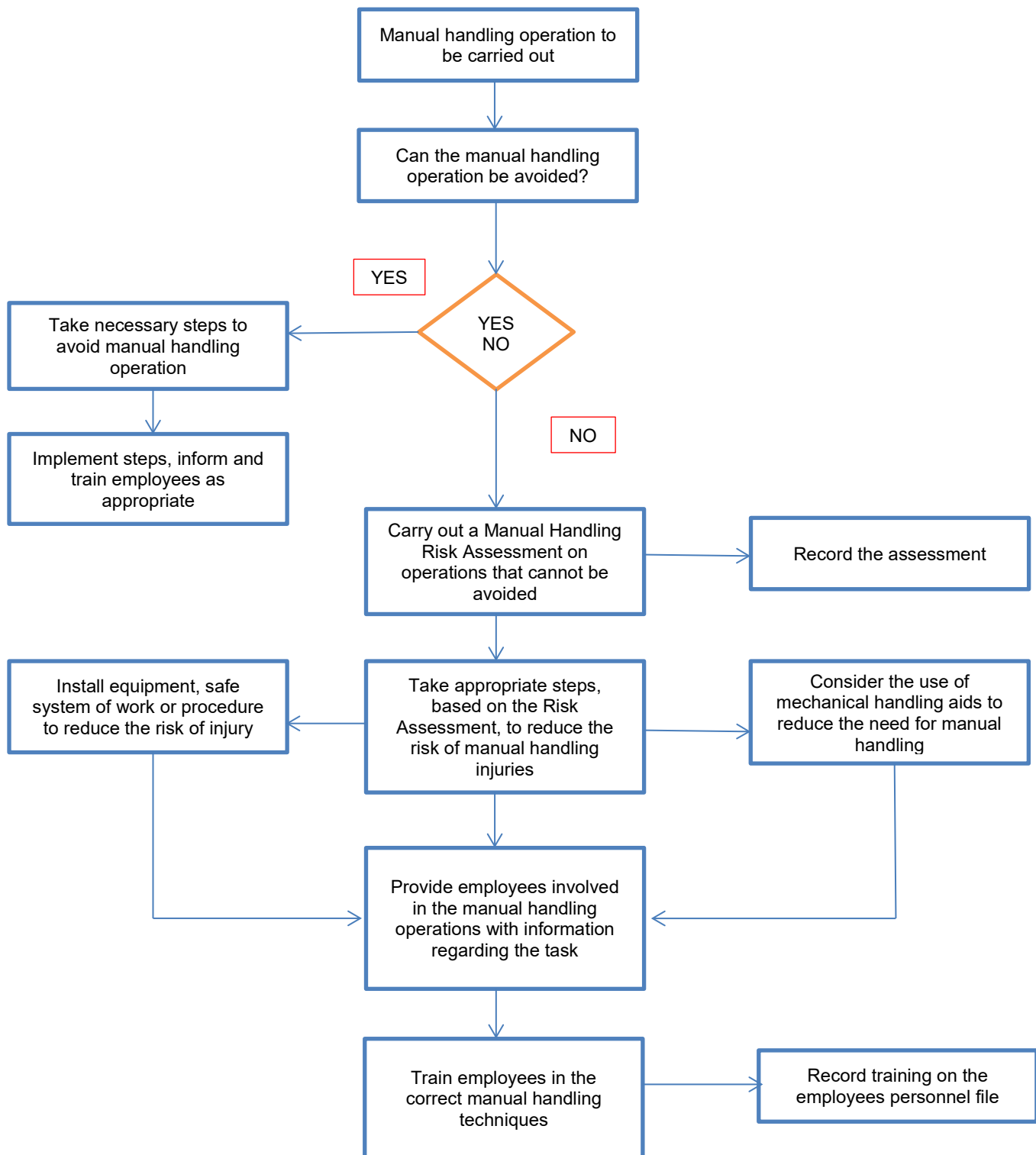
We also have the following related policies and documents: Health and Safety Policy; Violence at Work Policy.

### **Implementation, Monitoring and Review of this Policy**

This policy will take effect from insert June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

# MANUAL HANDLING PROCEDURE

## Procedure for Manual Handling Operations



## MANUAL HANDLING POLICY

### Introduction

This policy is not contractual but sets out the responsibilities and arrangements for employees/workers within Pembroke College regarding Manual Handling of goods and equipment.

### Scope of this Policy

The College will ensure, so far as is reasonably practicable, that:

- Plant/equipment and safe systems of work are provided and maintained and are safe and without risks to health. Further, we will take all reasonable precautions to ensure the health and safety of our employees and other persons who may be affected by our work activities.
- All employees/workers will be suitably and sufficiently trained.

### Aims of this Policy

This policy is designed to alert employees and workers to the risks presented by manual handling. It is not intended to overstate the risks of manual handling but to give a framework for managing potentially risky situations.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work Act 1974 – Section 2.2, 7 and 8.
- The Management of Health and Safety at Work Regulations 1999 – Regulation 13.
- The Management of Health and Safety at Work Regulations 1999 – Regulations 5 and 14.

### What is “Manual Handling”?

The Manual Handling Operations Regulations (MHOR) 1992, which were amended in 2002 to the Regulations define Manual Handling as: “The transporting, supporting of a load including lifting, putting down, pushing, pulling or carrying of a load by hand or bodily force.

### Handling and Storage Hazards

Improper lifting can cause injuries such as sprains, strains, and inflamed joints etc. Office materials that are improperly stored can lead to hazards such as objects falling on workers, poor visibility, and fires. There are several controls which can reduce handling and storage hazards.

- Materials should not be stored on top of cabinets.
- Heavy objects should be stored on lower shelves and materials stacked neatly.
- Materials should be stored inside cabinets, files or lockers whenever possible.
- Materials must not be stored in aisles, corners, or passageways.
- Fire equipment should remain unobstructed.
- Flammable and combustible materials must be identified and properly stored.
- Material Safety Data Sheets must be provided for each hazardous chemical identified.
- An effective control programme incorporating employee awareness and training and ergonomic design of work tasks can reduce back injuries.

### Manual Handling Recommendations for Specific Departments

Improper lifting can cause musculoskeletal disorders such as sprains, strains, and inflamed joints. Manual Handling Risk Assessments must be carried out for all manual handling tasks. Revisit and recheck these assessments annually.

#### Housekeeping Department

- Do not carry any more than 2 bundles (sheets, towels etc.).
- Do not overload buckets. Carry only the necessary products.
- Do not attempt to carry buckets and other items in one hand.
- Empty vacuum cleaner bags regularly to reduce weight.
- Rubbish Bags – assess the weight, split loads into bags you can lift easily.
- When lifting heavy objects and working as a team, make sure one person gives directions. Lift from the hips at the same time to the desired height. Move smoothly together.

#### Catering Department

- Rubbish Bags – assess the weight, split loads into bags you can lift easily. Use the mechanical aid **provided to move bags from the Kitchen to the Bin Store. Do not overload this mechanical aid.**
- When lifting heavy objects and working as a team, make sure one person gives directions. Lift from the hips at the same time to the desired height. Move smoothly together.
- Seek assistance when carrying heavy loads containing hot food.

#### All Departments

- Manual handling assessments will be conducted prior to the handling of heavy or awkward loads.
- Assisted/team lifting is encouraged in preference to individual lifting.
- Use mechanical aids whenever possible.

### **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## MATERNITY, ADOPTION AND PATERNITY

### Introduction

Pembroke College Maternity, Adoption and Paternity Policy can be found in the Staff Handbook, please refer to this document for further information.

All employees have the right not to suffer any detriment on the grounds of pregnancy, childbirth, for taking maternity, adoption, paternity or shared parental leave or seeking to take this. We comply with all statutory requirements and offer benefits that are in line with the statutory benefits scheme.



## NOISE POLICY

### Introduction

This policy is not contractual but sets out the responsibilities and arrangements for such employees/workers within Pembroke College and, where an employee or worker is at risk of noise at work.

### Aims of this Policy

This policy is designed to alert employees and workers to the risks presented by noise at work, to identify individual responsibilities and to describe procedures designed to minimise risks.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Noise at Work Regulations, 1989.
- The Health and Safety at Work Act, 1974 (HASAWA).
- The Control of Noise at Work Regulations 2005.

New, tighter regulations (the Control of Noise at Work Regulations 2005), took effect on 6 April 2006, covering whole new sectors including the leisure industry, call centres etc. (but initially excluding the music and entertainment sectors which were exempted until April 2008).

The College will ensure, so far as is reasonably practicable, that:

- All employees or workers who require hearing protection is supplied with it and that they fully understand its limitations, when it must be used and how to replace it.
- Any areas of work where employees or workers are exposed to levels of noise above 80dB will be issued with the appropriate Personal Protective Equipment (PPE), which **MUST** be worn at all times.

### Risk Assessments

Where the daily personal noise exposure is likely to be 80dB(A) or above, a risk assessment of noise exposure will be completed by a "competent person". As a rough guide, a Noise Risk Assessment is generally required if the employee:

- Is surrounded by intrusive noise for most of the working day.
- Has to raise their voice to be heard by someone just two metres away, for at least part of the day.
- Uses noisy powered tools or machinery for more than 30 minutes each day.
- Causes impacts such as hammering, pneumatic impact tools etc.

Risk assessments should include sufficient information on both noise levels and work patterns to enable us to identify whatever action is necessary to reduce exposure and the number of employees affected by it.

Affected employees will be informed and given hearing protection (at no cost to the employee).

Should employees be likely to be exposed to noise averaging 80dB or more, Pembroke College will reduce either the level of the noise or the time the employee or worker is exposed to it. This may be achieved through:

- Job rotation.
- Changing machines and/or working methods.

Suitable records should be kept by the department once the assessment is completed, these records should be reviewed either when there has been a significant change in the work to which the assessment relates, or whenever there is reason to believe that the assessment is no longer valid.

### Hearing Checks

There is no statutory duty to have our employees hearing checked by compulsory audiometric testing. The facilities provided by the NHS are considered to be sufficiently compliant with the original EC directive concerning audiometric.

### Instruction and Training

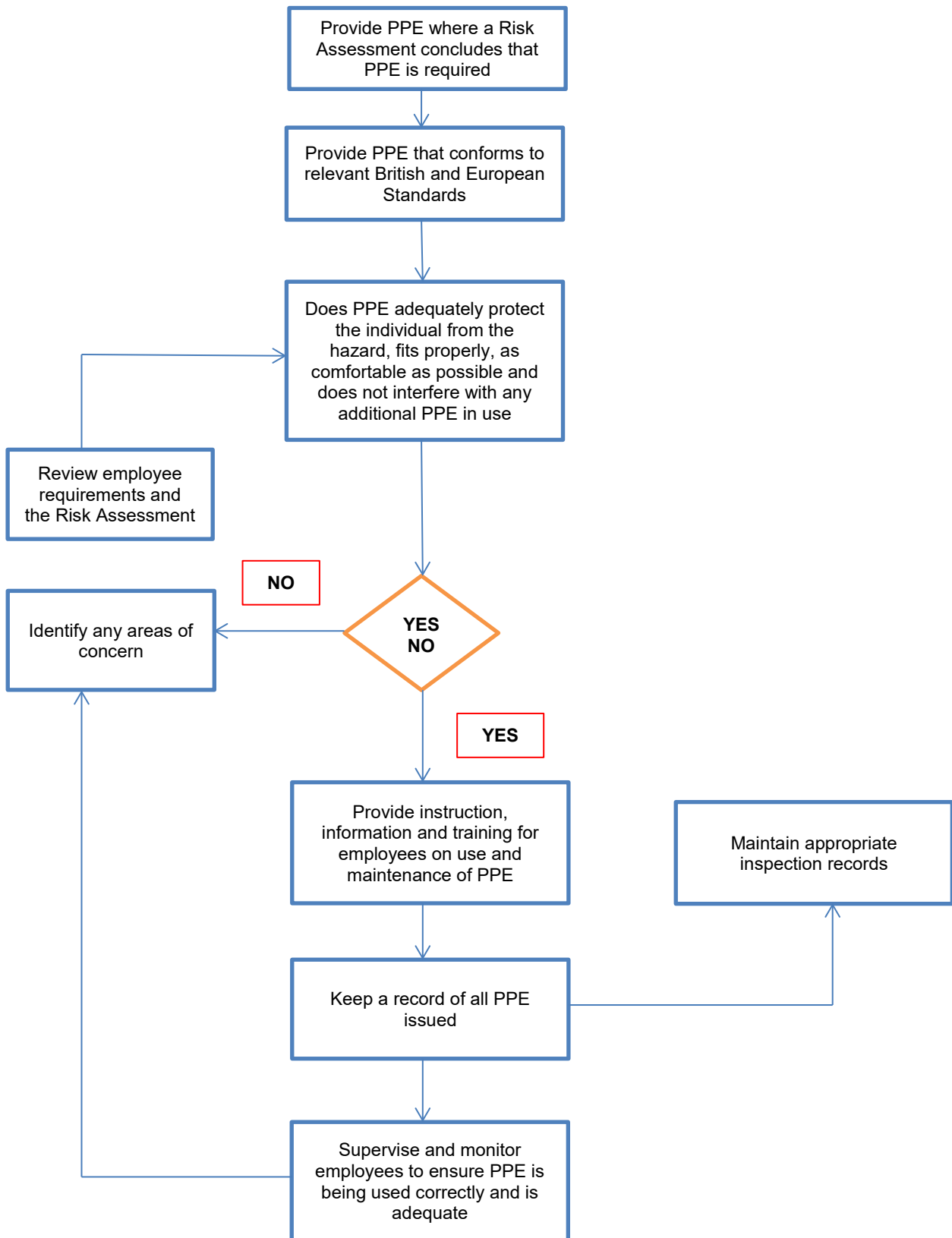
Pembroke College has a legal obligation to provide information, instruction and training to employees concerning occupational deafness. This will include guidance on:

- Risk of damage to hearing that exposure may cause.
- Possible action to minimise such risk.
- Steps to be taken by employees in order to obtain personal ear protection.
- Employees' obligations under the Regulations.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

# PERSONAL PROTECTIVE EQUIPMENT (PPE) PROCEDURE



## PERSONAL PROTECTIVE EQUIPMENT (PPE) POLICY

### Introduction

Whilst we take reasonable precautions to reduce exposure to any workplace hazards, there may still be a need for us to provide personal protective equipment (PPE) to our employees and workers where some risks remain that cannot otherwise be controlled.

Where the provision of Personal Protective Equipment (PPE) is necessary, it will be chosen in conjunction with our health and safety officer and consultancy. This will help us to ensure that we obtain the most suitable Personal Protective Equipment (PPE) for our employees' needs and avoid expenditure on equipment that is uncomfortable, unsuitable or a poor fit.

This policy is non-contractual but aims to set out how we manage the provision of Personal Protective Equipment (PPE) in our workplace.

### Scope of this Policy

This policy applies to all employees and workers. Our Personal Protective Equipment (PPE) rules do not, however, apply to people walking purely on a defined safe walking route through a building or site.

### Aims of this Policy

This policy aims to ensure compliance with Health and Safety legislation and to reduce any risk to our employees and workers.

The legislation requires us to provide Personal Protective Equipment (PPE) to any employee or worker who is exposed to risks to their health and safety, despite the introduction of other control measures. In some cases, the provision of Personal Protective Equipment (PPE) may be a set legal requirement, e.g. the provision of hard hats to construction workers.

### Legal Considerations

The following piece of legislation applies to this policy:

- The Personal Protective Equipment at Work Regulations 1992 (as amended).

### Procedures

When a need for Personal Protective Equipment (PPE) has been identified, e.g. through the introduction of a new working process, we will seek to initially obtain the required item(s) on a trial basis. This is to allow the end user(s) to assess suitability within our working environment and to ensure that the items can be maintained in an efficient state. Employees do not have to pay for any Personal Protective Equipment (PPE) issued to them.

Where Personal Protective Equipment (PPE) is required to be worn, this will be clearly defined in the risk assessment or by the Head of Department/Line Manager.

Whilst cost is obviously a factor, we recognise that the Personal Protective Equipment (PPE) needs to be suitable, not only for its intended purpose, but for the individual user. For this reason, our purchasing decisions will balance both cost and suitability for the individuals concerned. Any issues with the selected items (such as health problems, discomfort etc.) will be allowed for wherever possible in the selection of items, e.g. by purchasing an alternative item.

Items such as footwear and overalls will be provided to employees on a personal basis. However certain other items, such as disposable gloves, will be stored centrally. When these items are required, staff will be required to contact their Head of Department/Line Manager.

### Employee Responsibilities

Where a need to wear Personal Protective Equipment (PPE), whilst working with a particular process or in a certain area, has been identified, all employees are required to comply. Where Personal Protective Equipment (PPE) is mandatory, non-compliance will be treated as a potential disciplinary matter.

Employees are also expected to use and maintain any Personal Protective Equipment (PPE) issued to them in accordance with the manufacturer's instructions. If any defects are found, they should be reported to the relevant Head of Department/Line Manager as soon as possible.

Whilst Personal Protective Equipment (PPE) will be issued free of charge to employees, we do ask that such equipment is kept in good condition. Employees may be required to pay for the replacement of any items of Personal Protective Equipment (PPE) they lose or damage (other than through normal wear and tear) and will also be required to return their Personal Protective Equipment (PPE) on leaving our employment.

### Employee Training

Where necessary, we will provide instruction, information and training to staff on how to use and look after the PPE provided. This will include how to obtain it and the process for reporting any suspected defects.

### Breach of this Policy

Any breach of this policy will be regarded as a serious matter and will be dealt with under our disciplinary procedure.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.



## RISK ASSESSMENTS POLICY

### Risk Assessment Strategy

Outlined below is the College's Risk Assessment Strategy and details the main prevention and protective measures required to reduce risks.

The ways in which risks can be reduced are many, but start with the College's intention to comply with the Health and Safety at Work Act 1974 and its supporting Acts and Regulations, in particular the Management of Health & Safety at Work Regulations 1999.

Hazards identified, arising out of the College's activities, include:

- Fire.
- Machinery and Equipment.
- Hazardous Substances.
- Slips, Trips and Falls.
- Working at Height.
- Noise.
- Manual Handling.
- Motor Transport.
- Electricity/Gas.
- Vibration.
- Asbestos.
- Display Screen Equipment.
- Personal Injury.
- Activities involving young persons under the age of 18.

The risk associated with the various hazards identified depends on the employee's particular task. However, as some tasks are only allocated to certain workers, normally those trained to carry out the tasks, exposure to the hazards associated with the tasks will be limited to those employees who have the knowledge, skill and experience to understand the hazards and guard against them.

In general terms risks will be reduced by the following policies and arrangements:-

- A positive attitude towards health and safety from all staff and members of the College, supported by the statements made in these policy's:
  - Obligations of College Governing Body.
  - Health and Safety Policy Statement.
- The College managing health and safety on a structured basis, including a formal health and safety committee, with employees nominated to undertake certain health and safety responsibilities and tasks.
- The establishment of formal arrangements for self-monitoring and inspection of the College's premises, systems, machinery, equipment, etc. and of a system of reporting to the Health and Safety Officer and/or Heads of Department.
- Removing the hazard by substitution.
- Combating risks at source.
- Adapting work where possible to suit the individual employee.
- Utilising technological developments to improve and make safer the College's working practices.
- Progressively examining and identifying means of reducing risks that cannot be altogether prevented.
- Giving priority to measures that protect the whole workplace and all those who work in it.
- By training employees in health and safety awareness with respect to their own tasks and responsibilities.
- By the development of a pro-active health and safety culture.

In addition to approving general measures designed to identify hazards and reduce risk, the College will seek the advice when necessary of a competent person or authority in order to determine and assess hazards and to carry out particular risk assessments.

Health and safety awareness is to be integrated within the College's overall management arrangements and includes the following four main elements, planning, organisation, control and monitoring.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## HOW TO COMPLETE A RISK ASSESSMENT



### PEMBROKE COLLEGE

## HOW TO COMPLETE RISK ASSESSMENTS

### 5 STEPS TO RISK ASSESSMENT

<b>STEP 1</b>	<b>Identify the hazards</b>
<b>STEP 2</b>	<b>Decide who might be harmed and how</b>
<b>STEP 3</b>	<b>Evaluate the risks and decide on precautions</b>
<b>STEP 4</b>	<b>Record your findings and implement them</b>
<b>STEP 5</b>	<b>Review your assessment and update if necessary</b>

<b>Step One</b>	<p><b><u>IDENTIFY THE HAZARD</u></b> How could people be harmed:</p> <ul style="list-style-type: none"> <li>• Walk around and look at what could reasonably be expected to cause harm.</li> <li>• Ask staff what they think. They may have noticed things that are not immediately obvious to you.</li> <li>• Check with trade associations, manufacturers' instructions or data sheets for chemicals and equipment as they can be very helpful in spelling out hazards and putting them in their true perspective.</li> <li>• Look back at accident and ill-health records. They often help identify the less obvious hazards.</li> <li>• Think about long-term hazards to health (e.g. high levels of noise or exposure to harmful substances) as well as safety hazards.</li> </ul>
<b>Step Two</b>	<p><b><u>DECIDE WHO MIGHT BE HARMED AND HOW</u></b></p> <ul style="list-style-type: none"> <li>• For each hazard think about who might be harmed. It will help you identify the best way of managing the risk. Identify groups of people, e.g. people working in the office/storeroom or passers-by.</li> <li>• In each case, identify how they might be harmed, e.g. what type of injury or ill health might occur, e.g. people putting boxes on shelves regularly might suffer back injury from repeating lifting of boxes.</li> <li>• Some workers have particular requirements, e.g. new and young workers, new or expectant mothers and people with disabilities may be at particular risk.</li> </ul>
<b>Step Three</b>	<p><b><u>EVALUATE THE RISKS AND ASSESS THE EXISTING PRECAUTIONS</u></b></p> <ul style="list-style-type: none"> <li>• Having identified hazard(s), decide what to do about them. The law requires you to do everything "reasonably practicable" to protect people from harm. You can work this out for yourself, but the easiest way is to compare what you are doing with good practice.</li> <li>• Look at what is already being done. Think about what controls are in place and how the work is organised, then compare this with good practice and see if there is more you should be doing to bring yourself up to standing. In asking yourself this consider:             <ul style="list-style-type: none"> <li>• Can I get rid of the hazard altogether?</li> <li>• If not, how can I control the risks so that harm is unlikely?</li> </ul> </li> <li>• When controlling risks, apply the principles below, and if possible in the following order:             <ul style="list-style-type: none"> <li>• Try a less risky option, e.g. switch to using a less hazardous chemical.</li> <li>• Prevent access to the hazard, e.g. by guarding.</li> <li>• Organise work to reduce exposure to the hazard, e.g. put barriers between pedestrians and maintenance work.</li> <li>• Issue Personal Protective Equipment (PPE), e.g. clothing, footwear, goggles etc. and provide welfare facilities, e.g. first aid and washing facilities for removal of contamination.</li> </ul> </li> <li>• Involve staff, so that you can be sure what you propose will work in practice and will not introduce new hazards.</li> <li>• Ask your staff if they can think of anyone you may have missed.</li> </ul>
<b>Step Four</b>	<p><b><u>RECORD YOUR FINDINGS AND IMPLEMENT THEM</u></b></p> <ul style="list-style-type: none"> <li>• Write down the results of your Risk Assessment and share them with your staff.</li> <li>• When writing down your results keep it simple, e.g.             <ul style="list-style-type: none"> <li>• Tripping over rubbish: bins provided, staff instructed, weekly housekeeping checks or</li> <li>• Trailing cables: cover trailing cables with suitable material to avoid a trip hazard or remove trailing cables by reorganisation of office set-up.</li> </ul> </li> <li>• Risk Assessments should be "suitable and sufficient". You need to be able to show that:             <ul style="list-style-type: none"> <li>• A proper check was made.</li> <li>• You asked who might be affected.</li> <li>• You dealt with all the significant hazards, taking into account the number of people who could be involved.</li> <li>• The precautions are reasonable and the remaining risk is low.</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>You involved other staff in the process.</li> <li>If you find that there are quite a lot of improvements that could be made, big and small, do not try to do everything at once. Make a plan of action to deal with the most important things first. Health and Safety Inspectors acknowledge the efforts of businesses that are clearly trying to make improvements.</li> <li>A good plan of action often includes a mixture of different things such as: <ul style="list-style-type: none"> <li>A few cheap or easy improvements that can be done quickly, perhaps as a temporary solution until more reliable controls are in place.</li> <li>Long-term solutions to those risks most likely to cause accidents or ill health.</li> <li>Long-term solutions to those risks with the worst potential consequences.</li> <li>Arrangements for training employees on the main risks that remain and how they are to be controlled, e.g. regular checks to make sure that the control measures stay in place, and clear responsibilities – who is responsible for the action and by what deadline.</li> </ul> </li> </ul>																																																						
<b>Step Five</b>	<p><b>REVIEW YOUR ASSESSMENT AND REVISE/UPDATE IF NECESSARY</b></p> <ul style="list-style-type: none"> <li>Write down the results of your Risk Assessment and share them with your staff.</li> <li>When writing down your results, keep it simple, e.g. <ul style="list-style-type: none"> <li>Tripping over rubbish: bins provided, staff instructed, and weekly housekeeping checks.</li> <li>Trailing cables: cover trailing cables with suitable material to avoid a trip hazard or remove trailing cables by reorganisation of office set-up.</li> </ul> </li> <li>Speak to staff and ask if they can think of anyone you may have missed.</li> </ul>																																																						
<b>Scoring used in Risk Assessments</b>	<p>Below are the terms and risk calculations used for Risk Assessments at Pembroke College. You will notice they are colour coded to help identify high risk areas easily.</p> <p><b>TERMS DEFINED</b></p> <table border="1"> <thead> <tr> <th>Severity</th> <th>Score</th> <th>Likelihood</th> </tr> </thead> <tbody> <tr> <td><b>Fatality</b></td> <td><b>5</b></td> <td><b>Frequent</b></td> </tr> <tr> <td><b>Major</b></td> <td><b>4</b></td> <td><b>Regular</b></td> </tr> <tr> <td><b>Reportable</b></td> <td><b>3</b></td> <td><b>Occasional</b></td> </tr> <tr> <td><b>Minor</b></td> <td><b>2</b></td> <td><b>Remote</b></td> </tr> <tr> <td><b>Negligible</b></td> <td><b>1</b></td> <td><b>Very Rare</b></td> </tr> </tbody> </table> <p><b>RISK CALCULATIONS</b></p> <table border="1"> <tbody> <tr> <td><b>Fatality</b></td> <td><b>5</b></td> <td><b>10</b></td> <td><b>15</b></td> <td><b>20</b></td> <td><b>25</b></td> </tr> <tr> <td><b>Major</b></td> <td><b>4</b></td> <td><b>8</b></td> <td><b>12</b></td> <td><b>16</b></td> <td><b>20</b></td> </tr> <tr> <td><b>Reportable</b></td> <td><b>3</b></td> <td><b>6</b></td> <td><b>9</b></td> <td><b>12</b></td> <td><b>15</b></td> </tr> <tr> <td><b>Minor</b></td> <td><b>2</b></td> <td><b>4</b></td> <td><b>6</b></td> <td><b>8</b></td> <td><b>10</b></td> </tr> <tr> <td><b>Negligible</b></td> <td><b>1</b></td> <td><b>2</b></td> <td><b>3</b></td> <td><b>4</b></td> <td><b>5</b></td> </tr> <tr> <td></td> <td><b>Very Rare</b></td> <td><b>Remote</b></td> <td><b>Occasional</b></td> <td><b>Regular</b></td> <td><b>Frequent</b></td> </tr> </tbody> </table>	Severity	Score	Likelihood	<b>Fatality</b>	<b>5</b>	<b>Frequent</b>	<b>Major</b>	<b>4</b>	<b>Regular</b>	<b>Reportable</b>	<b>3</b>	<b>Occasional</b>	<b>Minor</b>	<b>2</b>	<b>Remote</b>	<b>Negligible</b>	<b>1</b>	<b>Very Rare</b>	<b>Fatality</b>	<b>5</b>	<b>10</b>	<b>15</b>	<b>20</b>	<b>25</b>	<b>Major</b>	<b>4</b>	<b>8</b>	<b>12</b>	<b>16</b>	<b>20</b>	<b>Reportable</b>	<b>3</b>	<b>6</b>	<b>9</b>	<b>12</b>	<b>15</b>	<b>Minor</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>8</b>	<b>10</b>	<b>Negligible</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>		<b>Very Rare</b>	<b>Remote</b>	<b>Occasional</b>	<b>Regular</b>	<b>Frequent</b>
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<b>Risk Assessment Form</b>	<p>The following columns appear on the Risk Assessment Form used at Pembroke College:</p> <p><b>Hazard</b></p> <ul style="list-style-type: none"> <li>First you must identify what it is that might be hazardous.</li> </ul> <p><b>Those Likely to be affected</b></p> <ul style="list-style-type: none"> <li>Who could be harmed by this hazard?</li> </ul> <p><b>Injury from hazard</b></p> <ul style="list-style-type: none"> <li>This is sometimes the most difficult question to answer. It is suggested you go for the worst case scenario, e.g. Electricity danger could result in a fatality.</li> </ul> <p><b>Current controls in place now</b></p> <ul style="list-style-type: none"> <li>Summarise existing safety measures in place.</li> </ul> <p><b>S Rating</b></p> <ul style="list-style-type: none"> <li>This covers the severity of the hazard, e.g. fatality, major, reportable, minor, or negligible.</li> </ul> <p><b>L Rating</b></p> <ul style="list-style-type: none"> <li>This is the likelihood rating, e.g. frequent, regular, occasional, remote, or very rare.</li> </ul> <p><b>Risk Rating</b></p> <ul style="list-style-type: none"> <li>This is S Rating x L Rating, severity x likelihood, e.g. if the severity is fatality (= 5) but the likelihood is very rare (=1) the total score is 5 x 1 = 5.</li> </ul> <p><b>Additional controls required</b></p> <ul style="list-style-type: none"> <li>This is where you list any further additional controls you feel are necessary to monitor the hazard or, if implemented, would improve on the current controls in place. An example might be "regular checks – every three months to be made". This is an additional extra control which shows you intend to monitor the hazard closely.</li> </ul> <p><b>Person Responsible</b></p> <ul style="list-style-type: none"> <li>This would indicate the person responsible for implementing and checking the additional controls suggested.</li> </ul> <p><b>Date</b></p> <ul style="list-style-type: none"> <li>This would indicate the date the additional control details were entered onto the Risk Assessment.</li> </ul>																																																						
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<ul style="list-style-type: none"> <li>• Indirect contact</li> <li>• Short circuit/overload</li> </ul>	<ul style="list-style-type: none"> <li>• Trailing leads</li> </ul>
<b>Health Hazards</b> <ul style="list-style-type: none"> <li>• Dermatitis</li> <li>• Respiratory</li> <li>• Sensitisers</li> <li>• Manual handling</li> <li>• Welding flash</li> <li>• Rays from the sun</li> </ul>	<ul style="list-style-type: none"> <li>• Ingestion of substances</li> <li>• Legionella</li> <li>• Food poisoning</li> <li>• Repetitive strain injuries</li> <li>• WRULDs (Workplace Related Upper Limb Disorders)</li> </ul>
<b>Security Hazards</b> <ul style="list-style-type: none"> <li>• Substations</li> <li>• Material stores</li> <li>• Highly flammable vaults</li> <li>• Valuable information</li> </ul>	<ul style="list-style-type: none"> <li>• Precious metals</li> <li>• Buildings after work</li> <li>• Computer installations</li> </ul>
<b>Substances/Materials Hazards</b> <ul style="list-style-type: none"> <li>• Chemicals (COSHH)</li> <li>• Fumes/vapours/mist</li> <li>• Dust/gases</li> </ul>	<ul style="list-style-type: none"> <li>• Lead</li> <li>• Asbestos</li> <li>• Vehicle exhausts</li> </ul>
<b>Fire and Explosion Hazards</b> <ul style="list-style-type: none"> <li>• Flammable liquids</li> <li>• Flammable dust</li> <li>• Combustible waste</li> <li>• Gas cylinders</li> </ul>	<ul style="list-style-type: none"> <li>• Flammable atmospheres</li> <li>• Smoking/naked flame</li> <li>• Ignition sources</li> <li>• Electrical overload</li> </ul>
<b>Working Environment Hazards</b> <ul style="list-style-type: none"> <li>• Noise</li> <li>• Ambient temperature</li> <li>• Hot/cold surfaces</li> <li>• Humidity</li> </ul>	<ul style="list-style-type: none"> <li>• Ventilation</li> <li>• Lighting (day and night)</li> <li>• Emergency Lighting</li> <li>• Cleanliness</li> <li>• Hygiene</li> </ul>
<b>Process Hazards</b> <ul style="list-style-type: none"> <li>• Methods of Work</li> </ul>	<ul style="list-style-type: none"> <li>• Storage of material</li> </ul>
<b>Environmental Hazards</b> <ul style="list-style-type: none"> <li>• Discharge to drains</li> <li>• Disposal of waste</li> <li>• Solvent emissions</li> <li>• Ground contamination</li> </ul>	<ul style="list-style-type: none"> <li>• Failure of bunds</li> <li>• Noise nuisance</li> <li>• Drain overflow</li> <li>• Spillages</li> </ul>
<b>Emergency Response Hazards</b> <ul style="list-style-type: none"> <li>• Plans</li> <li>• First Aid</li> </ul>	<ul style="list-style-type: none"> <li>• Blocked exits/gangways</li> <li>• Blocked vehicle access</li> <li>• Equipment faulty</li> </ul>
<b>People Aspects</b> <ul style="list-style-type: none"> <li>• Competent</li> <li>• Fit</li> <li>• Informed</li> </ul>	<ul style="list-style-type: none"> <li>• Disabilities/restrictions</li> <li>• Hazardous behaviour</li> <li>• Age</li> </ul>
<b>Place of Work Hazards</b> <ul style="list-style-type: none"> <li>• Access/Egress</li> <li>• Obstructed gangways</li> <li>• Falls of persons</li> <li>• Working at heights</li> <li>• Restricted height</li> <li>• Overhead loads</li> <li>• Falling objects</li> <li>• Stability of fixed equipment</li> <li>• Working above liquids</li> <li>• Work near water</li> <li>• Confined spaces</li> <li>• Lack of oxygen</li> </ul>	<ul style="list-style-type: none"> <li>• High risk area</li> <li>• Slips and trips</li> <li>• Falling objects</li> <li>• Holes/pits</li> <li>• Overhead cables</li> <li>• Underground cables</li> <li>• Housekeeping</li> <li>• Piped liquid and gas</li> <li>• Trench collapse</li> <li>• Demolition</li> <li>• Storage of materials</li> </ul>



## SLIPS, TRIPS AND FALLS POLICY

### Introduction

This policy is not contractual but sets out the responsibilities and arrangements for employees/workers within Pembroke College for Slips, Trips and Falls

### Scope of this Policy

The College will ensure, so far as is reasonably practicable, that all reasonable precautions are taken to ensure the health and safety of all employees and anyone on our premises in relation to slips, trips and falls.

### Aims of this Policy

This policy is designed to alert employees and workers to the risks presented by slips, trips and falls. It is not intended to overstate the risks of slips, trips and falls but to give a framework for managing potential risk situations.

### Legal Considerations

The following piece of legislation applies to this policy:

- The Workplace (Health, Safety and Welfare) Regulations 1992.

### Management Issues

Factors that prevent the effective management of slips, trips and falls are:

- People not taking the risks seriously.
- Little understanding of the causes of slipping and tripping.
- Thinking that slips, trips and falls are inevitable.
- Poor application of risk assessment and management controls.

Most incidents can be controlled provided they are afforded sufficient importance and attention is given to the nature of the work environment. Pembroke College will demonstrate it has effectively considered the risks and instituted suitable control measures including:

- Planning to identify potential problem areas.
- Training to ensure employees can identify and take action over potential risks.
- Make staff responsible for specific areas, especially Maintenance and Housekeeping.
- Controlling work practices and processes including cleaning and maintenance work.
- Monitoring and reviewing how measures are working.

### Preventing Slips, Trips and Falls

The prevention of slips and trips is based on the following factors:

- Spillages – prevent spillages becoming a trip hazard e.g. oil, wrappings, grease, water getting on to the floor by fitting drip trays under machines. To prevent slippery floor surfaces, use mats at entrances, as necessary. If you cannot prevent spillages constant cleaning of the affected areas is required.
- Obstacles – effective design and maintenance of walkways and traffic routes to eliminate trips. Good housekeeping and storage will eliminate obstacles, e.g. trailing cables, boxes, etc.
- Cleaning – regular and effective cleaning to remove contamination to reduce accidents. Ensure the cleaning process does not create a hazard.
- Environment – ensure that lighting is suitable, that condensation, rain or ice cannot contaminate the floor.
- Footwear – select appropriate footwear for the working environment. This will help reduce accidents.
- Hazard Reporting – staff are requested to report any hazards in the workplace to the Health and Safety Officer.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## SMOKING POLICY

### Introduction

Pembroke College aims to provide a working environment that is safe, which minimises any risks to health and which makes adequate arrangements for our employees' welfare whilst they are at work.

Employees who smoke may endanger not only themselves, but also others who do not smoke by passive smoking. Passive smoking (breathing other people's tobacco smoke) is now shown to cause lung cancer and heart disease in non-smokers, as well as many other illnesses and minor conditions. Inhaling other people's tobacco smoke is both a health hazard and a welfare issue. In addition, smoking can constitute a fire risk.

Pembroke College has adopted the following policy concerning smoking within the workplace. This policy is not contractual, but sets out how we intend to manage smoking within our environment.

### Scope of this Policy

This policy applies to all employees and workers, regardless of seniority and whether their work environment is shared with others. Visitors are also requested to refrain from smoking in non-smoking areas, as are any other people (e.g. contractors, temporary staff or students) working on our premises.

### Aims of this Policy

This policy seeks to guarantee to non-smokers the right to work in air that is free of tobacco smoke, whilst also taking account of the needs of those who do smoke.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health Act 2006.
- The Smoke-free (Premises and Enforcement) Regulations 2006.

In addition, employers have a common law duty to provide a safe place and system of work under the Health and Safety at Work etc. Act 1974 (HASAWA).

### Definitions

Section 1 of the Health Act 2006 defines smoking as "smoking tobacco or anything which contains tobacco, or smoking any other substance" and states that "smoking includes being in possession of lit tobacco or of anything lit which contains tobacco, or being in possession of any other lit substance in a form in which it could be smoked".

"Enclosed" means premises that have a ceiling or roof, and (excluding doors, windows and passageways) are wholly enclosed whether permanently or temporarily. Tents and marquees are therefore covered by this definition.

### Areas where Smoking is Prohibited

Smoking is prohibited in any enclosed area on our premises. This includes the reception area and entrances, corridors, stairs and lifts, meeting rooms, rest rooms, toilets and around the entrance to our premises. In addition, smoking is not allowed in any of our offices, student/Fellows rooms.

### Car Parks and Entrances

In many workplaces, those who smoke do so just outside the entrances and exits to the premises. We believe that this does not present a professional image. Employees and workers are therefore not permitted to smoke in the following areas: any car park, in the vicinity of College entrances, front and rear.

### Vehicles

Smoking is not permitted in the College Vans.

### Areas where Smoking is Allowed

Pembroke College provides two smoking/vaping areas for all employees and workers (see College Map).

Employees and workers may smoke within the designated areas but only during any recognised rest period or lunch break. Smokers will not be allowed longer or more frequent breaks than their non-smoking colleagues and use of the smoking areas must not interfere with their normal job performance.

The smoking area will be kept clean and well ventilated and smokers using this area are expected to keep it tidy and to dispose of any rubbish appropriately. Receptacles are provided for the disposal of cigarette ends and other waste smoking materials. Cigarettes, cigars and pipes must be extinguished, using the receptacles provided, and smokers should ensure that there is no risk of fire. These areas will be monitored to ensure an acceptable standard of housekeeping and adherence to safety. If not maintained properly, the facility may be withdrawn.

Failure to dispose of cigarette litter properly outside Pembroke College can result in the person being fined by the local authority. Refusal to pay can result in a court fine.

### Assistance to those who wish to cease Smoking

We recognise that passive smoking adversely affects the health of anyone subjected to this. We are not concerned with whether anyone smokes (which is a personal choice), but with where they smoke and the effect that this has on their non-smoking colleagues.

However, we recognise that some employees may wish to reduce or give up smoking, but may have difficulty in doing so. We endorse the use of any treatments or therapies recommended by a GP or cessation clinic. The College Nurse is also happy to assist employees if they wish to quit smoking. Free advice is available from the NHS smoking helpline and from its website: <https://www.nhs.uk/live-well/quit-smoking/nhs-stop-smoking-services-help-you-quit/>

### **Visitors, Contractors and Temporary Staff**

Visitors, suppliers, contractors and temporary staff are also all expected to comply with this policy. Employees who are meeting visitors, or who are responsible for temporary staff or contractors, are required to politely explain our policy and to ensure such people comply with it. Any refusal to comply with this should be immediately referred to the H&S Officer,

Appropriate "no smoking" signs will be displayed prominently at all entrances to our premises.

### **Enforcement of this Policy**

Smoking in an area other than one designated as a smoking area will be regarded as general misconduct and will be dealt with in accordance with our disciplinary procedure.

Employees and workers are entitled to complain if this policy is breached. No employee or worker shall suffer any detriment as a result of making such a complaint.

### **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## STRESS POLICY

### Introduction

Being under pressure often improves performance and can be a good thing, but when demands and pressures become excessive they may lead to stress, which can have an adverse impact on both working and personal lives.

We are committed to protecting the health, safety and welfare of our employees. We recognise that workplace stress is a health and safety issue and acknowledge the importance of identifying and reducing workplace stressors.

This policy is not contractual but sets out the way in which Pembroke College plans to deal with the issues of stress at work.

### Scope of this Policy

As stress can affect anyone, at any level, this policy applies to all employees.

### Aims of this Policy

We aim to provide a working environment where stress is not seen as a sign of weakness or incompetence and, where employees who believe they are suffering from the negative effects of stress, feel able to approach their Head of Department/Line Manager in confidence, in order that the necessary support mechanisms can be put in place. In addition, we aim to assist those who may be suffering from workplace or personal stress by offering confidential support.

This policy therefore seeks to clarify our responsibilities in relation to stress management, raise awareness of this issue, how it can be recognised and outline what support is available.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work etc. Act 1974.
- The Protection from Harassment Act 1997.
- The Management of Health and Safety at Work Regulations 1999.
- The Equality Act 2010.

### Definitions

The Health and Safety Executive defines stress as: "the reaction people have to excessive pressures or other types of demands placed on them. It arises when they worry that they cannot cope." In other words, stress occurs when the pressures on a person exceed their ability to deal with them.

Stress can be caused by a variety of problems, including heavy (or light) targets and workloads, insufficient resources, ineffective equipment or tools, long working hours, rapid change and uncertainty, harassment or bullying in the workplace, boredom, ill-health and personal, financial or legal problems.

The symptoms might include frequent short-term absences, reduced efficiency or minor ailments such as headaches/migraines, reduced appetite, tiredness, sleepless nights, anxiety attacks, irritability, increased smoking or drinking, to more serious issues such as heart disease, raised blood pressure, ulcers, excessive drinking and depression.

It is important to bear in mind that stress may come under the definition of "disability". If a medical report confirms this to be the case, as with other disabilities, we will take steps to make reasonable adjustments that have been recommended.

### Responsibilities

Legislation requires us to take reasonable steps to look after our employee's mental health and welfare. This means that we need to ensure they do not have excessive demands placed upon them by their responsibilities. As stress may also be caused by bullying, harassment and violence, we aim to provide a working environment that is, as far as is reasonably practicable, free from these influences. However, we are entitled to assume that all employees can cope with the normal day-to-day pressures of their jobs. If this is not the case, they have a duty to inform us.

In applying this policy we recognise our responsibilities by:

- Placing a high importance on the health, safety and welfare of all employees in the College.
- Accepting the legal and moral obligation to provide and maintain a safe and healthy workplace.
- Providing a commitment to support employees who require help for stress related problems.
- Providing information to employees about the harmful effects of stress and to promote preventative action if requested.
- Requiring our Heads of Department to be ambassadors of this policy and ensuring they set an example themselves in sensible working practices and consider how to get the best out of their teams without affecting their health.

### Procedure

Any employee who believes they are suffering the negative effects of stress, rather than worrying about it, is encouraged firstly to talk to their Head of Department/Line Manager. If the employee does not feel able to talk directly to the Head of Department/Line Manager, then the HR Manager should be contacted. If necessary, we will carry out a stress risk assessment, including a review of the employee's actual duties against those described in their job description.

The possibility of changing working conditions or making changes to reduce stress on the employee will be discussed, whilst recognising the needs of the employee and their colleagues. Employees should also speak to their GP if there are any health concerns.

All employees should support their colleagues if they believe they are experiencing work-related stress and should encourage them to talk to someone about it.

In all cases, if we are aware that an employee is suffering from stress, we will take such steps as are appropriate firstly to try to manage the situation. This may include reviewing workloads, providing assistance, training or improved equipment, or transferring to other duties, on a temporary or permanent basis, as appropriate. It may also be relevant to request consent for a medical report.

Heads of Department should assess the workload and responsibilities of those returning to work after experiencing work-related stress, to help prevent injury to health. Only as a final stage and where no alternative action is appropriate, would we consider terminating employment on grounds of ill-health.

### **Risk Assessments**

Pembroke College will carry out risk assessments where we suspect or believe that work may cause stress which could consequently lead to ill-health. This involves identifying pressures at work that could cause high and long-lasting levels of stress, identifying who could be affected by these pressures and taking appropriate steps to deal with them, such as lessening workload or transferring to other duties where appropriate.

The results of the risk assessments and the steps taken will be communicated to all relevant employees.

### **Monitoring**

In order to monitor compliance with the policy, we will:

- Monitor working hours and overtime to ensure that employees are not overloaded or overworked.
- Monitor holidays taken to ensure that employees are taking their full entitlement.
- Schedule work and handover periods to ensure that employees are able to take their rest breaks.
- Regularly check any records of "call out" to ensure that appropriate compensatory rest has been provided.
- Analyse our absence records to identify any patterns for absences caused by work-related stress.

### **Non-Work Problems**

We recognise that stress due to circumstances outside of our working environment can also impact on an employee's attendance and work performance. Therefore, we would encourage employees to make us aware of any serious problems that are causing them concern so that we can take this into account when assessing performance. These matters will be dealt with confidentially.

### **Professional Advice**

As soon as we believe an employee is showing symptoms of stress, we will attempt to establish the cause and take appropriate action, which may include seeking medical advice, particularly if it is thought that work may be causing or adding to the stress.

Employees taking medication to control their condition are advised to inform us what medication they take so that the details may be kept on file and made available to any medical or first-aider called in the case of a medical emergency or accident.

### **Communication and Training**

Heads of Department and Supervisors will be briefed in order to develop "early recognition techniques" for identifying the symptoms of negative stress in both their employees and themselves

In addition, Pembroke College may from time to time organise general health promotion activities within the workplace.

### **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## TRAINING POLICY

### Introduction

Pembroke College recognises the value and importance of providing opportunities to all employees to develop their job-related knowledge and skills, and expects that training and development will increase individual effectiveness and enable employees to make a greater contribution to the success of the College.

The College is committed to the development of positive policies to promote equal opportunities in employment regardless of any protected characteristic (race, sex, disability, sexual orientation, religion or belief, age, marital status or civil partnership, pregnancy/maternity or gender reassignment). This principle applies equally to our training and development activities.

This policy is not contractual, but indicates the way in which the College wishes to manage its training and development activities.

### Scope of this Policy

This policy covers all employees, including those on fixed-term contracts.

### Aims of this Policy

The College aims to equip all employees with the necessary knowledge and skills to be able to carry out their duties safely and without risk to themselves or others, to do their jobs successfully and with confidence, and to support all employees to reach their full potential. We recognise that well-managed development and training can help our employees to: identify and develop their potential; respond positively to change uncertainty and conflict; increase their job satisfaction; improve their self-confidence, motivation and initiative and also extend their range of responsibility. All training and development undertaken must be clearly focused on achieving the College objectives and will normally seek to achieve improvement in one or more of the following areas: team working, customer service, productivity, management competence or safer working practices.

We aim to provide:

1. Development and training that will ensure the implementation of College policies.
2. Planned, consistent induction training for all new starters to help ensure that they understand their role as it relates to the College and their individual responsibilities in the workplace.
3. Support, development and training for those at or near the beginning of their careers to enable them to gain appropriate technical or professional qualifications and/or experience that will assist their subsequent career development.
4. Appropriate career development opportunities and training to help maintain and enhance standards of performance over a period of time - we would expect to provide an average of at least 2 days training and development per employee each year.
5. Regular performance reviews, with a focus on future career progression and personal development plans.
6. Support for development and training for any employees faced now, or in the foreseeable future, with new roles, organisation or environment, to help them to deal competently with their work.
7. Support for continuing professional development.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work etc. Act 1974 (HASAWA).
- The Employment Rights Act 1996.

### Training Policy

Full details on the Training Policy can be found in the Staff Handbook.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

# UNIVERSAL PRECAUTIONS FOR FIRST AIDERS, AND ALL STAFF INCLUDING DOMESTIC, GARDENING, SPORTSGROUND AND MAINTENANCE EMPLOYEES POLICY

## Introduction

The College takes its duties under the Health and Safety at Work etc. Act 1974 (HASAWA) seriously. These include the provision of a safe place and a safe system of work for our employees, workers and all others who may be affected by our activities.

People suffering from certain infections may have the agent of disease present in their blood. If others are exposed to their blood - or other bodily fluids - the infectious agent may be transferred into their bodies and infect them.

We recognise that it is impossible to identify people who are infected with blood-borne viruses such as HIV, Hepatitis B and C as blood-borne viruses remain 'silent' for many years, and many sufferers are unaware that they are infected, or may choose not to tell anyone. Even if we were all informed of any member of staff or student who has a blood borne virus, that would still leave us exposed to infection. For this reason for our own safety and wellbeing we should assume that everyone could be infected.

## Scope of this Policy

This policy covers all employees, but is particularly aimed at First Aiders, domestic, gardening, sportsground and maintenance staff. Pembroke College emphasises the importance of following Universal Precautions at all times, but it is especially relevant that employees working in these departments read these guidelines and take them seriously.

## Aims of this Policy

The aim of this policy is to outline the Universal Precautions on minimising the risk of infection from blood-borne viruses. It is intended to cover any workplace situation where exposure to blood-borne viruses is possible.

## Information, Instruction and Training

Pembroke College has responsibilities under health and safety legislation to provide suitable and sufficient information, instruction and training. Our employees need to know:

- If they could be exposed to blood-borne viruses and how.
- The risks posed by this exposure - including any exposure limit.
- The main findings of your risk assessment.
- The precautions they should take to protect themselves and other employees, staff or visitors.
- How to use and dispose of any personal protective equipment that is provided.
- What procedures to follow in the event of an emergency.

## How Blood-borne Viruses are Spread

Blood contact with broken skin or mucous membranes can provide a route of transmission for blood borne viruses and other infections e.g.:

- By contamination of open wounds (e.g. blood injuries during sporting activities).
- By contamination of skin lesions (e.g. eczema).
- Via skin puncture by blood-contaminated sharp objects (e.g. needles, instruments or glass).
- By splashing of the mucous membranes of the eye, nose or mouth.

## Precautions

- Healthy skin provides the perfect barrier, but it needs to be kept moisturised and supple as broken skin provides a route for infections.
- Cuts should always be kept covered when you are working to protect **you** from infection.
- The use of protective gloves at work, as directed in your training, should be used whenever you have contact with any body fluids, and plastic aprons should be used if you anticipate dealing with body fluids.
- All waste contaminated with blood or body fluids must be disposed of in yellow clinical waste bags and put in the appropriate container.

## Management of Incidents

In the event of an incident where there is potential exposure to a blood-borne virus, the following first aid guidelines should be followed:

- If eyes are splashed with blood/body fluids rinse with plenty of saline fluid.
- In the event that any member of staff should ever experience a needle-stick injury:
  1. Encourage bleeding from the wound, but do not scrub or suck.
  2. Wash the area thoroughly with running water.
  3. Cover with a waterproof dressing.
  4. Contact your Head of Department/Line Manager immediately.

Following an incident, an urgent risk assessment will be carried out to establish whether the exposure has the potential to transmit a blood-borne virus – i.e. whether the exposure is considered to be low or high risk. The individual may be advised to undergo the following interventions: blood sampling, Hepatitis B vaccination, administration of PREP (Post Exposure Prophylaxis Regime) which is a combination of anti-HIV drugs taken for 1 month.

Where appropriate, the individual who is the source of the blood/body fluid should be approached, given an explanation of the incident and asked for informed consent for them to be tested for HIV, HBV and hepatitis C (HCV), where the status is not already

known. Such information will clearly impact on any decisions taken with regard to the management of the recipient. This universal approach to source testing for BBVs normalises the procedure and avoids perceived discrimination.

#### **Implementation, Monitoring and Review of this Policy**

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.



## VIBRATION POLICY

### Introduction

Hand-arm vibration can be caused by operating hand-held power tools such as hammer drills and hand guided equipment such as powered lawnmowers. It can also be caused by holding materials being processed by machines, such as grinders.

Regular and frequent exposure to hand-arm vibration can lead to permanent health effects, known collectively as hand-arm vibration syndrome (HAVS), as well as specific conditions such as carpal tunnel syndrome and vibration white finger (VWF).

There are hundreds of tools which can cause ill health due to vibration, some of the more common ones include hammer drills, chainsaws, powered lawnmowers, strimmer's, jigsaws, power hammer and chisels etc. Materials that vibrate whilst being held, for example, items being ground on a pedestal grinder for extensive periods of time, also need to be considered.

Regular and frequent exposure to vibration can lead to various health effects such as:

- Pain, distress and sleep disturbance.
- Finger blanching in cold or damp conditions.
- Loss of touch and temperature sense.
- Loss of grip strength.

These effects can restrict the job employees can do, as well as affect activities away from the work environment.

### Scope of this Policy

This policy covers all employees who use vibrating equipment at work, including those on fixed-term contracts.

### Aims of this Policy

The College aims to equip all employees with the necessary knowledge and skills to be able to carry out their duties safely and without risk to themselves or others.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work Act 1974.
- The Management of Health and Safety at Work Regulations 1999.
- The Control of Vibration at Work Regulations 2005.

### The Control of Vibration at Work Regulations 2005

The regulations require employers to adopt a modern risk management approach to vibration in the workplace. Employers need to:

- Assess the vibration risk to employees.
- Ascertain if they are likely to be exposed above the daily exposure action value (EAV). If they are, take action to eliminate or reduce exposure to as low as is reasonably practicable and provide health surveillance.
- Ascertain if employees are likely to be exposed above the daily exposure limit value (ELV). If they are, take immediate action to reduce their exposure below the limit value.
- Provide employees with information and training regarding health risks and actions to control the risk.
- Record the risk assessments and actions taken.
- Retain health records for employees subject to health surveillance.
- Review and update the risk assessment regularly

Employers are required to take action to control vibration risks when employees are subject to exposure above the daily exposure action value (EAV). It should be remembered that increased exposure levels will lead to greater risks, therefore employers will need to take more action to reduce that risk.

The regulations stipulate:

- An exposure action value of  $2.5 \text{ m/s}^2 \text{ A(8)}$ , at which level employers should introduce measures to reduce exposure.
- An exposure limit value (ELV) of  $5.0 \text{ m/s}^2 \text{ A(8)}$  which should not be exceeded.

There are two routes of transmission:

- Whole Body Vibration (WBV).
- Hand-Arm Vibration (HAV), which is commonly known as Vibration White Finger (VWF).

### Risk Assessment

A risk assessment should be carried out to identify who is at risk and to what extent. It should enable us to ascertain if employees are likely to be above the EAV or ELV, and to highlight which tasks need to be controlled. The assessment should lead to an action plan aimed at reducing the risks from vibration.

The following structured approach could be adopted:

- List equipment that may cause vibration and what it is used for.
- Obtain information about the equipment (make, model, power, vibration risks etc.).
- List employees using the equipment and the jobs they do.
- Note the length of time the equipment is used (e.g. how long persons actually use the equipment while it is vibrating).

- Ask employees about the vibration of equipment and other related issues such as how heavy it is, how it is held and operated etc.
- Record the information and assess who is likely to be at risk.

It should be noted that vibration figures provided by equipment suppliers/manufacturers will not take into account any degenerative factors due to poor maintenance and over-use of the equipment. These factors may increase the vibration magnitude level into the over-exposure level.

Use the information above to decide whether work activities produce a high, medium or low risk of vibration. Take action to reduce the risk from exposure while undertaking the high risk activities, and then address the medium and low risk factors. Vibration data measurements can also be made if more accurate vibration information is required.

There are many techniques for controlling exposure to vibration, these may include:

- Eliminate exposure by adopting alternative work methods.
- Ensuring that equipment is suitable for the task.
- When purchasing new tools, requesting the vibration exposure level figures from the supplier/manufacturer and purchase tools to the lowest vibration grip needed.
- Maintaining and monitoring the condition of tools to ensure that there is no rise in the exposure level as a result of use.
- Planning work activities to reduce exposure, for example, by job rotation.

Keeping the hands and body warm will help to maintain a good blood flow. Control measures such as the following may help:

- Wearing gloves.
- Using heated handles.
- Avoiding pneumatic exhausts which affect workers hands.
- Welfare arrangements provided to allow workers to keep warm during breaks.
- Avoiding smoking.
- Use of massage and exercise techniques.

Regularly check and monitor the measures that have been implemented to ensure they remain effective at controlling the risk. Discuss vibration issues with employees, supervisors etc. and check the results of any health surveillance.

### Training

Pembroke College will provide information and training for employees who are exposed to vibration. This should include:

- The health effects of hand-arm vibration.
- Sources of hand-arm vibration.
- The level of risk and whether it is high (above the ELV), medium (above the EAV) or low.
- Risk factors, e.g. level of vibration, exposure duration, frequency etc.
- How to recognise and report symptoms.
- Arrangements for health surveillance.

Ways to reduce the risks may include the tool selected, use and maintenance of tools and use of protective equipment etc.

### Health Surveillance

Health surveillance is required for all employees who are likely to be regularly exposed above the EAV, despite any action taken to reduce the risk. The purpose of health surveillance is to:

- Identify employees who may be at particular risk, e.g. smokers.
- Identify symptoms at an early stage so that action can be taken.
- Prevent disease progression.
- Retain employees.
- Monitor the effectiveness of the control measures.

Surveillance may consist of regularly seeking information from employees about the early symptoms of health effects by completing a questionnaire. If an employee reports the onset of any symptoms of this condition we should assume there is a risk of HAVs and refer the employee to an Occupational Health Practitioner and act upon any advice given. Records of medical examinations and reports of diagnostic tests such as finger blanching should be maintained. Due to medical confidentiality you should ensure that these records are kept in a secure location.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## VIBRATION - HAND ARM VIBRATION (HAV)

Summary of the Legislation	<p>The Control of Vibration at Work Regulations 2005 came into force on 6<sup>th</sup> July, 2005 and this regulation aimed to protect workers from risks to health from vibrating work equipment, vehicles and machinery.</p> <p>The regulations stipulate:</p> <ul style="list-style-type: none"> <li>• An exposure action value of 2.5 m/s<sup>2</sup> A(8), at which level employers should introduce measures to reduce exposure.</li> <li>• An exposure limit value of 5.0 m/s<sup>2</sup> A(8) which should not be exceeded.</li> </ul> <p>There are two routes of transmission:</p> <ul style="list-style-type: none"> <li>• Whole Body Vibration (WBV).</li> <li>• Hand-Arm Vibration (HAV), which is commonly known as Vibration White Finger (VWF).</li> </ul>										
Signs of VWF – Vibration White Finger	<p>Early signs of VWF can be:</p> <ul style="list-style-type: none"> <li>• Tingling or numbness in the fingers.</li> <li>• Note being able to feel things properly.</li> <li>• Loss of strength in hands.</li> <li>• Fingers going white (blanching) and becoming red and painful on recovery (particularly in the cold and wet, and probably only in the tips at first).</li> </ul> <p>For some people, symptoms may appear after only a few months of exposure, but for others they may take a few years. Symptoms can worsen with continued exposure to vibration and may become permanent.</p>										
Tools and Equipment which can cause ill-health from Vibration	<p>With continued used, the following are examples of equipment which could cause ill-health (this is not an exhaustive list):</p> <table border="0"> <tr> <td>Chainsaws</td> <td>Pedestal Grinders</td> </tr> <tr> <td>Hammer Drills</td> <td>Power Hammers and Chisels</td> </tr> <tr> <td>Hand-held Grinders</td> <td>Powered Lawn Mowers</td> </tr> <tr> <td>Impact Wrenches</td> <td>Powered Sanders</td> </tr> <tr> <td>Jigsaws</td> <td>Pedestal Grinders</td> </tr> </table>	Chainsaws	Pedestal Grinders	Hammer Drills	Power Hammers and Chisels	Hand-held Grinders	Powered Lawn Mowers	Impact Wrenches	Powered Sanders	Jigsaws	Pedestal Grinders
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Jigsaws	Pedestal Grinders										
Assessment of College Machinery and Equipment	<p>The University Safety Office has provided a report on the equipment and machinery used at Pembroke College. The report gives the exposure action values for each piece of machinery and equipment and provides the maximum safe exposure times for staff using each piece of equipment.</p> <ul style="list-style-type: none"> <li>• Maximum usage timings are given in “traffic light” system (green, amber and red).</li> </ul>										
Responsibilities of the HR Manager/H&S Officer (Health Screenings)	<ul style="list-style-type: none"> <li>• To provide all members of staff, if necessary, with information about the possible effects of VWF.</li> <li>• To provide all members of staff with annual health assessment questionnaires.</li> <li>• To refer any member of staff presenting with any symptoms (as noted above) to Occupational Health for assessment.</li> </ul>										
Responsibilities of Heads of Department	<ul style="list-style-type: none"> <li>• To ensure all members of staff adhere to the Colleges “traffic light” system for usage of all equipment.</li> <li>• Staff should be assigned a variety of jobs to ensure they do not exceed the limits given in the report.</li> <li>• To ensure that all equipment purchased is assessed by the University Health and Safety Office and included in the “traffic light” assessment system.</li> <li>• To undertake visual health monitoring for all staff after equipment is used.</li> <li>• To report to the Health and Safety Officer IMMEDIATELY any symptoms of VWF by themselves or any of their staff.</li> </ul> <p><b>To avoid increased vibration by:</b></p> <ul style="list-style-type: none"> <li>• Ensuring all equipment is properly maintained and repaired.</li> <li>• Undertaking regular checks of shock absorbers and hand grips of all hand-held equipment.</li> <li>• Ensuring all cutting equipment is kept sharp, so that they remain efficient.</li> </ul>										
Responsibilities of all Employees	<ul style="list-style-type: none"> <li>• Report IMMEDIATELY to the Head of Department/Line Manager any signs of effects of VWF (as noted above).</li> <li>• To undertake visual inspections of all equipment (hand grips and blades) prior to use.</li> <li>• Ensure that defective equipment IS NOT USED.</li> <li>• Report IMMEDIATELY to the Head of Department/Line Manager any problems with equipment during its use.</li> <li>• To promptly complete all HAVS screening questionnaires provided.</li> <li>• To attend health screening assessments with Occupational Health if any symptoms of HAV is noticed.</li> </ul>										
Information and Training	<p>All relevant members of staff will:</p> <ul style="list-style-type: none"> <li>• Be issued with the HSE booklet “Hand-arm Vibration: A guide for employees, <a href="http://www.hse.gov.uk/pubns/indg296.pdf">http://www.hse.gov.uk/pubns/indg296.pdf</a>.</li> <li>• Receive annual talk, from Head of Department/Line Manager, about the signs any symptoms of HAV – to be carried out by their Head of Department/Line Manager.</li> </ul>										
Records	<ul style="list-style-type: none"> <li>• Records of all trigger and usage timings will be kept by the HR Manager/H&amp;S Officer and Heads of Department.</li> <li>• Records of all HAVs screening checks will be held in individual employee personnel files.</li> </ul>										
Review	<p>This procedure will be reviewed regularly.</p>										

## VIBRATION – HAVS SCREENING QUESTIONNAIRE

**Initial screening questionnaire for workers using hand-held vibrating tools, hand-guided vibrating machines and hand-fed vibrating machines**

<b>Employee name:</b>	<b>Date:</b>
<b>Job Title:</b>	<b>Department:</b>
<b>Date of birth:</b>	<b>National Insurance Number:</b>
<b>Home Address:</b>	<b>Home Telephone Number:</b>

**Do you use/have you ever used hand-held vibrating tools, machines or hand-fed processes in your job?** Yes / No

**If Yes:**

**(a) List year of first exposure** .....

**(b) What year did you last use them?** .....

**OCCUPATIONAL HISTORY:**

Please give details of any previous use of hand-held vibrating tools, machines or hand-fed processes in your job:

<b>Dates (From / To)</b>	<b>Job Title</b>	
		<b>Do you have any tingling of the fingers lasting more than 20 minutes after using vibrating equipment?</b> Yes / No
		<b>Do you have tingling of the fingers at any other time?</b> Yes / No
		<b>Do you wake at night with pain, tingling, or numbness in your hand or wrist?</b> Yes / No
		<b>Does one or more of your fingers go numb more than 20 minutes after using vibrating equipment?</b> Yes / No
		<b>Have your fingers ever gone white* on cold exposure?</b> Yes / No

*\*Whiteness means a clear discoloration of the fingers with a sharp edge, usually followed by a red flush.*



<b>If Yes, do you have difficulty re-warming them when leaving the cold?</b>	Yes / No
<b>Do your fingers go white at any other time?</b>	Yes / No
<b>Are you experiencing any other problems with the muscles or joints of your hands or arms?</b>	Yes / No
<b>Do you have difficulty picking up very small objects, e.g. screws or buttons or opening tight jars?</b>	Yes / No
<b>Have you ever had a neck, arm or hand injury or operation?</b> If Yes, give details:	Yes / No
<b>Have you ever had any serious diseases of joints, skin, nerves, heart or blood vessels?</b> If Yes, give details:	Yes / No
<b>Are you on any long-term medication?</b> If Yes, give details:	Yes / No

**Declaration**

I certify that all the answers given above are true to the best of my knowledge and belief.

**Signed:** ..... **Date:** .....

**VIOLENCE AT WORK POLICY**

## Introduction

The College takes its duties under the Health and Safety at Work Act 1974 (HASAWA) seriously. These include the provision of a safe place and a safe system of work for our employees, workers and all others who may be affected by our activities. We recognise that violence at work and threatening behaviour are issues of concern to many and could have health and safety implications for Pembroke College.

## Scope of this policy

This policy covers all employees, including casual workers, and also any agency workers and contractors working at our premises.

## Aims of this policy

This policy aims to reduce the risk of workplace violence towards our employees and workers, as well as to students, customers and visitors to our premises, and to ensure that a clear "no tolerance" stance is adopted throughout the College.

## Legal considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work Act 1974.
- The Protection from Harassment Act 1997.
- The Management of Health and Safety at Work Regulations 1999.

The Health and Safety at Work Act 1974 provides that "it shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all employees". This duty also extends to visitors such as contractors and suppliers. In order for us to fulfil these duties, we will:

- Carry out a risk assessment in order to assess the risks to employees, workers, students and visitors.
- Decide what control measures, if any, are necessary.
- Implement any control measures if the assessment shows that they are necessary.
- Monitor any arrangements to ensure that they are effective.
- Review this from time to time and update as necessary.

## Definitions

Violence at work has been defined as "any incident in which a person is abused, threatened or assaulted in circumstances relating to their work". Whilst this definition applies to everyone, some may be at more risk than others. In our own workplace, we have identified the following groups of staff as being most at risk:

- Porters.
- College Nurse.
- Those who deal directly with visitors.
- Lone workers.
- Those who work outside of normal working hours.
- Cash handlers.
- Those who work within the College community and with vulnerable individuals.

## Heads of Departments responsibilities

All HODs have a responsibility to:

- Be familiar with this policy, implement it and ensure that anyone under their control is aware of it and understands it.
- Perform risk assessments in order to assess the risks to employees, workers and other visitors such as clients, and keep these up-to-date.
- Decide what control measures, if any, are necessary in their areas of operation.
- Implement any control measures if the assessment shows that they are necessary.
- Monitor any arrangements to ensure that they are effective.
- Take any report of work-related violence very seriously, and take immediate action, recording the details in writing.
- Support any employees or workers affected by any incidents or threats.
- Take on board any suggestions from employees or workers to prevent future violence.
- Co-operate with any external investigations (such as by the police or HSE).
- Continue internal investigations concurrently with external ones as necessary.
- Do not incite or increase the likelihood of a violent act nor ignore a violent act.
- Review the risk assessment as well as this policy from time to time and make any suggestions as to how any risk(s) could be better controlled or reduced.

## Employees' responsibilities

All employees have a responsibility to take reasonable steps to ensure that they do not place themselves, or others, at risk of harm. They are also expected to co-operate fully with the College in complying with any procedures that may be introduced as measures to protect their safety and well-being, as well as that of visitors. Staff must not incite or increase the likelihood of a violent act nor ignore a violent act.

Our employees are also responsible for ensuring that their family and friends do not get involved in any dispute between us and our workforce. Any relative or friend of an employee who is aggressive or disruptive will be asked to leave our premises and, if

necessary, we will call the police. Unless the employee is disabled and in need of additional help and support, we will normally only deal directly with our employees regarding any employment related matters.

## Procedures

The following are guidelines on action that we will take to reduce the risk of violence to employees, students and visitors. They are not exhaustive, but are a set of principles to be followed if a risk is perceived or occurs:

- As part of the risk assessment process, we will talk to employees and workers in order to assess what, if any, further preventative measures are required.
- All employees or workers are actively encouraged to discuss with their Head of Department/Line Manager any concerns that they may have. All approaches will be treated sympathetically.
- Where immediate action is required in response to a violent act, the employee or worker should approach their Head of Department/Line Manager or a colleague for help. Department heads should respond to the situation by talking to the perpetrator, explaining that their behaviour is not acceptable. They should try to resolve the problem and, if that is not possible, call the Porters' Lodge for assistance. They will remove the person where required. Medical assistance should be provided immediately if needed and consideration given to whether the member of staff feels able to continue working or needs to go home (chaperoned if necessary).
- The police should be informed of any serious incident or persistent cases of violence. CCTV footage should be retained to comply with any subsequent investigations (either internal or by the police) and following the CCTV Policy of the College. Statements should be taken from any witnesses promptly and a copy sent to the HR Manager/H&S Officer.
- Any incident of violence, threats or verbal abuse must be reported to the Porters' Lodge, as well as being reported to the individual's Head of Department/Line Manager.
- If an incident causes death, major injury or more than seven consecutive days off work (including weekends) it should be reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

## Dealing with visitors

The safety of our employees and workers is paramount. Any employee or worker who faces rude or aggressive visitors must never return aggression as this is how anger can escalate into violence. Instead they should try to adopt a calm and reassuring attitude and speak slowly and gently. In the unlikely event that a situation escalates, the employee or worker should always withdraw from it, where possible, and seek advice from their Head of Department/Line Manager or Porters' Lodge.

## Preventing workplace violence

We have CCTV monitoring on the premises which may be used in any investigation of violence in the workplace. Signs are posted around the College informing visitors of this monitoring. These must not be removed, covered over or obliterated by having anything placed in front of them.

All new employees and workers (including agency workers) should be made aware of the CCTV Policy which can be found in the Health and Safety Policy and on the Pembroke College website. Those who have daily direct contact with visitors or members of the public should in particular be given a copy of this policy to read.

## Protective clothing or aids

Where our risk assessment suggests that protective clothing or aids (such as a panic button under the desk or mobile alarm) would reduce the risk of workplace violence, we commit to providing this.

## Advice and counselling

The College recognises that counselling or other specialist help may be appropriate for anyone who suffers an incident of violence at work. We aim to deal with these cases constructively and sympathetically. The HR Manager/College Nurse will give advice and guidance on how to obtain help and assistance with any workplace violence related issue. All requests for help will be treated in the strictest confidence.

## Related policies

We also have the following related policies:

- Health and Safety Policy.
- Lone Workers Policy.
- Safeguarding Policy.

## Implementation, monitoring and review of this policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

## WORKING AT HEIGHT POLICY

### Introduction

The College takes its duties under the Health and Safety at Work etc. Act 1974 (HASAWA) seriously. These include the provision of a safe place and a safe system of work for employees, workers and all others who may be affected by our activities. We recognise that Working at Height might apply to most departments within the College. It is, therefore, important that risk assessments are carried out for all activities where Working at Height exists.

This policy is not contractual but sets out the way in which Pembroke College plans to deal with the issues of Working at Height.

### Scope of this Policy

As Working at Height might apply to all departments and employees, at any level, this policy applies to all employees and workers.

### Aims of this Policy

We aim to provide a working environment where Working at Height is a safe practice.

This policy therefore seeks to clarify our responsibilities in relation to Working at Height, raise awareness of this issue.

### Legal Considerations

The following pieces of legislation apply to this policy:

- The Health and Safety at Work etc. Act 1974.
- The Work at Height Regulations 2005.

### Policy

The College will ensure that, so far as is reasonably practicable, that:

- It will take all reasonable precautions to ensure the health and safety of employees, workers and other persons who may be affected by our work activities with respect to work at height.
- All employees/workers will receive adequate information, instruction, training and supervision in relation to working at height.

### Procedure

- All work at height carried out at Pembroke College and its buildings will be fully risk assessed and organised in such a way as to be safe and without risk to health.
- All employees or workers who work at height will be competent for the task and appropriately trained.
- The risk from fragile surfaces will be properly controlled by the operative conducting the risk assessment. Any concerns will be communicated to their Head of Department/Line Manager or the Health and Safety Officer for the College.
- Employees or workers working at height will be issued with ladders and it is their responsibility to ensure they have been inspected by a competent person. This check can be made by ensuring any ladder has the correct coloured banding (these details can be obtained from the Maintenance Department).
- All equipment issued for use for working at height will be suitable for use and will carry a valid inspection band. Inspection/service records for equipment are kept in the Maintenance Department.
- It is the responsibility of the employee or worker to check the equipment properly before work commences.
- Ladders will only be used for work of short duration.
- Tower scaffolding can be erected by a competent person but only those employees or workers who have received suitable training are able to use this equipment.

### Implementation, Monitoring and Review of this Policy

This policy will take effect from June 2021. The H&S Officer has overall responsibility for implementing and monitoring this policy, which will be reviewed on a regular basis following its implementation (at least annually) and additionally whenever there are relevant changes to our working practices.

