



University College
of Osteopathy

Health & Safety Policy



Core Documentation Cover Page					
Health & Safety Policy					
Version number	Dates produced and approved (include committee)	Reason for production/ revision	Author	Location(s)	Proposed next review date and approval required
V1.0	Jun 2010 QAEC	Update to 2009-2010 Policy	HR Assistant	All master versions will be held in: J:\0 Quality Team - Core Documentation Intranet	Jun 2012 or in line with legislative changes
V1.0	Aug 2012	Annual Reviews No Changes	HR Assistant	All master versions will be held in: J:\0 Quality Team - Core Documentation Intranet	Aug 2014 or in line with legislative changes
V2.0	Oct 2016	Biennial Review Major Change to Combine the Student and Staff policies.	HR Manager Estates & Purchasing Manager	All master versions will be held in: J:\0 Quality Team - Core Documentation Intranet	Oct 2018 or in line with legislative changes
V3.0	Jul 2017 PRAG Chair	Administrative Amendments to update institution name change from British School of Osteopathy to University College of Osteopathy and to update Staff Role Titles.	HR Manager & Head of Estates	All master versions will be held in: J:\0 Quality Team - Core Documentation Intranet	Oct 2018 or in line with legislative change
V4.0	May 2018 PRAG Chair	Administrative Amendments to reflect title changes (i.e. from Principal to Vice-Chancellor, etc.)	HR Manager & Head of Estates	All master versions will be held in: J:\0 Quality Team - Core Documentation Intranet	Oct 2018 or in line with legislative change
V5.0	Sep 2018 Head of Estates	Administrative Amendments to reflect title changes and change of secretary	HR Manager & Head of Estates	All master versions will be held in: J:\0 Quality Team - Core Documentation Intranet	Sep 2020 or in line with legislative change

Equality Impact	
Positive equality impact (i.e. the policy/procedure/guideline significantly reduces inequalities)	
Neutral equality impact (i.e. no significant effect)	X
Negative equality impact (i.e. increasing inequalities)	
<p>If you have any feedback or suggestions for enhancing this policy, please email your comments to: quality@uco.ac.uk</p>	

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1. POLICY STATEMENT

- 1.1 The University College of Osteopathy (UCO) recognises and accepts its responsibilities under the Health and Safety at Work Act 1974 (HASAWA) and is committed to ensuring the health, safety and welfare of its staff, students, patients and visitors.
- 1.2 The UCO will take all reasonable and practical steps to ensure the highest levels of health and safety are achieved through all of its activities and across all of its sites.
- 1.3 The UCO is committed to safeguarding all staff, students, patients and visitors and maintaining the buildings in a safe condition without risk to health or safety and to providing safe systems of work.
- 1.4 The UCO is committed to providing relevant training and support to all staff and students and to ensuring the relevant information is available to all building users.
- 1.5 The UCO will ensure all health and safety resources and facilities are provided in order to enable the requirements of this policy.
- 1.6 The UCO's Public Interest Disclosure Policy and Procedure is in place to ensure that individuals who report concerns about an actual or potential risk to health and safety, fraud or other illegal or unethical conduct are protected. The UCO's Public Interest Disclosure Policy and Procedure can be found on the intranet and should be followed in these circumstances.

2. ORGANISATION AND RESPONSIBILITIES

- 2.1 The Board of Directors has overall responsibility for health and safety at the UCO although ensuring it is managed appropriately is delegated to the Vice-Chancellor. The Board receives annual health and safety reports from the Senior Management Team and summary committee minutes, and is informed of any major health and safety concerns or reportable incidents.
- 2.2 The Vice-Chancellor is responsible for ensuring the policy is implemented correctly and the UCO meets the requirements of the Health and Safety Executive (HSE). The Vice-Chancellor acts as the Responsible Person in respect to health and safety legislation. The operational aspects of the health and safety function are delegated to the HR Manager with responsibility for the health and safety of the estate and facilities delegated to the Head of Estates. The Vice-Chancellor is chair of the Health and Safety Committee.
- 2.3 The HR Manager has overall responsibility for the operational aspects of health and safety with particular responsibility for the following areas:
 - a) All health and safety training including staff induction
 - b) First aid including maintaining the accident book, first aid boxes and training
 - c) Fire wardens
 - d) Risk assessment process including work station assessment and maternity risk assessments
 - e) Annual health and safety inspections

- f) Ensuring sufficient resources are available to meet the health and safety requirements of staff and students
- g) Ensuring legislative requirements relating to health and safety are met or exceeded
- h) Reporting of any relevant incidents under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- i) Ensure risk assessments related to building users are completed by the relevant manager and kept on file

3. OWNING THE HEALTH & SAFETY POLICY

- 3.1 The Head of Estates is the secretary of the health and safety committee and has responsibility for the physical health and safety aspects of the buildings with particular responsibility for the following:
- a) Ensuring the building and facilities are well maintained and pose no risk to health and safety
 - b) Ensuring sufficient fire systems are in place and maintained regularly
 - c) Arranging annual fire drills at the Borough High Street site
 - d) Ensuring all building related legislative requirements are met or exceeded
 - e) Ensuring Fire Risk Assessments and building risk assessments are carried out and updated regularly actioning any changes
 - f) Owning the Legionella Policy and Evacuation Procedures
 - g) To ensure building related risk assessments are completed by the relevant manager within specified deadlines and kept on file
 - h) Managing external contractors and ensuring they follow the requirements of the Control of Contractors Policy
- 3.2 The Deputy Vice-Chancellor (Research) is responsible for the health and safety of room hire and CPD courses which are generally held out of hours. This includes ensuring health and safety procedures are followed by these groups and that room hirers have the appropriate insurances.
- 3.3 The Facilities Supervisor is responsible for the following:
- a) weekly fire alarm tests at the Borough High Street site
 - b) weekly checks of fire escapes at both buildings
 - c) legionella testing
 - d) Portable Appliance testing
- 3.4 The Managing Agent for the clinical site arranges the annual fire drill and weekly fire tests.
- 3.5 All line Managers/Area Managers are responsible for completing risk assessments for projects/activities/employees that fall within their area. Guidance is available from the HR Manager or Head of Estates.

- 3.6 The Health and Safety Committee (HSC) reports to the Senior Management Team (SMT) and through them to the Board of Directors. The committee monitors the performance of health and safety at the UCO and makes recommendations for improvements.
- 3.7 All staff, students, visitors and patients have responsibility for their own health and safety whilst on the UCO's premises. They have a duty to ensure they are aware of the location of the fire escapes and assembly points. They should not carry out any action which could risk the safety of themselves or others. All building users have a responsibility under the HASAWA to report any health and safety issue immediately.

4. RISK ASSESSMENT

- 4.1 All projects and activities that take place within the UCO are subject to risk assessment. Risk assessment considers the likelihood and potential severity of harm being caused as a consequence of the hazard and the measures the UCO has in place to reduce and control the risk.
- 4.2 Line managers or area managers are responsible for assessing the risk of tasks which fall into their area of responsibility. Guidance on completing the risk assessment is available from the HR Manager or Head of Estates.
- 4.3 Building specific Fire Risk Assessments and general building risk assessments are updated annually.

5. FIRST AID/ACCIDENT REPORTING

- 5.1 All accidents or incidents which take place on the UCO's premises must be reported in the accident book. This is kept at reception at both sites and is monitored by the HR team.

6. EMERGENCY EVACUATION PROCEDURES

- 6.1 The UCO has Emergency Evacuation Procedures which should be followed in the event of a fire or other emergency. The procedures, which are reviewed biennially, are published on the intranet.

7. MAINTENANCE AND TESTING OF EQUIPMENT

- 7.1 A Planned Preventative Maintenance programme is in place to ensure all equipment is maintained regularly and meets all legislative requirements.
- 7.2 Portable appliances are tested on a 3-yearly cycle by the Facilities Supervisor. The 5-yearly Electrical Installation Condition Report is carried out by a qualified contractor.

8. COMPLIANCE AND MONITORING

- 8.1 The Health and Safety committee members will be responsible for monitoring and reviewing compliance with Health and Safety matters, including inspection reports and actions and for ensuring that the procedures are kept up to date and managed in line with current legislation and best practice.

9. CONTROL OF CONTRACTORS

- 9.1 External contractors working on the UCO premises are expected to meet both their own health and safety requirements and those of the UCO. The Control of Contractors Policy is updated biennially and is available on the intranet.

10. OUT OF HOURS AND LONE WORKING

- 10.1 Any work carried out outside of normal working hours is subject to the Out of Hours Policy which updated biennially and is available on the intranet.
- 10.2 Line managers should make sure their staff are aware of their commitments under the policy and ensure they follow the relevant procedures. Lone working should be agreed with a staff member at the discretion of the line manager.

11. PROVISION OF EQUIPMENT

- 11.1 The UCO will provide personal protective equipment (PPE) in circumstances where a risk assessment identifies the requirement for worker protection.
- 11.2 All reasonable steps will be taken to secure the health and safety of employees who work with PPE.
- 11.3 All workers who may be exposed to a risk to their health and safety while at work will be provided with suitable, properly fitting and effective PPE.

12. CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH

- 12.1 All substances hazardous to health under the Control of Substances Hazardous to Health Regulations 2002 (COSHH) must be assessed for risk. This is carried out by the Head of Estates and risk assessments kept on file.
- 12.2 Any cleaning materials which fall under the regulations are assessed by the cleaning contractor and copies held on file by the Head of Estates.

13. TRAINING/INDUCTION

- 13.1 New staff will receive an HR induction to outline health & safety and evacuation procedures.
- 13.2 Line managers are responsible for providing new staff with specific health and safety information and training relevant to their role.

14. CONSULTATION

- 14.1 The UCO has an obligation under the Health and Safety (Consultation with Employees) Regulations 1996 to consult with staff regarding health, safety and welfare.
- 14.2 The Health and Safety Committee is comprised of core members and co-opted staff members. For core members of staff it is a condition of their role to sit on the committee. All other members of staff have the opportunity to stand as co-opted staff members. The HSC composition includes a student representative, usually the Student Union President.

- 14.3 The Health & Safety Committee reviews all related policies, procedures and risk assessments and reports and recommends improvements and actions. It provides an opportunity for members to highlight any health and safety concerns they have.