



***Safety Statement
For
All Health Services
Within
Midlands, Louth, Meath,
Community Health Organisation.***

June 2022
Version 1

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Safety Statement for MLM CHO All Health Services

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1.1 Policy Statement. Letter of CEO 16.12.2021**Policy Statement**

Welcome to the HSE Corporate Safety Statement 2021.

We have experienced 18 months of rapid change which has seen everyone's lives change materially, with many challenges, additional stresses and a lot of unpredictability and we need to take the time to reflect on our experience, look at the lessons learned and apply these learnings to how we deliver services in the future.

As CEO I have witnessed dedication, commitment, flexibility and teamwork right across the organisation. This has instilled immense pride in me and reinforces the great responsibility which accompanies the privilege of serving as Chief Executive Officer (CEO).

I wish to acknowledge how hard you all have worked to provide the safest care possible throughout the pandemic and the subsequent cyber-attack. Your ongoing responsiveness, resilience, and commitment in delivering a high quality health service have resulted in the public gaining trust and confidence in the HSE.

As we continue to make progress in reducing the spread of COVID-19 we collectively and individually need to maintain our efforts to suppress the virus. In this regard, we will continue to implement the requirements of the Government's Work Safely Protocol through the organisational lines and through our health and safety frameworks to ensure the safety and welfare of all staff and the public using our services.

Throughout the COVID-19 period, National HR played a central role in the overall health service response. The HR Workplace Health and Wellbeing Unit will further enhance and embed this response by developing and strengthening the necessary physical, psychological and personal supports for employees through implementation of the HSE Healthy Workplace Framework.

As CEO, I have overarching responsibility under the Safety, Health and Welfare at Work Act, 2005, to ensure, so far as is reasonably practicable, the safety, health and welfare at work, of all employees and those affected by the HSE activities. In order to achieve this, I am reaffirming my commitment to achieving excellence in occupational safety and health management by supporting an environment where occupational safety and health at work is a prime consideration in all of our activity. An integral component of our safety management system is the clear allocation of responsibility and accountability to managers and employees which is understood, demonstrated and monitored, and where compliance with legal requirements is regarded as the minimum standard achieved.

This is of fundamental importance in continually improving patient safety as recognised in the Organisation for Economic Co-operation and Development (OECD), 2021 Report. The report states that "discussions on health care harm have traditionally separated patient safety and worker safety. But this division may be flawed, as the two are inextricably linked (Wåhlin et al., 2020). Staff working conditions and occupational safety influences how well health workers can perform their tasks and work as a team. This affects standards of care and patient safety".

The successful implementation of this policy will be supported by open communication, engagement and consultation thus enabling an open attitude to health and safety issues, encouraging employees to identify and report hazards and suggest innovative solutions, so that we all contribute to creating and maintaining a safe working environment.

The HSE organisational arrangements set a clear direction for management at all levels to follow. The new structures will lead to improved decision making and speed of response between HSE Corporate Centre and services, thereby driving improved performance and accountability.

This Corporate Safety Statement is a dynamic document, which will continue to evolve over time and hence be subject to ongoing review, as and when required.

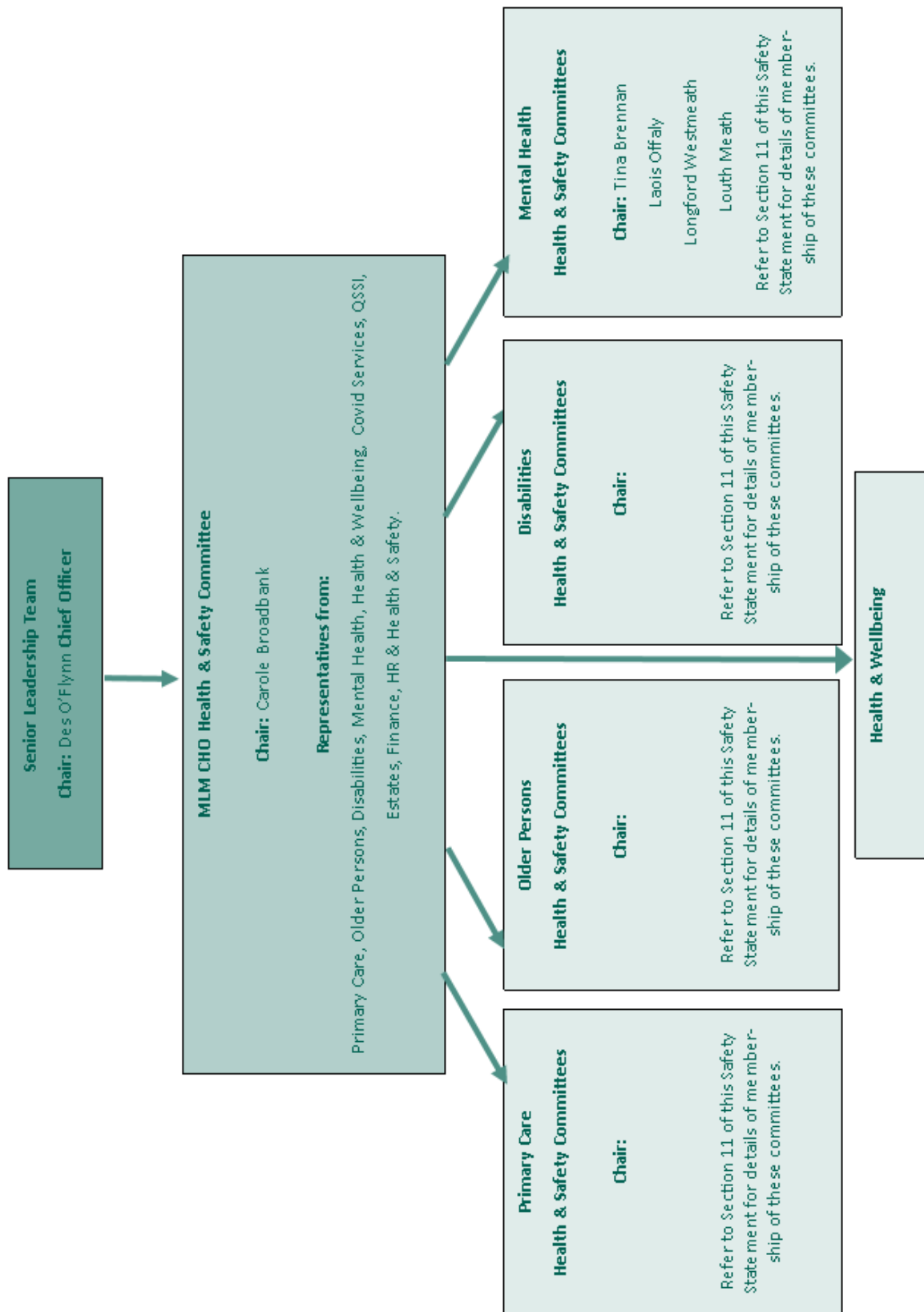
In summary our aim is to achieve and maintain the highest possible standards of occupational safety and health management whilst working together to deliver our mission to build a better health service for one and all.

Paul Reid, CEO



Date:

16.12.2021



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2.1 General Statement of Safety Policy for MLM CHO8

Des O’Flynn, as Chief Officer for MLM CHO, is responsible for delivering the following core community health services to the population of Laois, Offaly, Longford, Westmeath, Louth and Meath: Acute In-Patient Care, Outpatient Clinics & Community Based Services, Community Based Residences and Liaison Services.

These services are provided by the Care Divisions of Primary Care, Mental Health, Social Care (Disabilities & Older Persons), Covid Services, Quality, Safety & Service Improvement and Health & Wellbeing.

These services are supported by the following functions

- Finance,
- Human Resources,
- Administration,
- Quality & Risk Management
- Estate Management and
- Occupational Health

The implementation of the Safety Management Programme will greatly assist with the provision of a safe and healthy environment for all our health service employees and be instrumental in providing a safe and high quality service for our service users and others who may be affected by our activities. It is important to create an environment in which health and safety professionals, quality and patient safety professionals, infrastructural safety advisors, fire safety personnel and other relevant personnel involved in the management of risk work side-by-side to ensure that there is fully integrated approach in which all aspects of risk are appropriately and adequately addressed.

The Chief Officer of MLM CHO has in place this Safety Statement, which identifies the persons responsible for ensuring that the Safety Management Programme is successfully embedded within the Service and that arrangements are in place to monitor the effectiveness of the Safety Management Programme on an on-going basis.

The Chief Officer will ensure that the Safety Management Programme is comprehensive, properly planned and integrated throughout all management functions and areas across all Health Services within MLM CHO and ensure that there are appropriate arrangements in place to review the Safety Management Programme to ensure it is complete, properly functioning and effective.

Office of the Chief Officer, MLM CHO will audit the Safety Statement using all identified audit tools recommended by the HSE. Use of this audit will provide a source of evidence to assure compliance with legislation and with key elements of the Mental Health Commission Standards, Health Information and Quality Authority (HIQA) and National Standards for safer, better healthcare.

This Safety Statement is applicable to all health services in MLM CHO and all employees within it. It places obligations on both management and employees to ensure that it is fully integrated throughout the service to secure the safety, health and welfare of all employees and those affected by our activities and to support the continuous improvement of the quality of the services that they provide.

It is our policy to do all that is reasonably practicable to prevent injury or ill health to Staff, service users and others who come in contact with our activities. In recognition of our responsibilities under the Safety, Health and Welfare at Work Act, 2005 and other legislation relevant to our operations, the Chief Officer, MLM CHO, is committed to providing and maintaining, safe and healthy working conditions through the following measures:

- Promote standards of safety, health and welfare that comply with the provisions and requirements of the Safety, Health and Welfare at Work Act 2005 and other statutory provisions and codes of practice.
- Provide and maintain safe, healthy working environments, safe systems of work and to protect staff, service users and others such as visitors and contractors, in so far as they come into contact with foreseeable hazards.
- Information, training and supervision will be provided to all staff to develop safety awareness, enabling them to work safely and effectively.
- Identify and define all individuals responsible for Health and Safety arrangements.
- Encourage full and effective joint consultation on all health and safety matters.
- Provide financial and / or staff resources required in so far as is reasonably practicable
- Maintain written records, including risk assessments and incidents.
- Review this safety statement and its contents on planned dates and /or in the event of new developments or experiences.

Review Safety Statement when:

(a) there has been significant change in the matters to which it relates, or

(b) there is another reason to believe that it is no longer valid, e.g. new legislation, following an accident, introduction of a new process, etc.

The safety and health of our staff is an essential service objective.

All staff are responsible for taking reasonable care of their own health, safety and welfare and that of their service users and others that could be affected by their acts or omissions at work. Adherence to safety procedures is a condition of employment and wilful negligence will result in disciplinary action.

A list of Risk Assessments for each location are in the site specific Section 11 of this document.

All Community Health Service Staff are required to report incidents as they occur to reduce the risk of re-occurrence. Health & Safety is a standing item on every committee meeting agenda.

This Safety Statement will be brought to the attention of all Staff and made known to all service users and others who come in contact with our service. The safety and health of our staff is an essential service objective. Safety is everybody's business and the success of our policy depends on the cooperation of our employees.

MLM CHO Senior Leadership Team has the following consultation mechanisms in place:

- Health & Safety is a standing agenda item at all Leadership, Performance, Clinical Governance & Area Management Team meetings. There are also Area and Site Specific Health & Safety Management Groups

Any issues regarding Risk or Health & Safety are brought to the attention of the Line Managers.

- Incident report forms are completed as necessary and where required, following completion of a risk assessment, items that necessitate resources are brought to the Business Managers, General Managers or Heads of Services for action.
- New / Updated or relevant Health & Safety Legislation, relevant Policies Procedures, Guidelines (External, Internal – HSE Nationally or MLM CHO8) are discussed at the Leadership, Performance, Clinical Governance & Management Team meetings & where appropriate an implementation plan to assist in adherence to same is compiled. Monitoring of same occurs at the staff meeting

Each employee has access to a copy of this Safety Statement both electronically and in hard copy in their work location.

The following **Key Performance Indicators** have been identified for 2022

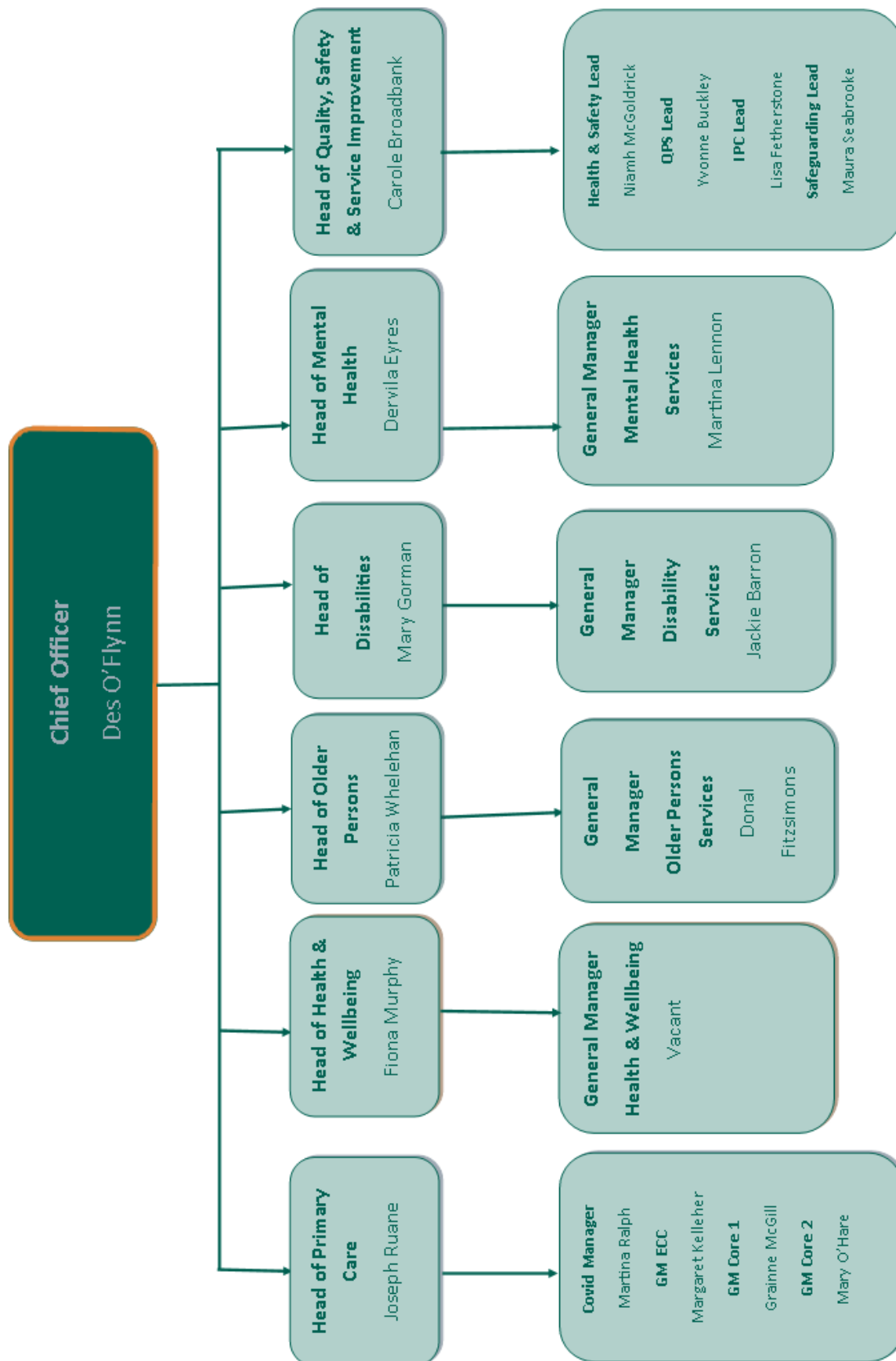
1. All managers (ECD's/CD's, Area DON's, DON's GMs, Heads of Discipline, Grade VIII & individuals responsible for developing site/service safety statements) within the MLM CHO Division have read and signed this Safety Statement.
2. All managers (GMs, Heads of Discipline, Grade VIII & responsible individuals) will develop a Site Specific Safety Statement for their area of responsibility.
3. There is a process for the dissemination of all health & safety documentation e.g. Corporate Safety Statement, Service Safety statement, Site Specific Statements, policies, procedures, protocols and guidelines & risk assessments.
4. That all Managers have completed a training needs assessment for their area and all staff have completed their mandatory training in line with national guidelines.



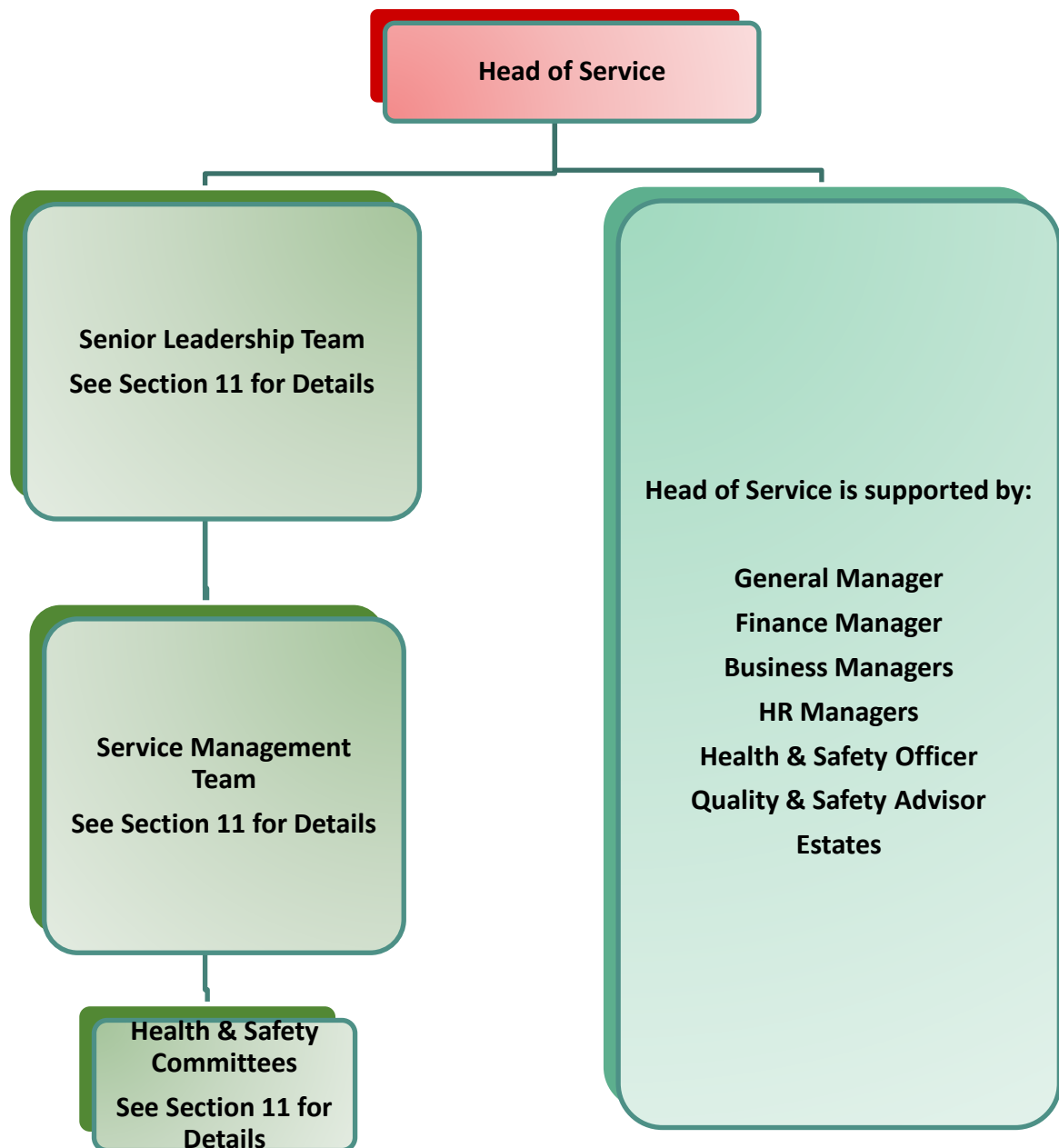
Signed: Des O'Flynn
Chief Officer, MLM CHO

Section 2.1

MLM CHO Organisational Chart



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This Organisational Chart sets out the management structure within MLM CHO. Each employee within MLM CHO Health Services must ensure the effective implementation of the Safety Statement in their area of responsibility.

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3.0 Organisational Roles

3.1 Chief Officer

Des O'Flynn is accountable respectively to the Head of Community Operations for the effective integration of safety, health and welfare across all disciplines and services within Midlands Louth Meath CHO, so far as is reasonably practicable.

Responsibilities for Health & Safety to include:

- Ensuring there are adequate and appropriate arrangements in place for the successful implementation, monitoring, evaluation and review of the safety management system
- Ensuring that each site or service has in place a written Site Specific Safety Statement and associated risk assessments which is communicated, monitored, reviewed and updated at least annually and in the event of any significant change in legislation, work activity or place of work
- Ensuring necessary resources are allocated and are available for the implementation of the safety management system
- Seeking advice from the National Health and Safety Function via www.hse.ie/safetyandwellbeing, specialist health and safety professionals and risk advisors/managers as necessary
- Ensuring that a health and safety training needs analysis based on risk assessment has been undertaken and training programmes implemented to ensure the safety, health and welfare of employees and others affected by the work activities
- Ensuring that suitable arrangements are in place to facilitate effective consultation on matters pertaining to occupational safety, health and welfare
- With regard to emergencies or situations of serious or imminent danger ensuring adequate plans and procedures are in place and periodically tested
- Putting in place appropriate procedures to ensure all incidents are reported and managed in accordance with the HSE Incident Management Policy and prescribed accidents and dangerous occurrences are reported to the Health and Safety Authority
- Ensuring that workplaces are designed and maintained in a condition that is safe and without risk to health, that there is a safe means of access to and egress from the workplace and that plant, equipment and other articles are safe and without risk to health so far as is reasonably practicable
- Ensuring that systems of work are planned, organised, performed, maintained and revised as appropriate, so as to be safe and without risk to health so far as is reasonably practicable
- Managing and conducting work activities in such a way as to prevent, so far as is reasonably practicable, any improper conduct or behaviour likely to put the safety, health or welfare at work of his or her employees at risk
- Ensuring safety, health and welfare legislation forms part of the general conditions of a contractor's work specification at all stages of the procurement process
- Ensuring that all safety related records are maintained appropriately and are available for inspection
- Integrating performance indicators in relation to safety, health and welfare as part of performance management
- Identifying and nominating key personnel who will act as a liaison on matters pertaining to occupational safety, health and welfare to the National Health and Safety Function

3.2 Heads of Service

Heads of Service within Midlands Louth Meath CHO, assumes all responsibilities of the Chief Officer as detailed in 3.1 and is responsible for the effective integration of safety, health and welfare across all disciplines and services within their area of responsibility as far as is reasonably practicable.

The following Roles & Responsibilities have been delegated to the General Manager, whilst the rest remain with the Head of Service.

Contact Details:

Dervila Eyres,	CHO8.Mental Health @hse.ie
Joseph Ruane	CHO8.HOPC@hse.ie
Patricia Whelehan	Patricia.whelehank@hse.ie
Mary Gorman	CHO8.disabilityservices@hse.ie
Fiona Murphy	CHO8.Health&Wellbeing@hse.ie
Carole Broadbank	CHO8.QSSI@hse.ie

3.3 General Managers

General Managers within MLM CHO have delegated responsibility for the effective integration of safety, health and welfare across all disciplines and services in her area of responsibility as far as is reasonably practicable and to seek assurances that:

- Adequate and appropriate arrangements are in place for the successful implementation and evaluation of the Safety Management Programme.
- Integrate performance indicators as outlined in Section 2.0 on Page 13 in relation to safety, health and welfare as part of performance management
- Promote the integration of safety, health and welfare into all activities, this will include management team meetings, briefings, policies, procedure and guidelines
- Seek advice from specialist health and safety professionals and risk advisors/managers as necessary
- Suitable arrangements are in place to facilitate effective consultation on matters pertaining to safety, health and welfare in a timely manner and be of balanced participation
- That health and safety training needs analysis based on the risks identified are being undertaken and that training programme are implemented to ensure the safety, health, and welfare of employees and others affected by the work activities
- That appropriate procedures are in place to ensure all incidents are reported and managed in accordance with the HSE Incident Management Policy and prescribed accidents and dangerous occurrences are reported to the Health and Safety Authority
- That there is an adequate process in place for the implementation of all actions identified in the audit process

Contact Details: See Section 11 for details of General Managers.

3.4 Senior Leadership Team

Membership of these committees are detailed in Appendix 2 of this document.

The General Manager, delegates operational responsibility to the Senior Management Team for the effective integration of safety, health and welfare across all disciplines and services within their area of responsibility, as far as reasonably practicable. The Senior Management Team must seek assurance that all points listed in 3.3 above are completed in a timely manner.

Their Responsibilities regarding this Safety Statement include, but are not limited to:

- Promoting a positive health & safety culture by leading by example and ensuring health & safety is a standing item on the agenda of every meeting.
- That appropriate procedures are in place to ensure all incidents are reported and managed in accordance with the HSE Incident Management Policy and prescribed accidents and dangerous occurrences are reported to the Health and Safety Authority
- In consultation with staff, carry out Risk Assessments and ensure that a written Safety Statement is completed for all areas of responsibility.
- Provide access to the Health and Safety Statement for all staff, both electronic and hard copy
- Ensure that staff confirm in writing that they have received and have read the Safety Statement for MLM CHO
- Ensure that the Safety Statement and risk assessments are also brought to the attention of staff when:
 - (i) There has been a significant change in the matters to which it relates, or
 - (ii) There is another reason to believe that it is no longer valid, e.g. new legislation, following an accident, introduction of a new process, etc.
- Ensure that all staff fully understand and observe the arrangements for health & safety and are aware of their responsibilities under the health & safety statement.
- Ensure staff are adequately trained to carry out their duties and ensure staff attend training, in so far as is reasonably practicable.
- Ensure training records are maintained.
- Ensure that health & safety requirements form an integral part of specifications for new substances or equipment being introduced at operational level.
- Investigate incidents, accidents, and near misses and review incident forms.
- Ensure defective equipment is taken out of use and reported to appropriate person.
- Ensure that appropriate PPE is provided and that all staff are provided with adequate information, training and instruction in relation to use and maintenance of PPE.

3.5	Managers (Senior & Line Managers including ECD's/CD's, Heads of Discipline, Area Directors of Nursing, Directors of Nursing)
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Managers (Senior & Line Managers including Executive Clinical Directors/Clinical Directors, Heads of Discipline, Area Directors of Nursing, Directors of Nursing) (Responsible Persons) are responsible for the following:

Roles and Responsibilities

- Ensuring that adequate and appropriate arrangements are in place to implement, disseminate and communicate the HSE Corporate Safety Statement and the Site / Service Safety Statement at local level e.g. Department / Unit
- Ensuring that a hazard identification and risk assessment process is completed that reflects the specific work activities of employees and others in the place of work
- Ensuring that the Site / Service Safety Statement and associated risk assessments are reviewed and updated on a regular basis, at least annually, and in the event of any significant change in the work activity or place of work
- Reporting all safety, health and welfare risks identified that are not within their ability to control to the relevant Local Senior Manager for escalation to the risk register
- Ensuring that suitable arrangements are in place to facilitate effective consultation on matters pertaining to safety, health and welfare
- Providing systems of work that are planned, organised, performed, maintained and revised as appropriate so as to be safe and without risk to health as far as is reasonably practicable
- Promoting the integration of safety, health and welfare into all activities within their area of responsibility i.e. departmental/service team meetings, procurement etc.
- Empowering employees within their area of responsibility to take ownership of safety, health and welfare risks and promote best practice in the management of these risks
- Monitoring the performance of the safety, health and welfare programme through performance indicators and audit and ensure the outcomes of the monitoring process are acted on through the development of appropriate action plans
- Ensuring:
 - That a training needs assessment based on risk assessment is used to determine the appropriate training required for all employees within their area of remit
 - That employees have access to, and facilitate their attendance at, safety, health and welfare training appropriate to their role
- Maintaining a record of each employee's training
- Ensuring that a comprehensive incident management process is in place for all incidents occurring within the department/service
- Managing and conducting work activities to prevent any improper conduct or behaviour likely to put the safety, health or welfare at work of employees at risk
- Ensuring that all safety related records are maintained and available for inspection
- Undertaking walk about safety audits or inspections of respective departments, and document the findings while following up on any corrective action required to manage any deficits identified

- Drawing up suitable emergency precautions for area of responsibility and ensure that fire and evacuation drills are carried out
- Estimating the resource allocation and budget requirements for the implementation of the safety management programme within area of remit
- Seeking advice from health and safety professionals and risk advisors/managers as and when required

Risk management professionals are available to support, facilitate and advise line managers on the technical aspects of the risk management process.

Resources and tools are also available on the HSE Website at <https://www.hse.ie/eng/about/who/riskmanagement/>

All employees have a responsibility for their own safety health and welfare and that of others in the workplace and should therefore:

- Take reasonable care to protect their own safety, health and welfare and that of any other person who may be affected by their acts or omissions at work
- Ensure they are not under the influence of any intoxicant.
- If reasonably required by his or her employer, submit to any reasonable and proportionate tests for intoxicants by, or under the supervision of, a registered medical practitioner who is a competent person, as may be prescribed
- Co-operate with their employer or any other person so far as is necessary to enable their employer or the other person to comply with the relevant statutory provisions, as appropriate.
- Employees play a vital role in the Health & Safety Programme of the Health Service and must participate in the development of Site Specific Safety Statement, risk assessments and other documentation relating to them or their workplace.
- Not engage in improper conduct or other behaviour that is likely to endanger his or her own safety, health and welfare at work or that of any other person
- Attend all necessary training and, as appropriate, undergo such assessment as may reasonably be required by their employer or as may be prescribed relating to safety, health and welfare at work or relating to the work carried out by the employee
- Having regard to his or her training and the instructions given by their employer, make correct use of any article or substance provided for use by the employee at work or for the protection of his or her safety, health and welfare at work, including protective clothing or equipment
- Report to their line manager or to another appropriate person, as soon as is practicable
 - (i) any work being carried out, or likely to be carried out, in a manner which may endanger the safety, health or welfare at work of the employee or that of any other person
 - (ii) any defect in the place of work, systems of work, any article or substance which might endanger the safety, health or welfare at work of the employee or that of any other person
 - (iii) any contravention of the relevant statutory provisions which may endanger the safety, health and welfare at work of the employee or that of any other person, of which he or she is aware
- On entering into a contract of employment, not misrepresent themselves to an employer with regard to the level of training

Not intentionally, recklessly or without reasonable cause:

- Interfere with, misuse or damage anything provided under the relevant statutory provisions or otherwise for securing the health, safety and welfare of those at work
- Place at risk the safety, health or welfare of persons in connection with work activities.
- Comply with the HSE Incident Management Policy and Procedure with regard to identifying, taking any immediate action required and reporting incidents to their Line Manager and partaking, if required, in incident investigations relevant to them or their service area
- Comply with relevant HSE and local Policies, Procedures, Protocols and Guidelines

- Make themselves familiar with the contents of the Safety Statement and seek clarification from their manager if they are unclear about any aspect of the Safety Statement that is relevant to their work activity
- If pregnant, notify their line manager so that a pregnancy risk assessment can be carried out.
- Utilising preventive measures and strategies provided to minimise risks that might compromise their safety e.g. emergency response procedures and HSE Policy on Lone Working
- Being familiar with local procedures for raising the alarm and securing assistance in the event that their safety, or that of others under their care, is compromised
- Informing their line manager if they have concerns about the content of this Policy or if they experience any difficulties during the implementation stage of this policy.

Improving quality, safety, health and welfare within the HSE is incumbent on all employees, inclusive of clinicians, frontline staff, managers and administrators.

The successful implementation of the Safety Management Programme will greatly depend on the full co-operation of each employee. Failure to comply with the terms of the Safety Statement may result in disciplinary action.

3.7 Competent Persons

3.7.1 National Health & Safety Function

The National Health and Safety Function falls under Employee Relations Advisory Services (ERAS), within Corporate HR. It has been established to provide effective, consistent, high-quality and readily accessible support.

The Head of the Function is supported by four National Health and Safety Managers. Each of these managers is responsible for a key delivery area, i.e. Policy, Audit and Inspection, Information and Advisory and Training and is supported by a team of National Health and Safety Advisors.

Staff wellbeing includes Staff Safety, Health, & Wellbeing

- **Information & Advisory Team** – National helpdesk for support requests and referral to other Teams Consistent, evidence-bases information. Advice and guidance on-line information resource.
- Contact the helpdesk on <https://healthservice.hse.ie/staff/health-and-safety/health-and-safety-helpdesk/> or 1800 420 420 between 10:30-12:00 and 14:00-15:30.
- **Policy Team** – Specialist policies, procedures, protocols and guidelines (PPP&G). Guidance and advice on policy National OSH standards.
- **Training Team** - Specialist statutory OSH training National statutory training needs assessment. Advice on local TNA. Collation of training data. Support local training provision.
- **Inspection & Audit Team** - Specialist inspections and audits, Annual audit programme Trend monitoring and feedback, Assisting in OSH incident investigations

Contact Details:

Information on Safety and Wellbeing on the HSE website
<https://healthservice.hse.ie/staff/health-and-safety/>

3.7.2 Health & Safety Officers

Roisin Cooney
Andrea Doorly

Health & Safety Officer
Health & Safety Officer

MLM CHO
MLM CHO

Contact Details:

Roisin Cooney
Andrea Doorly

roisin.cooney@hse.ie
andrea.doorly@hse.ie

087 109 8831
087 097 2996

3.7.3 Regional Fire Prevention Officer

Gerard Monaghan Fiona Flood	Laois, Offaly, Longford & Westmeath Louth Meath	Fire Prevention Officer Fire Prevention Officer
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Contact Details:

Gerard Monaghan	Fire Prevention Officer,	Laois Offaly Longford Westmeath
Fiona Flood	Fire Prevention Officer	Louth Meath

3.7.4 Quality & Patient Safety Lead

Yvonne Buckley	Quality & Patient Safety Lead	MLM CHO
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Contact Details:

Yvonne Buckley	yvonne.buckley@hse.ie
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3.7.5 Quality & Risk Advisors

Yvonne Buckley	QPS Lead & Primary Care	Risk Manager
Niamh McGoldrick	Disabilities & Older Persons	Risk Manager
Lisa Coleman	Mental Health (LS, OF, LD, WM)	Quality & Risk Advisor
Theresa McCourt	Mental Health (LH,MH)	Quality & Risk Advisor

Contact Details:

Yvonne Buckley	Yvonne.buckley@hse.ie	087 914 1269
Niamh McGoldrick	Niamh.mcgoldrick@hse.ie	086 171 0123
Lisa Coleman,	lisa.coleman@hse.ie	086 823 0076
Theresa McCourt	theresa.moran@hse.ie	087 227 7913

3.7.6 Occupational Health Services

Dr. Musa	Laois, Offaly, Longford, Westmeath
Dr. Peter Noone	Louth, Meath

Contact Details:

Dr. Musa,	Consultant Occupational Physician	Occupational Health Department,
Tullamore, Co. Offaly.	Phone: 057 93 59137	

Dr. Peter Noone,	Consultant Occupational Physician	Occupational Health Department,
Market Street, Ardee, Co. Louth.	Phone: 041 685 7811	

4.1 Policies

The premises / areas occupied by the Health Services within MLM CHO are regularly monitored for hazards and risks, findings are recorded and action taken to resolve any issues identified. The Community Health Organisation is also supported by the National Health & Safety Function. A number of HSE links to policies in the area of Safety, Health and Welfare at Work are available on their web site. These can be found at the following link

<https://healthservice.hse.ie/staff/health-and-safety/>

Policy for the Prevention and Management of Stress in the Workplace 2018

Supplementary note to the HSE Policy for Prevention and Management of stress in the Work Place 2018

Safe Driving for Work Policy 2018

Policy on the Management of Health and Safety in Contract Work 2022

Manual Handling and People Handling Policy 2018

HSE Guideline on the Safe Handling and Use of Cytotoxic Drugs Aug 2022

Policy for the Prevention of Sharps Injuries

Policy on the Management of Biological Agents in the Healthcare Sector

Policy on Prevention and Management of Latex Allergy 2017

Policy on Lone Working 2017

Incident Management Framework 2020

Dignity at Work Policy (Bullying, Harassment & Sexual Harassment) **New Policy Due 2022**

Trust in Care Policy

Policy for Preventing and Managing Critical Incident Stress 2012

Policy Health & Safety Statutory Training 2016

Policy on the Management of Biological Agents in the Healthcare Sector

4.1.1 Guidelines

The following guidelines have been developed to assist staff with specific hazards which have been identified and are available on the HSE website or by following the links in this document.

Responsibilities of Managers (Senior & Line Managers including ECD's/CD's, Heads of Discipline, Area Directors of Nursing, Directors of Nursing) are outlined in Section 3.5 of this document.

Responsibilities of Employees as outlined with Section 3.6 of this document.

4.1.2 Fast Fact Sheets

It is recognised that unsafe work practices can be equally as hazardous as physical hazards and can cause serious injury and loss e.g. poor lifting techniques, failure to use personal protective equipment, etc.

Unsafe work practices are also identified in the safety audits and a number of Fast Fact Sheets have been developed as a guide to employees highlighting unsafe practices and detailing the appropriate methods and practices to reduce risks associated with unsafe behaviour. All employees are expected to read and adhere to the relevant Fast Fact Sheets and to work in accordance with their recommendations. Fast Fact Sheets are available at <https://healthservice.hse.ie/staff/health-and-safety/>

4.1.3 Training & Instruction

Reference: Policy on Statutory Safety & Health Training 2016

National Health & Safety Training Programme 2016 & Training Matrix

FAQ 014:01 Statutory Occupational Safety & Health Training

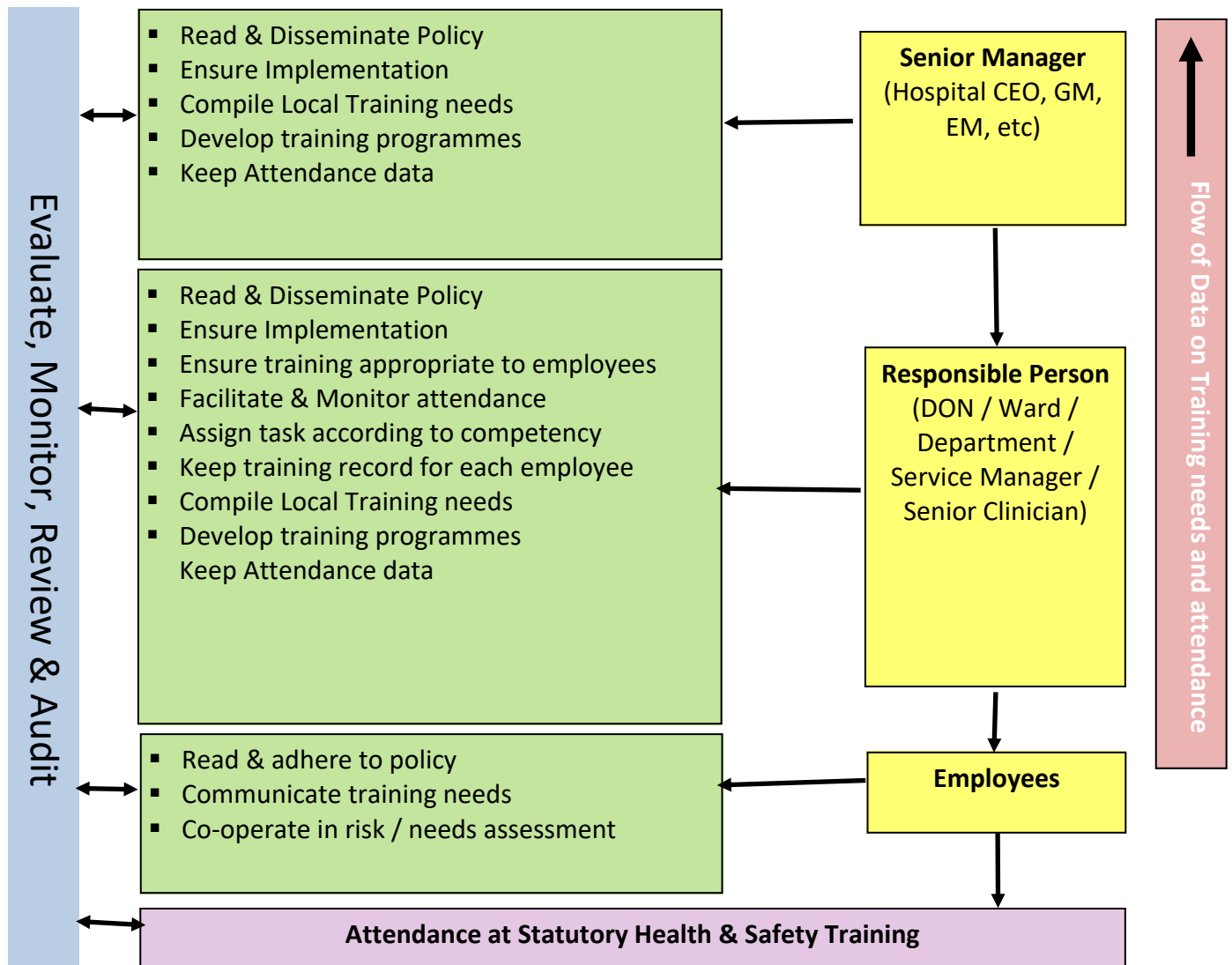
www.hseland.ie

New and inexperienced staffs are known to be particularly vulnerable to accidents. Induction training is essential. It is the responsibility of the Line Manager to introduce all new employees to the work place and each new employee must be advised of known hazards and the control measures in place to reduce the risk. Additional supervision may be required for new staff.

In addition to the above if a health & safety training need has been identified or established as a result of a risk assessment the need should be discussed with the Line Manager and appropriate training sourced & provided where required.

Records and attendance (or non-attendance) at Safety Health & Welfare Programmes are maintained on a database. Non- attendance at mandatory training will be followed up with staff by the Line Manager and booked into the next available mandatory training session arranged. Staff are informed that attendance at mandatory training is prioritised.

Implementation Plan for Policy on Statutory Health & Safety Training



4.1.4 Work Related Aggression

Reference: **Policy on the Prevention and Management of Work-Related Aggression and Violence 2018**

Together creating safer places of service strategy for managing work related aggression and violence 2008

Linking Service and Safety Violence & Aggression Summary

The Aggression & Violence Policy Fast Fact (FAST FACT Ref FF: 024:00)

Definition:

The Health Service Executive has adopted the EU definition of work-related aggression and violence as:

“Any incident where staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, well-being or health”.

We have identified that there is a risk of exposure to Violence and Aggression in the service. All staff are aware that they must report any incidents that they are involved in, witness or which are reported to them. Training in the Management of Violence and Aggression is Mandatory for all staff.

Responsibilities for Implementation of Work Related Aggression Policy

Managers (Responsible Persons) at all levels are responsible for implementing this Policy within their area and hence are required to develop an implementation plan, including identification of responsible person(s), specifying the actions to implement the PPPG and timeframes for implementation.

In the context of work related aggression and violence, Managers responsibilities include:

- That all policies and procedures are communicated to all employees
- Must complete suitable and sufficient risk assessments (See Section 11 Site Specific Safety Statement for Risk Assessments for your area) in consultation with employees, and ensure that all hazards associated with work related aggression and violence are identified and appropriate control measures introduced to eliminate, minimise, or control the risks
- Ensure that where appropriate, service user specific clinical risk assessments are completed and relevant information is communicated appropriately to relevant staff.
- Ensure that risk assessments and associated controls are monitored, reviewed and updated on a regular basis
- Ensure appropriate procedures and safe systems of work are in place to avoid/minimise associated risks so far as is reasonably practicable. This includes where relevant, sharing of records through an appropriate protocol.

- Ensure that employees identified as being at risk are given appropriate training based on training needs assessments, so far as is reasonably practicable on how to recognise, prevent and manage work-related aggression and violence.
- Supervising and monitoring of practices in relation to the management of aggression and violence
- Ensure all accidents, incidents and near misses are reported and managed in accordance with the HSE Incident Management Framework, 2018
- Providing appropriate support and ensuring the availability of additional supports to those who may encounter incidents of work related aggression and violence.

Training in Aggression & Violence.

Louth Meath: PMAV training and can be accessed via your line manager or patriciac.finlay@hse.ie.

Laois, Offaly, Longford & Westmeath: MAPA training, can be organised via your line manager or training co-ordinator.

Monitoring, Audit & Review of Work Related Aggression Policy

- Managers are required to monitor the implementation plan supporting this policy
- Managers are required to audit implementation of this policy using the Audit Checklist Tool in Appendix 1 of the Policy

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Violence & Aggression Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.5 Lone Worker / Lone Working

References: Policy Lone Working August 2017
HSE (2012) Policy for Lone Working
HSE (2012) Guidelines for Lone Workers
HSA (2011) Guidance on Lone Working in the Healthcare Sector
NHS (2009) Not Alone – A Guide for the better protection of lone workers in the NHS
Suzy Lamplugh (2016) Personal Safety available at
<http://www.suzylamplugh.org/Pages/FAQs/Category/personal-safety>

Definition:

Lone workers are those employees who work by themselves without close or direct supervision (HSA, 2011). Lone workers are employees who are physically isolated from colleagues and without access to immediate assistance.

Lone working refers to situations where employees in the course of their duties work alone:

- In fixed workplaces e.g. Health centres, employees working out of hours in laboratory, x-ray department, isolation patient care cubicles, reception areas, community group homes, maintenance departments etc.
- Workers working away from their base e.g. community based employees, ambulance personnel, employees working / attending meetings in a non HSE facility etc.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Lone Working Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

Core working hours in Community Health Services is 9.00 a.m. to 5.00pm Monday to Friday. However, some staff may work outside these hours. Where this occurs, staff must be vigilant about their own safety and adhere to the Fast Fact Lone Working Policy sheet appended to this statement. Any incidents or near misses are reported as per policy.

4.1.6 Transport / Driving For Work

References: HSP:003:00 HSE Safe Driving for Work Policy 2018
Fast Facts 017:01 HSE Safe Driving for Work Policy 2018
Road Traffic Act, 1961 and subsequent amendments
Guidance on Staff travel during COVID 19 Outbreak
Prompt Sheet - Staff Travel during COVID 19 Outbreak

Driving for work includes any person who drives on a road as part of their own work (not including driving to and from work unless in receipt of travel expenses) either in:

- A HSE vehicle, or
- Their private vehicle, receiving travel expenses from the HSE.
- The purpose of the Safety Driving for Work policy is to harness a safe driving culture by ensuring that all employees or any other person or persons driving on behalf of the HSE do so in a safe, reliable and responsible manner
- The Policy requires the HSE to reduce, so far as is reasonably practicable, all reasonable, foreseeable risks associated with driving for work and to detail arrangements to achieve this reduction in line with legislative requirements
- Individual services must develop local Guidelines and/or Standard Operating Procedures
- to support implementation and on-going monitoring of this Policy

This Policy applies to all HSE employees driving on behalf of the HSE, either driving their own private vehicle receiving travel expenses, or driving a HSE vehicle.

It is recognised that a significant part of the work of certain staff groups (e.g. Ambulance service) involves driving. Others may drive occasionally or for short journeys only. This policy encompasses any driving that meets the definition for driving for work as outlined in Section 5.0. of the Policy.

Employee Responsibilities

- Take reasonable care of their own safety, health and welfare and that of others
- Adhere to this Policy and any associated risk assessments
- Adhere to the rules of the road and speed limits unless the employee is entitled to avail of the exemptions outlined in section 87 of the Road Traffic Act 2010
- In such circumstances a dynamic risk assessment must be applied
- Co-operate with their employer or any other person as appropriate
- Not engage in improper conduct or behaviour or place anyone at risk whilst driving
- Attend training as appropriate
- Use safety equipment or PPE provided, or other items provided for their safety, health and welfare at work
- Ensure they are fit to drive at all times and aware of the implications which alcohol / illegal substances, medication and fatigue could have for driving safely
- Respond truthfully to questions from the health professional regarding their health history and status and the likely impact on their driving ability, including disclosure of drug or alcohol dependence
- Adhere to prescribed medical treatment and monitor and manage their conditions and any adaptations with on-going consideration of their fitness to drive
- Notify the line manager of any change in their medical status that may impact their ability to drive
- Comply with requirements of their licence as appropriate including periodic medical reviews
- Adhere to the procedures in place in the event of an accident or incident

Report to the line manager as soon as is practicable:

- Incidents / accidents, near misses while driving for work
- Any injury or illness or anything that may affect their ability to drive
-
- **Drivers driving their own vehicle must**
- Hold a valid driving licence and insurance specifying HSE indemnification (specifying the carrying of passengers and goods)
- Ensure driving licence is carried with them at all times while driving
- Ensure vehicles are roadworthy, fully taxed, have a valid NCT (if required) and have both discs displayed
- Receive management approval and authorisation to drive
- Report to the Line Manager if driving licence has been suspended or cancelled
-
- **Drivers driving a HSE vehicle must:**
- Hold a valid driving licence, and ensure this is carried at all times while driving
- Receive management approval and authorisation to drive a HSE vehicle
- Ensure vehicles have a valid tax disc displayed
- Ensure that insurance disc/state indemnity confirmation/CRW disc is displayed
- Ensure that the vehicle being driven and vehicle equipment provided is fit for use, serviced and appropriate records maintained
- Report to the Line Manager if driving licence has been suspended, cancelled or has penalty points, or limitations placed upon it
- Report to the Line Manager any HSE Vehicle defects

Employees must not:

(i) Interfere with, misuse or damage anything provided for securing the safety, health and welfare of those at work

Failure to comply with this Policy may result in disciplinary action.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Driving for Work Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.7 Workplace Security

References: Department Service Security Prompt Sheet

Employees should make themselves aware of the workplace security arrangements in their locations. These arrangements are detailed in the Sites Specific Section 11 of this Safety Statement. They must also report any incidents to the Line Manager in line with the Incident Management Framework.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Workplace Security Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.8 Welfare Facilities

Welfare facilities will be provided in accordance with the provisions of **Safety Health & Welfare at Work (General Application) Regulations, 2007, Part 2, Chapter 1, Workplace** as outlined in the following sections.

Section 18	General Welfare Requirements
Section 19	Rest Rooms & Rest areas
Section 20	Sanitary & Washing Facilities
Section 21	Changing Rooms & Lockers
Section 23	Outdoor Places of Work, Special Provisions
Section 24	Pregnant Postnatal & Breast feeding Employees (See Section 4.1.16 Pregnant Employees)
Section 25	Employees with Disabilities

4.1.9 First Aid

Reference: **FAQ 007:02 RE: Occupational First Aid - First Aid at Work**
Legislation: The Safety, Health & Welfare at Work (General Application)
Regulations 2007, Chapter 2 of part 7: First-Aid.

PHECC has designed the First Aid Response (FAR) Standard to offer appropriate training to individuals and groups who require a first aid skill set including cardiac first response. This standard is designed to meet first aid and basic life support (BLS) requirements that a person known as “First Aid Responder” may encounter. The FAR Standard meets the Health and Safety Authority (HSA) requirement for occupational first aid training for the workplace. The Child and Family Agency (TUSLA) guidance also recognises FAR as the standard for child care.

All staff need to make themselves familiar with the names of First Aid Responders and the location of First Aid supplies and first aid services in their particular locations. They are also reminded of their obligations to report any incidents in line with the Incident Management Framework 2018.

Refer to Section 11, Site Specific Safety Statement for details.

4.1.10 Infection Control

References: **Policy on the Management of Biological Agents in the Healthcare Sector**
Use of Sharps Prompt Sheet
Clinical Risk Waste on the Ward/Department
<https://www.hpsc.ie/> Health Protection & Surveillance Centre.
Risk assessment Prompt Sheet- Infection Prevention and Control V 3.1
Issued 19.06.2020

The CHO Hand Hygiene education is a face-to-face programme and is governed by the HCAI AMR National Task Force (Healthcare Associated Infections, Anti-microbial Resistance). The HCAI AMR team want everyone to complete the face-to-face practical programme to reduce the number of hospital acquired infections. The online course is only supplementary theory education.

Training records are kept by the Line Manager and are also kept on employee’s HR record.

Staff have access to:

Pre- employment screening.
Standard Precautions Training.
Hand Hygiene training.
Occupational Health Department

Personal Protective Equipment is also available to staff if necessary (suitable to the tasks & risks) ie. Gloves, disposable aprons, facemasks, eye protection, gowns, coveralls, disinfectant wipes, hand gels & washes etc.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Infection Control Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.11 Biological Agents

References:

HSA (2013 & 2020). Code of Practice for the Safety, Health and Welfare at Work (Biological Agents) Regulations.

HSA (2014) Guidelines to the Safety, Health and Welfare at Work (Biological Agents) Regulations 2013.

HSE Policy on the Management of Biological Agents in the Healthcare Sector 2017

HSE Policy on the Management of Biological Agents in the Healthcare Sector 2017

Fast Fact Ref: FF 011:01

Guidance on Completion of Biological Agents Risk Assessment Form Ref: CF:004:02

Guidelines for the Preparation for Transport of Patient Specimens and other Biological Materials 2019

Biological Agents FAQ, Ref: FAQ 001:02

Guidance to support the review and updating of Laboratory Biological Agents Risk Assessments during COVID 19

Health and Safety RA Form to support the review and updating of Laboratory BA Risk Assessment during COVID 19

Guidance on reviewing and updating Biological Agents Risk Assessments in all HSE Acute Healthcare Settings (excluding Laboratories) during COVID-19

Biological Agents Risk Assessment in HSE Acute HC Facilities (excl Lab) during COVID 19

Guidance on reviewing and updating Biological Agents Risk Assessment in HSE Residential Care Facilities during COVID 19

Biological Agents Risk Assessment for HSE Residential Care Facilities during COVID 19

Ref: GD 0017:00 Guidance on reviewing and updating Biological Agents Risk Assessments for Health & Social Care Services carry out home visits during COVID 19

The HSE acknowledges that some employees may be exposed through work activities to biological agent(s), which may either be deliberate (e.g. Laboratory work) or incidental (e.g. direct patient care, maintenance activities, laundry activities), and in compliance with the Safety, Health and Welfare at Work (Biological Agents) Regulations 2013, and the associated Code of Practice (2013) (CoP), are committed to eliminate or reducing the risk of exposure.

Managers have the following responsibilities with regard to Biological Agents:

- Have an understanding of what constitutes a biological agent and has available to them the Safety, Health and Welfare at Work (Biological Agents) Regulations (2013) and associated Code of Practice
- Carrying out written risk assessments which identify the hazards and the risk associated with exposure to a biological agent, and ensuring appropriate measures are put in place to eliminate, control or minimise the risk
- Where the risk assessment indicates that there is a risk of exposure to a biological agent for which an effective vaccine exists, ensure vaccines are offered free of charge to the employees at risk, and ensure relevant health surveillance is made available through Occupational Health
- Provide employees with appropriate information, instruction, supervision and training
- Ensure a biological agents emergency plan is in place to prevent or mitigate the potential for emergency situations
- (e.g. Aerosol release, needle stick injury, spills, biological safety cabinet failure)
- Ensure that incidents involving exposure to biological agents are reported and managed in line with this policy

Employees must:

- Understand what constitutes a biological agent
- Adhere to and apply this Policy, local procedures and safe systems of work and any associated risk assessments and risk controls

Detailed Roles and Responsibilities are outlined in the HSE Policy on the Management of Biological Agents in the Healthcare Sector 2017

Incidents must be reported to the Line Manager and the injured person must then promptly report to the emergency department.

The Occupational Health Department can also be contacted for further advice following an incident.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Biological Agents Risk Assessment are referred to in the Site Specific Section 11 of this Safety Statement.

4.1.11.1 Vaccination

Where the risk assessment indicates that there is a risk of exposure to a biological agent for which an effective vaccine exists, the employer must offer the vaccine (free of charge) to the employee at risk.

The Immunisation Guidelines for Ireland, Royal College of Physicians of Ireland, list the vaccines recommended for certain categories of workers based on the type of work they carry out. See www.hpsc.ie for further information.

Employees must be informed of the benefits and drawbacks of both vaccination and non-vaccination. Records of vaccination and follow-up (where required) should be retained and should be kept confidential.

Whilst immunisation is an effective healthcare intervention, it is just one part of a wider strategy to prevent the transmission of blood borne infections. It should never be regarded as a substitute for good infection control practices such as hand-hygiene and standard precautions.

4.1.12 PPE (Personal Protective Equipment)

References:

Safety, Health and Welfare at Work (General Application) Regulations 2007
Chapter 3 — Personal Protective Equipment, Sections 62 - 67
FAQ 006:02 RE: Personal Protective Equipment (PPE)
HSE Policy on the Management of Biological Agents in the Healthcare Sector
Guidance to support the review and updating of Laboratory Biological Agents Risk Assessments during COVID 19
Guidance on reviewing and updating Biological Agents Risk Assessments in all HSE Acute Healthcare Settings (excluding Laboratories) during COVID-19
Guidance on reviewing and updating Biological Agents Risk Assessment in HSE Residential Care Facilities during COVID 19

In accordance with the Safety, Health and Welfare at Work (General Applications) Regulations, 2007, where it is not practicable to eliminate certain risks, the Health Service Executive provides adequate and suitable P.P.E. to reduce the risk to an acceptable level. Use of PPE will be based on Risk Assessments and instruction and practical training in use of P.P.E. is given prior to issue. Line managers should ensure that adequate supplies of P.P.E are available and that equipment is utilised without fail.

In the area of infection control, gowns, coveralls, plastic aprons, gloves, goggles, face shields, masks and overshoes are available as required for staff in all client care areas. Latex free etc. can be supplied if allergies develop. Employees must advise Department Manager or his/her deputy if this occurs.

Line managers also have the duty to require any member of staff, not using appropriate PPE, or not utilising PPE in an appropriate manner, to suspend work activity which requires such protection until such time as the appropriate PPE is available or the PPE is utilised correctly.

4.1.13 Latex

References: Policy on the Prevention & Management of Latex Allergy 2017 HSP: 012:02
FF: 012:01 Fast Fact Latex Policy

Latex Allergy:

Latex products such as gloves have proved effective in preventing transmission of infectious diseases to health care workers. With this in mind, some staff may if exposed to latex, have a latex allergic reactions. Control measures have been put in place to reduce staff exposure

to latex and are detailed on the Site Specific Risk Assessment which can be found in Section 11 of this Safety Statement.

Staff who develop the symptoms of latex allergy must avoid direct contact with latex gloves and other latex containing products until a medical examination is undertaken by Occupational Health Services. An incident report form should be completed where applicable.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Latex Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.14 Display Screen Equipment

References: CF:008:04 Display Screen Equipment Workstation Risk Assessment Form
Display Screen Equipment (DSE) Campaign
Display Screen Equipment FAQ
Display Screen Equipment Risk Assessment
Sample Display Screen Equipment Risk Assessment
Use of Display Screen Equipment (DSE) Safety Alert
Office Environments - Safety Checklist
Ergonomic Tips for a Healthier Workspace - Fast Fact
Ergonomics - Fast Fact
DSE Campaign/Information Slides
Fast Fact, FF:021:00 Ergonomic Tips for a Healthier Workplace Aug 2017
Fast Fact, FF 022:00, Ergonomics November 2017
HSELand Display Screen Equipment: User Awareness
HSELand Display Screen Equipment: Assessor's Module
Covid 19 Home Working Guidelines
Health and safety COVID-19 instructions on how to clean PC and desks
Home Working Risk Assessment Form
Working from home during COVID-19 – Workstation Setup
Health and Safety COVID-19 workstation hygiene

Under the Safety Health & Welfare at Work (General Application) Regulations 2007, all hazards associated with the use of display screen equipment must be identified and any risk to the health and safety of the user must be assessed on the Display Screen Equipment Risk Assessment Form.

A Risk Assessment programme may be access online via HSE e-learning site HSELand

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to

assess the risks associated with work activities. The Display Screen Equipment Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.15 Eye & Eyesight

Under the Safety Health & Welfare at Work (General Application) Regulations 2007, Part 2, Chapter 5, Section 75, the Health Service Executive, is obliged to ensure an appropriate eye and eyesight test is made available to all employees who habitually use display screen equipment as a significant part of their normal work. Such tests are made available

- Before commencing display screen work
- At three year intervals thereafter and/or
- If an employee experiences visual difficulties.

Apply to the General Manager through your line manager for authorisation to attend examination. Employees are free to use an optometrist of their choice.

Further information is available from your Line Manager

4.1.16 Pregnant Employees

References: Pregnant Employees FAQ

Safety Health & Welfare at Work (General Application) Regulations, 2007, Part 6, Chapter 2, Protection of Pregnant, Post Natal and Breastfeeding Employees.

SAGN 001:02 Pregnant Employee Risk Assessment Form

FAQ 005:03 Pregnancy Assessment

<https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/guidance-on-fitness-for-work-of-healthcare-workers-in-the-higher-risk-categories.pdf>

Management are committed to protecting both the pregnant employee and the unborn infant from injury during the course of work.

Once a manager becomes aware that an employee is pregnant, they must assess the specific risks from the employment to that employee and take action to ensure that she is not exposed to anything, which would damage either her health or that of her developing child. Risk assessments should already have identified any hazards, which may present a risk during pregnancy. The risk assessment specifically required by the Pregnancy Regulations should therefore, be a re-appraisal of the hazards already identified. Click here to access the Pregnancy Risk Assessment. There is a responsibility on a staff member to inform her employer

Advice on the risk of particular workplace exposures can be obtained from the Occupational Health Service

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to

assess the risks associated with work activities. The Pregnant Employee Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.17 Bullying

References: **Dignity at Work Policy for the Health Service (May 2009)** **New Policy due July 2022**
HSE Land Dignity at Work

“Workplace Bullying is repeated inappropriate behaviour, direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment, which could reasonably be regarded as undermining the individual’s rights to dignity at work”

Bullying in the workplace, regardless of who bullies who, is now well recognised as a form of harassment and is totally unacceptable in the HSE. The HSE will not tolerate any employee, regardless of their position, treating a fellow worker with anything less than their due dignity. For further guidance on forms of bullying and procedures for dealing with allegations of bullying, please refer to the following:

4.1.18 Stress

References: **HSE Policy for Prevention and Management of Stress in the Workplace 2018**

Supplementary note to the HSE Policy for Prevention and Management of stress in the Work Place 2018

Stress Policy Fast Fact FAST FACT Ref FF:015:01

Stress Management European Safety & Health at Work

Stress FAQ Ref: FAQ: 015:01 Work Related Stress

Policy on Preventing and Managing Critical Incident Stress

Workplace Stress Risk Assessment Form.

Sample Stress Risk Assessment Form

Dignity at Work Policy (Anti Bullying, Harassment and Sexual Harassment Policy and Procedure

The HSE’s recognises its greatest asset is its employees and that dealing with people who are ill / traumatized can be difficult and can produce stress or strain with repeated exposure in the long term. Such stress may also be the result of pressures within personal life or within the workplace. Stress is a recognized factor in most of our lives. It has to be lived with or managed if we are to avoid becoming ill as a result. For further information please refer to the HSE Prevention and Management of Stress in the Workplace 2012 which is appended to this document:

The Occupational Health Service offers a confidential service to employees who think they may be suffering from the effects of stress, whatever the cause. The confidential staff counselling service can be accessed through the Occupational Health Service. See also 7.6 Welfare for details of the Employee Assistance and Counselling Services.

Contact: Employee Assistance and Counselling Services

Employee Assistance and Counselling Service provides confidential professional counselling support and referral service to employees. These services are designed to give employees a resource to contact for personal or work related issues that impinge on work performance or personal wellbeing. EACS is a confidential service, and is provided free of charge to all HSE Employees.

There are three pathways by which an employee may access the EACS.

- An employee may self-refer
- An employee may be referred by Occupational Health
- An employee may be referred by line management

Matters raised in individual cases are confidential and are not discussed with managers.

Employee Assistance and Counselling Services also provide formal structured support to groups of employees who have experienced distress as a result of a critical incident.

EACS provides support to management on staff on wellbeing issues.

The EACS provides assistance with a wide range of issues including:

- Work related stress
- Interpersonal relationships,
- Difficulties in the workplace (including bullying & harassment) traumatic incidents (e.g. assault, suicide)
- Addictions
- Personal issues (e.g. bereavement, relationships)

The EACS also provides

- Professional assessment
- Personal support
- Counselling
- Referral to other professional resources where appropriate
- Critical incidents debriefing

The EACS is provided by Counsellors who are accredited by professional body and practice in accordance with the Ethics and Code of Practice of the professional bodies to which they are members.

Contact details:

Louth & Meath: Confidential Counselling Service 24hour Freephone 1800 409388
staffcare@belfasttrust.hscni.net www.staffcare.org

Laois, Offaly, Longford & Westmeath: Bernie Brady O'Neill Place, Tullamore, Co Offaly

Freephone - 1800 240414 / 057 9328033 / 086 8069919 berniem.brady@hse.ie
employee.assistance@hse.ie

The Occupational Health Service offers a confidential service available to employees.

The HSE acknowledges its legal duties to provide a safe and secure environment in which to work, free from harassment and which gives employees the opportunity to manage their own health and fitness. Staff within MLM CHO Health Services can liaise with their Line Manager regarding any workplace stress they may be experiencing in a confidential manner.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Stress Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.19 Fire Safety

References: HSE Fire Policy
Safe Work Practice Sheet – Fire Safety General

Premises

In respect of all Community Health Services, it is the responsibility of the Business Manager:

- (a) To ensure that HSE premises are protected by a fire alarm system.
- (b) To have adequate equipment in place to comply with legal, regulatory and local requirements in the event of a fire.
- (c) To ensure that fire orders are displayed throughout the building and that staff are aware of them.
- (d) To draw up in conjunction with the Regional Fire Officer a Fire Policy for the premises and be attached to the Premises Safety Statement. (Documentation regarding checks etc. are located in the designated box within each centre.
- (e) To have inspections at regular intervals.

It is the responsibility of the Line Manager to ensure that all staff have attended Fire Safety Training. Records of attendance and non - attendance are maintained on each individual employees' record. Fire Drills are held annually and all staff members must attend a fire drill and lecture each year. Attendance is mandatory and staff are informed that attendance must be prioritised.

If a fire is detected by a member of staff, they should immediately sound the alarm using the break-glass units where provided.

Where Fire Orders are displayed throughout premises, the procedures shown on these Fire Orders should be followed. All employees should read these Fire Orders and make themselves familiar with the procedures.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Fire Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.20 Waste Management

References: PS:033:00 Clinical Risk Waste on the Ward/Department
<https://www.hse.ie/eng/about/who/healthbusinessservices/national-health-sustainability-office/files/hse-waste-management-handbook.pdf>
<https://www.hse.ie/eng/about/who/healthbusinessservices/national-health-sustainability-office/waste-prevention/waste-measuring-monitoring-and-benchmarking/>
<https://www.hse.ie/eng/about/who/healthwellbeing/infectcont/sth/gl/section-20-healthcare-risk-waste-management.html>

All waste is segregated and disposed of in a safe and responsible manner.

For additional information, please refer to the DOH (2010) Healthcare Risk Waste Management, Segregation, Packaging and Storage Guidelines for Healthcare Risk Waste. Available here:

http://www.lenus.ie/hse/bitstream/10147/120929/1/healthcare_waste_packaging2010.pdf

Clinical Risk Waste includes the following:

- Biological (recognisable anatomical waste)
- Infectious waste (clinical waste containing infectious substances of Category B pathogen)
- Sharps (e.g. needles, scalpels, sharps tips of I.V. sets)(Please note, Sharps require a separate risk assessment – see Hazard Control prompts on Sharps

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Waste Management Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.21 Manual Handling

References: Manual Handling and People Handling Policy 2018
Moving & Handling Operational Plan
Bariatric Guidelines re Manual Handling Issues
Moving and Handling Fast Fact FF:014:01
Principles of Safer Manual Handling Fact Fast F F : 0 2 3 : 0 0 Jan 2018
People Handling Risk Assessment Form and Guidance
Task Specific Manual Handling - Inanimate Loads - Risk Assessment Form
Sample Task Specific Manual Handling - Inanimate Loads - Risk Assessment Form
HSELand Manual Handling and People Handling e-learning Theory Module

**HSELand Manual Handling and People Handling e-learning Theory Module -
Assessment refresher
COVID 19 Manual Handling Training Prompt Sheet
Manual Handling Risk Assessment Covid
Manual Handling Training High-Level Risk Assessment Rationale**

Manual handling is inherent in all occupations. The aim of the Policy is to:

- Avoid or reduce, in far as is reasonably practicable, the risks associated with manual handling and people handling activities
- Provide the highest quality of care to service users
- Ensure compliance with relevant statutory requirements and standards and guidelines such as those published by the Health & Safety Authority (HSA) and Health Information and Quality Authority (HIQA)

The Safety, Health & Welfare at Work (General Application) Regulations 2007 require that all staff receive moving & handling training appropriate to their role. Animate or Inanimate moving & handling does occur in MML CHO Health Services.

This training is provided to all staff by qualified and competent instructors at not greater than 3 year intervals as per recommended in the HSE Moving & Handling Policy. Training records are maintained on each individual employees record.

Training in Moving & Handling is Mandatory for all staff.

The following documented Risk Assessments are required as appropriate:

- Overall Generic Unit/Department Risk Assessments
- Task Specific Risk Assessment
- Individual People Handling Risk Assessments
- Dynamic Risk Assessment: This is an informal on-the-spot undocumented risk assessment which is required to be undertaken by the employee/s prior to undertaking any manual or people handling task. The purpose of the dynamic risk assessment is to assist the employee in determining if the task is within their capability. Employees need to consider the service users written risk assessment and the training they have received and any information provided relating to the task.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Manual Handling Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.22 Chemicals

References: **Chemical Safety Ref: FAQ 012:01**
 Chemical Agents Risk Assessment Form
 Risk Assessments & Relevant Safety Data Sheets (SDS) pertinent to each
 chemical used within MLM CHO Health Services and appended to the this
 safety statement.
 HSELand Chemical Safety in the Workplace (Introductory)
 HSELand Managing Health and Safety in Healthcare : Chemical Agent
 Hazards

A small number of chemicals are available for use to assist in maintaining a clean work environment within MLM CHO. Any defective or missing personal protective equipment should be reported by staff immediately for replacement. Chemical Risk Assessments on the products used are available in the appendix of this Safety Statement. These Safety Data Sheets includes information on safe storage, handling/use, appropriate personal protective equipment, accidental spillage procedures and disposal of all chemicals. All staff should read and be familiar with:

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Chemical Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1 .23 Electrical Safety

Reference: **Safety Health & Welfare at Work (General Application) Regulations, 2007,**
 Part 3, Electricity.
 SA:001:00 Electrical Equipment e.g. Treatment Couches, Chairs & Beds -
 Potential Risk Of Injury From Damaged Electrical Cables

It is the responsibility of all staff to ensure that all electrical equipment is used in accordance with the manufacturer's guidelines.

All defective electrical equipment will be taken out of use and reported without delay to the Line Manager. All equipment when not in use should be unplugged. Mobile phone chargers should be disconnected immediately from the socket when the phones are charged.

It is the responsibility of each member of staff to ensure that the area around their own workspace is free from hazard. Hazard identification and control measures have been completed for all Services which are appended to this statement.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Electricity Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.24 Slips/Trips/Falls

References: FF 003:01 Slips, Trips & Falls March 2019
SAGN 003:01 Preventing Slips, Trips & Falls (STF's)

Staff must take responsibility for their safety particularly in their own immediate working environment. Neat and tidy working is part of their responsibility. Relevant storage of all material and equipment is essential. Hazard identification and control measures have been carried out for all Services and are available in the Site Specific Section (Section 11) of this document.

Wet Floors:

Floor surfaces may be a slip hazard when wet. Employees are expected to note the hazard, report it and arrange to have it mopped-up and take care when traversing wet floors.

Spills Procedures:

If a spill occurs, the staff member who first encounters the wet floor surface should immediately arrange to place yellow hazard floor signs at the site and to have the spill cleaned up.

Adverse weather conditions can also make outside areas a risk. Preventative measures are outlined in the Adverse Weather Risk Assessment.

Under Section 19 of the Safety, Health Welfare at Work Act 2005 and the Safety, Health & Welfare at Work (General Application) Regulations 2007, it is the duty of every employer to assess the risks associated with work activities. The Slips, Trips & Falls Risk Assessment is referred to in the Site Specific Section 11 of this Safety Statement.

4.1.25 Maintenance

Note: Systems of governance for Maintenance vary within MLM CHO. Ensure that the appropriate system for your locality is utilised.

The Maintenance and or Business Manager, as appropriate, are responsible for ensuring:

- Maintenance work is carried out in core services by appropriate personnel.
- Fire alarm systems and fire extinguishment equipment are serviced as per legislative requirement by external specialist contractors.
- Many of the hazards identified in the hazard control sheets such as some tripping hazards can be eliminated in the course of routine building maintenance work.
- A Maintenance Procedure is in place – Maintenance / Business Managers Office has responsibility for this. All maintenance issues should be reported to the Maintenance / Business/ Estate Manager for follow up. Any incidents that occur are reported and followed up.

4.1.26 Contractors

References: Policy on the Management of Health and Safety in Contract Work 2022
FF 016:01 Contractors Policy

Note: Systems of governance for Contractors vary within MLM CHO. Ensure that the appropriate system for your locality is utilised.

The Business Manager, Estates Manager and or Maintenance Manager, as appropriate, are responsible for ensuring that **any** Contractors engaged to complete work on Health Service premises will be provided at pre-contract stage with a copy of the safety statement for the respective premises. All staff will be informed in advance of any works to take place to ensure that staff safety is paramount during any works.

4.1.27 Visitors

The HSE has an obligation to ensure that those who visit HSE premises are protected from hazards. This can be done by ensuring that:

- Visitors do not have access unless by invitation or appointment and are supervised by HSE staff.
- Premises are cleaned & maintained to the highest standards.
- All entrances and exits shall permit easy access and egress.
- Lined car parking and good external signage are also in situ.
- Fire Orders are clearly positioned around the building, Assembly Points for fire safety are clearly marked and staff using the facility shall be made aware of the designated area.
- All surfaces are in good condition and maintained properly to avoid slipping, tripping and falling.
- Appropriate procedures are in place following the various risk assessments to deal with known risks.
- Signage for visitors are strategically located within centres
- Any incidents are reported both verbally and in writing as soon as possible.
- It is the responsibility of both management & staff to ensure that visitors are protected on HSE premises.

4.1.28 Emergency Situations

Emergency situations can & do occur e.g. fire, floods, gas leaks, bomb threats and any other unplanned situation which need to be dealt with appropriately. In respect of such emergencies please note the following:

Fire Emergencies

See section 4.1.19 above

Electrical Outage / Issues

Before evacuating the area:

Turn off all electrical appliance if possible.
Report immediately to Business Managers Office.
Contact ESB

Floods

- Identify Source & assess situation. Turn of water sources if possible.
- Turn off all electrical appliances.
- Report immediately Business Managers
- Salvage any equipment, files etc. by moving to higher location or removing from premises if possible
- Call for expert assistance as required.

Other Emergencies

- Dial 112 and advise them what the situation is and ask them to connect you to the appropriate service for advice and follow their directions.

Detailed Emergency Plans and Contact numbers in the event of an emergency for local services are detailed in Site Specific Section 11 of this Safety Statement

4.1.29 Information

Information in the form of Fire Orders, warning signs and posters are displayed at appropriate locations in premises. Information relating to substances, materials or equipment being used in the workplace will be available through the responsible persons – i.e. Business Manager, Fire Safety Officer and Quality & Risk Advisor.

The HSE has acquired published safety material relevant to its work activities. This material includes legislation, standards, guidance notes and codes of practice together with some journals and publications from occupational safety and health organisations.

Information is also available from the National Health & Safety Function website
<https://healthservice.hse.ie/staff/health-and-safety/>

4.1.30 Asbestos

References: Safety Health & Welfare at Work Act 2005

Safety Health & Welfare at Work (Exposure to Asbestos) Regulations 2006

Safety Health & Welfare at Work (Exposure to Asbestos) (Amendment) Regulations 2010

Health & Safety Authority 'Practical Guidelines on ACM Management & Abatement 2013

Asbestos is the name for a group of natural occurring mineral fibres which are strong and both heat and chemically resistant. Due to these properties, asbestos was commonly used in the past as insulation and fire proofing. It was also used as a component in other building materials. There are three main types of asbestos found in Ireland – chrysotile (white asbestos), amosite (brown asbestos) and crocidolite (blue asbestos).

The risk associated with exposure to asbestos relates to the possibility that the fibres within the asbestos containing material (ACM) can become released into the air and are then inhaled. Breathing in air containing asbestos fibres can lead to asbestos-related diseases (mainly cancers of the chest and lungs). These diseases will not occur immediately and can take from 15 – 60 years to develop. Note that as long as asbestos is in good condition and there is no disturbance or damage to the ACM, it will not pose a risk to health as fibres will not be released.

It is now prohibited to use, re-use, sell or supply asbestos or asbestos containing materials or products. However products or materials containing asbestos, which were already installed or in service prior to the prohibition, may remain in place until they are disposed of or reach the end of their service life. As a result, there is still potential for exposure to asbestos in a variety of workplaces (including domestic properties undergoing refurbishment) due to the large quantities of asbestos and ACM's which were used in buildings in the past.

Asbestos can be found in any industrial, commercial, public or residential building built or refurbished before the year 2000. Asbestos was widely used in a large variety of construction materials for a number of purposes e.g. flooring, walls, ceiling, roofs, heating systems and equipment. A detailed survey will be required to identify where asbestos is present in your building. An asbestos survey must be carried out by a competent person.

Asbestos awareness training must be provided for anyone who during the course of their work, could potentially or unknowingly disturb asbestos containing materials (ACMs) causing asbestos fibres to be released into the air and those involved in building management, refurbishment or design e.g. Plumbers, Electricians, Facilities Managers, Designers, Architects, engineers, PSDP. *Awareness Training does not in any way enable you to work with asbestos containing materials (ACMs).*

A competent person must carry out **any** activity that involves disturbance of asbestos or asbestos containing material. **All** asbestos removal activities must be carried out by a competent person. The level of training, experience, knowledge and information required depends on the nature of the work

The Health and Safety Authority has published a comprehensive **guidance document** on asbestos which includes the following:

- Information on types of asbestos and asbestos containing materials (ACMs) in buildings.
- Health effects of asbestos and associated risks to different types of workers.
- Risk assessment of ACMs and use of various risk assessment algorithms.
- Various legislation applicable to asbestos in Ireland.
- Managing ACMs in workplaces and developing an Asbestos Management Plan (AMP)

- Protocol for Management Asbestos Surveys (MAS) and a Pre-refurbishment/demolition survey (RDAS).
- Bulk sampling and analysis.
- Training, instruction and information requirements.
- Personal Protective Equipment for working with asbestos and ACMs.
- Protocols for lower risk work with asbestos and ACMs
- Protocols for higher risk work with asbestos and ACMs.
- Contents of Plans of Work (method statements) for lower and higher risk asbestos work.
- Role of the Independent Analyst, Four stage Clearance procedure and Certificates of Reoccupation.
- Health surveillance and exposure registers.
- Notification requirements.
- Advice for management and disposal of asbestos and ACMs.

Asbestos will be managed in line with HSA National Guidelines and locally developed procedures. Details of locations containing asbestos at local level are outlined in the Site Specific Section of the Safety Statement.

4.1.31 SARS – CoV 2 (COVID-19)

Check to ensure that the most current information is being utilised.

References: www.hse.ie
www.hpsc.ie
www.hsa.ie
 Returning to the Workplace Safely Risk Assessment Prompt Sheet
 Summary of key support roles in the implementation of the HSE's return to Workplace Protocol
 Return to Work Safely Protocol COVID-19 Specific National Protocol for Employers and Workers
<https://www.gov.ie/en/publication/22829a-return-to-work-safely-protocol/>
<https://healthservice.hse.ie/staff/coronavirus/>
 Ref: CF:011:01 Interview Room Checklist
 Ref:CF:021:01 Safety Checklist for Office Environments
<https://www.hse.ie/eng/services/list/1/envIRON/advice-for-managing-water-systems-in-a-shutdown.html>
<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/>
<https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/guidance-on-fitness-for-work-of-healthcare-workers-in-the-higher-risk-categories.pdf>

Exposure to COVID-19 is a public health risk which affects all citizens. The COVID-19 pandemic also has implications for all workplaces as it can present a health risk to workers and other persons at a place of work. The reopening of the economy goes hand-in-hand with the provision of public health measures to reduce the risk of spread of COVID-19 as well as the existing occupational safety and health measures. Managing the risk of spread in the workplace is important in relation to the health of workers but is also important as part of general efforts to control the spread and protect the most vulnerable.

The Return to Work Safely Protocol is designed to support employers and workers to put measures in place that will prevent the spread of COVID-19 in the workplace when the economy begins to slowly open up, following the temporary closure of most businesses during the worst phase of the current pandemic.

The Protocol should be used by all workplaces to adapt their workplace procedures and practices to comply fully with the COVID-19 related public health protection measures identified as necessary by the HSE.

The Return to Work Safely Protocol, is the result of a collaborative effort by the Health and Safety Authority (HSA), the Health Services Executive (HSE) and the Department of Health and the Department of Business, Enterprise and Innovation.

4.1.32 Remote Working / Blended Working Arrangements

Check to ensure that the most current information is being utilised.

References: www.hse.ie
www.hsa.ie
www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/covid-19-home-working-guidelines.pdf
www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/working-from-home-during-covid-19-workstation-setup.pdf

Ref: CF:050:00RE: Home Working Risk Assessment Form

HSA Guidance on Working from Home for Employers and Employees available at https://www.hsa.ie/eng/topics/covid-19_coronavirus_information_and_resources/covid19_guidance_and_advice/guidance_and_advice/guidance_for_employers_and_employees_when_home-working/

Health and Safety Executive (2020) Protect home workers available at <https://www.hse.gov.uk/toolbox/workers/home.htm>

All managers must check HSE.ie to keep informed of up to date information and advice.

Under the Safety, Health and Welfare at Work Act, 2005 employers have duty to ensure the safety, health and welfare of employees. These duties extend to when employees are required to work from home. Employees also have reciprocal duties under this Act.

Section 5.1 Risk Management Process

A Risk Assessment is a systematic and critical examination of the workplace for the purpose of identifying hazards, assessing the risk and recommending controls of the hazard where appropriate. Where hazards cannot be eliminated, control measures will be recommended to reduce the risk to an acceptable level

In accordance with Section 19 Safety Health and Welfare at Work Act 2005, Risk Assessments have been completed for the all Health Services and Staff. Within the Risk Assessment persons responsible for ensuring that additional recommended controls are implemented within agreed timeframes are named. Employees will be made aware of the Risk Assessments relevant to their work activities. A Risk Assessment will be reviewed where:

- (a) there has been significant change in the matters to which it relates, or
- (b) there is another reason to believe that it is no longer valid, e.g. new legislation, following an accident, introduction of a new process, etc.

Following the review, Risk Assessments will be amended as appropriate.

The selection and implementation of the most appropriate method of risk or hazard control is a crucial part of the risk assessment process.

Persons carrying out Risk Assessments will have regard to Schedule 3 of Safety Health and Welfare at Work Act 2005

The Risk Management Process as outlined in Figure 1 below comprises of the following four steps:

Step 1 Identification of the Hazard

Step 2 Identify the Risks associated with the hazard

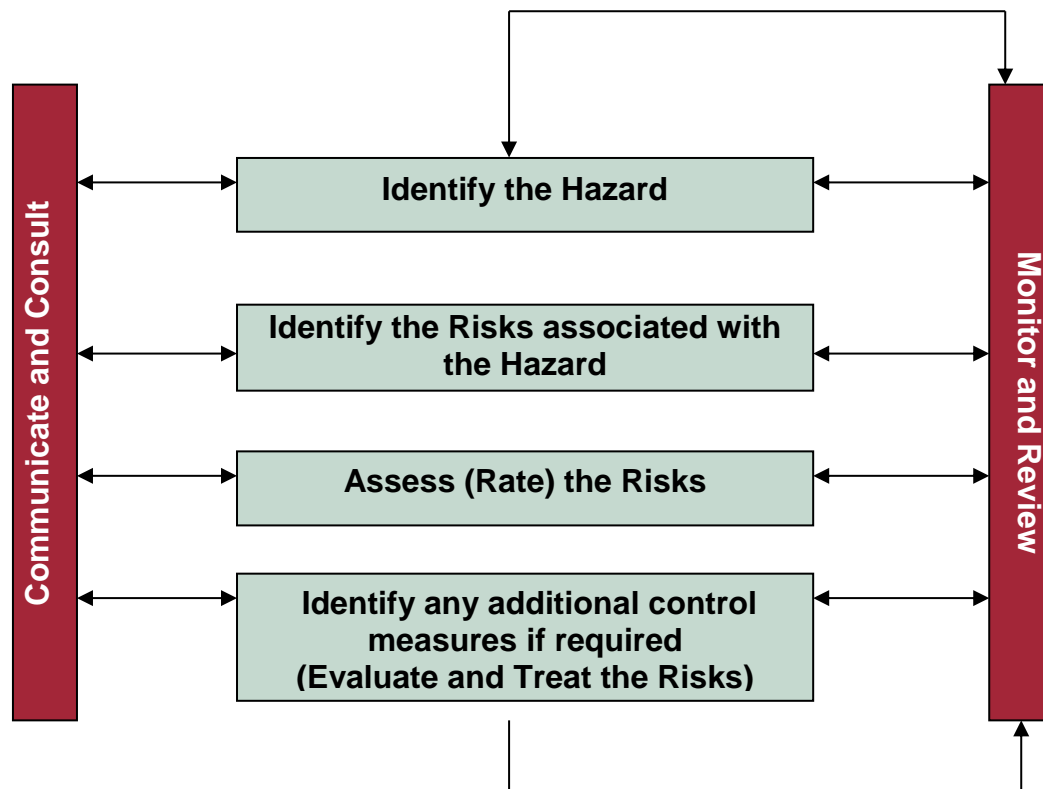
Step 3 Assess (i.e. Rate) the risks

Step 4 Identify any additional control measures (if any) required (i.e. Evaluate and Treat the Risks)

Communicate and Consult.

Figure 1 below outlines the Risk Management Process.

Figure 1 – Risk Management Process



Each of the 4 steps in the risks management process are described in detail below.

Step 1. Identification of hazards

The first step in safeguarding safety, health and welfare is to identify hazards.

To help identify hazards it is useful to categorise hazards as the following

- Physical
- Chemical
- Biological
- Psychosocial

Step 2. Identification of risks associated with hazards

This step starts with describing the risks associated with and persons affected by each of the hazards identified. It is important that the description of each risk provided, accurately and comprehensively captures the nature and impact of the risk.

As the information from this process may be included in the relevant risk register the risks should be described using the following process:

The 'ICC approach' to risk description

- Risk is inherently negative, implying the possibility of adverse impacts. Describe the potential area of **Impact** if the risk were to materialise.
- Describe the **Causal Factors** that could result in the risk materialising.
- Ensure that the **Context** of the risk is clear, e.g. is the risk 'target' well defined (e.g. staff. Patient, department, hospital etc.)

Step 3. Assess (Rate) the Risks

The next step in the process is to rate the risk associated with the hazard (risk analysis).

Rating of risk is carried out taking account of existing control measures.

Two elements need to be determined when assessing the level of risk posed: i.e.

1. The likelihood that a specified event may occur or reoccur.

And

2. The impact of harm to patients, staff, services, environment or the organisation as a result of the undesired event occurring.

HSE Risk Matrix (Combining Impact and Likelihood)

Risk Matrix	Negligible(1)	Minor(2)	Moderate(3)	Major(4)	Extreme(5)
Almost Certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Rare/Remote (1)	1	2	3	4	5

Example 1: Likelihood of 3 (Possible) x Impact of 2 (Minor) = 2 x 3 = 6 (Amber) M6

Example 2: Likelihood of 2 (Unlikely) x Impact of 3 (Moderate) = 3 x 2 = 6 (Amber) M6

5.2 Hazard Identification and Control Arrangements

5.2.1 Accident/Incident Reporting & Investigation

All Accidents/Incidents/Near Misses must be reported immediately to the Line Manager or their equivalent whoever is on duty that day and recorded in accordance with the HSE Incident Management Framework 2020. All incidents and near misses are recorded on the National Incident Report Forms (NIRF 1 - 4) and reported to the State Claims Agency via the National Incident Management System (NIMS).

Review of accidents/incidents investigations will be carried out in a timely manner by the Line Manager or their equivalent. The purpose of review is to determine the immediate and root cause of the accident/incident and to prevent recurrence. All employees are required to co-operate with such reviews and to provide any information, which may be useful in establishing the circumstances surrounding the accident/incident. Corrective action will be taken where necessary and recorded. If it is deemed necessary for a more in depth investigation to take place an internal investigation team will be formed to include competent support from appropriate HSE division/service area.

Risk, incident, accident data will be periodically analysed by the Line Manager with a view to improving safety performance. Where appropriate, the Safety Statement (including risk assessments) will be reviewed in light of any accident/incident.

Safety, Health and Welfare at Work General Application Regulations 2016 (Notification of Accidents and Dangerous Occurrences) requires that certain accidents and dangerous occurrences are reported to the Health and Safety Authority. These include the following categories:

- An accident resulting in the death of an employee;
- An accident resulting in the absence of an employee for more than 3 working days not including the day of the accident.
- An accident to any person in a place of work, or as a result of a work activity which causes loss of life or requires medical treatment (e.g. member of the public); and
- Certain dangerous occurrences, which have the potential to cause serious injury, whether or not they did cause serious injury.
- Reporting will be done on the prescribed forms IR1 (accidents) or IR3 (dangerous occurrences) and notification will be done without delay, via the internet at www.hsa.ie or on an original prescribed IR1 form and posted to the Health & Safety Authority.
- The above reporting will be done by Line Managers.

The HSA contact details are:-

The Health & Safety Authority
The Metropolitan Building
James Joyce Street
Dublin 1

Tel. No. 1890 289389

A copy of all Incident Forms completed in MLM CHO will be retained by the Head of Service in a suitable secure location.

<https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/>

HSE 2020 Incident Management Framework/Guidance

Incident Management Fast Fact, FF002:01, March 2019

NIRF 01: Person

<https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/nirf-01-v12-person-interactive.pdf>

NIRF 02: Crash Collisions

<https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/nirf-02-v01-crash-collision-interactive-.pdf>

NIRF 03: Property

<https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/nirf-03-v02-property.pdf>

NIRF 04: Dangerous Occurrence / Complaints

<https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/nirf-04-v08-dangerous-occurrence-hc-nf-interactive.pdf>

Healthcare Worker Covid 19

<https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/hcw-covid-19-acquired-v02-nirf-interactive.pdf>

Form of Notification of an Accident IR 1 Form

Form of Notification of a Dangerous Occurrence IR 3 Form

https://www.hsa.ie/eng/Publications_and_Forms/Forms/ online forms

<https://www.hse.ie/eng/staff/safetywellbeing/healthsafetyand%20wellbeing/dangerous%20occurrence%20ir3%20form%20.pdf>

Local management are responsible for ensuring that HSA correspondence is addressed fully and meets any deadlines imposed by the HSA.

Local management must supply copies of all HSA correspondence to the National Health and Safety Helpdesk. This is for assurance by the Health and Safety Management Advisory Committee and Risk Committee.

6.0 Consultation Arrangements

References: <https://healthservice.hse.ie/staff/health-and-safety/consultation-and-safety-representation/>

Guidance on the Selection/Election of Safety Representatives

Supporting Documentation for Safety Rep Election

Safety Representative Training.

Safety Consultation - Guidance for the establishment of local Health & Safety Committees

Safety Committee Audit Tool

Sections 25 and 26 of the Safety, Health and Welfare at Work Act, 2005, require employers to put in place a safety consultation programme that facilitates the provision of information as required by Section 9 of the Act and participation by all employees in safety and health matters. In line with the HSE's Corporate Safety Statement and governance arrangements a Safety Committee is required to be established at local level which includes balanced representation between management and employees, to include Safety Representatives. The number of members provides for a compact and workable group. Provision is also made for employees to select / elect a Safety Representative. In smaller facilities the role and function of the Safety Committee may be incorporated and clearly defined in the Terms of Reference of Team Meetings.

For further guidance, please refer to documents listed at the start of this section.

Details of Local Health & Safety Committees can be found in Section 11 (Site Specific) of this document.

6.1 Consultation Arrangements

Senior Leadership Team

MLM CHO

The MLM CHO Senior Leadership Team are the overarching Health & Safety decision makers for MLM CHO Health Services. Health & Safety is a standing item on their agenda. Members of the Senior Leadership Team include: Heads of Services, General Managers, Clinical Directors, Area Directors of Nursing, Heads of Discipline, Business Managers, Heads of Finance, Quality & Risk Advisors, HR Specialists,

The purpose of the Senior Leadership Team is to oversee the strategic implementation of Health & Safety in all Health Services in MLM CHO. The specific purpose of the committee in relation to Health & Safety is to advise and assist service managers and staff in all matters relating to Health & Safety.

Activities include:

- Develop, ratify and support the implementation of MLM CHO Health & Safety policies, procedures and guidelines.
- Providing advice and support to the Head of Service to meet obligations relating to Health & Safety.
- Assist service managers to monitor compliance with organisational and national policies and procedures relating to Safety & Wellbeing of staff.

- Promote and support education and the application of evidence based practice in relation to Health & Safety.
- Ensuring full communication and liaison on Health & Safety matters within all Health Services within MLM CHO.
- Communicate and liaise on Health & Safety matters within the MLM CHO and local Health & Safety Committees as required.

The Objectives of the Committee are:

- To receive, disseminate and/or action National and Regional Policy/Action plans relating to Health & Safety.
- To review reports/inspections and determine action regarding the implementation of Health & Safety policy and related issues,
- To provide support and act as a reference group for service with Health & Safety matters where they exist,
- To oversee and monitor as appropriate Health & Safety policies, procedures and processes within MLM CHO Area,
- Develop and review priorities and strategies in relation to Health & Safety matters, ensuring most effective utilisation of current resources,
- To encourage the reporting of, and monitor trends in, incidents and near misses relating to Health & Safety and advise the GM of any gaps or if serious risks are identified.
- To receive feedback on the progress of action plans / QIP's from - self assessments, audits of Health & Safety Management Systems & HSA inspections within the CHO8 Area.

Health & Safety Committees specific to an area are outlined in Section 11, Site Specific Safety Statement.

All Safety Committee meetings will be minuted and the minutes circulated to the Committee and all Service Managers through the e-mail system.

7.0 Resources

This section should be read in conjunction with Section 2.1 General Statement of Safety Policy for All Health Services within MLM CHO.

If it is necessary to expend resources in order to achieve the implementation of the safety management programme, this may take the form of personnel, finance and or time.

Maintenance issues are the responsibility of the Business Managers.

- Where additional budget resources are necessary, the General Managers MLM CHO will be required to action.
- All staff within the department are fully aware of their responsibilities under Health and Safety and any training deemed necessary to ensure the Health & Safety of the staff in all Health Services is sourced and approval sought from the respective General Manager.

- Visitors are made aware of any safety procedures and obliged to read the fire orders and note the exit doors.

All Heads of Services will support resource needs in terms of monies, training, & time as required. Expertise required will be sourced in house or externally as required.

8.0 Distribution / Access to the Site / Service Safety Statement

The Safety Statement is available to all employees and others who may also require access to it e.g. contractors/agency staff.

The master copy of the Safety Statement is held by Des O'Flynn, Chief Officer. Copies of Safety Statement will be issued to all managers within MLM CHO.

When changes are made to the Safety Statement and to ensure that each copy of the document contains records of all changes Des O'Flynn will ensure that all circulated Safety Statements are removed and will issue new revised documents with the appropriate changes. The revision number and date of revision will be recorded.

This Safety Statement will be brought to the attention of all new employees and to existing employees at least annually and following any amendments, by the respective manager of that area. It will also be brought to the attention of non-employees who may be exposed to specific risks in the workplace (e.g. contractors)

This Safety Statement will be brought to the attention of the above persons in a form, manner and language that will be understood.

Refer to Section 11 for Local arrangements. These include hard (paper) copy, shared drive, or USB key, or other local arrangements as may be deemed necessary for the successful dissemination of the information.

9.0 Review of the Safety Statement

This Safety Statement is a live document and will be reviewed annually

Or

- When there has been a significant change in the matters to which it refers such as legislative, organisational changes
- There is another reason to believe that the Safety Statement is no longer valid, or an inspector in the course of an inspection, investigation, examination, or inquiry directs that the Safety Statement be amended.

The persons responsible for the update of this document will be the Senior Leadership Team in conjunction with any other relevant persons/groups and they will review in line with the above mentioned criteria.

Measuring Performance

The manager will measure, monitor and evaluate safety and health performance at all levels. Performance will be measured against agreed national standards to reveal when and where improvement is needed. Active self-monitoring through periodic audits, accident and incidents reviews and investigation, absence data, National Health and Safety KPIs, Service KPI's (as outlined in Section 2.0 Page 13 of this document) and financial costs will reveal how effectively the Safety Management Programme is functioning.

On receipt of an audit report the manager will develop and implement Quality Improvement Plans and ensure any recommendations are actively put in place.

Audit

As part of the National Health and Safety Function the Audit and Inspection Team have been tasked with developing a suite of health and safety audit tools relevant to each level of management within the HSE.

Auditing is an essential element of the HSE's Occupational Safety and Health (OSH) management system. Formal auditing provides a comprehensive and formal assessment of compliance.

Level 1 Audit Tool For Ward/Department Level & Level 2 Audit Tool Safety Management System at hospital/service level

Senior management should be fully committed to the concept of auditing and its effective implementation. This includes a commitment to consider audit findings and recommendations and take appropriate and timely action. All relevant employees must be informed of the purposes and benefits of auditing and co-operate fully and honestly. Relevant documentation and a representative sample of key activities are included in the audit and key personnel will be interviewed.

The results of OSH audits are fed-back to the relevant parties (manager(s)) as soon as possible to allow corrective action to be taken. The audit report assesses overall performance, identifies inadequacies, and makes recommendations on improvement actions. Follow-up monitoring must be established by the responsible person in the hospital/service.

Reference: HSA, 2006. Workplace Safety and Health Management**Safety Committee Audit Tool.**

Section 26 (1) of the Safety, Health and Welfare at Work Act, 2005 requires Employers to consult with his or her employees, their safety representatives or both as appropriate about establishing arrangements to secure co-operation on safety, health and welfare in the workplace.

In accordance with Section 26, of the Safety, Health and Welfare at Work Act, 2005 and the HSE's governance arrangements a Safety Committee is established at local level to include

balanced representation between management, employees and Safety Representatives. In smaller facilities the role and function of the Safety Committee are incorporated into and clearly defined in the Terms of Reference of Team Meetings.

The main purpose of the local health and safety committee is to provide a forum that facilitates employee participation in the steps taken to safeguard their safety, health and welfare within the workplace.

Reference: <https://healthservice.hse.ie/staff/health-and-safety/health-and-safety-auditing/>

Record Retention Policy

Reference: Record Retention Periods Health Service Policy 2013

A minimum retention period for health and safety investigation reports of “10 years from the date incident if no claim is made” is advised. We would advise that other health and safety documents e.g. Safety Statements; Policies and training records are retained for a period of 10 years in line with Health and Safety Authority (HSA) requirements. The documents can be held electronically.

Insert

Section 11

Site Specific Details

Here.

(Note: Do not replicate in Section 11 anything that is in Section's 1 – 10)