

## Health & Safety Policy

### Introduction

#### Statement of Intent

This statement refers to all Practice employees, visitors, and the general public on Practice property, equipment and buildings.

Its purpose is to set out the Practice's intention to provide a high standard of safe and healthy working conditions and products.

**bpArchitecture Ltd** will be referred to as "the Practice".

Health and Safety is a fundamental consideration for all architects and designers. It should be part of everyday working both with activities inside the office and on every project. There is both a legal and professional responsibility to ensure understanding and application of health and safety principles at all times.

This Health and Safety policy sets out the standards and principles for the Practice. It is important that all staff familiarise themselves with the contents and ensure that they refer to it when appropriate. If staff are in any doubt over the application or requirements at any time they must ensure that issues are discussed with their line manager or a senior member of staff.

#### Overriding Principles

Staff should:-

- Ensure they understand the contents of this document and when to apply them.
- Look out for their own safety first and ensure they never put themselves at risk.
- Ensure that they understand what is required of them and compliance with the Practice's policies

## 1 Policy Statement

### 1.1 General Policy

To issue this Health and Safety Policy to all staff and to new staff members and to issue further or revised guidance from time to time on safety matters affecting the Practice. Staff are required to read the policy thoroughly and sign the relevant documentation confirming receipt of the issue/revision

To consult with staff on matters affecting their health and safety and to provide the opportunity to raise health and safety matters at any time.

To receive proposals from staff, jointly or individually, for improving the effectiveness of these procedures and policies.

To regularly monitor and revise this policy and health & safety system as necessary, particularly as the business changes in nature and size.

### HEALTH & SAFETY



The Policy is available in reception and is published on the Practice Intranet, and each employee will be shown where to find it as part of staff induction procedures.

All employees will be required to adhere to its contents at all times. The co-operation of every employee is necessary in order that standards are maintained or, where possible, improved.

## 1.2 The Policy in Relation to Individual Staff

To provide healthy and safe working conditions for staff and for the safety of clients or other members of the public who may visit the premises.

To operate this policy in conjunction with the safety policies of the landlord of any property occupied by the Practice.

To give adequate information, instruction, training and supervision to staff on all aspects of their work to ensure, as far as reasonably practicable, their health and safety at work including the safe handling and use of any equipment and hazardous substances.

To provide and maintain, where necessary, protective clothing, footwear and equipment and hard hats in accordance with the Construction (Head Protection) Regulations 1989 (SI No. 2209)

To record all accidents/injuries and notify any major accidents/injuries or work related diseases to the enforcing authority in accordance with current regulations – Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR 95)

## 1.3 The Policy in Relation to Professional Functions

To provide adequate control of the health and safety risks arising from the Practice's work activities.

To comply with the requirements of Section 6 of the Health and Safety at Work etc Act 1974 and the Construction (Design and Management) Regulations 2007 (SI No. 320) that the design and specification of construction, demolition or installation work and the manner of its execution shall be such that safe working conditions are possible for all during the construction phase or after completion.

To obtain from Clients details of existing hazards or safety policies affecting their specific projects.

To encourage staff to report health and safety hazards to the (Practice Manager)

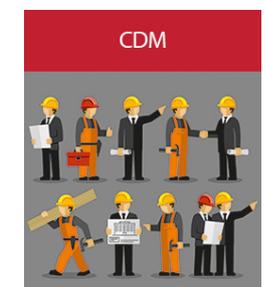
(see 2.2 – Duties and Responsibilities of the Practice Manager).

To require clients or contractors to discharge in full their duty of care under the Act to staff of the Practice visiting or out-posted to clients' property or construction sites.

The Practice will be responsible for the promotion of a strong culture in respect of health and safety through a structured approach with delegated responsibilities for the various categories of implementation.

## 1.4 Health and Safety Risk Management

The Practice, in accordance with the Management of Health and Safety at Work Regulations 1999 and using competent persons, will make



suitable and sufficient assessment of all relevant risks or hazards affecting:

- The health and safety of its staff whilst they are working for the Practice;
- The health and safety of other persons not in its employment arising out of or in connection with the conduct of its undertaking.
- Prevent accidents and cases of work related ill health by managing the health and safety risks in the workplace.
- Provide clear instructions and information and adequate training to ensure employees are competent to do their work
- Engage and consult with employees on day to day health and safety conditions.
- Implement emergency procedures – evacuation in case of fire and other significant incident.
- Maintain safe and healthy working conditions, provide and maintain plant, equipment and machinery and ensure safe storage of substances

The assessment will be recorded and any required changes will be made and recorded accordingly (see Section 7: Health and Safety risk assessment for details).

Signed Beverley Poole

Director with overall and final responsibility for health and safety  
For and on behalf of **bpArchitecture** Ltd  
February 2018

Appointed Practice First Aider:	Beverley Poole and Lisa Walker
Appointed Practice Fire Wardens	Beverley Poole and Lisa Walker
Health and Safety Law Poster is displayed	In the Staff rest area
First Aid Box is Located	In cupbd above WC
Accident Book is Located	In cupbd above WC

I confirm that I have received and understand this health and safety policy and agree to take reasonable care of my own health and safety, and to carry out my individual obligations as declared in this policy and any subsequent published revisions.

**Members of Staff are Required to Sign a Separate Sheet confirming that they have Read and Understand this Health and Safety Policy which is kept in the Policy Folder (white) in Reception**



## 2 Organisation and Responsibilities

### 2.1 Introduction

- The Director with overall responsibility the Health and Safety Policy for the Practice is **Beverley Poole**
- The Practice Manager, Lisa Walker, is responsible for implementation of the Health and Safety Policy.

It should be noted, however, that neither are personally responsible for the personal health and safety of staff.

Employer's requirements under the Health and Safety at Work etc Act are covered under Section 2 and 3.

Section 2(1) of the Act states:

*'It shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees.'*

Section 3(1) of the Act states:

*'It shall be the duty of every employer to conduct his undertaking in such a way as to ensure, so far as is reasonably practicable, that persons not in his employment who may be affected thereby are not thereby exposed to risks to their health or safety.'*

Members of staff also have responsibilities to co-operate in meeting statutory duties under the Health and Safety at Work etc Act and to take reasonable care of their own health and safety and that of any other persons who may be affected by their acts and omissions.

Section 7 of the Act reads as follows:

*'it shall be the duty of every employee while at work:*

*To take reasonable care for the health and safety of himself and of other persons who may be affected by his acts or omissions at work; and*

*As regards any duty or requirement imposed on his employer or any other person by or under any of the relevant statutory provisions, to co-operate with him so far as is necessary to enable that duty or requirement to be performed or complied with.'*

Section 8 places a duty on all persons whether they be employers, employees or self-employed and states:

*'No person shall intentionally or recklessly interfere with or misuse anything provided in the interests of health, safety or welfare in pursuance of any of the relevant statutory provisions.'*

### 2.2 Duties and Responsibilities - The Practice Manager

These are to:

- Take overall responsibility for the health and safety of staff when carrying out their work.
- Ensure that sufficient resources are provided to meet the Practice's health and safety needs.
- Take executive responsibility for implementing and supervising the Practice's Health and Safety Policy and its procedures, including risk assessments.



- Ensure all members of the Practice co-operate in meeting the aims of the policy.
- Ensure sufficient training is provided to all staff to enable them to fulfil their duties in accordance with the Policy.
- Appoint a Practice First-Aider and ensure that the First Aid Box and Accident record book are properly maintained.
- Maintain an Accident Record Book, record all known accidents and significant occurrences of work related ill health.
- Investigate any accidents and work-related periods of sickness absences.
- Ensure fire risk assessment is undertaken and implemented and fire escape routes and equipment are regularly checked and tested.
- Take appropriate disciplinary action in the event of any breach of or refusal to comply with statutory (or Practice) safety regulations or the Policy of Practice.
- Ensure all staff are given adequate safety training.
- Ensure all staff are issued with a copy of the Policy and any subsequent revisions, and that a signed record copy of the Policy is retained for each members of staff.
- Set a personal example in all aspects of health and safety.

It is the policy of the Practice to ensure as far as reasonable practicable, the health, safety and welfare of all of its employees, sub-contractors, visitors, customers and members of the public.

The policy will be applied equally and fairly and without exception.

To this end the Practice will endeavour to keep up to date with health and safety matters and ensure personnel are adequately trained to meet these responsibilities.

The Practice will ensure that they consult employees' 'in good time' on matters which may affect their health, safety and welfare.

The Practice recognises its duties to people other than its employees. It is therefore the Practice's policy to ensure, so far as is reasonably practicable, the health and safety of others is not put at risk by the Practice's operations.

### 2.3 Responsibilities of Staff

It is the duty of each and every employee whilst at work to take reasonable care for their own health and safety and that of other people who may visit our premises; and who may be affected by their acts or omissions at work. Each employee has the duty to co-operate with the Practice, as far as is necessary, to ensure that safe and healthy conditions at work will prevail.

Management and employees are required to observe and comply with current health and safety legislation within the workplace.

The specific responsibilities for health and safety are no less than any other function within the Practice, therefore all employees will be expected to familiarise themselves with those aspects of the Policy which relate to their work and to attach as much importance to them as they attach to the carrying out of any other duties which they may have.



All members of staff must:

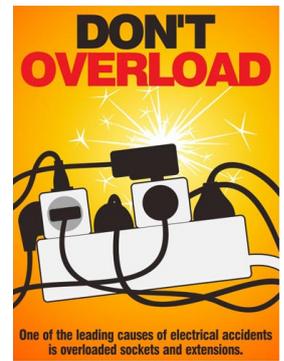
- Take care of themselves and others who may be affected by their acts or omissions at work.
- Report any accident, however minor, to the Practice Manager.
- Set a personal example to their colleagues and clients in all aspects of health and safety.
- Ensure electrical plugs are safely and correctly wired and place telephone and electricity cables where they are not a potential hazard.
- Do not overload socket outlets with adaptors and multiple plugs.
- Report any loose connections/faults to the Practice Manager.
- Switch off electrical apparatus after use or at the end of the day unless otherwise instructed.
- All computer workstations are connected to Power Towers which have an on/off switch Staff are required to switch these off at the end of each day to conserve power. Where two members of staff are connected to a power pole then the last member of staff to leave in the evening is responsible for switching the tower off.
- Report faulty office equipment to the Practice Manager – untrained staff must not attempt repairs.
- Escape routes (in case of fire), doorways, stairways, passageways, the store floor and space between desks must be kept free of all obstructions.
- Report potential hazards (such as fire escape obstructions) to the Practice Manager.
- Do not dispose of broken glass or scalpel blades in waste bins. These must be wrapped safely (i.e. blades wrapped in tape, glass wrapped in newspaper) and deposited in the designated bins.
- Always leave the kitchen/refreshment facilities hygienically clean and tidy, wiping any spills.
- Always leave the worktop in the toilet clean and tidy.
- Cups, glasses and utensils must be placed in the dishwasher when staff leave at the end of a day.
- Food waste must be placed in the kitchen caddy
- Recycling waste must be placed in the kitchen recycling bin
- Paper waste must be placed in the office paper recycling bin.
- Only none recycling waste is to be placed in normal bins.

Clients, Consultants and Sub-contractors must be advised of the Practice's Health and Safety Policy and must co-operate while on the premises.

#### 2.4 Responsibilities of the Practice (Directors/Partners)

The Practice (Directors/Partners) as freeholders, leaseholders or tenants of its offices, will ensure:

- Compliance with the Health and Safety at Work etc Act 1974; Workplace (Health, Safety and Welfare) Regulations 1992; the Regulatory Reform (Fire Safety) Order 2005; and with this Policy's Fire Precautions Section.
- Sufficient Fire Wardens and First Aiders are appointed, trained and their names and responsibilities published.
- Offices are space-planned, cleaned and kept in good repair to ensure safety of staff and visitors.



- Office machinery is safe, properly maintained, fitted with any necessary guards or safety devices and that staff required to use such machinery are trained in its use and are not permitted to carry out repairs without authority.
- A health and safety plan is prepared for all construction, maintenance and repair works at the Practice offices, where CDM Regulations apply.
- Electrical equipment and systems in the premises are properly maintained.

### 3 Project Design and Construction

**NOTE:** The Construction (Design and Management) (CDM) Regulations 2007 came into force on 6 April 2007.

#### 3.1 Introduction

This section draws attention to two aspects of Health and Safety affecting Project Design and Construction. These are, firstly, managing risks arising from the design affecting users of the completed facilities and secondly, assessing the risks during construction works

Both aspects are covered by the original Health and Safety at Work Act 1974. Section 6 of the Act places duties on persons (e.g. the Practice) who design, import or supply articles for use at work to ensure as far as is reasonably practicable that any plant, machinery, equipment or appliance is so designed and constructed as to be safe without risk to health.

They must carry out any testing or examination necessary to achieve this and ensure that adequate information will be available about the use for which it was designed and about any conditions necessary for its safe use. They must ensure that there is adequate information available about this and about any conditions necessary to ensure that it will be safe and without risks to health when properly used.

The Construction (Design and Management) (CDM) Regulations 2007, establishes the duty of employers, or self-employed persons and of managers (i.e. those 'not employing but controlling persons at work') to ensure decisions affecting health and safety during construction works are made following assessment of the risks arising through the design. The term 'construction works' includes maintenance, repair and demolition (Regulation 2). These regulations also impose duties on Clients, Consultants and the CDM co-ordinator.

It should be noted that this is different from most construction law in that it is Criminal Law. The client should be made aware of their responsibility and preferably this action confirmed in writing.

#### 3.2 Responsibilities of the Client

The duties of the Client under the CDM Regulations are:

- to appoint a CDM co-ordinator where the project is notifiable;
- to provide information in the possession of the Client relevant to health and safety aspects of the project to the health and safety file under the direction of the CDM co-ordinator;
- to appoint a Principal Contractor where the project is notifiable;
- to ensure those appointed are competent and adequately resourced to carry out their health and safety responsibilities;



- to ensure a suitable Health and Safety Plan has been prepared by the principal contractor before construction work starts;
- to ensure the Health and Safety File (received at practical completion) is kept available for use.

### 3.3 Responsibilities of the Principle Designer (CDM Co-Ordinator)

The duties of the CDM co-ordinator for a notifiable project under the CDM Regulations are:

- to ensure HSE is notified of the project; by issue of a F10A form,
- to ensure co-operation between designers;
- to ensure a pre-tender stage Health and Safety Plan is prepared;
- to advise the Client when requested to do so;
- to ensure a Health and Safety File is prepared and passed to the Client at practical completion.

The duties of the CDM co-ordinator under his agreement with the Client may also include:

- the preparation and maintenance of the Health and Safety File and preparation of the pre-tender Health and Safety File;
- identification and/or appraisal of hazards arising from the Client's use of the buildings;
- identification of any surveys required in the context of the Health and Safety Plan.

### 3.4 Responsibilities of Designers Under the CDM Regulations

Refer to the Approved Code of Practice (ACoP) - *Managing Health and Safety in Construction* - and the *CIC Guidance Notes for Designers* for detailed context and reference.

The CDM Regulations 2007, Regulation 11 covers Duties of Designers. 'Designers' means the Practice, and the individuals.

Designers must make the Client aware of his duties and, in accordance with Regulation 11:

#### Duties of designers

11. (1) No designer shall commence work in relation to a project unless any client for the project is aware of his duties under these Regulations.

(2) The duties in paragraphs (3) and (4) shall be performed so far as is reasonably practicable, taking due account of other relevant design considerations.

(3) Every designer shall in preparing or modifying a design which may be used in construction work in Great Britain avoid foreseeable risks to the health and safety of any person

- carrying out construction work;
- liable to be affected by such construction work;
- cleaning any window or any transparent or translucent wall, ceiling or roof in or on a structure;
- maintaining the permanent fixtures and fittings of a structure; or
- using a structure designed as a workplace.

(4) In discharging the duty in paragraph (3), the designer shall



(a) eliminate hazards which may give rise to risks; and

(b) reduce risks from any remaining hazards,

and in so doing shall give collective measures priority over individual measures.

(5) In designing any structure for use as a workplace the designer shall take account of the provisions of the Workplace (Health, Safety and Welfare) Regulations 1992 which relate to the design of, and materials used in, the structure.

(6) The designer shall take all reasonable steps to provide with his design sufficient information about aspects of the design of the structure or its construction or maintenance as will adequately assist

(a) clients;

(b) other designers; and`

(c) contractors,

to comply with their duties under these Regulations.

### 3.5 Health and Safety Risk Control

Identification and control of risk to health and safety is a continuous activity to be taken into account with other factors when making design decisions. It is also to be subject to formal review at the end of each work stage.

The general principles of hazard identification and assessment involve:

- listing the processes, tasks or work activities;
- identification of potential hazard(s);
- assessment of each risk in terms of likely frequency and seriousness;

If the hazards cannot be eliminated, follow the hierarchy of risk control:

- alter the design to prevent or remove the hazard, but if that is not reasonably practicable;
- combat the risk at source, e.g. provide lifting attachments if appropriate, only then
- consider personal protection, e.g. harnesses or respirators, or special training, or access limitation.

### 3.6 Implementation

When appointed as a designer to a project the Practice will discharge, as far as is reasonably practicable, its obligations:

(a) to ensure design decisions affecting health and safety during construction works are made following assessment of the risks arising under the CDM Regulations, by:

- applying the principles of the Approved Code of Practice (ACoP) published by HSE;
- following the guidance in 'Managing Health and Safety in Construction: Construction (Design and Management) Regulations 2007, published by HSE;
- following 'The Construction (Design and Management) Regulations 2007: Industry Guidance for Designers', published by the Construction Industry Training Board;



- allocating members of staff with the necessary competence to undertake specific design tasks;
- providing appropriate training to members of staff;
- developing and regularly reviewing relevant office systems, including, inter alia, design management (e.g. as RIBA Plan of Work); and keeping records of all risk assessments;
- maintaining a library as source of safety information;
- monitoring, as part of quality assurance audit procedures, compliance with the Practice Health and Safety Policy.

(b) to ensure that a design and specification meets the requirements of Section 6 of the Act, by:

- complying with appropriate Acts of Parliament and subordinate legislation, e.g. the Building Act 1984, Building Regulations 2000 (SI No 2000/2531), Electricity at Work Regulations 1989 (SI No 635), Workplace (Health, Safety and Welfare) Regulations 1992, Work at Height Regulations 2005, Manual Handling Operations Regulations 1992, etc;
- complying with guidance applicable to specific industrial, sector or substances published by HSE;
- specifying installations, plant, equipment and materials which comply with relevant British Standards and Codes of Practice (subject to EC directives);
- where BS Codes of Practice do not exist, using authoritative sources of information, e.g. IEE Wiring Regulations, CIBSE guides, Agreement Certificates, approved Documents, etc.
- consulting the HSE in cases where guidance is not available or not clear.

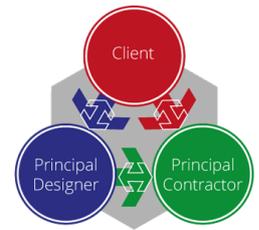
(c) to advise the Client if the obligations under the agreement with the Client conflict with the obligations of the Practice under the CDM Regulations.

### 3.7 Competence

CDM 2007 recognises that membership of such professional bodies as the RIBA is a good indication of relevant competency under the regulations. However all RIBA members should be aware that they are expected to comply with the CPD requirements and be fully aware of their responsibilities. (RIBA CPD Core-curriculum requires minimum 2 hours CPD per annum on Health and Safety issues).

Other members of staff that belong to other similar professional bodies are considered to have similar status.

Members of staff that are not RIBA members of should have relevant CPD training.



## 4 Site Visits

### 4.1 Introduction

When any member of staff is making an official visit to other premises or working away from the office (for instance, at the offices of a client, or other consultant or on a construction site) their health and safety is the responsibility of the person or firm or contractor controlling that place.

Nevertheless, the Practice, as the employer, is not absolved from its responsibility but can only discharge its duty of care with the co-operation of the staff.

Everyone's compliance with the following guidelines will help with the achievement of the principal aims of ensuring the safety of each staff member, and the safety of others.

### 4.2 Time and Location of Visit

Any staff member who intends to be out of the office for any reason must enter the precise details of time and location into the office diary and inform the office if these arrangements change.

### 4.3 Personal Safety

All staff should take special care when visiting sites, inspecting properties unaccompanied, leaving offices or attending appointments after dark and should remain on guard when travelling on public transport late at night or in remote places. They should be wary of escorting strangers around empty properties by themselves. Be aware of advice on personal safety by the Police.

### 4.4 Permission to Visit Site

Do not enter sites or buildings without permission.

On construction sites, the Contractor is responsible for the safety of persons lawfully on the site. Be aware of, and comply with all of the Contractor's on site Health and Safety requirements. Report to him/her on arrival and when you leave.

Ensure that you sign into the site diary and if you are visiting any part of the site unaccompanied by site staff, that the site Manager is aware that you are still on site. Report to the site office and advise site staff you are leaving site and sign out.

Always seek assistance from others on the site when personal safety is at risk.

If visiting occupied buildings, make prior arrangements with the person in charge and report on arrival to the responsible member of staff in the area or department being visited and on leaving.

Where visiting sites or buildings that do not have anyone in charge, two members of staff or a member of staff and another consultant must be present. Do not visit unoccupied buildings or carry out surveys or alone, particularly if you are unaware of the condition of a building or site or hazards on the site.



Do not visit a site or an empty building or unfrequented spaces (e.g. ducts) in existing buildings on your own without permission. Make sure someone knows where you are, what you are doing and report back at an agreed time. Establish an action plan in case of non-appearance after an agreed time.

Always take a mobile phone and preferably go accompanied especially to unoccupied sites.

#### 4.5 Planning a Site Visit

It is the client's responsibility to provide enough information about the site to enable a visit to be undertaken with full knowledge of the conditions.

It is good Practice to undertake a Health and Safety risk assessment to focus attention on any issues that will need to be identified and need to be avoided.

Procedures need to be adjusted depending on whether the site is occupied or unoccupied.

Plan the visit and take appropriate equipment and protective clothing. As a minimum, all visits will require:

- a hard hat that is undamaged and 'in-date'
- boots or shoes with steel toecaps and preferably steel insoles
- high visibility vest or jacket
- additionally quite often the following may also be required-
- safety glasses
- gloves
- full high visibility clothing
- additional warm or water proof clothing
- sunglasses
- sun block (especially for roof inspections in summer)

Familiarise yourself with all safe working rules applicable to the site or place being visited and comply with them. Such rules could cover access and egress, the wearing of safety helmets, safety harnesses, eye protection, ear protection, footwear and clothing, special precautions in areas of particular hazard, reporting your presence on site, etc. When conducting third parties on construction sites, you must ensure that they always wear hard hats, high visibility clothing and are wearing appropriate protective clothing.

#### 4.6 Occupied Site Safety Rules

The basic safety rule is when staff perform their duties, they must not put themselves or others at risk whatever pressures are exerted by others. Draw attention to risks or hazards that appear to have gone unnoticed.

When visiting any construction site or surveying or inspecting premises under the control of a contractor:

- ensure that on your first visit you are offered and attend a site induction.
- always attend site properly equipped;
- do not accept an escort as an alternative to inductions as you guide could be needed in an emergency and you will not know the safe way to exit the site.



As minimum:

- wear a hard hat, suitable clothes and stout shoes or boots with toe caps; do not wear thin-soled, high heeled or slippery shoes;
- avoid loose clothes which might catch on obstructions;
- familiarise yourself beforehand with the plan of the building, particularly the exit routes; make sure that security devices on exits will allow you to reach safety quickly;
- check on protection when approaching stairwells, balustrading, lift shafts, roof perimeters, etc; only use lifts when permitted;
- Beware of ladders with rusty or rotten rungs, and never climb a ladder which is not securely fixed;
- ensure that there are toe boards to each lift of scaffolding, scaffold plates and that plant hoists are correctly protected;
- check that planks are secure; beware overhead projections, scaffolding and plant, and proceed with caution;
- keep clear of excavations; walk over the structural members (e.g. joists, beams, etc.) whenever possible - do not rely on floorboards alone; look for defects in the floors ahead, e.g. wet areas, holes, materials that might cover holes; do not lean on guard rails or roof lights;
- do not touch any plant or equipment; keep clear of machinery and stacked materials; watch out for temporary cables, pumps, hoses and electrical fittings;
- assume that services (e.g. cables, sockets, pipes, etc.) are not safe or have not been isolated;
- leave the building immediately if you suspect the presence of gas, flammable liquids, dangerous chemicals or free asbestos fibre;
- take particular care in windy, cold, frosty, wet or muddy conditions;
- do not walk and look around at the same time; keep one hand free at all times when moving; be in a safe and balanced position whenever making notes or taking photographs; do not become distracted while climbing ladders.
- ensure any access equipment you used is in good working order is insured and if needed is operated by a correctly trained operator.

Note: CSCS cards

Cards under the CSCS scheme specifically for professionals are now available and may be required for access to site. The Professionally qualified Persons card or PQP is available to anyone suitably qualified and who successfully undertakes the test. Alternatively the visitors card is also available. You may wish to include a requirement for CSCS cards.

Currently both cards are subject to a test that features a broad range of questions some not relevant to Architects. It is hoped that in the not to distant future the test will be made available on line and will feature a new question bank that the RIBA feel is more appropriate. As an industry wide initiative this scheme should be commended although currently patience is needed when applying for one.

#### 4.7 Unoccupied Site or Building

If the building or site is unoccupied, always anticipate hazards. Do not take chances. Do not visit an empty building if you think it unsafe. Do not visit an unoccupied site if it could be considered to be dangerous. Notify the office if you intend to visit an unoccupied building.



Undertake a Health and Safety risk assessment to understand what is known and what is a potential risk. If in doubt ask the client for more information or ask for additional resources to ensure that any potential risks can be mitigated.

Common dangers include:

- rotten or insecure floors and stairs;
- unsupported excavations and trenches;
- hidden pits, ducts, openings, etc.
- fragile construction, e.g. roof sheeting;
- space which have not been used or ventilated for some time;
- contamination by chemicals or asbestos;
- intruders who may still be around;
- contamination by vermin or birds, or poisons put down to control them;
- unstable groundwork's;
- watercourse and wells hidden by overgrown vegetation.

#### 4.8 Structural Collapse

On discovering a partial or total structural collapse do not enter that section of the building, and consider the need:

- to contact the HSE and/or the Local Authority Building Control Officer;
- to contact the police where the public may be affected;
- for the display of appropriate hazard notices.

#### 4.9 Accidents

When any accidents occur on sites or buildings where the Practice is carrying out professional services, proceed in accordance with the guidance in Section 5.

Building operations and works of engineering construction, both on Crown and other sites are by definition *factories* under the Factories Act 1961, so the HSE Inspectorate have major powers on *all* sites. The HSE may delegate the duties of the enforcing authority to the appropriate Local Authority.

#### 4.10 Hazardous Activities

Report any apparent or potentially unsafe or hazardous procedures on a construction site to the Contract Administrator (or Employer's Agent) or the clerk of works, or if these are not available, to the site agent or person responsible for that place. All such reports should be noted and, in the case of a construction site, recorded at the next site meeting.

In the case of any dangerous, or potentially dangerous, site activity, the Contractor or person responsible must be advised to cease carrying out that particular activity which contravenes the Health and Safety at Work Act and to continue only in a manner which does accord with that Act. Take steps to ensure these actions are confirmed *by written notice* by the Contract Administrator (or Employer's Agent) to the contractor (or person responsible) as soon as possible.

It should be emphasised that failure to deal adequately with the danger will be notified to the HSE Inspectorate. If in doubt as to whether a situation is dangerous or not, err on the side of safety and contact the local HSE Inspector for advice.



#### 4.11 Unsafe Practices

Do not act as a safety officer for Contractors or others but informed professionals have a duty and a legal responsibility to prevent, so far as reasonably practicable, a Contractor or others from carrying out unsafe Practices and placing staff or visitors in jeopardy.

When encountering any difficulties or being unable to deal with a situation, seek the advice of the HSE immediately at the local office.

### 5 Miscellaneous Procedures

#### 5.1 Accident Reporting

Any incident which results in injury to any person or damage to any equipment or property affecting or involving the Practice and its staff and all accidents in the Practice premises must be reported to the Practice Manager who will record the incident. On the spot collection of factual information (location, witnesses, measurement, parties involved, police and fire brigade services, hospital, photographs where possible) will be the responsibility of the Practice Manager or senior person concerned.

Any accident on a construction site must be reported immediately to the relevant person in charge and to the Practice Manager on return to the office

#### 5.2 First Aid

The appointed First Aider is trained in emergency first aid on the premises. They must be notified immediately an accident occurs. The First Aid Box is situated **in the left cupboard above the WC**, together with the Accident Record Book. The Practice Manager is responsible for the contents of the First Aid Box and maintaining the relevant record book.

Emergency services (police, fire, ambulance) are contacted by telephoning '999'.

The nearest Accident and Emergency Unit is Royal Stoke Accident and Emergency Department, Hilton Road Stoke on Trent ST4 6SQ  
Open 24 hours  
Tel No. 01782 715 444.

The nearest Minor Injuries Walk In Centre is at the Haywood Hospital High Lane Stoke on Trent ST6 7AG  
Open 7am to 9.30pm  
Tel No. 01782 673 500

The local Police Station at Biddulph is within the Town Hall  
Tel No. 0300 123 4455

Biddulph Community Fire Station  
Tel No. 01785 898 120

#### 5.3 Illness

Illness must be reported to the **Practice Manager/PA** on the first day, and progress updated if the illness is likely to be prolonged.

All members of staff should consult their GP before returning to work after a period of illness involving an infectious disease.

No person should return to work before the expiry of any certificate relating to any illness or injury without first consulting their GP.

Any person who contracts an infectious disease must report their condition to the Practice Manager/PA so that any necessary precautions to protect others can be taken.

Certain infectious diseases and medical conditions must be reported to the HSE by the Practice. These include various types of poisoning,



various cancers and other conditions which can be caused through occupational hazards.

Staff should be aware that certain prescribed drugs and medicines can impair performance and judgement.

Staff equipped with heart pacemakers or similar medical equipment should observe any safety precautions of which they have been advised, in particular connection with electrical distribution equipment or equipment emitting or likely to emit radio waves.

#### 5.4 Occupational Health

All members of staff are expected to have regard to the maintenance of their own physical and mental well-being in the conduct of their business and personal lives.

Excessive stress in personal or business life can impair performance and lead to illness. Any member of the firm who considers they are suffering from excessive stress, for whatever reason, should consult the Practice Manager or a Director in the first instance, who will treat the matter confidentially

#### 5.5 Smoking

In the interests of fire safety, as well as general health and the working environment, the Practice operates a non-smoking policy on the premises, this includes E Cigarettes.

#### 5.6 Driving

All members of staff or other persons engaged by the Practice on its business or at any time when using a vehicle supplied by the Practice, or transporting other members of Staff, Clients or Consultants of the Practice must conform with all requirements of the Road Traffic Acts, associated legislation and the Highway Code.

All personnel driving in the course of their employment or driving vehicles supplied by the Practice must:

- ensure that the vehicle is serviced, maintained and operated in accordance with the manufacturer's guidelines. If the condition of a Practice's vehicle is in doubt, advice or a garage should be sought;
- be in possession of a valid UK driving licence. This must be checked by the Practice every year and endorsements notified to the insurers (for Company vehicles);
- ask staff's GP if any prescribed medication will affect their driving ability and if so they must refrain from driving;
- refrain from using mobile phones whilst driving
- wear glasses or lenses if prescribed for this activity.

Personnel must avoid over the counter medications such as anti-depressants, antihistamines for hay fever, nettle rash, asthma, eczema, or travel sickness preparations or cough remedies which can adversely affect driving.

Personnel must not drive having consumed alcohol.

Staff are advised to consider the provision of a fire extinguisher (dry Powder) and a first aid kit for their vehicles.

Staff driving on business of the Practice, in a vehicle not supplied by the Practice, must have full comprehensive insurance cover to cover the driver and passengers in the course of their employment.

#### 5.7 Hazardous Substances

When any potential hazardous substances are used at work, the Control of Substances Hazardous to Health Regulations (COSHH) require a register to be kept listing such risks and warning notices to be posted



adjacent to store and equipment using hazardous materials or substances.

Basic precautions, as follows, must be adhered to:

- All chemicals must be stored bearing the approved safety signage and directions.
- Never 'top up' one bottle from another.
- Never mix chemicals as these may be incompatible and cause an adverse reaction.
- Ensure adequate ventilation when using glues, solvents, etc.

If an accident occur:

- ventilate the area;
- evacuate staff;
- summon emergency services if necessary;
- ensure a full written report is prepared without delay and submitted to the manager responsible.

The most hazardous materials are likely to be cleaning chemicals. The basic precaution is to avoid mixing any two cleaners which are incompatible, such as powder and acid cleaners, liquid bleaches and powder bleaches. In both cases, toxic gases can be produced. Protective gloves and in some cases goggles must be worn when handling the chemicals.

Chemicals used by staff might include duplicating fluids, glues and solvents and reprographic chemicals. In all such cases, adequate ventilation needs to be available when these materials are used. The warning labels, if any, must be carefully studied and the precautions on them followed. Some of these materials may be flammable and the appropriate precautions, such as prohibition of smoking, should be taken.

## 5.8 Visual Display Units (VDUs)

The Health and Safety (Display Screen Equipment) Regulations 1992 require the risks of VDU work to be assessed. The HSE publication *Work with Display Screen Equipment L26* gives practical help on how to carry out the assessment.

The objectives of the assessment are to meet the following criteria for health and comfort.

- The VDU screen should be positioned to avoid unnecessary reflections on it.
- Brightness should be variable, image should be steady and characters should be clear.
- The chair should be correctly adjusted for height and back support and in good condition.
- The need for breaks depends on the nature and intensity of the work, the Regulations require breaks or changes of activity but do not specify their timing or length. Short, frequent intervals are more beneficial than infrequent ones. Work should be arranged so that it is interspersed with other tasks.
- VDU operators should have their eyes tested before operating a VDU and at yearly intervals. Spectacle wearers should consult their optician.
- People who suffer from epilepsy or associated illnesses should see their own medical adviser before operating VDUs.
- Discomfort or illness associated with VDUs must be reported to the Practice Manager.



- **Elbows**  
Above the desk, at 90-110 degrees
- **Shoulders**  
Relaxed as opposed to hunched
- **Wrists**  
In line with forearms
- **Hips, Knees, Ankles**  
At 90 degrees whilst seated
- **Feet**  
Flat on the ground or footrest
- **Head**  
Upright with ears aligned with shoulders



- **Eyes**  
Locking at the top third of the screen. Consider the use of a laptop riser with your laptop
- **Seat length**  
Should be long enough to provide support beneath thighs
- **Backrest**  
Angled at 90-110 degrees with adequate lumbar support in line with lower back
- **Keyboard and Mouse**  
Q and W of keyboard aligned with your nose. Mouse gripped loosely
- **Laptop**  
Used with a riser, external keyboard and external mouse

## 5.9 Use of Office Equipment

Whilst no special training is needed on any particular Practice equipment, care should be taken when

For example:

- using the guillotine, laminator and binder machine;
- trimming with a scalpel blade - always use a cutting mat and steel edge;
- using a ladder, which should only be undertaken when another member of staff is present to supervise/hold the ladder;
- lifting and carrying heavy loads - the Manual Handling Operations Regulations 1992 apply.

No member of staff should attempt to lift a load which is beyond their capacity. People with back problems should not attempt any lifting.

Responsibility for ensuring the effective maintenance and guidance on the safe use of office equipment lies with: [Lisa Walker/Beverley Poole](#)

## 5.10 Advice and Consultancy

Enforcing Authority: **Staffordshire Moorlands District Council**,  
Stockwell Street, Leek, ST13 6HQ  
Tel No. 0345 605 3010

Employment Medical Advisory Service: **HSE**, Redgrave Court, Merton Road, Bootle, Merseyside LZO 7HS  
Tel No. 0151 951 4000

## 5.11 Visitors

Visitors must report to Reception upon arrival. Staff should be aware of the whereabouts of visitors to the premises at all times, particularly when they are in the Kitchen toilet area.

## 6 Fire Precautions

As the Practice and premises are small some of the items below have been struck out as they do not apply to our premises

### 6.1 Fire Precautions Register and Risk Assessment

The Practice Manager maintains, in the Health and Safety file, a Register of Fire Precautions giving details of checks on equipment, systems, fire drills and the Practice's Fire Warden(s).

In line with the Regulatory Reform (Fire Safety) Order 2005 an up-to-date Risk Assessment is held by the Practice Manager and suitable action taken regarding identified risks.

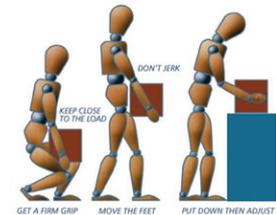
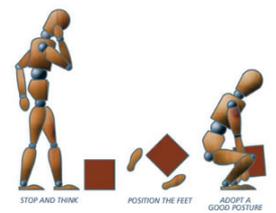
#### Fire Regulations

Since 6 April 2007 compliance with the new Approved Document Part B Fire Safety 2007 is required, together with the BS 5588 series of standards, unless alternative fire engineering approaches are required when BS 9999 (2005) can be used or a Fire Engineer consulted.

The Regulatory Reform (Fire Safety) Order 2005 will generally be complied with, from a design viewpoint, if the above procedures are followed in workplace design.

### 6.2 Means of Escape

No person should obstruct a means of escape. Fire exit routes must never be obstructed or fire doors wedged open.



### 6.3 Fire Evacuation Procedures and Practices

A fire drill should be undertaken at least once a year, and training in evacuation will be given regularly

In the event of a fire:

- ~~Operate the nearest fire alarm point and~~ Call '999' for assistance.
- Normally the Fire Warden(s) will be responsible for assessing firefighting but in their absence attack the fire if possible (and if you have been trained), without taking personal risk, with the appliances provided.
- If an electrical appliance is involved, switch off the current before dealing with the fire and use the appropriate CO<sup>2</sup> extinguisher located **on the kitchen wall**.
- Shut doors and, if possible, windows before leaving the room. Do not stop to collect personal belongings.
- Use the nearest available exit and leave the building.
- Report to the Practice Manager at the assembly point which is located in **front of the gable end to the Pub opposite**.

The current Fire Warden is **Lisa Walker**. Fire Wardens' duties, in addition to the above, are as follows:

- to familiarise themselves with the location and operation of firefighting equipment in the office and the escape routes;
- to advise staff on fire precautions and equipment as necessary;
- to keep alert to any potential fire hazards within the office, e.g. build-up of waste, obstruction of escape routes, and to take necessary action to remove the hazard;
- Ensure that paper and boxes are not stacked in front of heaters or in vicinity such that they could catch light if unattended.
- in the event of an evacuation of the office to carry out a rapid but thorough check to ensure it is clear of people before they themselves leave, and to report the completion of the search to the Practice Manager outside the building;
- to inform neighbouring occupants in order that their own procedures may be put into operation.

Generally, firefighting operations must be abandoned if:

- The means of escape is threatened;
- The fire is out of control;
- The extinguisher is exhausted.

### 6.4 Fire Protection Systems

#### 6.41 System Records

Details of all maintenance, testing or alterations to fire protection systems should be recorded in the Fire Precautions Register by or on behalf of the Practice Manager. In the case of fire alarms, details of the causes of all alarms (genuine, Practice or test), faults which develop, periods of disconnection, and any further action required should also be recorded in the Register.

#### 6.42 Fire Alarms

~~The fire warning system should be checked periodically, with different call points (following a set sequence) activated upon each occasion.~~

Responsibility for ensuring that this takes place lies with: Lisa Walker



### 6.43 Emergency Lighting

The installation should be tested every six months, with a full discharge test once a year. Periodic visual checks of the system should be made by or on behalf of the Practice Manager.

### 6.44 Firefighting Equipment

The purpose of portable firefighting equipment is as follows:

- to extinguish minor fires;
- to protect means of escape as a priority;
- to protect staff and visitors;
- to protect property.

Fire extinguishers are maintained and checked (annually), at which time specific training in their use will be given.

Responsibility for ensuring the effective maintenance and guidance on the safe use of firefighting equipment lies with Lisa Walker

The list below identifies a variety of firefighting appliances. Note that all fire extinguishers are now Red (colour) and may have a distinguishing label or band to denote the type of contents.

- Water Fire Extinguishers  
For use on Wood, Paper, Textiles.
- Foam Fire Extinguishers  
For use on Wood, Paper, Textiles, Petrol, Diesels and Oils.
- Powder Fire Extinguishers  
Highly versatile, for use on all above plus Electrical hazards, e.g. computers, switchgear.
- CO2 Fire Extinguishers  
Particularly effective for electrical fires, plus Petrol, Diesels, Oils.

### 6.5 Bombs and Bomb Warnings

#### 6.51 Suspect Letter or Package

- Do not tamper with it
- Place it in a protective container if available, but otherwise leave it alone.
- Evacuate the immediate area and adjacent offices/areas, and allow no-one in other than specialist disposal personnel.
- Inform the Practice Manager immediately, who will summon the Police and other assistance.

#### 6.51 Bomb Warning on the Telephone

Notify the Practice Manager without delay.

As the same time, attempt to keep the caller talking and note down as much information as possible about both the suspect bomb and the caller, as follows:

- a) location of the device
- b) how long before it is due to go off
- c) type of device and size
- d) reason for the device
- e) time the call was received
- f) accent and approximate age of the caller.



On receipt of a bomb warning switch off all radios and disconnect batteries.

- Reception or Practice Manager should immediately inform the Fire Wardens.
- The Fire Wardens should institute and supervise searches within office, and service areas, common parts, exit routes and the Assembly Area.
- Everyone should stay within their office area and await instructions from their Fire Warden.

If the building has to be fully or partially evacuated, instructions, including the exit routes and Assembly Area to be used, will be passed via Fire Wardens.

Everyone should then quickly but quietly make their way outside the building, along the exit routes to the Assembly Area given, to answer the roll call and await instructions.

Everyone should be warned to keep clear of large areas of glass and, with this in mind, the Assembly Point will be located **in the front of the pub gable wall opposite**

## 6.6 Training

### Fire Wardens

Evacuation of all staff and notification of the brigade in the event of fire is the primary solution. However, waste bin or other small fires can cause considerable damage prior to fire brigade arrival. Fire Wardens training of responsible staff not only encourages good fire housekeeping Practices and managed evacuations but also first aid firefighting action with extinguishers and blankets. This can considerably reduce losses to the Practice whilst not putting the Fire Marshalls at undue risk.

## 7 References

*This Health and Safety Policy has been prepared taking guidance and recommendations from the RIBA Chartered Practice procedures.*



## 8 Health & Safety Risk Assessment

### 8.1 Definitions

According to the HSE, "A risk assessment is a careful examination of what, in your work, could cause harm to people, so that you can weight up whether you have taken enough precautions or should do more to prevent harm. The aim is to make sure that no one gets hurt or becomes ill. The important things you need to decide are whether a hazard is significant and whether you have it covered by satisfactory precautions so that the risk is small."

*Hazard means something that cause harm.*

*Risk is the chance, high or low, that somebody will be harmed by the hazard."*

### 8.2 Health and Safety Risk Assessment Template

Health and Safety risk assessment for bpArchitecture

Assessment undertaken by Beverley Poole /Lisa Walker

Signed Beverley Poole Date January 2018

Assessment review.....**January 2019**

#### **[List significant hazards here:]**

- Cleaning products are kept in the cupboard under the sink in the WC
- Further toilet cleaning products are kept in the right hand cupboard above the WC
- First Aid: and Staff medicines are kept in the left hand cupboard over the WC
- Antifreeze for winter rear entrance is kept in the large container on top of the WC wall cupboards
- Glue is kept in the timber drawers under the white board – very little glue is kept on the premises.
- Spray mount is kept locked in the store cupboard – staff are advised to apply this with the meeting room window open for ventilation
- Cutting blades are kept on the right hand shelf inside the store, these are locked away and should only be used with cutting mats.
- The large shop window needs to be monitored to ensure that no one damages this – this is plate glass.

