

F MANAGEMENT ISSUES

F16 Health & Safety

November 2014

1 This Synod Policy is in place to ensure that all churches are safe and provide for the protection of worshippers, visitors and any one working on the premises. Although churches do not generally present significant safety hazards, it is important that hazards are identified, risks assessed and action taken where necessary. Health and Safety is about reducing the chance of someone being harmed. It is not about eliminating risk, but controlling it.

The Health and Safety at Work Act 1974 is a significant piece of legislation that sets out measures which are intended to ensure that all possible hazards are controlled.

Therefore the elders as 'managing trustees' have a legal duty to ensure the health, safety and welfare of people using the premises. In general, this includes:

- ensuring the premises are safe and without risks to health;
- ensuring that any plant or machinery are safe (e.g. heaters);
- ensuring that safety systems are in place and are followed;
- ensuring that articles and substances are moved, stored and used safely;
- providing adequate welfare facilities;
- providing the necessary health and safety information, instruction, training and supervision as and where necessary.

It is necessary therefore to ensure there is no risk to anyone who is likely to be affected by their activities, such as the general public, visitors and volunteers acting on behalf of the church. The specific piece of legislation governing this is the **Management of Health and Safety at Work Regulations 1999**.

Consequently it is necessary to carry out a risk assessment of the church premises to identify hazards and to determine the degree of risk present that may affect the health and safety of people using the building. Undertaking such a risk assessment will enable those in charge of the building to identify and control any activities, the use of machinery or substances that could potentially cause injury or ill health.

The risk assessment should aim to assess potentially hazardous activities that are performed in the church premises. It should identify exactly how people and other people visiting the premises may be harmed; for instance, by poorly maintained equipment, mobile heaters, ladders, a generator, or carrying out unsafe manual handling activities on the church premises.

Having identified the potential dangers, those responsible for buildings will be in a better position to decide if existing control measures are sufficient, or whether more needs to be done – for example, whether the elders or volunteers need to be better trained to carry out their role safely. In the case of a caretaker – it might be carrying items that are too heavy for one person. He/she would therefore benefit from training in manual handling techniques.

There are no fixed rules about how the risk assessment should be carried out. This is because the nature of the risk assessment will vary depending on the complexity of the building, any particular hazard and the extent of the risk it presents.

Information on how to conduct a risk assessment can be obtained from the Synod office and from Health & Safety websites.

Also, those using the building have a duty to act responsibly at all times and should:

- take reasonable care for their own health and safety and that of others who may be affected by what they do or do not do;
- co-operate with the church elders on health and safety issues;
- correctly use any items provided by the church – including personal protective equipment in accordance with training and instructions;

F MANAGEMENT ISSUES

F16 Health & Safety

November 2014

- not interfere with or misuse anything provided for health, safety or welfare.

2 Churches should have in place a Health and Safety Policy.

Whilst there is no legal requirement to produce a policy it is good practice to do so. It might contain the following:

- health and safety risks – what they are, action needed to remove/control them, who is responsible, time for review;
- consultation with those using the premises – who is the church representative, who provides consultation;
- safe plant and equipment – who is responsible for identifying when maintenance is needed, who draws up maintenance procedures, who to report problems to, who purchases new equipment?
- safe handling and use of substances (cleaning material) – who identifies hazardous substances;
- It is useful to review the policy regularly (e.g. annually).

3 Enforcement

Responsibility for enforcement of the HSW Act is divided between the HSE (Health and Safety Executive) and local authorities.

It is always useful to maintain a good working relationship with the local District Council, who will come out to you and give advice free of charge.

4 Practical steps

In view of the different ways in which legislation can apply to churches, and the variety of situations which may be encountered, churches are recommended to take the following actions. Once put in place, any arrangements should be reviewed annually and the review recorded:

- the church's responsibility for health and safety should be formally acknowledged by the church meeting and the elders' meeting. The day-to-day responsibility should be allocated to either a committee (not necessarily the elders' meeting) or an individual;
- the church should ensure that third party users should comply with the HSW Act and any other applicable legislation, and should issue third party users with the church's health and safety policy;
- the premises and grounds should be inspected regularly at least quarterly, but this does depend on the usage of the premises concerned for any potential hazards that might otherwise be overlooked, including such matters as:
 - (i) the standard of housekeeping (general cleanliness and tidiness), as a build-up of debris is a fire risk.
 - (ii) the adequacy and proper functioning of lighting, heating and ventilation, especially checking that light bulbs are functioning in areas where there is no natural light.
 - (iii) ease of access and movement, particularly freedom from obstruction of doors especially emergency exits and corridors.
 - (iv) tools, equipment and machinery should be inspected at regular intervals – particularly electrical equipment, to ensure that they are in good condition. This might cover the following – ladders and any scaffolding towers, mowers and other garden equipment, electrical equipment and sockets, heating and cooking appliances. Each item should be marked with a sticker or some other identifiable sign to indicate they have been checked.

F MANAGEMENT ISSUES

F16 Health & Safety

November 2014

This should also indicate when a further inspection is required. It may be appropriate to use a specialist for this.

- (v) lifts should be examined by competent person.
- (vi) the security of the building during the hours when it is not being used, should be considered
- (vii) *an accident book should be purchased and used as required.***
- (viii) a first aid box should be obtained by the church and the contents should be regularly checked and replenished as required. Only those items permitted should be kept in a first aid box
- (ix) emergency fire exits should be clearly marked with the appropriate signage and emergency lighting systems installed where required. Fire alarms and extinguishers should be in place, regularly tested and properly maintained by a competent technician.

5 Insurance

The premises and activities of the church need to be adequately covered by insurance against damage to the building and claims by users. **See Section 7, F12, for details.**

6 The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 RIDDOR

From 1 October 2013, new RIDDOR Regulations came into force which introduced significant changes to existing reporting requirements. The main requirements are highlighted as follows:

What must be reported?

- work related accidents;
- types of reportable injury;
- specified injuries to workers;
- over seven –day injuries to workers;
- injuries to non-workers;
- reportable occupational diseases;
- reportable dangerous occurrences;
- reportable gas occurrences;
- exemptions;
- why report and record;
- records;
- how to report: Online and Telephone and Reporting out of hours.

No more “major injuries”

The primary purpose of the “major injury” list within the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 was to ensure that serious injuries were reported promptly to the authorities, thus enabling an investigation to be launched, if necessary: **The principle remains in the new Regulations although the terminology has changed. Instead of “major injuries” there are now “specified injuries”.** The reasons for the changes are not self-evident and most employers are likely to continue using the term “major injury” as it is well understood. In the 2013 Regulations the list of specified injuries is given in Regulation 4, rather than in a separate schedule.

Who reports them?

Responsibility for reporting these injuries remains unchanged. The employer has to make the report in respect of its employees. If a self-employed worker is injured, the individual or organisation in control of the premises where the accident happened must submit the report.

What's reportable?

The following are reportable as specified injuries:

- *“fractures, other than to fingers, thumbs and toes”;*
- *“amputation of an arm, hand, finger, thumb, leg, foot or toe” – a more specific version of the former category which was “any amputation”;*
- *“any injury likely to cause permanent loss of sight in one of both eyes”;*
- *Any crush injury to the head or torso causing damage to the brain or internal organs” - this and the next two categories are completely new;*
- *“any burn injury (including scalding) which: covers more than 10% of the whole body's total surface area or causes significant damage to the eyes, respiratory system or other vital organs”;*
- *“scalping requiring hospital treatment” – scalping is the traumatic separation or peeling of the skin from the head;*
- *“any loss of consciousness caused by head injury or asphyxia”;*
- *any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours”.*

What's no longer reportable?

Dislocation and temporary loss of sight have been removed from the list. Several specific types of injury have also been eliminated including those caused by electricity, chemicals and biological agents. New ones have been added including certain crush injuries, burns and scalping. If you're not sure whether you need to report an incident, check with the HSE's Incident Contact Centre.

A comprehensive five page document explaining the every facet of the topic is kept at the Synod office and copies can be sent to churches are request.