

Health & Safety Policy

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TABLE OF CONTENTS	PAGE
INTRODUCTION	5
SECTION 1: POLICY STATEMENT	
1.1 General policy	6
1.2 The Policy in relation to individual staff	6
1.3 The Policy in relation to professional functions	6
1.4 Health and Safety risk assessment	7
SECTION 2: ORGANISATION AND RESPONSIBILITIES	
2.1 Introduction	9
2.2 Duties and responsibilities of the Practice Manager	9
2.3 Responsibilities of staff	10
2.4 Responsibilities of the Practice	11
SECTION 3: PROJECT DESIGN AND CONSTRUCTION	
3.1 Introduction and the CDM Regulations 2015	12
3.2 Responsibilities of the Client	12
3.3 Responsibilities of the Principal Designer	13
3.4 Responsibilities of Designers under the CDM Regulations 2015	14
3.5 Risk control and the General Principals of Prevention	15
3.6 Implementation	15
3.7 Competence and capability	16
SECTION 4: SITE VISITS	
4.1 Introduction	18
4.2 Time and location of visit	18
4.3 Personal safety	18
4.4 Permission to visit site	18
4.5 Planning a site visit	18
4.6 Occupied site safety rules	19
4.7 Unoccupied site or building	20
4.8 Structural collapse	21
4.9 Accidents	21
4.10 Hazardous activities	21
4.11 Unsafe practices	21
SECTION 5: MISCELLANEOUS PROCEDURES	
5.1 Accident reporting	22
5.2 Illness	22
5.3 Occupational health	23
5.4 Smoking	23
5.5 Driving	23
5.6 Hazardous substances	24
5.7 Visual display units (VDUs)	24
5.8 Use of office equipment	25
5.9 Advice and consultancy	25
5.10 Visitors	25

PAGE

SECTION 6: FIRE AND EMERGENCY PRECAUTIONS

6.1 Fire precautions register & risk assessment	26
6.2 Means of escape	26
6.3 Fire evacuation procedures and practices	26
6.4 Fire protection systems	27
6.5 Bombs and bomb warnings	28
6.6 Training	29

SECTION 7: HEALTH AND SAFETY RISK ASSESSMENT

7.1 Definitions	30
7.2 Health and Safety risk assessment template	30

INTRODUCTION

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.

SECTION 1: POLICY STATEMENT

1.1 General policy

- 1.11 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.
- 1.12 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.
- 1.13 To receive proposals from staff, jointly or individually, for improving the effectiveness of these procedures and policies.
- 1.14 To regularly monitor and revise this policy and health & safety system as necessary, particularly as the business changes in nature and size.

1.2 The Policy in relation to individual staff

- 1.21 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.
- 1.22 To operate this policy in conjunction with the safety policies of the landlord of any property occupied by the Practice.
- 1.23 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.
- 1.24 To provide and maintain, where necessary, protective clothing and equipment and hard hats.
In the UK The Personal Protective Equipment Regulations 2002 and the Personal Protective Equipment at Work Regulations 1992 (as amended) give the main requirements.
- 1.25 To record all accidents/injuries and notify any major accidents/injuries or work related diseases to the enforcing authority.
For UK regulations see Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

1.3 The Policy in relation to professional functions

- 1.31 To provide adequate control of the health and safety risks arising from the Practice's work activities.
- 1.32 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.
For UK regulations see Section 6 of the Health and Safety at Work etc Act 1974 and the Construction (Design and Management) Regulations 2015 (SI No. 2015/51)
- 1.33 To obtain from Clients details of existing hazards or safety policies affecting there specific projects.
- 1.34 To encourage staff to report health and safety hazards to the (Practice Manager)
(see 2.2 – Duties and Responsibilities of the Practice Manager).

1.35 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.

1.4 Health and Safety risk management

1.41 The Practice, 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.

For UK regulations see the Management of Health and Safety at Work Regulations 1999)

1.42 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).

William Gunn

William Gunn on behalf of Wilson and Gunn

(Director – overall and final responsibility for health and safety)

for or on behalf of

Wilson and Gunn

(Practice)

12/12/19

1.43 Day-to-day responsibility for ensuring this policy is put into practice is delegated to the Practice Manager

William Gunn on behalf of Wilson and Gunn

William Gunn

(Practice Manager)

12/12/19

The appointed practice First Aiders are

William Gunn

The appointed practice Fire Wardens are

Enda Williamson

1.44 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.

William Gunn on behalf of Wilson and Gunn

William Gunn

(Staff)

12/12/19

SECTION 2: ORGANISATION AND RESPONSIBILITIES

2.1 Introduction

1. The Director/Partner named above has overall responsibility the Health and Safety Policy for the Practice.
2. The Practice Manager named above is responsible for implementation of the Health and Safety Policy. (For smaller practices this may be combined into one Director/Partner).

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

In the UK, employers' 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:

1. *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*
2. *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 of the Act 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 of 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.

2.3 Responsibilities of staff

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 machines after use or at the end of the day unless otherwise instructed.
- Report faulty office equipment to the Practice Manager – untrained staff must not attempt repairs.
- Escape routes (in case of fire), stairways, passageways 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) and deposited in the designated bins.
- Always leave the kitchen/refreshment facilities hygienically clean and tidy.

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.

SECTION 3: PROJECT DESIGN AND CONSTRUCTION

NOTE: The Construction (Design and Management) (CDM) Regulations 2015 came into force on 6 April 2015.

3.1 Introduction and the CDM Regulations 2015

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 and future maintenance.

Both aspects are covered by the original Health and Safety at Work etc 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 2015, 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, Designers, Contractors, the Principal Designer and the Principal Contractor.

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 responsibilities and preferably this action confirmed in writing.

3.2 Responsibilities of the Client

The main duties of the Client under the CDM Regulations 2015 are:

- to make suitable arrangements for managing a project, including the allocation of sufficient time and resources, to ensure that the construction work can be carried out, so far as is reasonably practicable, without risks to the health and safety of any person affected by the project, and that appropriate welfare facilities are provided on the construction site;
- where there is more than one contractor, or if it is reasonably foreseeable that more than one contractor will be working on a project at any time, to appoint as soon as is practicable a Designer with control over the pre-construction phase as Principal Designer and a Contractor as Principal Contractor, and take reasonable steps to ensure that they comply with their duties under the Regulations;
- to take reasonable steps to satisfy themselves that when appointing Designers (including a Principal Designer) and Contractors (including a Principal Contractor) that they have the skills, knowledge and experience and, if they are an organisation, the organisational capability, needed to fulfil the role they are appointed to undertake in a manner that secures the health and safety of any person affected by the project;
- to provide pre-construction information as soon as is practicable to every Designer and Contractor appointed to the project;
- to ensure that before the construction phase begins, a construction phase

plan is drawn up by the Contractor, if there is only one, or by the Principal Contractor;

- to ensure that the Principal Designer prepares a health and safety file for the project which is revised periodically to incorporate any relevant new information and is kept available for inspection by any person who may need it;
- where a project is notifiable, to give notice in writing to the Health and Safety Executive as soon as is practicable before the construction phase begins.

A project is notifiable if the construction work on a construction site is scheduled to—

(a) last longer than 30 working days and have more than 20 workers working simultaneously at any point in the project; or

(b) exceed 500 person days.

Where the Client is a domestic client having construction work done to their own home, which is not done in connection with business, most of the Client duties are passed to other duty holders.

3.3 Responsibilities of the Principal Designer

For further guidance on the responsibilities of the Principal Designer refer also to the Health and Safety Executive publication *Managing Health and Safety in Construction: Construction (Design and Management) Regulations 2015 – Guidance on Regulations (L153)*. This publication provides guidance on the legal requirements for CDM 2015 and is available to help anyone with duties under the Regulations. It describes:

- the law that applies to the whole construction process on all construction projects, from concept to completion; and
- what each dutyholder must or should do to comply with the law to ensure projects are carried out in a way that secures health and safety.

CDM 2015 - Regulation 11

Duties of a principal designer in relation to health and safety at the pre-construction phase:

1. *The principal designer must plan, manage and monitor the pre-construction phase and coordinate matters relating to health and safety during the pre-construction phase to ensure that, so far as is reasonably practicable, the project is carried out without risks to health or safety.*

2. *In fulfilling the duties in paragraph (1), and in particular when:*

(a) design, technical and organisational aspects are being decided in order to plan the various items or stages of work which are to take place simultaneously or in succession; and

(b) estimating the period of time required to complete such work or work stages,

the principal designer must take into account the general principles of prevention and, where relevant, the content of any construction phase plan and health and safety file.

3. *In fulfilling the duties in paragraph (1), the principal designer must identify and eliminate or control, so far as is reasonably practicable, foreseeable risks to the health or safety of any person:*

(a) carrying out or liable to be affected by construction work;

- (b) *maintaining or cleaning a structure; or*
 - (c) *using a structure designed as a workplace.*
4. *In fulfilling the duties in paragraph (1), the principal designer must ensure all designers comply with their duties in regulation 9 (duties of designers).*
 5. *In fulfilling the duty to coordinate health and safety matters in paragraph (1), the principal designer must ensure that all persons working in relation to the pre-construction phase cooperate with the client, the principal designer and each other.*
 6. *The principal designer must:*
 - (a) *assist the client in the provision of the pre-construction information required by regulation 4(4); and*
 - (b) *so far as it is within the principal designer's control, provide pre-construction information, promptly and in a convenient form, to every designer and contractor appointed, or being considered for appointment, to the project.*
 7. *The principal designer must liaise with the principal contractor for the duration of the principal designer's appointment and share with the principal contractor information relevant to the planning, management and monitoring of the construction phase and the coordination of health and safety matters during the construction phase.*

During the pre-construction phase, the Principal Designer must prepare a Health and Safety File appropriate to the characteristics of the project, which must contain information relating to the project which is likely to be needed during any subsequent project to ensure the health and safety of any person. The Principal Designer must ensure that the Health and Safety File is appropriately reviewed, updated and revised from time to time to take account of the work and any changes that have occurred.

If the Principal Designer's appointment continues to the end of the project they must also pass the completed Health and Safety File to the Client to keep. If the Principal Designer's appointment finishes before the end of the project, the File must be passed to the Principal Contractor for the remainder of the project.

3.4 Responsibilities of Designers under the CDM Regulations 2015

For further guidance on the responsibilities of designers refer also to the Health and Safety Executive publication *Managing Health and Safety in Construction: Construction (Design and Management) Regulations 2015 – Guidance on Regulations (L153)*.

CDM 2015 - Regulation 9 Duties of designers

1. *A designer must not commence work in relation to a project unless satisfied that the client is aware of the duties owed by the client under these Regulations.*
2. *When preparing or modifying a design the designer must take into account the general principles of prevention and any pre-construction information to eliminate, so far as is reasonably practicable, foreseeable risks to the health or safety of any person:*
 - (a) *carrying out or liable to be affected by construction work;*
 - (b) *maintaining or cleaning a structure; or*
 - (c) *using a structure designed as a workplace.*

3. *If it is not possible to eliminate these risks, the designer must, so far as is reasonably practicable:*
 - (a) *take steps to reduce or, if that is not possible, control the risks through the subsequent design process;*
 - (b) *provide information about those risks to the principal designer; and*
 - (c) *ensure appropriate information is included in the health and safety file.*
4. *A designer must take all reasonable steps to provide, with the design, sufficient information about the design, construction or maintenance of the structure, to adequately assist the client, other designers and contractors to comply with their duties under these Regulations.*

3.5 Risk control and the General Principles of Prevention

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 each RIBA Stage (0 – 7).

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.

The General Principles of Prevention set out in the CDM Regulations 2015 provide a framework to identify and implement measures to control risks on a construction project. CDM 2015 requires Designers, Principal Designers, Contractors and Principal Contractors to take account of the General Principles of Prevention in carrying out their duties.

The General Principles of Prevention are to:

- avoid risks;
- evaluate the risks which cannot be avoided;
- combat the risks at source;
- adapt the work to the individual, especially regarding the design of workplaces, the choice of work equipment and the choice of working and production methods, with a view, in particular, to alleviating monotonous work, work at a predetermined work rate and to reducing their effect on health;
- adapt to technical progress;
- replace the dangerous by the non-dangerous or the less dangerous;
- develop a coherent overall prevention policy which covers technology, organisation of work, working conditions, social relationships and the influence of factors relating to the working environment;
- give collective protective measures priority over individual protective measures; and
- give appropriate instructions to employees.

3.6 Implementation

When appointed as a Designer to a project the Practice will discharge its

duties under the CDM Regulations 2015 to eliminate, reduce or control, as far as is reasonably practicable, foreseeable health and safety risks through the design process, such as those that may arise during construction work or in maintaining and using the building once it is built.

When appointed as a Principal Designer to a project the Practice will discharge its duties under the CDM Regulations 2015 to plan, manage, monitor and coordinate health and safety during the pre-construction phase and to liaise with the Principal Contractor in providing information relevant for the planning, management and monitoring of the construction phase.

In providing services as a Designer and/or Principal Designer the Practice will take account of the General Principles of Prevention, and

- follow the guidance in *Managing Health and Safety in Construction: Construction (Design and Management) Regulations 2015 – Guidance on Regulations (L153)*, published by HSE;
- follow the guidance in *The Construction (Design and Management) Regulations 2015: Industry Guidance for Designers and Principal Designers*, published by the Construction Industry Training Board;
- follow the exclusive guidance for RIBA members on the CDM Regulations 2015, published on architecture.com;
- allocate members of staff with the necessary skills, knowledge and experience to undertake specific design tasks;
- provide appropriate CPD training to members of staff;
- develop, regularly review and operate appropriate practice quality management procedures in relation to project health and safety, and monitor compliance with the Practice Health and Safety Policy;
- comply as appropriate with the provisions of relevant 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;
- comply with guidance applicable to specific industrial, sector or substances published by HSE;
- specify 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, use authoritative sources of information, e.g. IEE Wiring Regulations, CIBSE guides, Agrément Certificates, Approved Documents, etc.
- consult the HSE in cases where guidance is not available or not clear.

The Practice will advise the Client if the obligations under the appointment agreement with the Client conflict with the obligations of the Practice under the CDM Regulations.

3.7 Competence and capability

The provisions of Regulation 8 of the CDM Regulations 2015 include the following requirements relating to the competence and capability of appointed duty holders:

1. *A designer (including a principal designer) or contractor (including a principal contractor) appointed to work on a project must have the skills, knowledge and experience and, if they are an organisation, the*

organisational capability, necessary to fulfil the role that they are appointed to undertake, in a manner that secures the health and safety of any person affected by the project.

2. *A designer or contractor must not accept an appointment to a project unless they fulfil the conditions in paragraph (1).*
3. *A person who is responsible for appointing a designer or contractor to carry out work on a project must take reasonable steps to satisfy themselves that the designer or contractor fulfils the conditions in paragraph (1).*

The Health and Safety Executive publication *Managing Health and Safety in Construction: Construction (Design and Management) Regulations 2015 – Guidance on Regulations (L153)* makes explicit reference to the weight that should be given to membership of an established professional institution or body, such as the RIBA, in assessing competence and capability. All RIBA members must comply with the RIBA CPD core curriculum requirement to undertake a minimum of 2 hours CPD each year in health and safety, and comply where appropriate with any specific requirements for skills, knowledge and experience in relation to the roles of Designers and Principal Designers under the CDM Regulations 2015 as may be prescribed by the RIBA. Practice staff members that belong to other similar established professional institutions or bodies should also undertake relevant health and safety CPD training on an annual basis. The Practice should not undertake work as a Designer or Principal Designer without ensuring that it has the organisational capability to undertake the role(s) and that its staff team has the appropriate skills, knowledge and experience, and understanding of the duties set out in the CDM Regulations 2015.

SECTION 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.

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.

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

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. If you are not able to be given an induction for any reason, do not enter the site;
- always attend site properly equipped;
- do not accept an escort as an alternative to inductions as your 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 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. You may wish to include a requirement for CSCS cards for your staff members. 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 future the test will feature a new question bank for architects that the RIBA feels is more appropriate. As an industry wide initiative this scheme should be commended although the current arrangements could be much improved.

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, roof-lights, asbestos boarding;
- 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.
- unsafe utilities e.g. gas, electrics, etc.

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.

SECTION 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.

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 and the Accident Record Book are situated

Kitchen

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

Glasgow Royal Infirmary

The local police station telephone number is

111

5.2 Illness

Illness must be reported to the Practice Manager 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 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.

5.3 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.

5.4 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.

(Smoke-free legislation was introduced in England in 2007, banning smoking in nearly all enclosed workplaces and public spaces, following similar bans in Scotland and Wales. Local authorities are responsible for enforcing the legislation.)

5.5 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 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 telephones 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.

5.6 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 occurs:

- 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.

5.7 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.

5.8 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 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 the Practice Manager.

5.9 Advice and Consultancy

Enforcing Authority:
Glasgow City Council

Employment Medical Advisory Service

The Medical Suite, Blythswood Square

5.10 Visitors

Visitors must report to Reception upon arrival and sign the Visitors' Book. Staff should be aware of the whereabouts of visitors to the premises at all times.

SECTION 6: FIRE PRECAUTIONS

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

Compliance with 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 DD9999 (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 twice in every period of 12 months and training in evacuation will be given regularly by the fire system's maintenance company

Graham & Siballds

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 fire fighting 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 CO² extinguisher located

Reception

- Other sources of fire can be tackled by the other extinguisher(s), located

Kitchen

- 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

Savoy Centre Entrance

The current Fire Warden(s) is/are named in Section 1.4. Fire Wardens' duties, in addition to the above, are as follows:

- to familiarise themselves with the location and operation of fire fighting 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;
- 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, fire fighting 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:

Graham & Siballds

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 Fire Fighting Equipment

The purpose of portable fire fighting 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 by

Graham & Siballds

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

Responsibility for ensuring the effective maintenance and guidance on the safe use of fire fighting equipment lies with

Graham & Siballds

The list below identifies a variety of fire fighting 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

Q Park Entrance, Bath Street

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 fire fighting action with extinguishers and blankets. This can considerably reduce losses to the practice whilst not putting the Fire Marshalls at undue risk.

SECTION 7: HEALTH AND SAFETY RISK ASSESSMENT

7.1 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 weigh 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."

7.2 Health and Safety risk assessment template

Health and Safety risk assessment for

Wilason and Gunn

Assessment undertaken by

William Gunn

William Gunn on behalf of Wilson and Gunn

12/12/19

Assessment review

12/12/20

No Significant hazards identified.

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