

NUCLEAR SAFETY DIRECTORATE - BUSINESS MANAGEMENT SYSTEM		
BUSINESS SUPPORT PLANNING, MONITORING, REVIEWING AND AUDITING NSD HEALTH AND SAFETY ARRANGEMENTS		BSS/HRM/001
		ISSUE 002
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1. Purpose & Scope

1.1 The purpose of this document is to specify procedures for planning, monitoring, reviewing and auditing NSD health and safety arrangements.

1.2 Throughout this document text in ***bold italics*** represents the performance standards for those with particular responsibilities in the NSD health and safety management system. These performance standards will be used as part of the measurement of individual and corporate health and safety performance.

2. Definitions

2.1 **Accident**:- an accident is **any incident** at work which results in injury, however trivial it may appear at the time. This includes work-related incidents occurring whilst staff are travelling on official business. (Incidents involving official vehicles must also be reported to Motor Transport Section on form MCS6 or MCS6A as appropriate).

2.2 **Near miss**:- is an incident which could have caused personal injury or damage to equipment or property. A road traffic accident in which no injuries occur is included in this category.

2.3 **Incidents of Violence**:- An incident of violence is identified as being any incident in which an employee is abused, threatened or assaulted in the course of his or her employment.

2.4 **Work-Related Ill Health**:- includes all suspected cases of ill health that may have been caused or exacerbated by work.

3. Procedure

3.1 Planning

1) SMG prepare a health safety plan each year setting out objectives for maintaining and improving health and safety arrangements in the Directorate consistent with the objectives of the HSE corporate plan.

2) Line managers prepare health and safety plans for their area of responsibility setting out the actions they and their team propose to deliver their contribution to the NSD health and safety plan.

3) The Safety Co-ordinator manages the preparation of procedures including

i) Maintaining a suite of procedures covering key risks, together with risk assessments which satisfy the law.

ii) Preparing an annual plan for the preparation of new procedures to meet changing HSE or NSD needs and to revise and update existing procedures.

iii) Managing the drafting of procedures by staff with the competence appropriate to the topic.

iv) Consulting with staff and their representatives on the new and revised procedures.

3.2 Active Monitoring

4) On behalf of the head of Division 4 the Directorate Safety Liaison officer carries out an inspection of the common parts of St Peter's House every 3 months using attached checklist SC1 and reporting the results on the attached form SCR.

5) On behalf of Divisional heads Divisional Safety Officers carry out inspections of the office areas in their Division every 3 months using the attached checklist SC2 and reporting the results on the attached form SCR.

6) ***Line managers carry out ad hoc checks throughout the year on the implementation and effectiveness of Directorate health and safety procedures and monitor progress with their contribution to the NSD health and safety plan.***

7) ***Division and Unit heads monitor health and safety issues at least monthly at each management meeting.***

8) ***RPA/RPSs carry out ad hoc checks to ensure compliance with IRR procedures and associated rules.***

9) All staff can report at any time concerns over health and safety to their line manager. Where matters cannot be resolved through the line management chain then matters should be reported to the health and safety co-ordinator.

3.3 Accident, ill health and incident reporting and investigation

10) The procedures set out in Chapter 22 of the Health and Safety Guidance for Managers in HSE Offices should be followed. In summary:

i) The injured person or person affected by, or witnessing, a near miss or other incident must, where possible, notify their line manager as soon as possible and help to provide sufficient information for the completion of the ACC1 or IH1.

ii) On learning of an incident, the line manager must arrange for its investigation and complete the ACC1 or IH1. Trade Union (TU) Safety Representative should be informed and given the option of a joint investigation.

iii) The completed ACC1 or IH1 must be forwarded to the NSD Safety Co-ordinator within 8 working days of the incident. Where the investigation may take longer to complete, an interim ACC1/IH1 must be forwarded, and followed up with a final report

as soon as possible.

iv) The Safety Co-ordinator must review the completed ACC1 or IH1 and ensure that the notification and investigation procedures have been carried out appropriately. Where necessary, further information should be sought.

v) *The Safety Co-ordinator must copy an ACC1 within 10 working days of the incident to:*

Personnel Operations C, Room 201, St Hugh's House, Bootle.

The relevant TU health and safety representative (as defined on the Health and Safety Poster for the site).

BSD2, Room 604 St Hugh's House, Bootle (for all incidents at/in Bootle HQ).

BSD3A, GSW, Rose Court (for all incidents at/in Rose Court).

The injured or (where relevant) other affected person and line manager.

vi) *The Safety Co-ordinator must copy an IH1 within 10 working days of the event to:*

Personnel Operations C, Room 201, St Hugh's House, Bootle.

The relevant TU health and safety representative (as defined on the Health and Safety Poster for the site).

The person suffering from the case of ill health and their line manager, in line with NSD arrangements.

vii) The Safety Co-ordinator briefs the Chief Inspector with a summary of recent events in preparation for each OMF meeting.

4. Review

4.1 every 6 months line managers report through the line management chain to Division heads on progress with health and safety plans and issues of concern.

4.2 every 6 months, in time for reporting to the NSD HSC, Division heads report to the NSD health and safety co-ordinator on progress with health and safety plans, the results of DSO inspections and issues of concern.

4.3 every 6 months the health and safety co-ordinator reports to the SMG via the NSD HSC on progress with the health and safety plan, the results of SLO and DLO inspections, accidents, cases of ill health and incidents together with the results of investigations, and the results of RPA and RPS reports.

4.4 every 6 months SMG receives a report from the health and safety co-ordinator.

4.5 the risk assessments underpinning health and safety procedures are reviewed every 3 years as part of the revision of procedures required by the BMS.

5. Audit

5.1 As part of the NSD audit arrangements the health and safety policy, organisation and arrangements and are subject to audit as part of the audit plan. The aim is to cover all parts of the BMS documents over a period of 5 years.

5.2 Associated Documents

5.3 Health and Safety Guidance for Managers in HSE Offices

5.4 Management of Health and Safety in HSE (HSA note 59/97)

5.5 BSS/HRM/026 - Policy for Managing of Health and Safety in NSD

5.6 BSS/HRM/014 - Organisation for Management of Health and Safety in NSD

5.7 BSS/HRM/013 - NSD HEALTH & SAFETY COMMITTEE (DHSC) - Terms of Reference

5.8 ACC1 - HSE reporting form for recording accident / incident /

violence / verbal abuse / near misses information

5.9 IH1 - HSE form for recording all possible cases of ill health that may be caused or exacerbated by work

5.10 RIDDOR forms F2508/F2508a - HSE forms for reporting injuries, diseases and dangerous occurrences

5.11 Bootle Protocol

Health and Safety Checklist

St Peter's House - Common Areas

Form SC1

As part of the inspection of common parts the following items should be checked on each floor - (except where stated)

Corridors & Stairs

- Floor surfaces in good condition - even - no obstructions - no slipping or tripping hazards - no material or waste stored.

Fabric

- Ceiling tiles in good repair
- Doors, handles and hinges in working order

Heating

- Temperature adequate and heating in working order

Lighting

- All working and in good order

Electrical equipment

- Electrical casings and leads in good order with no exposed wires
- Trailing leads covered or routed to prevent tripping

- Electrical cabinets and switch rooms locked

Fire

- Escape routes clear, unobstructed and signed
- Exits clear, unobstructed and signed and self closing devices working
- Call points accessible, visible and in good repair
- Extinguishers, in place and marked as tested within last twelve months

Toilets

- Clean, catches on all doors in working order Soap, towels, mirrors available
- Floors dry, clean and clear

Tea points

- Floors dry and clear of rubbish
- Surfaces dry and clear of rubbish

Notices

- First aid, emergency instructions,
 - Official Health and Safety Notice posted at entrance
 - State of Alert sign clearly visible from all entrance points on ground floor
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Health and Safety Checklist

**St Peter's House - Divisional Office Areas
SC2**

Form

As part of the inspection of Divisional Office areas at least the following items should be checked.

Floors and access

- Floor surfaces in good condition - even - no obstructions - no slipping or tripping hazards - no material or waste stored.

- Obstruction free access for staff to all parts of offices.

Fabric

- Ceiling tiles in good repair
- Doors, handles and hinges in working order

Heating and ventilation

- Temperature adequate and heating in working order
- Ventilation arrangements including opening windows and fans etc in good order

Lighting

- All working and in good order

Storage

- Filing cabinets and cupboards stable and secure
- Racking and shelves stable and secure.
- All stored material stable on shelves or cabinets etc and easily accessible by use of stools or steps.
- All stools and steps in good order

Manual handling

- Trolleys and trucks available to transport material if required
- All trolleys and trucks in good order

Electrical equipment

- Electrical casings, switches, leads and sockets in good order with no exposed wires
- Trailing leads covered or routed to prevent tripping
- Electrical cabinets and switch rooms locked
- Inspection tags, (the green labels), on all appliances and showing item inspected within last 12 months.

Fire

- Escape routes clear, unobstructed and signed
- Exits clear, unobstructed and signed and self closing devices working
- Call points accessible, visible and in good repair
- Extinguishers, in place and marked as tested within last twelve months

Display Screen Equipment

- Over a period of two years check systematically that all equipment required by DSE assessments is available and where feasible check it is in use.
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DSO/SLO Safety Inspection Record

DSO/SLO **EXT**

Area Inspected:

Date of inspection:

DATE REPORTED	N A T U R E O F R E Q U E S T / H A Z A R D	LOCATION	URGENCY	ACTION TO BE TAKEN BY	DATE HELP DESK NOTIFIED	DATE COMPLETED	FOLLOW UP ACTION/ COMMEN TS