

Health And Safety

HEALTH AND SAFETY

Policy Lead	William McDonald
Ratifying Committee / Group	Board of Directors
Status of Policy	Draft
Policy Reference	005

Signed: _____
[Insert Name], Chair, [Committee / Group]

Ratification Date: _____

Essential reading for the following staff groups:

All Eclipse Care (Southwest) Ltd Staff

Following staff groups should be aware of policy existence for reference:

POLICY
IMPLEMENTATION
DATE: 09/2017

POLICY REVIEW
DATE:09/2019

Health and Safety Policy

1.0 Eclipse Care (Southwest) Limited recognises its responsibility to ensure that all reasonable precautions are taken to provide and maintain working conditions that are safe, healthy and compliant with all statutory requirements and codes of practice.

1.2 Developments in legislation or case law that affect the rights of Eclipse Care's employees or Service Users will be incorporated into review and amendment of this policy.

2.0 Policy Objectives.

2.1 This policy aims to set broad parameters within which service systems can operate and the guidance detailed here-in is given to assist Service Managers in ensuring Eclipse Care's compliance with the requirements of Health and Safety at Work etc Act 1974.

3.0 General Responsibilities

3.1 Home Care Services are designed to meet Service Users' needs and should always ensure the Health and Safety of both the Service User and staff members involved. This requires staff to behave in a professional manner always and ensure that the Service User is kept informed of matters which may affect them.

3.2 The Operations Manager should ensure that Service Users have been provided with information relating to Health and Safety matters and to the services to be provided into their home. This should include:

- A copy of this Health and Safety Policy.
- Details of the Public Liability insurance cover.

3.3 Where any Health and Safety matter is identified which may prejudice safe working, staff are required to notify their line Manager at the earliest opportunity.

3.4 The Manager should assess any risks that involve individual staff working alone either in the office setting or out in the community. This assessment should follow the Lone Working Policy,

3.5 The Operations Manager is required to ensure that before any Member of Staff that work "Hands on" undertakes any duties in a Service User's home, they have received suitable and effective training with which to carry out their duties. This should include awareness by staff in relation to their own safety and well-being. Staff should receive instruction on first aid in accordance with the organisations First Aid Policy (Policy 038).

3.6 Each Member of Staff has a responsibility to:

- Act in a professional and responsible manner always.
- Follow Health and Safety Policies and Procedures, which form part of the Quality Management System in use.
- Report problems, concerns and Health and Safety issues promptly to their line Manager.
- Ask for guidance when unsure about Health and Safety issues.

3.7 Home Care Managers are responsible for ensuring:

- All staff are suitably trained to carry out their duties effectively.
- All staff are aware of Health and Safety Regulations concerning their work.
- Each Service User has been assessed to ascertain their care needs and service requirement. This should include re-assessment where changes in physical or mental health have affected the care program, its delivery or effectiveness.
- The Service User's home is safe as possible.
- Ensuring that staff follow Health and Safety Policies and Procedures.
- Report issues which they cannot resolve to their Line Manager.

3.8 The manager should be aware of the requirement to report to the Care Quality Commission any event which is covered by Regulations 16, 17 and 18 of the Care Quality Commission (Registration) Regulations 2009.

4.0 Travel and Transport

4.1 Working in the community may require Home Care Staff to travel at unsociable times, in the dark, in poor weather and alone. Where this is the case staff should ensure that someone knows the staff members proposed movements and route.

If this changes they should:

- Advise the Operations Manager.
- Arrange to report their location at regular intervals.
- Be prepared for delays from cancellations of public transport. Dress sensibly for the weather conditions and any changes forecast.
- When travelling by car, keep the doors and boot locked with valuables locked in the boot or out of sight.
- When walking from car to house, look confident and avoid eye contact with strangers.
- Carry a personal attack alarm.
- Do not enter premises if you have any doubts about your own personal safety.
- Keep a change of warm dry clothes in the boot, just in case you get wet.

5.0 Safety in Service User's Home

5.1 Before providing any Home Care Service into a Service User's home, the Home Care

Co-ordinator must ensure that a comprehensive assessment of risks has been carried out by using the Assessment Pack containing:

- Risk Assessment Form - Service User's Property.
- Risk Assessment Form - Moving and Handling.
- Safety Hazard Checklist, contained Care Plan.

Risks in relation to the Service User in their own home should be included as part of the service users Care Plan, this should be read before providing any care to the Service User

5.2 Where staff are aware of, or identify a risk, which has previously not been identified, they should take steps to minimise the immediate risk and then inform the area Co-ordinator without delay. This may include risks from:

- Pets.
- Leaking or damaged roofs / pipes.
- Poor maintenance.
- Damaged or broken appliances.
- Access – Staircases and floors cluttered or poorly lit.
- Fire – smoking without proper use of ashtrays.
- Cleanliness – does the home give the impression of being clean?

5.3 On each visit, staff should carry out a visual check upon entering the premises to satisfy themselves that there are no obvious signs of danger and harm, or that they are satisfied that the services can be carried out without undue risk. Where a Member of staff feels that conditions exist which render the workplace unsafe, they should inform the area Co-ordinator without delay.

5.4 The operations manager will contact the purchaser of the services and make suitable safe arrangements for service delivery to meet the needs of the Service Users.

6.0 Equipment (Ref Policy 050)

6.1 Where equipment is provided for use in the Service Users home, staff must ensure that it continues to meet the needs of Service Users and remains fit purpose.

6.2 If Service Users use equipment, staff must ensure that they have received a clear explanation and experience in the use of the equipment before the Service User is required to use it.

6.3 Staff must make regular checks of equipment and make a record of the date of the check, where staff find any fault with any equipment, the Service Users should be informed not to use it and the matter should be referred the area Co-ordinator immediately

7.0 Food Safety

7.1 All Home Care Staff who may be required to handle, prepare or serve food as part of their daily duties are required to undertake suitable training in basic food hygiene.

7.2 This training should result in an examination and award of a recognised qualification such as “The Food Handlers Food Hygiene Certificate”, or “Basic Food Hygiene”. The Operations Manager should ensure that all staff who hold a recognised food hygiene certificate attend a recognised training course to update their skills at least once every 3 years.

7.3 Staff should be encouraged to clean kitchen surfaces and utensils to be used prior to commencement of their duties.

7.4 The following matters should be considered in relation to food safety in the Service User's home:

- Cleanliness – sufficient and suitable cleaning materials available.
- Repairs – Walls and floors should be in a good state of repair.
- Equipment – cookers are in good order
- Fridges / Freezers – clean inside and out and keeping appropriate temperature.
- Refuse Bins – Lid fitted and waste bag used. No signs of pest intrusion.
- Foodstuffs – Check “best before” dates and that nothing is contaminated or rotting.
- Food related illness – Any symptoms such as diarrhea or vomiting should be notified to the area Co-Ordinator immediately with no return to food preparation until cleared by GP or Operations Manager.

8.0 Control of Infection

(Ref policy 029)

8.1 Staff should be aware that Service User's represent a high risk in relation to the spread of infection due to the range and severity of the health conditions they present.

8.2 All staff should be aware of the correct techniques of hand washing and general principles of how to prevent the spread of infection.

8.3 Any risks that have been identified by staff should be included in the Persons Care Plan

9.0 Moving and Handling

(to be read in conjunction with policy number 031)

9.1 No Member of Staff should engage in any form of moving and handling or lifting of loads and objects without carrying out a suitable risk assessment.

9.2 No Member of Staff should engage in moving or attempting to move a Service User without:

- Referring to the service users Care Plan, for the Moving and Handling Risk Assessment guidance notes and the Moving and Handling Risk Assessment.
- Having received correct training in the techniques required for the care of the Service User.
- Having ascertained that the workplace is free from obstruction or danger

9.3 All staff should be suitably trained to operate any hoists or other mechanical aids in the Service User's home. Follow the manufacturer's instructions, which must be kept in the Service User's home.

9.4 The maintenance record must be up to date and should be checked prior to use.

10.0 COSHH – (Control of Substances Hazardous to Health)

10.1 Where Home Care Staff are required to use cleaning materials belonging to the Service User, they should ensure that they are satisfied that they can be used safely for the purpose stated.

10.2 Staff should ensure that all materials are stored in accordance with the manufacturer's instructions and COSHH Regulations

10.3 Where any doubt as to the safety or use of any substance is concerned, the Member of Staff should contact the area Co-ordinator.

11.0 Visually Checking Electrical Appliances

11.1 All staff should take care when using any electrical appliance. Be alert to dangers from cracked plugs and light switches.

11.2 If it is necessary to use electrical equipment which belongs to the Service User, it should be visually checked prior to use. Attention should be paid to

the trailing cable or flex and a suitable protective current device (RCD) should be used.

11.3 Where an electrical fault is discovered, the equipment should not be used and the area Co-ordinator informed

12.0 Violence and Aggression

12.1 Home Care Staff should receive training in recognising signs of aggression and dealing with violent outbursts.

12.2 All staff should report any such incident without delay. Details should be entered into the service users Care Plan where possible although in serious cases this may not be possible due to staff leaving the Service User's home.

13.0 Emergency Provision

13.1 Care Staff should have received some form of first aid training prior to commencing work in Service User's homes.

13.2 Where an accident occurs, staff should deal with only very minor injuries. In all other cases either the Service Users own GP or an ambulance should be summoned and the matter referred to the area Co-ordinator.

13.3 Following an accident staff should ensure that an Accident / Incident / Near Miss Report Form has been completed.

13.4 The area Co-ordinator should then check whether the accident is reportable under the RIDDOR Regulations 1985 and if so, should arrange an investigation to ascertain the circumstances surrounding the accident to be established and for the completion of RIDDOR Notification Form F2508

13.5 The Home Care Co-ordinator should arrange for follow up monitoring of all accidents to ensure that any lessons that can be learned have been actioned and to ensure that the welfare of the victim is being maintained and that a review of the service users Care Plan, has taken place if necessary.

14.0 Working at heights

14.1 Under no circumstance are any employees to carry out any activity that involves working at heights.

15.0 Policy review

15.1 This policy will next be reviewed in 2019; thereafter the policy will be reviewed in accordance with changes to legislation and guidance regarding Health and Safety or every 2 years (whichever is the shortest period).

15.2 The date of the next review is detailed at the end of this document.

15.3 Changes to the policy as a result of review will be communicated to all staff.

Authored By	William McDonald
Ratified By	Board of Directors
Status of Document	Final
Date of Ratification	09/2017
Date of Next Review	09/2019

Guidance for managers

This procedure addresses Safe care and treatment, Regulation 12 (1) (a) (b) (c) 12 (2) (a) (b) (d) (e), Regulation 17 (2) (a) (c) and 17 (2) (d) and 3 (a) (b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)