

## HEALTH AND SAFETY STATEMENT

# LAURALYNN IRELAND'S CHILDRENS HOSPICE LEOPARDSTOWN ROAD FOXROCK, DUBLIN 18

Written By: Bernie Chapman, Quality, Risk & Safety Manager	Date Issued: 01.07.2024	Revision No: 14
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#### 1 Health & Safety Policy

It is the policy of LauraLynn, Ireland's Children's Hospice (the Service), to promote standards of Health and Safety in the workplace that will lead to the avoidance or reduction from the risks of accident or illness and to adopt the best practical methods of compliance with the Safety, Health and Welfare at Work Act, 2005, the Safety, Health and Welfare at Work (General Application) Regulations, 2007 and other associated legislation.

The Service endeavors to provide a safe and healthy environment for the benefit of all service users, employees, volunteers, visitors, and to meet our obligations to contractors and members of the public who may be affected by our workplace operations.

The Service fulfills the statutory obligations to manage and co-ordinate workplace safety and health and, as far as is reasonably practicable, commit to ensuring that:

- Work activities are managed to ensure the safety, health and welfare of our employees
- Protective and preventive measures are identified, implemented and maintained
- Improper conduct likely to put an employee's safety and health at risk is prevented
- A safe place of work is provided that is adequately designed and maintained
- A safe means of access and egress is provided
- Safe plant and equip
- Equipment are provided and maintained
- Safe Systems of Work are provided
- Risks to health from any biological agent, article or substance are prevented
- Appropriate information, instruction, training and supervision are provided
- Where hazards cannot be eliminated suitable protective clothing and equipment are provided
- Emergency plans are prepared and revised
- Welfare facilities are provided and adequately maintained
- Competent personnel who can advise and assist in securing the safety, health and welfare of our employees are employed when required

This policy and the arrangements for its implementation are kept in key locations within the Service and are available to all employees, contractors and visitors. The safety statement and its accompanying policies and procedures will be reviewed and amended as required on an annual basis.

Signed on behalf of the Service:

Kerry McLaverty Chief Executive Officer June 2024

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#### 2 Organisation & Responsibilities:

The Senior Management has overall responsibly for Health & Safety within the Service. The Governance structure is set out as follows:

#### **Governance Structure**

### LauraLynn Ireland's Children's Hospice

#### 2.1 Overview of Health & Safety Management Structure:



The Service has a safety management structure in place to ensure effective safeguards and control arrangements are in place and adequate consultation, information and training take place.

- The organisation has established a Local Quality, Risk and Safety (LQRS) Committee that meets monthly to review all reported clinical incidents, infection prevention and control updates, risk management updates, compliments & complaints, audits reports, national standards and QIs.
- The organisation has stablished a Health and Safety Committee that meets bimonthly to review all reported non-clinical incidents, health and safety updates, facilities updates, infection, prevention and control updates and to consult with employees on safety and health matters.
- The organisation has established a Quality, Risk and Safety Committee, chaired by a member of the Board of Directors, that meet bi monthly to oversee health and safety practice and procedures and to monitor health and safety in the Service.

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- The organisation has appointed a Quality, Safety and Risk Officer to act as a resource and advisory person on all aspects of health and safety. The Quality, Safety and Risk Manager is responsible for overseeing all aspects of the health and safety agenda
- The organisation has appointed Covid-19 Lead Worker Representative who works with management to ensure the implementation of measures to prevent the spread of Covid-19, and monitor adherence to the controls
- The organisation supports staff to complete training as may be required to safeguard their own safety; in addition, safety training needs are identified and cater for both new and existing employees
- Managers and employees are allocated specific responsibilities and duties, as outlined in this Safety Statement
- Consultation between employer and employee is facilitated. There is a Safety Representative by department who makes representation on behalf of employees/team and sit on the Health and Safety Committee
- Systems for auditing and inspecting have been devised by the Service and carried out as per the organisations audit schedule. Trends are analysed by the LQRS Committee that meets monthly
- Clinical incidents are documented, recorded and trends analysed by the LQRS Committee.
- Non-clinical incidents are documented, recorded and analysed at the Health and Safety Committee. Trends are analysed by the Quality, Risk & Safety Committee
- All risk assessments rated 15 and over and all incidents category 1 are reported to the Board of Directors
- Employee co-operation is encouraged and emphasised in order to ensure success of the Health and Safety Policy
- The Safety Statement is reviewed as appropriate and at least annually by the Quality, Risk & Safety Department & sufficient resources are allocated to ensure the implementation of this Safety Statement and the duties that are set out below
- The service identifies the hazards in the organisation and assess the risks represented by those hazards. The hazards are recorded on the organisational risk assessment (see appendix 5) and the risk register. These are regularly reviewed.
- The service has an Emergency Management Plan, Business Continuity Plan and COVID-19 Contingency Plan, which should be referred to, in the event on an emergency

#### Executive Management Team

- Chief Executive Officer
- Director of Nursing
- Quality, Risk & Safety Manager
- Head of Operations
- Consultant Paediatrician
- Head of Finance

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- Head of Marketing & Communications
- Head of Fundraising
- Head of Human Resources

#### **Departmental Managers**

- Assistant Director of Nursing
- Clinical Nurse Managers
- Facilities Manager
- Operations manager
- Family Support Team Manager
- Communications Manager

#### 2.2 Responsibilities

#### 2.2.1 Board

- Ensuring that the Health, Safety and Welfare of all service users, employees, volunteers and contractors are considered and included when work strategies, policies, goals, targets and standards are set
- Ensuring that adequate resources of time, personnel, and money are made available to support the objectives of Health and Safety
- Ensuring that the safety duties of those holding responsibilities at a management level in the organisation are carried out efficiently and effectively
- Ensuring that the Health and Safety Policy is formulated, agreed and implemented and revisions are made to it as may be required and where necessary by changing circumstances in the workplace

#### 2.2.2 Chief Executive Officer

- Ensuring in conjunction with the management team and staff that the controls outlined in this Health and Safety Statement are implemented and maintained
- Ensuring that employees adhere to the specified safe work practices, take appropriate precautions and wear prescribed protective clothing if necessary
- Ensuring that consultation occurs with the management and staff on Health and Safety related issues and are then ratified through the Quality, Risk and Safety Committee
- Ensuring that all serious workplace accidents and serious occurrences are thoroughly investigated and recorded using the Adverse Event Reporting Form (refer to Appendix 1). Where relevant the appropriate authorities must be notified of serious accidents and dangerous occurrences by the Quality, Risk & Safety Manager or Quality, Risk & Safety Officer and internal and external stakeholders are notified where required
- Ensuring that the Board of Directors are informed of all adverse events and related matters
- Ensuring that all work and working procedures are planned and supervised in a safe manner, and in accordance with agreed standards

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 Ensuring, in conjunction with Senior Management, that the competency of persons with particular responsibility for specific areas within the Health and Safety structure of the Service are adequate. Where necessary competent persons will be appointed both from within the organisation and from external sources as required

#### 2.2.3 Quality, Risk & Safety Manager

- Ensuring that there are appropriate Safety Standards and Procedures in each area and that they are reviewed, revised and updated as necessary in light of new legislation, stakeholder feedback, structural changes and practical experience
- Ensuring guidelines, advice and measures directed by the government and other relevant authorities are implemented in the case of a national emergency
- Ensuring the Health and Safety Statement is reviewed annually.
- Be the contact for the relevant Health and Safety regulatory bodies, and be available for Health and Safety Inspections from the Health and Safety Authority and Environmental Health
- Overseeing workplace audits, at an agreed frequency by the LQRS Committee Reviewing and monitoring of reports produced in relation to health and safety, and ensuring necessary measures are implemented
- Ensuring that all accidents, incidents and near misses are reported on the Adverse Event Form, logged in internal data base and information uploaded onto the NIMS web system
- Maintaining consultation with the CEO, to appoint, as deemed necessary, competent persons to advise on various aspects of Health and Safety of the Service
- Ensuring that where necessary reporting to Insurance Company
- Notifying the Health and Safety Authority via the IR1 form on <u>www.hsa.ie</u> of any reportable workplace accidents in conjunction with the Quality, Safety and Risk Officer
- Ensuring risk assessments cover all areas of business activity operational, financial, clinical and nonclinical including occupational health and safety in conjunction with the Quality, Risk and Safety Officer

#### 2.2.4 Quality, Safety and Risk Officer

- Keeping up to date with Health & Safety legislation and any developments that affect the sector
- Ensuring that all fire precautions are observed, fire-fighting equipment records of maintenance are maintained and emergency evacuation drills are carried out in conjunction with Facilities department
- Developing and implementing the appropriate Safety Standards and Procedures in each area and ensure that they are reviewed, revised and updated as necessary in light of new legislation, stakeholder feedback, structural changes and practical experience
- Reviewing and updating the Health and Safety Statement annually or as new requirements, policy or legislation are identified in conjunction with the Quality, Safety and Risk Manager. Ensure it is circulated among staff and the Health & Safety Policy is displayed as appropriate throughout the service
- Acting as the organisations Covid-19 Lead Worker Representative

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- Ensuring that all equipment/machinery is safe; fitted with all safety guards and a safety device recommended by the manufacturers, and properly serviced and maintained
- Organising and co-ordinating a site approach to the risk assessment programme, identifying and quantifying existing and all potential new hazards, and developing and implementing appropriate controls
- Accident Management working with Quality, Safety and Risk Manager to ensure a robust process is established which includes incident investigation, identification and implementation of all corrective actions and effective preventative programs
- Raising Environmental or Health & Safety concerns to Management in order to get their support and participation in the problem-solving processes, as well as in performance and implementation of corrective and preventative measures
- Ensuring that environment, health & safety audits are carried out throughout the site
- Working closely with Quality, Safety and Risk Manager, Facilities Manager and Head of Operations to deliver robust safety procedures throughout the organisation
- Coaching and supporting new and existing staff within the Service into the identification, analysis and control of health & safety hazards on an on-going basis
- Co-ordinating and Chairing the Health and Safety Committee
- Identifying site safety equipment where necessary
- Maintaining and monitoring all site Health & Safety records
- Providing input into Quality, Safety and Risk Department reports to executive management
- Overseeing the Health & Safety requirements for LauraLynn events, onsite and offsite

#### 2.2.5 HR Department

- Ensuring Occupational Health Service as appropriate is provided to all employees including any external counselling via the Employee Assistance Programme (EAP) programme
- Co-ordinating wellbeing programmes/activities for staff
- Ensuring that training programmes dealing with safe working practices are set up, documented and delivered in conjunction with the Human Resources Department
- Ensuring that the Executive Management Team is advised on human resource aspects of safety matters
- Ensuring that the duties of responsible persons, key personnel and the management team in relation to health and safety are included in their job descriptions
- Ensuring that disciplinary procedures exist for wilful breaches of safety standards at set out under the provisions of the Health, Safety and Welfare at Work Act 2005 and Regulations
- Ensuring that relevant safety information and training e.g. legislative requirements, manual handling, fire prevention etc. is incorporated into staff induction training
- Ensuring that health and safety training programmes are formulated and reviewed on an annual basis

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- Ensuring that the Human Resource Policies, incorporating Dignity in the Workplace for the Health Organisation (2004) and Equal Opportunities/Diversity Policy and Strategy Objectives for the Health Organisation (2004) are fully complied with
- In conjunction with the Quality, Risk and Safety Department, ensuring that health and safety training programmes are in line with current health and safety legislation, recommendations and good practice
- Ensuring that health and safety training needs which are identified are fully assessed and addressed as appropriate

#### 2.2.6 Facilities Department

- Reviewing contractor safety documentation, method statement and risk assessments in conjunction with the Quality, Safety and Risk Officer. The contractor's method statement and risk assessment must be submitted for examination prior to commencing work to the Facilities Manager
- Ensuring contractors have appropriate insurance cover submitted to the Facilities Manager prior to engagement
- Ensuring adequate supply of PPE is available and be responsible for ordering any necessary stock as requested
- Ensuring that all fire precautions and emergency plans are adhered to, fire-fighting equipment is adequately maintained and emergency evacuation drills are carried out, in conjunction with the Quality, Safety and Risk Officer
- Maintaining and monitoring all fire records
- Ensuring that plant, equipment, vehicles and safety appliances are maintained and serviced and that any significant safety concerns are brought to the attention of the Chief Executive Officer
- The Facilities Manager shall have systems in place to ensure that only competent<sup>1</sup> persons are employed as contractors, architect's, etc., within the Service
- The Facilities Manager is responsible for completion and sign off of the relevant Permit to Work Forms
- Ensuring that all equipment/machinery at all locations is safe and fitted with all safety guards and safety devices recommended by the manufacturers, and properly serviced and maintained
- Ensure all buildings are surveyed annually to determine their condition. Formulate a programme of work to carry out any necessary repairs
- Ensuring all work is carried out to the Building Control (amendment) Regulation 2014
- Ensuring compliance with the Safety, Health and Welfare at Work (Construction) Regulations, 2006 where relevant

#### 2.2.7 Operations Manager

• Reviews all subcontractors and suppliers' insurance documentation and liaises with Insurance Brookers on behalf of the service

<sup>&</sup>lt;sup>1</sup> A person who possesses sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken

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#### 2.2.8 Finance Department

• Ensuring financial resources are available as far as possible for the safety programme within the Service

#### 2.2.9 Director of Nursing

- Ensuring that the requirements of health and safety legislation are being met within their areas
- Ensuring that necessary resources are made available for the implementation of the health and safety legislation and good practice recommendations
- Reviewing and monitoring of reports produced in relation to health and safety, and ensuring necessary measures are implemented
- Ensuring the Health and Safety programme within the Service is compatible with the care plans for each child and adult as agreed under the quality programme and HIQA Standards
- Ensuring that they and all staff implement the safety statement within their department
- Ensuring risk assessment covers all areas of business activity operational, financial, clinical and nonclinical including occupational health and safety
- Ensuring on-going consultation with employees or their representative bodies (where recognised) is facilitated

#### 2.2.9 All Department Heads/Managers

- Ensuring implementation of the health and safety policy in their respective areas
- Ensuring that the requirements of health and safety legislation are being met within their areas
- Ensuring on-going consultation with employees or their representative bodies is facilitated
- Ensuring that necessary resources are made available for the implementation of the health and safety legislation and good practice recommendations
- Reviewing and monitoring reports produced in relation to health and safety, and ensuring necessary measures are implemented
- Ensuring that all work and working procedures in locations under their control are planned and supervised in a safe manner, and in accordance with the agreed standards set out in this Health and Safety Statement
- Ensuring that all equipment/machinery at locations under their control is safe and fitted with all safety guards and safety devices recommended by the manufacturers, and properly serviced and maintained
- Ensuring that training programmes dealing with safe working practices are set up, documented and imparted in conjunction with the Learning and Development Department
- Ensuring in conjunction with the staff that the controls outlined in this Health and Safety Statement are implemented and maintained
- Ensuring that staff, observe the specified safe work practices, take appropriate precaution, and wear prescribed protective clothing as necessary

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- Ensuring that all workplace accidents, near misses and dangerous occurrences are documented and reported to the Quality, Safety and Risk Department
- Ensuring that staff have risk assessments carried out in a timely manner as and when required
- To carry out the Pregnancy Risk Assessments when required and submit it to the HR Department

#### 2.2.10 Employees

Ensuring compliance with the requirements of this Health and Safety Statement in each specific area and the Safety Health and Welfare at Work Act, 2005 (Section 13). It is the duty of every employee while at work:

- To take reasonable care for their own safety, health and welfare and that of any service user or visitor or other person who may be affected by their acts or omissions while at work
- To co-operate with their manager and any other person to such extent as will enable their employer or the other person to comply with any of the relevant statutory provisions
- To use in such manner so as to provide the protection intended, any suitable appliance, clothing, convenience or equipment for securing their own or that of others safety, health or welfare
- No person will intentionally or recklessly interfere with or misuse any appliance, clothing, convenience or equipment provided for securing the safety, health or welfare of persons arising out of work activities
- To take the responsibility for reading and understanding of the contents of the Health and Safety Statement, in particular pertaining to the area in which they work
- To report all accidents, incidents and near misses to their Line Manager using the Service's Adverse Event Reporting form
- To advise their Line Manager if they are pregnant in order for a pregnancy risk assessment to be completed
- To ensure that they never come to work under the influence of alcohol or drugs. Furthermore, if they conclude that a colleague is in an intoxicated or inebriated state, they must notify their Line Manager immediately.
- Staff members who fail to comply with or breach the Health and Safety requirements and the Services policies, procedures and guidelines may be subject to disciplinary action
- Safety Representatives are appointed from the staff team to ensure that employees are represented in aspects of Health and Safety and to draw management's attention to issues as they arise.

#### 3 General Arrangements for Health and Safety

The following section outlines the general arrangements in place for Health and Safety in the Service.

#### 3.1 Resources

The Service recognises that adequate resources and funding must be made available for the effective implementation of the safety procedures and policies laid down in this Health and Safety Statement. The CEO shall ensure that the Service:

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- Provides resources for upgrading, maintenance, replacement and repair of facilities and equipment, in so far as is reasonably practicable, to maintain a safe working environment
- Ensures that staff are trained to undertake all relevant work activities carried out by the Service. This training will be provided, , in conjunction with the Learning and Development Department
- Provides resources for the ongoing monitoring of Health and Safety in the Service and for the provision of information and training of all staff in Health and Safety

#### 3.2 Training

Health and Safety training is a critical element of safety management. The Executive Team in conjunction with the HR Department will identify the training needs of their staff and ensure these are fulfilled. Staff training will include:

- Company Induction on commencement of employment all staff
- Risk Management and Incident Reporting training all staff
- Fire awareness and Fire Warden training (FW incorporated into the Fire Awareness training)
- Manual Handling (all staff) and People Handling (Selected staff)
- Infection Control All staff
- Management of Actual or Potential Aggression MAPA training
- Additional Driving Training For all staff driving LauraLynn Cars
- Child Protection & Vulnerable Adult Training
- CPR (incl., BLS, Heart Saver & AED training) all HCA's and Registered Nurses and other selected staff identified by the Clinical Education and Research Department
- Basic Food Hygiene & Safety training all staff who handle food
- Clamping training for all operators of equipment including ability swing, buses and the Service vehicles
- Equipment / Machinery training as per manufacturer's instruction those using equipment e.g. hoists, compactor etc

All other non-clinical and clinical training requirements will be highlighted by the Learning and Development Department. All the safety training received will be monitored and recorded by the Human Resources Department.

#### 3.3 Personal Protective Equipment

It is the policy of the Service to eliminate or reduce hazards at the source wherever possible. Personal protective equipment (PPE) will be used where residual risk exists after implementing other control measures. All safety equipment purchased by the Service will meet approved standards and adequate supplies of personal protective equipment will be available for issue as required. Such items may include protective clothing, gloves, masks, aprons, sharps bins, lifting devices, steps for working at heights.

Refer to the following procedures for full PPE requirements in relation to the following:

- Infection, Prevention & Control Policy Ref No 7.3
- Infection, Prevention & Control During Covid-19 Guideline SOP040

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- Administration of Subcutaneous Injection, Infusions & Fluids COVID-19 procedure (Adults) Ref No SOP025
- Safe use and Disposal of Sharps Ref No. 7.3.2
- Procedure for Occupational Blood and Body Fluids Exposure Ref No. 7.3.3

On a daily basis it is the employee's responsibility to ensure they wear the correct PPE for their work and management will monitor and check the usage of personal protective equipment on an ongoing basis and will enforce usage if non-compliance is identified. Any person carrying out procedures that require the use of personal protective equipment <u>must</u> use it. Failure to do so is a serious breach of legislation and policy.

#### 3.4 Consultation & Communication

In accordance with its stated Health and Safety policy objectives, the Executive Management Team are committed to open communication and consultation on matters of Health and Safety. The service openly communicates on matters of Health and Safety interest and will promote active participation in consultation from staff at all levels. All submissions on matters of Health and Safety are welcome from all employees at all times.

#### 3.4.1 Communication & Consultation on Health & Safety Matters

In accordance with the requirements of the Safety, Health & Welfare at Work Act, 2005 the management of the Service are committed to open and transparent communication and consultation with employees on matters of Health & Safety. Communication from the Quality, Safety and Risk Officer and the Quality, Safety and Risk Manager, on matters of Health & Safety shall be undertaken by the following means:

- Health & Safety Training
- Consult with HR Department for health & safety content to be delivered on induction
- Information is cascaded to employees at team meetings and Health & Safety is on the agenda. At these meetings managers encourage employees to provide formal feedback
- SharePoint is available to all staff where the Safety Statement is available along with all other relevant health and safety information
- The status of corrective and preventative actions for clinical incidents or risks shall be indicated at the LQRS Committee meetings
- The status of corrective and preventative actions for non-clinical incidents or risks shall be indicated at the Health and Safety Committee meetings

#### 3.4.4 Appointment of Safety Representative

Employees may nominate a staff member to act as their representative on matters of occupational safety and health. Should employees request the nomination of a Safety Representative, or should they nominate an employee to this role, the Service through the Health and Safety Committee, commits to facilitating the selection appointment and training of a Safety Representative(s).

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This person, once selected, has the following rights under Irish safety & health legislation - the Safety Representative:

- May take representations from staff on any aspect of safety, health and welfare at the place of work
- In conjunction with the Quality, Safety and Risk Manager may be required to investigate accidents, near misses and dangerous occurrences. He/she shall not interfere with or obstruct the performance of any statutory obligation required under any of the relevant statutory provisions, for example an investigation of an accident by a Manager or Inspector of the Health & Safety Authority (HSA)
- In conjunction with the Quality, Safety and Risk Manager may be required to make oral or written representations to inspectors from the HSA on matters of safety, health and welfare at work
- May receive advice and information from inspectors from the HSA on matters of safety, health and welfare at work
- In conjunction with the Quality, Safety and Risk Manager may be required to accompany an Inspector on any tour of inspection other than a tour of inspection made by an Inspector for the purpose of investigating an accident
- At the discretion of the Inspector concerned, the Safety Representative may accompany the Inspector of the HSA on an inspection following an accident or attend interviews of employees carried out during such an inspection
- Subject to prior notice to the employer, in conjunction with the Quality, Safety and Risk Manager may be required to carry out inspections of the premises to determine any potential hazards on the premises
- Subject to prior notice to the employer, in conjunction with the Quality, Safety and Risk Manager may be required to investigate potential hazards and complaints made by any employee whom he/she represents relating to that employee's safety, health and welfare at the place of work

Where appointed, the Quality, Safety and Risk Officer is committed to active co-operation with the nominated safety representatives and will allocate sufficient resources in time, training and facilities to allow him/her to carry out the role. The Service will also acknowledge the value of the contribution that a safety representative can make to the overall successful management of safety in the workplace and will welcome the nomination of a safety representative by their colleagues.

#### 3.5 Accident, Near Miss & Incident Reporting

All accidents, incidents and dangerous occurrences that happen in the workplace (including near misses) must be reported to their Line Manager using the Services Adverse Event Reporting Form. (Refer to Appendix 1 and Incident Reporting Policy - Ref No: 7.4). It is the duty of employees, volunteers and contractors to report all work related accidents, illnesses, near misses and dangerous conditions within 24 hours. The Adverse incident form will be reviewed by the Line Manager in conjunction with the QRS Manager and or Officer.

Following completion of an Adverse Event Reporting Form, the employee will seek to respond /resolve the matter in consultation with their manager/ colleagues, the report will be presented at the LQRS Committee (clinical) or the Health and Safety Committee (Non-Clinical). Were an employee is absent from work for 3

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consecutive days as a result of a workplace incident/accident the matter must be reported to the Health and Safety Authority. via the IR1 form on <u>www.hsa.ie by the</u> Quality, Safety and Risk Officer and/or Quality, Risk & Safety Manager.

An incident form shall be completed for any suspected or confirmed cases of Covid-19 and shall then be externally reported through NIMS, to HIQA as a 3-day notification, and daily notifications thereafter and the Public Health Department.

#### 3.6 First Aid & CPR/Defibrillators

First Aid equipment is suitably marked and are sited at a point convenient to the majority of the staff or where there is greatest risk of an injury occurring and must be easily accessible at all times. First Aid Boxes located as follows:

1 in Willow View; Nurses Office	9	1 in Hazel House; Nurses Station		2 Laura Lynn Kitchen & Nurses station	
1 Rowan House; Reception	1Little Oa	ak; Entrance	1 in Main Kitchen		1 in each car & bus

Contents of first aid boxes in clinical areas are checked by appointed staff monthly. In non-clinical areas the Quality, Risk and Safety Officer check them bimonthly through audits and in car & buses the Facilities Assistant check these monthly. When a replacement is needed staff request the items from the Facilities Department via email. See appendix 6 for recommended contents. There is no rapid access to medical cover in the Service; therefore, in the event of a visitor, member of staff, volunteer, contractor etc. going into respiratory or cardiac arrest, staff will immediately commence and attempt only basic life support and call 999 to ensure access to emergency support from ambulance services. Only healthcare professionals trained to carry out CPR and use an AED are permitted to carry out this procedure, unless directed by the emergency services – i.e., if one dials 999, the operator will talk the caller through basic life support.

The Service has access to Automated External Defibrillators (AEDs), oxygen, mouth-to-mask ventilation via Laerdal mask and suctioning. There are 3 AEDs located in LauraLynn House reception, Rowan House reception and the corridor outside the restaurant. There is no access to intravenous drugs. All AED boxes have been supplied with full PPE if required during the Covid-19 pandemic.

#### 3.7 Pregnant Employees

The Safety, Health and Welfare at Work (General Application) Regulations 2007, Part 6, Chapter 2, Protection of Pregnant, Post Natal and Breastfeeding Employees apply when an employee informs their employer that they are pregnant. It is in the employee's best interest to let their employer know theyare pregnant as soon as possible. On receiving notification that an employee is pregnant, the Employee's Line Manager assesses the specific risk to that employee by completing a Pregnancy Risk Assessment and take

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action to ensure that they are not exposed to any situation, which could damage either their health or that of their developing child. See Appendix 3 for Pregnancy Risk Assessment Form. If the assessment reveals that there is a risk, the employee will be informed, and every effort will be made to eliminate exposure of this risk. Every effort in terms of privacy and flexible work arrangements will be made to facilitate all pregnant employees.

#### 3.8 Volunteers, Visitors & Contractor Management

Volunteers, visitors and contractors have regard to the law and established practices relating to health and safety in the Service. If a volunteer, visitor or contractor is feeling unwell or displaying signs of Covid-19 they must not come to LauraLynn. Arrangements must be made prior to arrival onsite as to the agreed date, time and designated staff member as contact person. All volunteers, visitors and contractors must report to the reception in Rowan House and the designated point of contact will be informed of their arrival. The Designated staff member will sign the contractor/visitor in issue them with a badge is issued and then escort them to the relevant are on site.

#### 3.8.1 Volunteers

Volunteers have a responsibility to co-operate with the Service while they are on the premises and to provide a safe place of work. The Service shall ensure that volunteers are competent and vetted in their area of service or supply and inform these persons of any hazards and risks that are present on site before entering.

#### 3.8.2 Visitors

The Service has a responsibility to ensure, so far as is reasonably practicable, the safety of visitors while on its premises. All visitors are to report to reception and wait for your contact to pick you up from reception. Visitors are either escorted or accompanied for the duration of their visit and their host ensuring that any safety rules and emergency procedures are adhered to.

#### 3.8.3 Contractors

All contractors must comply with safety rules and co-operate with management and employees to ensure safety is maintained and relevant statutory provisions are met.

- All work by these persons must be carried out in accordance with the relevant statutory provisions and taking into account the safety of others on the premises.
- The Facilities Manager shall request copies of the site / task specific Risk Assessment and Method Statement from contractors as well as proof of insurance.
- Contractors will be given a brief safety induction on arrival by the person whom they are meeting, which outlines the safety rules and emergency procedures and any further information pertinent to their stay e.g. whether there is a fire alarm test, nearest assembly point etc.
- Contractor work must be carried out in compliance with the requirements of the Services Health and Safety Statement, Contractor's Health and Safety Statement and requirements of any relevant legislation, regulations, insurance and with signed work permits, risk assessments and method

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statements. Maintenance or Service work carried out at the Service by contractors may introduce additional new hazards to the workplace. It is essential that the contractor identifies the hazards and that both parties/relevant departments are aware of the hazards and adopt appropriate controls.

- It is implicit that should the contractor not observe the highest possible safety standards, so as to
  protect any Service, the CEO or a Senior Manager has the right to order a cessation of work until the
  agreed safety standards have been adhered to. If deemed necessary, the contractor may be asked to
  leave and not resume work or restore the area until the appropriate documentation is provided.
- All contractors must complete the Contractor's induction available on HSeLanD before the works commence. It is the Facilities Department's responsibility to ensure the steps to access the online induction are sent to all contractors in advance. Alternatively, the contractors could attend a face-to-face induction that would be arranged and delivered by the Facilities Department.
- Contractor's equipment must be maintained as per the manufacturer's guidelines and be of high standard and must comply with safety regulations.
- In addition, contractors are required to report any accidents, incidents, near misses and dangerous conditions to the relevant Sonas Manager as soon as possible.
- The Contractor must comply with any fire evacuations/drills etc. as directed by the Service staff.

#### 3.9 Smoking

The Service will fully comply with the Tobacco Act, 2004. Smoking is not allowed on the grounds of the Service with the exception of the designated smoking hut on site. Staff shall ensure that visitors, family member, volunteers and contractors have been informed of the designated area upon arrival at LauraLynn.

#### 3.10 Welfare

The following Welfare facilities are provided for all staff, volunteers, contractors, public, families and visitors to the Service:

- Restaurant provided for all during normal working hours
- Staff Room in LauraLynn House where staff can rest, store food and prepare meals/refreshments
- Toilet facilities in each house for staff, volunteers, visitors and others to use
- Shower facilities for staff and volunteers provided in Rowan House, Little Oak and LauraLynn House
- Family accommodation in LauraLynn House, including bedrooms, sitting room and kitchen
- Sitting rooms in disability services for adults/children and families

Staff must comply with the Infection, Prevention and Control Policy and also comply with the training they have received in relation to Basic Food Hygiene.

#### 3.11 Occupational Health

The Service provides all employees with an Occupational Health Service as appropriate, to include preemployment medicals. Further detail on Occupational Health controls are outlined in the relevant risk

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assessments. External counselling via the EAP programme shall be offered to employees by their Line Manager.

#### 3.12 Display Screen Equipment Risk Assessment

LauraLynn shall evaluate the health and safety at workstations and identify possible risks which may give rise to visual or physical difficulties or to mental stress. In order to comply, the organisation will:

- Carry out a risk assessment of employee workstations, including those who work remotely. The DSE risk assessment form will assist in this process.
- Provide information to employees in relation to measures which have been implemented
- Provide training to employees in the use of workstations before commencing work with display screen equipment and whenever the setup of the workstation is modified
- Perform a further risk assessment where an employee transfers to a new workstation or significant new work equipment, change of equipment or new technology is introduced to an individual's workstation
- Ensure that the provision of an appropriate eye and eyesight test is made available to every employee
- Facilitate equipment for all staff working remotely

#### 3.13 Onsite and Offsite Events

Community fundraising events are run by the Fundraising and the Communications and Marketing Team and all other internal events are organised through the care teams and are managed in conjunction with the Quality, Safety and Risk Officer. Thorough risk assessments are carried out on all events taking into account, employee, public and fire safety. The Operations Manager shall ensure that there is liaison with the Services Insurance Company at all times.

#### 3.14 Health & Safety Inspections & Auditing

Designated Managers must complete inspections as per the audit schedule and must rectify any problems identified if safe to do so. Audits are carried out regularly and findings/ recommendations reported to Line Manager and discussed at the LQRS Committee and reported to the Quality, Risk & Safety Committee. Corrective actions must be agreed with the management for any Health & Safety problems identified and must be monitored to ensure they have been implemented. Issues that arise, which are deemed to be high risk must be included in the Risk Register and a system put in place to reduce the risk.

#### 3.15 Maintenance & Repairs

All required maintenance and repair work shall be reported to the Facilities Department to rectify. Risk Assessments are completed for Maintenance work on this site. For specialist work such as electrical work, contractors are assigned to the task. Each contractor will provide their own site-specific risk assessment and method statement for the work prior to any work taking place. See section 3.14: Contractor Management.

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#### 3.16 Record Keeping & Review

The Service will ensure that appropriate measures are in place to make certain that all relevant Health & Safety Records are available to those who require them. The following documents will be held in the policy and procedure file in each department:

- Health & Safety Statement
- Risk Assessment for the House Activities
- Emergency Management & Business Continuity Plan

The above documentation will be reviewed, and where required, updated annually. The above documents will also be held on the intranet – SharePoint - where all staff can access. All records shall be maintained to ensure that they are available, identifiable and shall be legible.

#### 4 Hazard Identification & Risk Assessment

The service pledges to inform and consult with all relevant employees prior to making any decisions that substantially affect the management of safety and health in the Service and shall communicate with employees on all matters related to health & safety on an ongoing basis.

The Service recognises many common hazards, which can be grouped according to source e.g. human/behavioural, physical, chemical and biological are inherent in the working environment. It is also recognised that unsafe working is equally hazardous and can cause serious injury and loss. It is the duty of all staff to ensure hazards, arising in the workplace, which may give rise to risk for the safety health concern are identified, assessed and eliminated or managed to the lowest level possible.

In order to ensure that the safety management system in place for the Service is appropriate to the tasks carried out by our employees, the active participation of employees is sought in carrying out risk assessment for identified hazard and in the determination of appropriate controls.

Written records of all stages of the hazard identification and risk assessment process must be retained. In order to ensure that there is a good standard of health and safety management in the hospital, systematic assessments of systems of work and work areas are carried out, as considered necessary, in consultation with employees in order to ensure that hazards are identified and risks assessed. Heads of Department routinely inspect all work areas in conjunction with the Health and Safety Lead.

Many departments can enhance the risk assessment process through participation in the review and analysis of Adverse Event Report Forms. For full details on how to conduct a Risk Assessment please refer to the Risk Management Policy. Safety arrangements for recognised hazards can be found outlined in the next section.

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#### 5 Safety Measures

#### 5.1 Manual Handling

Manual handling is the movement of loads that, due to the characteristics of the load or unfavourable ergonomic conditions, may involve a risk of injury to the person, particularly back injury. The movement of a load can involve lifting, putting down, pulling, pushing, carrying or moving. The Service has drawn up this procedure to assist in preventing manual handling accidents from occurring in addition to the manual handling risk assessment and training provided for relevant staff.

It is the responsibility of all staff and volunteers to ensure they attend the manual handling training as part of the services mandatory training program

#### 5.1.1 Moving and Handling

Moving and handling is a key part of the working day for most employees in the Service; from moving equipment, laundry, catering, supplies or waste and assisting children/adults in moving. Poor moving and handling practice can lead to:

- Back pain and musculoskeletal disorders, which can lead to inability to work
- Moving and handling accidents, which can injure both the person being moved and the employee
- Discomfort and a lack of dignity for the person being moved

You must take action to prevent or minimise the risk of injury. You can reduce the risk of injury to other staff and children/adults by:

- Avoiding those manual handling tasks that could result in injury, where reasonably practicable and providing equipment such as hoists and trolleys, to reduce the risk
- Completing Risk Assessments for all moving and handling tasks that cannot be avoided

Employees must:

- Follow the Moving and Handling risk assessments and all systems that are provided for your work to reduce the risk of injury
- Attend manual Handling Training
- Co-operate with your employer and let your Line Manager know of any problems
- Take reasonable care to ensure that your actions do not put you or others at risk

#### 5.1.2 Procedure for Moving and Handling Children and Adults in the Service

On initial assessment, a Safe Handling Plan is put in place for each child and adult, and equipment is identified to accommodate each child's and adult's needs, while also addressing the safety requirements of the staff/volunteers who care for them.

- Refer to individual's documented Safe Handling Plan prior to any moving, handling procedure or transfer
- The child/adult should be encouraged to participate in repositioning/transfers to the best of their ability. When a child/adult is unable to participate handling equipment will be used

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- There is a vast selection of appropriate handling equipment for use with child/adult in the Service including profiling beds, cots, acheevas, seating systems, hoists (overhead & manual), slings, adjustable height shower trolleys, 4-way sliding sheets, standard sliding sheets, glide tubes and gait belts
- For each child/adult who is availing of the residential services, they shall have their own identified sling
- The Service assesses and provides slings for children/adults availing of the respite services, who:
  - Do not use hoists at home
  - $\circ$  Whose home slings are not compatible with the system in use in Laura Lynn
  - The requirement for same will be documented in the Safe Handling Plan. Handling equipment can be shared. Where a child/adult is infective, they will be provided with specific handling equipment for their use only
  - $\circ~$  A list of slings designated to each house is available
  - Hoisting requires a minimum of 2 staff members. Following assessment of the child/adult more than 2 staff members may be required to perform the transfer safely, e.g. attachments. The number of staff members required will be documented in the Safe Handling Plan / Care Plan
  - Some children/adults are unsuitable for hoisting. When assessment indicates this or a suitable sling cannot be sourced to accommodate a child/adult a team lift may be performed to transfer. This presents risk of injury to a child/adult and staff, and requires detailed risk assessment guidance and careful adherence to correct techniques
  - The Facilities Manager in conjunction with the Senior Occupational Therapist is responsible for organising the scheduled maintenance and repair of all hoists as carried out by the Service Contractor

#### 5.2 Biological Agents

Biological agents are widely found in the natural environment and as a result found in many work sectors. They include bacteria, viruses, fungi (yeasts and moulds) and parasites. Some of these agents are harmless whilst others may have potential to cause ill health. As a worker you may be harmed by being infected by a biological agent, by being exposed to toxins produced by the biological agent or have an allergic reaction to the biological agent or substances it produces, for example, enzymes. In this workplace, exposure to biological agents can be unintentional, whereby the employee is exposed to the biological agent due to the work they do, for example, exposed to a blood borne virus or needle stick injury. A set of work practices to reduce and eliminate the risk of coming into contact with Biological Agents are set out in the Infection, Prevention and Control Policy such as:

- Hand Hygiene
- Wipe down of work station with alcohol wipe
- Use Personal Protective Equipment (PPE)
- Management of spillages of blood and bodily fluids
- Management of sharps and safe injection practices
- Management of waste and laundry

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#### 5.2.1 General Good Practice

- Use appropriate PPE as outlined in Infection, Prevention & Control Policy Ref No 7.3
- Wipe up as much of the visible material as possible with disposable paper towels and carefully place the soiled paper towels and other soiled disposable material in a leak-proof, plastic bag that has been securely tied or sealed.
- Immediately use a detergent, or a disinfectant-detergent to clean the spill area, then rinse the area with clean water.
- Apply sanitizing solution to gloves. Remove, dry and store these gloves away from food or food surfaces. Discard disposable gloves.
- Wash your hands afterward, even though you wore gloves

#### 5.3 Chemical Agents

The safety requirements pertaining to individual chemicals and hazardous substances brought on to the premises will depend on the nature of the substance and how it is being used. For hazardous chemicals that are used by the Service's staff and regular contract staff such as cleaners, chemical risk assessments shall be carried out. Chemicals that are brought to site by contractors – e.g. needed for the operation or service of equipment are assessed and managed by the relevant contractor in conjunction with the Facilities Manager and the Quality, Safety and Risk Officer.

The following general requirements apply to all substances used in or stored on the premises:

- Safety Data Sheets should be available for all substances and stored at the SDS Section of the Safety Folder available within each department
- A register of all chemicals, safety data sheets and all chemical risk assessments is maintained at the SDS Section of the Safety Folder available within each department
- The register shall be reviewed and periodically (e.g. carry out a chemical sweep during stock taking).
- Inventory shall be regularly checked for out of date/near expired chemicals
- Necessary information and PPE should be provided for employees using chemicals at minimum as outlined in the relevant Safety Data Sheet / Risk Assessment

#### 5.3.1 General Good Practice

- Store all substances upright in their original containers that are labelled stored and disposed of in accordance with their Safety Data Sheet and legislation
- Check any containers for damage when unpacking
- Store chemicals in one area, while also observing not to store any incompatible chemicals (e.g. oxidizers with flammable chemicals) together see chemical risk assessment for detail
- If using chemicals cover all cuts, abrasions or other skin penetrations with waterproof plasters, bandages
  or gloves (type as prescribed in the relevant risk assessment), wear long sleeve clothing, where
  appropriate suitable gloves and/or disposable overalls

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- Remove any potentially contaminated clothing
- Where the potential exists for any substance or article to splash or spray, wear suitable safety glasses or goggles, aprons, gloves or any other relevant PPE identified on the SDS
- Where the potential exists for a substance, particularly dusts or aerosols, to be inhaled, suitable respiratory protection shall be worn
- Do not touch mouth or eyes when handling chemicals to avoid transferring substances
- Ensure all materials contaminated with hazardous chemicals such as rags, nominally empty tins, used masks, gloves or clothing are treated as hazardous materials from a handling, storage and disposal perspective

#### 5.4 Night Work & Shift Work

Night workers are defined in the Organisation of Working Time Act 1997 as employees who normally work at least three hours between midnight and 7am the following day for at least 50% of their annual working time. Shift work is usually regarded as:

- Work undertaken scheduled outside of standard daytime hours (7am 7pm) where there may be a handover of work from one person or work group to another
- A pattern of work where one employee replaces another on the same job within a 24-hour period

Negative effects to Night and Shift Workers include:

- Disruption of the internal body clock (circadian rhythms)
- Sleeping difficulties
- Fatigue
- Health effects
- Individual factors
- Social and family factors
- Errors and accidents

To overcome and prevent the above negative effects, the Service has put measures in place to ensure employees are comfortable at work. A risk assessment is completed on Night and Shift Work. You will find this in the information pack in each department, where Night and Shift Work is applicable.

#### 5.4.1 General Good Practice

- Know the hazards and risks associated with this work, and the need for proper sleep and dangers of fatigue
- Refer to the risk assessment and ensure your Night and Shift Work tasks are considered in the risk assessment
- Consider your safety going to and coming from work particularly at unsociable hours and the impact of fatigue on you driving to and from work. Consider car-pooling, use public transport etc.

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• Inform your Line Manager if the car park and other external areas which you need to access for your work are not well lit after daylight hours

#### 5.5 Lone Working

Lone workers are those who work by themselves without close or direct supervision. Anybody who works alone, including contractors, self-employed people and employee, is classed as a lone worker. Lone workers at the Service include:

- When you are on the premises or in a department on your own
- LauraLynn staff working in the community
- Maintenance, Cleaning, Laundry Staff
- Night / Shift Workers
- Working away from the Service / Driving for Work

The service has a Lone Working Policy (Ref No 3.23) which all staff shall make themselves familiar with and ensure they adhere to the policy.

#### 5.5.1 General Good Practice

- Risk Assessments, which document control measures are completed for the above workers and are available online and with LauraLynn staff working in the community
- Emergency contact details are contained with company vehicles if the Lone Worker requires assistance.
- Staff must carry their company identification with them at all times
- Staff members must report all accidents, near misses and incidents to their Line Manager, and complete the adverse event reporting form contained in the Appendices to the Safety Statement and both parties must ensure that measures are taken to minimise the risk of further incidents
- LauraLynn staff working in the community must complete their Home Risk Screening Tool and the Risk Assessment for Moving and Handling in the Home
- When lone working, it is important that all staff:
  - $\circ~$  Ensure your mobile phone is fully charged
  - Be alert to your surroundings
  - o Park in well-lit locations
  - Be cautious when entering an external location and leaving immediately if there is any evidence of a threat or safety issue that may make the situation unsafe, e.g. arguments, abusive behaviour
  - Note the availability and condition of equipment and aids, e.g. handrails, adjustable bed, shower, chair, hoist, access ramps, etc. and if necessary, recommending to your line manager that these be supplied, installed, replaced etc.
  - If travelling long distances, avoid working late shifts if possible due to the risk of fatigue whilst driving home

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#### 5.6 Remote Working

Remote working can be defined as a way of working at a location other than at LauraLynn using information technology (IT) to allow staff members to undertake work away from the organisation's premises. It applies to employees only and by specific request, volunteers. It does not apply to others who may perform work for LauraLynn such as agency workers.

The service has a Remote Working Policy (Ref No: 3.34) which all staff shall make themselves familiar with and ensure they adhere to the policy.

#### 5.6.1 General Good Practice

- LauraLynn will adopt a risk-based approach to management of remote workers. It will ensure that the work space is assessed from a health and safety perspective
- Staff will be sufficiently trained (commensurate with the level of risk involved) to assess their own work area and tasks and to highlight any issues that may require further controls. Display Screen Equipment: user awareness module is available to all LauraLynn staff in the HSeLanD platform. When required, Line Manager will provide the Display Screen Equipment risk assessment form for the staff to complete (self-assessment).
- All Line Managers must complete the Display Screen Equipment: Assessor Module on HSeLanD Platform
- Where staff are required to work from home and require office equipment in their home, arrangements shall be put in place to transfer the same
- Any accident or incident that takes place outside of LauraLynn premises while the staff member is conducting normal work duties, should be reported to their manager immediately
- If a member of staff suffers from any medical issue that would influence their remote working arrangements, they should provide evidence that they are fit to work alone. Alternatively, LauraLynn may engage the services of its occupational health provider to make a determination on their fitness to work in these circumstances.

#### 5.7 Workplace Violence

Workplace violence is the expressed, implied or actual threat of violence. This includes any incident where staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, health or well-being. It includes but is not limited to verbal abuse, physical abuse and creating a hostile or threatening work environment. The effect of violence can immediately result in psychological or physical harm and may have long-term effects.

#### 5.7.1 General Good Practice

During an incident staff should be aware to immediately take the following steps:

- Minimise personal risk by removing yourself from proximity of violence
- Leave the area if necessary, and if safe, assist others in doing the same.

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- Seek help by contacting relevant emergency service, e.g. Gardai, ambulance
- During the management of an incidence of violence, staff are not expected to subject themselves to any unnecessary risks or cope alone.
- The incident is reported to the Head of Department and soon is reasonably practicable

#### 5.8 Fire

The Fire Safety Program incorporates arrangements for:

- The prevention of an outbreak of fire through the establishment of day-to-day fire prevention practices
- The instruction and training of staff and Fire Wardens
- The holding of fire and evacuation drills
- The maintenance of escape routes
- The provision of adequate fire protection equipment and systems
- The inspection and maintenance of the fire protection equipment and systems
- Liaising with the Fire Authorities
- Maintenance of a Fire Safety Register

All staff are required to complete the mandatory fire training. It is available on the LauraLynn online training portal. Fire drills will also include table top exercises to ensure everyone knows how to respond in the event of a fire.

All information in relation to the evacuation plan for the Service and the roles and responsibilities for the emergency response team are contained in the Service's, Fire Policy Evacuation Policy and Emergency Management & Business Continuity Plan on SharePoint.

#### 5.8.1 Means of Escape in Case of Fire

All persons who work in a building should be familiar with the route of all means of escape from their normal workplace without having to find a key. In some instances, due to security or safety reasons some doors may have to be kept locked. Such doors may be fitted with normal locks or have key pad facilities or have some form of a special device and staff should be familiar with the means of opening these doors No person or equipment will obstruct a means of escape. Fire Exit routes and doors must never be obstructed. No combustible material should be stored in escape routes.

#### 5.8.2 Fire Detection and Alarm System

The fire detection system will be tested weekly by Facilities department and records will be reviewed bimonthly by the Quality, Safety and Risk Officer. If not working, immediate action will be taken. The following details will be entered in the Fire Register:

- Causes of all alarms (genuine, practice, test etc.)
- Any faults that develop
- Any period of disconnection

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- Nature of work (inspection, maintenance or test)
- Any further action required
- Name of person responsible

It is important to note that each individual call point (Break glass unit or fire panel) must be tested at least once in every period of 12 months by the facilities department/Designated Contractor.

#### 5.8.3 Emergency Lighting

All departments and buildings are provided with adequate means of emergency lighting to:

- Facilitate the means of escape from the building during any interruption of the general lighting system
- To indicate clearly a route to a protected doorway
- To allow safe movement to the exits from the building

#### 5.8.4 Fire Drill

The Fire Evacuation Drills that take place within the Service are as follows:

- o Quarterly day & night time fire drills per unit incorporating restaurant and staff admin offices
- Annually Table top exercise
- The principle of evacuation drill is to act as a practice run for a real evacuation
- It is critical that all staff, visitors, contractors, volunteers and service users comply with and are evacuated during an evacuation drill
- The purpose of a fire alarm is to train ourselves to promote a natural reaction to a fire alarm signal and evacuate without seeking further information. If previous evacuation drills have not been conducted, the initial drills should receive prior announcement and extra supervision. When staff becomes aware of procedures and circumstances permit, the drills should not be announced and additional criteria added such as locating a telephone, closing off an escape route, shutting off plant or machinery and varying the times of drills. In premises which are operational overnight a number of night drills should be conducted
- Following a fire drill the report form should be completed in which the results of the drill can be recorded to determine any aspects of fire safety which can be addressed and upgraded
- It should be remembered during evacuation drills that time, although playing an important function, is not a key
  element of an evacuation drill. The main aim is to ensure a SAFE and RELIABLE means of escape ensuring
  ALL persons are evacuated. It is important to emphasize the importance of closing all doors as each area is
  evacuated
- A table top exercise is a disaster preparedness activity that takes participants through the process of dealing
  with a simulated fire scenario. A table top exercise is discussion-based and not only helps participants
  familiarize themselves with the response process, but enables the QRS and Facilities department to gauge
  the effectiveness of the organization's fire response practices. Following a table top exercise, the report form
  should be completed in which the results of the table top exercise can be recorded to determine any aspects
  of fire safety which can be addressed and upgraded

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Each child/adult shall have a Personal Emergency Evaluation Plan (PEEP) that will identify their requirements during evacuation. The primary objective of a PEEP is to provide the children and adults with a personal evacuation plan, based on their needs, so as to prevent or minimize injury in the event that an emergency evacuation is needed (www.hsa.ie).

#### 6 Appendices

- 6.1 Appendix 1: On-line Incident Reporting Form: Incident Report Form
- 6.2 Appendix 2: Pregnancy Risk Assessment Form: HS12 LL Pregnant Employee Risk Assessment Form Rev2.pdf
- 6.3 Appendix 3: Risk Assessment Form Template: Risk Assessment Form.docx
- 6.4 Appendix 4: Organisational Risk Assessments Organisational Risk Assessment
- 6.5 Appendix 5: First Aid Bag Checklist



#### First Aid Bag Checklist

L 1'					(*To be check	ed on the 1st of	f every month)
Location:							
Date:							
Item	Minimum Quantity	Quantity	Quantity	Quantity	Quantity	Quantity	Quantity
Adhesive plasters	20						
Sterile eye pads	2						
Individually wrapped triangular bandages	6						
Safety pins	6						
Individually wrapped, sterile, unmedicated wound dressings medium	2						
Individually wrapped, sterile, unmedicated wound dressings large	6						
Individually wrapped, sterile, unmedicated wound dressings extra large	3						
Individually wrapped disinfectant wipes	20						
Paramedic shears	1						
Pairs of examination gloves	10						
Sterile water	1x250mls						
Pocket face mask	1						
Water-based burns dressing small (10x10cms)	1						
Water-based burns dressing large	1						
Crepe bandage (7 cm)	2						
Tag Serial Number							
	Signature						

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