



Health and Safety Policy

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Practice Manager Name:	Maiara Ban
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Description	Related Key Line of Enquiry				
	Safe	Effective	Caring	Responsive	Well-Led
S1 - What systems, processes and practices are in place to ensure all care and treatment is carried out safely?	✓	■	■	■	■
S2 - How are lessons learned and improvements made when things go wrong?	✓	■	■	■	■

Policy Created on

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CONTENTS

1. Purpose	4
2. Scope	4
3. Policy	4
4. Procedure	4
Organisation and Responsibilities	4
Executive	4
Safety Officer	4
RIDDOR 2013 Reporting Requirements	5
Practice Manager (where this differs from the Registered Manager).	6
Supervisors	6
Employees	7
Administrative Arrangements	7
Risk Assessment	7
Reporting Accidents	7
First Aid	8
Fire	8
5. Organisation Code of Safe Practice	8
Good Housekeeping – General	8
Good Housekeeping – Offices	8
Electrical Equipment	9
Moving and Handling	9
Transmittable Diseases	9
Infection Control	9
Causes of Infection	10
Prevention of Cross-Infection	10
Notifiable Diseases	10
General Rules to Prevent the Spread of Infection	11
Staff Skin Awareness	12
Staff Sickness	12
Skin Infections	12
Blood Borne Viruses	13
Emergency Situations	13
COSHH (Control of Substances Hazardous to Health)	14

Safety Rules for the Use of Household Cleaning Agents	14
Safe systems of work	14
Safe Systems of Work Table (page 1)	15
Working at heights/reaching etc:	16
Employees and other workers on site will:	16
Smoking	16
Floors	17
Stairs	17
Lighting	17
Windows	17
Doors	17
Lifts	17
Gas	17
6. Health and Safety: Grievance Procedure	17
7. Health and Safety Policy, Review and Approval Form	18

1. Purpose

The purpose of this policy is to provide and maintain safe and healthy working conditions, equipment, and systems of work for all staff members, as well as to ensure the necessary information, training, and supervision to achieve this. We also recognize our responsibility for the health and safety of others who may be affected by our work activities.

The practice's infection control policy complements this policy to ensure compliance with statutory regulations and quality standards. Furthermore, this policy ensures that the organization, its employees, and others experience a safe environment and that statutory obligations are continually met.

2. Scope

This policy applies to all employees, contractors, patients, and visitors to ODL City Dental Clinic and its premises and to all premises where its staff work.

3. Policy

ODL City Dental Clinic recognises that it has a responsibility to ensure that reasonable precautions are taken to provide and maintain working conditions that are safe and healthy and comply with all statutory requirements and codes of practice relating to the organisation's particular activities.

All dentists recognise that they have a duty of care to ensure that infection control procedures are followed at all times, and that the Registered Manager will ensure that all Practice staff are educated to this aim. Failure to implement processes which can prevent cross-infection may lead to professional claims of serious misconduct.

The Practice as a whole is responsible for ensuring that there are effective arrangements in place for infection control.

ODL City Dental Clinic will, so far as is reasonably practicable, pay particular attention to:

- The provision and maintenance of plans and systems of work that are safe and healthy;
- Arrangements for ensuring safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances, with particular attention being given to infection control;
- The provision of such information, instruction, training and supervision to ensure the health and safety at work of employees and others;
- Control of the place of work, keeping it in a safe state;
- The provision of a safe means of access to and egress from the place of work.
- This policy will be reviewed at least annually.

4. Procedure

Organisation and Responsibilities Executive

- Is responsible for safety in ODL City Dental Clinic and will monitor the safety policy regularly.
- Will be sufficiently appraised of health and safety matters to ensure that sufficient resources are available to provide any health and safety equipment, clothing, information and training for employees in order (as far as is reasonably practicable) to achieve and maintain a high standard of safety proficiency.

Safety Officer

The Safety Officer is the Practice Manager. The responsibilities of the Safety Officer are to:

- Maintain safety records;
- Investigate accidents;
- Provide accident statistics;
- Keep a brief watch on changing safety legislation.

- The Safety Officer reports directly to the Registered Provider.
- The Safety Officer will carry out full investigations of accidents to prevent future occurrences.
- The Safety Officer is responsible for ensuring that the organisation's obligations with respect to assessment, control and monitoring of hazardous substances are met.
- The Safety Officer is responsible for the recording of accidents in accordance with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013), by:
 - Ensuring that the Accident Reporting Policy and Procedure is followed, and that all accidents are recorded, using the form attached to that policy.
 - Ensuring that all accidents which result in absence from work for more than seven days (not including the date of the accident) are reported within 10 days to the Health and Safety Executive.

RIDDOR 2013 Reporting Requirements

Reportable incidents under RIDDOR 2013 are:

- Death and injuries where:
 - The accident is work-related;
 - It results in an injury of a type which is reportable.

The types of reportable injuries are:

- Death
- Specified injuries, which are defined by the HSE as:
 - Fractures, other than to fingers, thumbs and toes;
 - Amputations
 - Any condition likely to result in permanent loss of sight or visual impairment;
 - Any crush injury to the head or torso causing damage to the brain or internal organs;
 - Serious burns (including scalding) which:

- Cover more than 10% of the body;
- Cause significant damage to the eyes, respiratory system or other vital organs.
- Any scalping requiring hospital treatment;
- Any loss of consciousness caused by head injury or asphyxia;
- Any other injury arising from working in an enclosed space which:
 - Leads to hypothermia or heat-induced illness;
 - Requires resuscitation or admittance to hospital for more than 24 hours.

The following occupational diseases are reportable:

- Carpal tunnel syndrome;
- Severe cramp of the hand or forearm;
- Occupational dermatitis;
- Hand-arm vibration syndrome;
- Occupational asthma;
- Tendonitis or tenosynovitis of the hand or forearm;
- Any occupational cancer;
- Any disease attributed to an occupational exposure to a biological agent.

Dangerous occurrences that require reporting are, for example:

- The collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- Plant or equipment coming into contact with overhead power lines;
- The accidental release of any substance which could cause injury to any person.

For full details of reporting requirements, go to the HSE website at: <http://www.hse.gov.uk/riddor/reportable-incidents.htm>.

Contacts for the HSE, including for online reporting are at: <http://www.hse.gov.uk/contact/contact.htm>.

Practice Manager

The Practice Manager is responsible for providing leadership and promoting responsible attitudes towards health and safety.

The manager will:

- Ensure that each new team member is given induction training, including the precautions and procedures appropriate to their specific jobs. All new members of staff will be shown the location of first aid boxes, fire exits and fire-fighting equipment;
- Ensure that all subordinates are aware of the health and safety policy;
- Keep up to date with health and safety matters applicable to the operations of the organisation;
- Investigate all accidents with the assistance of the Safety Officer, with a view to prevention of a further occurrence;
- Ensure that good housekeeping standards are applied;

- Review periodically all new and existing equipment with reference to mechanical and operational safety and, in particular, the location of all equipment bearing in mind all health and safety factors;
- Carry out regular safety checks and audits.

Supervisors

Supervisors have the responsibility to provide leadership and to promote responsible attitudes towards health and safety. Supervisors must ensure that all tasks carried out in their sections are performed with the utmost regard for the health and safety of all those involved, and all accidents must be reported immediately to the Practice Manager.

Particular regard will be paid to:

- Equipment and its usage to ensure that it is safe and do not endanger health;
- Provision of safety arrangements for the handling, storage and movement of materials, equipment and substances;
- Supplying sufficient information, instructions, training and supervision such as to enable employees to avoid hazards and contribute positively to their own health and safety at work;
- Regular inspection of equipment such as lighting, passageways, fire alarms, fire escapes, fire extinguishers, first aid facilities and work practices, to ensure their efficiency and maintenance.

Staff members

All staff members have a responsibility to do everything they can to prevent injury to themselves, their fellow employees and others affected by their actions or omissions at work.

They are expected to follow company procedures, in particular to report any incidents which have or may have led to injury or damage. Negating this responsibility can lead to prosecution for the Health and Safety Executive.

Any staff member facing a conflict between the demands of safety and their job should raise the matter immediately with the Supervisor.

Administrative Arrangements

The following statements are an overview, and most areas for health and safety management are amplified by further practice policies and procedures.

Risk Assessment

- The Safety Officer will regularly review all areas in use by the organisation, or in which its workers work, to:
 - Identify risks;
 - Assess the risk;
 - Evaluate the risk;
 - Eliminate the risk where appropriate;

- Introduce control measures to reduce risks, to a reasonable level, where appropriate;
 - Develop or locate, and arrange delivery of appropriate training to reduce risk, to a reasonable level, where appropriate.
- The Safety Officer will carry out a generic risk assessment whenever workers:
 - Begin work in a new area.
 - Begin work in a new building, or building type, in an existing area.
 - Have or raise an issue in an area or building where they are already working.
 - The Safety Officer will carry out a risk assessment on new equipment brought into the establishment.

Reporting Accidents

- In the event of an accident causing injury, you must ensure that the injured person is being cared for and send immediately for a supervisor or first-aider.
- DO NOT MOVE THE INJURED PERSON.
- Report the full details to the Practice Manager, who will record the incident in the accident book.
- The accident will be reported to the inspecting authority as and when necessary.
- Any “near miss” incident should also be reported to your immediate supervisor, who will be responsible for making a report to the Practice Manager.
- All accidents will be investigated by the Practice Manager.
- A report will be made to the Registered Provider, via the Management Meeting, who will ensure that necessary action is taken to prevent recurrence.

First Aid

- During the induction programme, staff members will be shown the location of the nearest first aid box to their work area.
- The organisation will ensure that sufficient staff members are trained as first aid specialists to provide coverage on all shifts.

Fire

- Fire exits must be kept clear from obstruction.
- All staff members must know their evacuation route and assembly point in case of fire.
- **IF YOU DISCOVER FIRE:**
 - Immediately use the nearest fire alarm call point.
 - Leave the building and go to the nearest assembly point.
- **IF YOU HEAR THE FIRE ALARM:**
 - The senior person on duty will be responsible for calling the Fire Services.
 - Report immediately to the staff assembly point, which is displayed by the fire alarm panel in your building.
- **DO NOT USE THE LIFT.**
- **DO NOT DELAY FOR PERSONAL BELONGINGS.**
 - Follow the instructions of the person in charge, who is fully in charge of all staff and persons on the premises until the Fire Service arrives.
 - If told to leave the building, do not re-enter the building until instructed by your senior supervisor or

the Fire Service.

5. Organisation Code of Safe Practice

Good Housekeeping – General

- Undue hurrying and forgetfulness cause many accidents. Do not run down steps. Use handrails going up or down stairs.
- Watch out for someone coming round a blind corner or opening doors quickly.
- Never read or check your mobile phone while walking.
- Ensure that floor areas are well-lit and kept clear of obstruction.
- When floors are sprayed or washed, the area must be covered by a visible wet floor sign until the area has been dried. After the area has dried, the sign must be removed to store as soon as possible.

Good Housekeeping – Offices

- Leaving a lower filing drawer open can cause many trips and falls. Please make sure they are closed.
- Electrical, computer and telephone cords must not be allowed to lie uncovered on the floor and should be taped down, since they are major tripping hazards.
- Spilled coffee or soft drinks, tracked-in rain, leaves or snow should be cleaned immediately.
- Pointed objects such as pencils, pens, letter openers, files and the like must be used carefully to avoid puncture wounds.
- Horseplay, including throwing paper clips, shooting rubber bands, tossing objects out of windows, is unacceptable behaviour, and may be the subject of disciplinary procedure.

Electrical Equipment

- Electrical equipment is normally safe, provided it is properly installed and regularly monitored.
- Always remember that water and liquids are conductors of electricity, and be aware that their association with faults caused by, for example, damaged cables, flexes, plugs and sockets, the overloading of circuits and fuses, etc. would make the shock more severe.
- Therefore you should:
 - NEVER touch electrical equipment with wet hands, move any portable electrical equipment without disconnecting it from the mains, make electrical repairs or do other electrical work unless you are an authorised person.
 - KEEP electrical supply cables and flexes away from wet areas or from where they will be damaged by being walked over or knocked when moving equipment about.
 - ALWAYS switch off all equipment when not required, except for continuous operation;
 - Disconnect electrical equipment at night by removing the plug from the socket, again unless continuous operation is necessary and/or instructed otherwise.
 - Report defective equipment to the Practice Manager.

Moving and Handling

- Staff must not carry out moving and handling operations unless the operation has been assessed for risk, an opinion has been formed and recorded by an appropriate person, a recommended handling technique has been identified, and the technique has been communicated to all staff.

- Moving and handling form part of the induction training where general guidelines are given on preventing back injury and the importance of risk assessment of both individual lifting/handling operations and environmental consideration.
- Staff who find themselves alone with a patient who has been assessed as requiring two people to lift/move should never attempt this operation alone.

Transmittable Diseases

When performing hands-on personal care with patients, full protective measures (gloves, aprons etc) should be taken in order to eliminate any risk of cross-infection.

Infection Control

Infection control training is incorporated in induction training.

Causes of Infection

Bacteria - Unicellular microorganisms, are susceptible to antibiotics (to varying degrees);

Worms - Not always microscopic in size, but pathogenic worms do cause infection and can spread from person to person.

Viruses - Smaller than bacteria, but not susceptible to antibiotics. A few anti-viral drugs are active against some viruses. They grow inside the cells of the body and can survive outside the body for a limited amount of time.

Pathogenic Fungi - Can be either moulds or yeast. A common example of a mould would be *Trichophyton rubrum*, which can be a cause of ringworm. A common example of a yeast is thrush, caused by *Candida albicans*.

Prions - Infectious misfolded protein particles, such as the prion causing (New) Variant *Creutzfeldt-Jakob Disease*, a degenerative neurological disorder.

Protozoa - Microscopic organisms larger than bacteria. Free-living and non-pathogenic protozoa include amoebae and paramecium. A good example would be *Giardia lamblia* which can cause symptoms of diarrhoea.

Prevention of Cross-Infection

- To prevent cross-infection, ensure that:
 - Any infection a patient has does not spread to others;
 - The patient is not exposed to potential sources of infection in his/her surroundings;
 - Others do not bring infection to the Practice.

Notifiable Diseases

- The Health Services and Public Health Act 1968, the Public Health (infectious Diseases) Regulations 1988 and subsequent amendments require certain infectious diseases to be notified to the 'proper officer' of the Local Authority.
- The responsibility for the notification of the listed disease(s) rests with the dentist attending the patient.

- The Local Authority has the power to stop work in order to prevent the spread of infection:
- Diseases notifiable under the Public Health (Control of Disease) Act 1984: Cholera, Plague, Smallpox, Relapsing Fever, Typhus, and Food Poisoning.
- Diseases notifiable under the Public Health (Infectious Diseases) Regulations 1988:
 - Acute encephalitis, acute poliomyelitis, anthrax, diphtheria, dysentery, leprosy, leptospirosis, malaria, measles, meningitis, meningococcal, septicaemia, mumps, ophthalmia, neonatorum, paratyphoid fever, rabies, rubella, scarlet fever, tetanus, tuberculosis, typhoid fever, viral haemorrhagic fever, viral hepatitis, whooping cough and yellow fever.
- Most outbreaks will present non-specific symptoms; serious sepsis or epidemic wound infections.
- Any member of staff suspecting an outbreak of the notifiable disease should make their suspicions known to the Practice Manager who will inform the Registered Provider and “proper officer” of the Local Authority.

General Rules to Prevent the Spread of Infection

- All staff should adhere to the following:
 - Avoid infection by careful control of coughing and sneezing, i.e. use tissues/handkerchief.
 - Hand washing using liquid soap containing a disinfectant.
 - Regular use of emollient hand cream to prevent skin from drying; Use of disinfecting hand rubs.
 - Gloves must be worn for all clinical procedures and treated as single use items. They must be put on prior to contact with the patient and removed as soon as the clinical treatment is complete. The gloves must then be disposed of like clinical waste.
 - Staff should not touch areas such as computer keyboards, mouse, air-conditioned remote controls and light switches with contaminated gloves.
 - Protective glasses, ideally with side protection, should be worn by operators and close support clinical staff, to protect their eyes. Patient's eyes must also be protected. Masks or visors are recommended for all operative procedures and should be changed after every patient.
 - Removal of jewellery and watches.
 - Keep hair short or tied back.
 - Wear clean uniform clothing, and do not travel to or from work in that clothing. Long sleeved gowns/uniforms should be avoided as they are more likely to lead to contamination. Short sleeved gowns/uniforms are more suitable, allowing the forearms to be washed as part of the hand washing routine
 - Report any signs of infection to the appropriate person.
 - Keep toilets scrupulously clean using correct disinfectant agents.
 - Decontamination of instruments should, where possible, be completed away from the surgery room, in a space containing the ultrasonic bath(s), autoclave(s), instrument washer(s), sinks and a separate hand basin. If instruments are cleaned manually before sterilisation, then the sink must be deep enough to ensure that the instruments are fully within water during cleaning to minimise any splashing.
 - All instruments, whether used for treatment or not, should be considered contaminated and therefore cleaned and sterilised following usage. Follow all instructions issued by the

manufacturer on the decontamination process.

- Clean and dirty areas within the surgery must be clearly defined.
- No eating should take place inside the clinical rooms
- The surgery should be well ventilated.
- Floor coverings should be impervious and non-slip. Carpeting must not be used.
- Work surfaces should be impervious and easy to clean and disinfect.
- All water lines and air lines should be fitted with anti-retraction valves to help prevent contamination of the lines.
- All waste within the Practice should be segregated into clinical and non-clinical waste, with the relevant procedures followed at all times.
- Blood spillages should be dealt with immediately.
- All clinical staff should be vaccinated against common illnesses. All staff involved in clinical procedures must be vaccinated against Hepatitis B.

Staff Skin Awareness

- All cuts and abrasions should be covered with a waterproof adhesive dressing. Early detection and prompt reporting of infection is particularly important.
- Any staff member with a skin infection must take advice from a doctor before continuing to work. All skin infections must be reported to the Practice Manager.

Staff Sickness

Diarrhoea and vomiting workers should not operate, nor report sickness. Should the condition persist it may be necessary to provide a specimen of faeces and not return to work until medical clearance by a GP is given. It cannot be emphasised strongly enough that young children and the elderly are particularly vulnerable to infection, and every attempt should be made to minimise any risk of infection.

Blood Borne Viruses

- Any patient may be a carrier of a blood borne virus. There are blood-borne viruses other than hepatitis B, other hepatitis and HIV/AIDS. Appropriate precautions must therefore be taken with all patients and particularly with body fluids.
- Always assume that blood and other body fluids are infected. All accidents, facial, particularly eye, or wound contact with infected body fluids must be recorded as an incident.
- Accident avoidance measures should include common sense precautions to avoid accidents and injuries, particularly when using sharps, whether the patient is known to be infected or not. All accidents must be reported.
- Blood spillage procedure should be as follows:
- Cover the blood spillage with disposable towels, which are then treated with 10,000 ppm sodium hypochlorite solution or by sodium dichloroisocyanurate granules.
- Allow at least 5 minutes to pass before clearing away the paper towels. Dispose of as clinical waste.
- The dental healthcare worker who deals with the spillage must wear appropriate protective clothing, including household gloves, protective eyewear and a disposable apron. In cases of extensive floor spillage, protective footwear.

- Good ventilation is necessary.

Emergency Situations

In case of being faced with emergency situations such as relating to gas, electricity, water, fire or medical issues, stay calm, assess the situation, and raise alarm by contacting 999, depending on the emergency. Emergency situations will form part of your induction programme.

COSHH (Control of Substances Hazardous to Health)

- For COSHH purposes, a material is deemed to be hazardous if one or more of the following criteria are met;
 - Substances defined as being highly toxic, poisonous, corrosive or irritant;
 - Substances for which maximum exposure limit (MEL) is specified in the COSHH schedule; A micro-organism hazardous to health;
 - Substances airborne as concentrations of dust;
 - Any other substances, which create comparable hazards.

Safety Rules for the Use of Household Cleaning Agents

- Handle all household cleaning agents with care. Remember they contain powerful chemicals.
- Always wear protective clothing (overalls, rubber gloves).
- Always read the instructions on the label of the product to be used.
- If the drug is uncertain, or the chemical is thought to be in the wrong bottle, do NOT use it
- NEVER MIX chemicals, especially bleach and toilet cleaner.
- Make sure that the ventilation is adequate. DO NOT use chemicals in a confined space.
- NEVER SMOKE whilst using chemicals.
- Store all chemicals in a cool dry place after use.
- Store all chemicals out of reach of children but not on high shelves. Keep away from heat.
- NEVER place chemicals in other containers. If a container is broken, discard it with its contents.
 - AEROSOLS must be:
 - Kept away from heat;
 - Never punctured;
 - Never used near a naked flame or heat;
 - Avoid breathing the vapour;
 - Used in a well ventilated room.
- Be careful when throwing away chemicals. Be sure they are in a safe condition and that no one else will be harmed by them. Never throw away metal scouring pads with discarded batteries – they can smoulder and cause a fire.

IF AFTER USING HOUSEHOLD CHEMICALS WITHIN THE WORKPLACE A FEELING OF DROWSINESS OR OF BEING GENERALLY UNWELL DEVELOPS, CONTACT YOUR DOCTOR IMMEDIATELY AND THEN INFORM THE PRACTICE MANAGER.

Safe systems of work

To help give a better picture regarding the health and safety of staff in the work place, a list of the common areas where risks and hazards occur is shown below. It shows the areas/appliances that may present a hazard or risk, the types of accident/injury they may cause and the appropriate action that should be taken by dental practice staff.

Safe Systems of Work Table (page 1)

Area/Appliances which may be involved	Accident/Injury which may occur	Action/Procedure to be followed
<p>General layout</p> <p>including:</p> <p>Floors</p> <p>Floor coverings</p> <p>Stairs</p> <p>Steps</p> <p>Furniture</p> <p>Storage areas (cupboards)</p>	<p>The majority of injuries are caused by trips, slips and falls or by bumping into overhead cupboards, doors not being closed properly or using stools or chairs as steps, which may not be strong or stable enough to support one's weight.</p>	<p>Always be aware of uneven floors and loose fitting carpets/mats.</p> <p>Where floors are wet, or made wet by cleaning, place a "Wet Floor" sign covering the wet area to warn that the floor may be slippery. When the floor has dried, remove the sign.</p> <p>Make sure that routes are clear of anything which may cause trips or falling.</p> <p>Always close doors and clear away any tools after use.</p> <p>Report any danger area to supervisor. Record on the risk assessment.</p>
<p>Lighting</p>	<p>Any accidents or injury caused by not being able to see what you are doing properly.</p>	<p>Ensure adequate lighting before undertaking any task (especially at night time).</p> <p>Report and record poor lighting to the Practice Manager.</p>
<p>Ventilation</p>	<p>Can cause drowsiness and lack of concentration resulting in accident/injury. May cause inhalation problems, especially when dealing with dust of chemical cleaning agents.</p>	<p>Ensure adequate ventilation is possible before working with any material, which may cause breathing difficulties.</p> <p>Ensure heating is sufficient or not too hot before work is started. Always be aware that the patient may not feel as warm as you.</p> <p>Report and record any abnormality to the Practice Manager.</p>
<p>Windows</p>	<p>If left open can cause poor heat in the Practice. If pressure is used to open them, or if the glass breaks, it may also be broken glass or bad fittings which cause cuts.</p>	<p>Always ensure that windows can be closed once opened.</p> <p>Check for signs of broken glass or poor fitting.</p> <p>Ensure windows have restrictors in place from the 1st floor up to prevent persons falling from</p>

		windows.
Doors	<p>Could be bumped into if left open. May present with accident problems if not fully opened before trying to take someone or something through.</p> <p>Will present a fire hazard if not closed, causing burns or smoke inhalation.</p>	<p>Be aware of badly fitting doors and report to the supervisor. Make every effort to keep doors closed that don't need to be open.</p> <p>Keep doorways free from clutter to ensure a safe "walkway".</p>
Electrical safety Plugs Sockets Wiring	<p>If not properly installed and maintained will cause electric shock and/or fire.</p> <p>There may be overloaded sockets, poor wiring or wrong type of fittings used.</p>	<p>Any socket, wiring, plug or appliance should not be used if it appears faulty or does not work correctly.</p> <p>The Practice Manager should be informed immediately and a note placed on or near the plug, wiring or appliance to warn others. If fire should occur, switch off at the mains if possible. Deal with the fire if safe to do so or call the fire service.</p>
Portable appliances Fires, irons, vacuum cleaners, lamps, radios, stereos, TVs, videos, toasters, kettles. Any other portable electrical appliance.	<p>Injury caused by electric shock or fire. Inhalation of toxic fumes.</p>	<p>Always ensure that any appliance to be used is correctly wired and in good repair. Be aware of any kitchen appliance not being cleaned properly, e.g. toasters</p> <p>Switch off at the mains immediately if any fault is noticed. Notify the Practice Manager.</p>
Gas safety Fires Central heating Boilers Radiators.	<p>Injury caused through inhalation of gas due to leakage of gas from pipes or appliances.</p> <p>Risk of burns and scalds from poorly guarded flames or very hot central heating radiators</p>	<p>Check for any smell of gas and report to Practice Manager immediately if any is noticed. Always check that appliances are turned off correctly. Ensure that no clothes or other flammable materials are placed near naked flames. If a strong smell of gas is present when entering the Practice, make sure all doors are open wherever possible and do not switch on any lights or use a naked flame Contact the fire service immediately. Inform the Practice Manager of action taken. Always be aware of scalding burns caused by hot surface temperatures of radiators.</p>
Water temperature	<p>Scalds and burns caused by water being too hot.</p>	<p>Always be aware of the water temperature. Gently test the water temperature before using it.</p>

Working at heights/reaching etc:

- Avoid working at height where possible.
- Use work equipment or other measures to prevent falls where employees/other workers on site cannot avoid working at height.
- Where the risk of a fall cannot be eliminated, use work equipment or other measures to minimise the distance and consequences of a fall, should one occur.
- Risk-assess all situations whereby working at heights is unavoidable. Provide suitable training for those working at heights.
- Provide suitable equipment.

Staff and other workers on site will:

- Not work at heights without ensuring that the Practice Manager has authorised the action, after carrying out a risk assessment, and that the employee/other worker has been trained to work at height and has appropriate equipment for doing so.
- Not attempt to obtain items which are beyond their reach. If they cannot reach, they should get a ladder or stepping stool. Be sure that the ladder is in a safe condition.
- Not use chairs, open drawers, or any makeshift device for climbing.
- Not climb up the shelves themselves. They should not overreach on the ladder. It is safer to get down and move the ladder.

Smoking

Smoking is only allowed in designated areas.

Floors

- Floors must be kept free of obstruction.
- Spillages of fluids must be immediately mopped up, and wet floors clearly marked. Damage to floors must be reported immediately.

Stairs

- Stairs must be kept clear of obstruction.
- Inflammable materials will not be stored in a stairwell. Damage to stairs must be reported immediately.

Lighting

- Non-functioning lighting must be reported immediately.

Windows

- When windows to floors other than the ground floor are opened, the opening restraint mechanism, which is intended to ensure that the window will not open enough to allow a person to fall through, will be checked.

Doors

- Doors must not be obstructed from closing. Damage to fire doors must be reported immediately.

Lifts

- Damage to, or malfunction of, lifts must be reported immediately. Lifts will not be used during a fire alarm.

Gas

- Damage to gas installations, or a smell of gas, must be reported immediately.
- Cases of headache, unusual tiredness and muscular weakness experienced in rooms containing a gas appliance must be reported immediately.

6. Health and Safety: Grievance Procedure

This method applies only to issues, disagreements or complaints over occupational health and safety. In case of the above, the staff will refer the matter to the Practice Manager either orally or in writing.

If staff are dissatisfied with the outcome, or in the event of there being a real danger of death, serious injury or health risk and there is insufficient time to eliminate excessive danger, staff should immediately report to the Registered Provider who will investigate and determine what action should be taken.

After the investigation, the staff will be informed that either:

- The organisation has, so far as is reasonably practicable, eliminated the danger and staff must resume normal working; or
- The organisation does not consider that the matter constitutes a grave risk to health or safety, and staff must resume normal working; or
- The organisation will undertake further investigation and may, if necessary, obtain expert opinion.

Refusal to resume normal working when instructed will be a breach of organisation discipline. The matter will then be dealt with under the organisation's normal disciplinary procedure.

Date: May 2024

Next review: May 2025