Hand in Hand

FORMERLY KNOWN AS SHABBAT WALK

HEALTH AND SAFETY POLICY

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Date reviewed: September 2026

Reviewed by: Yitzi Posen

Date of next review: September 2028

Unit 1, Hawthorn Business Park, 165 Granville Road, London NW2 2AZ

Tel: 07506750023 | Email: office@hih.org.uk

Registered Charity No 1182698

1. OUR STATEMENT OF GENERAL POLICY

Hand in Hand gives practical and emotional support to vulnerable people in the Jewish community, including children with special educational needs and disabilities, older people, and people who are in hospital or housebound, through weekly visits from trained teenage volunteers. This policy is designed to meet our duties as an employer under the Health and Safety at Work etc. Act 1974 and related regulations.

1.1 Our aim is excellence in health and safety and Hand in Hand will accomplish this by continually seeking to improve our health and safety management system so that it meets with our vision, values and the expectations of those affected by what we do. We will ensure that our responsibilities for health and safety are clearly allocated, understood, monitored, fulfilled and that legal requirements will be regarded as the minimum standard to be achieved.

1.2 Hand in Hand recognises that complying with The Health and Safety at Work etc. Act 1974 and pertaining regulation is a legal requirement, not a matter of choice. We will act positively to minimise the incidence of all workplace risks and all activities will be carried out with the highest regard for the health, safety and welfare of our staff, volunteers, visitors and the public at large.

1.3 We are committed to providing the financial and physical resources necessary to ensure that a high standard of health, safety and welfare is achieved. We will empower our staff by providing high quality information, instruction, training and supervision to enable them to work safely and effectively and to ensure they are competent and confident in the work they carry out.

1.4 Hand in Hand will carry out and regularly review risk assessments to identify hazards and existing control measures; it will prioritise, plan and complete any corrective actions required to reduce risk to an acceptable level. Hand in Hand will also ensure that the premises we occupy and the equipment we provide meet with the minimum legal requirement.

1.5 We will actively consult with our workforce and nurture an open attitude to health and safety issues, encouraging staff to identify and report hazards and suggest innovative solutions so that we can all contribute to creating and maintaining a safe working environment.

1.6 This policy reflects our commitment to ensuring that health and safety at work is paramount to Hand in Hand and that effective health and safety actively contributes to our ongoing success. The successful implementation of this policy requires total commitment from all members of staff.

1.7 This policy will be reviewed every two years or in the light of legislative or organisational change.

1.8 Hand in Hand is striving to create a positive and inclusive working environment and culture, providing the conditions for individuals and teams to thrive and achieve the

highest standard of performance and service, where contributions are fully recognised and valued by all.

1.9 Hand in Hand is committed to supporting its employees, be this via learning and development or through more informal mechanisms such as the development of a productive and positive workplace culture.

1.10 Hand in Hand believes that all employees should have rewarding and worthwhile jobs, with the freedom and confidence to be empowered to raise health and safety concerns where appropriate. To do this, employees need to be trusted, empowered and actively listened to by those with whom they work and interact. Employees must be treated with respect at work, and be given the tools, training and support to work safely with opportunities to develop and progress.

2. SCOPE OF THIS POLICY

This Policy applies to Hand in Hand's office and to all working there, whether as an employee, volunteer, management representative or otherwise. Home visits and outings are covered by our Safeguarding Policy and Volunteer Handbook. All trustees, volunteers and staff members must be aware of this policy, and their actions must be bound by it.

The key elements of this policy are:

- The roles and responsibilities for Health and Safety in the organisation
- Assessing and Managing Risk for activities and premises
- Consult with staff on matters affecting their health and safety
- Implement emergency procedures
- Provide clear instructions and information to ensure staff and volunteers are competent to do their work
- Specific control measures that need to be implemented
- Incident reporting and record keeping

3. RESPONSIBILITY FOR IMPLEMENTING THIS POLICY

3.1 Overall and final responsibility for health and safety is that of Richard Denton, Chair of Trustees.

3.2 Day-to-day responsibility for ensuring elements of this policy are put into practice is delegated to the Health & Safety Manager Yitzi Posen.

3.3 All employees and volunteers are reminded of their legal duty to:

a) take reasonable care of their own health and safety and that of other people who may be affected by their work under the Health and Safety at Work, etc. Act 1974;

b) inform their employer of any danger to health and safety posed by a work activity under The Management of Health and Safety at Work Regulations 1999 (MHSWR);

c) inform their employer of any shortcomings in the employer's protection arrangements under MHSWR and;

d) co-operate with their employer's health and safety arrangements under the MHSWR.

4. ASSESSING AND MANAGING RISKS

Risk assessments identify measures to control risks during activities. Health and safety law requires us to assess risks and put in place proportionate control measures. The law also requires us to record details of risk assessments, the measures taken to reduce these risks and expected outcomes.

We need to record significant findings of the assessment by identifying:

- the hazards
- how people might be harmed by them
- what measures are in place to control/mitigate risk.

All risk assessments will be carried out by delegation of the Health and Safety Manager and reviewed at least annually, or earlier should the need arise e.g., following an incident, change to the activity etc.

In the event that a situation occurs that could present serious or imminent danger to any person whether they are a staff member, or other, the following procedure will apply:

- Planned work and/or activity for those that could be affected will cease
- The responsible person will instruct staff on necessary immediate action to be taken to reduce the danger if possible
- If this is not possible the location or activity will be cordoned off or access prevented until the danger has passed or the area can be made safe.
- Advice will be sought by the manager from relevant external sources as necessary

5. SAFE EQUIPMENT AND HANDLING

The H&S Manager will be responsible for:

- Carrying out an annual Health and Safety audit of the office.
- Identifying all equipment needing maintenance.
- Ensuring effective maintenance procedures are drawn up.
- Ensuring that all identified maintenance is implemented.
- Ensuring that PAT testing is carried out regularly.

He will report any problems found with equipment to the CEO, who will check that new equipment meets health and safety standards before it is purchased. Where any deficiencies or issues are identified by staff members, they should be flagged to the Administrator or the Health & Safety Manager for actioning.

6. INFORMATION, INSTRUCTION AND SUPERVISION

- The Health and Safety Law poster is displayed at the entrance.
- Health and safety advice is available from the H&S Manager.
- Supervision of young workers/trainees will be undertaken and monitored by the H&S Manager.
- Employees are advised regarding safe continuous use of Display Screen Equipment, and information regarding such use is displayed for easy access.

7. COMPETENCY FOR WORK AND TRAINING

7.1 All employees will be given health and safety induction training when they start work.

- Induction training will be provided for all employees by the H&S Manager.
- Training will be identified, arranged, and monitored by the Health & Safety Manager together with the CEO to ensure staff and volunteer competence and confidence in relevant roles and activities.
- Training records are kept on the computer system.

7.2 Staff will be consulted on matters affecting their health and safety.

Staff will be consulted routinely as health and safety matters arise and when a health and safety review is undertaken.

8. EMERGENCY PROCEDURES – FIRE AND EVACUATION

- The H&S Manager is responsible for ensuring the fire risk assessment is undertaken and implemented.
- We will make sure escape routes are well signed and kept clear at all times
- Evacuation plans are tested from time to time and updated if necessary.
- Fire extinguishers are maintained and checked by the managing agents every year.

9. FIRST AID

The Health and Safety Manager / CEO will be responsible for First Aid arrangements.

- The first-aid box is kept in the drawer under the sink in the washroom.
- All accidents and cases of work-related ill health are to be recorded in the accident book. The book is kept at reception.
- The H&S Manager is responsible for reporting accidents, diseases, and dangerous occurrences to the relevant authority.

10. RECORDING AND REPORTING INJURIES AND ACCIDENTS

10.1 Serious incidents, accidents and near-miss reporting

RIDDOR requires employers and others in control of premises to report certain accidents, diseases and dangerous occurrences **arising out of or in connection with work.** This includes incidents that sometimes result from activities and are reportable under RIDDOR. (See appendix) For incidents involving children and staff, the lead staff member who is present at the time of the incident or who is first on the scene of the incident must report the incident.

10.2 Incidents to children, users and other people who are not at work

The lists of specified injuries and diseases described in the appendix below only apply to employees. If a user injured in an incident remains at the activity, is taken home or is simply home for a number of days, the incident is **not reportable.**

To determine if an incident is reportable, the responsible person should consider whether the incident was caused by:

- a failure in the way a work activity was organised (e.g. inadequate supervision);
- the way equipment or substances were used (e.g. lifts, machinery etc); and/or
- the condition of the premises or equipment (e.g. poorly maintained or slippery floors, or badly maintained equipment); or
- the organisation had not provided adequate supervision, e.g. where particular risks were identified, but no action was taken to provide suitable supervision.

So, if for example, a child is taken to hospital after breaking an arm following a fall over a trailing cable, the incident would be reportable.

If a child is taken to hospital because of a medical condition (e.g., an asthma attack or epileptic seizure), this would not be reportable, as it did not result from the work activity.

There is no need to report incidents where people are taken to hospital purely as a precaution, when no injury is apparent.

10.3 Record Keeping of Incidents

We must legally keep records of:

- any reportable death, specified injury, disease or dangerous occurrence that requires reporting under RIDDOR.
- all occupational injuries where a worker is away from work or incapacitated for more than three consecutive days. These must be recorded in the accident book.

Records must be kept for at least three years after the incident.

Records must include: the date and method of reporting; the date, time, and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record will be kept in an accident record book.

The organisation will also keep a record in the accident record book of any first aid treatment given by first aiders and appointed persons.

This should include:

- the date, time, and place of incident.
- the name of the injured or ill person.
- details of the injury/illness and what first aid was given.
- what happened to the person immediately afterwards (for example went home, resumed normal duties, went to hospital).
- name and signature of the first aider or person dealing with the incident.

The information in the record book can:

- help the organisation identify accident trends and possible areas for improvement in the control of health and safety risks.
- be used for reference in future first-aid needs assessments.
- be helpful for insurance and investigative purposes.

In an emergency, the staff in charge have procedures for contacting the child's parent/guardian/named contact, or the next of kin of an adult, as soon as possible. It is also good practice to report all serious or significant incidents to the parents e.g., by sending a letter home with the child, or telephoning the parents.

11. INVESTIGATIONS

- The Health and Safety Manager is responsible for investigating accidents.
- The CEO is responsible for investigating work-related causes of sickness absences.
- The Health and Safety Manager is responsible for acting on investigation findings to prevent a recurrence.

12. APPENDIX: RECORDING AND REPORTING OF ACCIDENTS AND INCIDENTS

(including procedure for reporting to HSE, RIDDOR)

12.1 Policy Statement

We follow the guidelines of the Reporting Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) for the reporting of accidents and incidents. Child protection matters or behavioural incidents between children are NOT regarded as incidents and there are separate procedures for this.

12.2 Accidents

Our accident book:

- is kept safely and accessibly
- is accessible to all staff and volunteers, who know how to complete it
- is completed for all accidents
- is regularly reviewed to identify any potential or actual hazards

We report any accident that meets the RIDDOR requirements set out in 12.4 to 12.10 below to the Health and Safety Executive. This includes the death of any person, and any injury to a visitor or other person who is not at work and is taken directly from the scene to hospital for treatment. Reports are made online at **www.hse.gov.uk/riddor.**

12.3 Incidents

We meet our legal requirements for the safety of our employees by complying with RIDDOR (the Reporting of Injury, Disease and Dangerous Occurrences Regulations). We report to the Health and Safety Executive:

- any accident to a member of staff that results in death, a specified injury (see 12.8), or more than seven consecutive days off normal work (see 12.7); and
- any dangerous occurrences. This may be an event that causes injury or fatalities or an event that does not cause an accident but could have done, such as a gas leak.
- Any dangerous occurrence is recorded in our incident book. See below.

Our incident book:

- We have ready access to telephone numbers for emergency services, including local police. Since we rent premises we ensure we have access to the person responsible for dealing with emergencies including plumber, gas and electricity services.
- We keep an incident book for recording incidents including those that are reportable to the Health and Safety Executive as above.
- These incidents include:
    - break in, burglary, theft of personal or the organisation's property,

- an intruder gaining unauthorised access to the premises,
- fire, flood, gas leak or electrical failure,
- attack on member of staff, volunteers, or visitors on the premises or nearby,
- any racist incident involving staff, volunteers, or visitors on the organisation's premises,
- death on the premises, and
- a terrorist attack, or threat of one.

- In the incident book we record the date and time of the incident, nature of the event, who was affected, what was done about it - or if it was reported to the police, and if so a crime number. Any follow up, or insurance claim made, should also be recorded.
- In the unlikely event of a terrorist attack, we follow the advice of the emergency services with regard to evacuation and medical aid. The incident will be recorded when the threat is averted.

12.4 RIDDOR (Reporting Injuries, Diseases And Dangerous Occurrences Regulations 2013) Reporting Requirements:

These include:
- injuries and ill health involving employees,
- injuries involving children and other people not at work,
- dangerous occurrences

12.5 Who should report?

Incidents involving contractors working on premises are normally reportable by their employers. Contractors could be, e.g., builders, maintenance staff, cleaners, or catering staff.
If a self-employed contractor is working in premises and they suffer a specified injury or an over-seven-day injury, the person in control of the premises will be the Health and Safety Manager. (See HSE's RIDDOR web pages at www.hse.gov.uk/riddor for more detail on the reporting arrangements for self- employed people.)

12.6 Who do I report to?

Incidents that meet the RIDDOR reporting requirements can be made online to HSE which is the enforcing authority. There is a telephone service for reporting fatal and specified injuries only. Reporting details for out of hours incidents are available from HSE's out of hours web page at www.hse.gov.uk/contact/contact.htm.

12.7 Injuries and ill health to people at work

Under RIDDOR, the responsible person must report the following work-related accidents, including those caused by physical violence, if an employee is injured, wherever they are working:
- accidents which result in death, or a specified injury must be reported without delay
- accidents which prevent the injured person from continuing their normal work for more than seven days (not counting the day of the accident but including weekends and other rest days) must be reported within 15 days of the accident.

The responsible person must also report any case of a work-related disease, reportable specific injuries specified under RIDDOR, that affects an employee and that a doctor confirms in writing.

Detailed guidance about RIDDOR reporting and online reporting procedures at **www.hse.gov.uk/riddor/report.htm.**

Hand in Hand is also required to report any work-related deaths and certain injuries to self-employed people that take place while they are working at the premises.

12.8 Reportable specified injuries

These include:

- fractures, other than to fingers, thumbs, and toes.
- amputations.
- any injury likely to lead to permanent loss of sight or reduction in sight.
- 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; or
    - 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; or
    - requires resuscitation or admittance to hospital for more than 24 hours.

12.9 Physical violence

Some acts of non-consensual physical violence to a person at work, which result in death, a specified injury or a person being incapacitated for over seven days, are reportable. In the case of an over-seven-day injury, the incapacity must arise from a physical injury, not a psychological reaction to the act of violence.

Examples of reportable injuries from violence include an incident where a member of staff sustains a specified injury because a colleague or a member of the public assaults them at work. This is reportable because it arises out of or in connection with work.

12.10 Reportable occupational diseases

Businesses must report occupational diseases when they receive a written diagnosis from a doctor that their employee has a reportable disease linked to occupational exposure. *(See www.hse.gov.uk/riddor for details of the reporting arrangements for self- employed people.)*

These include:

- carpal tunnel syndrome.
- severe cramp of the hand or forearm.
- occupational dermatitis, e.g. from work involving strong acids or alkalis, including domestic bleach.
- hand-arm vibration syndrome.
- occupational asthma, e.g. from wood dust and soldering using rosin flux.
- tendonitis or tenosynovitis of the hand or forearm.
- any occupational cancer.
- any disease attributed to an occupational exposure to a biological agent.