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SMOKING SIGNS IN THE WORKPLACE

(For England. Does not apply to Scotland and Wales)

As I am sure you are all aware by now the smokefree regulations are due to come into force on 1st July 2007. As part of this the Smokefree (Signs) Regulations 2007 sets out the requirements for signage that will need to be displayed in the workplace and in vehicles.

What do I have to display?

The regulations state that a notice or sign must be displayed at each entrance to a workplace premises. It must be A5 in size. It must display the no-smoking symbol (a single burning cigarette enclosed in a red circle of at least 70mm in diameter with a red bar across it) and it must have the words "No smoking. It is against the law to smoke on these premises."

Does it have to be every entrance?

No, you do not have to display the worded sign if the entrance is from or via another smoke

free premises where the worded sign IS displayed. Also you do not have to display it if the entrance is "solely for persons to their place of work" and where a worded sign IS displayed at the main entrance.

HOWEVER, at these alternate entrances you **DO** have to display a no smoking sign which displays only the no-smoking symbol (70mm diameter).

What about vehicles?

Any person who operates a smoke-free vehicle has a duty to ensure at least one no-smoking sign is prominently displayed in each compartment of the vehicle. The sign must be

the no-smoking sign of at least 70mm in diameter.

What is a smoke free vehicle?

- A vehicle used to transport members of the public
- A vehicle used in the course of any paid or voluntary work if they are used by more than one person (even if the people carried are all smokers).

Private vehicles used for occasional voluntary work do not need to be smoke free.

Further info: www.smokefreeengland.co.uk

Barrow-in-Furness Legionella Outbreak

HSE has published the report of the investigation into the legionella outbreak in Barrow-in-Furness in August 2002.

Seven people died and 180 were diagnosed with Legionnaires' Disease which had its source at a council-owned arts and leisure centre in the middle of the town.

The outbreak was traced to the cooling towers serving the air conditioning system at the building. It is estimated that about 2500 people may have been affected in total, the majority with a mild form of the disease.

Barrow Borough Council and their Design Services Manager were convicted of offences under the Health and Safety at Work Act. The investigation report has as its aim the sharing of experience which could prevent another such tragedy elsewhere.

Until March 2001, water treatment of the cooling towers was properly managed as part of a wider contract for the maintenance of the heating and ventilating systems for the building. The contractor was replaced, and the new contract, which was significantly cheaper, did not specify water treatment services, but only maintenance and servicing of the heating and ventilating system.

The Design Services Group who let the contract did not compare and contrast the contract specifications or question the price

difference. Not did they establish the competencies of the contractor in this area. As a result, there was no water treatment, microbiological checks or system checks carried out after March 2001.

A heating and ventilation engineer brought his concerns to the Design Services Manager on two separate occasions, but no action was taken. There was a lack of risk assessments at the arts and leisure centre, as identified in a health and safety audit previous to this incident. Previous advice and warnings by

HSE about the risk had not been properly dealt with, and the senior management were not aware of the correspondence.

After two trials and an appeal, the council and their design Services Manager were cleared of manslaughter, but found guilty of offences under the HASAWA.

This horrifying incident will strike a chord with many managers. It is not believed by anyone that the Design Services Manager deliberately allowed such a severe risk to the public to develop. She simply did not know what the consequences might be of what may have appeared a simple decision based on cost savings.

CDM April '07 – What's new

Over the years since CDM was originally introduced in 1995, some positive benefits could be measured in terms of health and safety practice on site. These improvements can be seen in the steady reduction in reported accidents in construction in this time period.

Unfortunately, CDM had its clearest impact on the industry in the generation of pointless paperwork and increased costs. This was welcomed by few in the industry or amongst

the legislators.

The industry's response to CDM 94 was largely to evade the legislative requirements by means of a bureaucratic response which was primarily defensive. HSE has recognised that the regulations permitted or even encouraged this type of response, and this is a major reason for the extensive revisions in CDM 07. But will it work?

CONTINUED OVERLEAF

Aims of CDM 07

The stated aims of the revised regulations are to:

- Improve the planning and management of projects from the very start
- Identify hazards early on, so that they can be eliminated or reduced at the design or planning stage and the remaining risks can be properly managed
- Target effort where it can do most good in terms of health and safety
- Discourage unnecessary bureaucracy

No more Planning Supervisor

The disappearance of the unsuccessful Planning Supervisor role has been much discussed, but the PS is reborn in the new regulations as the CDM co-ordinator.

It is now specified that the CDM co-ordinator must be appointed early in the life of a project, as soon as initial design work has taken place. The appointment must come before significant detailed design work takes place, to allow the CDM co-ordinator to be involved in the health and safety aspects of the design work.

The client must appoint a competent CDM co-ordinator, and there is specific guidance on how competence can be assured.

The CDM co-ordinator must identify what information about the project will be relevant to health and safety in the construction phase and beyond, and must collect this information, requiring further investigative work if necessary, and supply it to the designers and to contractors (including the Principal Contractor) who have been appointed by the client. Only information relevant to the organisation receiving it shall be supplied, and it should be in a suitable form.

In keeping with the new title, the CDM co-ordinator must *co-ordinate* health and safety aspects of design work, and co-operate with others involved with the project. The co-ordinator must also facilitate good *communication* between clients, designers and contractors, and must liaise with the principal contractor regarding on going design.

The CDM co-ordinator also retains the responsibilities for advising the client on their duties, notifying the project and producing the health and safety file.

Competence

The client is obliged to CHECK the competence and resources of all appointees, although in practice, a key role for the CDM co-ordinator is to advise the client about the competence of designers and contractors that they appoint. Extensive and very useful guidance is provided on this, in particular a clear table of core criteria for demonstration of competence for contractors, CDM co-ordinators and designers. This is a clarification which will assist all parties. Contractors are now encouraged to produce an

information pack which addresses the core criteria for sending out to possible clients, removing the need for the completion of varying questionnaires from clients and potential clients.

The competence assessment is in two stages, the first stage a general assessment of health and safety management standards, and the second specific to the particular project.

The various contractor assessment schemes can assist in competence assessment for the client, and they will now have to assess to the core criteria. The responsibility though, remains with the client.

Client

The role of the client has not so much changed as been re-emphasised in the new regulations. The opportunity for the client to appoint a client agent to meet the CDM responsibilities has been removed. The project originator is the client at the start of the project, and must ensure that a CDM co-ordinator is appointed and the notification made during the early design and specification stage. These responsibilities cannot be transferred.

The client role and responsibilities can transfer from one party to another as the project proceeds, and where a Special Purpose Vehicle (SPV) is appointed to carry out detailed specification and delivery of the project, the SPV would normally take over the client role.

Whenever a transfer of the client role and responsibilities takes place, or when one client on behalf of several parties agrees to take the client role, then the details of the appointment must be clearly recorded and agreed by all parties.

Clients must:

- Ensure that designers, contractors and other appointees are competent
- Allow sufficient time for each stage of the project
- Co-operate with others concerned in the project
- Co-ordinate their work with others involved to ensure the safety of those carrying out the construction work
- Make sure there are reasonable management arrangements in place to ensure the construction work can be carried out safely
- Make sure that contractors have made arrangements for welfare facilities
- Make sure that any fixed workplace to be constructed will comply with the Workplace Regulations
- Make sure that relevant information is passed to designers, contractors and others who need it

These duties apply to every construction project, not just to notifiable projects.

The information to be passed to designers and contractors, known as the pre-construction information, must be provided to those

bidding for the work. It must be fully project specific, and not generic. It need not include obvious hazards likely to be apparent to those tendering for the work, for instance work at height. General warnings eg "asbestos may be present" will not meet the need - the client should carry out a survey, and provide specific information about the presence of asbestos on the site. Clients are expected to arrange all the necessary surveys, and provide this information.

Notifiable Projects - Client duties

For notifiable projects, the client must:

- Appoint a CDM co-ordinator early in the planning phase
- Appoint a principal contractor, preferably early enough for them to be involved in the design
- Ensure that the construction phase does not start until a suitable construction phase health and safety plan has been prepared by the Principal Contractor, and suitable welfare facilities are present
- Make sure the health and safety file is prepared and kept available

Designers

Designers are all those who contribute to the design of a project, although an architect or similar will often be the lead designer. Responsibilities, though, fall on all those who contribute to the design, possibly including designers of building services, contractors, those purchasing materials and those specifying materials. Anyone specifying or altering aspects of the design therefore has responsibilities. In an example given in the ACOP, a designer specified tilt and turn windows on a building to reduce risks to those cleaning them. The client overturned this on grounds of cost. The client then takes responsibility for this aspect of design.

Designers must consider risks to all those who will construct or use the structure, including those who will work in, clean, maintain and eventually demolish it. Members of the public who may be affected by the structure must be considered. The duty on the designer is to eliminate hazards, so far as is reasonably practicable, and to reduce risk associated with those hazards which remain.

Designers should:

- Make sure they are competent and adequately resourced to address the health and safety issues likely to be involved in the design
- Check that clients are aware of their duties
- Avoid foreseeable risks, and reduce risks that remain
- Provide adequate information about significant risks associated with the design
- Co-ordinate their work with that of others

These duties apply to all projects.

CDM continued

For notifiable projects, in addition, designers must:

- Ensure that the client has appointed a CDM co-ordinator
- Ensure that they do not start design work, other than initial design work, unless a CDM co-ordinator has been appointed
- Co-operate with the CDM co-ordinator, the principal contractor and other designers or

contractors as necessary, including the provision of information for the pre-construction information or the health and safety file

The information provided by the designer should be clear, concise and in a form suitable for users. It should cover risks not likely to be obvious to the contractors, unusual risks, or those likely to be difficult to manage. Notes on drawing is suggested, or written information with the design, but all this information must be project specific

Principal Contractors & Contractors

The requirement for the construction phase health and safety plan remains, together with a further emphasis on ensuring the competence of themselves and those they employ. New duties relate to ensuring that suitable welfare facilities are provided from the start of the construction phase, to securing the site, and to consulting the workforce. The ACOP also requires suitable site rules to be prepared and communicated.

Overview

Much changes, but much remains the same. What is different in the new ACOP is the emphasis, which is on co-operation and co-ordination of effort to reduce risk, and which focuses on practical risk reduction measures. The generic safety plan is out, but what it will be replaced by remains to be seen.

To summarise with a quote from the ACOP:

“The effort devoted to planning and managing health and safety should always be in proportion to

the risks and complexity associated with the project. When deciding what you need to do to comply with these Regulations, your focus should always be on action necessary to reduce and manage risks. Any paperwork produced should help with communication and risk management. Paperwork which adds little to the management of risk is a waste of effort, and can be a dangerous distraction from the real business of risk reduction and management.”

Health and Safety Advice for the Social Housing and Voluntary Sectors

SafetyWise Ltd is a specialist health and safety consultancy working with the social housing and voluntary sectors. We have been operating since 1999 and cover the UK.

Our approach is based on a good knowledge and understanding of our sectors, and results from much experience of what is most effective in these sectors.

Our newsletter is produced every two months, and focuses on legal changes and developments in good practice relevant for social housing and voluntary organisations. We also provide an email update service, which you can sign up for on our website. There is no charge for these services.

For our clients, we also offer telephone and email advice and support, without additional charge.

Our expertise is in finding the most appropriate route to compliance with the health and safety requirements for the individual organisation. This means that we will help to build good practice in health and safety into the existing management practices of the organisation. We aim for excellence in health and safety practice, integrated into the rest of the management systems.

We therefore do not use any template or generic documentation. When we help an

organisation to develop systems or policies, the systems will be those of the organisation, not imposed from outside.

For some clients, we will have close ongoing involvement, and work with many individuals in the organisation on different aspects. For other clients with in house competence, our involvement may be limited to audit and review. We charge a simple day rate which is always the same.

TYPICAL SERVICES

- Health and safety audit
- Systems and policies development
- Risk assessment support and mentoring
- Training
- Specialist risk assessment including fire
- Planning supervision and construction services
- Contractor vetting and monitoring
- Monitoring and review

We are aiming to provide a one stop shop for our clients' health and safety requirements, and will therefore be offering fire, first aid, food safety, personal safety and manual handling training during the coming year, as well as developing our construction services to support responsive repairs, planned maintenance and development activities.

FIRE RISK ASSESSMENT

Our first step was to undergo thorough training ourselves in the requirements of the Fire Safety Order, so that we can speak authoritatively. We have also spent time developing an approach which meets the new requirements and works for our client base.

Let us help you to obtain practical benefits from the new requirements - that does not mean a few more files on shelves and a large invoice!

- We'll do your fire risk assessments in close conjunction with the responsible managers and help them put in any new systems required
- We'll train your managers and surveyors to handle the fire risk assessment process in house
- We'll support your nominated responsible people for fire risk assessment and monitor the quality of the work they do



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