

# Safety Statement

of

**coolmine**  
therapeutic community

**Coolmine House,  
19 Lord Edward Street,  
Dublin 2**

Phone: 01 6794822

Prepared by:



Unit 4B, Red Cow Business Park,  
Clondalkin,  
Dublin 22.

**Safety Statement  
Of  
Coolmine Therapeutic  
Community,  
Lord Edward Street**

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Prepared By: Olive Safety

To : Amy Blake

Position: General Manager

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H&S Consultant: Olive Safety

Date: April 2014

# SAFETY STATEMENT

	Prepared/Amended by:	Accepted by:
Original	Olive Safety	
Revision 1		
Revision 2		
Revision 3		

**Prepared by Olive Safety**

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# 1 Introduction

This safety statement was prepared with the assistance of Olive Safety in April 2014 for Coolmine Therapeutic Community. The risk assessments and safety statement reflect the prevailing risks observed on the date of the audit in question and the risks are reflected in the safety statement. The safety statement also takes account of the documentation that was available for inspection on the day of the audit. It is strongly advised that this statement is revisited annually as part of management review of health and safety within the Project or where processes or material risks change i.e. a new system of work or new chemicals are introduced into the Project.

## **Mission Statement**

*Coolmine Therapeutic Community believes that everyone should have the opportunity to overcome addiction and lead a fulfilled and productive life.*

## 2 The Safety Statement

The *Safety, Health and Welfare at Work Act, 2005* requires Coolmine Therapeutic Community to prepare and have available for its employees a safety statement setting out its policy on safety. In accordance with Section 19 – Hazard Identification and Risk Assessment, of the *Safety, Health and Welfare Act, 2005*, Coolmine Therapeutic Community in consultation with Olive Safety has prepared this Safety Statement.

The safety statement is based on the identification of the hazards and an assessment of the risks encountered in our Project. The safety statement will outline the arrangements to be made and also the resources provided for ensuring the Safety, Health and Welfare of all our employees. It will specify the duties as per the Safety, Health and Welfare at Work Act 2005, with regard to employees, management and their respective responsibilities.

The General Manager of Coolmine Therapeutic Community recognises the paramount importance of safety, health and welfare, to all its employees, in the successful conduct of its activities. This Safety Statement, in accordance with the *Safety, Health and Welfare at Work Act, 2005*, outlines the policy of Coolmine Therapeutic Community for ensuring so far as is reasonably practicable, the Safety, Health and Welfare of its employees, the public, contractors and visitors. The Safety Statement sets out an action programme for Coolmine Therapeutic Community in safeguarding the Safety, Health and Welfare of employees whilst at work.

Coolmine Therapeutic Community is committed to complying with the requirements of the ***Safety, Health and Welfare at Work Act, 2005, Safety, Health and Welfare at Work (General Application) Regulations 2007***, and all other statutory requirements, Codes of Practice and National Standards. This Safety Statement is available to and will be brought to the attention of our employees, contractors and to others who may be affected by factors addressed in its contents. The Safety Statement will be updated as necessary in order to ensure that it remains appropriate and applicable to the places, people and activities for which it has been written.

***It is important that you read this carefully and understand your role in the overall arrangements for Health and Safety at Coolmine Therapeutic Community***

### Circulation

Name

Title

### **Safety Statement Revision:**

The Safety Officer is responsible for the issue, amendment and control of the Safety Statement. The Safety Statement will be updated on an annual basis by the Safety Officer as part of the health and safety annual review which will take into account the effectiveness of current risk control methods and any changes or improvements deemed necessary for the health and safety management plan. The Safety Statement will also be changed accordingly as names of responsible persons change, as risks or processes change, if changes in legislation occur, or if necessary changes to health and safety practices are identified and implemented as a result of findings from regular monitoring or an accident investigation.

**Next Annual Review Date: April 2015**

### 3 Coolmine Therapeutic Community Safety Policy

Coolmine Therapeutic Community is located at Coolmine House, 19 Lord Edward Street, Dublin 2. This safety statement covers the work activities in Coolmine Therapeutic Community and is a commitment from senior management in regards to safety in the Project.

It is the policy of Coolmine Therapeutic Community to comply with the Safety, Health and Welfare at Work Act 2005, Safety Health and Welfare at Work (General Application) Regulations 2007, Safety Health and Welfare at Work (Construction) Regulations 2013 and any other relevant regulations or codes currently applicable in the Republic of Ireland.

It is the policy of Coolmine Therapeutic Community to consult with all staff on matters of health & safety. Employees are hereby notified of Coolmine Therapeutic Community policy and are encouraged to comply with their duties under the 2005 Act to notify the management of identified hazards in the workplace.

Coolmine Therapeutic Community will ensure so far as is reasonably practicable that;

- Adequate resources are provided to ensure that proper provision can be made for safety and health,
- Risk assessments are carried out and periodically reviewed,
- Systems of work which are safe and without risks to health are provided and maintained,
- All employees are provided with such information, instruction, training and supervision as is necessary to secure their safety and health at work and the safety of others who may be affected by their actions,
- Where appropriate, health surveillance will be provided for employees,
- Any plant, machinery and equipment provided for use in the Project is safe and without risk to health and is maintained in such condition,
- The working environment of all employees is safe and without risks to health and that adequate provision is made with regard to the facilities and arrangements for their welfare at work,
- The work place is safe and that there is safe access to and egress from the work place,
- Monitoring activities are undertaken to maintain agreed standards.

All contractors working for Coolmine Therapeutic Community have a responsibility to meet these same standards. The detailed arrangements for achieving these objectives are set out in the main body of the Safety Statement.

The General Manager of Coolmine Therapeutic Community has overall responsibility for safety and health within the Project. The day to day management of safety and health in the Project is the responsibility of the Safety Officer. All supervisors, employees and safety representative(s) share a responsibility with management in ensuring their own safety while at work. Persons other than employees (e.g. visitors, members of the public and contractors) also share in this responsibility. All employees will be made aware of, and have access to this Safety Statement and arrangements for consultation with the employee representatives on safety and health matters will be an integral part of the safety policy. This Safety Statement will be subject to periodic revision and is liable to amendment if circumstances change. While the Safety Statement is management's programme in writing for safeguarding safety and health in the workplace, it is also a proactive document and is part of a wider continual improvement and learning process in the area of safety, health and welfare at work. This statement is brought to the attention of all staff within Coolmine Therapeutic Community and shall be available for inspection upon request

Signed: \_\_\_\_\_  
**General Manager**

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
**Safety Officer**

Date: \_\_\_\_\_



## 4 Safety Management System

Coolmine Therapeutic Community management is committed to effectively managing and controlling hazards and the risks associated with the workplace. This shall be achieved by incorporating a safety management system into the overall management system for the Project. The safety management system is based on the principles of

- Plan
- Do
- Review

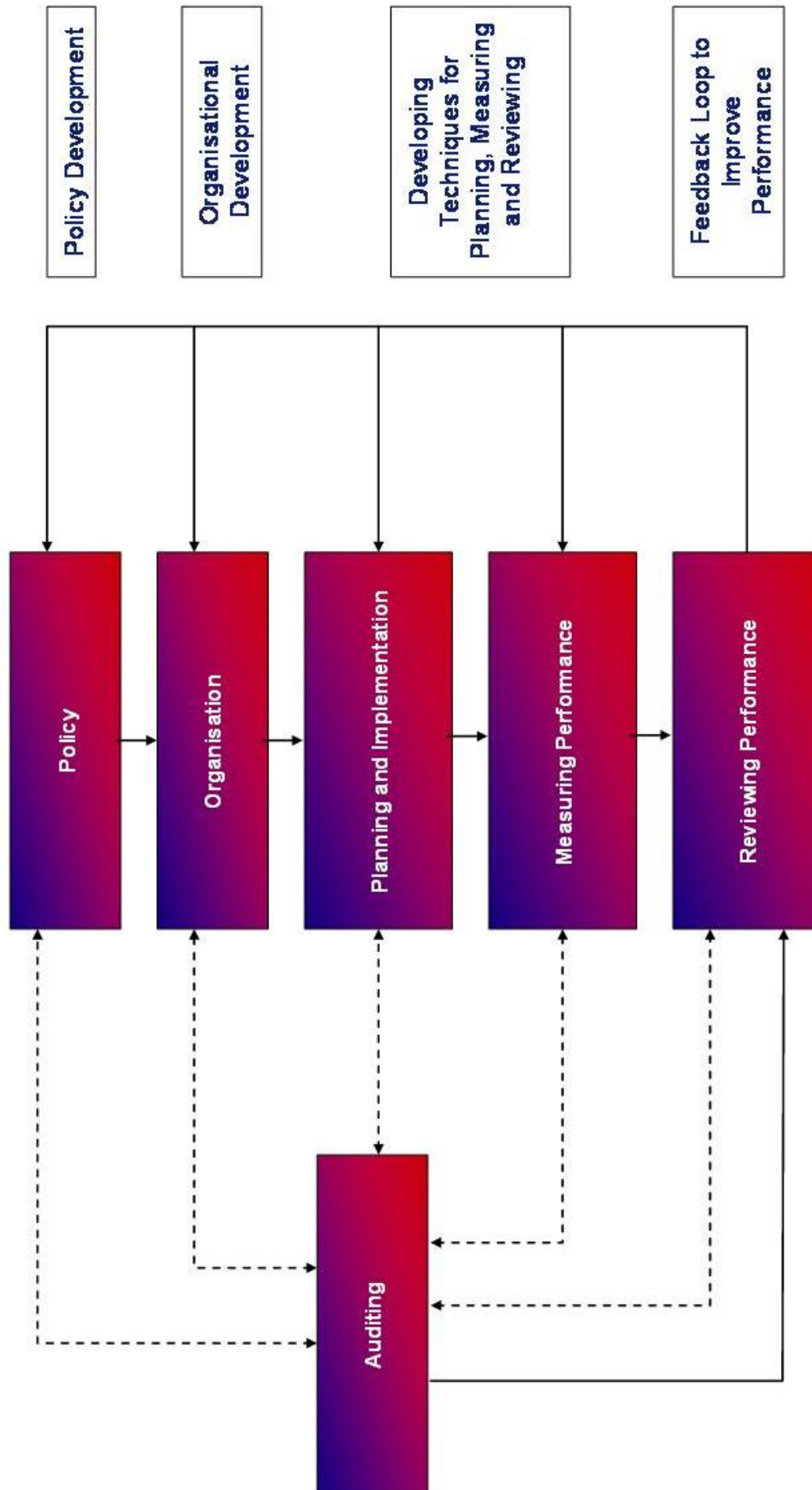
Before implementation of health and safety policy management will devise a plan of action to fulfil the commitments and policies set out in the safety statement. An effective management structure will be put in place with responsibilities and targets being allocated to managers and members of staff.

Health and safety policies will be implemented in a systematic approach. Hazards will be identified and attempts will be made to eliminate them through the selection and design of facilities, equipment and processes. Where this is not possible risk assessments will be carried out and appropriate measures to minimize these risks will be put in place such as, safe work practices and physical controls. Personal Protective Equipment (PPE) will only be considered as a last line of defence and will not be used a primary source of protection. Performance standards will be established and these will be used as a means of measuring the success of the safety management system.

Effective safety management systems are underpinned and enhanced by fostering a safety culture. This culture will be created by encouraging the participation of all members of staff by motivating and empowering them through training and positive reinforcement. Staff will be consulted on issues of safety and will be given the opportunity to make representations regarding any failings in the system, and suggest any reasonable, responsible, and practical changes to improve health and safety policy. Safety committee meetings will be held regularly and managers will lead by example to promote safe behaviour among employees.

Management of Coolmine Therapeutic Community strive to constantly improve the health and safety management system and how it performs, this is achieved by reviewing the system through regular measurements of performance and an annual audit of the overall system. Benchmarks are set to outline acceptable level of performance and are based on internal best performances and industry standard. The current performance of the Project will be compared to this standard. Multiple factors will be taken into account such as premises, equipment, materials, systems of work, employees and their behaviour. Where good standards are not achieved, those factors will be examined to identify the immediate and underlying causes. Any appropriate actions to correct such problems will be implemented.

An overview of the system is given on the following page.

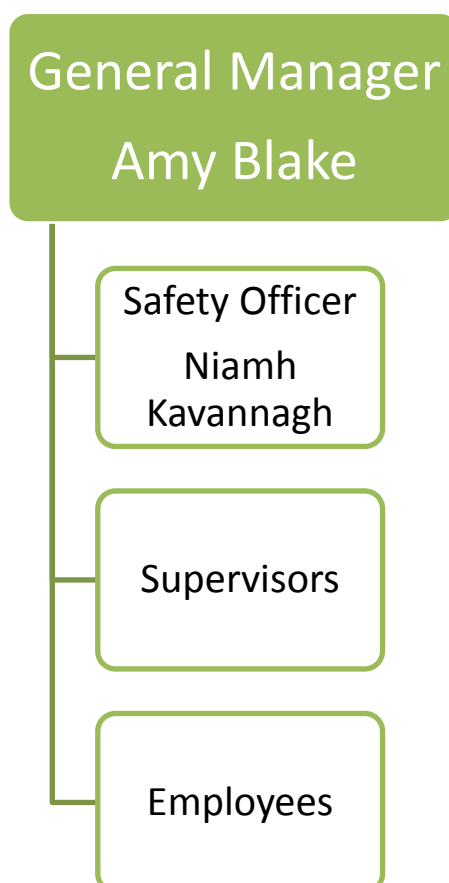


## 5 Safety Management Structure

The persons or titles listed below, within the Project safety management structure are responsible directly or by formal delegation for:

- The effective implementation of the safety policy and ensuring that their areas of responsibility are run in accordance with the policy.
- Ensuring that all employees are trained to manage the implementation and on-going monitoring of this safety policy.

### Safety Management Structure in Coolmine Therapeutic Community



**General Manager – Amy Blake**

General Manager of the Project is the individual with ultimate accountability for the safety activities and outcomes of the Project. Safety begins at management level and the overall responsibility for the establishment and maintenance of an effective policy for Safety, Health and Welfare at Work rests with the General Manager. The implementation of health and safety policy may be delegated to competent persons such as Managers or a Safety Officer. However, the General Manager will still bare a responsibility for safety and in this capacity shall work closely with his nominees to ensure that an effective safety management system is implemented and that she is kept informed of all aspects of health and safety at Coolmine Therapeutic Community.

The Key Responsibilities of the General Manager are to ensure that sufficient funding is available to make provisions for safety and health within the Project, review the health and safety performance of the Project and to ensure that their knowledge of occupational safety and health legislation is up-to-date. In addition; they must ensure that the following tasks are provisions for safety are completed by competent persons;

- That adequate resources are made available, in terms of time, finances and personnel to ensure The Project Safety Policy is effectively implemented.
- That all staff under their control are fully aware of their responsibilities in relation to safety and that they know they have a right to safety information.
- That all staff under their control are instructed on how to identify the hazards and assess the risks.
- That all staff under their control receive adequate training including any specialist training that might be required e.g. machinery safety and operation, manual handling etc. And that there is a procedure in place for consultation about Health & Safety. That a trained first aider is always available.
- That safe systems of work are incorporated into all appropriate activities e.g. use of dangerous equipment / products.
- That all equipment receives routing inspection and maintenance in accordance with legislative standards and good practice. And that all dangerous parts of machinery are adequately safeguarded.
- That a comprehensive fire evacuation plan is prepared and communicated to all employees.
- That the content of the Safety Statement is communicated to all employees and that up to date copies are available to all staff.
- That any job descriptions or contracts of employment adequately describe all Health and Safety responsibilities.
- That all accidents and dangerous occurrences are recorded investigated and acted upon. And that Safety Inspections are routinely carried out to ensure the accidents don't re-occur.
- That adequate and competent supervision is available at all times and especially where employees are under 18 years of age or new to the task they are doing.

### **Safety Officer – Niamh Kavannagh**

The Safety Officer at Coolmine Therapeutic Community is responsible for the day to day implementation and the development of the safety management system and the provisions of the necessary resources to achieve this. Acceptable health and safety practice will be achieved through the effective operation of a safety management system, safe systems of work, safe working procedures and full employee co-operation.

The Safety Officer shall ensure:

- That safe working conditions and practices are maintained.
- That they communicate with the personnel under their supervision regarding safety policy and procedures and conditions.
- That they set a good example of safe working practices and promptly correct unsafe practices by employees under their jurisdiction.
- That all employees are aware of the hazards that exist, and that they are trained in the safe way to work with these hazards.
- That adequate supervision is available especially to workers less than 18 years of age and employees of a particular task.
- All safety rules are enforced firmly and fairly.
- Everybody is aware of the fire procedures and fire drill and the location of the first aid facilities.
- That good housekeeping is maintained.
- That the safety representative gets an opportunity to liaise with them if they have any suggestions from other staff members.
- That they attend safety meetings.
- That they investigate all accidents including those, which result in minor injury or where potential serious injury was present (recording same).
- That all new or changed facilities or equipment are checked to ensure their safety before operation.
- That they are aware of and understand all applicable safety practices and regulations by keeping up to date.

**Managers and Supervisor**

The Managers and Supervisors at Coolmine Therapeutic Community are in an effective position to inspire and promote the safety consciousness of other employees and shall in particular;

- Promote safe working conditions and practices by being alert to and immediately taking corrective actions regarding any unsafe condition present.
- Ensure that all necessary PPE and safe working equipment is readily available for use.
- Communicate with personnel under their supervision regarding safety, health and welfare.
- Set an example of working practices and promptly correct unsafe practices by their employees.
- Ensure that all employees under their control adhere to safe working procedures and make use of all PPE and safety equipment provided.
- Alert all employees to the work hazards that exist and teach them how to work safely within these hazards, having particular regard to employees under 18 years of age.
- Promptly refer all injured personnel to a doctor or nearby hospital.
- Appraise all new or changed facilities, equipment and practices for safety before putting into operation.
- Be aware of and understand all applicable safety practices and Regulations.
- Liaise with person designated with responsibilities and conduct regular tours of the workplace to ensure safe procedures are being maintained.
- Take account of representations made by employees or safety reps and report these to the Safety Officer.

## Employees

Employees have general statutory obligations under the *Safety, Health and Welfare at Work Act, 2005, Chapter 2 Section 13*, which includes the following:

Employees must:

- Comply with the relevant statutory provisions, as appropriate, and take reasonable care to protect their own safety, health and welfare and the safety, health and welfare of other persons who may be affected by their acts or omissions at work,
- Ensure that they are not under the influence of an intoxicant to the extent that they are in such a state as to endanger their own safety, health or welfare at work or that of any other persons and to comply with the provisions of the provisions for intoxicants at work found in the *Safety Health and Welfare at Work Act 2005*.
- Co-operate with their employer or any other person, to enable their employer or the other person to comply with the relevant statutory provisions, as appropriate,
- Not engage in improper conduct or other behaviour that is likely to endanger their own safety, health and welfare at work or that of any other persons,
- Attend such training and, as appropriate, undergo such assessment as may reasonably be required by their employer or as may be prescribed relating to safety, health and welfare at work or relating to the work carried out by them.
- Having regard to their training and the instructions given by their employer, make correct use of any article or substance provided for use by them at work or for the protection of their own safety, health and welfare at work, including protective clothing or equipment,
- Report to their employer or to any other appropriate person, as soon as practicable:
  - any unsafe act, i.e. work being carried out, or likely to be carried out, in a manner which may endanger the safety, health or welfare at work of themselves or that of any other person,
  - any hazard, i.e. defect in the place of work, the systems of work, any article or substance which might endanger the safety, health or welfare at work of themselves or that of any other persons, or
  - any contravention of the relevant statutory provisions which may endanger the safety, health and welfare at work of themselves or that of any other persons, of which they are aware.

A person shall not intentionally, recklessly or without reasonable cause—

- misuse, damage or interfere with anything provided under the relevant statutory provisions or otherwise for securing the safety, health and welfare of persons at work, or
- place at risk the safety, health or welfare of persons in connection with work activities.

In addition, employees are reminded to:

- **Only carry out duties you are trained to perform.**
- **Keep work areas clean and uncluttered.**
- **Use correct manual handling procedures when moving items.**
- **Do not run as it increases the risk of accidents caused by tripping or collision.**
- **Refrain from carrying out dangerous pranks or unauthorised hazardous activities.**



## The Safety Representative – On appointment

*Part 4, Section 25(1) of the Safety, Health and Welfare at Work Act, 2005* states that employees may select a Safety Representative who has the following rights under the legislation:

- The Safety Representative can make representations on any aspects of safety, health and welfare at the place of work.
- The Safety Representative has the right to investigate accidents and dangerous occurrences in conjunction with the person responsible for health and safety. They shall not interfere with or obstruct the performance of any statutory obligation required to be performed by any persons under any of the relevant statutory provisions.
- In relation to the Health & Safety Authority;
  - ❖ Make oral or written representations to HSA inspectors on matters of safety, health and welfare at work.
  - ❖ To receive advice and information from HSA inspectors on matters of safety, health and welfare at work
  - ❖ To accompany a HSA inspector on any tour of inspection **other than** a tour of inspection made by a HSA inspector for the purpose of investigating an accident.
- The Safety Representative subject to prior notice to the employer may carry out workplace health and safety inspections to determine any potential hazards on the premises.
- The Safety Representative subject to prior notice to the employer may investigate potential hazards and complaints made by any employee whom he represents relating to that employee's safety, health and welfare at the place of work.
- The Safety Representative can also consult and liaise on matters relating to safety, health and welfare at work with any other safety representatives who may be appointed, whether or not those safety representatives who work in the same place of work, in different places of work under the control of the employer or at different times at the place of work.

Employees shall be advised of their right to appoint / select a safety representative, refer to **Section 8** of this Safety Statement for further details on consultation.

### Safety Representatives:

Name	Department

## Visitors

All visitors to Coolmine Therapeutic Community including persons from the general public, sales people, consultants, inspectors, etc, have a responsibility to assist the Project in fulfilling its statutory duties. In order to achieve this they are bound to the following general rules:

- They must be supervised at all times by a member of staff familiar with our operations
- They should observe the Project's Safety Rules and any instructions given by staff who enforce the Safety Policy.
- They should not enter unauthorised areas unless given permission by staff.

## Contractors

Coolmine Therapeutic Community bears responsibility for all who operate under their control. This includes Contractors. Contractors must assist Coolmine Therapeutic Community fulfil their responsibilities by adhering to the following rules:

- Sub-contractors and self-employed persons must provide their up to date safety statement when requested to do so.
- Self-employed persons must conform with the duties and responsibilities of employees.
- Sub-contractors must produce evidence when requested, showing that appropriate insurance is in place.
- Sub-contractors and self-employed persons have a duty to bring to the attention of Coolmine Therapeutic Community and anyone else who may be affected by any process or use of any materials that may endanger the health and safety of other people at work.
- Sub-contractors and self-employed persons shall comply with the requirements of this safety manual and co-operate with the Site Supervisor in providing a safe place of work, a safe system of operation and wearing of protective clothing and equipment.
- Sub-contractors and their employees must check with the Site Supervisor, if a permit to work system is in operation, **and must follow all instructions on the permit.**
- Sub-contractors' employees and self-employed persons must attend any safety courses, site safety meetings prepared for workers on projects managed by this Project.

**For further details on visitor and contractor procedures consult Section 21**

## 6 Documentation and Distribution of the Safety Statement

The Safety Officer shall ensure the master copy of this Safety Statement is held at Coolmine Therapeutic Community head office and copies are available onsite for inspection by staff, statutory bodies, and stakeholders. A copy of the Safety Statement and risk assessments is available for inspection to all employees during normal working hours. Staff employed outside of normal will have access to a copy of the statement and the risk assessments for inspection from their supervisors. The contents of the Safety Statement will be brought to the attention of all employees at induction and during refresher training.

The Safety Officer is responsible for the issue of new and revised Safety Statements. To ensure that each copy of the Safety Statement contains a record of all changes, the Safety Officer will ensure that a record of the changes or amendments are recorded on an amendment list, which will then be circulated to all relevant persons.

Once signed off, this document is a public document (within the Project) and will be made available to staff and stakeholders.

## 7 Provision of Safety Training and Instruction

Coolmine Therapeutic Community is committed to providing appropriate safety and health training for all employees, which will be sufficient to meet the Project's obligations under the *Safety, Health and Welfare at Work Act, 2005* and other relevant legislation. The primary responsibility for this rests with management in co-operation with specialists as appropriate. Employees have a legal obligation to co-operate with management and attend all training provided.

All persons employed by Coolmine Therapeutic Community will receive induction training to ensure that they fully understand the hazards of the equipment and what safety precautions and emergency procedures are required. The training shall involve an introduction to the Project's safety statement.

The Safety Representative, when appointed, will receive the necessary training as recommended by the HSA to carry out his/her role effectively. Training will be given, as necessary, to management to ensure that they have the necessary skills and knowledge to organise the work safely without risk to health;

Training records will be maintained and will contain the following information:

- Date of training instruction or exercise,
- Duration of the training course,
- Name of Instructor delivering the training,
- Name of person's undertaking the training,
- Nature and content of the training course.

Coolmine Therapeutic Community will provide the following training as appropriate:

- Induction training of all new staff and ensure all new operatives have appropriate health and safety training.
- As appropriate, chemical handling, use of tools, working at height, first aid, manual handling, and fire safety training.
- Management training to ensure managers are equipped to undertake their duties and responsibilities for safety and health.

The Safety Officer or a nominated competent person will carry out safety induction training. Additional training courses will be provided to meet specific needs as they arise from time to time. Such courses may be carried out in-house or at an appropriate outside agency. All employees are required to co-operate with the Project in the implementation of its training programme.

## 8 Consultation

Coolmine Therapeutic Community is committed to meeting its obligations under *Section 25, of the Safety, Health and Welfare at Work Act 2005* on consultation with staff and stakeholders. Coolmine Therapeutic Community is committed to a policy of co-operation and consultation between management and staff and will take account of any representations made by staff members.

The Safety Officer will be responsible for co-ordinating consultation with the workforce. She will ensure that all managers, supervisors, and any nominated staff representatives will be provided with all relevant information pertaining to safety, including but not limited to, the findings from audits and accident investigations, and any new risks and controls introduced to the workplace as a result of the new work processes, materials or equipment. This information will then be communicated to members of staff.

Employees are encouraged to bring to the attention of their manager, supervisor or representative, any concerns relating to safety or any weaknesses in the safety management system, they may also offer suggestions for improving safety in the workplace. All representations made by staff will be communicated to the Safety Officer for consideration. Where risks to safety identified by staff are brought to the attention of management, corrective actions will be put in place immediately.

## 9 Provision of Practical and Safe Working Systems

### Safe Access and Egress

Slips and trips account for a large proportion of accidents across all sectors of the workforce. In order to ensure that Coolmine Therapeutic Community employees have safe access and egress to and from their place of work at all times, the following controls will be maintained where applicable on company premises:

- ❑ Materials and equipment will not obstruct any fire or safety appliance, firefighting equipment or emergency exits.
- ❑ Good housekeeping standards will be maintained at all times and all tools and equipment will be stored away safely.
- ❑ Access routes, walkways and areas where work is being conducted will be kept clear of all stored materials at all times.
- ❑ Spillages will be cleaned up in a timely fashion and warning signs will be put in place.
- ❑ Damage to floor surfaces or coverings will be repaired immediately.
- ❑ Cables and other trip hazards will not be run across work areas. Where this is not possible, methods to reduce risks such as cable covers will be utilized.

### Security

Coolmine Therapeutic Community recognises the risks posed to staff if an unauthorised person were to gain access to company worksites, or if a confrontation were to arise. The following steps have been taken to minimize these risks;

- ❑ Visitors to Coolmine Therapeutic Community are required to check in and out with a member of staff and must be supervised at all times.
- ❑ CCTV, and proper lighting should be put in place.
- ❑ Doors to staff only areas should be kept locked.
- ❑ Staff are advised to question strangers or suspicious looking persons in a friendly manner.
- ❑ Staff should avoid lone working where possible. Where this is unavoidable staff must have mobile phones on them to check in at regular intervals. If a member of staff fails to check in, efforts will be made by the company to contact them.
- ❑ In the event of a robbery, staff are required to comply with the demands of the perpetrator and not put themselves at unnecessary risk.

## Waste Management

The accumulation of waste on site can create tripping hazards, attract pests and create fuel for fires. Furthermore; certain items can generate heat and spontaneously combust. In order to manage waste adequately, Coolmine Therapeutic Community will provide adequate amounts of waste receptacles and arrange for regular collection by a waste collection agency, no waste will be stored within the company premises and shall be removed to provided receptacles regularly

## Pest Control

Pests such as insects and rodents pose a risk to human health through the spread of disease and can potentially cause property damage e.g. rodents chewing through wires. Coolmine Therapeutic Community shall manage pests through the following;

- All doors shall be kept closed where possible,
- All rubbish, especially food waste, shall be removed to bins regularly; these bins will be stored away from entrances and windows,
- Windows to canteen areas shall be fitted with screens,
- All vents and drains shall be covered with suitable guards,
- Any gaps which may allow access to pests will be sealed,
- Where necessary, the services of qualified pest control agencies will be obtained to provide preventative and remedial controls.

## Employment of Young Persons

A young person is defined as anyone under the age of 18. Young persons are at a higher risk of accident and injury because their lack of experience often leads to poor perception of danger. This can leave young persons less able to effectively assess risks posed to themselves. In some cases a lack of maturity can lead young persons to behave in an unsafe manner and put themselves and others at risk. To ensure that no harm comes to young persons while working at Coolmine Therapeutic Community, management will ensure that young persons are supervised at all times and that specific risk assessments are carried out taking into account;

- Their age and level of experience.
- The layout of their workplace or workstation and any hazards found within.
- The nature of their work activities.
- The Level of the Supervision
- Any work equipment used.
- Exposure to any physical chemical or biological agents.

All young persons will be forbidden from partaking in lone working or using any equipment which represent a serious hazard or requires specialized training for use. Young persons will not exceed to maximum working hours and shift times as deemed appropriate for their age in the *Safety Health and Welfare at Work (General Application) Regulations 2007* and the *Protection of Young Persons (Employment) Act 1996*.

## Lone Working

Lone workers are persons who work by themselves without close or direct supervision. This practice poses a serious hazard because if something were to happen to an employee they may not receive help in a timely manner. Before assigning a person to lone working tasks the Safety Officer will carry out an assessment of the risks involved in order to minimize or control them. This risk assessment will take into account;

- The risks associated with the task and its suitability for being completed alone.
- The person carrying out the task and their level of competence.
- The safety measures required.

Lone workers will receive appropriate training for the task. They will be made aware of the measures put in place to protect them and they will be made aware that they are required to look after their own safety and the safety of others who may be affected by their actions.

Before partaking in lone working activities employees must inform their supervisor. Lone working Employees should check in at predetermined regular intervals with a designated person. If a lone working employee fails to check in the designated person should make contact with them to ascertain the situation.

## Repetitive Tasks

Tasks involving repetitive movements which are carried out rapidly, with force, or while adopting an awkward posture can cause strain on muscles, joints, connective tissue and nerves, leading to injury. Carrying out such tasks frequently can eventually lead to development of a repetitive strain injury, such injuries can have a devastating effect on individuals, impacting on their everyday life and preventing them from working. In order to reduce the risk of RSIs occurring staff must ensure that their work area/station is set up to allow them to adopt a normal and correct posture. Staff should also vary their work ensuring that repetitive tasks are broken up by different tasks which allow them to adopt different postures and ranges of movement.

## VDU Hazards

VDU work can lead to fatigue, eye strain and muscular problems. Although the risk of serious injury is low, the level of discomfort can be quite high and all control measures must be adhered to.

A high standard of office furniture is provided to minimise posture problems i.e. adjustable chairs; large desks with counter areas. It is the policy of Coolmine Therapeutic Community to provide VDU equipment with good screen definition and a range of adjustments which ensure user comfort. Coolmine Therapeutic Community uses the Health and Safety Authority Guidelines on VDU as a standard for ergonomic assessment of VDU workstations. A full assessment has been carried out of all workstations and any Employee who moves to another workstation will be reassessed.

Every effort is made to ensure that VDU users are adequately trained in the software systems thus minimising stress in using the system.

In accordance with regulation 73 located in Section 5 Part 2 of the *Safety Health and Welfare at Work (General Application) Regulations (2007)*. Eye tests are available to all staff for whom working at VDUs forms a major part of their work activities. These are provided for free and the basic cost of required glasses is also covered. Coolmine Therapeutic Community is exempt from covering both of these charges where the employee is entitled to both eye tests and glasses through social welfare schemes. The company is exempt from having to provide



work glasses where an employee already requires glasses and eye tests show that their existing glasses are sufficient for their work.

All reasonable efforts are made to ensure that lighting at VDU stations is adequate, suitably placed and generally comfortable for the user. Daylight is controlled using adjustable blinds where necessary. This helps to eliminate reflections and excessive contrast between background light and screens.

Please refer to **Appendix 3** for a more detailed description of VDU hazard controls.

### Electric Heaters

Electric heaters are hazardous pieces of equipment; large power consumption, electrical heating elements and the generation of large amounts of heat present the potential for electrical faults and fires occurring. In order to ensure that these incidents do not occur the following precautions should be taken.

- Ensure to read manufacturers instructions and warning labels before use.
- Unless the heater is designed for outdoor use or in bathrooms, Do Not use in wet/damp areas.
- Ensure the heater is kept away from water.
- Regularly check the plug, cord and heater for damage or rust/discolouration, if damage is present, discontinue the use of the heater and have an electrician repair the heater.
- Ensure the heater plug fits tightly into the wall outlet, if it doesn't, then do not use.
- When not in use the heater should be left unplugged.
- Do not plug any other electrical device into the same outlet as the electric heater. This could result in an electrical fault or over heating.
- Ensure the heater is placed on a stable, level surface, never place on furniture or in an area where it can be knocked over.
- Never leave an electric heater unattended and always unplug the heater when it is not in use.
- Do not use the heater with an extension lead as overheating could result and cause a fire to occur.
- Keep all flammable and combustible materials at least 3 feet from the front, sides and rear of the electric heater.
- Never block the heater's air intake or outlet.
- Never run the cord under mats or furniture. This can damage the cord causing it or nearby objects to burn.
- During use, check the heater frequently to ensure it is not over heating, if it has overheated, discontinue it's use and have a competent person repair the heater.

Under no circumstances should any heaters be left running while unattended as they may be forgotten leading to overheating due to excessive use.

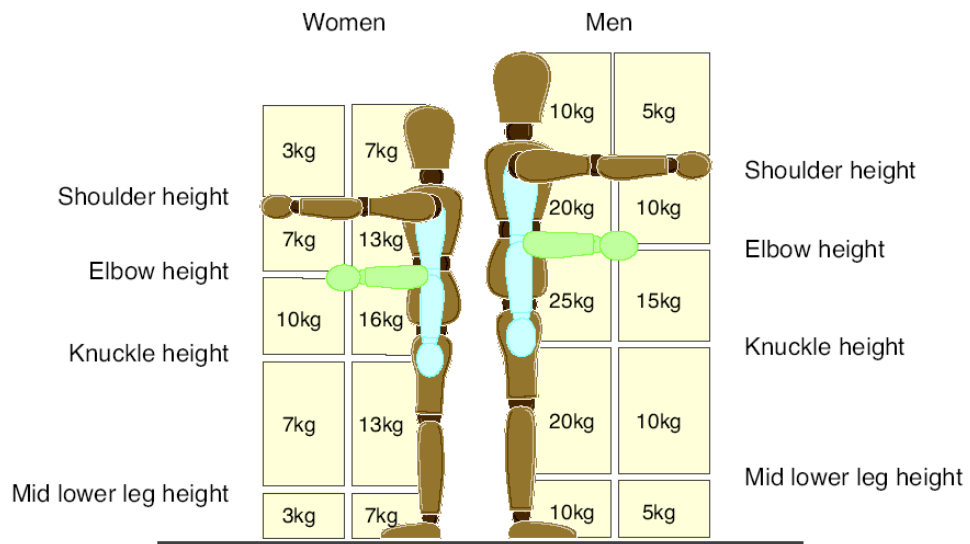
**Manual Handling**

Manual handling accounts for the most injuries suffered by employees across all sections of the work force. Injuries sustained due to manual handling can end careers, damage future employment prospects and can impact a person’s life outside of work. All Coolmine Therapeutic Community employees will be trained in safe manual handling techniques. Employees will be provided with all necessary information required for assessing manual handling risks. Mechanical equipment will be used to reduce the level of manual handling carried out by employees where possible.

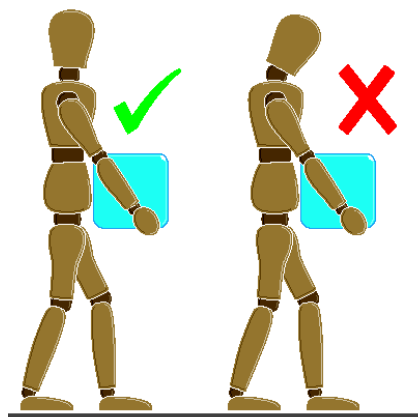
Coolmine Therapeutic Community employees will not attempt to lift loads beyond their physical capacity. The following guidelines should be used by all Coolmine Therapeutic Community employees when undertaking manual handling operations.

**General risk assessment guidelines**

There is no such thing as a completely ‘safe’ manual handling operation. But working within the following guidelines will cut the risk and reduce the need for a more detailed assessment.



**Avoid lifting from above chest height. When storing items, store heavier items closer to ground level and midriff height to reduce the risk of back injury**



**Carry items at midriff height and keep your back straight**

- ❑ Avoid sudden and awkward movements while lifting.
- ❑ Check for rough surfaces, sharp or jagged edges, splinters etc. and use the appropriate protective clothing at all times.
- ❑ Do not allow the object being lifted impede your line of vision.
- ❑ Avoid slippery or other unsafe surfaces.
- ❑ All lifting will be carried out using the 8 principles of lifting:
  - Size up the load, make certain of good balance
  - Keep the back as straight as possible
  - Use the strong leg muscles rather than the weaker back muscles
  - Carry the load close to the body
  - Watch where you are going
  - Make sure the hands and feet are clear in placing loads
  - Always ask for help when needed
  - Use mechanical equipment where possible.

### **Shelving and Racking**

Where shelving and racking forms a key component of the storage systems utilised by Coolmine Therapeutic Community the following safety measures shall be adhered to at all times by employees;

- ❑ A competent person shall be appointed to carry out an annual detailed inspection of all shelving and racking.
- ❑ Simple visual inspections of shelving will be carried out on a regular basis
- ❑ All shelves and racking bays will be marked clearly with their Safe Working Load (SWL) maximum capacity.
- ❑ All racking damage must be reported to the Safety Officer immediately.
- ❑ All damage to racking and shelving shall be repaired by a competent person at the earliest opportunity. Staff must not attempt to fix damaged sections on their own.
- ❑ Climbing on shelving racking is not allowed. Proper access procedures, i.e. the use of stepladders must be used.
- ❑ Heavy items must be stored on low shelves to reduce manual handling risks and the risk associated with a shelf or rack collapsing.

## Stepladders

All work from stepladders will be carried out in accordance with the requirements of *Safety, Health and Welfare at Work (General Applications) Regulations 2007*

Work from step ladders will only be conducted on the basis of a risk assessment of the work demonstrating that the use of such equipment is suitable for the work being performed because of the low risk and –

- Short duration of use,
- Existing features on site that cannot be altered.

Risk assessments must be carried out for all stepladder use of a long duration taking into account all the hazards and environmental conditions prevailing at the time. All equipment should be suitable for the task and should be tagged (stress weighted/working load plated) and be compliant with BS 2037 (Aluminium) or BS 1129 (Wood) standards.

All staff required to use stepladders should be trained in their safe use and a visual inspection should be undertaken before every use. Although it is not a legal requirement to document this process on a daily basis it is strongly recommended that process be documented. Staff are reminded that they should;

- Ensure that they set up all stepladders on stable bases.
- Ladders must have cords, stays or chains fitted to prevent them from spreading. These cords should be of sufficient and equal length.
- Ladders in use must be spread to their fullest extent and placed at right angles to the work area whenever possible.
- Have suitable footwear which is free from grease or other forms of slippery dirt.
- Not overreach they must dismount and reposition the ladder.
- Not use the top thread of a pair of steps on an A-frame ladder or the top plate on a step ladder as a work platform unless a proper extension for handholds is provided. Nor should the rear part of the steps should be used for foot support.

## Maintenance and Storage of Ladders

It is an important safety factor that equipment is maintained in good condition for as long as possible and remains safe. To achieve this, the following precautions are necessary;

- All timber ladders in use must be free of splits, cracks and similar weakening defects. No filler may be used to mask defects, and on no account are timber ladders to be painted, however a clear varnish may be used to protect the wood.
- All ladders must be kept clean of dirt and mud. Extra care is necessary to avoid slipping, e.g. oil or grease on aluminium ladders.
- All ladders must be stored flat to avoid twisting or warping.
- Supervisors arrange and implement a check procedure and regular inspection of all ladders and steps.
- If a ladder is defective, it must be destroyed or repaired immediately before someone can use it by mistake.

## Legionella (Showers)

Legionnaires' disease is a potentially fatal pneumonia caused by legionella bacteria. Legionella bacteria occur naturally in watercourses and can also propagate in manmade systems. The conditions needed for multiplication of legionella include stagnation (lack of water flow), a temperature range of 20-45 degrees Celsius, and a nutrient source such as algae, sludge, or rust and limescale.

Everyone is potentially susceptible to infection but some people are at higher risk, these include persons over 45 years of age, smokers and heavy drinkers, and persons suffering from chronic respiratory or kidney disease, and people whose immune system is impaired. The disease cannot be passed from one person to another; but is caused by breathing in small droplets of water contaminated by the bacteria. In a hotel environment such conditions can arise in showers, steam rooms and saunas, and the cooling tower components of air-conditioning systems.

To prevent multiplication of Legionella the following preventative procedures should be implemented.

- Cold water systems must be kept at a temperature below 20 degrees Celsius. A monthly check should be carried out at the sentinel taps after running the water for 2 minutes to ensure that this temperature is being maintained.
- Hot water systems must be heated to a temperature above 60 degrees Celsius. A monthly check should be carried out at the sentinel taps over a period of one minute to ensure that this temperature is being maintained.
- Annual tests should be carried out on samples taken from hot water calorifiers.
- An annual inspection for scale and sludge should be carried out on the internal surfaces of hot water calorifiers, and all necessary remedial action should be taken where necessary.
- An annual visual inspection of cold water storage tanks should be carried out and remedial action should be taken where necessary.
- All toilets must be flushed weekly and all taps and showers must be run weekly regardless of whether or not the rooms and facilities are in use to ensure that stagnation does not occur.
- All showerheads and hoses should be dismantled cleaned and descaled quarterly or as necessary.

## Microwave

Microwaves are generally safe to use, burns or scalds may occur while removing hot items. The following steps should be followed to prevent this from occurring

- Use suitable tools to protect hands from burns e.g. oven gloves, tea towels, or utensils.
- Ensure suitable non flammable/heat resistant containers are used when heating food
- Ensure that containers are not sealed or closed.
- Never place metal implements in a microwave.
- Never use a microwave if the interlock or the door seals are broken. If the casing shows signs of damage it should also not be used.












## Fire Safety

Fire extinguishers will be provided and correctly sited to meet safety requirements where required e.g. a Water based extinguisher will not be the only extinguisher available in an area where an electrical fire is likely to occur. These appliances are provided to deal with incipient fires. Trained personnel using these appliances should not attempt to fight fires which are spreading rapidly. The firefighting equipment has been chosen based on the advice of our fire consultant/fire safety company and reflects the fire risks in each location of the premises.

Coolmine Therapeutic Community firefighting equipment is tested and serviced annually by certified contractors.

- ❑ Coolmine Therapeutic Community employees are made aware of the potential of fire hazards when carrying out their work activities. All employees will take reasonable care in their work activities to ensure they do not generate any potential fire hazards on company property.
- ❑ Combustible materials will not be allowed to build up on the company worksites and will be removed to bins or a skip on a regular basis.
- ❑ Any waste which is highly flammable will be kept in appropriate containers away from any heat sources and removed for appropriate disposal.
- ❑ Any flammable liquids used on site will be stored away from heat sources in suitable containers which will be kept sealed to avoid build-up of flammable vapours in the atmosphere.
- ❑ Smoking will be limited to approved areas, and is prohibited at all times indoors.
- ❑ Where hot work is carried out, firefighting equipment will be maintained on site and in the vicinity of the hot works at all times.
- ❑ Where a *gas fire* occurs the gas must be switched off at the mains to extinguish the main fire, only then will it be safe to tackle any secondary fires as to do otherwise may allow gas flow leading to an explosion.
- ❑ All firefighting used by Coolmine Therapeutic Community will be in accordance with the requirements of the area that it is being located, as well as meet the required classification for that area based on the classifications as per I.S. 290: 1986 standard.

**The chart on the following page outlines the correct use of the most commonly available fire extinguishers. Please note that CO<sub>2</sub> extinguishers should not be used on paper or light material as they may spread burning fuel causing the fire to further spread.**

	Colours						
Type:		Fires involving wood, paper, textiles etc.	Fires involving Flammable Liquids, petrol oil etc.	Fires involving Flammable gases, butane, propane etc.	Fires involving burning metals eg magnesium	Fires involving electrical equipment	Fires involving cooking oils and fats.
Water		✓	✗	✗	✗	✗	✗
Foam		✓	✓	✗	✗	✗	✗
Dry Powder		✓	✓	✓	✗	✓*	✗
M28 / L2		✗	✗	✗	✓	✗	✗
Co2		✗	✓	✗	✗	✓	✗
Wet Chemical		✓	✗	✗	✗	✗	✓

\* May damage sensitive electrical equipment

## Electrical Safety



Coolmine Therapeutic Community shall obtain the services of a qualified Electrician to carry out Electrical maintenance and repair when required. All electrical work carried out at Coolmine Therapeutic Community will be completed to I.E.E. Regulations and the Electro-Technical Council of Ireland Standards.

**All persons carrying out electrical works at Coolmine Therapeutic Community must adhere to the following safety guidelines**

### Maintenance and Repair

- When working with electrical equipment, i.e. Control panels, Motors etc., isolation must be achieved, locking off where appropriate.
- Where it is not possible to or practical to isolate the system, a second person will be in attendance to act as a watchman, to prevent accidental use while work is in progress.
- Unused or redundant cables should be identified and terminated in suitable enclosures at both ends.
- When isolating electrical equipment always ensure the following:
  - The correct identification of equipment, do not depend on labels/tags as they are not always correct.
  - Remove mains and control circuit fuses or switch off circuit breakers.
  - Lock isolator, circuit breaker or any other type of isolation device in the off position at both source and field.
  - Attach appropriate labels to isolated equipment (lockout/danger tags).



- Always double check that equipment is totally isolated with volt meter at both source and field.
- Never rely on automatic isolation systems such as photocells interlocks etc for isolation, isolation should be physical not automatic.
- Live electrical equipment must always be protected by appropriate doors, panel covers or other devices- live equipment must never be left unattended while exposed.



**General Usage of Electrical Equipment**

The following precautions will be taken with regards to the general usage of electrical equipment.

- Only electrical equipment possessing a CE mark will be purchased by the company, these will be sourced from reputable suppliers.
- Sockets and electrical equipment will be inspected for damage prior to use and at regular intervals. All damaged electrical equipment will be withdrawn from use to be repaired or disposed of safely.
- Any electrical equipment showing signs of overheating such as the generation of excessive heat, discolouration or generation of smoke or a burning smell will be switched off at the mains and removed from use to be repaired or disposed of safely.
- Any electrical equipment which is sparking or buzzing will be switched off at the mains and removed from use to be repaired or disposed of safely.
- Any broken or damaged electrical equipment awaiting disposal or repair will be labelled as such.
- Sockets will not be overloaded with multi-adaptors, and multi-adaptors will not be “slaved” to one another. Where necessary the services a qualified electrician should be obtained to install additional sockets as needed.

## Chemical Controls

A hazardous substance is described as any substance with the potential to cause harm, injury or damage to a person's health. In most working environments employees are exposed to hazardous substances used in a controlled manner and circumstances.

Companies using chemicals must adhere to Safety Health and Welfare at Work (Chemical Agents) Regulation 2001 and its 2011 codes of practices. These regulations make it necessary to follow REACH guidelines. REACH is a European Union regulation concerning the registration, evaluation, authorisation and restriction of chemicals. It came into force on 1<sup>st</sup> June 2007 and replaced a number of European Directives and Regulations with a single system for registering dangerous chemicals and the provision of guidance in safe use for consumers. Management will refer to this guidance information while carrying out chemical risk assessment and where such information is unavailable the manufacturer or supplier will be contact so that a copy of the information may be obtained.

Coolmine Therapeutic Community makes use of, general house hold cleaning chemicals and various hazardous substances used in the maintenance of equipment. These chemicals are centrally purchases from management approved sources. Under no circumstances are staff allowed to bring onto the premises, any hazardous chemicals without the authorisation of management. Where contractors require the use of hazardous chemical for the purpose of completing their work, they must first inform the Safety Officer and conduct a risk assessment before bringing any chemicals on site. Contractors will be held liable for any injury or damage caused by hazardous substances brought on site without the approval of management.

In addition to the administrative controls previously outlined, the following control measures are put in to ensure no harm comes to employees making use of chemicals;

- Safety Data Sheets are obtained for all chemicals used on the premises, these are retained for consultation by all members of staff at the chemical storage area and at the Technical Manager's office,
- Staff are made aware of the hazards associated with the use of hazardous substances and are instructed in their correct use,
- Staff are provided with all necessary PPE listed in the SDSs,
- Spill control procedures are put in place and spill control kits are readily available,
- All chemical waste and waste containers are removed from site in a timely manner, in line with the Waste Management (Hazardous Waste) Regulations 1998.

Chemical Hazard information is conveyed to staff through 1. Hazard Labels and 2. Safety Data Sheets.

**1. Hazard Labels**

Hazard labels are present on all chemical containers; they contain all the necessary information to allow a person to make the safe use of the product.

### The Basic Parts of A GHS-Compliant Label

**1** → **n-Propyl Alcohol**

UN No. 1274  
CAS No. 71-23-8

**2** → **DANGER**

**3** → Highly flammable liquid and vapor. Causes serious eye damage. May cause drowsiness and dizziness.

**4** → Keep away from heat/sparks/open flames/hot surfaces. No smoking. Avoid breathing fumes/mist/vapours/spray. Wear protective gloves/protective clothing/eye protection/face protection. IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses if present. Continue rinsing.

Fill Weight: 18.65 lbs.      Lot Number: B56754434  
Gross Weight: 20 lbs.      Fill Date: 6/21/2013  
Expiration Date: 6/21/2020

**5** → Acme Chemical Company • 711 Roadrunner St. • Chicago, IL 60601 USA • www.acmechem.com • 123-444-5567

**6** →

See SDS for further information.

1. **Product Identifier** - Should match the product identifier on the Safety Data Sheet.
2. **Signal Word** - Either use "Danger" (severe) or "Warning" (less severe)
3. **Hazard Statements** - A phrase assigned to a hazard class that describes the nature of the product's hazards
4. **Precautionary Statements** - Describes recommended measures to minimize or prevent adverse effects resulting from exposure.
5. **Supplier Identification** - The name, address and telephone number of the manufacturer or supplier.
6. **Pictograms** - Graphical symbols intended to convey specific hazard information visually.

Sample label courtesy of Weber Packaging Solutions • www.weberpackaging.com

### Hazard Pictograms (Pre 2010)



### Hazard Pictograms (Current)



Hazard Pictograms, are designed to alert persons to the potential risks associated with the use of a particular substance. As of 2010 red, white and black symbols have been appearing on chemical packaging and Safety Data Sheets in accordance with EC 1272/2008. However, older packaging may still feature the old Orange/Yellow and Black labels, which will be gradually phased out by 2015.

## 2. Safety Data Sheets

Safety Data Sheets provide more detailed safety information on hazardous substances than could be put on a safety label. Chemical manufacturers and suppliers are required to provide comprehensive Safety Data Sheets to their customers;

Safety Data Sheets must contain the following 16 sections;

### SECTION 1: Identification of the substance/mixture and of the company/undertaking

- 1.1. Product identifier
- 1.2. Relevant identified uses of the substance or mixture and uses advised against
- 1.3. Details of the supplier of the safety data sheet
- 1.4. Emergency telephone number

### SECTION 2: Hazards identification

- 2.1. Classification of the substance or mixture
- 2.2. Label elements
- 2.3. Other hazards

### SECTION 3: Composition/information on ingredients

- 3.1. Substances
- 3.2. Mixtures

### SECTION 4: First aid measures

- 4.1. Description of first aid measures
- 4.2. Most important symptoms and effects, both acute and delayed
- 4.3. Indication of any immediate medical attention and special treatment needed

### SECTION 5: Firefighting measures

- 5.1. Extinguishing media
- 5.2. Special hazards arising from the substance or mixture
- 5.3. Advice for firefighters

### SECTION 6: Accidental release measures

- 6.1. Personal precautions, protective equipment and emergency procedures
- 6.2. Environmental precautions
- 6.3. Methods and material for containment and cleaning up
- 6.4. Reference to other sections

### SECTION 7: Handling and storage

- 7.1. Precautions for safe handling
- 7.2. Conditions for safe storage, including any incompatibilities
- 7.3. Specific end use(s)

### SECTION 8: Exposure controls/personal protection

- 8.1. Control parameters
- 8.2. Exposure controls

### SECTION 9: Physical and chemical properties

- 9.1. Information on basic physical and chemical properties
- 9.2. Other information

### SECTION 10: Stability and reactivity

- 10.1. Reactivity
- 10.2. Chemical stability
- 10.3. Possibility of hazardous reactions
- 10.4. Conditions to avoid
- 10.5. Incompatible materials
- 10.6. Hazardous decomposition products

## SECTION 11: Toxicological information

## 11.1. Information on toxicological effects

## SECTION 12: Ecological information

- 12.1. Toxicity
- 12.2. Persistence and degradability
- 12.3. Bioaccumulative potential
- 12.4. Mobility in soil
- 12.5. Results of PBT and vPvB assessment
- 12.6. Other adverse effects

## SECTION 13: Disposal considerations

## 13.1. Waste treatment methods

## SECTION 14: Transport information

- 14.1. UN number
- 14.2. UN proper shipping name
- 14.3. Transport hazard class(es)
- 14.4. Packing group hazards
- 14.5. Environmental
- 14.6. Special precautions for user
- 14.7. Transport in bulk according to Annex II of MARPOL73/78 and the IBC Code

## SECTION 15: Regulatory information

- 15.1. Safety, health and environmental regulations/legislation specific for the substance or mixture
- 15.2. Chemical safety assessment

## SECTION 16: Other information

**MATERIAL SAFETY DATA SHEET**  
**LEAD ACID BATTERY WET, FILLED WITH**  
**ACID**  
 (US, CN, EU Version for International Trade)

**SECTION 1: PRODUCT AND COMPANY IDENTIFICATION**

**PRODUCT NAME:** Lead Acid Battery Wet, Filled With Acid  
**OTHER PRODUCT NAMES:** Electric Storage Battery, SLI or Industrial Battery, UN2794

**MANUFACTURER:** East Penn Manufacturing Company, Inc.  
**DIVISION:** Deka Road  
**ADDRESS:** Lyon Station, PA 19536 USA

**EMERGENCY TELEPHONE NUMBERS:** US: CHEMTREC 1-800-424-9300  
 CN: CHEMTREC 1-800-424-9300  
 Outside US: 1-703-527-3887

**NON-EMERGENCY HEALTH/SAFETY INFORMATION:** 1-610-682-6361

**CHEMICAL FAMILY:** This product is a wet lead acid storage battery. May also include gel/absorbed electrolyte type lead acid battery types.

**PRODUCT USE:** Industrial/Commercial electrical storage batteries.

This product is considered a Hazardous Substance, Preparation or Article that is regulated under US-OSHA; CAN-WHMIS; IOSH; ISO; UK-CHIP; or EU Directives (67/548/EEC-Dangerous Substance Labelling, 98/24/EC-Chemical Agents at Work, 99/45/EC-Preparation Labelling, 2001/58/EC-MSDS Content, and 1907/2006/EC-REACH), and an MSDS/SDS is required for this product considering that when used as recommended or intended, or under ordinary conditions, it may present a health and safety exposure or other hazard.

Additional Information

This product may not be compatible with all environments, such as those containing liquid solvents or extreme temperature or pressure. Please request information if considering use under extreme conditions or use beyond current product labelling.


**SECTION 2: HAZARDS IDENTIFICATION**

**GHS Classification:**

Health	Environmental	Physical
Acute Toxicity – Not listed (NL) Eye Corrosion – Corrosive* Skin Corrosion – Corrosive* Skin Sensitization – NL Mutagenicity/Carcinogenicity – NL Reproductive/Developmental – NL Target Organ Toxicity (Repeated) – NL	Aquatic Toxicity – NL	NFPA – Flammable gas, hydrogen (during charging) CN - NL EU - NL

\*as sulfuric acid

**GHS Label: Lead Acid Battery, Wet**

<b>Symbols:</b> C (Corrosive)	
	
<p align="center"><b>Hazard Statements</b></p> Contact with internal components may cause irritation of severe burns. Irritating to eyes, respiratory system, and skin.	<p align="center"><b>Precautionary Statements</b></p> Keep out of reach of children. Keep containers tightly closed. Avoid heat, sparks, and open flame while charging batteries. Avoid contact with internal acid.

**EMERGENCY OVERVIEW:** May form explosive air/gas mixture during charging. Contact with internal components may cause irritation or severe burns. Irritating to eyes, respiratory system, and skin. Prolonged

## 10 Provision of Personal Protective Equipment

It is the policy of Coolmine Therapeutic Community to provide the required protective equipment and to replace worn or defective items on presentation to management. A Personal Protective Equipment (PPE) register shall be kept by Coolmine Therapeutic Community of all PPE issued to its employees. A copy of the register form is attached in Appendix 5. The respective Manager(s) shall identify the appropriate protective equipment for tasks, which cannot be made safe by any other practicable means.

Responsibility for ensuring that the equipment is used properly rests with the managers/supervisors who will ensure that all employees within their area of responsibility are properly instructed in the maintenance and use of protective clothing and safety equipment.

### PPE Training

Coolmine Therapeutic Community is committed to providing all its employees with the necessary training with respect to the PPE required for use in the workplace. Prior to beginning work in an area that utilizes PPE, all new employees shall receive training by the manager or a nominated person.

It is the responsibility of the Safety Officer to provide safety training specific to the job and the area in which any employee new to the area must work. Information regarding the use of new PPE shall be communicated to all affected employees by the supervisor/manager prior to introducing the PPE into the area.

### Gloves

Gloves should be worn wherever possible to prevent injury from contact with hot, cold or rough/sharp surfaces and chemical contact. Various types of gloves are available and must be selected carefully to ensure the type used is suitable for the task, particularly if working with chemical products. Gloves that are no longer in use should be disposed of properly into rubbish bins, do not leave them lying around the workplace. Safety Data Sheets should always be referred to in order to ensure appropriate gloves are being worn when handling chemicals.

### Eye Protection

Aerosols or splashes from harmful or irritating liquids along with dusts can irritate and damage eyes, it is important that Coolmine Therapeutic Community employees wear correct eye protection while decanting harmful liquids or carrying out work which produces dust or flying particles.



## 11 Welfare Facilities

All necessary welfare facilities required by legislation will be provided in accordance with the *Safety, Health and Welfare at Work (General Application) Regulations, 2007*.

### Rest Rooms, and Eating and Drinking Facilities

Employees will be supplied with safe drinking water at easily accessible locations, where drinking fountains are used the faucets will be equipped with guards to prevent users making direct contact with their mouths. All employees will be provided with necessary facilities to allow them to prepare and consume food. This area must be located away from work processes which may cause contamination of food and must include equipment such as a kettle for boiling water, a refrigeration unit to store food and a means for heating food. Employees will also be provided with tables equipped with a surface which is easily cleanable and suitable seating. Where staff members are undertaking strenuous work or work which involves standing for prolonged periods of time and do not possess offices or work stations where they may relax, the eating facilities shall be equipped with chairs possessing backs.

### Toilet Facilities

Employees will be provided with adequate toilet facilities, these facilities shall be segregated by gender where more than one person may enter the facility at once and the door cannot be locked from the inside. Employees shall be provided with adequate amounts of soap and hot and cold water with which to wash their hands, the temperature of the water shall be moderated to prevent accidental scalding. Employees will be supplied with appropriate apparatus with which to dry their hands and practices such as using one towel per bathroom will not be used. In addition, bathrooms shall be equipped with hooks that staff may hang their clothes on. Female toilets will be equipped with proper bins for the disposal of sanitary towels, and the urinals in Male toilets shall be positioned where they cannot be seen from the doorway. Toilets will not open directly onto the store floor unless there is adequate ventilation nor will they open directly into an eating area under any circumstances.

### Cloak Rooms and Changing Facilities

Employees will be provided with a secure place to store their coats bags and other valuables. All employees who are required to wear uniforms or specialized work clothing will be provided with a secure area to change and lockers to store their clothes. As with toilet facilities, the changing rooms will be segregated by gender where the facility accommodates more than one person and cannot be secured from the inside.

### Cleaning and Maintenance

Management at Coolmine Therapeutic Community will ensure that all staff welfare facilities are kept clean and tidy, and that any damage is repaired immediately. Employees reminded that they must not abuse any facility provided and that they are required to clean up after themselves and leave the facilities as they found them.

## 12 Harassment / Bullying Policy

In accordance with the general duties in *Part 2 General Duties*, of the *Safety, Health and Welfare at Work Act, 2005*, and *Section 12* of the *Employment and Equality Act 1989* and the Report of the Task Force on the Prevention of Workplace Bullying, H.S.A., 2001 an anti-bullying/harassment policy is in place.

Coolmine Therapeutic Community is committed to providing a work environment free of any kind of bullying or harassment. This bullying and harassment policy applies to all persons involved in the operations of Coolmine Therapeutic Community and prohibits bullying or harassment by any employee of the Project, including supervisors, managers, co-workers and visitors, as well as by any person doing business with or for the Project.

**Harassment** - occurs if any person feels intimidated, humiliated, patronised or embarrassed by the derogatory, offensive or discriminatory remarks or actions of others. Harassment may interfere with job performance, undermine job security or create a threatening or unpleasant work atmosphere.

**Sexual harassment** - is unwanted behaviour of a sexual nature by one employee towards another. Sexual harassment can be defined as conduct towards another person that is sexual in nature. Examples of sexual harassment include:

- Sexual gestures;
- Displaying sexually suggestive material, such as pictures or sending suggestive or sexually explicit correspondence;
- Unwelcome sexual comments or jokes;
- Unwelcome physical conduct, such as unnecessary touching, pinching etc.

**Racial harassment** - is unwanted behaviour of a racial nature by one employee towards another.  
Examples may include:

- Abusive language, mockery or racist jokes
- Display or circulation of racially offensive material
- Racial name calling
- Intrusive or persistent questioning about a person's racial or ethnic origin, culture or religion
- Exclusion from normal workplace conversation or social events

**Bullying** - Is defined as repeated verbal, psychological or physical aggression by an individual or group against others that could be regarded as offensive, humiliating or intimidating. Any such activity is viewed as an act of misconduct.  
Examples may include:

- Manipulating the victim's reputation by rumour, gossip and ridicule;
- Social exclusion or isolation;
- Preventing the victim from speaking by voicing loud criticisms or obscenities;
- Manipulating the nature of their work or the ability of the victim to perform their work, e.g. by overloading, withholding information or setting meaningless tasks; thus ensuring that work cannot be completed

It is important to remember that an isolated incident does not amount to bullying; bullying is a sustained effort on the part of the perpetrator(s).

Coolmine Therapeutic Community deplores all forms of harassment and seeks to ensure that the working environment is comfortable and secure for all its employees. The person responsible for this Policy is the Manager responsible for HR, but all employees share a responsibility in ensuring the day-to-day practical application of the policies.

Where informal methods fail and harassment or bullying persists, employees are advised to bring a formal complaint and should do so in writing.

Employees are advised to remember to;

- Always give an accurate account of what happened and clearly state your grievance.
- At all stages in the grievance procedure the employee should be aware that they have the right to be accompanied by another member of the Project.
- Every attempt will be made to resolve the grievance issue speedily and appropriately.
- The employee has a right to copies of meeting minutes taken at all stages of the procedure. It is recommended that the form attached should be used at all stages.
- The time limits are only a guide; they can be changed if all parties agree to it.
- The Manager will remain neutral throughout the grievance procedure and is available to any party who needs advice.
- Although grievances are often solved verbally, it is advisable to keep some form of written record of minutes taken if a case is ever appealed or referred to a third party.

Coolmine Therapeutic Community will immediately undertake an effective, thorough and objective investigation of the harassment allegations. Once the investigation is completed and determination is made regarding the alleged harassment/bullying, the result is communicated to the employee as soon as possible. Any employee who brings a complaint of harassment will not suffer for having brought the complaint; however, disciplinary action will be taken against employees whose allegations of harassment are found to have been malicious.

## 13 Stress Policy

Coolmine Therapeutic Community adheres to all aspects of the *Safety, Health and Welfare at Work Act, 2005*, which obliges employers to identify and safeguard against ALL risks to safety and health, including stress.

The effects of stress depends on the person, some people find a small amount of stress to be beneficial, providing them with energy and motivation this type of stress is known as eustress, while others cope poorly with stress or any kind, stress which has a negative effect on a person is known as distress. When the demands placed upon a person by their job or working environment exceeds their capacity to cope, they can suffer from distress. This type of stress can have varied effects depending on the person's individual coping methods. These can include depression, aggravation, nervous breakdown, muscle tension, substance abuse, sleep deprivation, and high blood pressure leading to heart attack. The outcomes of stress in the workplace not only affect the employee it can impact their colleagues and persons involved in their life outside work.

Causes of stress in the workplace:

- Poorly organised shift work
- Faulty work organisation
- Poor working relationships
- Poor communication at work
- Ill-defined work roles
- Highly demanding tasks
- The threat of violence

Safeguarding safety and health from the effects of stress is based on the same approach as that of any other hazard.

- Identification of potential problems
- Assessment of risks
- Implementation of safeguards
- Monitoring the effectiveness of safeguards.

Coolmine Therapeutic Community will utilise the following methods to deal with issues of stress:

- Ensure that Supervisors/Managers are aware of the potential causes of stress and the early warning signs
- Ensure that all complaints that may be related to stress are listened to and appropriate measures taken.

- Where Supervisors/Managers are aware that a workload or conditions of work are particularly stressful, measures should be taken to reduce the workload or improve conditions.

Vigilance is a key component to stress management; many people suffering from stress choose to suffer in silence fearing that coming forward to ask for help will be seen as a sign of weakness which may put their jobs at risk. It is imperative that managers and supervisors take appropriate action when they notice signs of stress.

## 14 Smoking Policy

No smoking is allowed in any enclosed area of the workplace. This policy is in accordance with *The Public Health (Tobacco) Acts, 2002 & 2004 – Section 47, Smoking Prohibitions*.

It is the objective of Coolmine Therapeutic Community to take as far as is reasonably practical, all reasonable steps to safeguard the health, safety and welfare of all employees and to meet or exceed all relevant safety regulations and legislative requirements. In accordance with this objective Coolmine Therapeutic Community will protect all employees, contractors and visitors from the discomfort and health risks associated with passive smoking.

Smoking shall not be permitted in any enclosed area of the workplace as defined by *The Public Health (Tobacco) Acts, 2002 & 2004 – Section 47, Smoking Prohibitions*.

All *NO SMOKING* signs are to be observed at all times. It is an offence to smoke in non-designated smoking areas or at or near exits and fire exit points.

Any employee found to be smoking and in breach of this regulation will face disciplinary measures and may be liable to instant dismissal.

Smoking is not permitted at or near areas where waste, paper, cardboard, oils or any other flammable materials are stored as this presents a fire hazard.

## 15 Alcohol and Drugs Policy

The *Safety, Health & Welfare at Work Act, 2005*: Requires all employers to provide safe places of work and safe systems of work. This covers the management of staff to ensure that they are not unable to carry out their work without risk to others due to consumption of drugs or alcohol

- Employees are not allowed to attend their workplace to carry out duties whilst under the influence of illicit drugs or alcohol. Any person found breaking this rule will be liable to disciplinary procedures.
- Any employee who in the opinion of Management shows apparent signs of the effects of intoxicating liquor or drugs, may be required to leave Coolmine Therapeutic Community premises immediately and may be asked to attend a nominated medical doctor for a drug and alcohol test.
- Employees required to leave the premises will forfeit payment for the remainder of the shift / day.

In the interest of Safety and Health, Coolmine Therapeutic Community reserves the right to carry out random Drug and Alcohol tests on any of its employees at any time.

Any person under medical supervision, or on prescribed medication who has been certified fit for work, should notify the Safety Officer or their supervisor of any known side effects or temporary physical disabilities, which could hinder their work performance and which may be a danger to either themselves or their fellow workers. Management will arrange to assign appropriate tasks for that person to carry out in the interim.

## 16 Behaviour and Suicide Assessment Policy

Coolmine Therapeutic Community aims to provide an environment where our clients may recover and overcome addiction in safety and comfort, and where our employees can work without risk of harm. In order to achieve this goal prospective clients must be assessed for behaviour which may lead to harm inflicted on themselves or others, and staff must be trained in methods for managing clients with a self-harm ideation.

Coolmine Therapeutic Community will ensure that, all clients, including those who are involved in behaviour which could cause harm to themselves or others, shall be treated as individual with specific needs.

### Assessment and Management of Risk Process

An assessment is carried out initially as part of the referral process. This is intended to identify any risks of harm relating to the likely behaviour, health or other aspects of specific clients that cannot be managed within the project.

- If the likelihood of risk-related behaviour is identified at assessment a prospective client will be deemed an inappropriate referral until such time as circumstances change and the risk is alleviated.
- The assessment will highlight any special psychiatric requirements of each client, such as a necessity for psychiatric reports or assessments, and in the case that a client is admitted following psychiatric treatment or assessment all related documentation should be available in their file.

All relevant information pertaining to risk of harm will be communicated to staff this shall include;

- misuse of drugs or alcohol
- victimisation
- isolation and loneliness
- mental health problems and symptoms
- disclosure of past or present abuse

Staff will be observant and sensitive to these issues at all times in order to ensure that there is no increased risk of harm by a client to themselves or others.

When staff are concerned that there may be a potential increase of risk or feel that management of risk plan is insufficient, they will record these concerns in the client's file with a note in the Communication Book. Where concern of an increased risk of harm is raised, the key worker, or other relevant staff member on duty will analyse and assess the perceived risk and suggest a management plan. Any risk management plans developed under concern for increased risk to clients will be discussed at the handover, during the hand over procedure the plan will be discussed and where necessary refined.

Under the normal course of action this plan will be devised in consultation with the client, the only reason not to involve the client immediately in the analysis of risk is when it is judged that such open discussion might increase the likelihood of harm. If the client has been excluded from the process, the reasons for doing so will be discussed at handover. In such circumstances staff will continually assess the situation and involve the client when an appropriate opportunity arises.

The management of risk may involve referring the client to an outside agent such as the Coolmine Therapeutic Community G.P. or a consultant with whom the client already has contact, or the Mental Health Services.



### **Managing Self Harm and Suicidal Ideation**

A client is considered to display suicidal ideation if they express verbally a definite intention to end their life e.g. 'I am going to kill myself', 'I don't think I can go on'. In such a case the client should remain under constant observation by staff, and the environment should be carefully monitored to minimise risk.

In the event a client voices self-harm ideation, the Manager (or the On Call Manager) should be contacted for direction on client management. Following assessment of the risk, which should always be completed through talking with the client, a decision will be made on whether to contact Ambulance Services and discharge the client to Accident and Emergency for a psychiatric assessment.

If an ambulance is not called contact should be made with the local G.P. practice serving Coolmine Therapeutic Community project, for assisted management of the client.

Dr. Maguire, of 2 Main Street, Blanchardstown Village, Dublin 15 is the G.P. serving the residential projects of Coolmine Therapeutic Community he can be contacted at 01 821 3303  
Should Dr. Maguire be unavailable the doctor-on-call working with Dr. Maguire should be contacted.

In the event the on-call doctor is unavailable, the out-of-hours GP service for residential services DDOC (Dublin North City and County) will be contacted at 1850 22 44 77 (Mon-Fri 6pm-8am, Sat-Sun and Bank Holidays 24hr cover).

If there is any doubt at any stage about the level of risk to the client Ambulance Services will be called at 999 or 112.

A Behaviour Contract for Change will be drawn-up with the client to put in place extra support for the client. It will be stressed that the client will be discharged if they self-harm. If the client does actively self-harm then the staff should immediately phone for ambulance assistance and discharge the client to Accident and Emergency at 999 or 112.

### **Responsibility**

It is the responsibility of management and staff to ensure that establishment, implementation and maintenance of this policy is clearly communicated to resident/clients and visitors to any of the Coolmine Therapeutic Community facility. The managers at Coolmine Therapeutic Community are responsible for ensuring that all policies and procedures are implemented effectively and efficiently. All other staff and volunteers are expected to facilitate this process.

## 17 Difficult and Challenging Behaviour Policy

Difficult or challenging behaviour includes hostile or aggressive verbal or physical behaviour that is sustained and may result in harm to self, others or property. Clients will experience a range of emotional states and difficult situations while in treatment and that these situations may at any time give rise to challenging behaviour. It may also be provoked by a conflict between two or more clients or between a client and a member of staff. It is the policy of Coolmine Therapeutic Community to protect staff and clients from the effects of difficult or challenging behaviour, while recognising that those who carry difficult or challenging behaviour are individuals with specific needs which need to be taken into account.

### One to One Sessions

Conducting one to one session leaves staff in isolation and at a significantly higher risk of harm due to difficult or challenging behaviour. For their own security staff should familiarise themselves with their clients taking into account any issues or topics which have triggered difficult or challenging behaviour in the past, they should inform other members of staff prior to conducting one to one sessions and during the session they should position themselves closest to the door at a reasonable distance from the client.

### Diffusing Difficult and Challenging Behaviour

The most effective way to deal with emotionally distressed or irate clients and to diffuse tense situations caused by their behaviour is to act assertively. Staff need to be aware of their own behavior as it may serve to antagonize a client and cause the situation to escalate rapidly. Staff should conduct themselves in a calm and professional manner, avoiding the urge to rise to or retaliate to any form of insult or challenge and should not act in any other manner which could be perceived as being arrogant, challenging or aggressive.

When speaking to clients exhibiting difficult or challenging behaviour, staff must do so in a calm level tone. They should reassure the client, attempt to establish the cause of their distress and try to discuss a plan of action to help alleviate the problem. Any plan of action discussed should be followed through where possible; if it is not possible to implement such plans staff should explain the reasoning to the reasoning for this and develop an alternative workable plan of action. Sometime distressed clients may simply require time to themselves to recover from an episode and staff should provide them with a quiet area to allow them to do so.

Difficult and challenging behaviour can often result from conflict within a group it is important to that staff remain aware of tensions forming in groups and take steps to stop antagonistic behaviour as soon as it begins. Clients must be protected from harm resulting from difficult and challenging behaviour and where it occurs; staff must direct them to leave the room while they attempt to diffuse the situation.

### Threat of Violence

If a client becomes abusive or violent staff must leave the room and inform a colleague that they need support. Unless under threat of imminent attack; leave the room by moving slowly and purposefully while maintaining eye contact but without staring. Staff may not engage in violence or attempted to restrain a client, unless it is in self-defense and to do otherwise would result in harm to the staff member. All instances of violence must be reported to the Gardai.

### Reporting Procedure

Full and comprehensive reporting is essential where an individual exhibits challenging behaviour, especially if it is potentially or actually physically harmful. A verbal report should be made to the Manager within 24 hours. In some cases the Manager should be notified immediately, depending on the severity of the situation. Staff should always contact the Manager if in doubt. Records of the incident should be made in the Communication Book, Client file and on a Critical Incident Form (if appropriate).

**Responsibility**

It is the responsibility of management and staff to ensure that establishment, implementation and maintenance of this policy is clearly communicated to resident/clients and visitors to any of the Coolmine Therapeutic Community facility. The managers at Coolmine Therapeutic Community are responsible for ensuring that all policies and procedures are implemented effectively and efficiently. All other staff and volunteers are expected to facilitate this process.

## 18 Policy on Violence

Violent Incidents include any physical assault, threatening behaviour, or verbal abuse. This includes threats, an intimidating presence, and harassment of any nature such as being followed, sworn, or shouted at. Clients will experience a range of emotional states and difficult situations while in treatment and that these situations may at any time give rise to violent incidents, and it is important that staff conduct their work in awareness of this fact. Coolmine Therapeutic Community will enact all necessary steps to protect staff and clients from acts of violence with empathy and for those who may be involved in such acts, respecting as individuals with specific needs.

### One to One Sessions

Conducting one to one session leaves staff in isolation and at a significantly higher risk of harm violent behaviour. For their own security staff should familiarise themselves with their clients taking into account any issues or topics which have violent behaviour in the past, they should inform other members of staff prior to conducting one to one sessions and during the session they should position themselves closest to the door at a reasonable distance from the client.

### Response to Disruption and threat of Violence

On becoming aware of disruption or violent incident, staff should establish how incident arose, estimate the seriousness of the problem and the potential outcome, and decide how to respond. When trying to resolve the issue, project themselves as being calm and in control ensuring that they do not mark themselves as an opponent or potential victim. Staff must make it clear that they have received the violent message but you are not prepared to put up with their aggression.

There are a number of techniques that a member of staff can use to help diffuse the situation and calm the client down. They can allow the aggressor to vent and show empathy to them, this can help to create a rapport and depersonalise the issue. They may also try to using humour or reminding them of the Coolmine Therapeutic Community policy of not tolerating threats or violence or aggression and what they stand to lose if they continue with their violent behavior.

Sometimes the presence of a member of staff or other residents can serve to antagonize. Staff may wish to exercise their best judgment and choose to step aside and allow clients to resolve the issue themselves or arrange for the aggressor to be left on their own to cool off.

Whatever the chosen method for dealing with a violent situation staff must remember that their own safety is paramount and must not put themselves at any unnecessary risk.

### Response to Violence

If the incident becomes violent, staff should phone 999 or 112 (mobile) and ask for Garda assistance. If someone has been injured and requires medical attention dial 999/112 and ask for the ambulance services. If a resident wishes to report an assault to the Gardaí, the phone-call should be facilitated in a supportive way and in private. Staff should discuss their options with them. If staff need support from a manager and the incident occurs out of office hours the On-Call Manager should be contacted.

Any client found to have perpetrated an act of violence resulting in harm to staff, other clients or damage to Coolmine Therapeutic Community property will be discharged from the service.

### Reporting

Full and comprehensive reporting is essential where violent threats or actual violence occur. A verbal report should be made to the Manager within 24 hours. In some cases the Manager should be notified immediately, depending on the severity of the situation. Staff should always contact the Manager if in doubt. Following the verbal report, a written reports must be made these reports will be made communications book, client file, critical incident form and violent incident support questionnaire. Once these reports have been made the findings will be reviewed and any necessary changes will be made to relevant existing risk assessments and client care plans as necessary.

**Responsibility**

It is the responsibility of management and staff to ensure that establishment, implementation and maintenance of this policy is clearly communicated to resident/clients and visitors to any of the Coolmine Therapeutic Community facility. The managers at Coolmine Therapeutic Community are responsible for ensuring that all policies and procedures are implemented effectively and efficiently. All other staff and volunteers are expected to facilitate this process.

## 19 Management of Blood and Bodily Fluids

Spillage of blood and bodily fluid has the potential to facilitate the spread of blood borne diseases and pathogens to persons who come into contact with them. In light of the potential risks it is the policy of Coolmine Therapeutic Community to do everything possible to ensure that the situation is dealt with efficiently taking all practical precautions to minimise the risk to clients, staff and anyone else in the vicinity.

### Managing Spillage of Blood

In the event of someone on the grounds or on the premises of, or in the care of Coolmine Therapeutic Community, suffering an incident which results in a cut, abrasion or other wound which results in spillage of blood that person should stay in the spot where the incident occurred, to minimise the area in which blood is or may be spilled.

If the person who has suffered the injury is in an isolated place they should go to a place where they can make contact with the nearest staff member, or the nearest available person who can summon a staff member on their behalf, and then remain in that place until assistance arrives, to minimise the area in which blood is or may be spilled.

The member of staff dealing with the situation should don latex gloves and bring a First Aid box to the place where the person is waiting for assistance, having made a quick check that the necessary materials are in the box. These include;

- Latex gloves
- Antiseptic wipes
- Plasters
- Sterile Dressings
- Bandages
- Scissors

On arriving at the scene the staff member should assess the seriousness of the injury and offer the appropriate assistance. In the event of a minor cut or abrasion then the staff member should offer the First Aid materials to the injured party so that they can administer First Aid to themselves. In the event that the injured party is not a member of staff then the staff member attending should supervise and direct this process.

Where reasonably practical the area around the wound should be washed with warm clean water in order to remove any dirt and minimise risk of infection. An antiseptic wipe can be applied to the wound before the application of a plaster for sterile dressing and bandage as appropriate.

After the wound has been attended to any spillage of blood on clothing or in the vicinity should be attended to. In the case that the injured party is a client or a member of staff then they should attend to the spill themselves, providing they have sufficiently recovered from their injury or any associated shock. In the case of the injured party being a visitor or some other person otherwise not in the employ or care of Coolmine Therapeutic Community then staff should attend to this concern.

All environmental blood spillages should be cleaned with a solution of 5 parts water to one part bleach. A special mop and bucket are clearly marked and set aside exclusively for the purpose of cleaning spills of blood or body fluids.

In the event of a blood spillage on a client's clothing then the clothing should be removed and double-bagged in the place where First Aid has been administered, clearly marked for specific attention in the laundry. The laundry supervisor should be informed of the whereabouts and contents of the bag and a specific person assigned this responsibility. In the case that the laundry supervisor will not be available until the next shift this necessity should be handed over and noted in the staff Communications Book.

In the event that staff consider that the wound is deep and/or where bleeding is continuous, the wound should be temporarily bandaged and an ambulance called immediately. All First Aid materials, tissues, cloths and any other material that has come in contact with blood should be double-bagged and disposed of in a sanitary bin or other suitable biohazard disposal unit where possible and where not possible should be double-bagged, clearly marked and set-aside in a safe place for later safe disposal.

The surface or item that caused the wound should be washed in a solution of 5 parts water to one part bleach, or in the case of disposable sharps or shards of a broken item, be disposed of in a sharps bin. All environmental spillages should be cleaned with a solution of 5 parts water to one part bleach. The bucket and mop should be thoroughly washed with disinfectant following the clean-up.

### **Managing Spillage of Other Bodily Fluids**

A spillage of other body fluids (vomit, urine, faeces) is a possible indication of serious illness and staff should refer to the Contacting a G.P. procedure. Any person attending to such a spillage should wear latex gloves throughout the process. If the spill is on the clothes of staff or visitors to the project then they will be reminded of the potential risk to themselves and others of this spill and be advised to take sensible precautions as outlined for clients above.

### **Responsibility**

It is the responsibility of management and staff to ensure that establishment, implementation and maintenance of this policy is clearly communicated to resident/clients and visitors to any of the Coolmine Therapeutic Community facility. The managers at Coolmine Therapeutic Community are responsible for ensuring that all policies and procedures are implemented effectively and efficiently. All other staff and volunteers are expected to facilitate this process.

## 20 Pregnant Employees

Coolmine Therapeutic Community adheres to the provision of the *Safety, Health and Welfare at Work (General Applications) Regulations, 2007*.

These regulations apply to employees that are pregnant, have just had a baby or are breast-feeding (within the first 26 weeks after birth). If Management is notified of any of the above, an assessment of any hazardous activities relating to the employee will be carried out.

The following hazards must be considered:

- Physical shocks, including direct blows to the abdomen.
- Handling a load.
- Movement and postures, which are abrupt or severe, or give, rise to excessive fatigue.
- Non-ionising radiation.
- Chemicals: (In particular any chemical which is harmful by inhalation or when absorbed through the skin, i.e. organic solvents).

A pregnant employee must not be exposed to these hazards unless they are adequately controlled. Adequate control means:

- The hazard is reduced to a level, which will not harm the pregnant woman or the developing child or breast-fed child.
- If any of these risks are present, they must either be eliminated or safeguards put in place to protect the employee's safety and health.

These safeguards include:

- Changing the type of work, working hours, etc.
- Moving the employee to other safe work.

If these safeguards are not possible then the employee must be granted safety and health leave. This is paid leave, which continues until either the conditions change or else the pregnant employee becomes eligible for paid maternity leave.

Pregnant women and nursing mothers will have the facility to a rest area if necessary. All pregnancy risk assessments in Coolmine Therapeutic Community will be conducted by the Manager in charge of HR and Safety Officer. The scope of the assessment reflects the current legislation under the Safety, Health and Welfare (General application) Regulations 2007.



## 21 First Aid

The provision of first aid equipment required by legislation will be provided in accordance with *General Application Regulations 2007*. Coolmine Therapeutic Community is committed to having an adequate number of persons who are qualified to administer first aid.

First aid kits are located in designated areas in Coolmine Therapeutic Community premises. The location of these first aid kits will be communicated to all employees premises and will be signposted in accordance with current legislation. The names and contact numbers of employees trained in occupational first aid will be available beside the first aid box.

First aid kits are to be used for the treatment of minor injuries sustained at our premises. Management will ensure that first aid kits are fully stocked up with the required contents as outlined by the HSA (**See Appendix 2**) through regular inspection and replenishment. If a first aid kit requires replenishment between inspections management must be notified.

Under no circumstances will medicines of any description be stored in first aid boxes.

Following an accident requiring first aid treatment, even if it is considered to be a minor accident, an accident report form must be completed. In the event of a serious injury requiring medical treatment from a doctor or hospital, ambulance service must be called, the Manager must be notified and a full accident investigation must be carried out.

### Trained First Aider Responsibilities

Coolmine Therapeutic Community is committed to ensuring that there are sufficient numbers of trained first aiders on site to at any one time to meet the first aid requirements of the Project. The responsibilities of the first aiders are as follows;

- To assess a situation quickly and safely, and summon appropriate help.
- To Assess as far as is possible within their level of competency, the injury or the nature of the illness affecting the casualty,
- To give appropriate and adequate treatment in a sensible order or priority with their level of competency,
- To advise their manager or supervisor immediately of any first aid treatment they administer,
- To liaises with the manager for the appropriate removal of the casualty to hospital, the care of a doctor or home if appropriate,
- To record incidents requiring first aid in the first aid treatment book and any relevant section of the accident report form,
- To maintain their own competence by attending first aid courses at appropriate intervals,
- To maintain confidentiality between themselves and the patient when treating or attending to any medical condition.

First Aiders are trained to provide accepted first aid practices at the time of their training and must not carry out any treatments outside their level of competence.

The following practices must not be carried out by First Aiders;

1. The use of tourniquets,
2. The administration of any medication including paracetamol,
3. The removal of foreign bodies from the casualty's body. This includes glass and splinters,
4. The use of antiseptic creams or other ointments/lotions

## 22 Emergency / Fire Procedures

Evacuation drills (limited to staff areas) will take place at Coolmine Therapeutic Community annually as required. After each drill a review will be carried out to evaluate procedures and carry out any remedial action deemed necessary. Employees are reminded to familiarise themselves with evacuation procedures and their nearest evacuation route so that a fast and effective evacuation of the premises can be completed in the event of an emergency.

The *Fire Services Act, 1981* states that a fire register should be retained on the premises which notes the regular inspection and maintenance of all fire extinguishing systems, date of fire evacuation drill, testing of the emergency lighting and automatic detection systems.

A Fire Register is kept by Coolmine Therapeutic Community and it is the responsibility of the Safety Officer or a designated person responsible for Fire Safety (Fire Warden) to ensure that this register is retained for inspection by a statutory body. The fire register will include Project details, specific duties for employees in the event of a fire, a log of fire procedure, notices and fire drills, an inventory of firefighting equipment held by Coolmine Therapeutic Community and a record of employee instruction/training and a maintenance/test/inspection schedule.

In the event of a fire, the register should be removed to the fire assembly point.

### List of Emergency phone numbers

Ambulance	999 / 112
Gardai	999 / 112
Fire	999 / 112
Health and Safety Authority (HSA)	01 662 0400



### Fire Prevention Policy

The risks of a fire occurring on Coolmine Therapeutic Community premises is considered low taking into account the following preventive procedures:

- There will be proper waste receptacles and these will be emptied on a daily basis
- All electrical equipment conforms to ETCI guidance and is certified and maintained as such.
- All employees have received basic training on fire prevention.
- Fire doors/fire extinguishers are serviced and inspected annually.
- Fire detection systems and emergency lighting throughout premises will be tested regularly.

## General Emergency Procedure

### On Hearing the Alarm;

1. Deactivate any work equipment if it is safe to do so,
2. Leave the building by the nearest safe exit route,
3. Close all doors behind all you,
4. Report to your designated assemble point and remain there until you are told that it is safe to re-enter the building,
5. Do not return to the building for any reason.

### On Discovering a Fire;

1. On discovering a fire, the employee should immediately raise the fire alarm,
2. Attempts to extinguish the fire should only be made after the fire alarm has been raised and if the person feels confident enough and has been trained to use the firefighting equipment correctly. At all times the persons attempting to extinguish the fire should place themselves between the fire and the exit route,
3. Leave the building by the nearest safe exit route,
4. Close all doors behind all you,
5. Report to your designated assemble point and remain there until you are told that it is safe to re-enter the building,
6. Do not return to the building for any reason.

## Emergency Procedures for Visitors and Contractors

Upon arrival to the Project all visitors and contractors will be made aware of emergency evacuation procedure, and the area which they are required to assemble at. A record of all visitors and contractors entering the premises should be maintained in the form of a signing in log book. This book records;

- The name of the visitor or contractor,
- The company that they work for,
- The time and date that they entered the premises,
- The time and date that they left the premises,

In the event of an emergency evacuation the log book must be removed assembly point, where a roll call of all visitors and contractors will be carried out.

## Evacuation Procedure for Visitors and Contractors

1. All visitors and contractors are required to check in and out with a member of staff when entering and leaving the premises,
2. Upon hearing the fire alarm all visitors and contractors must leave by the nearest safe exit route,

3. Visitors and contractors must assemble at their designated assembly point and await further instruction from the receptionist,
4. Visitors and contractors must not re-enter the building for any reason until told that it is safe to do so.

## 23 Accident/Incident Reporting and Investigation

All notifiable accidents and dangerous occurrences will be reported to the Health and Safety Authority (HSA). This only applies to *3 day accidents* (excluding the day of the accident) and prescribed dangerous occurrences listed in schedule 12 of the Safety Health and Welfare at Work (General Application) Regulations 1993.

If an employee is absent from work for more than three calendar days due to an industrial injury or illness, it is a statutory requirement that formal notice is given to the Health & Safety Authority on the appropriate form 'IR.1' (available on [www.hsa.ie](http://www.hsa.ie)). Similarly, dangerous occurrences will be reported on the appropriate form 'IR.3'

All notification of accidents or dangerous occurrences to the enforcement authority of the HSA will be completed by the Safety Officer.

All accidents involving a person, whether or not in the employment of the Project, resulting in injury, however slight, must be reported to and recorded by the manager or Supervisor responsible for the area in which it took place on the appropriate accident reporting form and a copy should be sent to the Safety Officer within 24 hours.

An Accident Report form is available for this purpose (shown in Appendix 6) and must be completed by the immediate superior/Manager of the person(s) involved in the accident. This is necessary to monitor the progress of safety standards and to ensure that proper medical attention is given where required and as an aid in the identification of hazards so that the appropriate measures can be taken to prevent the accident from re-occurring.

Where an accident investigation is necessary, all employees are obliged to co-operate fully with the investigators and to provide any information which may be useful in establishing the circumstances leading up to the accident. All accident investigations will be carried out by the Safety Officer and a written report shall be prepared.

### Reporting Procedure — Visitors/Contractors

Any non-employee who is involved in an accident or near-miss incident whilst on the premises must report the incident immediately to the person responsible for his or her presence on site. If the person responsible is not available, the visitor/contractor must obtain the assistance of a responsible person to ensure that the Project procedure is adhered to.

All injuries, however minor, must be recorded. Visitors and contractors who are unable to enter their own account into the book must arrange for another person to make an entry on their behalf.

Contractors should also notify their own employer where applicable.

### Reporting Procedure — Members of the Public

If an injury occurs to a member of the public on Coolmine Therapeutic Community premises which results in their removal from site for hospital treatment, then this is notifiable to the HSA immediately and a form IR1 must be sent within 10 days.

## Critical Incidents

A critical incident is any occurrence either accidental or criminal that could or did cause actual harm to a client or staff member or visitor to Coolmine Therapeutic Community. These include alleged or actual physical/sexual abuse, death, serious injury, serious physical assault (alleged or actual), sexual assault (alleged or actual), of a client or member of staff, or a member of the public whilst at Coolmine Therapeutic Community, a fire or other damage to the project premises which results in major disruption to service, spillages of flammable, caustic or poisonous materials etc. A serious or potentially serious breach of confidentiality threat/use of weapons, even if no injury ensues.

All actual and alleged occurrences of critical incidents will be investigated fully and a critical incident form and full report of the incident will be completed.

## Investigation Technique and Approach

The person carrying out the investigation will establish the bare essential facts: what happened, how and where, in the correct time sequence; also establish who experienced or did what at what time.

The person carrying out the investigation will address more fully how the event happened and why. The objective is to build up an accurate picture of the causation complex, remember there could be more than one. From this information a causative chain, backward in time, for each factor shall be developed.

The level of detail required from an investigation should be sufficient to provide a report which can be used to make significant improvements in health and safety management to prevent recurrence of similar or related accidents or incidents.

In deciding on the amount of resources to commit to any investigation report, it is helpful at an early stage to review the relevant risk assessments in the light of the accident or incident.

## Management Investigation Report

The manager or supervisor of the area where the incident took place shall conduct the investigation as soon as possible and shall forward their report to the Safety Officer.

## 24 Disciplinary Action

Where advice and persuasion fail to achieve compliance with safety and health rules, it is the policy of Coolmine Therapeutic Community to take disciplinary action on the matter.

The following basic procedure will be followed:

- Apart from any case of gross negligence of the Safety Regulations, which may warrant instant dismissal, the employee shall be warned of any shortcomings and given a reasonable opportunity to put them right.
- Should it be necessary to take formal action a number of verbal warnings will be given. This warning will indicate the Specific Regulation or rule which has been breached, how it is to be rectified and the time limit in which it is to be achieved.
- A further warning will be given in writing, should the required improvement not be implemented within the stated period.
- Failure to adhere safety rules following a written warning will result in full disciplinary action as outlined in employees terms of employment and/or the employee being required to undergo training again.
- In any instances of alleged wilful serious breaches of the Safety Regulation, resulting in an accident or not, the case will be investigated rapidly and fully. Depending on the results of the investigation, the employee will face full disciplinary action as outlined in their terms of employment and/or the employee being required to undergo training again.
- All warnings for breaches of Safety Regulations will be noted in the employee's file.
- Coolmine Therapeutic Community may also implement other initiatives to enhance safety performance, from time to time. Such initiatives will be communicated to employees by the Health and Safety Manager or a designated person.



## 25 Visitors and Contractors

Coolmine Therapeutic Community will ensure, as far as is reasonably practicable, the safety of contractors and visitors while on our premises. This also applies to customers attending our Premises.

When entering our premises for the purpose of a business visit or to carry out work, all visitors and contractors shall first check in with a member of staff or management.

### Visitors

Visitors are defined as persons entering the premises for business other than as those contracted to conduct work.

No visits to the premises shall be carried out without prior arrangement. Upon arrival, visitors must sign the visitor's book at reception. All relevant staff must be notified of the presence of the visitors and the purpose of their visitation. Staff will discretely note the general demeanour of the visitor/s to ensure that visitors are not affected by alcohol or other drugs. If a staff member suspects that a visitor/s is intoxicated, stoned, or smells of alcohol, the staff member should escort the visitor/s to a private office and disclose his/her concerns. On confirmation of the staff member's concerns or suspicions, the visitor/s should be asked to leave the facility immediately. Failure to comply with such a request will warrant the Garda being called.

Prior to commencement of visit, Visitors will be notified of all relevant hazards and safety rules and codes of conduct which they adhere to. Visitors will be escorted through building by a member of staff and should they fail to observe any of the rules outlined, the visit will be terminated and they will be asked to leave the premises.

### Contractors

Contractors are persons who enter a company for the purpose of providing a service. Prior to commencing work, an assessment will be carried out to determine whether constant supervision will be required and should short term or long term access be granted based, the likelihood of contact with clients and upon the nature of their work which may include;

- Cleaning,
- Consultancy,
- Maintenance and civil engineering work,
- Installation of plant, machinery, services and systems,
- Maintenance of buildings and facilities,
- Provision of technical services

Contractors will not be allowed to carry out work until the Project has checked and is satisfied that the contractor's Health and Safety procedures are in order. Coolmine Therapeutic Community will check the insurance and contractor's health and safety statements at the procurement stage and this will be verified by way of audit by Coolmine Therapeutic Community. Failure to supply this information will constitute breach of contract and as such, the contract may be terminated.

The contractors must liaise with Coolmine Therapeutic Community Management and discuss and agree the safety precautions deemed necessary by either party to ensure safety on our site. All contractors are required to supply specific information and documentation as requested by Coolmine Therapeutic Community. This information is obtained through the following series of questions developed in line with guidance provided by the HSA.

### A. Experience

1. Do the contractors and their employees have an appropriate level of experience?
2. Are the contractors and their employees familiar with the types of hazards present in Coolmine Therapeutic Community?
3. Are they capable of assessing the risks posed by these hazards?
4. Do they have sufficient knowledge of their statutory duties under health and safety legislation?
5. Can they provide references from other clients who have hired them for similar jobs?

### B. Safety

1. Do they have a current, up to date Safety Statement?
2. Have they ever been prosecuted by the HSA?
3. What procedures do they have in place with regards to managing safety?
4. Has their equipment been service and where necessary, certified?
5. Do they carry out on site risk assessments and prepare method statements?
6. How do they address changes to work processes or other unforeseen hazards/problems?
7. Do they have a policy in place for ensuring that any subcontractors under them are competent and manage their own health and safety to a high standard?

### C. Training

1. Do contractors and their employees possess the necessary safety training?
2. Can they provide evidence of their training and is it up to date?
3. How do they ensure that any contractors working under them have all necessary safety training?
4. What mechanisms are in place to allow them to communicate safety information to their employees and sub-contractors?

### D. Supervision

1. What level of supervision will be used?
2. Who will be responsible?
3. How will they interface with Coolmine Therapeutic Community staff/management?
4. What is their accident reporting procedure?

Failure to supply this information will constitute breach of contract and as such, the contract may be terminated.

Contractors will be made aware of areas where the wearing of PPE is mandatory before they commence work. Coolmine Therapeutic Community will endeavour at all times to ensure that Sections 8-12 (General duties of employers to persons other than their employees) and 15 (General duties of persons in control of places of work) *Safety Health and Welfare at Work Act 2005* are fully complied with at all times. This is in addition to the contractor's own obligations under the *Safety Health and Welfare at Work Act 2005, General Application Regulations 2007* and the *Construction Regulations 2013*.

### Hot Work

All contractors engaged in Hot Work must be issued with a Hot Work Permit prior to any commencement of work and must follow and adhere to all guidelines outlined in the permit.

## 26 Hazard Identification and Risk Assessments

### Hazards

A hazard is any object, condition or practice with the potential to cause injury, harm or loss. Hazards are broken down into various types these include;

- Physical – e.g. dangerous objects, hot or cold temperatures etc.
- Chemical – e.g. irritating and corrosive liquids, flammable substances, vapours and gases, etc.
- Biological – e.g. various agents which can cause infection to spread such as bacteria, viruses and bodily fluids.
- Human factors – varying personal conditions which could pose a hazard to individuals or those around them, e.g. lack of experience, alcoholism, stress, etc.

While hazards which pose an immediate threat such as sharp objects and wet floors are easily recognisable, other hazards may not be recognised until their effects become apparent examples of which include back injury resulting from sustained poor manual handling practice and psychological harm caused by stress. In order to identify these hazards and the necessary controls to protect workers from harm, a risk assessment needs to be carried out.

### Risk Assessment Process

Risk assessments have been conducted for Coolmine Therapeutic Community work activities and are attached to this Safety Statement. The risk assessment process involved the following:

- Identifying the hazards (articles, substances or activities likely to cause harm) present within the workplace.
- Identifying what risks are associated with each of the hazards identified.
- Recording the probability and severity of injury/illness associated with the hazard and calculating the risk rating. The risk rating is arrived at by multiplying the probability of injury by the severity of injury. The probability of an injury occurring is based on the amount of persons exposed to the hazard and the frequency and duration at which they are exposed e.g. a situation where a person is exposed to loud noise for an hour a day has lower probability for an injury occurring than a situation where ten persons are exposed to loud noise for 10 hours a day. Severity is broken down into 4 categories; Minor e.g. cuts and bruises, Serious e.g. broken bones, Severe e.g. disability or loss of a limb, and Fatal.
- Actions are suggested to reduce the risk (control options), in order to ensure that risks are reduced to the lowest level reasonably practicable (see hierarchy of controls below).
- The hazards identified with a 'High' or 'Very High' risk rating should receive immediate attention.

Risk assessments should be reviewed annually and any necessary amendments should be made. They should also be reviewed if there is a change in circumstances e.g. new equipment, processes, procedures etc., following an accident or incident and in the event of new legislation, codes of practice or new guidance being published.

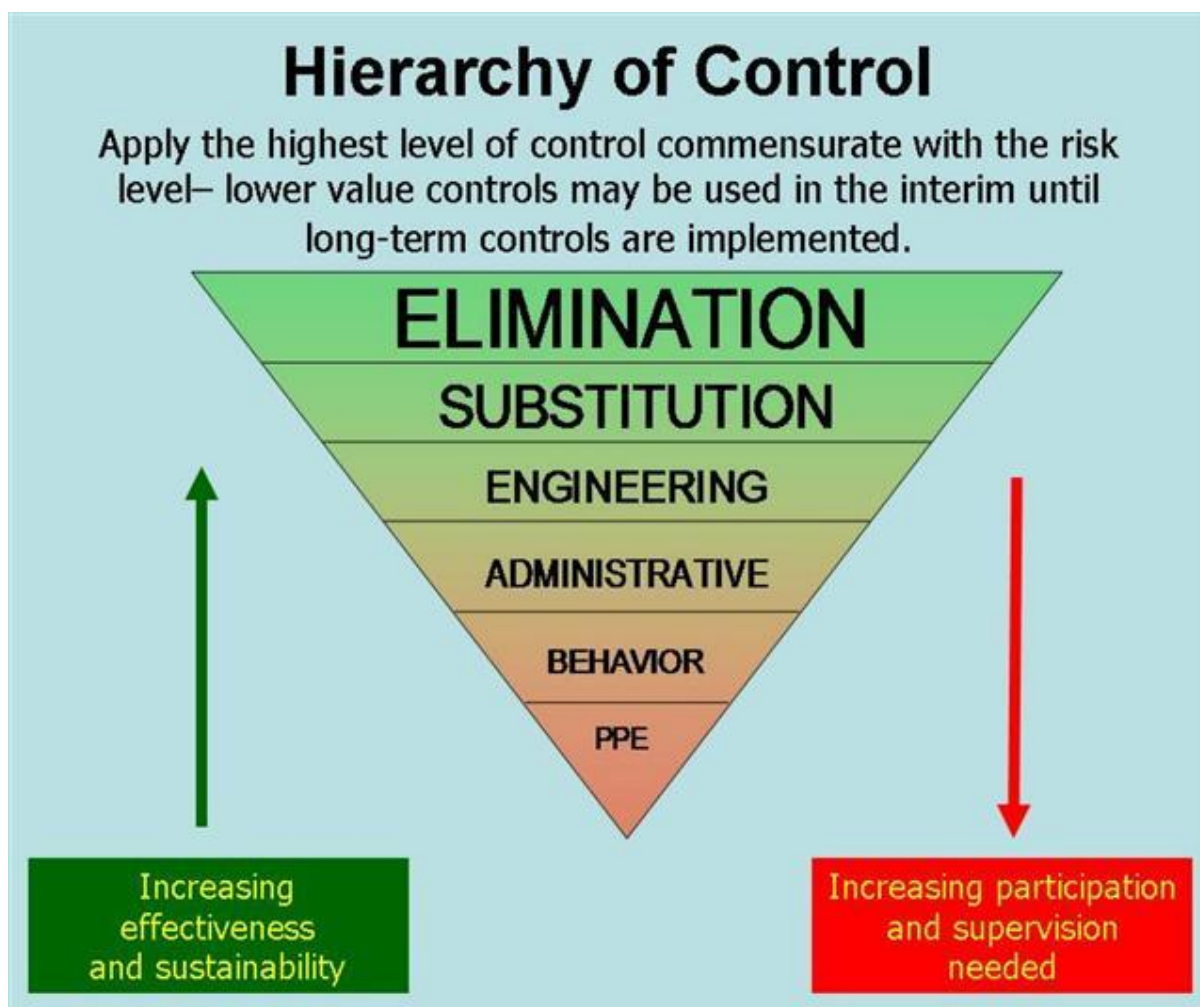
**Risk Rating Matrix**

(Probability) x (Severity) = Risk Rating (RR)

SEVERITY		PROBABILITY			
		4 Very Probable	3 Probable	2 Possible	1 Remote
4	Fatality	16	12	8	4
3	Severe Injuries	12	9	6	3
2	Serious Injuries	8	6	4	2
1	Minor Injuries	4	3	2	1

Risk Rating	Priority	Action Required
Low = 1 - 3	Non-Urgent	No Action Needed No Additional Controls
Medium = 4 - 6	Action Needed	Monitoring Required Assessment Recorded Controls Required as soon as practical
High = 7 - 11	Action Needed Urgently	Controls Required Controls Documented Assessment Recorded
Very High = 12 - 16	Immediate Urgent Action Required	Work Prohibited / Ceased Controls Required Immediately Assessment Recorded Controls Documented Work Stoppage Documented

## Hierarchy of Control



The crucial part of the risk assessment process is selecting the most appropriate method of risk or hazard control. The following 'hierarchy of controls' should be used when deciding on control measures, starting with the first in the list and working down to the last control measure which is the provision of personal protective equipment and clothing.

- 1) **Elimination:** Eliminating the hazard entirely from the workplace is the best way to control it.

Example: provide a trolley to move around boxes which eliminates the need to carry out manual handling.

- 2) **Substitution:** If it is not possible to eliminate the hazard, replace it with something less hazardous, which will perform the same task in a satisfactory manner.

Example: substituting a smaller package or container to reduce the risk of manual handling injuries.

- 3) Engineering Solutions:** If the hazard cannot be eliminated or a safer substitute implemented, then reduce the chance of hazardous contact. Separate or Isolate the hazard from people. This method has its problems in that the hazard has not been removed. The guard or separation device is always at risk of being removed or circumvented.

Examples:

- a. enclosure (enclose in a way that eliminates or controls the risk)
- b. guarding/segregation of people
- c. interlocks and cut-off switches
- d. exhaust fans

**4) Administrative Solutions:**

These are the management strategies which can be introduced such as training, job rotation, limitation of exposure time, provision of written work procedures.

Example:

- a. Safe systems of work that reduce the risk to an acceptable level
- b. Written procedures that are known and understood by those affected
- c. Adequate supervision
- d. Identification of training needs and provision of appropriate training
- e. Information/instruction (signs, handouts)

**5) Personal Protective Equipment & Clothing:**

Personal Protective Equipment and Clothing should always be considered as a last resort. It can also be used as an interim measure in combination with other measures to reduce exposure to a hazard.

**Summary**

The most effective way to control risk is obviously to remove it. Elimination is by definition 100% effective. The further you go down the hierarchy of control list the less effective the methods become.

**Health & Safety Organisational Measures in Coolmine Therapeutic Community****Training**

All new employees recruited to Coolmine Therapeutic Community are given Health and safety training on induction into the Project. This process will be documented in their HR records and retained on file.

**Safety Statement**

The Safety Statement is available to all Coolmine Therapeutic Community staff and to interested stakeholders on request. A copy of the statement is held in our main office.

**Accident Investigation & Reporting**

All accidents involving Coolmine Therapeutic Community staff are investigated fully by the Health and Safety Officer and reported to the HSA if applicable.

**Site Emergency Procedures**

Employees are made aware of the emergency procedures in Coolmine Therapeutic Community at induction. Procedures, including the location of Assembly Points etc. are prominently displayed in all locations throughout premises.

**First Aid**

Emergency first aid kits are provided in Coolmine Therapeutic Community for the treatment of minor injuries.

**Hygiene facilities**

There are facilities in Coolmine Therapeutic Community for staff to wash. This includes hot, cold water, and soap.

**Facilities for Eating Food**

Coolmine Therapeutic Community provides facilities for staff for refreshments on site.

**Personal Protective Equipment**

All necessary Personal Protective Equipment (PPE) is provided to respective Coolmine Therapeutic Community employees as required.

## 27 Safety Inspections

Regular safety inspections will take place on the premises as part of Coolmine Therapeutic Community internal auditing of the performance of the health and safety management system. Safety inspections will be carried out by Safety Officer.

The inspections will be carried out with the use of check lists which shall record the items inspected, corrective actions needed or taken, the name of the inspector and the date of the inspection. Where issues can be resolved immediately, corrective action shall be implemented during the course of the inspection. Where more complicated corrective action is required, interim measures shall be put in place until the issue has been properly addressed internally, or with an external advisor.

### Sample Check Lists

#### 1. Access and Egress

- Are all exit routes unobstructed and ready for use? (unlocked and free from stored items)
- Are all exit routes clearly marked and in good repair?
- Do all doors open outwards and close freely?
- Are the exit routes and corridors well lit?
- Is the emergency lighting in good working order?
- Are stairways unobstructed and in good repair?

#### 2. Fire Safety Equipment

- Is the fire alarm working and tested at least weekly?
- Is the fire alarm audible in all areas of the building?
- Are all fire points marked?
- Are fire points clear of obstruction?
- Are fire extinguishers present and mounted on wall brackets or suitable stands?
- Are fire extinguishers free from obvious signs of damage?
- Are fire extinguishers correctly pressurised?
- Are instructions for the use of fire extinguishers present and clearly visible?
- Are all break-glass units intact / undamaged?
- Are fire doors free from damage and self-closing?

#### 3. First Aid Kits

- Are all first aid kits located in their designated areas?
- Are first aid kits easily accessible?
- Are first aid kits fully stocked?
- Are first aid kits free from medications and other items not in the recommended list of contents?

#### 4. General Working Environment

- Are all corridors and walkways unobstructed and in good condition?
- Is there adequate space to allow employees to work safely with machines and other pieces of equipment?
- Is there a good level of housekeeping maintained in all work areas?
- Are walkways clear of unprotected running cables and other tripping hazards?
- Are shelves stacked in a safe manner and not over loaded?
- Are all pieces of equipment in good working order?
- Are plug sockets over loaded with multi adaptors?
- Are multi-adaptors plugged into one another?
- Is non-essential electrical equipment turned off and plugged out when not in use?
- Is there adequate lighting throughout the premises?
- Is there sufficient ventilation and good air quality in all work areas?
- Is there a comfortable ambient temperature within the workplace?



- Are all pieces of furniture in a good state of repair?
- Are disused and broken pieces of equipment disposed of in a timely manner as to prevent a build-up of clutter and obstructions in the workplace?

**Where the Safety Officer is unable to address safety issues on the premises they shall obtain help from an external health and safety advisor who will conduct a Health and Safety inspection. The purpose of such an inspection is to;**

1. Assist Coolmine Therapeutic Community with meeting their statutory obligations,
2. Identify previously unnoticed hazards in the workplace,
3. Assess the risks posed by hazards and prioritising necessary corrective actions required,
4. Identify Health and Safety training needs,
5. Assist in the development of safe work procedures,
6. Provide support and assistance in the control and management of in house safety and related documentation,
7. Identify safety objectives and set targets,
8. Assist in the consultation and communication process,
9. Audit the complete safety management programme and provide a critical review of each of its components and determine any corrective actions required and the decide on the direction the safety management programme will take in the following year,
10. Address any further issues as appropriate.

## 28 Annual Review

The purpose of the Annual Review is to present an overview of the progress made by the Project over a 12-month period in the areas of safety, health and welfare.

A report will be generated at the end of Coolmine Therapeutic Community financial year and may include the following information:

- Number of accident and / or incidents
- Number of first aid incidents.
- Number of workdays lost as a result of incidents.
- Full details of any safety training carried out during the year

Discussion of any areas of safety, health or welfare that need to be addressed in the future as a result of new legislation, incident history or any new work practices.

Coolmine Therapeutic Community welcomes any comments/queries or suggested initiative from any of its employees.

## 29 Summary

Coolmine Therapeutic Community aims to provide a safe and healthy working environment for its employees, staff, contractors and visitors. All requirements under the *Safety, Health and Welfare at Work Act, 2005* will be adhered to and where reasonably practicable implemented. This can be achieved with the help and assistance of all employees by:

- All employees observing the general rules of safety and health. It is the duty of every Coolmine Therapeutic Community employee to fully comply with all safety rules and regulations. All Coolmine Therapeutic Community employees should report any unsafe condition.
- Using all equipment in a safe and proper manner. Notify any persons likely to be affected by work that you are doing.
- All injuries sustained by Coolmine Therapeutic Community employees, however slight must be reported to your supervisor/manager.
- Wear the appropriate PPE for all tasks undertaken. Employing the proper procedures when carrying out tasks and ensuring that no practices are used which may act as a source of danger to themselves or others.
- Keeping work areas clean and tidy at all times.
- Making sure all corridors and passageways particularly those leading to escape routes, are kept free of obstructions at all times. Do not litter, use the bins provided.
- Taking care that fire points are not blocked or covered up in any way and that access in the event of an emergency is un-hindered and that fire extinguishers are ready for use if the need arises.
- Follow all safety signs, and familiarise yourself with the Emergency Procedures.
- Vandalism of property will result in instant dismissal.
- Report any defects to your Supervisor/Manager immediately.

This Safety Statement has been prepared based on conditions existing in the fabric of the workplace of Coolmine Therapeutic Community at the time of the audit. It must be altered, revised or updated periodically in order to comply with any changes in conditions.

## **30 List of Appendices**

- Appendix 1: Inspection and Testing of Fire Prevention Equipment, Annual Fire Precautions.**
- Appendix 2: First Aid Box Contents, Locations of first aid boxes & Names of First Aiders.**
- Appendix 3: VDU User Checklist, VDU Workstation Set-up Diagrams.**
- Appendix 4: Inspection and Testing Schedule for Electrical Equipment.**
- Appendix 5: Personal Protective Equipment Register.**
- Appendix 6: Accident / Incident Form.**
- Appendix 7: Critical Incident Form.**
- Appendix 8: Staff Declaration.**
- Appendix 9: Risk Assessments.**

## Appendix 1 – Inspection and Testing of Fire Prevention Equipment (Where Applicable)

### Summary of inspections and testing for Fire Prevention Equipment

	Equipment Type	Inspection Frequency
1.	Smoke detectors and fire alarm systems	Regular, ideally weekly. Supplemented by quarterly inspections and certifications by a competent person (typically part of arrangements under a Service Agreement)
2.	Control panel of fire alarm system	Fire Warden or Manager should check daily. Servicing should be carried out according to the supplier's recommendations.
3.	Fire Extinguishers	Annual maintenance check and test discharged as per requirement I.S 291.1998. User to check monthly to ensure they have not been accidentally discharged seal is intact, they are correctly mounted (no higher than 5ft and no less than 4 inches from the floor), they are easily accessible, and are not overdue for inspection by a competent person.
4.	Hose Reels	Checked monthly for valve leaks. Fully run out and tested annually.
5.	Sprinklers	Weekly checks on pressures, alarm connections, trace heating arrangements. Tests required quarterly, half yearly, yearly and 3 yearly (details should form part of a service agreement).
6.	Emergency lighting for exit routes	Inspected every week and fully tested for a min. of ½ hour every 3 months. Annual complete test and inspection where all batteries are completely discharged
7.	Automatically closing fire doors (on alarm)	Checked every 3 months when alarm test is carried out.

**Note: Records to be kept of all inspections, tests, defects and action taken**

**Appendix 2 – First Aid Box Contents, Location of First Aid Boxes, First Aiders****Recommended First Aid Box Contents**

<b>MATERIAL</b>	<b>FIRST-AID TRAVEL KIT CONTENTS</b>	<b>FIRST-AID BOX CONTENTS</b>		
		<b>1-5 Persons</b>	<b>6-25 Persons</b>	<b>26-50(a) Persons*1</b>
Adhesive Plasters	20	20	20	40
Sterile Eye Pads (No.16) (bandage attached)	2	2	2	4
Individually Wrapped Triangular Bandages	2	2	6	6
Safety Pins	6	6	6	6
Medium Individually Wrapped Sterile Unmediated Wound (No. 8) Dressing (approx. 10 x 8 cm)	1	2	2	4
Large Individually Wrapped Sterile Unmediated Wound (No.9) Dressing (approx. 13 x 9 cm)	1	2	6	8
Extra Large Individually Wrapped Sterile Unmediated Wound Dressing (approx. 28 x 17.5 cm)	-	2	3	4
Individually Wrapped Wipes	10	10	20	40
Paramedic Shears	1	1	1	1
Pair Latex Gloves	3	5	10	10
Pocket Face Mask	1	1	1	1
Additionally, where there is no clear running water, Sterile Eye Wash **2	2x20ml	1x500ml	2x500ml	2x500ml
Water based Burns Dressing Small (10x10cms) ***3	1	1	1	1
Water based Burns Dressing Large ***3	1	1	1	1
Crepe Bandages	1	2	2	3
<p>Notes:</p> <p>* <b>Note 1:</b> Where more than 50 persons are employed, pro rata provision should be made.</p> <p>** <b>Note 2:</b> Where mains tap water is not readily available for eye irrigation, sterile water or sterile normal saline (0.9%) in sealed disposable containers should be provided. Each container should hold at least 20ml and should be discarded once the seal is broken. Eye bath/eye cups/refillable containers should not be used for eye irrigation due to the risk of cross infection. The container should be CE marked.</p> <p>*** <b>Note 3:</b> Where mains tap water is not readily available for cooling burnt area.</p> <p style="text-align: center;"><b>Eye bath / eye cups / refillable containers should not be used for eye irrigation.</b></p>				

**Location of first aid boxes in Coolmine Therapeutic Community:**

**Location**

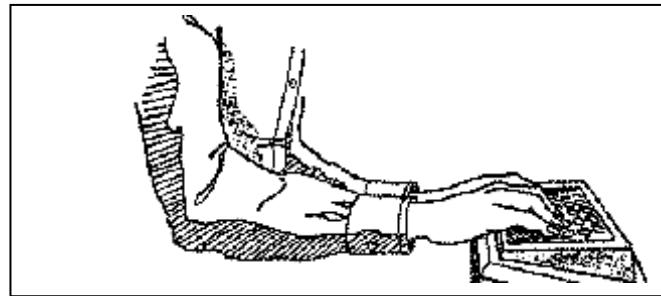

**Trained first Aiders in Coolmine Therapeutic Community:**

**Name**

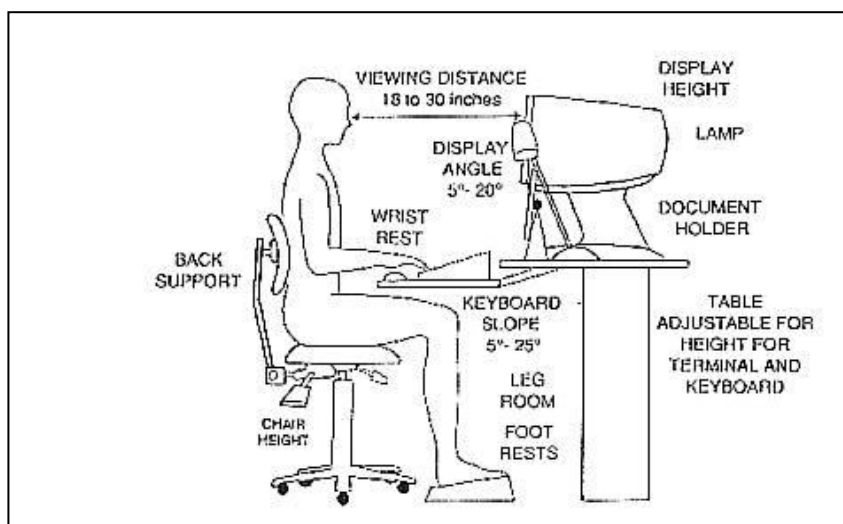
**Department**


### Appendix 3 – VDU User Checklist & VDU WORKSTATION SETUP DIAGRAMS

- The following guidelines are intended to help employees and supervisors understand and reduce health risks associated with computer workstations. Since no two bodies are identical, different styles, models, and sizes of furniture and accessories may be needed. Since a wide variety of products are available to suit individual and departmental needs, no specific product recommendations are made here. The best results are usually achieved when the individual is involved in the selection process.
- The work surface should be of sufficient area to accommodate the computer and all associated materials. There should be adequate space beneath this surface for the operator's legs and feet.
- The keyboard and mouse should be directly in front of the operator at a height that favours a neutral posture (23 to 28 inches). When placed at standard desk height of 30 inches, they are too high for most people. Raising the chair solves this problem for some individuals. An adjustable keyboard holder with mouse deck is usually the best solution. The objective is a posture with upper arms relaxed and wrists straight in line with the forearm. Wrist rests may also help and are built into most keyboard holders. For some people alternative keyboard and mouse designs may need to be considered.



- The monitor should be positioned at a distance of approximately arm's length and directly in front of or slightly to one side of the operator. The top of the screen should be no higher than eye level. A monitor placed on top of the computer can easily be lowered by relocating the computer. Stackable monitor blocks can be used to achieve the desired height. Adjustable monitor arms enable easy height adjustment for workstations with multiple users.

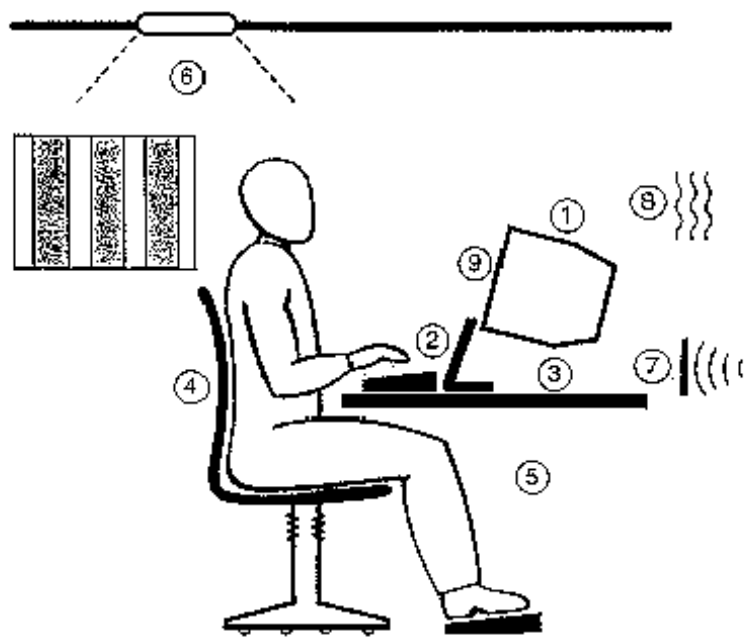
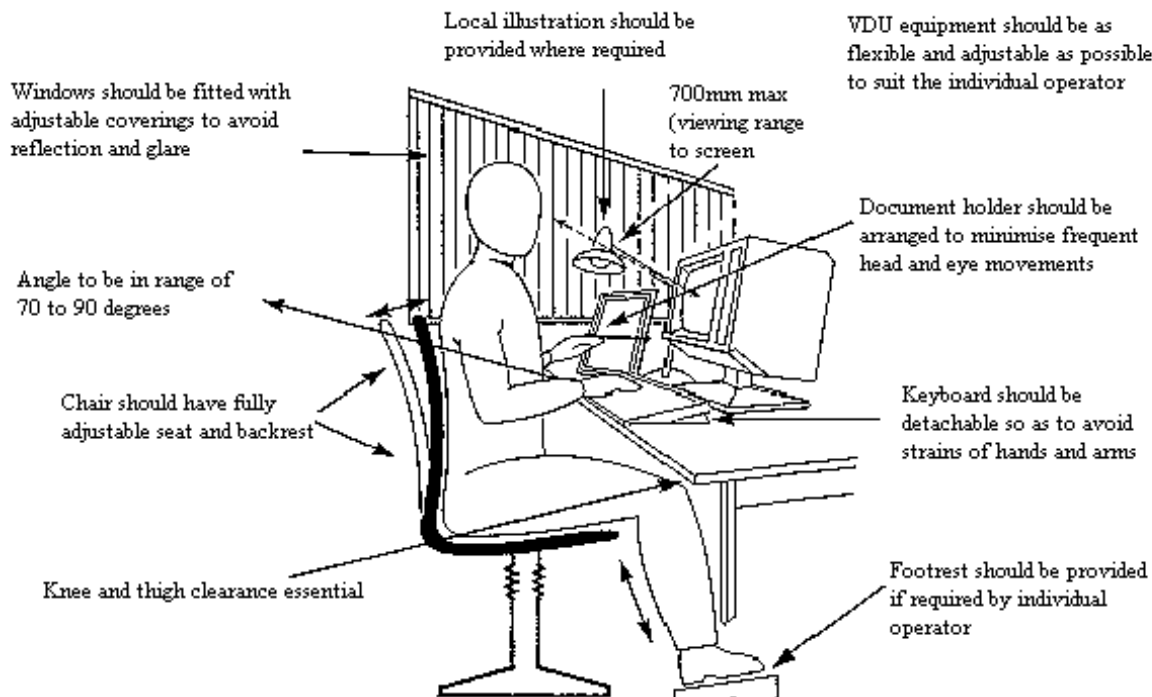




- A well designed chair will favourably affect posture, circulation, the amount of effort required to maintain good posture, and the amount of strain on the back. An adjustable seat back is best for support in the lumbar region. The user should be able to adjust seat height and seat pan angle from a seated position. Armrests are optional.
- Additional accessories can improve operator comfort. Document holders can minimize eye, neck and shoulder strain by positioning the document close to the monitor. A footrest should be used where the feet cannot be placed firmly on the floor. Task lamps will illuminate source documents when room lighting is reduced.
- Glare should be eliminated through methods that include reduction of room lighting; shielding windows with shades, curtains or blinds; positioning the terminal at a right angle to windows; and tilting the monitor to avoid reflection from overhead lighting. Glare screens are not normally necessary. Training All computer users should receive basic training in potential health effects that may result from poor posture and work habits, early warning symptoms, workstation adjustment, and other self-help protective measures. Supervisors should receive similar training to easily recognize problems and know what corrective measures to take.

## VDU USER CHECKLIST

1. Adjust seat height so that lower arms are horizontal and wrists straight when operating keyboard.
2. Use footrest if feet can't touch floor.
3. Adjust height and tilt of backrest so that upper back is supported. This will help maintain natural curve in lower back.
4. Avoid slouching/leaning over by removing obstacles from under desk.
5. Adjust height of display screen so that angle of viewing is 15-20°.
6. Place document holder at equal distance and height to screen.
7. Adjust screen angle and window coverings to avoid unwanted reflections.
8. Adjust brightness/contrast controls.
9. Vary distance of display viewing distance during day.
10. Break up the day with regular changes of activity – away from the screen and keyboard.
11. Clean your screen.
12. Have regular eyesight tests for VDU work.



1. Screen: Readable and stable, image adjustable, glare free.
2. Keyboard: Usable, adjustable, key tops legible.
3. Work Surface: Allow flexible arrangement, spacious, glare free, document holder as appropriate.
4. Work chair: Appropriate adjustability plus foot rest.
5. Leg room and clearances: To facilitate postural change.
6. Lighting: Provision of adequate contrast, no direct or indirect glare or reflections.
7. Distracting noise minimised.
8. No excessive heat, adequate humidity.
9. Software: Appropriate to the task and adapted to user capabilities, provide feedback on system status, no clandestine monitoring.

**Appendix 4 – Inspection and Testing Schedule for Electrical Equipment (Where Applicable)**

<b>Recommended electrical inspection and testing schedule<sup>1</sup> for offices</b>			
<b>Equipment/ Environment</b>	<b>User Checks</b>	<b>Formal Visual Inspection</b>	<b>Combined Inspection and Testing</b>
Battery operated (less than 20 volts)	No	No	No
Extra low voltage (less than 50 volts AC) e.g. telephone equipment, low voltage desk lights	No	No	No
Information technology; e.g. desktop computers, VDU screens	No	Yes Every 2-4 years	No if double insulated – otherwise up to 5 years
Photocopiers, fax machines; NOT hand held. Rarely moved	No	Yes Every 2-4 years	No if double insulated – otherwise up to 5 years
NOT hand held. Moved occasionally, e.g. fans, table lamps, slide projectors.	No	Yes Every 2-4 years	No
Double insulated equipment: HAND HELD e.g. Some floor cleaners Power tools	Yes	Yes 6 months-1 year	No
Earthed Equipment (Class 1): e.g. Electric kettles, toasters, some floor cleaners	Yes	Yes 6 months-1 year	Yes 1-2 years
Cables (leads) and plugs connected to the above	Yes	Yes 6 months-4 years depending on the type of equipment it is connected to	Yes 1-5 years depending on the type of equipment it is connected to

- 1 Experience of operating the inspection and testing schedule outlined in the table over a period of time, together with information on faults found, should be used to review the frequency of inspection. It should also be used to review whether and how often equipment and associated leads and plugs should receive a combined inspection and test. This may be reviewed and decided upon either by a manager, with guidance from the relevant competent person, or by the team carrying out the electrical inspections.
2. “No” means no formal, recorded checks, but users should always visually inspect equipment to be used, and respond to any evidence of fault or damage.

**Appendix 5 – Personal Protective Equipment Register**

**Personal Protective Equipment  
Register of Personal Issue.**

Contract No:	Employee No:	Form No:
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Employee Name
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Description of Item	Issue Date	Qty	Code	Insp. Date	Re-issue	Signature

Issued By	Received by
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1. Top Copy to be Held By HR Manager/ Second Copy Held by Employee/Third Copy placed in PPE Register
2. Reissue will only be granted when old item is exchanged or inspected
3. PPE will be periodically checked by the Person responsible for Health & Safety
4. Any defects in PPE must be notified to the supervisor
5. Employees responsibilities. Under Section 13 & 14 Safety Health & Welfare at Work Act 2005  
*Employees may not interfere with, damage or misuse any PPE issued to them.*  
*Employees are responsible for the care and maintenance of their own PPE*

**Appendix 6 – Accident / Incident Form**

Coolmine Therapeutic Community	<b>Accident / Incident Report</b> <i>Incident reports must be submitted to HR within 24 hours.</i>	
Coolmine Therapeutic Community /Contractor:		Incident Date :
		Incident Time :
Location of Incident:		Date of report:
Name of Injured:	Occupation of injured:	Date of Birth of injured Party:
Witnesses:		
Please attach signed witness statements for all incidents involving personal injury		
Supervisor:		
Description of Incident (add additional documentation and sketches for, IR 1 incidents):		

<b>Injury Management (TO BE COMPLETED BY FIRST AIDER).</b>			
Body Part Affected:	Head <input type="checkbox"/> . Neck <input type="checkbox"/> . Trunk <input type="checkbox"/> . Arm <input type="checkbox"/> . Hand <input type="checkbox"/> . Fingers <input type="checkbox"/> . Leg <input type="checkbox"/> . Ankle <input type="checkbox"/> . Foot <input type="checkbox"/> . Eye <input type="checkbox"/> . Back <input type="checkbox"/> . Chest <input type="checkbox"/> . Multiple <input type="checkbox"/> . Others:(Define) .....		
Nature of Injury / Disease:	Fracture of Spine <input type="checkbox"/> . Other Fracture <input type="checkbox"/> . Dislocation <input type="checkbox"/> . Sprain / Strain <input type="checkbox"/> . Amputation <input type="checkbox"/> . Laceration <input type="checkbox"/> . Bruising <input type="checkbox"/> . Abrasion <input type="checkbox"/> . Burn <input type="checkbox"/> . Puncture Wound <input type="checkbox"/> . Poisoning / Toxic Effect <input type="checkbox"/> . F/Body <input type="checkbox"/> . Internal Injuries <input type="checkbox"/> . Other.....		
Signs & Symptoms & Treatment:			
Injury Status:	First Aid <input type="checkbox"/> .	Site First Aid <input type="checkbox"/> .	Doctor <input type="checkbox"/> .
Hospital <input type="checkbox"/> .	Full Duties <input type="checkbox"/> .	Alt Duties <input type="checkbox"/> .	Lost Time <input type="checkbox"/> .
Date of resumption of Work:		Object/equipment/substance inflicting harm:	
Anticipated absence if not back:			

<b>Immediate causes:</b> (What substandard actions & conditions caused the event)

<b>Basic Causes: (What personal action or fundamental job factors caused the event)</b>			
Remedial Action to Prevent Reoccurrence:	By Whom	When By	Sign when completed
<b>Employee's Comments:</b>			
Employee's Name: _____ Signature: _____ Date: _____			
<b>Supervisor's/Managers Comments:</b>			
Supervisor's Name: _____ Signature: _____ Date: _____			
<b>Coolmine Therapeutic Community – Safety Officer comments:</b>			
Manager's Name: _____ Signature: _____ Date: _____			

## Appendix 7 – Critical Incident Report Form

**Critical Incident Report Form**

***To be completed and forwarded to the Manager within 24 hours of an incident. If there is any media interest do not engage with the press and refer them to the CEO.***

1. Project:					
2. Date:		3. Day:		4. Time:	
5. Staff on duty:		6. Residents involved:		7. Witnesses:	
<b>8. Nature of Incident (please tick)</b> Please note that only serious incidents should be recorded here - ones in which people are injured, Coolmine property is seriously damaged, or staff and/or residents are directly and seriously threatened with violence with the result that the Gardaí are called.					
<input type="checkbox"/> Fire <input type="checkbox"/> Persistent harassment <input type="checkbox"/> Persistent physical intimidation <input type="checkbox"/> Physical assault on one or more residents <input type="checkbox"/> Physical assault on one or more staff <input type="checkbox"/> Sexual assault <input type="checkbox"/> Overdose					
<input type="checkbox"/> Verbal abuse <input type="checkbox"/> Suicide attempt <input type="checkbox"/> Serious damage to Coolmine property <input type="checkbox"/> Accident involving a broken limb or requiring hospital treatment <input type="checkbox"/> Other (please specify): <input type="checkbox"/> Death					
<b>9. Brief description of incident</b> Including a drawing if necessary:					
10. Were the Gardaí called?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	11. Charges?	
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Were the following factors significant?		<input type="checkbox"/> Alcohol	<input type="checkbox"/> Drugs	<input type="checkbox"/> Mental health	
13. Did the incident involve		<input type="checkbox"/> Race	<input type="checkbox"/> Sexuality	<input type="checkbox"/> Other(Specify)	
14. What was the outcome?					

<b>14.a Were any clients asked to leave?</b>		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>14.b Details</b>		
<b>15. Any further details:</b>		
<b>16. Do you have any recommendations?</b>		
<b>17. Name:</b>	<b>Position:</b>	<b>Date:</b>
<b>Signature</b>		
<b>Have you filled in the Violent Incident Support Questionnaire?</b>		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Have you been asked to fill it in?</b>		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Please send this form to the Services Manager within 24 hours</b>		

**TO BE COMPLETED BY THE MANAGER**

<b>18. Manager's Name:</b>	<b>Position:</b>	<b>Date:</b>
<b>Signature</b>		



**19. Further action?**

Empty rectangular box for further action.

**Appendix 8 – Staff Declaration**

I have read the safety statement and understand my obligations and duties therein. I understand that these obligations and duties are legal requirements under The Safety, Health & Welfare at Work Act, 2005.

NAME	DATE	NAME	DATE

NAME	DATE	NAME	DATE

## **Appendix 9 – Risk Assessments**