



ALLSORTS HEALTH AND SAFETY POLICY

1. INTRODUCTION

1.1 If you require this information in any other accessible format please contact:

Allsorts

The Exchange

Brickrow

Stroud, GL5 1DF

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1.2 The purpose of this policy

This policy sets out Allsorts commitments to ensure that all of its activities minimise risks to the health and safety of all of those involved.

2. ROLES AND RESPONSIBILITIES

2.1 Accountability

Although ultimate accountability for Health and Safety sits with Allsorts' Trustees, this is delegated to Allsorts' staff. Health and safety is everyone's day to day responsibility, and the promotion of safety, and health, at work, must be regarded as a mutual objective for all employees at all levels.

2.2 Allsorts is responsible for:

- Securing the health, safety and welfare of all staff at work, through providing and maintaining safe and healthy working conditions and environments within the framework of statutory requirements.
- Protecting other people, such as members, volunteers and members of the public, and any other involved person against risks to health and safety arising out of, or in connection with the activities of persons at work.
- Ensuring that all staff are aware of this policy and how it applies to their work and responsibilities.
- Ensuring that all volunteers, members and any other visitors to Allsorts are aware of health and safety guidelines and have access to the relevant policies.
- Providing information, instruction, training and supervision, for employees as may be necessary.
- Ensuring that all staff complete a risk assessment for all activities.

- Providing all necessary safety devices and protective equipment and ensuring the use of such devices and equipment.
- Ensuring all staff and volunteers adhere to lifting and handling guidelines.
- Making sure, as far as is reasonably practicable, safety and absence of risks to health in connection with the use, handling, storage and transport of articles, medication and other substances. Any potentially dangerous liquids or substances must be stored safely.
- Providing safe access to and exits from places of work.
- Ensuring that the charity has current and adequate public liability insurance, and that a copy of the certificate is available for viewing on request.

2.3 Allsorts staff have a responsibility to:

- Follow the procedures and guidelines laid down in this policy.
- Work safely and efficiently and with due regard for the health, safety and welfare of themselves and others, including the public.

3. HEALTH AND SAFETY AT ALLSORTS ACTIVITIES

Where Allsorts is staffing, organising or running an activity, whether for members or for the general public, the following guidelines must be followed.

3.1 Ensuring the area is safe

- Staff must ensure that areas in which activities take place, including off site activities, are checked for safety before the commencement of each day's activities.
- Note should be taken of any potential hazards (e.g. broken windows or doors, inadequate security, damaged fencing, cleanliness of toilets and kitchens), along with any risk control measures that should be put in place to minimise the risk caused by these hazards.
- Staff should cancel or postpone an activity where the environment is found to be unsafe.

3.2 Ensuring an appropriate staffing level is in place

- As far as possible, the number of potential attendees should be ascertained, so that an appropriate staff ratio can be planned for. Staff ratios are set out in Allsorts' Activity Standards and vary depending on the type of activity.
- No activity should go ahead unless there is an adequate level of support.
- Should an unexpected number of attendees make an activity unsafe, the activity must be cancelled or postponed.

3.3 Ensuring that the right information is in place

3.3.1 Within any given activity, contact information should be available for:

- local Hospital A&E Department
- police and fire station
- the key holder for any premises used
- any transport companies being used
- other Allsorts staff
- next of kin information for staff members

3.3.2 Information should be securely available about the children participating in the activity, including:

- name
- date of birth
- home address
- at least two phone numbers for parents or carers
- any relevant medical details, including allergies
- doctors name, and if possible telephone number
- parental consent to emergency treatment and any other signed medical protocols
- parental consent to take part in off site activities.

No child or young person can attend any Allsorts activity unless such information is available, unless a parent or carer remains at the activity to assume responsibility.

3.4 Ensuring that accidents and incidents are responded to, recorded and reported

- 3.4.1 Every effort must be made to inform parents or carers of any accident and the action taken. If parents are not seen by staff in person, a brief note should be sent home of any accidents requiring First Aid treatment. However, if the child is under eight years of age a parent or carer must sign the accident record sheet. If it is not felt in the child or young person's best interests to remain at the activity, parents or carers should be contacted.
- 3.4.2 If medical treatment is required every effort must be made to contact and inform parents and carers as soon as possible. If staff accompany child or young person to a medical facility, the relevant information relating to that child, including parental permissions, should be taken with them.
- 3.4.3 Any accident requiring an individual being taken to a medical facility must be reported to the Chief Executive Officer and Lead Trustee at the earliest possible opportunity.
- 3.4.4 All accidents or injuries involving children under the age of eight where a doctor, dentist or nurse was required must be reported to OFSTED and the Environmental Health Officer at Stroud District Council must be notified.
- 3.4.5 Accidents resulting in an adult being off work for more than 3 days must also be reported.
- 3.4.6 There must be an accident book on site.
- 3.4.7 All accidents must be recorded regardless of severity.
- 3.4.8 The accident book should contain the name of the person injured, the date, time and location, details of the accident, witnesses, action taken and signature of First Aider.

- 3.4.9 All accidents and incidents should be recorded as soon after they have occurred as possible.
- 3.4.10 All accidents and incidents should be reported to the on-site First Aider as soon as possible after they have occurred.
- 3.4.11 Accidents and incidents should be reported to the Operations Manager as soon after they have occurred as possible.
- 3.4.12 It is the responsibility of staff to consider why any accident occurs and, if appropriate, take prompt action to ensure future prevention.

3.5 Ensuring that incidents and near misses are responded to, recorded and reported.

- As well as all accidents being recorded, it is important that any near misses should also be recorded, including the same information specified for accident reporting.
- This includes any incidents which occur which cause concern and indicate the potential for an accident to occur and any action taken. It should also include any damage to equipment or furniture and any action taken to make safe any equipment, furniture or other risks.

3.6 Ensuring that the correct level of First Aid support is in place

- 3.6.1 There must be at least one qualified First Aider present at all Allsorts activities, on or off site.
- 3.6.2 The names of First Aiders should be clearly displayed on site.
- 3.6.3 Whenever possible, there should be a qualified First Aider on any transport provided by Allsorts.
- 3.6.4 There must be a clearly marked First Aid kit at any premises used by Allsorts, which is easily accessible to staff only. A portable First Aid kit must also be available for any off site activities.
- 3.6.5 First Aid kits should be checked on a monthly basis and items replaced as necessary. The contents of First Aid kits should be displayed in the kit.
- 3.6.6 All staff, volunteers and sessional workers should be made aware of basic First Aid procedures.

3.7 Ensuring that good hygiene and infection control procedures are in place

- 3.7.1 Proper hand washing should take place before and after handling food. Before and after following any intimate care procedures, before and after using the toilet, and after any contact with body products. This should meet the following standards:
 - Using hot water and antibacterial soap or liquid on hands that are already wet
 - Paying particular attention to the thumbs, the tips of the fingers and the skin between the fingers.
 - Paper towels are the preferred method of drying hands.
- 3.7.2 Anyone engaged in personal care tasks are advised keep their nails short and to wear minimal hand jewellery to avoid scratching and cross infection.
- 3.7.3 Any cuts or abrasions must be covered by an impervious waterproof dressing.
- 3.7.4 Protective gloves will be provided. These must be worn when handling body products or potentially hazardous substances, and hands must be washed after the gloves are removed. Gloves are also provided to be used by individual staff as required.
- 3.7.5 Any body product, from any person present at an Allsorts activity must be treated as if it was infectious and dealt with accordingly.

3.7.6 Allsorts Intimate Care Policy must be followed at all times.

3.7.7 Waste contaminated with body products must be disposed of safely, and in accordance with current legislation.

- All waste should be disposed of promptly.
- Liquid waste, faecal matter and vomit must be flushed down the toilet.
- Solid waste (e.g. paper towels used for spillages, used disposable gloves, pads etc) and waste resulting from clinical procedures, must be placed double bagged and tied. Whenever possible these items are placed in yellow bags and disposed of in specialist bin for separate collection. If not available, should be then placed in another plastic bag, tied and disposed of through the normal refuse collection.
- Disposal of needles and other sharp objects is the responsibility of the health care professional or self-medicating user concerned.

3.7.8 Accidental Contamination must be dealt with as follows:

- Where body products come into contact with the skin, they must be washed off as soon as possible.
- Particular attention must be taken when:
 - the skin is broken by a bite or scratch
 - the skin is breached by a sharp object contaminated by body products
 - body fluids are splashed onto broken skin, mucous membranes or the eyesIn these circumstances, the affected part must be washed immediately and thoroughly with soap (not eyes) and copious quantities of running warm or cold (not hot) water. Do not restrict flow of blood, as this helps clear any contamination. Nail brushes should not be used. The wound should be checked by First Aider the same day and injured person urged to take medical advice if condition of wound deteriorates. They should also be advised to visit GP if not already immunised against infectious diseases.
- Remember disposable gloves do not protect against broken glass or other sharp objects.

3.7.9 Infection risks at premises should be controlled by:

- Checking the setting is clean before children arrive and at regular intervals during the day, cleaning as necessary.
- Every endeavour should be made to ensure that items that have been 'mouthed' by children are cleaned appropriately.
- When supervising a cooking activity, ensuring hygiene and Health & Safety procedures are strictly followed.
- Following directions for food storage, and under no circumstances using out of date food or drink.
- Ensuring that suitable hand washing facilities are available on site, as well as adequate disposable tissues and cloth wipes.
- Using disposable towels or hand dryers whenever possible.

3.7.10 Spread of Infectious Diseases

- Parents are asked not to send children and young people to any activity if they are unwell, particularly if they have an infection which might be passed on to others. In the case of sickness and diarrhoea, parents are advised that children should not attend any activity until at least 48 hours after last incident of sickness or diarrhoea.
- If staff feel a child is unwell or might be developing an infectious disease, they should notify parents and ask for child or young person to be taken home.

- Parents are asked to notify Allsorts staff if their child is suffering from a contagious or infectious condition, so that appropriate protective measures can be taken.
- Children or young people, staff or volunteers should not attend an activity if they are at the contagious stage of any infectious illness.

3.8 Ensuring that appropriate fire safety measures are in place

- 3.8.1 Copies of the procedure to be followed in the event of a fire will be clearly displayed.
- 3.8.2 All members of staff should be fully aware of the action to be taken in the event of fire.
- 3.8.3 Staff should familiarise themselves with location of all fire extinguishers and read instructions detailing what type of fire each can be used for before an activity begins.
- 3.8.4 All fire exits and corridors leading to them must be clear of obstruction.
- 3.8.5 Fire doors should never be propped open.
- 3.8.6 A Fire Drill will be conducted for ongoing activities involving regular high level attendance at least every three months.
- 3.8.7 Any person discovering a fire should:
- Sound the alarm
 - Dial 999 to summon the Fire Brigade
 - Attack the fire if possible using the appliances available
- 3.8.8 In the event of a fire, staff should:
- Not use any electrical equipment
 - Leave the building by the nearest available exit.
 - Report to the Assembly point which should be clearly displayed within any premises, overseen by a delegated member of staff. Belongings should not be collected.
 - The delegated member of staff will check who has evacuated against the register for the activity.
 - Personal safety is paramount. No risks must be taken in the event of fire.

4. HEALTH AND SAFETY GUIDELINES RELATING TO TRANSPORT

4.1 When providing transport Allsorts will conform to all current transport law and County Council guidelines.

4.2 Contracted Vehicles and Mini Buses

- 4.2.1 A reputable vehicle company will always be used to provide transport for members and volunteers.
- 4.2.2 All minibuses being used by Allsorts must hold Small Bus Permits in accordance with Section 19 of the Transport Act 1985.
- 4.2.3 For trips and outings, an escort will be provided by Allsorts. This will usually be a member of staff but may be an experienced volunteer.
- 4.2.4 All drivers will be aged 21 or over and will hold a current MIDAS Minibus Driver Assessment (which includes three yearly medical).
- 4.2.5 All escorts, and when possible drivers, will if applicable receive training on use of wheelchair lift.
- 4.2.6 As per DVLA regulations, anyone passing their driving test on or after 1st January 1997 can only drive vehicles with over 8 (up to maximum 16) passenger seats on a voluntary basis and providing the gross vehicle weight does not exceed 3.5 tonnes (or 4.25 tonnes with specialist tail-lift equipment) – and have held a full driving licence for at least 2 years - otherwise a PCV test has to be taken.

4.3 Staff and Volunteers providing transport in their own vehicles

- 4.3.1 Drivers must be 18 years or over and have held a license for a minimum of 12 months in adherence to point 4.2.6
- 4.3.2 If any driver has more than 3 points on their licence a decision will be made by the Trustees as to whether they will be accepted to drive, dependent on the reason points were awarded.
- 4.3.3 Written confirmation must be supplied from the driver's insurance company that they are covered under their current policy, along with a current MOT and insurance certificate.
- 4.3.4 Any driver who is to carry children or young people unaccompanied should undergo enhanced DBS check.
- 4.3.5 Booster seats must be used for children either under twelve years of age or under the height of 135 cms.
- 4.3.6 All children under the age of three years must travel in a child car seat. (This is a legal requirement).
- 4.3.7 Allsorts accepts no responsibility for lifts arranged independently between staff, volunteers or members.

4.4 All vehicles used will be covered by a recovery policy.

4.5 All vehicles used will carry a first aid kit.

4.6 All accidents must be recorded in the accident book for the relevant activity.

4.7 At least one of the volunteers or members of staff on all vehicles should be a qualified First Aider.

4.8 In the event of accident or breakdown:

- the driver is responsible for going for help if necessary, while it is the responsibility of the escort to stay with the vehicle and passengers.
- If no escort is present, the driver must seek help while giving consideration to the safety of the children and young people in their care.
- All passengers should remain in the vehicle unless it is considered unsafe to do so.
- If it is unsafe to remain in the vehicle, passengers should be escorted in safe and orderly fashion to a place out of danger. Emergency services should be notified as soon as possible.

5. HEALTH AND SAFETY GUIDELINES FOR ADMINISTRATION OF MEDICATION

5.1 Membership forms contain information about what medication is taken by which members, and whether it is required during the time their child is at an Allsorts activity.

5.2 Where medication is required, parents or carers will complete and sign a 'Medication Record' detailing

- name and date of birth of child or young person
- name and strength of medication
- what the medication is for
- form of medication
- dose
- times given
- how the medication should be administered
- signature of parent
- date

5.3 Staff are responsible for the administration of medication and this cannot be delegated to volunteers, unless with signed permission from the parent or carer and the CEO. A second person, either a member of staff or a responsible adult must always be present to witness any medication administered and to countersign that all details are correct.

5.4 Staff administering medication will complete a 'Medication Administration Record' for each child/young person detailing

- name and date of birth of child or young person
- name and strength of medication
- what the medication is for
- form of medication
- dose
- times given
- how the medication should be administered
- signature of staff member
- signature of witness

5.5 Medication should be sent in on a daily basis with a measuring spoon or syringe to deliver medication. Medication should be in an original container, with the

prescription label clearly marked with the child or young person's name, drug name, drug strength and dose and date of expiry.

- 5.6 The prescription label of all medications should be checked against the 'Medication Record'. If there are any discrepancies, medication should always be given according to prescription label.
- 5.7 Children should not attend allsorts Activities during the first 48 hours of a course of antibiotics, other than by special arrangement.
- 5.8 Non-prescription medication can only be administered with the written consent of parents.
- 5.9 All medicines should be safely stored out of reach of children and young people
- 5.10 Controlled drugs should be kept in a double locked cabinet wherever possible.
- 5.11 Individual emergency medication should be available at all times and in all settings.
- 5.12 In the case of an epileptic seizure, the guidelines in 'Appendix A' should be followed.

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Next due revision date	January 2019
Initial of last staff alteration	NB

APPENDIX A: SEIZURES

1. Parents or carers should complete an 'Epilepsy' protocol for the child or young person detailing

- name of child or young person
- date of birth
- description of a seizure
- known triggers
- frequency of seizures
- date of last seizure
- length of seizures
- course of action
- details of recovery period
- details of regular medication given to control epilepsy
- details of emergency medication given to control seizures
- parents or carer's name, signature and date

Where possible, written protocol from the child or young person's consultant should be provided.

2. If emergency medication is required to control seizures, parents or carers will complete a 'Guidelines for administration of medication in epilepsy by non-medical or non-nursing staff' sheet for the child or young person detailing:

- description of seizures
 - known triggers
 - usual duration of seizures
 - recovery time and management
 - other useful information
 - when should emergency medication be administered
 - dose given
 - usual reaction to emergency medication
 - signature and date
2. The club or activity leader will ensure through discussion with parents or carers that the epilepsy protocol is current at the start of all activities.
 3. The club or activity leader will ensure that themselves and other staff members are trained in the administration of Rectal Valium (Diazepam), Buccal Midasalam and Vagal Nerve Stimulation (VNS), and are familiar with the 'Epilepsy' protocol of children and young people affected by epilepsy at all Allsorts activities.
 4. Rectal Valium (Diazepam) and Buccal Midasalam should only be administered by a member of staff trained in the administration of such medication.
 5. Rectal Valium (Diazepam), Buccal Midasalam and Vagal Nerve Stimulation (VNS) should be administered as an emergency procedure only, providing written parental consent and specific instructions to administer have been provided. In the case of administration of Rectal Valium, a discreet area should be created by screening (whenever possible) and other children and young people should be moved away. Two staff members approved by Allsorts and trained in relevant procedures (preferably one gender match for older young people if possible) should be present for the administration of Rectal Valium. The child or young person's dignity should be preserved at all times.
 6. Emergency medication [Rectal Valium (Diazepam), Buccal Midasalam and Vagal Nerve Stimulation (VNS)] should be carried in waist bags (with disposable gloves and plastic bag for

waste in case of Rectal Valium (Diazepam) by staff members or volunteers supporting Allsorts activities (but always only administered by approved staff members and trained in relevant procedure). The epilepsy protocol provided by parents, carers or consultant should be carried with emergency medication.

7. Staff and volunteers whose role at Allsorts activities may involve the administration of emergency medication should receive training in the administration of Rectal Valium (Diazepam) and Buccal Midazolam and instruction on the use of Vagal Nerve Stimulation (VNS).

Procedure in the event of a young person having a seizure:

- Time the length of seizure from start of seizure.
 - Ensure the child or young person is in a safe position.
 - If the child or young person is on the ground, move them into the recovery position [preferably on left side if prescribed Rectal Valium (Diazepam)] and protect head from injury (using clothing or your hands). Protect child/young person from bodily injury by requesting close furniture is moved back/cushioned.
 - If child/young person is in a wheelchair, release foot straps and support head to ensure airway is not compromised.
 - Reassure child/young person.
 - Send someone to alert the activity leader
 - If necessary, when in enclosed area (e.g. small room), request that other children/young people are encouraged to move away/temporarily leave area to protect child's/young person's dignity.
 - Ensure the agreed protocol for contacting emergency services is followed.
8. The risk of possible seizures should be taken into account when planning off-site activities.
 9. The child/young person should be allowed to recover from the seizure in a quiet environment under close supervision.
 10. The seizure should be recorded on an incident form, signed by the activity or club leader and shown to parents or carers when the child or young person is collected.