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| **Section One – Health & Safety Management****1: HEALTH & SAFETY MANDATORY RECORDS**  |
| Does your PIP (Policy Implementation Policy & Procedures) contain objectives to fulfil all relevant arrangements of BU’s H&S policy?  | [ ]  Yes [ ]  No |  |
| Does your PIP and associated action plan facilitate continuous improvement in H&S performance? | [ ]  Yes [ ]  No |  |
| Does your ‘action plan’ have clearly defined responsibilities: * Name of person responsible.
* Target date for completion.
* Current progress against actions.
 | [ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Is there an effective and timely (e.g. at least termly) process of reviewing the PIP and action plan at Executive level within your area?  | [ ]  Yes [ ]  No |  |
| Does the training matrix cover all XXXXXXXXXX individuals? | [ ]  Yes [ ]  No |  |
| Does the training matrix clearly record; * All training by individuals?
* Mandatory training?
* When requalification is required?
 | [ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Does the training matrix identify gaps in training?* If so, how are these managed?
* Are outstanding training requirements reflected in the action plan?
 | [ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Are all mandatory H&S documents stored in line with BU’s Policy on ‘Storage and Access to Health & Safety Information on the University’s ‘I-Drive’? *[with the exception of current Risk Assessments stored on the on-line system]* | [ ]  Yes [ ]  No |  |
| Are [and if so, how are] new starters inducted locally within the XXXXXXXXXX (and is the process the same for any temporary staff/contractors)? | [ ]  Yes [ ]  No |  |
| **2: GENERAL RISK ASSESSMENT (inc. Lone Working)****GENERAL RISK ASSESSMENT** |
| What do you consider to be your biggest risk/s or hazardous activities? | [ ]  Yes [ ]  No |  |
| Have any risks identified been addressed in a risk assessment (or at least considered as in general hazard & risk trawl)? | [ ]  Yes [ ]  No |  |
| Are all staff who carry out risk assessments trained to do so (e.g. as a minimum -attended BU risk assessment training)? | [ ]  Yes [ ]  No |  |
| Are risk assessments carried out in conjunction with any key individuals involved in the running of the activity/event? |  |  |
| How is the risk assessment process approached for any joint ventures or externally hosted events? |  |  |
| How is the risk assessment process and all relevant assessments monitored and reviewed? |  |  |
| **LONE WORKING** |
| Do you have any identified ‘lone’ or ‘vulnerable’ workers’ (working in office; off-campus – conference, running events etc.)? | [ ]  Yes [ ]  No |  |
| If so, how do you monitor (and supervise) these workers during *normal* working hours? | [ ]  Yes [ ]  No |  |
| What is your system for monitoring these workers ‘*outside’ of normal* working hours (e.g. either in the office, around or off campus?) | [ ]  Yes [ ]  No |  |
| Do you have a clear [emergency] procedure to follow in case someone does not return or report in at an expected time? | [ ]  Yes [ ]  No |  |
| Have risk assessments been completed for any identified ‘lone’ or ‘vulnerable’ workers? | [ ]  Yes [ ]  No |  |
| Do identified individuals receive information, training & instruction about lone working and other issues identified through the risk assessment process? | [ ]  Yes [ ]  No |  |
| **3: MANUAL HANDLING** |
| Have any manual handling tasks been identified and eliminated where it is reasonably practicable to do so (including those associated with events/conferences)? | [ ]  Yes [ ]  No |  |
| Have specific assessments been produced for manual handling tasks (where there is a significant risk of injury), or at least been incorporated into existing risk assessments? | [ ]  Yes [ ]  No |  |
| Do the risk assessments actually cover all individuals involved in any manual handling and all necessary operations? | [ ]  Yes [ ]  No |  |
| Are all relevant individuals familiar with the manual handling assessments applicable to them, and are also with the control measures identified & implemented? | [ ]  Yes [ ]  No |  |
| Have sufficient and sufficient manual handling aids; equipment; mechanical devices been provided where required e.g. trollies/sack trucks? | [ ]  Yes [ ]  No |  |
| Where manual handling aids have been provided;- Have all relevant individuals been trained in their use? - Are they being inspected regularly and maintained in a safe condition?  - Service records up to date & available? | [ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Where individuals are required to carry out manual handling tasks have they been appropriately trained?(i.e. as an absolute minimum, undertaken HandleRite training) | [ ]  Yes [ ]  No |  |
| Are individuals encouraged to report illnesses, or temporary conditions (e.g. pregnancy) which may affect their ability to perform manual handling functions? | [ ]  Yes [ ]  No |  |
| **4: ACCIDENT RECORDING, REPORTING AND INVESTIGATION** |
| How are your incidents & accidents reported & recorded (both to ‘Health, Safety & Wellbeing Team’ and internally to your own Executive?). | [ ]  Yes [ ]  No |  |
| What is your procedure for accident/incident investigations?How do any findings affect your policies and procedures?  | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| How are accident investigation findings communicated to interested parties (e.g. internally within your own department and the Health, Safety & Wellbeing team?) | [ ]  Yes [ ]  No |  |
| **5: BU Driving Policy Management** |
| Are any members of the XXXXXXXXXX required to drive on BU business? | [ ]  Yes [ ]  No |  |
| If so, is an approved list/register held within your directorate; detailing all members of the XXXXXXXXXX who drive on BU business?If so, is the approved list/register reviewed and updated on a regular base? | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Do you check driver’s licences with the DVLA to check they are current, and how many points they may have on their licence? | [ ]  Yes [ ]  No |  |
| Do you hold a ‘Driver Declaration & Authorisation Form’ for all drivers?  | [ ]  Yes [ ]  No |  |
| Do you ever authorise use of private vehicles?If so, do you check an individual’s MOT/Business insurance etc. (where mileage allowance is being claimed)? | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Do you carry out driving risk assessments for driving activities (or at least incorporate this into related risk assessments)?If so, does this include whether the vehicle is suitable for the task (e.g. not filling the back seats of a car up with equipment/books and materials)? | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| **6: Display Screen Equipment** |
| Have all XXXXXXXXXX staff that utilise Display Screen Equipment (DSE) been assessed? | [ ]  Yes [ ]  No |  |
| Are the records for DSE assessments recorded on WorkRite by the DSE assessor(s) and reports uploaded? | [ ]  Yes [ ]  No |  |
| Once resolved are individual’s DSE ‘open’ issues formally ‘closed down’ in the WorkRite system? | [ ]  Yes [ ]  No |  |
| **7: FIRE & EMERGENCIES** |
| Have all XXXXXXXXXX staff completed the mandatory [annual] on-line FireRite training? | [ ]  Yes [ ]  No |  |
| Do you have any fire wardens amongst the team who are available to assist with evacuation and check that fire precautions are maintained day to day? | [ ]  Yes [ ]  No |  |
| If applicable, do Fire Wardens carry out local inspections (e.g. at least monthly) of their areas for fire hazards and risks? If so, are (and how) are these formally recorded? | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| What procedures are in place for people with mobility issues or sensory problems, [whether permanent or temporary], with regard to evacuation from a building in case of an emergency? | [ ]  Yes [ ]  No |  |
| Do you have copies of any Personal Emergency Evacuation Plan (PEEP) carried out for individuals? | [ ]  Yes [ ]  No |  |
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| **8: CHEMICAL & BIOLOGICAL HAZARDS** |
| Do you keep accurate records of any chemicals/substances which you use, handle, store and dispose of?And is this carried out as per COSHH Regulations and BU policy? | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |  |
| Have you got Material Safety Data Sheets [MSDS] for any chemicals/substances? | [ ]  Yes [ ]  No |  |
| Are safety data sheets readily accessible in the event of an emergency? | [ ]  Yes [ ]  No |  |
| Are any chemicals/substances stored safely & securely in suitable, correctly labelled containers?  | [ ]  Yes [ ]  No |  |
| **9: PUWER, LOLER & WAH REGULATIONS** |
| Are any ‘kick stools’; ‘ladders’, ‘working at height’ and all other ‘electrical’ equipment maintained’, inspected, & tested? (Do you have certificates to evidence this?) | [ ]  Yes [ ]  No |  |
| Do you maintain a log of ‘before use’ inspections for ladders and any other working at height equipment to comply with the regulations? | [ ]  Yes [ ]  No |  |
| Is any portable equipment in date for both maintenance & PAT testing? | [ ]  Yes [ ]  No |  |

**8: General Area** |
| Is heating & ventilation adequate? | [ ]  Yes [ ]  No |  |
| Are lighting levels suitable for the work that is undertaken in your areas of work? | [ ]  Yes [ ]  No |  |
| **9: WELFARE AND P.P.E ARRANGEMENTS** |
| Is eating or drinking ever permitted within working areas for any reason? If so, is this acceptable? | [ ]  Yes [ ]  No |  |
| Are any XXXXXXXXXX staff provided with any PPE for personal protection? (e.g. gloves, hi-vis clothing, safety glasses etc.). If so, is it checked, stored correctly, and maintained/serviced? | [ ]  Yes [ ]  No |  |
| Are there adequate hygiene facilities e.g. wash-hand-basins, toilets etc.? | [ ]  Yes [ ]  No |  |
| What is your process for cleaning and monitoring welfare equipment e.g. microwave, fridge etc.? | [ ]  Yes [ ]  No |  |
| Are first aid and other localised emergency procedures in-place, with all staff aware of these processes? | [ ]  Yes [ ]  No |  |
| **Post Audit** |
| Following this audit, who will be the ‘focal point of contact’ who will monitor and supply the 3,6,9 & 12 months close out of the non-conformances identified during the audit? |  |  |
| Does anyone apart from the ‘focal point’ need to be included in the diary invitations with regards to providing feedback on the completion to closure of the audit? |  |  |