

Facilities management Health and Safety Risk Assessment 89G

Responsibility:

Director of FM

Chair of FM H&S Committee

<i>The Hazard</i>	<i>persons at risk</i>	<i>Factors that could relate to, or contribute towards the risk occurring and/or</i>	<i>Current mitigating actions</i>	<i>Risk Rating</i>	<i>Improvement actions to mitigate the risk/person responsible</i>	<i>Action Arising – DATE of implementation</i>
1. Departmental risk Management process not fully understood or implemented by staff.	University staff, contractors, students and members of the public	Members of staff unaware of or non-compliance with departmental procedures and guidance.	Staff recruitment process covers the appropriate levels of education, experience and competence. Training includes recognition of responsibilities and operational requirements. Health and safety induction training. Training Co-ordinator now Employed.	3,5 High	Ongoing awareness training. Development of policy to include roles and responsibilities of members of staff. Additional periodic update training Responding to feed back from staff. All new staff receive a 1:1 induction to take them through the FM H+S Mgt system, highlighting procedures	Departmental H&S policy revised and adopted, auditing and monitoring processes, DAPs and nominated deputies identified. July 2009. Autumn 2012- operational staff briefed on their risk assessments. FM Directorate will be attending the Pinsent Mason h&s responsibilities briefing session May 2016.
2. Individual health and safety roles and responsibilities not identified or allocated.	University staff, contractors, students and members of the public		Procedures and guidance have been produced covering the technical aspects of work, including one for Risk Management and Risk Assessment. H&S Policy formally communicated following revision updates.	3,5 High	Updating the existing departmental policy to include a section specific to roles and responsibilities. Routine monitoring of DAPs performance by Line Managers. H+S Policy to be formally communicated spring 2013, highlighting H+S responsibilities.	Departmental H&S policy revised and adopted, auditing and monitoring processes, DAPs and nominated deputies identified. July 2009
3. Inappropriate first aid treatment of staff following accidents	University staff, contractors, students and members of the public		University and Departmental policies provide guidance. Health and safety induction covers reporting procedures. Provision of suitably trained staff, including first aiders. Access to security assistance out of hours via radio and telephone. Defibrillators carried by Security and located at various locations.	1,5 High	Continued awareness training for all staff and ensuring appropriate levels and currency of first aid training.	Risk re-assessed and found acceptable if the department retains existing numbers of first aid trained staff. DAP (F.Cooper) appointed January 2013 to manage improvement in this area. Action – revitalise the list of trained first aiders in FM with location – F. Cooper
4. Asbestos management ineffective leading to possible non-planned disturbance and associated release of	University staff, contractors, students and members of		The existing FM Annex X Asbestos Management is in the process of being converted into a University Policy. Training has taken place for PHs, Trades Staff, re-inspection team and Asbestos DAP.	3,5 High	Ongoing review of effectiveness of management programme. Improved monitoring and auditing processes. Annex X revised regularly. Asbestos awareness training refreshed	Departmental auditing and monitoring procedures introduced. Asbestos Authorised Person appointed who has undertaken P407 training.

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fibres.	the public				December 2012 + spring 2013	
5. Accidental release of energy from a pressure system	University staff, contractors, students and members of the public		Written schemes of examination for all pressure systems exist. Safe systems of work, including written departmental procedures and permit to dig (buried services) exist for operational and maintenance staff. Experienced and competent staff in key roles.	3,5 Medium	Improved monitoring processes. Continuation of engineers and operatives training to retain levels of competence. Revised pressure systems policy introduced in 2012 to manage the risk.	Auditing and monitoring procedures introduced and DAP identified within revised fm Health and Safety policy and guidance. DAP organising a 3 rd party audit in Q2 2016 to review pressure systems compliance.
6. Non-planned natural gas release due to inappropriate operational procedure or accidental disturbance of distribution system.	University staff, contractors, students and members of the public	Supervisory and technically qualified management staff turnover leading to reduced levels of knowledge of existing services and procedures.	Safe systems of work include permit to dig. All operatives (direct labour and contractors) undergo h&s induction, qualified Gas Safe personnel. Departmental procedures and guidance produced. Stakeholders involved in gas reporting procedures aware of required actions.	3,5 High	Improved monitoring of knowledge of guidance by stakeholders and line managers and implementation of agreed arrangements and procedures. Policy updated in 2011 to include new gas safe requirements. Excavations policy manages the risk of striking buried services.	Periodic review and monitoring of staff competence and currency of staff training database. Action – 1. All future installations to be safely undertaken and checked for compliance prior to acceptance by Asset Care. 2. Statutory Gas Safe testing of appliances 3. Ensure service records of gas mains are up to date.
7. Emergency out of hours response procedures could expose staff to additional risks where assistance is required, or where a personal accident might leave a member of staff without support following an accident.	Members of staff attending out of hours emergency		Safe systems of work involving strict guidelines and procedures in place. Staff not allowed to provide out of hours cover until line managers agree that they have the required knowledge of buildings and management systems appropriate to their trade. Sign in and out at security and accompanied by security.	2,5 Medium	Continuous monitoring of implementation of procedures and guidance. Emergency staff sign in + out of security. No lone working out of hours. A small number of staff will attend the working with asbestos in emergency course.with asbestos	Adoption of auditing and monitoring procedures and compliance with revised departmental H&S policy.
8. Accident involving staff who are required to work in confined spaces and controlled areas.	LU staff & Contractors		Safe systems of work involving written permits. Annex F procedures FM staff trained in confined spaces and suitably experienced.	2,5 Medium	Periodic review of procedures and guidance. Additional monitoring of implementation of procedures. FM Helpdesk to be contacted by phone or radio on entering + leaving	Annual audit and periodic monitoring by Duty holder and nominated deputies.

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<p>9. Accidents occurring on construction projects.</p>	<p>Members of FM and University employees and site visitors who require access to active work site or work adjacent to work sites controlled by contractors.</p>	<p>.</p>	<p>Contractor's arrangements should be followed by FM staff. (FM policy requires this) FM staff monitor contractors' compliance with their own declared arrangements. All FM staff receive generic H&S training which, allied to a contractor's site induction should ensure their health and safety. Safe systems of work including written procedures and guidance adopted by FM for work under their control. NEBOSH Construction certificate courses run in 2012+2013 to improve competence of staff. Monthly H+S review meetings to monitor H+S performance of contractors now on going. Major Project Contractors are given a copy of the FM HS&E Contractors induction. RPS undertake 3rd party site H&S Tours. FM Directors H&S tours take place.</p>	<p>2,5 Medium</p>	<p>controlled areas Monitor implementation of site H&S induction when members of FM access sites. Continued monitoring of sites under Coaching undertaken to give assistant supervisors the skills to monitor their own staff.</p>	<p>Periodic monitoring of arrangements by line managers when staff enter sites under contractors' control.</p>
<p>10. Accidents or ill health due to staffs' inappropriate use of or handling of hazardous substances, including possible outbreak of Legionella.</p>	<p>University staff, contractors, students local residents and members of the public</p>	<p>Inappropriate or lack of use of COSHH assessment software.</p>	<p>COSHH assessments carried out for all chemicals used utilising FM software based assessment programme. Appropriate training delivered to stakeholders. Robust safe systems of work including procedures and guidance issued and adopted. Periodic review of domestic and industrial water systems.</p>	<p>3,5 High</p>	<p>Improved and wider knowledge of content and utilisation of software package. Additional monitoring of adoption and incorporation of procedures and guidance. Appropriate update training required for supervisors, managers and staff. The COSHH Safety Organiser software has been briefed to supervisors, to enable them to manage the risks. Legionella/Water treatment policy.</p>	<p>Audit and monitoring procedures implemented as part of H&S policy and updated procedures.</p>
<p>11. Risk of electric shock</p>			<p>Written permits to work form the</p>		<p>Additional monitoring of</p>	

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from accidental exposure to High and Low Voltage electrical energy. Particular exposure during emergency work when services are lost.	University staff, contractors,		basis of safe systems of work. All staff and contractors staff competent and trained for the work. Competence monitored by FM managers. NICEIC audit and action plan for LV being progressed	3,5 High	implementation of safe systems of work. Preparation of generic risk assessment and associated method statement to be implemented at all times. Risk Assessment produced for avoiding buried services. New DAP for HV+LV appointed 2012. On going training for APs	Pre-emptive generic risk assessment to be undertaken and associated method statement prepared.
12. Lack of provision of adequate and appropriate welfare facilities.	University staff, contractors,		All campus facilities are available to all. Ring fenced work sights covered by CDM Regulations or alternative facilities available for non-ring fenced work. FM project management staff monitor CDM principal contractor's performance on larger contracts.	1,4 Low	Record keeping of monitoring should be recorded to ensure defence if challenged, particularly on construction sites under CDM where the 'Client' has a duty to ensure adequacy before work starts. Principal contractors are now asked at pre-start stage what temporary facilities they will have, whilst the project welfare set up is assembled.	Routine monitoring of project logs and records.
13. Injury to staff when carrying out manual handling tasks or repetitive work, including workstations.	University staff, contractors,	A significant proportion of accidents are reported when handling materials particularly when loading and unloading. Operatives	Procedures and guidance published. Manual handling training appropriate to the task including manual handling assessors. DSE assessments and training for staff as appropriate. Periodic update training. Review of risk assessments following any incident reports.	3,4 High	Additional monitoring of adoption and implementation of procedures. Review of appropriateness of and compliance with existing risk assessment methodology by proposed focus group. Manual Handling training refreshed 2012. FM DSE Policy refreshed 2012, improvement of assessment process being undertaken spring 2013.	Establish focus group and review existing arrangements.
14. Staff exposed to illness related to stressors due to inappropriate or ineffective management systems, including excessive workload.	All members of staff		Separate risk assessment (58G). University specific policy and guidance available.	3,5 High	As prescribed in separate assessment. Continue to monitor this subject	Review of current arrangements at University level.
15. Possible injuries	All members of		University specific policy and FM Policy		As prescribed in separate	DAP identified and audit reports

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caused through working at height.	staff and contractors who undertake such work. Other members of staff and visitors who are in the locale where such work is taking place.		Annex M.	3,5 High	assessment. Duty holder and nominated deputies identified to help manage. Annex M revised 2015	to FM SMT
16. Possible injury to staff due to exposure to physical hazards, hazardous substances, noise and vibration due to lack of or inappropriate use of PPE and RPE	All staff		Training, advice and guidance in requirement for and use of personal protective equipment and respiratory protective equipment. Risk Assessments state exact PPE requirements. Reactec HAV meter for Cricket team.	3,5 High	Ongoing monitoring of availability, correct use and application of RPE and PPE. Policies reviewed following audits. All staff assessed for the face-fit.	DAP identified and additional monitoring processes guidance adopted. Tools and equipment procurement processes updated to ensure adequate controls.
17. Risk to the health and safety of staff due to the inappropriate selection, use and maintenance of tools, equipment and machinery.	All operatives and University staff, contractors, students and members of the public who may be close by		Procedures and guidance, including maintenance procedures exist for all aspects. All staff are suitably trained in the use of machinery and equipment as appropriate. Induction training covers competence and appropriate use of machinery and equipment. Annex S audit 2016	3,5 High	Ongoing monitoring of implementation of procedures and guidance.	Annex BB. DAP identified. Tools and equipment procurement procedure reviewed and amended to ensure adequate control.
18. Possible injury to staff working in areas that are not under the direct control of FM managers in departments or areas which may have differing	Staff who work in such areas	Lack of knowledge of local H&S arrangements. e.g. Hazardous laboratory processes.	A generic simple code of practice which is reinforced during H&S Induction training. Safe systems of work for access and entry to roofs and controlled areas where discharges may contain hazardous substances. Staff report to building Manager before commencing	2,5 Medium	Ongoing monitoring of adoption of procedures. All staff encouraged to make contact with their 'host' when working in others areas, to determine any new risks in that location.	DAP identified to liaise with APs in potential hazardous or high risk areas.

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arrangements from those in FM controlled areas or which impose risks of which the operative is unaware.		Construction sites.	work.			
19. Injury to staff when driving as part of job, including attendance at meetings, conferences, training and the like. Possible physical deterioration with age.	Staff, students, visitors and members of the public.		All drivers require license. Additional procedure and guidance has been adopted including periodic checks on licenses and eyesight. Weekly Vehicle checks on all FM Vehicles.	3,5 High	Compliance with new procedures sketchy and additional awareness is required to assist adoption. Audit duty holder identified.	DAP identified to monitor and report

Assessment team’s comments. This generic departmental assessment does not attempt to address specific risks but to highlight their existence and advise on the relevant arrangements that have been developed to manage those risks.



Last reviewed by SMT: June 2016

I confirm that;

- a) all operations controls are functioning
- b) the risk is appropriate
- c) any near misses/incidents are suitably investigated and managed.

Signature.....

(Director Facilities Management)

Date:.....

Signature.....

(Facilities Management H+S Manager)

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Date:.....

Signature.....

(Facilities Management H+S Co-ordinator)

Date:.....

5 x 5 RISK MATRIX GUIDELINES

Estimate the Likelihood of occurrence from the guide box.
 Estimate the potential Harm using the guide box below.
 Record the estimates in the above risk assessment.
 Read off the intersection of the two numeric estimates on the risk calculation matrix.
 The resultant value should then be compared to the Risk Rating and actioned accordingly.

GUIDE BOX

CATEGORY	LIKELIHOOD	HARM
5	Almost certain	Major injury
4	Likely	> 3 days
3	Possible	< 3 days
2	Unlikely	First Aid
1	Almost impossible	Non-injury

RISK CALCULATION MATRIX

HARM	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
		LIKELIHOOD				

RISK RATINGS and THRESHOLDS

Threshold definition	Risk rating	Level of exposure	Action
Alarm	20 - 25	Unacceptable	Immediate corrective action required/prohibition notice
High	12-19	Concern	Decision required by Line Manger or duty holder: a) Action plan and improvement notice b) More regular monitoring c) Accept high risk level and review again within 3 months.
Medium	5 - 11	Acceptable	Regular monitoring
Low	1 - 4	Acceptable	Passive monitoring