

# NATIONAL POLICY, ORGANISATION AND SUMMARY ARRANGEMENTS FOR THE MANAGEMENT OF HEALTH AND SAFETY

	MANAGEMENT OF HEALTH AND SAFETY		
This instruction appl	ies to:	Reference:	
All HMPPS		AI 04/2015 PSI 06/2015 PI 03/2015	
Issue Date	Effective Date	Expiry Date	
Re-issued 31/07/2025	11/3/2021	N/A	
Issued on the authority of	Operational Policy Sub-Board	d	
For action by	and instructions  HMPPS HQ  Public Sector Prisons  Contracted Prisons*  The Probation Service  Community Rehabilitati  Other Providers of Prob  Governors  Directors  Heads of Groups  HMPPS Rehabilitation  Health and Safety Mana	Contract Services Team agers a this document the term Governor	
Instruction type	Legal Compliance		
For information	All HMPPS staff		
Provide a summary of the policy aim and the reason for its development / revision	make a statement of their pol for the management of health undertakings. This revision a • Some changes in HM and roles.	rk Act 1974 requires employers to icy, organisation and arrangements and safety risks arising from their ccommodates: PPS organisational structure, titles ment by the Chief Executive.	

Contact	FMB: <u>Health-Safety.national@justice.gov.uk</u>
	Hayley Gethen, National Health and Safety Lead (Prisons)
Associated documents	FMB: Health-Safety.national@iustice.gov.uk  Hayley Gethen, National Health and Safety Lead (Prisons)  PSI 2015-11 - Fire Safety in Prison Establishments; PSI 2015-18 - HMPPS Health and Safety Arrangements for Radiation Safety of X Ray Security Equipment; Assessment and Control of Radon in HMPPS Prisons, Probation Sites and Contracted Prisons Policy Framework; HMPPS National Health and Safety Arrangements for First and Emergency Aid Policy Framework; Litigation Claims Policy Framework; PSI 2015-32 - HMPPS Health & Safety Arrangements for the Management of Stress; PSI 2015-36 - Health and Safety Workplace Inspection; PSI 2015-37 - HMPPS Health and Safety (HS) Arrangements for Risk Assessment; PSI 2015-38 - Health & Safety Performance Monitoring; PSI 2016-02 - Health and Safety Arrangements for the Management of Accident Reporting, Recording and Investigation; PSI 2016-10 - HMPPS Health and Safety Arrangements for Consultation on Matters of Occupational Health, Safety and Fire; PSI 2016-11 - Health and Safety Management Arrangements for Manual Handling Operations; Smoke Free Policy Framework; Health and Safety Arrangements; Management of Workplace Transport Policy Framework; Prison Safety Policy Framework; Occupational Health and Employee Assistance Programmes Policy Framework; PSO 3802 Management of Exposure to Asbestos; HMPPS Transport Policy and Procedures Manual; PI 32 2014 Approved Premises and PI 32 2014 Annex A Approved Premises Manual; PI 32 2014 Annex A Approved Premises Manual; PI 32 2015 Health and Safety Arrangements for Workplace inspections; PI 12 2015 Health and Safety Arrangements for Risk Assessment; Home Visits Policy Framework; PI 18 2015 Health and Safety Arrangements for Risk Assessment; Home Visits Policy Framework; PI 11 2016 H&S Management of Fire Safety in Probation
	Premises; PI 13 2015 Health and Safety Arrangements Management of
This document replace	Accident reporting, recording and investigation.  ces previous versions of the following : - Al 04/2015, PSI

This document replaces previous versions of the following : - Al 04/2015, PSI 06/2015 & PI 03/2015

**Audit/monitoring:** Custodial Directors, Non-Custodial and Regional Probation Directors will monitor compliance with the mandatory actions set out in this instruction.

Compliance with this instruction will be monitored:

- Local monitoring arrangements in place to ensure compliance.
- Locally via health safety and fire leads must monitor policy compliance and management arrangements and report to duty holders.
- PGDs/RPDs and governors will monitor compliance with requirements sets out within this policy framework at their sites.
- In contracted custodial settings, policy monitoring, audit and assurance will be via standard custodial contract management arrangements.
- Health Safety Fire function must provide assurance to HMPPS at executive group and site level via reports presented at health and safety committees.

Governance and oversight at MoJ level is provided by MoJ's Corporate Health and Safety Committee comprising senior members of all MoJ's constituent parts. This committee is a subcommittee of MoJ Executive Committee.

Introduces amendments to the following documents: None

Notes: All Mandatory Actions throughout this instruction are in italics and must be strictly adhered to.

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# 1. EXECUTIVE SUMMARY

## Background

- 1.1 The Health and Safety at Work Act 1974 requires HMPPS, as an employer, to prepare and regularly review a general policy on health and safety and to describe its organisation and arrangements to deliver that policy. This document represents HMPPS overarching framework for all health and safety management and is complemented by national Fire Safety Policy and national Occupational Health Policy which are to be read in conjunction with it.
- 1.2 HMPPS is also required by law to consider the health and safety risks its undertakings present to those affected by its work activities, to assess those risks and, proportionate to the level of risk, to eliminate same or to put in place, monitor, maintain and review suitable arrangements to ensure adequate control of those risks.
- 1.3 This Instruction states HMPPS' Health and Safety policy, outlines the structures and duties of HMPPS' organisation for delivering the policy and provides the framework for HMPPS' arrangements for managing its health and safety risks.
- 1.4 Staff at all levels should be able to identify from this document their own key responsibilities for health and safety, the roles of their managers, staff and specialists, the methods for reporting concerns and the bodies for consultation and decisionmaking on matters of health and safety.

# 1.5 The purpose of the PSI / PI is threefold:

- a) To ensure that Executive Directors, Group Directors, Deputy Directors, Regional Probation Directors (NPS) Probation Heads of PDU's, Regional Managers, Heads of Groups Directors and Governors have in place a framework for effectively managing health and safety, which meets with the requirements of the Health and Safety at Work etc. Act 1974 and internal HMPPS' policy to ensure the health and safety of staff and others who may be affected by the Service's undertakings.
- b) To be the primary document for HMPPS to convey to ALL staff and 3<sup>rd</sup> parties its policy and arrangements for health and safety. It is a legal duty for the policy to be brought to the attention of all employees. All employees are also required, by law, to co-operate with their employer on matters of health and safety.
- c) To meet the legal requirement to have a policy in place.

# Key organisational changes in prisons and probation relevant to this Revision

- 1.6 The changes associated with the Prison and Probation Safety and Reform programmes are reflected including the revised and developing prison and probation groupings and the organisational structures to manage and support them.
- 1.7 The changed status under reform structures does not remove any requirement for these establishments to comply with HS policy, in particular where this is driven by

legislative requirements. Prisons are required to achieve the standards set by this policy and its component arrangements. To ensure that organisational risks are

controlled this revision includes amendments to clarify the application of the policy to the roles of the relevant duty holders.

- 1.8 Increased flexibility is available to managers in areas such as contracting decisions, procurement, offender management and regime operations. However, prisons in the reformed service are not legally distinct entities, and are subject to the same legal duties under health and safety at work requirements as all other parts of the Ministry of Justice and HMPPS, as an agency of the MoJ.
- 1.9 MoJ, through HMPPS, retains ultimate liability in civil and criminal law for the acts and omissions of all its employees. HMPPS HS policy and arrangements which relate to custody apply to all custodial operations in public sector prisons. HMPPS' HS policy and arrangements are designed to allow flexibility in achieving appropriate standards of safety and health and to reduce the need for establishments to develop their own extensive policy and arrangements in doing so.
- 1.10 In order to discharge the legal duties on MoJ, HMPPS, as an Executive Agency of MoJ, must monitor and account for the effectiveness of its control of health and safety risks in its operations. Prisons and probation therefore remain accountable via their local management, to their Director Generals and to the Chief Executive Officer for their HS performance.
- 1.11 The use of both reactive and proactive measures outlined in relevant HS monitoring arrangements applies in prisons and probation services including the need to report on performance via the management line and via the HMPPS Leadership Team (HLT) Committee, HLT OHSF Sub-Committee, NPS Senior Leader Board, National NPS H&S Committee, AP Continuous Improvement Governance Board, using the same processes across the estate in line with this national policy.
- 1.12 All HMPPS staff in prisons and probation are bound by the same statutory and policy duties placed on them individually by the Health and Safety at Work Act and its associated requirements as bind staff in other HMPPS operations.
- 1.13 Where relevant national arrangements or organisation statements place an HS duty on a particular role or function and establishments as a whole wish to reallocate or revise such a duty or process, approval for the revision must be sought from the relevant Executive Director.

## Desired outcomes

## 1.14 The desired outcomes include:

- To ensure wide access to a clear, identifiable, accessible and authoritative statement of HMPPS Health and Safety Policy, Organisation and Arrangements.
- To summarise to all staff their duties and obligations for health and safety and to identify in outline what all staff and 3rd parties can expect in terms of the protection of their health and safety.
- To describe clearly a high-level framework for HMPPS' HS Management System.

- To assist in the maintenance of good levels of HS performance and to reduce the risk of work-related accident, injury and ill health to all those effected by HMPPS undertakings.
- To support risk-based compliance with legal requirements for Health and Safety.
- To support consistent and risk-based responses to health and safety risk control across sites and services.

# Application

1.15 This Instruction is divided into three significant parts:

# 1.16 HMPPS Health and Safety Policy Statement

This is signed by the Director General CEO . It confirms the commitment to the health and safety of all HMPPS' staff and those affected by HMPPS' work; provides evidence that HMPPS keeps its policy in this area updated and relevant and ensures that staff are made aware of the policy in line with statutory requirements. The policy statement must be displayed in all HMPPS premises in an appropriate location and the complete document drawn to the attention of staff and made easily available to them.

# 1.17 **Organisation Statement**

This includes descriptions of the mandatory duties of managers at a variety of levels, certain groups and of all staff.

- 1.18 Regulation 8 of the Management of Health and Safety at Work Regulations require employers to have access to competent advice on how they can comply with all health and safety requirements which relate to their operations. This section explains how HMPPS' gets this advice and assistance on matters of health and safety in line with the statutory requirement for same and outlines HMPPS' processes for health, safety and fire related performance monitoring, governance and assurance.
- 1.19 HMPPS' organisation charts reflecting management accountability at senior level are published on the HMPPS Intranet.

# 1.20 Summary Health and Safety Arrangements

Annex 2 describes HMPPS' summary health and safety management arrangements. These are expanded on in more detailed Corporate Policy and Instructions outside this National policy where necessary.

# Mandatory actions

1.21 All senior managers in HMPPS are expected to ensure that all staff they manage have the relevant sections of this instruction, as identified above, shared with them.

# Resource Impact

1.22 This PSI / PI updates existing policy. There are no additional resources required to implement the requirements of this PSI / PI though Executive Directors, Group Directors, Directors, Regional Probation Directors, Deputy Directors, Governors, Heads of Group and Probation Heads of PDU's will need to consider the need for acting and engaging strategically with the direction set by the revised policy.

# **Contact**

1.23 Further information about this Al/ PSI / PI can be obtained from:

Functional Mailbox: <a href="mailto:Health-Safety.national@justice.gov.uk">Health-Safety.national@justice.gov.uk</a>

(Approved for Publication)

Cohen Lewis

Cohen Lewis, Deputy Director National Services Health, Safety, Fire, Litigation & Estates

# 2. HMPPS Health and Safety Policy Statement

- 2.1 As Chief Executive Officer of the Her Majesty's Prison and Probation Service (HMPPS), I am fully committed to the provision of work activities and work places which ensure, so far is reasonably practicable, the safety and health of all HMPPS employees and those who may be affected by HMPPS' undertakings such as residents, service users, visitors and contractors.
- 2.2 I recognise that health and safety is of primary importance to the overall performance of the business and accept that good safety performance, where risks are effectively managed and accidents, injuries and occupational ill health are reduced as far as is reasonably practicable, will add to the overall performance of the service.
- 2.3 HMPPS values its staff as its most important resource and is committed to ensuring their health and safety by meeting the requirements of legislation as a minimum and delivering consistently effective levels of health and safety performance.
- 2.4 HMPPS' values of decency and safety for staff, residents and service users in the community fit integrally into this policy which therefore contributes to the safe and decent treatment of residents and service users in all aspects of HMPPS' work.
- 2.5 HMPPS is an Executive Agency of the Ministry of Justice and delivers most of its services in premises owned or leased by that ministry. As an occupier of these premises, HMPPS is committed to working closely with the Ministry of Justice to ensure that standards of workplace health and safety are maintained.
- 2.6 HMPPS is also committed to working with the Ministry of Justice's procurement services to provide advice on specifications so that that health and safety standards are maintained in the procurement and delivery of goods and services required to deliver its services.
- 2.7 HMPPS works extensively with 3rd party service providers to deliver its aims and services. HMPPS expects, and is committed to, effective co-operation on matters of health and safety with all its contracted service providers and to integrating relevant and appropriate standards of HS performance within its contracts.
- 2.8 Responsibility for ensuring health and safety in HMPPS rests with myself as Chief Executive Officer. I deliver this responsibility through the direct management line, supported and enhanced by a range of policy functions including MoJ People Group HMPPS Health, Safety and Fire Teams, Security, MoJ Estates and Safer Custody. I expect and require managers and staff at all levels to deliver on the duties laid out in this policy and to commit to its values and intentions.
- 2.9 To achieve the desired standards, all levels of management and employees in all of HMPPS Directorates and Services are responsible for discharging their duties under health and safety law, this policy, and other relevant polices and instructions.
- 2.10 The Deputy Director of Prisons, as the nominated Director for health and safety, will ensure that this health and safety policy is developed and reviewed when any significant changes occur.

Specifically, I commit HMPPS to:

- Provide and maintain places of work, working conditions, equipment and systems of work which ensure the health and safety of all employees so far is reasonably practicable
- Provide employees with the information, instruction, training and supervision that they require to perform their work safely and efficiently so far as reasonably practicable
- Ensure the health and safety of residents, service users and third parties affected by the work of HMPPS so far as is reasonably practicable
- Ensure risk-based compliance with all relevant health and safety legislation
- Recognise the value of consulting with and involving employees and their representatives on health and safety matters and undertaking active consultation and engagement with both union and non-union safety representatives
- Carry out risk assessments and implement proportionate and pragmatic control measures
- Provide a mechanism for regular monitoring, auditing and reviewing of HS performance and controls
- Investigate adverse incidents in proportion to their potential severity to identify underlying cause and take proportionate action on future prevention
- Establish procedures for dealing with serious and imminent danger which enable those potentially exposed to be aware of the risks and to take necessary measures to protect themselves
- Provide effective communication to employees on all health and safety matters
- Implement arrangements for the use, handling, storage and transport of articles and substances
- Bring this policy to the attention of all employees by:
  - Agreeing it with HMPPS unions
  - ☐ Displaying the statement in all HMPPS' sites in an appropriate location
  - Providing it to all new staff and to all existing staff being inducted into new roles
  - Summarising any changes to its content in Notices to Staff

Signed:

Phil Copple, Director General CEO HMPPS

Date: 8<sup>th</sup> July 2025

P. Copple

# 3. Mandatory Duties in HMPPS Health and Safety Organisation (please refer to Annexes 1A & 1B for organisation charts)

# The Chief Executive Officer (CEO)

- 3.1 The Chief Executive Officer is ultimately responsible for ensuring the health and safety of all staff and others who may be affected by the Service's undertakings.
- 3.2 Strategic decision-making and leadership of the board must reflect the intentions of this policy and integrate HSF, proportionate to risk, into all relevant aspects of business direction. HMPPS Leadership Team provides direction to all of HMPPS Business and comprises the CEO, Director Generals and Executive Directors.

# HMPPS Leadership Team Committee.

- 3.3 The CEO delegates the duty to implement all relevant aspects of this policy to the Executive Directors.
- 3.3 The CEO requires the Directors and the board to work to maintain and optimise standards of health and safety across the organisation.

# Director General, Executive Directors and Directors - Prisons and Probation

3.4 The Chief Executive Officer - chairs the HMPPS Leadership Team Committee.

The Director General - Prisons chair's the Prison Operational Management Committee also chair's the Occupational Health, Safety and Fire Sub-Committee which deals with operational fire, health and safety performance.

The Director General - Probation and Wales chairs HLT with NPS Senior leadership board SLB chaired by NPS Exec Director, and NPS National Health, Safety & Fire Committee chaired by Deputy Director for Business Strategy Change.

The Executive Directors of Public Sector Prisons – North, South and Long Term High Security are responsible for the strategic co-ordination of HSF in their respective services, ensuring accountability for HSF performance in Prison Group Directors, delivering systematic responses to wider HSF risks and maintaining clear understanding of HSF performance.

- 3.5 The Executive Director Probation is responsible for the overall health and safety performance of HMPPS public sector probation services and oversight and assurance of contracted community services outside Wales.
- 3.6 The Executive Director Approved Premises is responsible for oversight and governance of health, safety and fire in approved premises outside Wales.
- 3.7 The Executive Director HMPPS Wales is responsible for all Community and Custodial Operations in Wales including oversight and governance of contracted operations in Wales.

# **All Executive Directors and Directors**

- 3.8 All Executive Directors and Directors must:
  - Sanction and support this policy and ensure that it is disseminated to all staff and sites under their control.
  - Ensure that, in any decision-making regarding resources, business planning, changes of use of buildings or services and organisational restructuring, the principles and intentions of this policy are considered and followed.
  - Receive and act upon reports relating to compliance with this policy across the sites and services for which they are responsible.
  - Encourage and hold to account their managers, staff and contracted service providers in compliance with this policy.
  - Actively engage in relevant decisions, planning and direction relating to the implementation of this policy in sites and services under their control.
  - Liaise and co-operate with fellow directors, either individually or in contributing to HLT business, to ensure effective delivery of this policy in areas where the actions and decisions of one directorate impact on health and safety performance in another.
  - Put in place the necessary direction and arrangements within their directorates to implement the requirements of this policy.
  - Put in place the necessary arrangements to allow effective consultation on matters of HSF within their directorates for both union and non-union staff.
- 3.9 Deputy Directors and Prison Group Directors must, within the sites and services for which they are accountable:
  - Ensure policy is translated into effective health and safety procedures, systems and standards which are in line with, and meet the requirements, of national policy and arrangements.
  - Direct and ensure the implementation of the organisation and arrangements measures laid out in national policy.
  - In Probation Services ensure, in addition to national HS policy, organisation and arrangements documentation, the development of a relevant local Probation HS policy and relevant and risk-proportionate local HSF material where this is required and will deliver reductions in risk.
  - Ensure local HS risk assessments are undertaken in line with national policy and that the risk controls defined at national or regional level by this document (or related Health and Safety Als / PF/ PSIs / PIs or national risk assessments) are implemented in addition to any local controls as required.

- Ensure that in each probation region a Health and Safety Committee is set up chaired by the Deputy Director, or their representative.
- Ensure that each site and service under their control (including Approved Premises) appoints and trains a member of the SMT as a Health and Safety Sponsor and, for community services, suitable staff members as HS liaison, dependent on complexity, size and risk.
- Ensure that arrangements are in place for effective and regular consultation with staff for both union and non-union staff.
- Ensure that suitable arrangements are in place to ensure the safety of staff and others in the event of a fire or other emergency and that these are regularly reviewed and tested for efficacy.
- Ensure that planning and resourcing incorporates consideration of the need for essential staff HSF training and instruction.
- Ensure that local workplace inspection programs are in place and implemented.
- Ensure that both national, and proportionate local arrangements, are in place to regularly audit, monitor and review the health and safety performance of the sites and services under their control.
- Ensure that the sites and services under their control utilise the available health and safety advice, assistance and support and that they themselves access such advice.
- 3.10 Prison Governors, Regional Probation Director of PDU's, Heads of Group must, within the premises and services for which they are accountable:
  - Ensure that the structures and processes outlined in this national policy are implemented to achieve the levels of control over risk required by law and / or this policy. In general, the requirement to reduce risk will be to the lowest reasonably practicable level though there are areas where risk will need to be managed to the lowest practicable level.
  - They must allocate resources and determine systems and procedures within their remit to govern the work of their staff and services above to deliver effective ongoing management of health and safety risks.
  - Monitor how effectively their organisation and procedures for controlling H&S
    risks are operating using suitable local techniques such as inspection, audit and
    incident analysis together with nationally defined processes such as;
    - Government Internal Audit Agency

(GIAA) - PHASE monitoring system

- Statutory Mandatory Compliance auditing
- Probation HSF KPI management monitoring system Regional governance and assurance visits.

Where appropriate, take timely and proportionate corrective action.

- Ensure and encourage effective co-operation between individuals, sections and functions on matters of health & safety.
- Recognise the value of effective consultation on HS and therefore ensure that appointed safety representatives are given reasonable facility time to carry out their functions and duties as defined in statutory regulation and the HMPPS HS consultation arrangements.
- Ensure that a Health and Safety Committee is set up at each custodial establishment in line with statutory regulation and the HMPPS consultation arrangements
- Appoint a Health and Safety Sponsor in prison establishments and an HSF Sponsor or Liaison in other locations or services depending on risk or size and the HSF Sponsors are provided with suitable training.
- Ensure that the custodial establishment's HS Committee is chaired by the custodial Health and Safety Sponsor or Governor.
- Ensure that the Regional Probation HS Committee is chaired by the Regional Probation Director or Appointed deputy.
- Where safety representatives who do not belong to a union are appointed to represent staff, ensure that they are provided with appropriate training and to meet the cost of such training and to provide reasonable time to undertake their function.
- Report on the efficacy of health and safety management within their span of control and rectify or highlight any serious concerns.
- Prison Governors and Directors/Regional Probation Directors must devise, implement and maintain an active Regime Management Plan/ Regional HS Strategic Plan which ensures that levels of planned regime activity are proportionate to the resources available to manage that activity safely so far as is reasonably practicable. The plan must be agreed via consultation at the local HS Committee.

# <u>Principal HSF&L Leads, Custodial Deputy Governors, Custodial Heads of Function,</u> Probation HSF leads, Head of PDU's, Approved Premises Head of Operations

- 3.11 These managers are responsible for ensuring health and safety in ongoing operations and activities within their span of control. They provide tangible and visible direction and oversight of the staff and services under their control and the authority to direct whole work activities and groups of workers.
- 3.12 They must provide leadership and role-modelling for all their staff and in matters of health and safety.
- 3.13 These managers are closely enough engaged with day-to-day operations and performance processes such as bilats incident management, grievance and discipline to ensure that high standards of HSF are recognised and poor standards are rectified appropriately.

- 3.14 They must ensure that the needs of their staff, and or 3<sup>rd</sup> parties, for training, information and / or adequate supervision are identified and understood. Managers must include identified training in relevant plans and arrangements for delivery of same, to ensure health and safety in the activities they manage and control. They must ensure that such training is provided and monitor the delivery of same.
- 3.15 They must mobilise the resources under their control to implement the plans and procedures for ensuring safety and health as determined by Prison Governors, Directors, Probation Heads of PDU's or Heads of Group.
- 3.16 They are able to prioritise work activities and determine the way in which work is done in such a way as to ensure that HSF considerations together with any local and national policy are applied. For example, they can make decisions relating to the extent of prison regime based on staffing provision in line with the Prison Regime Management Plan/ Probation Regional HS Strategic Plan.
- 3.17 They must arrange for and receive regular management information on the HSF performance of their staff and services and take appropriate action to mitigate risk temporarily, to rectify unsuitable performance and / or to report to Prison Governors, Directors, Heads of Group or Probation Heads of PDU's as appropriate with prioritised recommendations for action. For example, they should be aware as to the relative level of assaults occurring to their staff, and the extent of SLE absence in their team and the causes thereof.
- 3.18 They must ensure that health and safety is covered in formal meetings with their teams and in formal development and review processes (SPDRs) with their staff.
- 3.19 They must engage and consult effectively with all their staff on issues affecting their health and safety including, especially, changes to premises, systems, services, equipment or organisation.
- 3.20 They must ensure basic health and safety provisions are in place, understood and implemented including, for example:
  - bringing this policy to the attention of their staff
  - emergency procedures,
  - regular workplace inspections,
  - implementation and review of local risk assessment for example stress, maternity, locally managed operations such as residents cleaning regimes etc.
  - effective procedures for incident reporting and investigation,
  - induction training,
  - supervision of new and inexperienced staff and of contractors,
  - provision of safe equipment including PPE.
  - routine workplace tests e.g. fire alarms
  - basic standards of tidiness and cleanliness etc. and
  - responses for serious and imminent danger
  - the initial assessment and referral, if required of staff requiring occupational health services

<u>Custodial Managers, Team Managers, Senior HSF Advisors,</u> Approved Premises Managers and Senior Probation Officers, HSF Advisor/Business Admin (NPS)

- 3.21 These staff must provide day to day oversight and control of the operations, staff or contracts for which they are responsible and ensure that work is undertaken safely in line with national and / or local systems.
- 3.22 They must instruct staff directly or in advance of certain planned work being undertaken and ensure that health and safety issues are considered and suitable means of managing risk are adopted.
- 3.23 They should instruct and guide staff on operational practice and suitable methods of working, ensuring that staff, and others under their control follow operating procedures and safe systems of work, sanctioning poor or inadequate performance as appropriate.
- 3.24 They are responsible for the local implementation of key measures such as:
  - emergency procedures,
  - workplace inspections,
  - completion and review of risk assessments,
  - induction training,
  - supervision of new or inexperienced staff and of contractors,
  - provision of safe equipment including PPE,
  - basic standards of tidiness and cleanliness etc.; and
  - take steps to rectify or report matters of serious failures of implementation.
- 3.25 They are responsible for ensuring that any accident/incidents are reported, recorded and investigated and that findings are communicated appropriately.

# All Staff

- 3.26 All staff have a legal duty to look after their own health and safety and that of others effected by what they do or do not do and to co-operate with their employer on matters of health and safety. This extends to:
  - following agreed procedures and processes including those for responding to serious and imminent danger
  - attending and following relevant instruction and training
  - considering risk before acting in line with training and guidance
  - reporting incidents, ill-health and near misses
  - reporting damaged or faulty building or equipment where it presents a risk
  - contributing positively to discussions about improving procedures and processes via risk assessment
  - voicing to their line manager any concerns they have regarding their health and safety
  - wearing personal protective equipment where required by risk assessment
  - not to damage or interfere with equipment or procedures provided to achieve effective control of HS risk

# Health, Safety and Fire Sponsors and Health, Safety and Fire Liaison Officers

3.27 The role of the Health, Safety and Fire Sponsor is to assist Senior Operational managers in the co-ordination of all relevant HS activities within individual establishments or Probation Clusters. Sponsors will be at a senior level, for example Deputy Governor, Probation Heads of PDU's or Senior Probation Officer, but it is not a

full-time role and responsibility for delivery of HS actions remains a line management function (as detailed in this policy).

Its purpose is to provide the line management authority to:

- Co-ordinate resources to achieve key HS aims.
- Overcome cross-departmental/partnership barriers to effective HS delivery. In custodial establishments, chairing the health and safety committee with advice from the relevant Senior HSF Advisor.
- Provide local leadership on HS issues.
- Be a focal point for liaising with local union health and safety representatives
- Provide local HS performance assurance to senior operational managers and oversight and summary action on compliance reports and investigations.
- Bring serious concerns to the attention of the Governor, Group Director, or Deputy Director.
- Representing the interests of effective HS management in SMT discussions re business plans and changes of function and use.
- 3.28 Health and Safety Sponsors are not required in every premise, but are required at an organisational level where operational management influence is required over a significant range of services or departments. In Probation, there must be at least a HSF sponsor per cluster, but due to the size and complex nature of most custodial establishments it is likely that a Health, Safety and Fire Sponsor will be required at each custodial establishment.
- 3.29 Where a HSF Sponsor covers more than one site a HSF Liaison officer or similar should be nominated in each location to act as a point of contact for notices, actions, reports etc. related to HSF and local HSF performance reporting to the HSF Sponsor.

# All HMPPS' Locations EXCLUDING Prisons and HMPPS' London HQ

- 3.30 Directors, Probation Heads of PDU's, Custodial Heads of Group, and Service Managers with staff and services in non-custodial locations other than London HQ must ensure that these locations:
  - Have current and proportionate fire risk assessments in place, including procedures for imminent danger and emergency which are practiced and evaluated at least annually or in line with the frequency prescribed by the assessment.
  - Operate suitable systems for lone working, remote working and premises access and security.
  - Operate suitable systems for the prevention of violence, for mitigating responses to violence when it occurs and for effective follow up of same.
  - Have in place sufficient numbers of appropriately trained appointed persons, first aiders and/or emergency first aiders.
  - Implement, and check on, a risk based program of workplace HS inspection, a method of recording same, a method of expediting findings from same and a system to check, record and report the status of actions from same.
  - Deliver a proportionate and effective means of communicating with all staff on matters of health and safety.
  - Implement a procedure for reporting and recording all work-related accidents, injury and ill-health via the Sphera system.
  - Identify and maintain contact with a designated, competent HS advisor.

- Devise and implement procedures to ensure that contractors and third parties on site are suitably informed of risk, supervised and controlled and that their activities do not put other persons at risk.
- Have in place suitable, sufficient and proportionate processes and access to competent support to ensure, at appropriate frequencies, the inspection, test and condition reporting of:
- Fire detection, alarm and evacuation equipment
- Procedures for imminent danger
- Electrical installations and, as appropriate, electrical appliances
- Gas supply and appliances
- Local exhaust or general ventilation
- Lifting equipment
- Pressure systems
- Water systems where legionella is identified as a potential risk
- Security access and control systems
- Asbestos containing materials
- Structure and fabric of the building
- Condition of fixtures, fittings and finishes
- General access and egress
- DSE workstations and DSE user training
- Housekeeping and the condition of incidental work equipment
- Appropriate induction and other relevant training and instruction for occupants related to the above
- 3.31 Directors, Probation Heads of PDU's, Custodial Heads of Groups and Service Managers are responsible for ensuring that systems for managing health and safety as described in this policy are in place in any outlying offices under their control.
- 3.32 In buildings where the HMPPS is a minor occupant, consultation must take place on health and safety arrangements between the HMPPS' staff occupying the building concerned and the major occupier primarily responsible for the day to day operation of the premises.

# **London Headquarter Buildings**

- 3.33 Heads of Groups and Deputy Directors with staff in London HQ Buildings must ensure the health and safety of their staff through co-operation and compliance with the requirements of the London HQ Health and Safety Policy, and participation in and cooperation with the Headquarters Health and Safety Committee.
- 3.34 For London HQ buildings a Health and Safety Committee made up of key stakeholders and chaired by a senior member of staff will be responsible for consultation and coordination of health and safety. In any transition to other HQ accommodation, standards of consultation will be maintained and HS management and liaison integrated effectively with proposed new accommodation arrangements. Where HMPPS has a majority of the staff HMPPS will set up a HSF Committee. In buildings where HMPPS are the minority occupant HMPPS will attend the HSF Committee set up for the building.
- 3.35 In London HQ buildings, where HMPPS are the majority occupant, HMPPS HQ HSF Team will be responsible for ensuring regular workplace inspections in association with the safety representatives for the area.

- 3.36 The most prominent risks at HQ relate to fire, stress and DSE workstation use. A local Health and Safety Induction is completed within HQ buildings, which covers these issues. Line Managers must ensure their staff complete this induction and request further support from the local HS advisor as necessary.
- 3.37 All staff who work permanently in HQ buildings, MUST be familiarised with the layout of the building, the emergency exit routes, alarm system and muster points and related emergency procedures in particular.

# 4. Access to Competent HS Advice and Support

- 4.1 The Deputy Director of Prisons must ensure that the service is provided with suitable and sufficient competent advice on matters of health & safety:
- 4.2 Competent advice and support comes from a range of sources. Current provision within the HMPPS line is as follows:

# Strategic Centre HSF Team

- 4.3 This team comprises of the following Health, Safety and Fire roles;
  - Head of HSFL
  - Head of Strategic Centre
  - National HS leads (Prison & Probation)
  - Senior HS Advisors
  - HSF Advisor
  - Probation HS Leads
  - Probation HS Business Admin
  - Business Manager

## In addition:

- Specialist Fire advice and support is provided by the National Fire Safety Team
- Occupational Health and Employee Assistance Policy & Strategy service provided by MoJ People Group
- 4.5 These teams deliver the following services:
  - Develop national policy in collaboration with the business
  - Provide advice at a senior, strategic level
  - Support regional management and HSF leads
  - Provide governance and assurance at national level.
- 4.6 In addition to the central resource provided within the Public Sector Prisons and Long term High Security Estate HS teams are in place, comprising:

# Principal Health Safety, Fire & Litigation Lead: HSF&L

4.7 These are senior practitioners who lead on HS advice and assurance to the operational management line in the sites that their teams cover. They co-ordinate the implementation of national HS policy and provide support to its development. They directly manage the provision of HS advisory and assurance services to the operational line providing high quality advisory services and ensuring effective governance and assurance to the senior managers of the sites to which they provide a service. They

are responsible for ensuring that their teams work collaboratively with Estates teams to provide effective planning and assurance of the FM contractors work.

# Senior HSF Advisor (Custodial)

- 4.8 This role provides HSF advisory and assurance services to Governors, Directors and other senior managers in relevant clustered or individual public sector custodial sites.
- 4.9 Senior HSF Advisors are highly qualified practitioners and are line managed directly by the Principal HSF&L Lead. In Wales, this role covers both custodial and community sites and reports to Principal HSF&L Lead.

# Health, Safety and Fire Advisor (Custodial)

4.10 This role provides local support, including RPE training, guidance and performance monitoring and is line managed by the Senior HSF Advisor.

# **Custodial Estates Management**

4.11 Facilities management services are provided under TFM contract on a supra-regional basis with the HMPPS prison regions aggregated into four lots for TFM service delivery purposes other than for HMPPS Brixton and HMPPS Isis where local contracts are in place. PGM manages and assures the contract in those prisons where it applies.

# **HMPPS IPF**

- 4.12 At national level, HMPPS' Head of Prison Maintenance is accountable for oversight and direction to HMPPS' estates functions providing:
  - corporate assurance on the efficacy of contract delivery and performance
  - liaison and co-ordination with MoJ Estates regarding strategic planning, prioritisation and resourcing of works and FM services
  - the prediction and planning of FM resource demands for the HMPPS estate and reporting thereof to MoJ Estates and HMPPS Boards.
  - line management of HMPPS' Regional Service Leads (Estates) and their teams
  - attendance at, and reporting, to the HMPPS Board's Health, Safety and Fire Sub-Committee
  - The direction and prioritisation of FM resources and management focus in line with strategic HSF risk and compliance performance

# Regional Estates Management

- 4.13 At HMPPS' regional level, Senior Service Managers through their Regional Property Operations Managers provide direction and oversight to the FM contractor delivery in their regions as follows:
  - They are responsible for assurance to HMPPS and MoJ Estates Directorate (ED), via the Head of Property Services Lead, that Estates services are being delivered to agreed standards and for overseeing the resolution of any regional issues regarding the provision of services.
  - They are responsible for ensuring that their teams work collaboratively with Regional HSF teams to provide effective planning and assurance of the FM contractors work.

- Providing leadership to the Area Property Operations Managers and working with other Regional Property Operations Managers to identify wider or ongoing issues that need to be resolved at contract level involving the Service Manager.
- They are responsible for the monitoring and assurance of statutory and mandatory compliance against the contract and delivery management for Works and FM services to ensure consistency at regional and contract level.
- They are responsible for ensuring that both programmed and responsive maintenance work is well planned and delivered by contractors and is effectively managed to achieve the forward maintenance plan and estates management strategy and to meet standards of health and safety.

# Area Property Operations Mananager (APOM)

- 4.14 At HMPPS establishment or cluster level, APOM's are responsible for the day to day planning and oversight of the contracted service and for liaison on same with prison management. Their role in respect of health and safety is as follows:
  - Responsible for working in co-operation with HSF staff in the monitoring and reporting of the HSF performance and compliance of FM contractors including regular review meetings to cover the agreed HSF assurance and performance agenda.
  - Contribute to the effective planning of safety and health and risk assessment in new build projects, refurbishments and changes of use
  - Advise stakeholders regarding specialist aspects of FM relating to health and safety such as asbestos, legionella, gas, pressure systems, lifting equipment etc. in co-operation with HSF colleagues
  - Include in the assurance and performance information they provide to RPOM's and senior stakeholders, information on the above.
  - Provide direct oversight of contractor work on projects up to £150,000

# **Advisory Services outside the HMPPS Line**

Outside the HMPPS line competent advice is proved as follows:

# Facilities Management and Estate Services

- 4.15 This is provided by MoJ ED, in general, MoJ is effectively the owner or lessee of the premises within which HMPPS delivers most of its principle services.
- 4.16 MoJ ED provides technical, design, specification, standards, contract planning and commissioning and CDM services either directly or under contract in respect of these premises and works associated with them.
- 4.17 The approach to estates management differs between the Public-Sector Prison (PSP) estate and the Probation estate.
- 4.18 HMPPS provides ongoing operational estates management services such as, inspection, maintenance and repair services within the PSP estate through the TFM contract, whereas MoJ Estates provides this for the Probation estate.

4.19 These arrangements mean that the operation of facilities and asset management processes, particularly those around critical HS risks such as statutory inspections, fire equipment and systems testing, legionella assessment and control, asbestos surveys and management planning require effective co-ordination, communication and co-operation between MoJ Estates, HMPPS Estates Management function, TFM contracted services, Probation Management and the range of contractors used for either capital or revenue facilities services.

# FM in Prison Premises

- 4.20 The management of capital projects is split between MoJ ED and HMPPS Estate Management Services based on a capital threshold with bids from the HMPPS' Estate made to MoJ ED and prioritised and allocated against resources at that level. HMPPS can make fast track bids over this threshold for urgent capital work.
- 4.21 Planned preventative maintenance and repair request response services are delivered via a Computerised Asset and Facility Management (CAFM) system. The system is used by the FM contractors in which asset registers and their maintenance cycles and specifications are controlled and developed by MoJ ED based on information received from the operational estates field.

Small repairs can be requested by any member of staff via the HMPPS intranet, or via the appropriate call centre for relevant contract provider.

# Forums to review, assure and plan FM

- 4.22 In public sector prisons, post-contract award, pre-works contract planning meetings take place involving the principle contractor, site operational and security management, HSF advisor, CDM co-ordinator, MoJ Estates Project Manager, TFM provider, relevant consultants and sub-contractors and staff representation if required. These must take place to effectively plan the works to reduce and control risks to all. These are known in the Prison Service as "420" meetings and should take place regularly throughout the contract at suitable intervals and as required.
- 4.23 All PSPs must hold regular Estates Planning meetings at frequencies commensurate with the level and complexity of the site. These meetings are for Governors, SMT members, HOPO's, RPOM's, APOM's, Heads of Business Assurance and Health and Safety Leads to review progress on planned works including those required for statutory compliance, to consider repair and maintenance needs and concerns and plan for future work.
- 4.24 The above are in addition to project management and design forums and those set up to ensure effective CDM operations,
- 4.25 Where MoJ ED has provided contract and project management services it retains responsibility, usually via the principal contractor for commissioning, testing, "snagging" sign-off and handover of the premises, plant and equipment and all relevant health and safety documentation (either CDM or not) to HMPPS Estates and operational management and for the co-ordination and management of repair and remedial work required within the contract and warranty terms applying. This includes the provision of necessary instruction and guidance to occupants and users on the safe use of the commissioned plant and equipment.

4.26 MoJ ED make technical standards, drawings and project documentation available via a network library system known as Viewpoint.

# FM in the Probation Estate

- 4.27 A memorandum of understanding exists between HMPPS Probation Services and MoJ ED with regard to respective responsibilities for facilities management and construction for Approved Premises and this will be reviewed and updated as required via HMPPS Probation SLT and MoJ ED Senior Management Team.
- 4.28 MoJ ED manages all bids for and delivery of Probation capital projects.
- 4.29 MoJ ED are responsible for ensuring post-award, pre-works contract planning meetings take place in Probation premises to ensure the works are effectively planned to reduce and control risks to all and that these meetings involve the principle contractor, MoJ Estates Project Manager, site operational management, HSF advisor, CDM coordinator, relevant consultants and sub-contractors and staff representation if required.
- 4.30 MoJ ED are responsible, usually via the principal contractor for commissioning, testing, "snagging" sign-off and handover of the premises, plant and equipment and all relevant health and safety documentation (either CDM or not) to Probation management and for the co-ordination and management of repair and remedial work required within the contract and warranty terms applying. This includes the provision of necessary instruction and guidance to occupants on the safe use of the plant and equipment.
- 4.31 MoJ ED are also responsible for the delivery of all statutory inspections, planned preventative maintenance and repair requests via Facilities Management contracts according to cycles and specifications controlled and developed by the MoJ ED. Small Repairs can be requested by any member of staff via centralised telephone help desk.

## FM Management at the Prison service College, Newbold Revel

4.32 Site services and maintenance are divided between a contracted service and local Estates and Hotel Services Team. The overall management of this service is managed through Learning and Development and estates functions in MOJ and not by HMPPS.

# Probation Estates Management, HMPPS

4.33 Within Probation Premises, MoJ ED will continue to manage national contracts for estates and facilities management services.

# Occupational Health Advisory Service and Employee Assistance Programme

- 4.34 Occupational health advice and support is available to managers and staff via a Ministry of Justice contract. Advice and support can be sourced on a case by case basis or as a wider provision e.g. management training. OH Advisors (OHA) can be seen by appointment and there is the opportunity for additional OHA time to be purchased for clinical or development work as required. The contract also provides for OH physician, physiotherapy and other clinical services as required.
- 4.35 The Employee Assistance service is also provided under contract and includes provision for a 24-hour helpline, a wellbeing website, anonymous employee counselling and support which can be accessed by telephone, on-line or face-to-face.

This service also includes structured provision of post trauma support. More details of these services and links to the relevant policies can be found on MyHub. This resource also includes an Occupational Health Services User Guide aimed at providing HRBPs, Heads of Corporate Services and Managers and employees with information on the OH services available to them.

# Senior HR Business Partners (SHRBP) and HR Business Partners (HRBP)

4.36 These roles, based in teams, have a critical impact on the effectiveness of both preventative and mitigation actions covering aspects of work-related ill-health, wellbeing and sickness absence. Work on staff consultation and engagement, union consultation, health promotion, stress and wellbeing and the oversight of casework relating to absence are integrally linked to workplace health and safety and where beneficial or required effective co-operation and co-ordination is required between these staff, occupational health provision and health and safety advice. Each of the HMPPS' custodial regions has HRBP provision delivering HR support to both Custodial and Probation groups.

# Radiation Protection Advisory Service

- 4.37 HMPPS operates a contract for the provision of Radiation Protection Services to fulfil its duties under the Ionising Radiation Regulations 2017 as a radiation employer. The main role of this advice is threefold:
  - Commissioning and ongoing inspection and test of security X-ray sources.
  - Commissioning and ongoing inspection and test of legacy medical and dental X-ray sources where these have not been ceded to a healthcare provider.
  - The provision of Radiation Protection Supervisor Training and the development and evaluation of effective local rules.
- 4.38 HMPPS seeks to transfer the duty in respect of medical sources to healthcare providers via its framework agreement. NHS England healthcare providers are better placed in terms of operation and supervision of the equipment and access to medical physics patient exposure advice as required.

# <u>Purchasing and Procurement of Goods and Services – MoJ's Commercial and Contract</u> Management (CCM) Directorate

- 4.39 HMPPS' procurement of goods and services is undertaken via MoJ's Commercial and Contract Management (CCM) Directorate. This is responsible for co-ordinating procurement and contract management across MoJ, its agencies and nondepartmental public bodies (NDPBs).
- 4.40 The MoJ CCM is made up of four portfolios. Each portfolio specialises in specific categories of procurement, and offers advice and support to the business areas looking to procure goods and services to deliver a range of benefits to MoJ.
  - Prisons responsible for the provision of the infrastructure needed to operate prisons – from building of new facilities to obtaining funding for specific projects to support service users.

- Operational services provides support to the operational teams of MoJ, providing the tools required to meet responsibilities for the work of prisons, probation and the courts.
- ICT undertakes the design, supply and maintenance of all the ICT equipment used within the department.
- Corporate services responsible for the provision of goods and services across
   MoJ to support day-to-day business activities.

Purchasing and Procurement of Goods and Services – HMPPS' Role in Procurement of Good and Services

- 4.41 Procurement advice and support is provided to HMPPS via MoJ CCM. Staff in HMPPS operational roles are able to procure items via specific contracts or by catalogue request. The quality and health and safety standards of these items and services will have been evaluated as part of the contract award processes by MoJ CCM and Health and Safety. If any service or item is requested which does form part of the contract these are subject to referral to MoJ CCM and where necessary approval by Health and Safety.
- 4.42 Any new requirements for goods or services should be referred to MoJ CCM for further advice on procurement. Where requirements are in excess of the monetary threshold specified in Public Contract Regulations these are subject to a formal procurement process through MoJ CCM.
- 4.43 It is incumbent on the HMPPS' purchasers using these routines purchasing systems to ensure that the selected goods or services are appropriate for the purpose and suitable for use in the environment in which they will be used.
- 4.44 Equally, it is incumbent on policy leads within HMPPS and all those who are working on contract specifications with MoJ CCM staff to ensure adequate attention is given to the health and safety issues and standards in developing goods and services specifications and the risks of deploying such goods and services in the operational environment are assessed.

# <u>Commissioning of Custodial and Probation Services - HMPPS Custodial Contract and Community Rehabilitation Contract Management Groups</u>

4.45 The Custodial Contract Group leads on operational contract oversight of private sector contracted custodial service delivery, including Privately Managed Prisons, Prisoner Escort Custody Service (PECS), and Operational Contracts for a variety of goods and services.

The PECS contract covers secure resident transportation between prisons, police stations and other places of detention and courts, and transportation of residents between prison establishments. It also includes custodial services and dock escorts in courts.

Private Prisons within England are managed by Custodial Contracts Group and operated by private providers. Each privately managed prison has an on-site Controller employed by HMPPS to provide oversight and assurance of contract delivery. The Controller is managed by a Senior Contract Manager.

Contract Managers are responsible for providing appropriate assurance of Health and Safety matters within a particular contract.

- 4.46 The Contract Management Group for Community Rehabilitation Services, leads on the operational contract oversight of private sector and third party contracted community services and intervention delivery including, for example; Unpaid work and Intervention Programmes.
- 4.47 The Commercial Team leads on commissioning contracts and take's responsibility for identifying and allocating relevant and appropriate health and safety duties within the contract terms.

# <u>5.</u> <u>HMPPS HSF Performance Monitoring, Governance and Assurance Processes</u>

# **Processes**

# Statutory Enforcement and External Scrutiny

- 5.1 HMPPS protection of the wellbeing and safety of residents is scrutinised by a number of bodies including HM Inspectorate of Prisons, the Prisons and Probation Ombudsman and each prison has an Independent Monitoring Board made up of lay community members.
- 5.2 Fire Safety is enforced by Crown Premises Fire Safety Inspection Group whilst Health and Safety is enforced by the Health and Safety Executive.

# **Government Internal Audit Agency**

- 5.3 Internal Audit and Assurance which previously sat within the Finance Group in MoJ, joined the Government Internal Audit Agency (GIAA) from 1 October 2016. From this date, all internal audit services currently provided to MoJ and its arm's length bodies (ALBs) will become the responsibility of GIAA. The GIAA will deliver to HMPPS a custodial Governance and Order Audit which includes amongst a range of other operational themes, audit of a prison establishment's Fire and Health and Safety performance on a cyclic basis. Audit Reports with action plans are submitted to the relevant Governor, Prison Group Director, Director of Public Sector Prisons and HMPPS' CEO.
- 5.4 GIAA reports to the MoJ Permanent Secretary, as Principal Accounting Officer and to the MoJ Audit Committee. The MoJ Audit Committee is an advisory body that supports the Accounting Officer and Board by reviewing the comprehensiveness of assurances in meeting the Accounting Officer's and Board's assurance needs, and reviewing the reliability and integrity of these assurances.
- 5.5 Findings of audit reports are selectively analysed and reported on to identify common themes and patterns in HSF performance and included in HSF Performance Reports to HLT OHSF Sub Committee and Regional Deputy Directors of Custody.
- 5.6 GIAA also operates a resident survey called the measurement of the quality of prison life (MQPL) which provides indications of how safe and secure residents feel within an establishment, particularly with regard to the risk of violence or assault.
- 5.7 HMPPS custodial premises operate a system of Risk and Control Reporting which is applied at unit level and above. It applies a quarterly assessment of key business risks

and the effectiveness of their controls and plans and prioritises action accordingly escalating reports as required to provide an overall picture at corporate level. HMPPS' OHSF Risk and Control Evaluation Tool (PHASE) collects HSF performance indicators to allow units, regions and national evaluation of HSF performance across the board and to feed into the wider Risk and Control Report as necessary.

5.8 A modified version of the PHASE system has been developed and implemented within the Probation Directorate.

# Internal HMPPS HSF Scrutiny and Assurance

- 5.9 HMPPS operates a range of procedures to ensure that standards of HSF are monitored, reported and used to evaluate performance and support management decision-making for policy, resource and remedial planning. These systems can generally be categorised at 4 levels (Please also see Annex 3):
  - a) 1<sup>st</sup> Tier Operational Supervision:
     Day-to-day operational supervision of work activities and work areas including oversight of staff, residents and 3<sup>rd</sup> parties.
  - b) 2<sup>nd</sup> Tier Operational Check:
    Formal, recorded checks on specific items or areas by line management responsible for same as part of scheduled inspection routines and particular risks; for example: Accommodation Fabric Checks (AFC); management safety tours; scheduled operational checks of machine tool functions; ladder checks; KPI performance reports.

The local Health and Safety Committee (or relevant H&S Group in Probation) is responsible for monitoring local safety inspection schedules for compliance in relation to application and quality and to assist with identification of trends or persistent problems. The effectiveness of this process will be checked by Regional HSF Leads in assurance checks.

- c) 3<sup>rd</sup> Tier Inspection, Test and Inspection
  Formal recorded tests or inspections undertaken by a specialist or independent person to confirm 1<sup>st</sup> and 2<sup>nd</sup> tier controls are in place or to assess and evaluate the performance of systems and equipment. For example, Custodial Management checks on Assessment, Care in Custody and Teamwork (ACCT) and AFC processes; contractor or employee inspection and test of fire equipment; statutory tests on lifting equipment, local exhaust ventilation tests; planned inspection of buildings
- d) 4<sup>th</sup> Tier Audit, Assurance and Governance
  These comprise: GIAA or thematic audit; PHASE reports; local and national thematic audit programmes, Prison Group Director site visits; cross-regional peer audit; regular assurance and governance visits by Regional HSF Team; production of MI via analysis of Sphera incident and claim data and HMPPS' Performance Hub HSF Measures. Principle HSF Leads aggregated summary reporting to PDG and Executive Directors and HSF leads for PSP North & South on behalf of their region. Relevant Probation HSF Leads provide quarterly reports via the relevant H&S Committees

# Line Management

- 5.10 Aside from the above a quarterly bilat for all staff is required which ensures a formal recorded dialogue between staff and their managers at which health and safety issues and related development needs can be tabled, explored, resolved and recorded
- 5.11 Line managers must take the opportunity to ensure that any ongoing issues relating to individual health, safety and wellbeing are raised and acted upon in this process.

# **HMPPS' Organisation for HSF Governance, Direction and Assurance**

- 5.12 The following groups provide oversight and governance functions at their respective levels:
  - MoJ Corporate HSF Committee
  - MoJ National Audit Committee
  - HMPPS Leadership Team Committee (HLT)
  - HLT Health, Safety and Fire Sub-Committee
  - Directorate Management Teams
  - Regional, Cluster and Group Senior Management Teams
  - Establishment, Group and LDU Management Teams
- 5.13 All the above should:
  - regularly receive reports on the effectiveness of HSF management
  - consider the HSF implications of business proposals
  - determine appropriate actions to maintain adequate standards

# HMPPS' Organisation of HSF Advisory and Consultative Groups

- 5.14 The following groups provide advisory and consultative functions at their respective levels:
  - MoJ Senior HSF Practitioners Group (advisory)
  - National Whitley Council (consultative wider issues which can include HSF)
  - National Whitley Occupational Health, Safety and Fire sub-committee (consultative - specific to OHSF)
  - Regional and Local Whitley Councils (consultative)
  - HMPPS Prison and Probation Occupational Health Safety and Fire Committees (consultative)
  - HQ, Group, Establishment and relevant Probation I OHSF Committees (consultative)
  - National Estates Services Manager's Group (advisory)
  - National Health, Safety and Fire Group (advisory)
  - Regional HSF Practitioners Groups (advisory)
  - Establishment or Regional Safer Custody and Violence Reduction Groups

HMPPS' Health and Safety Arrangements

6.1 The following list identifies HMPPS's national arrangements in the form of relevant PSIs / PF/ Als / PIs or in operational guidance as appropriate. Summaries of these National Arrangements are contained in Annex 2. The process to convert existing HSF

6.

- instructions and guidance into the revised HMPPS' policy format is underway. Until national arrangements exist, locally produced arrangements will remain extant.
- 6.2 There will be situations in which local additional arrangements are required and these should be recorded locally as a supplement to national arrangements but only where appropriate. In general, the presence of national arrangements documents enables establishments to avoid duplication and repetition and to concentrate on necessary local document implementation without replicating high-level policy material.
- 6.3 The mandatory requirements of these instructions must be implemented across the board.
  - Accident reporting and Investigation
  - Manual Handling
  - Communication and consultation
  - Display Screen Equipment
  - Measuring performance, Audit and review
  - X -Ray Equipment
  - Radon Gas
  - First aid
  - Risk assessment arrangements
  - Stress
  - Workplace Inspection
  - Built Environment
  - Asbestos
  - Electrical Safety: Low & High Voltage
  - Gas Safety
  - Legionella
  - Premises and Plant Inspection
  - Statutory Testing & Inspection
  - Work at Height
  - Bio Hazards, blood borne disease, dirty protests and spills of blood or bodily fluid
  - Cleaning
  - Contractors
  - Emergency and Contingency Planning
  - Information, instruction, training and supervision
  - Lone Working
  - New and expectant mothers
  - Noise and vibration
  - Occupational road risks
  - Slips and trips
  - Smoking
  - Substances hazardous to health
  - Violence to staff and 3<sup>rd</sup> Parties
  - Work Equipment

# **ANNEX 1A & 1B HMPPS ORGANISATION CHARTS**

Her Majesty's Prison and Probation Service is an executive agency of the Ministry of Justice.

The most current HMPPS organisational charts and management structures including Approved Premises, Probation reporting and Service User Contact Centres, Prisons and the HMCTS estate maps are available via the HMPPS Intranet

Alternatively, copies can be requested via the National HSF FMB: Health-Safety.national@justice.gov.uk

### Estates Health, Safety and Fire Sub-Committee

- Delivers Senior Managerial Oversight of HSFL
- Receives reports on strategic HSFL issues and ongoing HSFL performance
- Determines strategic response and plans on HSFL
- Reports and when appropriate
   escalates issues to HMPPS HLT/POMC
- Chaired by Deputy Director National Services London

### National HSF Whitley sub-committee and probation occupational HSF committee

- Provides a forum for consultation on key HSF policy issues and items from local HS committees that have not been resolved via local agreement
- Receives reports from business on proposal for HSF performance
- Meets quarterly
- Chaired by Head of Health, Safety and Fire

## **National Whitley Council**

- Provides a forum for consultation on all Employee Relations issues
- May be referred issues from the Whitley HSF Sub-Committee

## Site or Function Bases HSF Committees

- Provides a forum for both union and non-union representatives to raise and resolve concerns
- Monitor current issues and plans and allocate actions as appropriate
- Report on HSF performance
- Call for reports from various parties on particular issues
- Meet quarterly
- Chaired by HSF Sponsor or Regional Probation Director
- Must report to probation national H&S lead or Governor

# Trade Union Side and Employee Safety Representatives

- Representing all staff through H&S committees
- Assisting with the development of H&S systems through consultation with staff
- Monitoring H&S systems
- Inspecting premises in line with requests from members

#### **Chief Executive Officer**

The CEO has overall responsibility for the strategic management and governance of health, safety, fire safety and wellbeing in HMPPS and is accountable to MoJ's permanent secretary and ministers for its health, safety and fire performance

#### **Director General**

The Director General are responsible for the strategic decision making and direction of health, safety, fire and wellbeing in areas of responsibility and are accountable to the Chief Executive for ensuring that legal requirements are met and optimal standards

HMPPS Executive HLT Committee (Governance via Agency Board)

### **Executive Directors**

Are responsible for ensuring the Directors, Prison Group Directors and Heads of Groups within their directorates have in place appropriate systems to ensure the effective implementation, auditing and monitoring of HMPPS health and safety policies, including allocation of resources to control HSF risk. In addition to this the Executive Director Prisons acts as the focal point within HMPPS for

- The provision of strategic advice to the HLT
- Monitoring and reporting of progress to the HLT and the Chief Executive Officer
- Chairing the OHSF Sub-committee

Prison Group and Probation Divisional Senior Mgmt. Teams

# Governors, Regional Unit / Function Heads / Probation Heads of PDU

- Are responsible for ensuring that effective measures are in place for managing the risks to which staff and others are exposed
- Providing authority to implement effective controls and resources
- Holding staff under their control to account for their performance in delivering their duties in line with defined procedures and standards regarding HSF

## Line Managers

Line managers are responsible for:

- Implementing policies and procedures in areas of their control
- Ensuring that risks have been assessed and are being managed effectively
- Ensuring that staff have the necessary training
- Communicating H&S systems to all staff
- Responding to adverse events and contributing to their investigation
- Escalating non-compliances

## Each member of staff

Each member of staff is responsible for:

- Taking care of their own health and safety and that of others who may be affected by their work
- Reporting all accidents, near misses and unsound conditions
- Co-operating with managers on all health and safety issues and following training and procedures designed for same
- Making full and proper use of ant equipment provided for their protection

# **HMPPS Strategic Centre**

Is responsible for:

- Advising the Board and Directors on all occupational HSF issues
- Developing and disseminating
   HMPPS HSF Policy
- Providing strategic advice to Executive Directors, Directors, Governors, Probation Heads of PDU & regional leads
- Communicating priorities & plans for HSF to the operation line
- Providing policy interpretation to regional HSF teams
- Maintaining accident database and compiling statistics
- Ensuring that HSF performance is regularly audited and reported

## Senior HSF Advisors

#### Provide:

- Local monitoring and reporting of HSF performance
- Advice to local managers and staff on implementation of HSF policy
- Support with local components of risk assessments and arrangements
- Attendance at HSG Committee in support of the Chair
- Advising/ Assisting in accident investigation and civil claims processes
- Line Managing HSF Advisors
- Providing inspection and survey support

## **Probation HSF Leads**

Are responsible for:

- Advising the relevant Regional Probation Director on all aspects of HSG Safety in their Division
- Local monitoring and reporting of HSF performance
- Advice to local managers and staff on implementation of HMPPS HS Policy
- Support with local components of risk assessments and arrangements
- Advising/ Assisting in accident investigation and civil claims
- Line Managing BAS: HSF

# HSF Advisor/ BAS: HSF

- Provides specialist HSF support to the sites and services
- Monitoring programmes and plans
- Assists with relevant risk assessments such as DSE

# ANNEX 2 HMPPS SUMMARY HEALTH AND SAFETY ARRANGEMENTS

# **HMPPS' Summary Health and Safety Arrangements**

HMPPS is developing national HS arrangements related to the issues below. Until national arrangements are in place locally produced arrangements will remain extant. A summary of the national arrangements is as follows:

# 1.0 Risk Assessment (RA)

Through these arrangements, HMPPS will manage a transition from its current arrangement of entirely locally developed and maintained risk assessments to the following:

HMPPS will develop generic core HS risk assessments based on key work processes, premises and / or equipment as appropriate and allow either regional, or local enhancement of these assessments, where appropriate, to accommodate local circumstances. The development of this approach will include effective consultation on revised assessments through existing HS and Employee Relations (ER) committee structures.

The purpose of this approach is to ensure that controls defined at a collective level (as per the hierarchy defined in the Management of Health Safety and Welfare at Work Regulations 1999) are applied consistently across the service whilst accommodating the need for local variation based on different processes, premises and equipment. The process to deliver this is laid out below:

- The Sphera Safeguard System will be the platform on which master risk assessments will be held.
- Existing local RAs will be uploaded / transferred to Sphera and common controls aggregated and defined at regional and national level.
- Generic assessments will then be provided via Sphera with appropriate and controlled flexibility to add local or regional variations.
- Sphera internal capacity for automating authorisation and review will be used to maintain and report on risk assessments.

# Safe Systems of Work

The law requires the level of control over a HS risk to be proportionate to the risk and sets down and hierarchy for the selection of such controls. In reality, many risks are controlled by a selection of options from this hierarchy. Whilst written procedures and systems can assist in ensuring the correct operation and sequence of events and actions in managing a process, the writing of a process, by itself, does not deliver additional control unless staff and managers accept its use, are instructed in its application and its implementation is monitored. *It must also link in with the right equipment and environmental factors to be effective*.

# 2.0 Accident Reporting and Civil Claims Handling

Sphera is the system for recording all relevant injuries, ill—health, near misses and related civil claims data. Where incidents are being reported onto IRS, for example fires, staff assault etc. a record must also be made on Sphera and those staff initiating IRS records must ensure that those managing Sphera recording are notified. All civil claims other than Employment Tribunals and Deaths in Custody (except where the death has arisen from a health and safety failing) which have arisen must be recorded and managed on Sphera in accordance with PSI 31/2015.

- 2.1 All employees and third parties will be informed as to how they can report and record all relevant incidents locally.
- 2.2 Reporting of Accident and Incidents to HMPPS Staff and 3<sup>rd</sup> Party Employees on training or duty away from base establishment.

The accident/incident should be reported immediately to the trainers on site;

- The trainers will complete the standard local reporting with as much information as possible;
- The trainers will notify the home establishment and or employer of the injured party at the earliest available opportunity
- The trainers will notify the dedicated L&D or SoCT HSF Advisor of the incident. The HSF team will support the trainers to ensure all incidents receive a comprehensive investigation;
- The completed standard accident pack information and subsequent investigation will be uploaded onto the HSF Database (Sphera) by the HSF Team;
- HMPPS will report RIDDOR incidents to third party employees in line with RIDDOR regulations. That is to say that sickness absence arising from a training accident to a non-employee is not reportable to HSE by HMPPS but is reportable by the employer.
- The HSF Team will ensure all relevant parties are notified, including the injured parties parent establishment(s);
- It is the responsibility of the injured party's parent establishment and or employer to monitor any sickness relating to the incident. In HMPPS this will be via the People Hub;
- Where sickness absence related to the accident is reported for an HMPPS employee, the People Hub must notify the establishment based HSF team immediately;
- For HMPPS employees, it is the responsibility of the establishment based HSF team to report any incident which meets the RIDDOR criteria by dint of subsequent sickness absence or any other factor.
- 2.3 Adverse incidents must be investigated at a level commensurate with the realistic most likely outcome. Relevant line managers and HSF specialists must co-operate on investigation and recording.

# 3.0 Workplace and work equipment Inspection

Procedures must be in place to ensure that general workplace and work equipment inspections and tests are undertaken at suitable intervals, adequately recorded and reported and followed up.

HMPPS Estates operates FM specification SFG 20 as its baseline for premises and plant inspection and test and will operate to that standard other than where risk assessment or statutory requirement demand different levels of scrutiny.

# 4.0 Information, Instruction, Training and Supervision

Staff, contractors and third parties must be suitably competent to undertake the work requested of them or otherwise adequately supervised. Competence is a combination of skills, knowledge and experience allowing someone to do a job safely and, importantly, to be aware of the limits of that competence. Training and instruction is important in delivering competence but is not the only ingredient. All staff must receive key induction training and information as soon as is practicable in a new premises, covering the key risks to which they will be exposed and the methods for managing those risks:

# Specifically, all induction must include:

- The key points of this policy and aspects of it relevant to those being inducted
- Premises layout, access and egress
- Security arrangements
- Fire detection, alarm, and procedures
- Other emergency plans, raising and responding to alarms
- Dangerous areas, activities and restrictions
- Personal Skills, Handling Violence and Aggression 1<sup>st</sup> and emergency aid provision\*
- Incident, accident and assault injury and fault reporting\*
- Sources of advice and support re HSF\*
- HS Committee and representation\*
- Further HSF critical training for the employee\* e.g. RPE
- Employee assistance, support and occupational health services \*
- Line manager name and contact arrangements
- Relevant personal protective equipment
- Dress and equipment expectations
- Lone, remote and late working
- Own duties re HSF and legal duties to co-operate on matters of HSF\*

All regions and / or establishments should have an HSF training plan based on a needs analysis in place to determine what is to be delivered to whom, how, and when. HSF training does not have to be certificated or face-to-face. The method of delivery and level of information transferred and assessment undertaken needs to be proportionate to the risk associated with the activity being covered. HSF training needs analysis and planning should be integrated with wider systems for training planning and resourcing.

Typical areas where further HSF-related training, instruction or information is required will, subject to the work activities, include, though not exclusive to:

- Control and Restraint
- Handling and Defusing aggression and Personal Safety techniques
- Handling Cell Fires and use of Cell Fire RPE
- First on Scene
- Health and Safety Sponsor Role
- Vehicle Escorting
- 1st Aid and Emergency Aid
- Accident reporting, recording and investigation

<sup>\*</sup> Where induction is provided to non-HMPPS employees these subjects need to be tailored to share relevant HMPPS information and to signpost trainees to their own employer's resources and systems or agreed mutual protocols.

- Food handling and hygiene
- Manual Handling Techniques (generic or specific to a specialist operation)
- Safe use of DSE
- Handling of hazardous substances
- Cleaning operations and systems
- Premises Inspection / Safety Tours for leaders
- Lone working methods
- Personal Safety in the community
- Confined Spaces
- Safe operation of plant and equipment (specific to different assets and their use)
- Inspection of electrical appliances
- Undertaking Risk Assessments
- Use and handling of relevant PPE
- Health and Safety Duties for supervisors / managers
- Stress, wellbeing and resilience
- HSF-related trade skills: Asbestos Condition Monitoring and Assessment, Legionella Testing and Sampling, Hot Work, PAT Testing, Gas installation test and inspection, flu analysis, Lifting Equipment / Ladder inspection and test; plant and vehicle banksman / bankswoman etc.

# 5.0 Communication and Consultation

All sites and services must ensure effective consultation and communication with staff. Nationally this is achieved via:

# a) Communication

Notices to staff, Senior Leaders Bulletins, Staff and Team Briefings, Intranet Articles, Features and Material, My Services Guidance, PSI, PI and Als, Sphera Notifications and Messages, Email, Training and SPDR processes.

# b) Consultation

All changes affecting staff safety either directly or indirectly should be discussed with affected staff and their HS representatives (whether or not such representatives are union representatives) in advance and their views taken into account in developing safe methods of implementation.

All custodial establishments and Probation sites will operate a Health and Safety Committee with formal constitution and remit and the agendas and minutes of same will be published and posted locally so that all relevant employees have access to same.

Note on the operation of HS Committees:

It is not the purpose of HS Committees to pick up and expedite, for example, minor works requests. Rather, it is the purpose of the committee to identify, for example, that the minor works request system is not working and to ensure that management and staff work effectively to rectify same.

Establishments and regions which operate a Whitley council will ensure that the minutes and agendas of relevant Health and Safety Committees are covered off in their business and key issues arising are discussed.

Items and concerns not adequately resolved in local HS Committees / Whitley Councils will be escalated to Regional / Probation Deputy Directors and, where a resolution cannot be achieved at this level, will be notified to either the National HSF Whitley Sub-Committee, the National Whitley Council or the HMPPS (Probation) Occupational HSF Committee. Issues must go through the local process before escalation to national level unless they are clearly urgent and of national relevance.

# 6.0 Built Environment

HMPPS Estates operates FM specification SFG 20 as its baseline for premises and plant inspection and test in PSP estate. Facilities management services are provided under TFM contract on a supra-regional basis with the HMPPS' regions. The TFM provider is required to manage the built environment in accordance with the terms of the contract.

Specific and detailed processes must be in place for the management of premises, plant and equipment risk. These are detailed in specific PSI / AI HS arrangements documents though key issues and highlights are summarised below.

# a) Premises and Plant Inspection

A program of inspection and report for the entire site should be identified in line with likely risk, and the condition and use of the premises. Staff should be notified of the means by which to report damage and repair requirements in induction training. In custodial premises this is via the estates management function through the Planet FM link on the HMPPS' intranet. In Probation estate this is via the FM contractor's Help Desk.

#### b) Asbestos:

A local survey must be in place identifying the location, type and condition of actual or potential asbestos containing materials (ACMs). An asbestos management plan must be in place for the removal and / or maintenance in-situ of these ACMs based on an assessment of the risks arising from same in line with HSE's asbestos assessment model. The plan must detail how in-situ ACMs will be managed and their condition and risk monitored and recorded by a trained condition survey assessor. The local plan must determine how the presence of ACMs will be communicated to service users and staff, it is not a requirement to label ACMs if alternative methods of informing people are adequate. ALL contractors including IT, telephony and cabling workers must be referred to this plan PRIOR to undertaking any work which will disturb the fabric of the building.

In public sector prisons it is for the FM Contractor to maintain and update registers of ACMs in addition to following the asbestos management plan as required through ongoing condition monitoring and assessment. The contractor must ensure registers of ACMs are made available to all visiting contractors and are referred to in the planning of all potential destructive work.

Residents and service users should be informed of the potential presence of ACMs in cells, rooms or other association areas on their reception into the establishment, Approved Premises or location onto the wing and the risks associated with disturbing ACMs. This notification MUST be recorded on the resident/ record. All sites and services must follow the procedures for inadvertent exposure to asbestos laid out in PSO 3802 where ACMs are known to be present.

#### c) Gas safety

All gas appliances, supplies, equipment and contractors or employees working on same will be subject to the training, maintenance and quality check procedures agreed with Gassafe, if required further information can be requested through the National HSF FMB. HMPPS estates managers are responsible for implementing and auditing its standards in PSP estate, whilst MoJ estates managers are similarly responsible in Probation estate.

#### d) Electrical safety

# Low Voltage:

Electrical appliances and installations will be inspected and / or tested at intervals commensurate with the risk of failure and wear and tear. It is acceptable to inspect other equipment not subject to high levels of wear and tear visually based on a suitable risk assessment. Equipment which is worn or damaged in such a way as to make it electrically or otherwise unsafe must be taken out of use and secured out of use, until replaced or repaired by a competent person.

Resident personal appliances and those appliances in cells can be monitored during AFCs, cell searches and workplace inspections and subject to regular formal PAT testing. Similarly Approved Premise resident's personal appliances will be subject to visual inspections on arrival and routinely during room checks/workplace inspections and where necessary (determined by risk assessment) subject to formal PAT testing.

#### High Voltage:

HV management is contracted to the relevant power supplier or FM provider and overseen by MOJ estates. HV Installations and gear must be secured from being accessed by any unqualified person and arrangements put in place to ensure that keys to same are not made available other than to listed, authorised people. Emergency procedures and contingency plans must allow for competent persons to respond where HV gear needs to be worked on or switched. It is not acceptable for non-competent persons to work on HV gear simply because of apparent operational urgency.

#### e) Legionella

All sites must have a currently relevant assessment of their legionella risk based on an inspection and survey of their water supply, storage, heating and use. Where required, by dint of the assessment, a program of work will be required to:

- reduce risk through the re-design and modernisation of the installation where appropriate.
- manage existing risk through effective heating and / or dosing of water storage and supply systems.
- manage existing risk via a programme of sampling and testing specified by, and undertaken by, a competent person at prescribed frequencies.
- a system to formally respond to each round of tests and take appropriate remedial action.
- a system to inform staff and 3<sup>rd</sup> parties of any risks as relevant and the measure in hand to control them.
- a system to record all relevant results and actions taken.
- a system to ensure that any changes to premises function and layout consider the implications for legionella risk e.g. isolating a tank which continues to be used as a supply.
- a system to review the assessment and survey at suitable intervals, when the installation changes and at least annually.

# f) Statutory Test and Inspection.

For all plant and equipment requiring statutory inspection and testing, suitable arrangements must be in place for delivering same. This includes:

- Electrical installations
- Pressure Systems
- Lifts, Lifting Plant, Lifting Equipment including FLTs and healthcare patient lifting equipment
- Gas installation and appliances
- Local Exhaust Ventilation

APOM's are responsible for ensuring the registration of all such equipment under their direct control and a suitable program of inspection and test for same which ensures defects are responded to and rectified. For such plant not directly in their control they should:

- Ensure that the contractor or provider of the plant has suitable similar systems in place and follows them.
- Ensure that the controller of the equipment, if a HMPPS' employee is made aware of the requirements around test and inspection and that the item is referred to the relevant HS advisor.

The RPOM must ensure that effective processes to gain assurance for TFM contract delivery are in place to test, as a minimum compliance with legislative requirements.

# g) Work at Height

Governors, Directors, RPOM's and contractors or any person who controls the work of others at height such as facilities managers, education providers and building owners have duties to ensure that:

Work at height is to be properly planned, supervised and carried out safely. In particular, such work is only carried out when weather conditions allow it to take place safely.

Persons working at height and those supervising such work are competent.

A risk assessment and a hierarchal approach to controlling the risks associated with work at height should be taken;

- Duty holders must avoid work at height when they can,
- use work equipment to prevent falls where work at height cannot be avoided, and where the risk of a fall cannot be eliminated, then measures to minimise the distance and consequences of such a fall must be taken.
- Protection from falls should be collective in preference to individual e.g. guard rails, in preference to fall arrest etc.

Particular work equipment must comply with the schedules to the Work at Height Regulations e.g. guard rails must be 950mm above the edge from which a person could fall.

Have in place measures to avoid risk from fragile surfaces. Again, a hierarchal approach to control the risks is required commencing with a requirement that no person passes across or

near or works on or near a fragile surface unless it is not reasonably practicable to do otherwise.

Take steps to be taken to prevent the fall of material and objects.

Protect danger areas, where a fall of a person or materials may occur by means of physical barriers, delineation and appropriate notices.

Arrange for the inspection of work equipment such as scaffolds, safety harnesses and ladders and the inspection of workplaces where work at height is taking place.

Ensure that operators and supervisors know their duties.

Comply with the specifications in the regulation as follows:

- Schedule 1 requirements for existing places of work and means of access or egress at height.
- Schedule 2 requirements for guard-rails, toe-boards, barriers and similar collective means of protection.
- Schedule 3 requirements for working platforms.
- Schedule 4 requirements for collective safeguards for arresting falls.
- Schedule 5 requirements for personal fall protection systems.
- Schedule 6 requirements for ladders.
- Schedule 7 particulars to be included in a report of inspection.

Arrange for the keeping of and / or keep records of:

- All statutory inspections of places of work at height and of work equipment provided to control the associated risks including:
- Scaffolding including mobile scaffold towers
- Mobile elevated working platforms
- Personal fall protection systems
   Nets and bags
- Ladders.

#### 7.0 Bio Hazards, Blood Borne Disease, Dirty protests and Spills of Blood or Body Fluid

All sites and services must have in place an assessment of the risks associated with bio hazard exposure (this may be the nationally produced version) and implement suitable controls in line with that assessment including immunisation programmes where the risks makes it appropriate. In addition, to prevention and protection measures, a post—exposure prophylaxis plan must be designed, resourced, implemented, and maintained. The details of this arrangement and the methodology to be adopted are laid out in the associated Occupational Health and Employee Assistance Programme Policy Framework and PSI/PIs.

Dirty Protest and Heavy Biological Contamination

The cleaning of cells following a dirty protest should be carried out by trained prison service staff, trained residents or specialist contractors (via the TFM contract). Whichever option is chosen, Governors or Directors should ensure that the persons carrying out the task are competent to do so.

Governors, Directors are responsible for ensuring TFM contractors, staff and residents adhere to national and local safe systems of work when cleaning cells following a dirty protest.

Suitable equipment and instructions should be on hand to deal with the containment, cleaning, decontamination and disposal of body fluids where they are likely to be encountered.

#### 8.0 Contractors

# On-Site Service Providers (OSSPs) in Custodial Premises

There must be written agreement with on-site service providers outlining mutual arrangements, relevant duties and for co-operation and communication on HSF matters. These must cover the following:

- Access and security
- Induction and HSF Training
- · Incident reporting and recording
- Emergency Procedures
- Risk assessment of each party's activities and its effects on other users of the premises
- Nominated lead for Health and Safety
- Communication channels
- Sharing information re vulnerable staff e.g. pregnant employees
- Attendance at HS Committee
- Notification processes for introduction of new plant, equipment and or processes
- Cleaning and welfare
- Inspection and audit

# In Probation premises

Most contractors will be attending Probation premises as part of the national FM contract managed by MoJ. MoJ are responsible for ensuring all contractor's staff have received sufficient generic induction covering points identified above for attending Probation sites.

Local Probation managers will ensure that additional site specific induction is provided to contractors on attendance.

# Construction and Visiting Contractors

Most of HMPPS' contract services are provided from national and / or regional contract letting processes operated by the MoJ's CCM. These processes include a range of methods to assess their health and safety performance and their competence to undertake the role. However, HMPPS retains a duty to ensure they undertake work in a health and safety manner and must therefore, plan, co-ordinate and monitor the work and its effects on the health and safety of staff and 3<sup>rd</sup> parties.

Arrangements must be in place to plan work activities in advance of them taking place and to inform all those likely to be affected of the relevant measures to take. Any contractor undertaking intrusive work MUST, without fail, be referred to the local asbestos management plan and jointly assess, with relevant site management, the risk of disturbing any asbestos containing material on site and agree suitable preventative procedures. The same principles apply to potential damage to structural items, gas, water and electrical supplies.

Managers and staff who bring e.g. cabling IT, telecoms or office design or other potentially intrusive services onto site outside the usual range of "Estates" type contractors MUST follow

the same procedures. Not to do so is a potential breach of their individual legal duties and may result in code of discipline proceedings.

# 9.0 Emergency and Contingency Planning

All sites and services should have arrangements in place to ensure the safety of staff, visitors, residents, service users and others who may be affected by their undertakings in the event of a fire or other reasonably foreseeable emergency.

In broad terms these must cover the following:

- How and where the emergency might occur and why
- Detecting the event and raising the alarm or notifying others and gathering assistance
- Procedures and duties for particular persons to control and manage the emergency
- Procedures and duties for all those likely to be affected based
- Equipment and techniques to be used
- Communication and co-ordination of the event
- Training and information required for all who might be affected
- Testing and practice of the procedures
- Maintenance and test of relevant equipment at suitable intervals Reviewing and revising the procedures after an event or a test

Managers responsible for staff on site or in the community must see to it that such procedures are designed, maintained, communicated and practiced as appropriate.

Further information on fire prevention and contingency planning is given in PSI 11/2015 Fire Safety in Prison Establishments.

# 10.0 Display Screen Equipment

Only those staff who use DSE as a substantial part of their job, e.g. every day for continuous periods of more than 1 hour and who have no other means of doing their work are DSE users.

HMPPS uses an online DSE assessment and training tool to undertake workstation assessment and user training as required.

Governors, Directors, Heads of Group and Probation Heads of PDU s must appoint a DSE administrator to identify DSE users in their staff groups and to manage the online system to prompt users to undertake the training and assessment. Administrators can use the system to report on progress and refer issues arising from the assessment to line managers as required.

Where more detailed assessment is required, managers must use the online system first and subsequently use local trained assessor to assist in ergonomic assessment. Where issues still remain or complex health problems are involved the manager should refer the staff member to Occupational Health for assessment by an OH Adviser.

All DSE workstations should be soundly constructed and suitably maintained. Damaged or non-adjustable chairs, DSE equipment not on proper desks or tables and insufficient space around the workstation to allow the usual work to be done should be avoided.

# 11.0 Lone Working (including home/community visits)

A risk assessment will be carried out to include any circumstances where lone working is in operation. Lone workers are those who work by themselves without close or direct supervision, in HMPPS, potential examples include:

#### a) In establishments:

- People working alone for long periods in remote or isolated parts of an establishment.
- People working on their own outside normal hours, e.g. cleaners, security, maintenance or repair staff.

# b) As mobile workers working away from their fixed base:

- Business travellers
- Home and Community Visits and Work Supervision
- Escort Duties

Managers are required to avoid the use of lone working in the first instance, where possible. Where lone working may not be avoidable e.g. in the event of home and community visits and any task or operation within the environment presents significant risk, the manager will make arrangements for dual working during the period of the significant risk unless the resources required are significantly disproportionate to the effective reduction in risk.

Managers are required to implement and enforce any necessary control measures to reduce risk to lone workers to acceptable levels. Suitable control measures must always be adopted irrespective of the risk analysis.

Special attention must be given to those "particularly at risk" such as existing medical conditions, physical or cognitive disabilities, inexperienced workers, new and expectant mothers. These must be must be assessed on an individual basis. Young persons (<18 years of age) are not permitted to be lone workers.

All lone workers will be adequately trained with any specific or particular training/instruction required to carry out their roles safely. *All lone workers must be instructed in emergency procedures and communication methods prior to working alone*. The manager will be responsible for implementing system for the co-ordination of the lone working and positively confirming the safe return of the employee.

All risk assessment results will be made available to lone workers.

# 12.0 1st Aid and Emergency Aid

All sites and services should allocate a first aid coordinator as per First Aid Framework. This role ensures that suitable arrangements are in place to provide and maintain the required 1st Aid equipment, to ensure that suitable numbers of people are adequately trained to deliver 1<sup>st</sup> and emergency aid and to co-ordinate action in the event of a need to call emergency medical assistance.

Site and service managers should assess the need for 1<sup>st</sup> aid equipment and 1<sup>st</sup> aiders based on the numbers of staff and third parties, the patterns of usage, the types of risk and proximity or remoteness of those who might need attention.

In custodial establishments staff rostering systems should be used to ensure adequate levels of cover in line with the assessment at all relevant times.

For staff operating in the community or undertaking large amounts of travel, consideration should be given to providing training and a kit to the employee.

Signs and notices should inform staff and third parties of the names, location and contact numbers of 1<sup>st</sup> aiders and 1<sup>st</sup> aid co-ordinators. 1<sup>st</sup> aid kits should be in reasonably accessible locations but not prone to abuse or damage. Information re their location should be made available as signs or notices.

#### 13.0 Manual Handling

Work that includes significant amounts of manual handling or repeated significant manual handling tasks should be assessed with a view to reducing the level of risk as low as is reasonably practicable via the provision of equipment, changes to operations and the training of the staff.

Any task that involves moving large, heavy or unwieldy items should be undertaken with appropriate planning, equipment and numbers of physically able and competent people.

General day-to-day handling operations do not require assessment unless a particularly vulnerable person is undertaking them. It is reasonable to expect fit and healthy staff to undertake typical manual handling tasks without special assessment or training. However, managers need to consider instructing staff with injuries or health problems to reduce any handling and should also assess those tasks their staff undertake regularly or frequently which present significant risk.

Where staff are involved in occasional phases of manual handling, e.g. office moves, it will be necessary to assess the significant operations and to train or inform staff as to suitable methods to be used and to ensure suitable equipment is available.

# 14.0 New and expectant mothers

#### 14.1 3<sup>rd</sup> Party Employees

In general, 3<sup>rd</sup> party service providers operating on HMPPS' premises are responsible for managing the risks to their pregnant employees. However, HMPPS' does have duty to protect them. HMPPS should co-operate with such employers in doing so. This applies, for example, where a healthcare or education worker is pregnant. On being notified of same, the employer should liaise with local HMPPS' management to decide on and implement suitable joint controls.

## 14.2 HMPPS' Employees

Employees who are newly expecting a baby must notify their manager as soon as possible in writing. On receiving written notification an assessment of the risks that could damage the employee's health and that of her child should be carried out.

Her line manager is responsible for carrying out the risk assessment in consultation with the expectant mother and implementing identified additional control measures and adjustments including if necessary exclusion from certain work activities/workplaces.

# 15.0 Noise and vibration

Exposure to significant noise and vibration risk tends to occur in limited, specific locations and activities within HMPPS. The main locations and activities are in industries and estates (currently under TFM contract) and community payback work. In industries, certain processes and plant such as process plant (e.g. powder coating), numerous aggregated machine tools, metal grinding and cutting, etc. can lead to levels of noise exposure which require active control. In estates, exposure may occur in construction trade work or in, for example wood or metal workshops. In all cases prevention and reduction strategies should follow a hierarchy of approaches:

#### Avoidance or substitution:

Consider alternative methods of achieving the same outcome e.g. jet washing v. scabbling especially at the activity design or commissioning stage.

#### Purchase policy:

All manufacturers and suppliers now provide noise and vibration data. In purchasing equipment, select those with lower sound power levels. There is usually some extra cost but this is likely to be insignificant in comparison to the long-term health risk to exposed persons or a single successful hearing loss or HAV claim. Purchasers should discuss the cost-risk arguments with procurement colleagues in making selections

## Effective noise and vibration reduction programs:

Using knowledge and observation of the activity and process to reduce exposure via the following means:

- The condition and location of noisy plant and processes.
- The potential for enclosure and or separation of same.
- The deployment of alternative methods or machines (e.g. guillotine as opposed to cutter grinder).
- The damping and securing of panels and casings.
- The mounting and fixing of noisy equipment.
- The balancing of rotary parts.
- The effectiveness of lubrication and cooling.
- Patterns of use and activity.
- The separation of plant and processes.
- The training of operators on the use of the equipment.
- The layout, fabric and design of the work area.
- Surface coatings and coverings.
- Initial background and at-ear indicative noise levels.
- The provision and use of PPE.

Where such situations arise, it is for the site concerned to take action to consider the sources and take steps to reduce the levels. Health and Safety Advisors can assist with noise surveys and the design of noise and vibration control plans. Legally, it is not sufficient simply to issue hearing protection. Steps must be taken first to reduce the levels at source and this requires an appropriate survey.

From this survey, a suitable action plan will be developed and implemented by local management and subsequent assessment and consultation undertaken to evaluate its effects. If there remain problems after this implementation, then it may be necessary to bring in external specialist advice and or make formal measurement of noise exposure. Hearing protection should be issued where there is reason to think there is a risk pending a proper assessment.

The use of HSE's online exposure calculator should be deployed where individual exposure levels are known or can be estimated.

Grounds Maintenance / Horticultural Work: Noise and Hand-Arm Vibration

In HMPPS these risks arise mostly for staff and or residents in the undertaking of grounds maintenance and or horticultural work in the use of power tools such as mowers, strimmer's, chain saws, "Stihl" saws, trimmers, brush cutters etc. Exposure is generally sporadic i.e. it is not occurring for continuous daily periods. Where exposure is consistent or continuous, the steps above should be implemented. In general, the following approaches should be adopted;

- Purchase policy all manufacturers and suppliers now provide noise and vibration data. In purchasing equipment, select those with lower sound power levels. There is usually some extra cost but this is likely to be insignificant in comparison to the long-term health risk to exposed persons or a single successful hearing loss or HAV claim.
- Provide hearing and hand protection of the appropriate grade and calibre and provide training and information about the risks - enforce its use. Use Health and Safety Advisors to identify the correct type. Anti-vibration gloves do not
  - generally achieve any significant reduction in exposure but gloves can make the handling of the equipment more comfortable, especially in cold weather.
- Use HSEs online calculator to estimate the acceptable use time and operate a work program to comply with them.
- Monitor usage and adapt accordingly to changes in such e.g. summer v winter.

#### Whole Body Vibration

It is not thought that HMPPS has staff or residents operating the type of plant, for sufficient periods of time which might lead to significant risk from WBV. If there are concerns, advice must be sought from a Health and Safety Advisor.

#### 16.0 Occupational Road Risks

Transport Guidance and Procedures manual 2018 - Provides detailed guidance for vocational passenger, goods and contract transport. The manual can be found on the HMPPS intranet as below, alternatively a copy can be requested via the National HSF FMB.

https://intranet.justice.gov.uk/documents/2018/10/transport-guidance-and-procedure-manual.pdf

Employees who drive for work purposes are required to notify HMPPS immediately of any changes to their health, insurance or legal position with regard to driving. HMPPS validates employee driver's ongoing legitimacy to drive via its travel expenses claims process.

Vehicles owned or leased by HMPPS are maintained in a roadworthy state by dint of the contract under which they are provided or by HMPPS Transport Section. *If vehicles are owned* 

or managed by local establishments or Probation services, then they must be subject to a service and test programme in line with the manufacturer's specification by a competent person.

Drivers are required to visually check their vehicles prior to work use for defects such as tyre tread, body damage etc.

Management should be accommodating of the need to break up long journeys and of the effects of long driving hours before and after a day's work. It is not thought to be of use to be prescriptive on hours and distances because of the variety of people, vehicles and driving conditions. However, as a baseline, non-vocational drivers must take at least a fifteen-minute break every two hours in line with the Highway Code. Managers must consider the need for overnight accommodation either before or after an appointment requiring a significant amount of driving. Drivers must break when feeling jaded or tired and take suitable rest and sustenance.

# 17.0 Radiation Safety, X-Ray Equipment, Radon Gas

Sources of Significant Ionising Radiation Risk arise in HMPPS from X-Ray Security Equipment, x-ray dental equipment and from naturally occurring radon gas.

## 17.1 Security X-Ray Equipment

This is procured under nationally tendered contracts under the control of MoJ's CCM procurement processes to meet appropriate industry standards. Following installation by the suppliers, HMPPS' uses its appointed Radiation Protection Adviser (RPA) to undertake commissioning tests of the equipment and a report is provided to the relevant establishment. The equipment is subsequently inspected and tested by the RPA at intervals advised by the RPA and reports submitted for remedial action. HMPPS' RPA provides training for HMPPS'

Radiation Protection Supervisors (RPS) to implement and oversee "local rules" for the safe use of the equipment.

Non-specialist inspection of the integrity of the equipment is undertaken via the Planet FM Planned Preventative Maintenance System. On transfer of the equipment to another location commissioning inspection will be undertaken.

Staff who operate security X-ray machines must be trained in the risks and safe operation of same. This training is provided by HMPPS' RPA through HMPPS Learning and Development Function.

# 17.2 Dental X-ray Equipment

Some of this equipment remains under the control of HMPPS as a legacy from direct healthcare provision. Where this is the case mutual arrangements should be in place to nominate an appropriate RPS. It will not be appropriate for the RPS of dental equipment to be a HMPPS' employee unless they are dental staff working to the health care function. *In reality, the operational management must be undertaken by dental staff whilst the formal inspection and test function will remain with HMPPS pending disposal or transfer of the equipment.* HMPPS should not enter into the purchase of medical or dental X-ray equipment. This should be provided by the healthcare provider.

# 17.3 Radon Gas

All sites must undertake a postcode assessment of the prevalence of radon gas in their sites. This can be done via the UK Radon website. All sites with subterranean rooms should create a register of those rooms and assess the extent of their occupancy where occupancy is above 50 hrs. per year, a monitoring strategy should be put in place to inform any necessary action.

Where the premises, or part thereof, are in Radon exposed areas further assessment of risk and monitoring will be required across the site and this should be done with reference to HMPPS' RPA. A program of work should be derived from these assessments to prevent, control and monitor exposure.

## 18.0 Slips and Trips

All staff and 3<sup>rd</sup> parties are at some risk of slips and trips, but the risks are more acute in the custodial setting.

The following is the specific approach (through a range of national, local, collective, and individual controls) to be followed in custodial settings as a means to mitigate these risks, but the generality of measures should be followed in all settings.

MoJ ED includes a floor finish specification in their technical standards suite which sets high standards of slip resistance for new or replacement floor finishes commensurate with premises use.

RPOM's should consider slip resistance measures as an integral part of their assessment of needs for a particular finish or function, even in small repairs.

Slip reduction footwear is specified nationally and provided for operational staff who are at risk from high levels of movement around custodial premises including responding to alarms and participation in C&R activities. Good levels of slip resistance are included in assessment for other groups of staff for whom protective footwear is necessary (e.g. trades staff)

Floor and external surface condition inspections are part of planned inspection programmes. Defects in floor surface and finish can be reported by all staff via the online Planet FM system.

Health and safety advisors can provide surveys of slip risk based on accident reporting, floor use and cleaning schedules to assist in prioritising action to reduce risks.

Officers controlling food serveries must use their authority to ensure residents remove spillages promptly and effectively.

Workable procedures for floor cleaning should minimise "wet time" and take practicable steps to divert foot traffic from wet areas. Warnings of wet, obstructed or contaminated floor should be posted and removed promptly. There is no benefit of such warnings when the risk is not present.

Regular, day-to-day management oversight and inspection must require prompt action to isolate or remove temporary slip and trip hazards using a "see-it; stop-it" approach.

Sources of contamination such as drips and spillages should be investigated with a view to eliminating them if possible. They may result from repair needs. However, mitigation e.g. by local matting is a viable response.

Where spillages are likely to create significant risks e.g. in high traffic area, particular arrangements should be made locally to ensure a suitable response.

All sites should develop a procedure for inclement weather and dealing with snow or ice and to inform staff of such arrangements.

All the measures above must be communicated to staff and to residents and their co-operation in same required.

# 19.0 Smoking

Within the custodial setting;

- Closed estate prisons are smoke free with smoking prohibited. Vaping is only permitted within the cell with the door closed.
- Within the open estate and IRC individuals in our care are only able to smoke in designated external smoking areas. Vaping is permitted within designated external areas and within the individuals cell/room with the door closed.
- Youth Offender establishments have been smoke free since 2007.
- Probation Approved Premises are smoke free with smoking prohibited within any building, individuals are only permitted to smoke or vape externally to buildings within designated smoking areas.
- Details for arrangements for vaping within Mother & Baby units are contained within the Smoke Free Policy
- Staff are able to vape in designated vaping areas only.

Staff must challenge any act of vaping or use of smoking materials outside of identified designated spaces (as above) and use their authority to control same.

The Smoke Free Policy Framework provides details of the arrangements in place for the management of a smoke free environment within the Prison and Probation estate.

https://intranet.noms.gsi.gov.uk/policies-and-subjects/policy-frameworks/smoke-free-policy-framework

It is important to enforce this policy to protect staff and residents from second hand smoke, these provisions are key in making sure staff and residents are not unnecessarily exposed to second hand smoke and along with up to date risk assessments and safe systems of working form the organisational response to managing this risk.

The following steps should be taken to protect staff from second hand smoke in areas where residents are vaping or smoking illicitly in their cells;

Before entering a cell staff should look through the observation glass to see if the cell is occupied.

If a resident is observed to be vaping or smoking illicitly in their cell staff should not enter unless there is an overriding priority to do so, but should instruct the resident to cease vaping/extinguish the cigarette and to open a window to vent the room.

Staff should then wait until they reasonably anticipate the smoke has dissipated. Levels of dispersal in cells will vary substantially depending on the cell design, door fit and windows

and maintenance of mechanical or passive ventilation systems In general, concentrations of airborne contaminants will decline in line with cell ventilation rates. The prisons residential ventilation is designed to replace the volume of air within the cell 6 times/hour (every 12 minutes) and will remove foul air from the cell continuously diluting smoke and creating positive pressure on the landing which reduces the likelihood of contaminant moving from cell to landing.

**Staff must follow the local SSOW -** Reducing risk of exposure to illicit airborne contaminants on Cell Entry. A copy of the exempla SSOW is located on the HMPPS intranet and is also available within the Sphera library.

https://intranet.noms.gsi.gov.uk/support/hr/wellbeing-and-attendance/health-and-safetyquidance-notes

This guidance does not override your duty to intervene to protect a resident or a member of staff in danger of immediate harm in a cell where smoke has not yet cleared.

# **20.0 Stress**

Measures to reduce and control stress are to be co-ordinated at regional or Probation regional level. Engagement processes such as "Listen to Improve" and the National Staff Engagement Survey provide formal processes by which key work-related stressors for staff are identified collectively and either local or generalised management responses can be planned and resourced.

The HMPPS' National "Stress Management Toolkit" available on the HMPPS intranet and MyHub, provides a range of tools for planning and delivering stress control actions including both group and individual risk assessment and management diagnostic and training materials.

# HMPPS intranet;

https://intranet.noms.gsi.gov.uk/support/hr/wellbeing-and-attendance/health-and-safetyguidance-notes

MyHub;https://hmpps.myhub.sscl.com/hmpps-connect/HR-and-Pay/Working-here-Staffworking-here/health-and-wellbeing-managing-stress

HMPPS has extensive equalities and anti-bullying and harassment policies in place.

Managers are expected to be attentive and sensitive to the demeanour of their staff and to feedback from their teams. They should make tactful inquiries where there are signals of stress and pressure from individuals or collective action in regard to groups of staff.

Where staff report stress a risk assessment must be considered and if undertaken, progress against it monitored. Arbitrary distinctions between work and personal stress will not always be clearly made and it will be necessary for some exploration of causes before effective controls and support can be put in place. Team and line management support are critical in alleviating stress. Managers should consider their own approach and style and its likely effects on their staff's experience of stress.

Training for both managers and staff on the stress, wellbeing and resilience is also available via CSL. Confidential employee support and counselling services are available via telephone, online and face to face via the Employee Assistance Contract.

Line managers, HR Business Partners and Occupational Health staff should work collaboratively on collective prevention and control measures and on individual case work as it is appropriate.

# 21.0 Substances hazardous to health

Exclusive of biological hazards, exposure in HMPPS may occur to staff, residents and service users in a variety of environments and activities as follows:

Industries and educational processes or activities Estates management and trade activities Smoke inhalation from cell fires Routine cleaning activities

Where relevant, COSHH assessments must be carried out and the identified control measures implemented.

#### 22.0 Cleaning

# **Custodial Premises**

In custodial premises where cleaning residential, and other, areas is part of resident's duties a clear system is needed to ensure standard operation and avoid cross-contamination.

# Cleaning Schedules

Cleaning schedules are written details which identify how each area must be cleaned and how often and the methods to be adopted.

The following should be specified in a schedule:

The item – what is to be cleaned, for example, floors, walls, ceilings, doors and work surfaces;

- The frequency when is it to be cleaned and the time necessary to clean the item, for example, daily, weekly, monthly;
- The appropriate cleaning method how is it to be cleaned, for example, the materials and equipment to be used and how slip and trip hazards are to be reduced during the cleaning process;
- The storage of cleaning materials and equipment where are the equipment and personal protective equipment to be stored.

Cleaning schedules should be made available for all cleaning operations and key points emphasised to those effected by the risk e.g. times

Specialist cleaning including cleaning following a dirty protest, cleaning in catering areas and where access is difficult will require additional guidance.

# Probation premises & HQ Buildings

In Probation premises and HQ Buildings, cleaning will be delivered by FM contractors in accordance with national specified standards and safe systems of works. MoJ as the contract manager are responsible for the setting and monitoring of these standards.

# 23.0 Violence to staff and 3<sup>rd</sup> Parties

Violence is a significant risk to staff and third parties affected by HMPPS' undertakings. As a result HMPPS has a wide range of methods in place to prevent, reduce or mitigate the risk of violence.

# Custodial settings

Every establishment in HMPPS is required to have a Violence Reduction Strategy (VRS). This strategy will reflect the establishment's security categorisation and the types of residents it is expected to hold, and its physical security and design.

The types of physical security systems that may be used as part of an establishment's violence reduction strategy include the use of: CCTV and physical barriers to separate certain types of residents such as designated wings, gates and fencing.

The types of processes or systems that may be used as part of a violence reduction strategy include: the RMP, staff supervision, control of mass movements of residents; initial observation assessment and classification, security intelligence gathering and analysis which helps to assess any risk of violence or disorder; routine and targeted searching, monitoring of communications, providing incentives for cooperating and engaging with the prison's regime, processes to minimise and challenge bullying behaviour, judicious use of segregation, and transfers of residents to different wings or prisons. *In addition, all violent incidents must be both reported and proportionately investigated so that appropriate learning can be drawn from them.* Such Investigations, where appropriate, will require the review of relevant risk assessments (dynamic or recorded) relating both to the individuals involved and the systems for managing the risk they present.

In HMPPS establishments' residents' propensity to violence is closely monitored using a number of different systems including OAsys, NOMIS & IRS. Residents will be assessed for their suitability before being allocated to employment or education in order to minimise the risk of violence. In addition, custodial premises operate reception and first night facilities that permit assessment and the controlled introduction of the resident to the establishment.

#### **Staff Training**

As part of prison officer training, personal safety techniques and methods for the controlled application of force when necessary, including de-escalation, is provided. Training is repeated annually. Personal protection training is also offered to civilian staff working in prisons.

# Regime Management Plan

Prisons must have in place a robust and workable Regime Management Plan (RMP) which has been consulted upon and agreed via the local HS Committee. This will define the capacity

of the prison to run various aspects of its regime based on staffing, prison population profile and operational capacity. It allows for early and predictable planning of regime based on the likely or actual staffing and the regime of resident activities. Where absence, recruitment or other problems with staffing levels cause staffing to drop below locally defined ranges, the plan allows the management to make quick, guided decisions on the progressive reduction of the regime to continue to allow safe operation. The RMP must be based on an assessment of the risk associated with running particular aspects of the regime from patrol state and response to fully unlocked based on the layout and design, fabric and equipment, resident category and behaviours, staff capacity and resident activity in the establishment.

The principles and criteria described in the ACPO, HMPPS and CPS protocol on reporting crimes in prison must be applied to all assaults, acts of violence or arson.

In Probation setting a wide range of control measures are in place to prevent, reduce or mitigate the risk of violence. These may include: physical security and design of premises including access controlled doors and interview suites.

Probation operates a number of systems for recording incidents and assessment of service user status and for flagging risks. These include OAsys and nDELIUS. In addition, Approved Premises will operate a system of pre-assessment and controlled introduction of the service user to the AP.

## **Incident reporting**

Information on incidents and behaviour is gathered and integrated to identify likely risks to security and safety. Any member if staff can report any incident of aggression or issue of concern via the accident/incident reporting process (Sphera). Learning from investigations will be used to update local control measures and/or inform national strategy.

## Personal Assistance Alarms (PAA) and CCTV

All Probation workplaces where service user contacts occur are provided with a suitable means of raising an alarm and seeking support from others. CCTV is provided to assist with management of the risks of violence and can be used as a form of evidence should any incident occur.

# Staff Training and Allocation

All staff who have contact with service users receive suitable and sufficient training commensurate with their roles and nature of the service user contact. The type and depth of training will be determined by risk assessment.

# 24.0 Measuring Performance, Audit and Review

HMPPS measures individual staff performance via its 6-monthly staff performance and this should address health and safety performance of the individual if necessary and set appropriate development and performance targets.

HMPPS collects reactive data reports on sickness absence, work-related ill-health, workrelated injuries and assaults and civil claims via its HR information system (SOP), Sphera, IRS/NOMIS and Performance Hub systems. These can be analysed and reported on locally, regionally or nationally.

HMPPS investigates adverse incidents based on their potential severity and disseminates relevant learning and recommendations to appropriate parts of the service.

HMPPS audits its custodial premises on Health, safety and fire on a cyclic basis via the GIAA.

HMPPS operates a risk and control monitoring system which incorporates PHASE, to evaluate HSF performance and key HSF indicators on quarterly regular basis which forms the basis of establishment, regional and national reports together with quarterly "HSF Dashboard" reports.

Principle Health, Safety and Fire Leads and Probation HSF Leads make regular assurance visits to premises and services which they support and make reports to the local senior manager(s) manager and relevant Prison Group Director or Regional Probations Director.

Deputy Directors make regular visits to their sites and service and included HSF as part of their scrutiny agenda.

HSF Policy and Arrangements embedded in PSIs, PFs, PIs and AIs are regularly reviewed.

Annex 3 provides an outline of H&S monitoring processes

#### 25.0 Work Equipment

Work equipment covers a very wide array of items used for work from staplers to machine tools.

For the day-to-day small and low risk equipment, it is reasonable to expect staff to be able to operate these safely without need for additional measures (this assumption must be qualified for residents and third parties).

As work equipment becomes more complex, for example mechanically or electrically, the requirement for and nature of control measures will be determined by risk assessment taking in to account the hazards and risks (of use, misuse and potential failure).

Directors, Deputy Directors, Governors and Probation Heads of LDU Clusters must put in place measures to ensure that work equipment (including personal protective equipment) provided for use in the workplace is suitable for the intended purpose, only used by authorised and competent persons, appropriately stored, inspected, serviced or maintained and adequate records maintained.

Where machinery is used managers must give specific attention to:

- preventing access to dangerous parts of machinery
- protecting against specified hazards (entanglement, crushing, impact etc.)
- protecting against extremes of temperature
- fitting controls to equipment
- providing means of isolation from energy source
- ensuring stability of equipment
- providing adequate lighting
- enabling safe maintenance work
- affixing health and safety markings and warnings.

Managers should seek advice from safety advisors or estates managers in compliance with the above.

Staff should report any faults in equipment promptly and any concerns they have over their ability to use the equipment.

# ANNEX 3 – NATIONAL HS GOVERNANCE STRATEGY

SpheraCloud™ (rivosafeguard.com)

# **ANNEX 4**

# **Glossary of Terms**

	Area Property Operations Manager
ADOM	
APOM	Dusings Admin Consciplint (much sting) wenting in a montioning
BAS HS	Business Admin Specialist (probation) working in a particular location whose role it is to provide professional Health and Safety advice and support.
	A manager who provides professional HSF advice and
	leadership to the local HSF Advisor and SMT team in a
Senior HSF Advisor	particular location or service within the delivery arm.
СМ	Custodial Manager
Control	Any means of risk reduction from elimination to personal protective equipment
	Legally embedded hierarchy of controls:
Control Hierarchy	Elimination/substitution; Engineering Control and or Isolation; Procedural Management; Personal Protection
ED	Estates Directorate (MoJ)
GIAA	Government Internal Audit Agency undertaken by MoJ's
	Independent Audit Assurance Team in HMPPS's custodial sites
HoF	Head of Function
HSF Advisor	Located in the Strategic Centre
HS	Health and Safety
HSF	Health, Safety and Fire
MOJ	Ministry of Justice
HLT	HMPPS Leadership Team
HLT OHSF Sub committee	<ul> <li>HMPPS Leadership Team Health, Safety and Fire Sub - Committee which deals with operational fire, health and safety performance.</li> </ul>
	HMPPS OHSF Risk and Control Evaluation Tool within Sphera
PHASE	a reporting device to measure OHSF Performance at regular intervals across HMPPS services
Probation	National Probation Service
1 TODALIOIT	I I
RPOM	Regional Property Operations Manager
RPOM	Regional Property Operations Manager
RPOM OH	Regional Property Operations Manager Occupational Health
RPOM OH OHA	Regional Property Operations Manager Occupational Health Occupational Health Advisor
RPOM OH OHA OHSF	Regional Property Operations Manager Occupational Health Occupational Health Advisor Occupational Health, Safety and Fire