

HEALTH & SAFETY

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KEY

[A31] = Electronic Folder Reference

REVISION TABLE

Revision	Date	Comments
A	08/04/99	-
B	25/10/00	-
C	16/05/01	-
D	01/11/06	-
E	18/06/07	-
F	14/10/09	-
G	22/03/10	-
H	24/10/11	-
I	22/02/13	-
1	25/07/14	-
2	09/09/14	Section on working hours included.
3	15/05/15	Health and Safety Objectives added; revision of CDM regulations
4	28/05/15	Update on PPE related standards; Risk Assessment section expanded.
5	01/07/15	PPE section expanded.
6	29/04/16	Employee representative changed. Periodic review.
7	23/05/16	CDM section updated for Principal Designer
8	19/05/17	Annual review, new H&S consultant, new office location
9	24/05/18	Site visit calendar added, fire procedure, safety critical work projects updated
10	23/07/18	Update for Work Safe practices, site surveys under CDM, and H&S consultant details
11	22/05/19	Update for H&S consultant details & first-aid requirements
12	04/05/20	Sentinel scheme procedure added, Occupational Health advisor changed

1. HEALTH & SAFETY POLICY STATEMENT

Robert Walpole and Partners accepts its responsibilities under the Health & Safety at Work Act, associated legislation and Codes of Practice.

We give our full commitment to doing everything reasonably practicable to protect the health and welfare of all our employees and any other person whose health and safety may be affected by the Company's business.

Robert Walpole and Partners will pay particular attention to:

- a) Provision of adequate resources, information, instruction, training, supervision and consultation.
- b) Provision of a safe and healthy working environment with adequate welfare provision.
- c) Set, monitor and review safety objectives.
- d) Continual improvement in safety performance.

No employee, or anyone working on behalf of the company, is expected to carry out any task where the risk to themselves or any other person is considered unacceptable.

As part of the Worksafe practices each member of staff has the right to refuse to carry out work if they feel it is not safe to do so. Refusal to work on the grounds of Health and Safety is free from disciplinary action.

The Health and Safety Policy Statement will be reviewed annually by the partners and revised as circumstances require.

A copy of this policy statement will be issued to all staff.

Signed:

M.J. Walpole

M.J. Walpole
Partner

Date:

04-05-20

2. HEALTH AND SAFETY POLICY

2.1. NATURE OF THE BUSINESS

Robert Walpole and Partners (RWP) is a Civil and Structural Engineering Consultancy operating nationwide from its office in Slough. RWP provides designs and advice to clients for the civil and structural aspects of projects.

The firm was founded in 1968 by Robert Walpole. The principals of the firm are:

M. J. Walpole	Bsc(Eng) ACGI CEng MICE MConsE
M. W. Simmons	Bsc(Eng) ACGI CEng MICE MCIWEM C.WEM

Additionally a number of technical and administrative staff is employed.

The Practice has engaged in a wide range of building and civil engineering works including project management as well as design and supervision.

2.2. SAFETY OFFICER (Competent Person)

The Safety Officer is Jonathan Walpole.

2.3. EMPLOYEE SAFETY REPRESENTATIVE

The Employee Safety Representative is Halina Madura.

2.4. HEALTH AND SAFETY CONSULTANTS

Hutton Compliance Ltd

Company Address: Office 17, Champion Business Park, Arrowe Brook Road, Wirral, CH49 0AB.

Telephone: 0151 601 2997

email: info@huttoncompliance.co.uk

website: www.huttonrailcompliance.co.uk

2.5. HEALTH AND SAFETY OBJECTIVES

An annual review and audit of Health and Safety objectives [A45] is prepared aiming at improving safety culture within the organisation. Refer Annual Health, Safety, Environmental and Quality Objectives (part 9 of Office Manual) for latest list and corresponding action plan.

2.6. IN THE OFFICE

The office is a no smoking area.

2.7. OFFICE EQUIPMENT

Staff using Visual Display Units (VDUs) should not work continuously for periods of more than an hour without breaks of at least 5 to 10 minutes per hour. Display screen equipment risk assessments are carried out after any significant changes to staff's workstations [A41]. Office equipment is visually inspected on first installation or when moved.

2.8. CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH)

COSHH assessments have been prepared for any substances used or likely to be encountered during employment activities. These are to be briefed out to relevant employees during Office Workshop Meetings or as part of the Method Statement briefing.

2.9. MANUAL HANDLING

All staff will be advised on manual handling procedures and the need to ensure they only handle loads within their individual capability.

2.10. FIRST AID & HOSPITALS

There is a first aid kit in the stationary cupboard.

Appointed Person: since anyone may be out of the office, any staff member should be able to take charge and call an ambulance. In addition, a number of staff are first-aid trained as is listed on the Health & Safety noticeboard [A41]. This exceeds HSE's Guidance on the Health and Safety (First-Aid) Regulations 1981.

The nearest hospital is Wexham Park, Slough, Berkshire SL2 4HL (directions are included in APPENDIX F). The NHS A&E Location Search website should be used for planning nearest hospitals to specific sites.

2.11. FIRE PROCEDURE

In the event of a fire being discovered or the fire alarm sounding, all staff should exit the building via the front door and assemble at the Staff Assembly Point (refer Figure 1). When possible, staff should take the initiative during a fire by checking and warning staff in the downstairs offices and taking the visitors book whilst evacuating.

The Safety Officer is responsible for the fire procedures. Fire drills are undertaken annually and are recorded using the form in Appendix G.

Fire extinguishers are not provided on the company premises. In other locations where they are provided only staff trained in their use should attempt to tackle a fire, and then only to seek exit from the building.

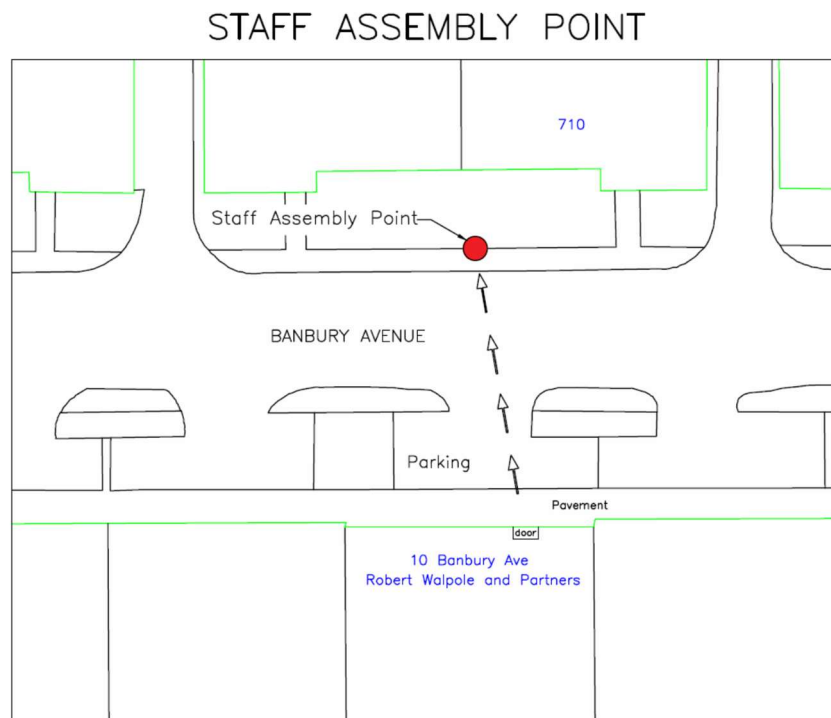


Figure 1: STAFF ASSEMBLY POINT

2.12. IN YOUR CAR

Whether you drive a company or private vehicle, practise good driving by being alert and tolerant and complying with the Highway Code and the law. Do not use a mobile phone (except hands free installation). Make sure that the vehicle is maintained in a safe and fit condition. When preparing for a journey consider poor weather conditions (such as snow, heavy rain or high winds) and adjust your driving accordingly. Consider fatigue before driving.

2.13. PERSONAL PROTECTIVE EQUIPMENT (PPE)

Management of PPE to be in accordance with “Personal Protective Equipment at Work Regulations 1992” and relevant industry standards. Appropriate PPE shall be worn throughout the works in line with risk assessment for task undertaken. All PPE is issued free of charge and conforms to relevant standards (refer Table 1). Small PPE items like gloves or ear plugs are easily accessible in the store room, however a PPE Provision Form needs to be completed and passed to the Office Administrator for any item of PPE. All employees are required to look after company issued PPE. All PPE should be stored and maintained in line with manufacturer’s instructions. All employees with PPE are required to complete a PPE Inspection Form twice a year.

Table 1: PERSONAL PROTECTIVE EQUIPMENT

Safety Helmets	BS EN 397:2012 + A1:2012
Ear Defenders	BS EN 352-1:2002
Eye Protection	BS EN 166:2002
Flame Retardant Overalls	BS EN ISO 11611:2015
Safety Footwear	BS EN ISO 20345:2011
Gloves	BS EN 388:2016
Hi-Visibility Vest	BS EN ISO 20471:2013 + A1:2016
Face Masks	BS EN 149:2001 + A1:2009

All PPE identified as mandatory through the risk assessment process needs to be worn at all times. All breaches need to be reported to the Safety Officer for investigation and may result in disciplinary action.

2.14. WHEN VISITING CONSTRUCTION SITES

Staff shall:

- Before attending site, inform the company they will be attending site. This is done by creating an event with the relevant details and sending an invitation to the site visit account (sitevisit-robertwalpole@btconnect.com).
- Select a Team Leader in instances where more than one employee attends site.
- Ensure that all relevant certification and training mandatory on site is in date.

- d) Register arrival and departure with site manager.
- e) When visiting an unoccupied site alone, advise the Safety Officer (if unavailable, another member of staff) of location and expected time of return. Carry a mobile phone to be used in an emergency.
- f) Take time to assess site conditions and record any mitigations put in place.
- g) Comply with site operator's procedures.
- h) Take reasonable care to avoid injury to themselves or others.
- i) Wear safety helmet, boots and high visibility jacket as well as any additional PPE identified on a Risk Assessment.
- j) Where other personnel appear to be working in an unsafe manner or not in accordance with Construction Regulations then the visiting member of staff shall bring the matter to the attention of the site supervisor. Such comment shall be confirmed in writing.
- k) If the site supervisor is unavailable and the Engineer feels that the site is unsafe then he/she should phone main office and seek advice on what action should be taken.
- l) Should the site visit involve working at height then the Engineer should seek instruction from the site supervisor in respect of working or gaining access. Tower and mobile platforms should only be used under the supervision of a competent person.
- m) First Aid, if required will be sought via the site supervisor.

2.15. UNSAFE AND WORKSAFE PRACTICES

If the Engineer notices unsafe practices or Construction Regulations are not being obeyed they must bring it to the attention of the site supervisor. These include but are not limited to:

- Requiring personnel to undertake work that they are not fit or competent to do;
- Requirement to undertake a task without correct equipment or PPE;
- Situation where there is no safe system of work or it is not being implemented.

If the unsafe practices persist, then if necessary the Engineer must instruct that work should stop and not restart until all safety concerns are addressed. In an event when that is not possible an immediate line manager should be consulted who will investigate the situation and will advise the next course of action. All concerns are to be raised on a risk reporting form from APPENDIX A. The risks should be assessed and subsequent additional control measures are to be introduced and recorded using a risk assessment form from APPENDIX B and submitted to the Safety Officer for review.

Employees will not be penalised for refusing to work on grounds of Health and Safety and it will not affect in anyway their prospects within the company. All refusals to work will be responded to promptly and the employee raising the issue will be informed of decisions throughout the process.

2.16. ACCIDENTS

All accidents and near misses / close calls should be reported to the Safety Officer. Details of each accident/incident shall be recorded using form in APPENDIX D. The Safety Officer shall review these reports and make recommendations aimed at preventing similar occurrences in the future.

In the event of an accident during site works, a procedure described in a method statement for the works is to be followed. Any accidents need to be reported in the site accident book as well as in the main office. When an accident occurs on site controlled by our client, full co-operation is to be given to investigators appointed by that client, British Transport Police (BTP), HSE, Environment Agency or other relevant regulatory bodies. Where subcontractors of RWP are working together with RWP staff on a site, any accident or incident to any of these staff members should be reported and investigated by RWP as if it had occurred to a direct member of RWP staff.

2.17. REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES (RIDDOR)

A RIDDOR report is required when:

- The accident is work-related;
- It results in an injury of a type which is reportable (refer HSE website for more details).

All reporting will be a responsibility of the Safety Officer. In some instances, the Safety Officer may engage health and safety consultants to complete an investigation and report on a specific accident (and/or incident).

2.18. CONFIDENTIAL INCIDENT REPORTING ANALYSIS SYSTEM FOR TRANSPORT (CIRAS)

As part of our commitment to health and safety Robert Walpole and Partners become a member of CIRAS (membership number C1139). CIRAS is accessible to all staff, from front line to Managers, and processes any concerns in the strictest of confidence. Their freephone is 0800 4 101 101.

2.19. FITNESS FOR WORK AND SICKNESS

Fitness for work is assessed using form in APPENDIX C and records are kept in Personal File.

Employees are to keep sickness record sheets. All sickness should be reported using a form located in APPENDIX E. These are then stored in their Personal File.

2.20. OCCUPATIONAL HEALTH AND HEALTH SURVEILLANCE

Where a working system or product in use shows that health surveillance is appropriate due to exposure of substances, records will be kept for 40 years after the last date of entry. Where applicable, the Safety Officer will ensure that an adequate recording system is set up. Employees will have access to any medical records kept by the company. In making this information available, it is important that employees report any health condition they feel would cause difficulty in carrying out their duties. Table 2 details the risks and action required.

If health surveillance services are required Express Medicals will be employed.

Table 2: HEALTH SURVEILLANCE ASSESSMENT OF CONDITIONS

Risk Area	Internal (office) External on sites	Risk Rating	Action
Display Screen Equipment Use	Internal	Low	VDU assessment form to be used every two years or when workstation changes.
Manual Handling	Internal & external	Low	Staff given guidance on manual handling techniques. Included in office and site risk assessments.
Vibration	Not applicable	-	-
Noise: Hearing test if exposure at levels of 80dB or above	Not applicable unless working long term or surveying a client's site.	Low	Risk Assessment to be completed for long term working in area where noise action level 1 is reached or above. Engineers will always carry with them ear protection devices.

Risk Area	Internal (office) External on sites	Risk Rating	Action
Asbestos, lead, compressed air	Possible external on a client's site. No asbestos exposure internally.	Low	Employees will not go into any area where exposed asbestos or unidentified asbestos is present or where an asbestos register has not been created. (Building dependent) All asbestos exposures will be recording on staff records.
Substances Hazardous to Health	Internal and External	Low	Employees to read COSHH Data sheets if chemicals are used.
Ionising Radiations: Dosimetry;	Not applicable	-	-
Laser users: Eye examination	Not applicable	-	-
Confined spaces	Minor possibility when working on a client site.	Low	Any entry into confined spaces will be recorded on staff records where chemicals or fumes were evident from the risk assessment supplied by the client.
Pregnant workers	Internal	Low	Office accommodation can be provided for pregnant workers or workers who are nursing mothers.
Night work: Occupational	Not applicable in long-term working. External on client's sites	Low	Night working is only complete on a piecemeal basis. Any long-term night working will be assessed separately.

2.21. RISK ASSESSMENTS

Risk Assessments are to be prepared by competent personnel that have been trained to do so and are experienced enough in site activities to identify associated risks. In order to assist with the process and ensure uniformity of assessments, a Risk Register containing the most common hazards and associated control measures is utilised and should be consulted when preparing a Method Statement. Each time a revision of a Method Statement results in a change to any risk assessment, the Risk Register needs to be updated so that the change is included in all subsequent Method Statements. Similarly, when a new hazard is identified, it should be incorporated into the Risk Register.

All Method Statements and associated risk assessments require 2 stage review by a senior team member and HSEQ representative (from client's team or appointed Health and Safety Consultant). Once approved, Method Statement is to be briefed out to relevant employees and a briefing recorded on appropriate Briefing Sheet.

All Risk Assessments consist of three sections:

- Generic risks typical for most sites that our employees are required to visit;
- Site Specific risks that are applicable only to this site;
- Blank page to record any unforeseen risks or sudden change in circumstances that affect the works.

If staff become aware of any risks to health and safety they should complete a Risk Reporting form (APPENDIX A) and submit it to the Safety Officer.

In addition, a risk assessment is carried out alongside our design work in order to identify any hazards relevant to the project throughout its lifecycle. The risks are then removed or reduced as much as practicable during the design process. Residual risks are then communicated to other parties via a Designer's Risk Assessment register and noted on For Construction drawings.

Risk assessments are checked by senior staff, and the process is regularly audited by our Safety Officer and Quality Manager to ensure best practice is maintained.

2.22. APPOINTING AND MONITORING OF SUB-CONSULTANTS

Before appointing any sub-consultant, ensure that the proposed sub-consultant:

- a) Completes a supplier's questionnaire.
- b) Has its own arrangements for appointing competent sub-contractors or consultants.

The competency of sub consultants will be monitored on an annual basis.

2.23. COMPLIANCE WITH CDM REGULATIONS

Designs shall take account of safety in construction and subsequent maintenance. We recognise our decisions can affect the health and safety of workers and others who will construct, maintain, repair, clean, refurbish and eventually demolish or remove the building or structure, as well as those who will use it as a completed workplace.

Not taking into account the risks arising from the design can adversely affect the project and make it harder for contractors to manage those risks. We recognise that we play an important part of delivering a project safely and without these risks where practicable.

The Construction (Design and Management) Regulations 2015 set out responsibilities for the following roles:

- a) Clients
- b) Principal Designers and Designers
- c) Principal Contractors and Contractors
- d) Workers

In most cases the business acts as a **Designer** under the regulations and must do the following:

- a) Make sure that they are competent and adequately resourced to address the health and safety issues likely to be involved in the design;
- b) Check that clients are aware of their duties;
- c) When carrying out design work, avoid foreseeable risks to those involved in the construction and future use of the structure. In doing so, they should eliminate hazards (so far as is reasonably practicable, taking account of other design considerations) and reduce risk associated with those hazards which remain;
- d) Provide adequate information about any significant risks associated with the design (e.g. Risk Assessment);

- e) Coordinate their work with that of others in order to improve the way in which risks are managed and controlled.
- f) Information with regard to health and safety to be communicated to others, including site operatives, via Health and Safety Plan and drawings, as deemed appropriate.
- g) Provide any information needed for the Health and Safety File.
- h) Ensure information is provided (where required) to the Final File and O&M Manuals.

In some cases, Robert Walpole and Partners undertakes site surveys as part of our consultancy services. These do not fall under the *Contractor* role which specifically excludes site surveys. Instead they fall under the *Designer* role of the CDM regulations, as they provide an input into the design and asset assessment process.

In some cases the business may carry out the role of **Principal Designer** and must do the following:

- a) Plan, manage, monitor and coordinate health and safety in the pre-construction phase. In doing so account must be made of relevant information (such as an existing health and safety file) that might affect design work carried out both before and after the construction phase has started.
- b) Help and advise the client in bringing together pre-construction information, and provide the information designers and contractors need to carry out their duties.
- c) Work with any other designers on the project to eliminate foreseeable health and safety risks to anyone affected by the work and, where that is not possible, take steps to reduce or control those risks.
- d) Ensure that everyone involved in the pre-construction phase communicates and cooperates, coordinating their work wherever required.
- e) Liaise with the principal contractor, keeping them informed of any risks that need to be controlled during the construction phase.

To help conform with CDM requirements the business bases its designs and documentation on Figure 2 which shows guidance on the flow of information throughout a project.

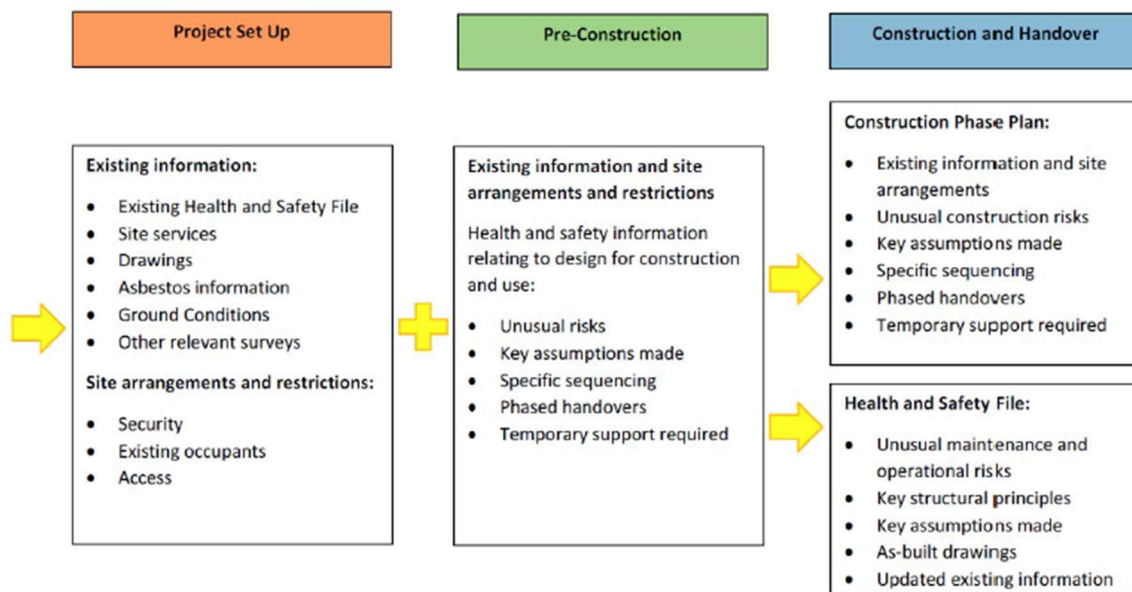


Figure 2: GUIDANCE ON INFORMATION FLOW IN-LINE WITH CDM 2015

2.24. HEALTH & SAFETY ORGANISATIONS AND STANDARDS

The organisations mentioned in Table 3 provide information and guidelines about Health & Safety.

Table 3: HEALTH AND SAFETY ORGANISATIONS

Health & Safety Executive (HSE)
Rail Safety Standards Board (RSSB)
Standing Committee on Structural Safety (SCOSS)
Confidential Incident Reporting and Analysis System (CIRAS)

Additionally Robert Walpole and Partners maintains a catalogue of Health and Safety standards relevant to the business [A41]. This catalogue is to be checked every 3 months to ensure the latest standards are referenced. The Safety Officer is responsible for this monitoring, however the task can be delegated as needed.

2.25. SAFETY ALERTS

Safety alerts are received from NR, LUL, and various others sources, and are generated by in house risk reporting and accidents. They are issued to all Staff [A41.7 & A41.19] and are discussed at Office Workshops Meetings.

2.26. SAFETY CRITICAL WORK

As a general rule Robert Walpole and Partners do not carry out safety critical work. In many cases safety critical work is provided by clients and sub-contractors. However there are specific cases where staff is considered safety critical, when:

- Working on Network Rail Managed Infrastructure (NRMI) all site staff regardless of work role are considered safety critical.
- Working in a confined space as part of the Thames Tideway Tunnel project. Staff are given additional training for work in confined spaces to ensure safe working.

2.27. SENTINEL SCHEME

Sentinel is a safety system in use across the Rail Industry that provides rail workers with a passport to work on the rail infrastructure across the United Kingdom. Utilisation of smartcard technology allows workers' competence and fitness to work to be verified simply and effectively in near real time. Robert Walpole and Partners is registered with Sentinel as Primary Sponsor (no. 93664) and is able to deploy sponsored individuals to undertake work on Network Rail or Transport for London's (TfL) Managed Infrastructure (MI).

Robert Walpole and Partners manages the Sentinel scheme in line with latest revision of Sentinel Scheme Rules and has appointed Sue Leverington as Sentinel Administrator. No sub-sponsors are allowed. For each sponsored individual we complete a Sentinel Sponsorship template that documents the pre-sponsorship checks, lists Contract of Sponsorship articles and defines duties of the individual sentinel cardholder.

Sponsored individual will be provided with training, assessment and mentoring appropriate to their site duties. Competency and training management is undertaken in accordance with the Quality Assurance policy.

All necessary Personal Protective Equipment is to be issued free of charge and inspected at regular intervals.

Monitoring and management of working hours of sponsored individuals is undertaken as per the provisions of the Fatigue Management Policy.

Safety Briefings and discussions are held on a quarterly basis during Office Workshop Meetings. Additionally, relevant safety alerts, Rule Book updates and Sentinel Scheme updates are to be briefed out on a regular basis. Records of such briefings are held on the Health and Safety drive.

Any suspected breaches of the Sentinel Scheme Rules will initially be investigated internally in line with our Investigation and Grievance Process. Depending on the nature of a suspected breach a temporary Take Down of the individual's specific competence in the Sentinel database will be considered whilst the investigation takes place. Following completion of the investigation process, the Primary Sponsor shall make recommendations regarding the individual and any other parties found to be involved. Should recommended actions involve a formal action to Take Down an Individual's competence or to impose a Suspension (Scheme Outcome), the Sentinel Investigations team will be notified so that a Formal Review can take place.

All records relevant to Sentinel sponsorship are to be managed in accordance with our Data Protection policy.

Cancellation of the Contract of Sponsorship is to be notified in writing stating reason for de-sponsoring. This may include but are not limited to:

- individual's request;
- recommendation of an investigation process;
- individual leaving the company.

2.28. STAFF INDUCTIONS

All staff are inducted on commencement as described in the Quality Assurance policy [A44.1].

2.29. MONITORING

The Health and Safety Policy Statement is to be issued to all Staff.

The Health and Safety Policy is to be monitored periodically by the Safety Officer and reviewed at Office Workshop Meetings.

APPENDIX A- RISK REPORTING

Name (optional):		Date:	
Location:			
Risk Identified:	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>		
Suggested Action:	<div></div> <div></div> <div></div> <div></div>		
Action Taken:	<div></div> <div></div> <div></div> <div></div>		
Signature: Safety Officer			
Date:			

APPENDIX B- RISK ASSESSMENT

Hazard	Effect	S	P	R	Control Measures	S	P	R
SITE SPECIFIC RISK ASSESSMENT								

APPENDIX C- FITNESS FOR WORK

[illegible]

APPENDIX D- ACCIDENT REPORT

Person affected/injured:			
Person reporting the incident- if other than injured person:			
Description of incident (e.g. place, time, cause and nature of injury, contributing factors):			
Action taken/recommendations (to be completed by Safety Officer):			
Signature:		Date:	

APPENDIX E- REPORT OF SICKNESS

Name:					Date:	
Period off From:		To:		Number of Days:		
Doctor seen		Hospital visited		Doctor not seen		
Date: Name:			Date: Name:			
Nature of Illness:						
Cumulative days to date:						
Signature:						
Action by Safety Officer:						
Signature:						

APPENDIX F- WEXHAM PARK HOSPITAL DIRECTIONS

Slough SL1 4LH, UK to Wexham Park Hospital - Google Maps

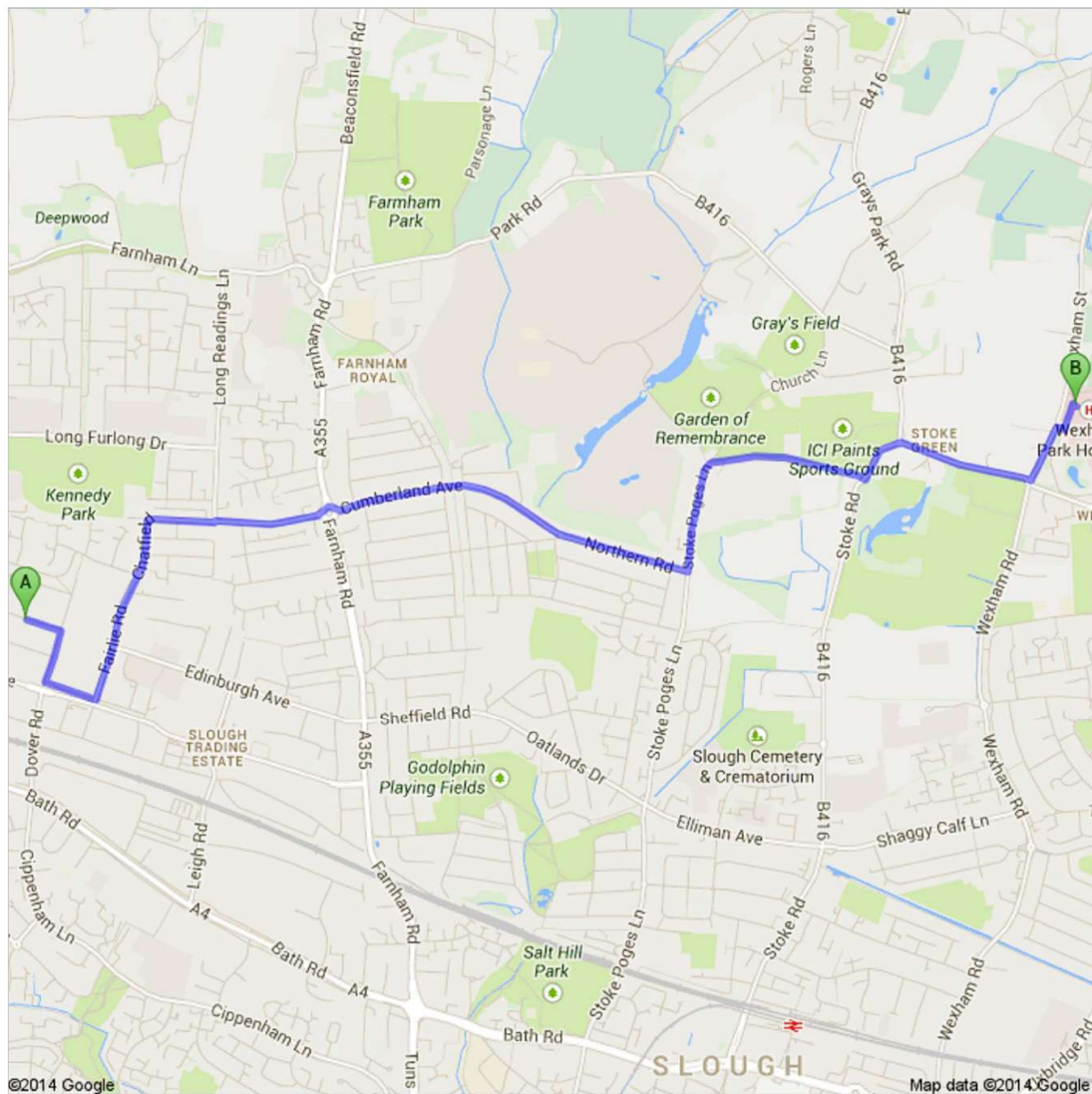
https://maps.google.co.uk/maps?geocode=FeA3EgMdJIP2_yn



Directions to Wexham Park Hospital

Wexham, Slough, Berkshire SL2 4HL, United Kingdom

3.5 mi – about 10 mins



Slough SL1 4LH, UK to Wexham Park Hospital - Google Maps

https://maps.google.co.uk/maps?geocode=FeA3EgMdJIP2_ynBNQ5..

Slough SL1 4LH, UK

	1. Head east on Banbury Ave toward Dundee Rd	go 453 ft total 453 ft
➡	2. Turn right onto Dundee Rd	go 0.1 mi total 0.2 mi
⬅	3. Turn left onto Cambridge Ave	go 0.1 mi total 0.3 mi
⬅	4. Take the 1st left onto Fairlie Rd About 49 secs	go 0.3 mi total 0.7 mi
⬅	5. At the roundabout, take the 2nd exit onto Chatfield	go 0.1 mi total 0.8 mi
➡	6. Turn right onto Northborough Rd Go through 1 roundabout About 1 min	go 0.4 mi total 1.2 mi
⬅	7. At the roundabout, take the 2nd exit onto Cumberland Ave About 58 secs	go 0.4 mi total 1.6 mi
	8. Continue onto Northern Rd Go through 1 roundabout About 2 mins	go 0.6 mi total 2.2 mi
⬅	9. At the roundabout, take the 1st exit onto Stoke Poges Ln	go 0.3 mi total 2.4 mi
↗	10. Slight right onto Fir Tree Ave About 45 secs	go 0.4 mi total 2.8 mi
⬅	11. Turn left onto Stoke Rd/B416	go 0.1 mi total 2.9 mi
⬅	12. At the roundabout, take the 2nd exit onto Stoke Green	go 0.3 mi total 3.3 mi
⬅	13. At the roundabout, take the 1st exit onto Wexham St	go 0.1 mi total 3.4 mi
➡	14. Turn right onto Opecks Close	go 95 ft total 3.4 mi
⬅	15. Turn left	go 338 ft total 3.5 mi
➡	16. Turn right Destination will be on the left	go 52 ft total 3.5 mi



Wexham Park Hospital

Wexham, Slough, Berkshire SL2 4HL, United Kingdom

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Map data ©2014 Google

APPENDIX G - FIRE DRILL REPORT

Name of assessor:			Date & time of drill:	
Location of drill:	10 Banbury Avenue, SL14LH	Time taken to evacuate premises:		
List of participants (including visitors):				
	Comments and required actions*:			