

Criticare UK Ambulance Service



Independent Service Provider

Occupational Health and Safety Management Manual v2.2

Written: February 2013
Author: David Seymour, Director of Operations
Co Author: Mathew Sprake, Operations Manager
Approved: Board of Directors

1. Introduction

Criticare UK Ambulance Service (the Company) has statutory duties under the Health and Safety at Work Act 1974. The Act places specific responsibilities on an employer to provide a safe working environment for not only its staff, but any other individual (including patients) who is affected by the work of the organisation.

The Company is committed to doing all that is reasonably practicable to ensure the health, safety and welfare of all employees, contractors and visitors.

Organisation Description

The Company is a privately owned organisation providing its services from Waterlooville, Hampshire. The services provided are as follows:

- Ambulance Operations
 - Emergency Ambulance
 - High Dependency Ambulance (HDU)
 - Rapid Response Vehicle
 - Patient Transport (PTS)
- First Aid Training
 - HSE Approved First Aid at Work
 - Level 2 Award in Emergency First Aid at Work
 - Level 2 Award in Paediatric First Aid
- Event Medical Cover

Scope of the Policy

The Company meets the requirements of OHSAS 18001:2007 at the following address:

Criticare UK Ambulance Service
Elvaston
Pooks Green
Marchwood
Hampshire
SO40 4WP

The Company will also meet the requirements for any operations conducted at other locations (where these are managed from the above address).

Third Party Certification

Conformance to OHSAS 18001:2007 has been verified by Sovereign Certification Limited utilising an assessment and review process. The Director of Operations has confirmed compliance following this process by completion of a formal written Declaration of Conformance.

2. Organisation – Responsibilities and Authority

The organisation and reporting structure for the management of health and safety is the same as for all other aspects of business.

Board of Directors

Ultimate authority for approval of policies relating to health and safety. Responsibility for reviewing the results of any audit.

Director of Operations

Overall responsibility for ensuring that the strategy and organisation of the Company is defined and implemented to ensure effective implementation of the Occupational Health and Safety Management System.

To liaise with managers and enforcing authorities, as necessary, to ensure that adequate resources are allocated to health and safety in the workplace.

Operations Manager

To monitor safety performance and receive reports from supervisors on all matters relevant to health and safety that cannot be resolved locally.

Financial Controller

To ensure that health and safety matters (including training) receives financial support appropriate to the resources of the Company.

Operational Team Leaders

Will have a good working knowledge of and assist in the effective implementation of the Occupational Health and Safety Management System within their areas.

To respond to issues raised by staff and refer to the Operations Manager if necessary.

Employees and Contractors

Employees and contractors should cooperate fully on all matters relating to health and safety. It is vital that employees pay due regard to undertaking all work activities in a way which is safe and does not present risks to their own safety or that of other persons, including fellow employees.

3. General Requirements

The Occupational Health and Safety Management System is documented within the manual. The documented procedures are listed in Appendix E.

This manual provides confirmation of compliance with all the requirements laid out in OHSAS 18001:2007.

Implementation and Maintenance

It is recognised that documenting the Occupational Health and Safety Management System is only the first step towards fully implementing its requirements. For this reason the Director of Operations will make sure that all new and existing personnel are briefed on the requirements of the system and ensure full compliance.

The effectiveness of the implementation is measured through on-going internal audits and inspection of the Occupational Health and Safety Management System requirements. Where implementation is deemed inadequate then steps are taken to resolve the situation in a timely manner.

The Occupational Health and Safety Management System as a whole will be reviewed during regular Management Review Meetings where the completeness and effectiveness of the system and any steps necessary to improve it are discussed and actioned.

Whenever the Occupational Health and Safety Management System is changed the Director of Operations will ensure that all relevant personnel are aware of the new or revised systems and monitor them to ensure that they are implemented effectively.

4. Occupational Health and Safety Management System

The Company has established this Occupational Health and Safety Management Manual, integrated procedures and forms to enable the implementation of an OHSAS 18001:2007 compatible system.

As an organisation the following steps have been taken to ensure compliance:

- All requirements of OHSAS 18001:2007 have been specified within this document to ensure that all personnel concerned with its operation are aware of the requirements
- The Director of Operations shall take the lead to ensure that the system is fully implemented by all personnel
- Regular Management Review Meetings will be held to review the implementation of the requirements and identify any actions that are required to maintain and improve the system

The scope to which this Occupational Health and Safety Management System will be applied is defined as all operations which it conducts at and from the address stated in Section 1.

Occupational Health and Safety Policy

The Company's Health and Safety at Work Policy is documented in Appendix B and is designed to reflect the health and safety needs and responsibilities of the Company's activities.

In particular the Health and Safety at Work Policy indicates the organisation's commitment to prevent harm (including injury and ill health) to all parties affected by the Company's operations.

The Director of Operations ensures that this policy is made known to all personnel including persons working under the control of the Company and is available to interested parties upon request.

5. Planning

Hazard Identification, Risk Assessment and Determining Controls

The Director of Operations shall ensure that all hazards associated with the activities of the Company are assessed for risk so that precautions can be identified and actioned before work commences. The Risk Assessment Form in Appendix I will be used for this purpose.

The following will be considered for risk assessment:

- Routine and non-routine activities
- Hazards originating externally to the workplace
- Work operations including contractor activities
- Use of infrastructure, equipment and materials
- Whenever change occurs to systems, processes equipment, personnel, materials etc.
- Changes in legislation
- Emergency situations & potential incidents (e.g. fire, accidents)
- Contractors and visitors to the workplace
- The capabilities of personnel including human behaviour

Legal and Other Requirements

The Director of Operations determines all relevant health & safety legislation with reference to the HSE website (<http://www.hse.gov.uk/legislation/index.htm>) and any other service where required.

New and updated legal requirements shall be recorded within the *Health & Safety Legislation* section of the Management Review Meeting to ensure that they are reviewed regularly.

The minutes of the Management Review Meeting are communicated to all personnel and other relevant parties requiring knowledge of the relevant legal requirements.

Objectives and Programme

The Company will set out and review its health & safety objectives and targets on a regular basis within the *Health & Safety Programme* section of the Management Review Meeting. Details of programme dates and responsibilities will be defined. The health & safety objectives will be aimed at relevant functions and levels within the organisation.

When setting objectives and targets, the Company will ensure that they are consistent with the Health and Safety at Work Policy and take into account financial, operational and business requirements as well as technological options.

In order to determine whether or not the objectives and targets are being met they will be measured, where practical, to allow progress to be monitored.

6. Implementation and Operation

Appendix D includes a flowchart showing the operation of the Occupational Health and Safety Management System.

Resources, Roles, Responsibility, Accountability & Authority

The Director of Operations has overall responsibility for the Occupational Health and Safety Management System and will assign personnel to the necessary duties outlined in this manual and make available all necessary resources to ensure that the system is fully implemented.

Roles and responsibilities are defined and communicated through this management manual and any other referenced documentation.

The Director of Operations will communicate with all designated personnel to ensure that they are fully aware of their roles and what is expected.

Competence, Training and Awareness

The Director of Operations ensures that only personnel with suitable qualification and experience are employed on work tasks which have the potential to cause harm. Action will be taken to ensure that training requirements are met and that the effectiveness of training to meet requirements is monitored. All personnel are appraised with respect to competence.

The Director of Operations will ensure that all persons understand the importance of their training and experience and how they can work effectively to ensure safe working. The Director of Operations will also ensure that personnel are aware of the health and safety consequences of their work activities and the benefits of following safe working practices.

It is ensured that records of training, education, qualification and experience are maintained. Copies of all training certificates are held by the Company.

Communications, Participation & Consultation

The Director of Operations will ensure that all personnel including contractors are made aware of issues regarding health and safety. The Director of Operations will also be the person responsible for receiving, recording and responding to any health and safety communications.

The Director of Operations shall ensure participation and representation of the workforce regarding health and safety matters by nominating representatives. The representatives will be particularly involved in the following activities:

- Incident investigation
- Review of health and safety policies, procedures and objectives
- Hazard identification and risk assessment

Where necessary the Director of Operations will discuss with relevant external parties and contractors any pertinent health and safety matters.

Documentation

Documents that are necessary to meet the requirements of this management manual shall be maintained as evidence of compliance.

Documentation specifically retained as evidence is:

- The Health and Safety at Work Policy included within Appendix B
- The objectives recorded and maintained within the minutes of the Management Review Meeting
- The scope of the Occupational Health and Safety Management System is defined within Section 1
- A description of the main elements of the Occupational Health and Safety Management System is set out in Appendix D

Control of Documents

Documents required by this management manual shall be approved for issue and reviewed and updated as necessary. The revision status and page numbering of documents shall be included to ensure that incorrect documents are not inadvertently used. In particular superseded documents shall be marked as such or removed to avoid inadvertent use.

Documents required by this manual shall be updated and re-approved to ensure that they are current.

Pertinent documents (of the current version) will be made available for use and it will be ensured that they are identifiable and legible.

Control of Records

Records will be kept to provide evidence of implementation of the management system. Records will be retained for a minimum period of five years.

Operational Control

The Director of Operations shall ensure that the controls and any necessary operating criteria are stipulated where the risk assessment process has identified precautionary measures to be implemented (see Section 5).

Where necessary to ensure compliance with safe working practices documented procedures will be prepared, implemented and maintained to define the working methods to be employed.

Operational controls shall be specifically considered when considering the purchase of goods, equipment and services.

Emergency Preparedness and Response

The Company has identified the potential emergency situations and incidents pertaining to its business operations and undertaken appropriate risk assessments (see Section 5). Where required they are regularly reviewed and tested.

Where necessary documented procedures have been prepared, implemented and maintained to define the emergency response.

7. Monitoring

The procedures described in this management manual will be monitored to ensure compliance and to identify any areas where improvement is required.

Performance Measurement & Monitoring

The Director of Operations has appointed managers to undertake routine inspections of the workplace and the operational activities of the Company. Managers will undertake regular inspections and report on performance and effectiveness of the controls using an Audit / Inspection Report (Appendix H). Any findings that warrant corrective action shall be recorded on a Non-

conformance Report Form (Appendix G) which is used to progress the corrective action to a conclusion.

Managers will collect data related to performance and report this to the Director of Operations. Performance measures include accidents, incidents, near misses and other performance measures. These measures are reviewed during the Management Review Meeting and recorded within the minutes of the meeting.

Where calibrated equipment is used to measure performance it will be ensured that it has a current calibration certificate.

Incident Investigation

All personnel are required to record all incidents on a Non-conformance Report (Appendix G) which shall be passed to a manager for processing. Managers will define a suitable corrective action and record it on the form. The form will be used to monitor progress until the Non-conformance Report can be signed off as closed.

The following (although not limited to) are to be considered incidents for the purposes of reporting:

- Accident
- Near misses
- Any situation that may lead to harm which is not subject to a current risk assessment

In order to achieve continual improvement, the causes of health and safety incidents that become known will be investigated in a timely manner and action taken to avoid any recurrence.

Non-conformity, Corrective Action & Preventative Action

All incidents, near misses, external party issues, results of inspections and results of audits are recorded on a Non-conformance Report. Managers shall take responsibility for ensuring that a corrective action is added to the form and communicated to all relevant personnel. Managers will ensure that the corrective action takes account of the root cause of the non-conformance.

The managers will progress the corrective action to a conclusion and ensure that the Non-conformance Report is effectively closed and review its effectiveness. Where necessary, managers will ensure that the issue is subjected to a revised risk assessment.

The Company understands that it is preferable and more effective to prevent health and safety problems occurring. Acting in a proactive way is preferable to acting reactively. The Director of Operations in consultation with other parties will therefore take opportunities to reflect on situations and take preventative action wherever possible. All preventative action will be recorded on a Non-conformance Report for implementation of a corrective action.

Internal Audit

An internal audit programme is devised on an annual basis ensuring that all parts of the management system (as defined within this management manual) are reviewed to ensure that they continue to meet the requirements of OHSAS 18001:2007.

Staff undertaking internal audits are appropriately trained and capable. The results of any audits are recorded on an Audit / Inspection Form (Appendix H) together with (if required) a Non-conformance Report (Appendix G).

8. Management Review

Management Review Meetings are undertaken to the requirements of OHSAS 18001:2007 and all pertinent aspects are reviewed and actions taken as required.

The meeting is undertaken at least every six months in accordance with the agenda outlined in Appendix F. The meeting is attended by the Director of Operations, key personnel and any other interested parties.

The Management Review Meeting is used as the pivotal means of ensuring that the Company's systems are fully implemented and effective.

Appendix A

Definitions

Term	Meaning
<i>Acceptable Risk</i>	<i>Risk that has been reduced to a level that can be tolerated</i>
<i>Accident</i>	<i>An incident that has given rise to harm</i>
<i>Controlled Copy</i>	<i>The issue of a document that will be updated whenever it is revised</i>
<i>Controlled Issue</i>	<i>The issue of a document where proof of receipt is sought</i>
<i>Corrective Action</i>	<i>Action to eliminate the cause of a problem or issue</i>
<i>Hazard</i>	<i>Source, situation or act with potential for harm to persons</i>
<i>Incident</i>	<i>Events which can lead to harm</i>
<i>Management Manual</i>	<i>Documented health & safety systems and procedures</i>
<i>Management System</i>	<i>The defined methods, practices and organisation to meet the health & safety requirements</i>
<i>Preventative Action</i>	<i>Action to eliminate the cause of a potential problem or issue</i>
<i>Risk</i>	<i>Combination of the likelihood and severity of an event</i>
<i>Risk Assessment</i>	<i>Process of evaluating risk</i>
<i>The Standard</i>	<i>OHSAS 18001:2007</i>

The words *shall*, *must* and *will* denote a mandatory requirement and *should* denotes a recommendation. The word *may* denotes permission and is neither a recommendation nor a requirement.

Appendix B

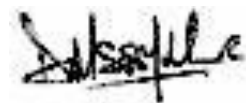
Health and Safety at Work Policy

Criticare UK Ambulance Service (the Company) has statutory duties under the Health and Safety at Work Act 1974. The Act places specific responsibilities on an employer to provide a safe working environment for not only its staff, but any other individual (including patients) who is affected by the work of the organisation.

The Company is committed to doing all that is reasonably practicable to ensure the health, safety and welfare of all employees, contractors and visitors.

The Company will fulfil its responsibilities by taking steps to work in accordance with all relevant health and safety legislation, approved codes of practice and good working practices. This will be achieved by:

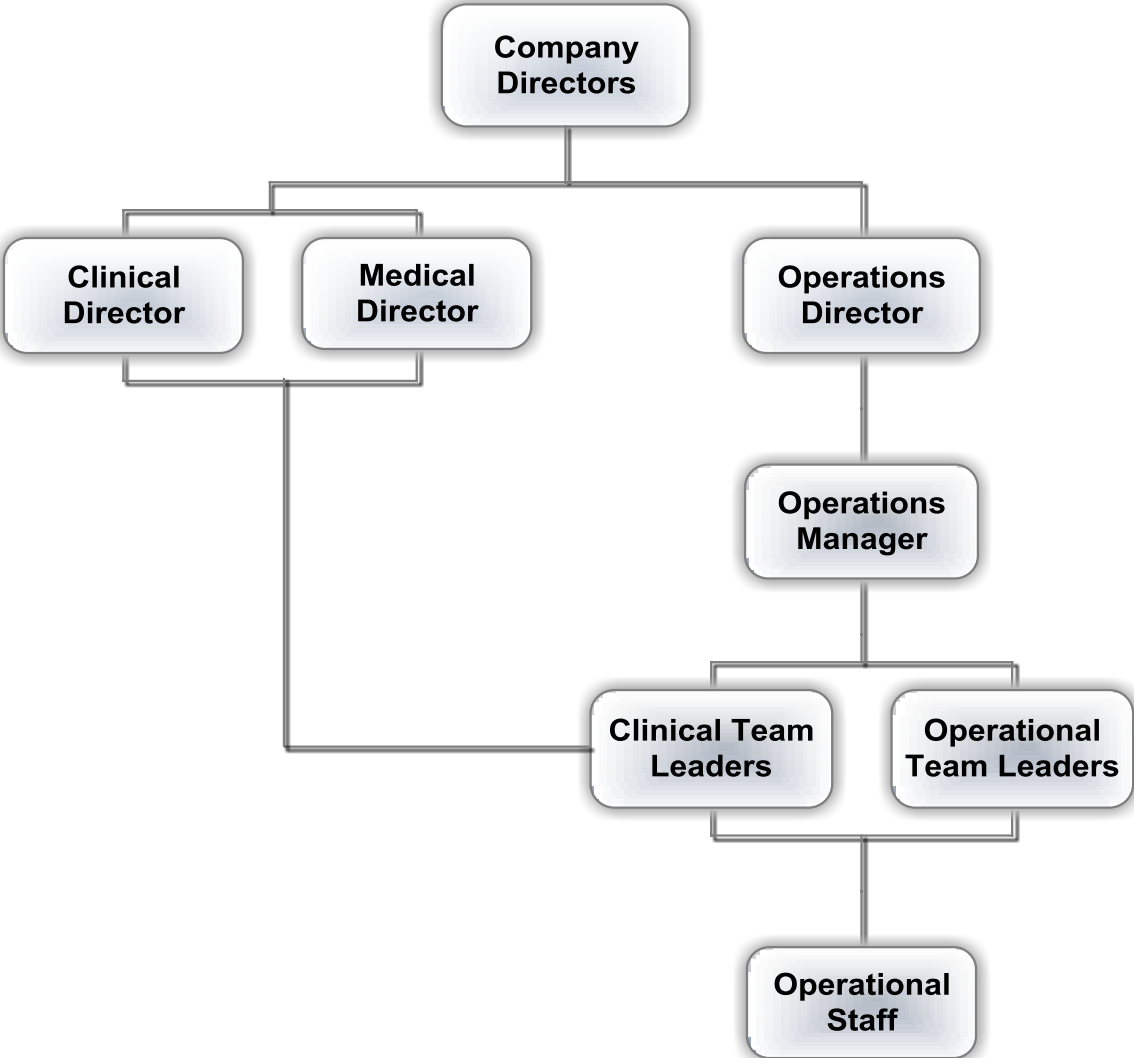
- *Ensuring that employees know of the potential hazards connected with the various activities undertaken by the Company and awareness of how to avoid the associated risks*
- *Providing comprehensive information, instruction, training and supervision to enable employees to perform their work in the safest and most efficient manner*
- *Promoting the maximum individual attention and effort on the part of employees at all times to avoid and prevent accidents*
- *Making adequate provision for employees to raise issues and participate in the development of safety measures*
- *Providing all that is necessary in respect of first aid, fire safety, and personal protective equipment etc.*
- *Ensuring incidents are thoroughly investigated and reported through or to the appropriate authority*
- *Continually looking to improve management systems*



*David Seymour
Director of Operations*

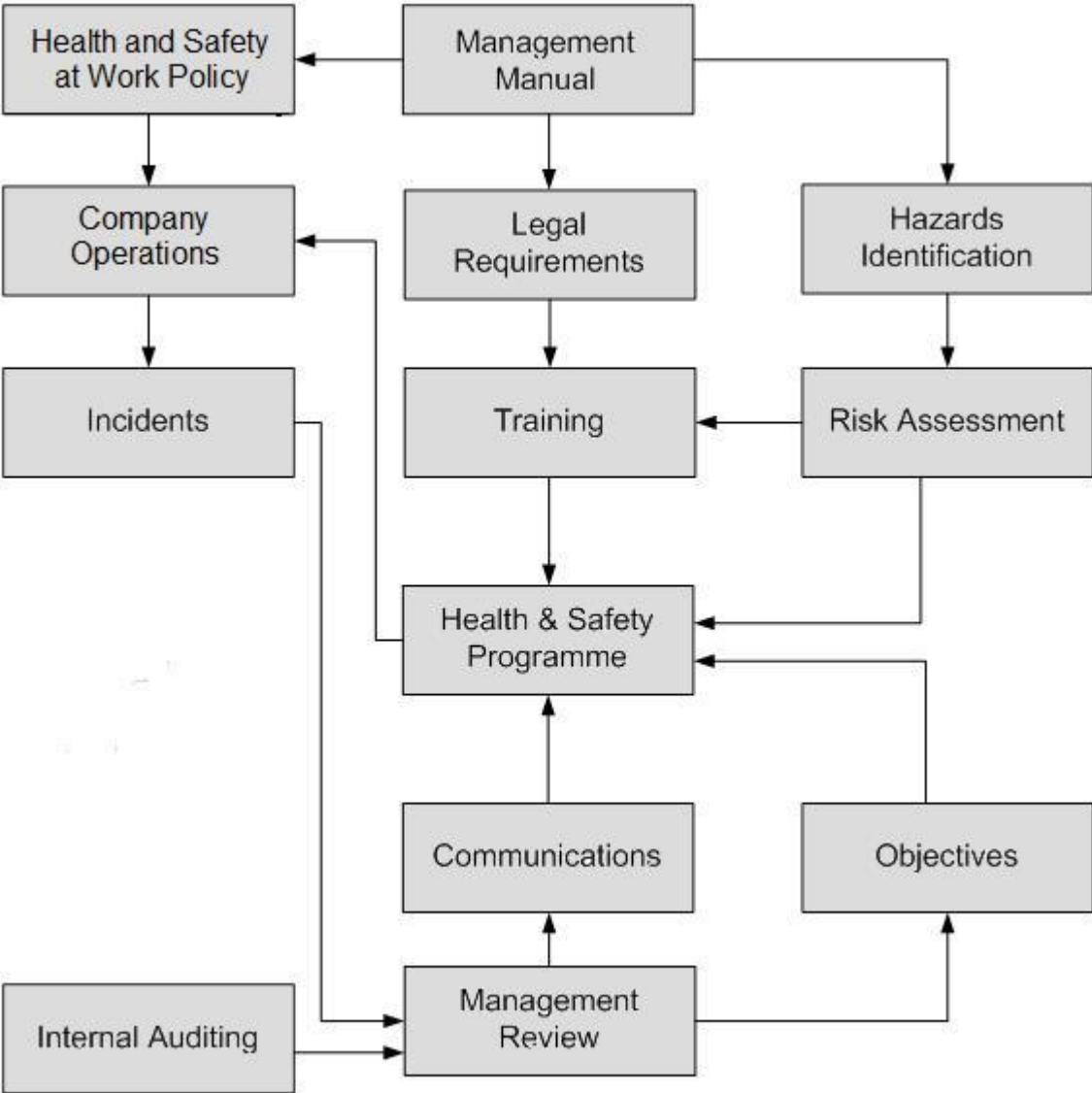
Appendix C

Organisation Chart



Appendix D

Occupational Health and Safety Management Processes



Appendix E

Index of Management Procedures

Title	Reference
<i>Hazard Identification, Risk Assessment & Controls</i>	<i>Section 5 (page 5-6)</i>
<i>Legal & Other Requirements</i>	<i>Section 5 (page 6)</i>
<i>Training & Awareness</i>	<i>Section 6 (page 7)</i>
<i>Communications</i>	<i>Section 6 (page 8)</i>
<i>Participation & Consultation</i>	<i>Section 6 (page 8)</i>
<i>Control of Documents</i>	<i>Section 6 (page 8-9)</i>
<i>Control of Records</i>	<i>Section 6 (page 9)</i>
<i>Emergency Preparedness & Response</i>	<i>Section 6 (page 9)</i>
<i>Performance Measurement & Monitoring</i>	<i>Section 7 (page 9-10)</i>
<i>Incident Investigation</i>	<i>Section 7 (page 10)</i>
<i>Non-conformity, Corrective Action & Preventative Action</i>	<i>Section 7 (page 10-11)</i>
<i>Internal Audit</i>	<i>Section 7 (page 11)</i>
<i>Management Review</i>	<i>Section 8 (page 11)</i>

Appendix F

Management Review Meeting – Health and Safety

Agenda	Details to be recorded
<i>Meeting details</i>	<i>Date, location, list of persons in attendance</i>
<i>Review of previous meeting</i>	<i>Progress and/or closure of actions from previous meeting(s)</i>
<i>Internal audit</i>	<i>Results and analysis of any audits</i>
<i>Communications and Complaints</i>	<i>Actions already taken and actions to be taken</i>
<i>Performance</i>	<i>Details of performance indicators including areas for improvement/action</i>
<i>Policies, procedures and systems</i>	<i>Required amendments/update and reasons</i>
<i>Corrective actions</i>	<i>Required corrective actions in response to incidents</i>
<i>Preventative actions</i>	<i>Preventative actions and the reasons for their suggestion</i>
<i>Legislation and other requirements</i>	<i>New or amended legislation or best practice and required actions to ensure compliance</i>
<i>Resources</i>	<i>Changes to be made to current resource levels</i>
<i>Minutes of meeting</i>	<i>Identified objectives, specific actions, target completion time and responsibility for action</i>
<i>Next meeting</i>	<i>Planned date, location and any specific issues for discussion/review</i>

Appendix G

Non-conformance Report Form

NCR No:	Date:	Audit / Inspection No: (where relevant)
<p>Description of Non-conformance: Raised due to: (near miss / accident / audit / inspection / external)</p> <p>Reported by:</p>		
<p>Remedial Action: (to fix immediate problem)</p> <p>Action by: _____ To be completed by: _____ (date)</p>		
<p>Action to Prevent Recurrence: (the corrective action)</p> <p>Action by: _____ To be completed by: _____ (date)</p>		
<p>Corrective Action Completed:</p> <p>Director of Operations _____ (signed) _____ (date)</p>		

Appendix H

Audit / Inspection Report Form

Audit / Inspection No:	Date:	NCR No: (where relevant)
Scope of Audit / Inspection: (what was audited)		
Auditor / Inspector: (who did the audit / inspection)		
Auditees / Personnel: (who was audited / inspected)		
Summary of Audit / Inspection Findings: (what was discovered during the audit / inspection)		
Observations / Recommendations: (is there anything that should be considered that was not included on a Non-conformance Report?)		
Audit / Inspection Completed: Auditor / Inspector (signed) (date)		

Appendix I

Risk Assessment Form

Risk Assessment No:	Routine: (normal precautions)		Non Routine: (add special precautions)		
Hazard Identified:					
Relevant Legislation:					
Affected Personnel / Others:					
Identify Risks: (what could happen)					
Risk Rating:	<i>Very Low</i>	<i>Low</i>	<i>Normal</i>	<i>High</i>	<i>Very High</i>
Normal Precautions: (what systems, safety equipment or other precautions are in place to protect persons?)					
Special Precautions: (what additional precautions are required to properly protect persons?)					
<i>Note: Consideration shall be given to reducing risks according to the following hierarchy:</i> 1) <i>Elimination;</i> 2) <i>Substitution;</i> 3) <i>Engineering Controls;</i> 4) <i>Signage / Warnings / Administrative Controls;</i> 5) <i>Personal Protective Equipment.</i>					
Risk Assessment Completed:					
Assessor		(signed)		(date)	