

Your assessment criteria:

P2 Outline how legislation, policies and procedures relating to health, safety and security influence health and social care settings

Health and safety law affects many practices and procedures in health and social care settings.

The health and safety responsibilities of employers and employees result from the wide range of legislation that governs health and safety in all workplaces. A number of laws also exist covering health and safety issues that are specific to care settings. Legislation is necessary to ensure that safe working practices are followed when caring for individuals, to protect both service users and care practitioners.



Key terms

Legislation: written laws made by an official law-making body such as Parliament

Statute: a form of written law also known as an Act of Parliament



The Health and Safety at Work Act (1974)

The Health and Safety at Work Act (1974) is the main piece of health and safety law in the UK. It affects both employers and employees. Under this statute, care practitioners share responsibility for health and safety in care settings with the care organisation that employs them. The care organisation is responsible for providing:

- · a safe and secure work environment
- · safe equipment
- information and training about health, safety and security.

In short, care organisations must provide a work environment that meets expected health and safety standards. They must make it possible for care practitioners to work safely. Care practitioners in turn have a responsibility to:

- · work safely within the care setting
- monitor their work environment for health and safety problems that may develop
- report and respond appropriately to any health and safety risks.

To meet their legal responsibilities, care organisations must:

- · carry out health and safety risk assessments
- develop health and safety procedures, such as fire evacuation procedures
- provide health and safety equipment, such as fire extinguishers, fire blankets and first aid boxes
- ensure that care settings have safety features, such as smoke alarms, fire exits and security fixtures (electronic pads on doors and window guards, for example)
- train their employees to follow health and safety policies and procedures, and to use health and safety equipment and safety features appropriately
- provide a range of health and safety information and warning signs to alert people to safety features such as fire exits and first aid equipment, and to warn them about prohibited areas and activities (no smoking, for example).

Care practitioners carry out their legal responsibilities by:

- developing an awareness of health and safety law
- · following health and safety guidelines, policies and procedures
- monitoring the care environment for health and safety hazards
- where it is safe to do so, dealing directly with hazards that present a risk
- reporting health and safety hazards or the failure of safety systems and procedures to a supervisor or manager



Key terms

Policy: a written document that sets out an organisation's approach towards a particular issue

Procedure: a document that sets out in detail how a particular issue should be dealt with or how particular tasks should be carried out



Reflect

Have you ever received any health and safety training relating to care work? How did you find out about health and safety procedures at your placement setting?

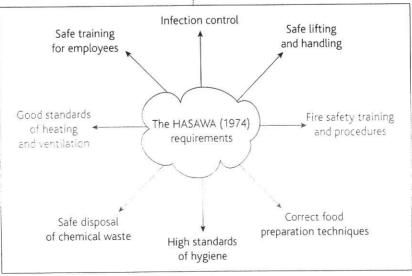


Figure 3.8 Requirements of the Health and Safety at Work Act (1974).

P2 Other health and safety legislation

Although the Health and Safety at Work Act (1974) enforces minimum standards of workplace health and safety and establishes a framework for safe working, in practice a range of regulations that apply to care settings extend and supplement this Act (see Figure 3.9).

Figure 3.9 Health and safety laws and regulations.

Regulations	Effects
Food Safety Act (1990)	This Act states that people working with food must practise good food hygiene in the workplace. Food must be safely stored and prepared, and must not be 'injurious to health'. Local authority environmental health officers enforce this law.
Food Safety (General Food Hygiene) Regulations (1995)	These regulations require people who prepare food in a care setting to identify possible food hygiene risks and to put controls in place that ensure any risk is reduced. The Food Safety Regulations also specify how premises that provide food should be equipped and organised.
The Manual Handling Operations Regulations (1992) (amended 2002)	These regulations cover all manual handling activities, such as lifting, lowering, pushing, pulling or carrying objects or people. A large proportion of workplace injuries are due to poor manual handling skills. Employers have a duty to assess the risks surrounding any activity that involves manual handling. They must put in place measures to reduce or avoid the risk. Employees must follow manual handling procedures and co-operate on all manual handling issues.
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (1995) (RIDDOR)	These require employers to notify a range of occupational injuries, diseases and dangerous events to the Health and Safety Executive or other relevant authorities.
Data Protection Act (1998)	This Act protects the individual's right to confidentiality of both paper and electronic records. An individual has the right to: • know what information is held about them and to correct this if it is inaccurate • refuse to provide information • have up-to-date and accurate data held

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Regulations: legal rules that are created using the authority of a statute



Discuss

Do any of these health and safety laws affect the way people practise in your placement setting? With a couple of class colleagues, discuss the different ways in which they impact on the way care is provided where you work.

	 have data removed when it is no longer necessary for an organisation to hold it
	 have the confidentiality of their information protected.
nagement of Health I Safety at Work gulations (1999)	This places a responsibility on employers to train staff in relation to health and safety legislation, fire prevention, and moving and handling issues. Employers must also carry out risk assessments, remove or reduce any health and safety hazards that are identified and write safe working procedures based on their risk assessments.
e Homes gulations (2001)	These regulations aim to establish standards of good practice in care homes. Care homes must be registered and inspected by the Care Quality Commission (CQC). The manager of a home must have appropriate leadership and management qualifications and is responsible for health and safety at the home. This includes carrying out risk assessments and informing the CQC of any event that endangers the health, safety or wellbeing of people on the premises.
ntrol of Substances zardous to Health gulations (2002) DSHH)	These require employers to assess the risks from hazardous substances and take appropriate precautions to ensure that hazardous substances are correctly stored and used.
il Contingencies Act (04)	The Act gives guidance on the responsibilities of public services in dealing with major public emergencies and accident hazards. Public services need to anticipate, prepare for, prevent, respond to and recover from major emergencies. Emergencies include extreme weather, terrorist attacks, industrial or other major accidents and pandemics (e.g. flu).
e Minimum indards	The Care Standards Act (2000) established National Minimum Standards for care services in 2003. Different standards exist for different types of care setting, but all have a health and safety focus. Each care setting should:
	carry out a risk assessment on each individual service user
	have relevant procedures and policies about security, abuse and neglect, bullying, and dealing with complaints, for example
	· carry out health and safety training of staff
	 have adequate security measures in place.



Key terms

Care Quality Commission: the independent organisation that inspects and regulates all health and social care services in England



Investigate

Go to the website of the Care Quality Commission (www.cqc.org.uk) and find a report on a health or social care organisation near to where you live. What does the report say about the standard of health and safety in the organisation?

P2 Legislation for safeguarding

The recent development of a legal framework around safaguarding issues is designed to raise staff awareness of this important issue and to improve protection for vulnerable people. Procedures are now in place to identify abusers and sex offenders and, where appropriate, to bar them from working with children or vulnerable adults, whether in a paid post or as a volunteer.

The Independent Safeguarding Authority's (ISA) vetting and barring scheme aims to prevent unsuitable people from working with children and vulnerable adults. To achieve this, everyone who applies for such a post must be checked by the Criminal Records Bureau (CRB), Disclosure Scotland or Access NI. Employers are responsible for ensuring checks are undertaken. People who work closely with children and vulnerable people require enhanced disclosure checks. This is a more detailed record check that identifies any previous cautions or offences (even if they are 'spent'). A 'barred' person who applies to work with or who is found to be working with children or vulnerable adults is committing a criminal offence and will be prosecuted. Employers who knowingly allow a 'barred' person access to vulnerable people are also committing a crime.

Factors affecting safeguarding

The legal framework surrounding health and social care influences a variety of issues in care organisations including:

- staff selection and staffing numbers, particularly the minimum staff-patient ratios needed to achieve acceptable standards of care
- inspection of premises by the Care Quality Commission (CQC)
- · care practices.

Using legislation, policies and procedures to promote safety

A care organisation's policies and procedures should incorporate the key points of health and safety law. This means that a care practitioner will be able to put health and safety laws into practice simply by Your assessment criteria

- P2 Outline how legislation policies and procedures relating to health, safety and security influence health and social care settings
- M1 Describe how health and safety legislation, policies ar procedures promote the safof individuals in a health or social care setting



Safeguarding: the process of protecting children and vulnerable adults from abuse or neglect that mimpair their health, development or wellbeing

following their employer's policies and procedures. Care organisations need to develop a range of policies to ensure all aspects of the legal framework of care are covered. These will include policies on:

- health and safety
- safeguarding
- reporting of accidents
- · waste disposal
- fire prevention and evacuation procedures
- security
- cleaning
- · food safety
- · dispensing and storing medicines
- · lone working.

Implementation of health and safety-related policies and procedures should be monitored to check that employees are actually using them in practice. Employees are under a contractual obligation to implement their employers' policies and procedures and may face disciplinary action and possible dismissal for not doing so.

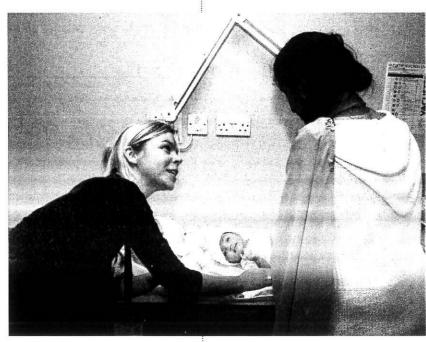


Case study

Christina is a health visitor based in a primary care health centre in a large city. She carries out checks on babies to ensure they are safe and developing normally. Christina also runs a number of child health clinics where she sees children up to the age of 8 years old. Christina works in an integrated care team with GPs,

social workers, school nurses and staff from housing services, the police and the local children's centre.

- 1. How is Christina's work related to safeguarding?
- 2. What kind of safeguarding problems or issues relating to babies and younger children is Christina likely to be looking out
- 3. Cive two reasons why it is better for Christina to work in a team of professionals who all have an interest in safeguarding children and vulnerable people.



P2 Everyone has a role

Health, safety and security in a care setting are the responsibility of everyone involved in care provision, either directly or indirectly. The roles and responsibilities of the individuals and organisations involved in or affected by care provision are summarised in Figure 3.10.

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Figure 3.10 Different roles and responsibilities in care provision.

Role/responsibility
Legally, a care organisation takes on the employer's responsibilities for health and safety at work. In practice, managers are employed to oversee this aspect of the organisation's function. An employer's policies, procedures and practices are inspected and prosecution may result in the event of a breach of health and safety law. To be cleared of breaking the law, employers have to be able to show that suitable health, safety and security procedures were in place and were being followed correctly.
Many care organisations delegate responsibility for health, safety and security issues to people who are specialist health and safety representatives. Ultimately, the care organisation is responsible for any breach of health and safety law but staff working as health and safety representatives undertake the day-to-day wor needed to implement and monitor the organisation's policies and procedures. Health and safety representatives need to be well trained, experienced and committed to high standards to do this effectively.
All employees have to participate in health and safety training during their induction period and on an ongoing basis. Common induction standards cover: • moving and handling • fire safety • basic first aid • infection control • preventing abuse. An employee has a responsibility to always consider the health and safety of colleagues and the people they provide care for. In addition they must: • follow organisational safety and security procedures • make risk assessments and always minimise risks • report incidents and emergencies, and maintain adequate records • act within limits of their own ability and competence

Users of services	People receiving care are expected to behave in a responsible way and must not endanger the health, safety or security of others.
Visitors, relatives and volunteers	People who are visiting a care setting, or who have a volunteer role in a setting, are expected to follow all health and safety procedures, behave in a responsible way and be vigilant about possible health, safety and security hazards.
NHS Trust (see page 291)	National Health Service Trusts have a wide range of health and safety obligations. These range from fire safety and infection control, to protecting people within health care settings from violence and abuse.
Local authority (see page 289)	Local authorities provide advice and guidance to people employed in council-run and owned settings. They also employ community-based staff who provide health and safety advice to people receiving care at home. Many local authorities also provide aids and adaptations to people living in council-owned homes to improve and promote their health and safety.



Basic first aid training forms part of the induction of most health and social care workers.

What do you know?

- 1. Identify the main piece of legislation covering health and safety in care settings.
- 2. Describe three ways in which care practitioners can ensure they meet their responsibilities under health and safety law.
- 3. What do COSHH and RIDDOR stand for and how does each affect care practice?
- 4. Explaining a vulnerable people within the care system are protected
- 5. Name four policies relating to health and safety that care organisations are expected to produce.
- 6. Explain the roles and responsibilities of employers and employees in care settings.