



### News

#### **Potter Firm Told To Improve Safety**

A watchdog has told the bosses of a production company currently making the new Harry Potter film to improve safety provision after a stuntman was seriously injured in an accident.

David Holmes, a stunt double for the film's star Daniel Radcliffe, hurt his back in the incident at Leavesden Studios, near Watford in Hertfordshire, on January 28.

An investigation by the Health and Safety Executive saw the set closed for more than a week.

The watchdog has now issued an improvement notice, meaning that DDD Co - set up for the production of the film for which Mr Holmes was practicing stunts - has until the end of June to make improvements.

A HSE spokesman said: "The investigation is still ongoing. As a remedial act we have issued an improvement notice to the company asking them to improve the way they do stunt rehearsals using wires.

"They have got two months to look at that."

It is understood that Mr Holmes, who is originally from Romford but lives in Leigh-on-Sea, Essex, was rehearsing an aerial sequence when he was injured.

He was taken to the Royal National Orthopaedic Hospital, in Stanmore, North West London, which counts treatment for acute spinal injuries among its specialities.

#### **Directors Should Engage Fully in Health and Safety Leadership**

The Health and Safety Executive's (HSE) Business Involvement Unit has published Operational Minute (OM) 2009/05 to reinforce to Field Operations Directorate (FOD) Inspectors the importance of motivating directors and board members (or their equivalents, governors, trustees etc) to engage fully in health and safety matters within their organisations. This is in recognition that effective director leadership on such matters can deliver significant improvements in health and safety performance. It also represents one of the goals enshrined in the UK's new health and safety strategy.

#### ***Key messages***

This OM sets out three key messages for inspectors:

- director level leadership is critical to an organisation's health and safety performance
- the effective management of health and safety performance, combined with sensible risk management, delivers 'bottom line' business benefits
- the Institute of Directors (IoD) and HSE have produced guidance on leading health and safety at work (INDG417 or INDG417W/E for a dual Welsh/English version).



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### ***Actions***

Inspectors are encouraged to:

- engage with directors and board members in all sectors and in all sizes of organisation: however, priority should be given to organisations where day-to-day oversight of health and safety matters has been delegated below director/board level
- explore during planned inspections how effectively directors are leading on health and safety
- examine the contribution of directors etc, to failures in good health and safety practice leading to incidents/complaints, as part of any reactive inspection
- take enforcement action against directors etc, where appropriate, in accordance with the advice given in OC 130/8 (Prosecuting Individuals).

### ***Conclusion***

The effective management of health and safety is inextricably linked with business success and those with a strategic role in their organisation have the potential to demonstrate strong leadership on this issue.

Director leadership is critical to delivering health and safety performance improvements, which will ultimately deliver cost savings. An evaluation of director leadership by FOD inspectors will be a useful exercise as part of any assessment of how organisations execute their health and safety duties.

## **Prosecutions**

### **Company Fined after Worker Falls through Roof**

The Health and Safety Executive (HSE) is issuing yet another reminder to employers to ensure that full safety measures are put in place to protect employees and contractors working at height. The latest warning follows a prosecution case in which a construction company was fined after a self-employed worker fell through a fragile roof whilst in the process of replacing leaking roof lights.

The case concerned an incident at Lambourn, Berkshire, in September 2007, in which a worker suffered a number of injuries after falling 5.5 metres through a fragile single skin asbestos roof. The victim had been working on the roof, but there were no crawling boards, safety nets or crash desks in place. His injuries included broken ribs, and damage to his pelvis, vertebrae and lung. He was unable to return to work for over a year.

At Reading Magistrates' Court, Keen Construction Ltd, based at Downton, near Salisbury, pleaded guilty to breaching regulation 9(2) of the Work at Height Regulations 2005. This regulation requires that, where work has to be undertaken on or close to a fragile surface, the employer must, so far as is reasonably practicable:

- ensure that suitable and sufficient platforms, coverings, guard rails or similar means of support or protection are provided and used
- where the risk falling remains despite the precautions taken above, take further suitable and sufficient measures to minimise the distance and consequences of a fall.

HSE Inspector, Meurig Rees Williams, commented on the severity of the incident and added that the worker was lucky to be alive after falling 5.5 metres. He made the point that guidance on undertaking this type of work at height safely was freely available on the HSE and industry websites.

At Reading Crown Court, Keen Construction Ltd was fined £6,600 and ordered to pay £3,625 costs.



### Employers and Developers Warned to Control Risks at Refurbishment Sites

The Health and Safety Executive (HSE) has warned construction employers and developers of the need to control risks and protect the safety of workers and the public at refurbishment sites. This warning comes after a Court case in which a developer was prosecuted following the collapse of a building which was being refurbished.

The prosecution concerned an incident at 235a Radford Road, Nottingham on 11 January 2007, where a Victorian mill was being converted into four residential units. The building had sustained fire damage and had become derelict. Its collapse whilst refurbishment work was being undertaken almost had tragic consequences when one of the workers on site only just managed to get out of the building in time.

At Nottingham Crown Court, the director of the company involved in the development, Bukan Singh Hothi, of Glen Parva, Leicester, pleaded guilty to a breach of section 3(1) of the Health and Safety at Work, etc. Act 1974. The breach concerned his failure to ensure the health and safety of persons not in his employment. He was fined £10,000 and ordered to pay costs amounting to £7,500.

HSE Inspector Cliff Seymour commented that the case highlighted the necessity of assessing the risks and planning work properly in order to ensure that workers and the public are not exposed to danger. In this case, the building that collapsed was situated next to an infant school in a residential area. These factors should have been taken into account in planning the work.

The HSE has launched an awareness campaign aimed at small-scale developers like Mr Hothi. A safety blitz, which targeted refurbishment projects, was also carried out earlier this year.

### Warning after Worker Loses Finger

Firms are being warned to make sure that proper safeguards are in place around dangerous machinery after a worker severed his little finger on a pedestal drill.

The Health and Safety Executive brought charges against Sunrise Medical under the Provision and Use of Work Equipment Regulations over the incident at its site in Wollaston, in Stourbridge.

The employee was using a de-burring tool on one of the company's pedestal drills when his cotton glove got caught in the unguarded rotating tool. As a result, the man's finger was torn off by the machinery.

The HSE found that Sunrise Medical failed to ensure that effective measures were taken in order to prevent access to dangerous parts of machinery during the de-burring task.

The company was fined £500 and ordered to pay costs of £2,290 at Halesowen Magistrates' Court after pleading guilty to breaching health and safety legislation.

HSE investigating inspector Jenny Skeldon said: "The dangers of using machines without suitable safeguards are well known and long-established.

"Even in companies that generally have a responsible attitude to health and safety, serious injuries such as amputation can easily result when limbs, or parts of limbs, become entangled in rotating parts of machinery."



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### Guidance

#### Controlling Legionella in Nursing and Residential Care Homes

Legionellosis is the umbrella term for a group of pneumonia-like illnesses, including Legionnaire's Disease, which can cause serious illness and even death in elderly and infirm/immune-compromised patients. Infection is caused by breathing in small droplets of water which contain the bacteria. Legionella bacteria are common in natural and artificial water systems and are capable of surviving at low temperatures, with their optimum growth temperature being 20-45°C. They are killed at higher temperatures and this is the main method of control in domestic water systems, however higher temperatures bring the risk of scalding, so this must also be taken into account.

The Health and Safety Executive (HSE) has reprinted and redesigned its guidance on the control of legionella in nursing and residential care homes – INDG253(rev1)(02/09).

Employers have a general duty under the Health and Safety at Work etc. Act 1974 to consider the risks from legionella to people in their care. In addition to this, the Control of Substances Hazardous to Health Regulations 2002 (as amended) requires that risks to employees and patients from bacteria such as legionella should be identified and adequately assessed and controlled.

In controlling the risk of legionella, the design of a hot water system is a crucial feature. The system should be designed in such a way as to make conditions as unattractive as possible for the growth of legionella. Features such as making the pipework as short and direct as possible, ensuring adequate insulation of pipework and tanks, use materials that do not encourage growth of legionella and protecting against contamination, for example by fitting lids to storage tanks.

In addition to the design of the system, its operation and maintenance are also critical in the control of legionella. Operating the system at temperatures which are unfavourable to legionella is advised, such as storing hot water above 60°C and distributing it at over 50°C. Where hot water is not necessary, other controls for legionella may be more appropriate eg UV light, ozone, thermal disinfection etc, thus avoiding the risk of scalding. Water systems should be routinely checked and inspected by a competent person and the risk assessment reviewed regularly.

The related topic of scalding is also detailed in the HSE leaflet, as an important issue in terms of the control of legionella, particularly in nursing and residential care homes. Scalding should be included in the health and safety risk assessment of such premises, and thermostatic control valves are recommended.



### Gas Safety - Landlord Duties

Poorly maintained and incorrectly installed gas appliances are estimated to cause around 14 deaths of carbon monoxide poisoning every year in the UK. The Gas Safety (Installation and Use) Regulations 1998 (the Regulations) detail statutory requirements concerning the installation, maintenance and use of gas appliances, fittings and flues in domestic and certain commercial premises.

The Health and Safety Executive (HSE) has revised and reissued guidance leaflet INDG285 (rev 2) (03/09) which advises landlords on their duties under the Regulations. Failure to comply may result in prosecution and a fine of up to £20,000 and/or imprisonment.

The legislation applies duties in relation to appliances and flues that are provided for tenants' use in premises occupied for residential purposes under either a licence, a tenancy agreement for a set term, or a lease as defined in the Regulations (basically, any lease under seven years is covered).

Landlords have a general duty under the Health and Safety at Work etc. Act 1974 to ensure the health, safety and welfare of employees and also anyone affected by their undertakings – including tenants. As well as this overarching duty, Gas Safety Regulations impose specific duties on landlords relating to gas safety:

- all gas fittings and flues require to be maintained in a safe condition. Servicing should be carried out according to the manufacturer's recommendations, or at least annually, unless advised otherwise by a Gas Safe registered engineer. Appliances owned by the tenants themselves are not covered by the Regulations
- a safety check of flues/appliances should be carried out annually. Prior to any new lease the landlord must ensure these checks have been carried out within one year before the start of the lease date unless the appliances were installed less than a year previously, in which case they should be checked within 12 months of their installation date
- a Gas Safe registered engineer should be engaged to do all installation, maintenance and safety checks
- records of safety checks should be kept for 2 years
- a copy of the safety checks should be issued to existing tenants within 28 days of the check being carried out, or to any new tenant prior to them moving in
- even in circumstances where a managing agent is employed to look after the property, the ultimate responsibility for ensuring compliance with the Regulations still lies with the landlord. The management contract should identify who is responsible for making arrangements for maintenance and safety checks and record keeping
- where a property is sub-let the 'original' landlord may retain duties which overlap with the person sub-letting. In such cases, close cooperation and clear allocation of responsibilities requires to be set up
- the tenant-landlord contract should allow for access to the property for gas checks
- where an appliance fails the safety check, records should be kept of this, along with details of remedial works undertaken. It is an offence to use/allow the use of gas appliances you know to be unsafe.



### **First-aid Training and Qualifications - a Guide for Training Organisations**

The Health and Safety Executive (HSE) has published a guide for training organisations seeking to run first-aid training qualifications in accordance with the Health and Safety (First-Aid) Regulations ('the Regulations') 1981. This guidance is intended to assist training providers register with the HSE and design, deliver and maintain appropriate standards of first-aid training.

#### ***Key changes***

The HSE's review of the Regulations identified a requirement for a new training regime. Employers may now send a potential first aider on a course covering first aid at work (FAW) or alternatively, one covering emergency first aid at work (EFAW). The choice of course will depend upon the outcome of the first-aid needs assessment and the specific circumstances of the workplace.

First aiders who successfully complete either FAW or EFAW training are granted certification for period of three years. At the end of this period they need to successfully complete a re-qualification FAW or EFAW to extend their certification for a further three years. FAW re-qualification courses should contain at least 12 contact hours, to include the final assessment. Annual refresher training is not mandatory but is highly recommended given the frequent changes in first aid practice and procedures.

The EFAW course is a component of FAW training. Therefore, any training provider approved by HSE for FAW can also run EFAW courses.

#### ***Guidance content***

This guidance is divided into two sections:

- Section 1 provides an introduction to the subject and explains the outcome of a review of the Regulations, the legal aspects of first-aid provision, and where and how to apply to become a first-aid training course provider
- Section 2 details the process involved in achieving and maintaining HSE approval to run FAW courses.

The document is supported by three appendices:

- Appendix 1: Detailed requirements for training organisations – this explains the procedure involved in applying for HSE approval to run FAW courses and how training providers should expect their application to be assessed
- Appendix 2: Content of a FAW course – this sets out the course syllabus in the form of required learning outcomes for successful candidates
- Appendix 3: Content of an Emergency First-aid at Work (EFAW) course - describes what level of competence is required of first aiders qualifying to deal with emergency situations.

#### ***First-aid at work course content***

Following a review of first-aid legislation successful candidates on a first-aid at work training course are required to demonstrate practical competence in the following matters:

- provision of emergency first aid at work
- they must also be able to administer first aid to a casualty with; injuries to bones, muscles and joints (including suspected spinal injuries), chest injuries, eye injuries, burns and scalds, sudden poisoning, anaphylactic shock
- they should also recognise the presence of major illness and provide appropriate first aid (this includes suspected heart attacks, strokes, epilepsy, asthma and diabetes).



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### ***Emergency first aid at work (EFAW) course content***

The EFAW course requires six contact hours with trainers using continuous assessment to evaluate candidates.

First aiders successfully completing an EFAW course are expected to be able to:

- understand the role of the first aider including reference to; the importance of preventing cross infection, the need for recording incidents and actions, use of available equipment
- assess the situation and circumstances in order to act safely, promptly and effectively in an emergency
- administer first aid to a casualty who is unconscious (including seizure)
- administer cardiopulmonary resuscitation
- administer first aid to a casualty who is choking
- administer first aid to a casualty who is wounded and bleeding
- administer first aid to a casualty who is suffering from shock
- provide appropriate first aid for minor injuries (including small cuts, grazes and bruises, minor burns and scalds, small splinters).

### ***Annual first aid refresher training***

Annual refresher training requires first aiders to demonstrate their competence to:

- assess the situation in an emergency
- administer first aid to a casualty who is unconscious (including seizure)
- administer cardiopulmonary resuscitation
- administer first aid to a casualty who is wounded and bleeding
- administer first aid to a casualty who is suffering from shock.