



## MANAGEMENT BOARD

Monday 17 December, 12 noon to 1pm in Room 1-09, Millbank House  
and  
Tuesday 18 December, 10.30am to 11.30am in Room 1-02, Millbank House

### Agenda

*Items expected to be taken on Monday 17 December:*

- 1. Palace of Westminster Restoration and Renewal Programme initiation [RESERVED]** **MB/2012/131**  
**131A**  
*RESTRICTED ACCESS: MANAGEMENT*  
Memorandum by Carl Woodall
- 2. Corporate risk register at 7 December** **MB/2012/132**  
*RESTRICTED ACCESS: MANAGEMENT*
- 3. Corporate risk report: staff [RESERVED]** **MB/2012/133**  
*RESTRICTED ACCESS: MANAGEMENT*  
Memorandum by Tom Mohan
- 4. Board minutes** **MB/2012/134**  
Memorandum by Rob Whiteway

*Items expected to be taken on 18 December:*

- 5. Oral updates**
- 6. Archives accommodation pre-feasibility study** **MB/2012/135**  
*RESTRICTED ACCESS: MANAGEMENT*  
Memorandum by Caroline Shenton
- 7. 6/7 Old Palace Yard [RESERVED]** **MB/2012/136**  
**136A**  
*RESTRICTED ACCESS: MANAGEMENT*  
Memorandum by Carl Woodall
- 8. ICT strategy programme: one year report** **MB/2012/137**  
Memorandum by Richard McLean
- 9. Any other business**

For formal decision:

- 10. Draft Minutes of the meeting on 28 November**  
*RESTRICTED ACCESS: MANAGEMENT*
- 11. House of Lords' Health and Safety Committee Terms of Reference** **MB/2012/138**  
**138A**  
**138B**  
Memorandum by Carl Woodall

*(Paper 138B is circulated electronically only)*



For information:

**12. Information Management update**

*RESTRICTED ACCESS: MANAGEMENT*

Memorandum by Elizabeth Hallam Smith

**MB/2012/139**

**13. Management Board forward plan**

*RESTRICTED ACCESS: MANAGEMENT*

Memorandum by Rob Whiteway

**MB/2012/140**

**140A**

The following minutes are circulated electronically only for information:

- Business Planning Group Business Plan challenge meetings (2, 9, 13, 20 November)



**Management Board minutes**

*Responsible Board Member(s)* David Beamish, Clerk of the Parliaments  
*Paper prepared by* Rob Whiteway, Board Secretary  
*Date* 29 November 2012

**Circulation of Board minutes to the Audit Committee**

1. The Audit Committee requested at its last meeting in October 2012 that it receive the Restricted Access version of the Management Board minutes, rather than the public version that members currently receive (the same version that is uploaded on the Board webpage).
2. The Restricted Access version of the Board minutes is the version received by all senior managers. The most sensitive information is included within a reserved annex which is circulated to Board members only.
3. As there is a “third tier” of minutes which is circulated to Board members only and the external members of the Committee receive the full set of minutes by virtue of their position on the Board, **I invite the Board to agree that the Audit Committee receive the restricted access version of the Board minutes.**

**Agreement of Board minutes**

4. Board minutes are formally agreed at the following meeting of the Board, but in practice all comments are received by email well in advance of the next Board meeting. In order to improve communication of Board activity, it would be helpful if Board minutes could be available on the Board website sooner after each Board meeting.
5. I therefore propose that the Board **agree to formally agree minutes of the last meeting by email and that a target of 12 working days is set to make the public version of the Board minutes available online.** When the Board meets on a Wednesday, this will mean the minutes are online by the Friday two weeks after the Board meeting at the very latest. The table below sets out internal targets that will apply to the agreement of Board minutes when the Board meets on Wednesday morning.

Board Secretary to produce first draft	By 10am on Monday following Board meeting on Wednesday
Clerk of the Parliaments to consider and agree first draft	By close of play that Wednesday
Deadline for Board members and contributors to comment on first draft	By 5pm the following Tuesday
Comments circulated to Board	By close of play that Tuesday
Final opportunity for Board member comments before minutes are considered formally agreed	Noon that Thursday
Board Secretary to upload public version of minutes to website and circulate to senior managers	Noon that Friday (12 working days after meeting)

29 November 2012

**David Beamish, Clerk of the Parliaments**  
**Rob Whiteway, Board Secretary**



## ICT strategy programme: One year on report

*Responsible Board Member(s)* Joan Miller, Director of PICT  
*Paper prepared by* Richard McLean, ICT Strategy Programme Manager  
*Date* 3 December 2012

*Summary:* In December 2011 the Management Boards agreed an implementation plan for an 'ICT strategy programme' to deliver four strategic objectives:

- Enhanced customer experience;
- Improved access to services;
- Transformed PICT organisational capability to help Parliament get the best from ICT; and
- Reduced ICT costs.

The attached paper, which has already been considered by the ICT strategy board and PICTAB, provides an update on programme.

The purpose is to give the Management Boards an update on the programme ahead of asking them, next month, to take a decision on when and how Parliament uses cloud computing.

*Summary of actions requested:* The paper is for information only. The Board is invited to comment on the paper.

## Part I – Introduction

1. One year on from the Management Boards of the two Houses agreeing an implementation plan for Parliament's ICT strategy programme, this report sets out the programme's progress to date. The first part of this paper is a short introduction containing some background on the ICT strategy, together with a high-level view of the programme's work in 2012 and plans for 2013; the second part contains a section on each of the programme's four objectives.

## Background

2. In November/December 2010, the Management Boards of the two Houses agreed an ICT strategy to improve the delivery and support of ICT services to Parliament. The strategy describes how Parliament's ICT services will change over the lifetime of the current Parliament.
3. The strategy's vision is "to connect Members, the public and the administration to the information and services they need from anywhere at any time and from any device; to reduce the cost of ICT; and to provide new opportunities and pathways for greater efficiency and effectiveness for Parliament."
4. Following a feasibility study into the various components of the strategy, conducted by PICT under the supervision of an ICT strategy programme board, in December 2011 the Management Boards agreed an implementation plan for a programme to deliver four strategic objectives:
  - Enhanced customer experience;
  - Improved access to services;
  - Transformed PICT organisational capability to help Parliament get the best from ICT; and
  - Reduced ICT costs.
5. The implementation plan set out deliverables for each strategic objective and summarised the plans for achieving each objective. The ICT strategy programme puts Parliament in an advanced position within the public sector, but it is not ground-breaking (for example, the programme is working with and learning from others who are already using cloud technologies): it responds to user demand and developments in the ICT industry.
6. This paper is limited to reporting progress made by the ICT strategy programme. It should be noted, however, that that programme does not implement all aspects of Parliament's ICT strategy. For example, the ICT strategy recognises that Parliament needs specialised software to handle its core information management and publication requirements relating to the business of the two Houses. These areas require high quality robust solutions that cannot be met by generic software, which are delivered through separate business-led programmes (eg the Procedural Data Programme, the CPIMF Programme and the Parliamentary Business Programme). Similarly, the strategy is to bear down on the costs of supporting generic software for Parliament's "housekeeping" functions, and this too is achieved through business-led programmes (eg the Facilities ICT Portfolio, HAIS Renewal, HAISL, the Corporate Services

programme). Importantly, a core component of the ICT strategy is network convergence, which is also delivered by a separate programme.

## **2012: from ‘programme definition’ to ‘readiness’ to ‘foundations’**

7. The ICT strategy programme began 2012 with its ‘programme definition’ stage. This involved the Strategy Board initiating five projects with detailed plans to realise the four objectives set by the Management Boards. In September, the ICT strategy programme board agreed that the programme had met its goal for summer 2012 of “Readiness: We are more confident about describing our future and the steps we will take to get there.”
8. The programme is now working to achieve the goal the Strategy Board set it for Winter 2012: to lay the “Foundations for full implementation of the ICT strategy:
  - we will develop policies & standards and enhance our organisational capabilities,
  - we will develop our plans for engaging Members, their staff and staff in the two Houses, and
  - our ambitions will become tangible and we will demonstrate them in our high-level designs, prototypes and user experience in the model office.”
9. Increasingly, the programme is focusing not just on delivering products and projects but also on helping Parliament prepare to adapt to the opportunities presented by the ICT strategy, and thereby maximise the benefits from implementing the strategy. These opportunities include considering the impact on the world of work generally, opportunities for more collaborative or paperless processes and increased flexibility over the place and time of work.

## **2013: ‘implementation’ and ‘supporting self sufficiency’**

10. Subject to the Management Boards’ decision in January 2013, the programme plans to begin adopting cloud computing technologies later in that year. The first cloud-based services the programme plans to implement – subject to business case approval – include email and office productivity tools (such as Word and PowerPoint) for Members, their staff and staff in the two Houses. The programme will also deliver a new ‘PICT services portal’ in 2013 to enable users to access PICT’s services online.
11. The transformation of PICT will continue through 2013. Following the first team moves in October 2012, more of the existing teams will move into the new organisation structure in January 2013. New teams will also be created during the year to reflect PICT’s increasing focus on offering a ‘proactive advisory service’ (rather than a reactive, break/fix service), delivering services online, supporting and improving the House’s bespoke systems, managing contracts and R&D.

## **Equality analysis**

12. The ICT Strategy Board recognises the need to consider the impact on staff and Members. During 2012, the Strategy Board twice considered the programme’s security, health and safety and individual accessibility impacts, in particular those with protected characteristics under the Equality Act 2010, on the basis of a full equality impact assessment. The Strategy Board will consider a further update to the equality analysis in February 2013.

## Part 2 – Strategic Objectives

### Enhanced Customer Experience

#### *The objective*

13. The priority objective is to deliver an enhanced customer experience. A key enabler for achieving this objective will be developing a more proactive customer-orientated ethos in all that PICT does. Parliament's ICT systems and services will be accompanied by timely support that is available when users need it, with PICT staff offering proactive advice and support to colleagues and customers.

#### **Engagement – understanding our users**

14. At the beginning of 2012, PICT Directors were each given responsibility for PICT's strategic relationship with an area of the business. Directors and BRMs are working together on relationships with the two Administrations, and the programme has established a Strategic User Network (SUN) of business users from the two Houses.
15. SUN has been more active than we anticipated, and its members have shown a real willingness to participate. They recognise that we are listening to them and working in partnership with them to:
  - raise awareness of the possibilities arising from the ICT strategy,
  - identify further benefits that could arise from implementation of the strategy,
  - encourage and generate 'business pull' for the strategy, and
  - prepare for business change.
16. This increased engagement will allow us to tailor our change and engagement activities in 2013 to individual departments, directorates and offices, which should make them more effective.
17. Our work with SUN in 2012 has focused on developing our understanding of
  - our users (helping the programme to profile their key characteristics and requirements)
  - how to engage users through the model office
  - how the timeline for the ICT strategy programme fits with other Parliamentary initiatives and priorities
  - change, engagement & communications (especially preparing the way for migration to cloud email and office)
  - how to communicate the ICT strategy and help people understand and manage the changes necessary to realise the business benefits.
18. In helping us to profile our users, SUN has given us a more sophisticated understanding of our different stakeholders and their needs. The programme's customer advice and support project has supplemented that work by examining a large amount of demand data (both quantitative and qualitative) to ensure that how we design our future services responds to what users want.
19. Our model office has proved to be a great way to engage with a range of users – explaining how things could work in the future and getting feedback. We launched the model office in May with SUN and ran sessions for PICT staff and stakeholder groups

suggested by SUN members. 220 people attended the first version of the model office and nearly 200 people are visiting the second version.

### ***PICT's services***

20. The programme has developed a clearer view of PICT's services in 2014/15. We have described these services and have a clear understanding of how we want our service to look and feel (see Annex A).
21. We have designed a new 'service catalogue', complete with details of our existing services. The catalogue provides a definitive source of information about PICT services and service levels. The catalogue will lead to users having more control: it is a key foundation for our future self-service offering, where it will detail what services users can request online or carry out for themselves.
22. Each service has an identified service owner within PICT, and we are reviewing/consolidating services where required. We are examining our service levels, and PICTAB most recently reviewed the service level statement for Parliamentary ICT in July 2012.

### ***People and processes***

23. We are clearer about how our 'proactive advisory service' will look and we have defined how PICT's teams should be structured and resourced to deliver our new service model. In October we began to move staff into new teams to make this happen.
24. The programme has delivered a staff development framework which will enable PICT staff to gain the skills and knowledge required to work more effectively within its proactive advisory service. The development programme has two key components – knowledge and behaviour. First, it will make sure that staff have the necessary knowledge of PICT's services, of parliamentary business, and of users, so that their advice and support is accurate and relevant to the user. Second, it focuses on how staff interact with users – and the first set of customer service behaviours training was delivered to PICT staff in 2012.
25. In order to provide more efficient customer service, the ICT strategy programme is reviewing many of PICT's processes and has identified ways in which they could be simplified. These process improvements will be implemented alongside a new service management system.

### ***A new service management system***

26. In July, the Strategy Board approved an outline business case for a new system (or systems) for incident and request management, customer self service, and a knowledge base for PICT and its customers. Since then, the programme has produced a technical blueprint and high-level design for self service and the technologies to support PICT's approach to customer advice and support. The plan is to start a procurement early in 2013 for the new service management platform.

### ***Equipment***

27. The programme's objective is to give users more choice in the range of equipment that they can use. This will involve promoting a 'bring your own device' policy for Members and staff in the two Houses. For House staff this might include a shared ownership



scheme. The programme will enable rather than force changes in this area. The expected outcome is that PICT will deliver less equipment directly, especially to Members. For those choosing their own equipment, support for the device would normally be provided by the supplier, but PICT would offer advice and support regarding the selection of equipment from other sources; for those who continue to use devices issued by PICT, there would be no change in how PICT supports the equipment.

28. Our targets and working assumptions at present are that 60% of Members and 30% of administrative staff will opt to acquire their IT equipment in these new ways rather than centrally by the end of 2015.
29. The drivers behind this approach are:
  - Members want greater choice over the equipment they can use, and this demand is increasing.
  - Staff, particularly executive, knowledge and mobile workers, increasingly want greater choice of equipment.
  - Parliament's ICT strategy will increase the range of applications and services that are available via a web browser and enable more freedom over the type of hardware that can access parliamentary data and services.
  - The potential to make savings by reducing support and administration costs.
30. The programme's first priority was to improve the range of equipment available to members in this Parliament, in order to allow current Members to work in a more mobile and flexible way. In 2012, both Houses agreed that MPs and Lords could be eligible to receive an iPad as part of their central equipment entitlement. PICT has established the service in both Houses and started deploying iPads.
31. Having established the position for Members in this Parliament, the programme is now planning for the next Parliament and establishing the steps required in each House to change the financial model for Members' equipment to a monetary allowance system.
32. The programme's second priority was to increase the number of people who can securely access their parliamentary email and calendar from their personal device. PICT did this by facilitating the secure connection to the network of mobile devices of Members and House staff.
33. Having introduced mobile device management, and in line with PICTAB's advice in November 2011, the programme is now at the early stages of investigating ways to enable staff to use their own devices more widely.

### **Improved access to services (anytime, anywhere, any device)**

34. The ICT strategy programme's second objective is to improve access to services and allow users to access the information and services they need from anywhere at any time and from any device.
35. A key enabler for this objective, and indeed the whole of the ICT strategy programme, will be the use of cloud computing. Following PICT's cloud feasibility study in 2011, in 2012 the programme has further refined PICT's understanding of the technologies we will be using in 2015. We are preparing a technical blueprint and mapping out the work required to ensure we can confidently adopt a 'cloud first' policy from April 2013 and be ready to migrate Members' and staff email boxes from summer 2013, subject to decisions by the Management Boards in January 2013.

### **Cloud**

36. Through 2012 PICT has continued to learn from and influence the Government's G-cloud strategy. We are working closely with the G-cloud team so that we don't reinvent the wheel and can learn lessons from elsewhere across the public sector. Indeed, Parliament is among the most advanced across the whole public sector in engaging with the G-Cloud programme: we arranged for the 'G-Cloud personal shopper' to work on site one day a fortnight; one of the Cabinet Office's G-cloud team sits on the Cloud Readiness project board; and we presented our transition plans to the G-Cloud programme board, where they were well received.
37. There has also continued to be a lot of interest in cloud services from several business-led projects. The Management Boards decided in March 2012 that, until the ICT strategy programme's Cloud Readiness project had progressed further, staff should not use, deploy or commission cloud-based applications outside pilot activity. In the meantime, the Cloud Readiness project is testing cloud services in the model office, and we plan to invite the Management Boards in January 2013 to decide when and how Parliament uses cloud computing.
38. As a result of our investigations during 2012, we understand much more about how we can deliver applications to any device, from anywhere – this will enable much more flexible working and support users using their own devices – and will explore this further with users in the next model office at the end of 2012.
39. We have gathered a significant amount of information about applications that will help us create a road map for migrating applications to cloud-based services. We have also worked to understand how we can safely take advantage of developments in cloud computing to deliver the next generation of server hosting and have developed our blueprints for infrastructure as a service.
40. This investigative work will culminate in a paper for the Management Boards in January 2013 proposing policies and guidance to enable the safe use of cloud technologies by Parliament. The programme is also developing a business case for cloud email and office productivity tools, which it will follow with a business case for cloud infrastructure.

**Data**

41. How data is secured will need to change as Parliament looks to increase access to information and as new technologies such as mobile applications and cloud computing grow in use.
42. In 2012, the ICT strategy's Cloud Readiness project and ICT security project worked with the SIROs and the Information Management Board to facilitate an exercise to see how a range of Parliamentary data sets matched up against the Government's current security and risk framework. PICT engaged a team of external accreditors (CLAS consultants), who worked with business application owners, the DIROs in the Commons, and Information Security Coordinators in the Lords. As a result of this data classification exercise, we are clearer about the security implications of moving our data to the cloud and understand which data will require the most careful handling.
43. The Information Management Board agreed a new data strategy in July. Part of the wider ICT strategy, one of the objectives of the data strategy is to create open, clearly identified, described and inter-linked trusted Parliamentary data sets that are ready for internal and external consumption, sharing and re-use.
44. As the ICT strategy places an increased emphasis on data, PICT is developing its organisational capability in this area, and two examples demonstrate that this is already having a positive effect. First, we have made considerable progress in 2012 towards an open data publishing and sharing platform: "data.parliament.uk".
45. Second, establishing trusted and shareable 'people data' has been an aim in Parliament for over a decade. As a result of work within the ICT strategy programme, we will finally have such a data set by the end of the year. The 'people directory' will contain core people information with links to source systems. Fed by Parliament's systems for people information (ie HAIS, HAISL, the Members Names Information Service, and the Pass System), this data set will be available for any business system wanting to use people information.

## Transformed PICT

46. PICT has to transform its organisational capability in order to help Parliament get the full benefits from the ICT strategy. Compared to the department in 2011/12, PICT in 2014/15 will be smaller and its staff will have a different set of skills.
47. Subject to the decisions of the Management Boards in January, we expect to move from a position where most of Parliament's ICT services and applications are hosted and managed on site, to a position eventually where most of them will be hosted and run remotely by third parties and accessed via the internet.
48. PICT therefore has to make a corresponding change from providing technical services to designing solutions that take into account the latest technological advances in ICT, reflect a deep understanding of business needs and are delivered via close and effective management of contracts and suppliers.
49. The programme has made considerable progress towards this objective in 2012. Notable deliverables in the past year include:
  - a new HR strategy
  - a consultation with PICT staff
  - new policies on job-matching and redeployment
  - a new competency framework
  - an adapted PDM process focused on career planning & changing behaviours
  - clear training and development plans for individuals matched by a structured and planned training and development budget
  - a new organisational structure for PICT for 2014/15
  - a transition plan, for moving to the new organisational structure
  - a recruitment authorisation panel, working to ensure implementation of the transition plan and the new recruitment rationale of appointment on 'potential and aptitude' rather than just experience
  - our first group of accredited contract and supplier managers, and
  - training for PICT's management team to equip them with the skills and tools to lead and communicate the change effectively.
50. Such a transformation can be unsettling for staff. The programme set up a new senior managers group in PICT to ensure a consistent set of messages to staff and to consider and respond to their feedback. The group agreed a set of engagement principles which prioritise face-to-face engagement. These principles have been embedded through new communication channels in PICT – monthly 'Team Talk' sessions, town hall events and consultation workshops. The Team Talk process is proving to be a useful mechanism for seeking and responding to feedback.
51. Our senior managers attended 5 days of change leadership training in 2012 and all staff in PICT attended a half-day change awareness session. Work is underway to embed this learning in the way we work.
52. We have clarity about the future for most PICT staff. Some people are already working in new teams. Others have identified new opportunities and planned their career paths and training requirements for new roles. However, some people are not yet so sure of their future – we have changed some roles but not yet others. This

means that some people are excited by new opportunities but others are feeling less confident about their future.

53. We are encouraging change and supporting staff through these changes – we need to be sympathetic and conscious of the increased demands of coping with change whilst continuing to deliver an excellent service.
54. PICT will in future be relying more on external providers, and we aim to ensure that management of contracts is co-ordinated and professional. We have started to establish a group of accredited contract & supplier managers to do this. The first phase of this process is complete, with five members of staff having completed the ITIL Supplier Management Training. Another five are due to complete their training by the end of 2012.
55. We have established a new Innovation Forum ('If...'), to which members of the Strategic User Network are invited. We have held four events so far in 2012, each with approximately 50 attendees – mostly from PICT but also including colleagues from SUN and others they have invited from the two Houses. Topics discussed have included 'harnessing social media' and 'building innovation into everyday work', 'innovation in the cloud' and 'digital innovation'.

## Reduced ICT costs

56. The ICT Strategy Programme is funded from within the existing PICT resource budget, rather than as a separately constituted programme area. The programme will deliver £5.9 million annual savings from PICT's resource budget from 2014/15 (measured against the 2010/11 baseline).
57. The programme is building confidence in PICT's ability to deliver this saving target. So far, PICT:
  - has delivered its savings target for 2010/11 (£560k),
  - has delivered its savings target for 2011/12 (£1,321k), and
  - is on track to deliver its savings target for 2012/13 (£2,889k), which will take us almost half way to our target for 2014/15.<sup>1</sup>
58. The programme is bicameral but forms part of the House of Commons Savings Programme and is closely linked to other savings initiatives, in particular the "print to web" strand. The programme has continued to work closely with the Savings Programme team and with managers in the Lords to keep them informed of our progress in making savings.
59. We have updated PICT's medium term financial plan, and as part of the challenge process, the programme modelled the salaries portion of the PICT budget for 2014/15, demonstrating the savings that will arise from implementing the new PICT organisational structure for 2014/15.
60. We are planning for the end of life of our infrastructure and identifying the savings that could be made by moving to a cloud-based infrastructure. The programme has developed a model for understanding the 'total cost of ownership' for email and office productivity tools and is developing one for Parliament's ICT infrastructure. These will allow us to build business cases that will demonstrate in detail how much can be saved by moving these services to a cloud provider.
61. We have demonstrated how much time ICT-related projects can save by procuring through the G-Cloud framework, and this work has been taken up by the G-Cloud team.
62. We have begun work with PICT's corporate applications team and the HAIS renewal programme to identify examples of how much can be saved by not customising commercial off the shelf systems.
63. We are clearer about our future procurement approach and have put in place a plan to gain visibility over the forward schedule of break points in relevant contracts in order to determine how to manage their ending and the options and process for a strategic move to the new commercial model.
64. We are working in partnership with the Strategic User Network to identify additional benefits that implementing the ICT strategy could bring to the two Houses. We have begun to work in partnership with other people in the two Houses (especially in

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<sup>1</sup> These are PICT's gross cumulative savings targets and do not account for other changes to PICT's baseline as a result of agreed business cases for programmes/projects involving ICT.

Facilities and HR) to see how implementation of the ICT strategy can deliver wider savings beyond those that PICT is making (eg through different approaches to accommodation) and expect to contribute to work on restoration and renewal of the Palace.

**Richard McLean, ICT Strategy Programme Manager  
December 2012**

## Annex A

### PICT Service Vision:

#### Parliamentary ICT services in 2014/15

##### Summary

Parliamentary Information and Communications Technology (PICT) supports Parliament by helping Members, their staff and staff of the two Houses use technology to be effective and efficient in their work. We embrace new and innovative technologies and aim to make Parliament a leader in the use of ICT.

PICT's focus is on developing and supporting systems and applications for Parliament's unique procedural processes and on managing the provision of systems and applications for more generic processes by specialist third parties, adding value in both areas in terms of advice and guidance.

A significant portion of PICT's service provision for Parliament is below the parapet. This involves ensuring that the overarching technologies and underpinning systems – on which all the more visible services and applications depend – are robust, cost-effective and refreshed, reflecting the key developments, opportunities and offerings of the external ICT market.

##### Key features of the service and how they add value to the user

- Security and Identity Management – making it easy for users to use their Parliamentary ICT services securely
- Proactive Advisory Service – practical help and advice for users, including training and coaching, from trained and experienced ICT support staff who are knowledgeable about Parliament and about parliamentary users of ICT
- Business Systems – supporting the effective running of Parliament's business and administration activities
- Email, Calendar and Collaboration Services – enabling users to keep in touch and work collaboratively
- Telecommunications and Conferencing – connecting users to their colleagues and the external world
- Network and Intranet – connecting computers and mobile devices and integrating data so users can share resources and information securely
- Professional Services – consultancy and advice to help users plan and improve their systems and processes, covers ICT strategy, engagement and relationship management, R&D, business change, project and programme management, ICT procurement & contract/supplier management, and business continuity & disaster recovery
- Hardware and Software – ensuring that users have the tools they need to do their job through advice, management, acquisition, support and distribution of ICT equipment, infrastructure and software



## **Service experience**

- Flexible and mobile: Members, their staff and staff of the two Houses can pick up information and communications at speed, at any time of day, from any device, from any location and on the move.
- Easy to find: PICT's services are professionally marketed so that users know what is available to them.
- Choice: Members and their staff can choose the mix of equipment that suits their way of working; users can choose their channel for contacting PICT.
- Putting you in control: Using the PICT service portal is the quickest and easiest channel for most users, and puts them in control.
- Ready when you are: Proactive advisory service is available when users need it and quick to respond.
- PICT staff listen to what users say, are attentive and empathetic, and their advice is knowledgeable and consistent.

## **Service operation – how the service is delivered**

### **People**

- Our staff are agile, innovative and responsive and demonstrate the Department's REAL values. They feel proud to work here and are confident that their contribution is valued.
- PICT staff are technically competent in the systems used by Parliament and conversant with those used by Members.
- Our staff are motivated by both a strong customer service ethic and a desire to support the UK democratic process: they know about the work of Parliament and Members and understand their priorities and the context within which they work.

### **How users access their services**

- Users access PICT's services online, via a PICT service portal, which provides a single gateway to all PICT services including self services and information and is users' default interface with PICT.
- The PICT service portal offers users fast access to information about the services they have / can have from PICT in a single consolidated and personalised view.
- Users can speak directly to PICT staff at PICT Local, the Commons Members' Centre and via the x2001 telephone service (which operates 24/7).

### **How the technology supports the delivery of users' services**

- More than 80% of Parliament's ICT services are cloud-hosted, less than 20% are hosted on premise.
- Parliament's office productivity tools and the associated file storage are hosted in the cloud, as are email, calendar and messaging services.
- Wireless internet is available everywhere across the Parliamentary Estate.
- Users can launch their applications from any device via an online Application Portal.
- Users can print on demand with pull printing, but overall there is less printing than in 2012/13, and a rationalised portfolio of printers.
- PICT's capability to integrate and consolidate data and applications using a common proven architecture improves the availability, reliability and accuracy of data and reduces the length and cost of projects involving ICT that use those data and applications.

- Bespoke development of systems for unique services to Parliament; no customisation of non-bespoke applications for more generic services.

### **Outcome for users**

- PICT helps users who are confident/proficient in technology to stay safe, ensuring both that they are secure and that their services work, and helps users who are not confident/proficient in technology to become more effective and efficient in their work.
- Users come to PICT for:
  - advice about what they already do with technology (the basics to get up and running),
  - advice about how technology could help them do what they do better (making the most of the technology and services available today), and
  - advice about doing better things (improving the services they offer to Parliament).
- PICT helps all users to think ahead and think how ICT will help support and shape their work in the future.
- Users have easy access to parliamentary information from anywhere, at any time, from any device.
- Users have contemporary fault tolerant systems and services that are intuitive to use.
- Users respect the Department and its staff for their knowledge and professional skills.

### **Service value**

- PICT is recognised by the Management Board and Member Committees in both Houses as providing Parliament with excellent value for money.
- PICT has delivered £5.9 million of annual savings from its resource budget.
- A significant proportion of those savings came from reducing the number of posts in PICT.
- PICT has made significant savings from its management of contracts and suppliers.
- PICT's use of 'cloud computing' – services provided over the internet on a utility model – is yielding major benefits in terms of user experience, accessibility, mobility and reduced costs.



## Health and Safety Committee Terms of Reference and associated policies

*Responsible Board Member(s)* Carl Woodall, Director of Facilities  
*Paper prepared by* Jon Oliver, Senior Facilities Manager  
*Date* November 2012

*Summary* The Board is invited to:  
*of actions* • Approve the revised Terms of Reference for the Health and Safety  
*requested:* Committee.  
• Take note of the revised policy documents.

### Introduction

1. Formal responsibility for Health and Safety in the Administration has now been transferred from the Human Resources Office to the Department of Facilities. Some significant changes are taking place in the way the Administration meets its Health and Safety obligations and a note was circulated to Heads of Office on 28 November 2012 outlining these changes.

### Changes to Policy and Procedures

2. The House of Lords Health and Safety Committee will now be chaired by the Director of Facilities. A revised Terms of Reference document has been agreed by Health and Safety Committee Members and is enclosed for approval by the Management Board.
3. In light of the introduction of a suite of 'self-service' facilities for Heads of Office, a number of existing pieces of Health and Safety Policy have been revised and agreed both by the Safety, Health and Wellbeing Service and by the House of Lords Health and Safety Committee. They are:
  - a. Overarching House of Lords Health and Safety Policy
  - b. First Aid Policy
  - c. COSHH (Control of Substances Hazardous to Health) Policy
  - d. Assessment of Risks Policy
  - e. DSE (Display Screen Equipment) PolicyThese policies are also enclosed for information.
4. A number of further developments will take place in the coming months, these will include:
  - a. The launch of the 'self-service' online tools by the Safety, Health and Wellbeing Service in early December.
  - b. The launch of revised House of Lords Health and Safety intranet pages
5. **The Board is invited to take note of the revised policy document enclosed and to approve the revised Terms of Reference for the Health and Safety Committee.**

November 2012

Carl Woodall, Director of Facilities



## House of Lords Health and Safety Committee

### Membership and Terms of Reference

#### 1 PURPOSE

The House of Lords Health and Safety Committee ensures effective communication and consultation with staff representatives on health and safety matters. It seeks actively to promote a healthy and safe working environment through the sharing of best practice and information.

The Health and Safety Committee does not have management responsibility for health and safety. This is the responsibility of line managers at all levels.

The Membership and Terms of Reference were approved by the Health and Safety Committee in November 2012 and by the Management Board in December 2012.

#### 2 MEMBERSHIP

The membership of the Committee is:

Chair: Director of Facilities.

Secretariat: PA to the Director of Facilities.

Members: One Office Safety Co-ordinator from each Office of the House, nominated by each Head of Office;  
One Departmental Safety Coordinator, PICT;  
One representative from the Metropolitan Police;  
One representative from each Trade Union recognised by the House.

Ex-officio: Head of Fire Safety and Environment, PED  
Head of the Safety, Health and Wellbeing Service.

The Committee may co-opt other stakeholders to attend as required, including representatives from contractors working on the Parliamentary Estate. It may also set up Sub-Committees as appropriate.



## 2.1 Quorum

The quorum is five members including the Chair, a Senior Manager from the Safety, Health and Wellbeing Service and at least one Office Safety Coordinator.

## 2.2 Meeting arrangements

- a. Meetings shall be held at least twice per year, with the aim of achieving quarterly meetings.
- b. The Chair will propose the date and time of the meetings which will then be agreed by the Committee.
- c. The Committee Secretariat will agree the agenda with the Chair and circulate it and accompanying papers to Committee members at least ten working days before the Committee meeting. Items for discussion are to be submitted to the Secretariat by an agreed closing date.
- d. No business other than that appearing on the agenda shall be transacted at any meeting unless its introduction as a very urgent item is agreed by the Committee.
- e. The minutes of all meetings of the Committee shall be drawn up by the Secretariat as soon as possible after each meeting and copies supplied to:
  - Members of the Committee;
  - Members of the House of Lords Management Board; and
  - Each Head of Office for circulation within their teams.
- f. The Secretariat will ensure that a copy of the minutes is put on the relevant pages of the Parliamentary intranet.

## 2.3 Reporting Arrangements

The Chair of the Committee will submit a report on its activities each year to the House of Lords Management Board.

The Chair of the Committee will report more frequently should a matter of particular significance arise.

## 3 TERMS OF REFERENCE

The Health and Safety Committee shall:

- a. make recommendations on health, safety and wellbeing and contribute to the formulation of strategy and policy;
- b. scrutinise proposals for change and monitor the performance of the safety services provided by the Safety, Health and Wellbeing Service;
- c. act as a forum for members to share good practice with each other, and;
- d. seek to promote good practice and raise awareness of matters relating to health, safety and wellbeing.

The Committee will consider the following:



- e. Matters raised by Office Health and Safety Coordinators;
- f. summary results of Office Risk Assessments;
- g. accident and ill health statistics resulting from work activities or as a result of incidents within the House of Lords Estate, including any investigations and subsequent actions;
- h. inspections of the workplace by enforcing authorities;
- i. safety audit reports, and;
- j. arrangements for the communication of health, safety and wellbeing issues.



# HOUSE OF LORDS

## Health and Safety Policy

This Health and Safety Policy Statement is the lead document for Health and Safety in the House of Lords. All other health and safety documents at a corporate or departmental level will match or exceed the principles set out here. All people who work in or with the House of Lords Administration and those who use its services are encouraged to read this policy and to consider how they can contribute to achieving its aims.

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## I OUR HEALTH AND SAFETY POLICY

The House of Lords Administration wants to provide a healthy and safe working environment and that people who work in the House of Lords or come to visit are not harmed. We will do all we can to ensure the health and safety of our staff and any other people who are directly affected by our work. Most importantly, we will try to ensure that work demands do not exceed your capabilities to carry out the work, without undue risk to yourself or others.

It is the policy of the House of Lords Administration that we act in accordance with all safety legislation, even though not all of it strictly applies to Parliament.

Health and safety risks need to be identified and managed. This means that your managers will be able to:

- tell you about the risks and give you the most suitable information and training so that you can do job, or visit, without coming to any harm;
- give you the proper equipment to protect you, and to help you work safely;
- consult widely on health, safety and welfare issues, with Trade Union representatives as well as all staff via the Health and Safety Committee; and
- regularly review and improve our arrangements for managing risks including providing assurance on those internal controls in place to manage them.

This health and safety policy explains the various responsibilities of people who work in the House although ultimate responsibility remains with senior managers, and liability with the Clerk of the Parliaments as employer supported by the Safety, Health and Wellbeing Service. All staff can get more information on the health and safety pages of our intranet, where you can also find out more details on the arrangements for putting the safety policy into practice.

The success of this policy relies on your support, involvement and cooperation. This means we need everyone, including Members of the House of Lords, consultants and contractors, to work together to implement and improve our health and safety arrangements.

If you have any questions about this policy please email [SHWSadmin@parliament.uk](mailto:SHWSadmin@parliament.uk)

Signed on behalf of the House of Lords  
by the Clerk of the Parliaments

Date



## **2 PEOPLE AND THEIR RESPONSIBILITIES**

### **2.1 Everyone**

Every person who works for the House of Lords Administration in any capacity is responsible for promoting good health and safety practices and preventing work-related injuries and ill health. Intentionally disregarding, misusing or interfering with anything provided for health, safety or welfare purposes is a disciplinary matter.

Regardless of your position, you are responsible for:

- ensuring your actions and decisions contribute towards a healthy and safe work environment;
- helping the Administration to achieve its health and safety policy objectives and maintaining its standards;
- following precautions, systems and processes relevant to your work;
- raising with your line manager any problems or concerns which you can't solve;
- reporting all work-related injuries, ill-health (including stress) and other incidents, including "near misses"; and
- complying with your legal duties.

If you or your colleagues are unsure of your responsibilities, you need to speak with your line manager or local safety co-ordinator. If they can't help, please contact the Safety, Health and Wellbeing Service ([SHWSadmin@parliament.uk](mailto:SHWSadmin@parliament.uk)).

### **2.2 Management and Delivery Functions**

As well as the general responsibilities which apply to everyone, certain groups of people have other specific duties.

All senior staff and managers have a duty to ensure the health and safety of:

- those who report to them; and
- those who may be affected by our activities.

Health and safety duties, and the necessary authority and resources to discharge them, are delegated down the line management structure as appropriate. The following parts of this section outline the general responsibilities of the various management levels: each section has further and relevant information available on the health and safety pages of the intranet.

Everyone is responsible for making sure that their work is done properly. If you have doubts about the safety of any arrangements, you should not start your work until you have sought advice. If work has already started, then it should be suspended until you have the appropriate reassurances.

**2.2.1 The Clerk of the Parliaments** is responsible for ensuring that the Administration fulfils its health and safety responsibilities and that there are adequate resources to do so. He has delegated authority for the day-to-day management of safety and health related issues to Heads of Office, who must make sure the safety policy is put into practice in their Offices and Departments.

The health and safety policy will be updated as necessary by the Head of Safety, Health and Wellbeing, under the guidance of the House of Lords Health and Safety Committee, and in consultation with staff, management and TUS.

**2.2.2 The Management Board** is responsible for ensuring the Administration delivers its health and safety policy and complies with its legal duties. They will:

- provide active and visible leadership for health and safety within the Administration;
- consider any health and safety implications of Board decisions and ensure that they reflect the safety policy;
- monitor and review health and safety performance and risks at least annually;
- formally delegate responsibility for health safety issues in individual offices to the Heads of Office; and
- allocate adequate resources for health and safety purposes.

The Management Board has nominated a member (currently the Director of Facilities) with specific responsibility for health and safety. This person is responsible for championing health and safety matters on behalf of the Board. The Director of Facilities will in particular ensure that Heads of Office are reminded of their responsibilities under this policy.

In addition, the Director-General of Human Resources and Change in the House of Commons has special responsibility for providing a professional, in-house safety and occupational health service. The Director General of Facilities in the House of Commons has specific responsibility for ensuring that both Houses have adequate arrangements in place to control premises-related risk e.g. fire, asbestos, safety of water systems and plant, gas and electrical installations.

**2.2.3 Heads of Office:** In addition to any duties they may have as Management Board Members, Heads of Office must provide the leadership needed to put our health and safety policy into practice. They are responsible for the effective management of work related risk under their workgroup's control, including the implementation of the Administration's health and safety policy, plans and supporting arrangements.

Accordingly, Heads of Office will:

- make sure risks are effectively managed within their Offices and Departments and that the demands placed upon staff by their work does not exceed their capabilities;
- provide appropriate support for their line managers on health and safety issues;

- ensure that staff receive appropriate safety training tailored to the needs of their office (where possible making use of generic training arranged through SHWS including where appropriate on-line training);
- make sure that sufficient time and finances are allocated to assess and manage risks to their staff;
- appoint sufficient safety co-ordinators to assist them in their duties<sup>1</sup> and ensure that these people have enough time to do this work;
- nominate a representative or representatives to the House of Lords Health and Safety committee;
- regularly review their own Department's health and safety performance; and

**2.2.5 Team Leaders, Line Managers and supervisors:** are individually responsible for managing all health and safety related to work under their control, and must make sure that doing so is of equal importance to other management functions. More information is available on the intranet to explain what team leaders, line managers and supervisors need to do to make sure their staff and contractors can work safely but this includes making sure that:

- work-related risks have been assessed (including in particular when staff assume new roles) and risks are controlled;
- staff have appropriate training to help them do their job safely and understand how to work safely;
- staff have the right equipment to do their job properly; and
- people know what to do if there is an emergency and how to report an accident.

Line Managers must also keep their managers and Head of Office informed of safety related issues and make sure that they and their staff have sufficient resources to appropriately manage any work related risks.

**2.2.6 Departmental Safety Co-ordinators** must be appointed by each Head of Office and nominated as the departmental or office representative or representatives on the Health and Safety Committee. Co-ordinators must be given sufficient time to carry out their tasks; the extent of their duties must be agreed with their manager and included in their job description. Where there is more than one Co-ordinator in an office or department they must work together to ensure a consistent approach.

Safety co-ordinators do not need an in-depth knowledge of safety issues and will not be expected to conduct safety advisory tasks, unless they are appropriately trained and experienced.

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<sup>1</sup> The number and competency of co-ordinators will depend on the level and nature of associated risk, but they must be able to fulfil the duties described in section 2.2.6

The health and safety intranet pages give more information on the role of the co-ordinators i.e.

- how they can assist their Head of Office in implementing the House of Lords Health and Safety Policy;
- how they can consult and inform staff in their department on safety related issues; and
- what advice and guidance they may be asked to give their Head of Office.

**2.2.7 Head of Safety, Health and Wellbeing** and his/her staff act as the House's competent persons<sup>2</sup>. The postholder acts as the point of contact between the Administration and the Health and Safety Executive and is responsible for ensuring that his/her team;

- provides advice on strategic and operational safety issues, including guidance to staff on day to day safety issues;
- sets up consistent occupational health and safety standards;
- develops and recommends policies and procedures in line with best practice and helps managers to improve safe working procedures;
- reviews and updates the safety policy;
- provides advice, guidance and support as required and on consideration of the risk arising from any workplace activities; and
- ensures that the health and safety policy is closely linked to the wider risk management policy of the Administration<sup>3</sup> and that its application contributes to the overall management of risks across the Administration.

**2.2.8 The Fire Safety Manager** and deputy in the Department of Facilities (Commons) act as the House's competent fire safety persons as delegated by the Clerk of the Parliaments. The post holders act as the point of contact between the House and the Fire Section/Fire Brigade, London Fire and Emergency Planning Authority and the Chief Fire and Rescue Adviser. They are responsible for the planning, discharge and monitoring of the fire strategy for both Houses and providing competent advice.

The fire safety manual sets out Parliament's fire safety commitments (including fire precautions, dealing with fire incidents, fire drills, training and incident evacuation) and the arrangements for meeting those commitments. It is authorised by the Clerk of the House and Clerk of the Parliaments and is overseen by the Fire Safety Committee. The manual consists of the Fire Safety Policy Statement, Fire Safety Management Strategy, Schedule of Premises and Location of Muster Points.<sup>4</sup>

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<sup>2</sup> Appointed under the provisions of section 7 of the Management of Health and Safety at Work Regulations.

<sup>4</sup> <http://intranet.parliament.uk/intranet/evacuation-emergencies/assets/Fire-Safety-Manual.pdf>

### 2.3 Trade Union Safety Representatives

Trade Unions recognised by the House will appoint their own Safety Representatives<sup>5</sup>. They must notify the House (via the SHWS) of the names of these representatives and the list will be published on the SHWS website. These representatives have the right, via the Health and Safety Committee to:

- represent employees in discussions with the employer on health, safety or welfare and in discussions with HSE;
- investigate hazards and dangerous occurrences or complaints;
- have relevant training;
- carry out workplace inspections and scrutinize relevant documents;
- attend safety committee meetings;
- be informed and consulted about matters that have health, safety or welfare implications; and
- support in terms of time, facilities and recognition as partners in better health, safety and welfare.

### 2.4 Contractors

Many contractors work on the Parliamentary Estate, either as a permanent presence or as part of a temporary or short term contract. All contractors must comply with the Administration's safety procedures and ensure that their activities do not put anyone else working on the Estate at risk. Detail of safety procedures is given on the intranet.

Specific safety precautions required to control risk will form part of the relevant contract and contractors must ensure that adequate and sufficient safe working systems, method statements and permit to work arrangements are in place, as appropriate, for the relevant works or projects. These documents must be available for inspection by the House authorities.

### 2.5 Health and Safety Support

Although health and safety is a management responsibility of equal importance to other business undertakings, various workgroups and individuals work for the House of Lords Administration to help achieve its health and safety objectives. They identify the common health and safety issues that exist across the Administration; recommend appropriate risk management solutions; and communicate with Offices and Departments as appropriate.

**2.5.1 Safety, Health and Wellbeing Service** gives professional advice and assistance on matters relating to health, safety and welfare at work across both Houses of Parliament. This includes:

- provision of advice on safety, health and wellbeing matters;

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<sup>5</sup> Following the provisions of the Safety Representatives and Safety Committee Regulations

- assistance with production of safety documentation, such as the development of safety policies and risk assessments;
- keeping up to date on developments in health and safety legislation and practice;
- monitoring the implementation of health and safety policy;
- acting as the formal point of contact between the HSE and staff of the House;
- liaising with specialists in or outside the House, where necessary;
- receiving accident and incident reports, investigating as appropriate, compiling and analysing accident and incident data and reporting accidents to the appropriate enforcing authority as required by legislation;
- liaising with recognised trade unions and their appointed workplace representatives on issues relating to the health and safety of their members; and
- publicising occupational health and safety information, policies and guidance.

**2.5.2 Facilities and Estates Teams (in the House of Commons Department of Facilities (PED and Accommodation Services))** are responsible for effectively managing all health and safety matters associated with:

- the physical structure, support services and working environment of the Houses of Parliament, including shared parts of the Parliamentary estate e.g. roadways, paths, steps and car parks;
- work that is covered by CDM regulations;
- plant rooms; and
- fire risk assessments and physical fire safety precautions, via the Fire Safety Manager.

**2.5.3 The Fire Safety Manager** and the deputy are responsible for the day to day management of fire safety within the Estate as delegated by the Clerk of the Parliaments, via the Director General of Facilities (Commons). They are responsible for the planning, discharge and monitoring of the fire strategy for both Houses and providing competent advice. More detail is given in the Fire Safety Manual.

**2.5.4 Trade Unions** are represented in the Health and Safety Committee and are consulted via the Committee when safety policies are developed or revised.

#### **2.5.5 The Health and Safety Committee**

The House of Lords' Health and Safety Committee is chaired by the Director of Facilities or any deputy he appoints. It considers and makes recommendations on any strategic matters connected with health and safety which may affect those who work in or visit the House of Lords. The objectives, constitution, procedure and functions for the committee can be found on the intranet, and in the staff handbook.

**2.5.6 The Fire Safety Committee** is chaired by the Parliamentary Director of Estates and reports to the House of Lords Management Board via the Parliamentary Estates Board. It aims to ensure that the fire safety precautions throughout the Parliamentary Estate conform

to the highest professional standards and by doing so support the Clerks of both Houses as "responsible persons" under the Regulatory Reform (Fire Safety) Order 2005.

**2.5.7 Local Health and Safety Committees:** where appropriate, an individual Office or Department may set up its own safety committee, to discuss and action operational issues. A representative from this committee (usually a safety co-ordinator) will attend the House of Lords Health and Safety Committee.

**2.5.8 The Whitley Committee** receives an annual report on the health and safety performance of the House.

### 3 PUTTING THE POLICY INTO PRACTICE

Establishing a policy is a key part of managing health and safety, but it is equally important to make sure that it is put into practice.

We are responsible for the health and safety of everyone affected by our business - this includes employees, subcontractors, visitors, Peers and Members of both Houses, customers and the visiting public.

The House of Lords safety policy explains our commitment to managing health and safety and also how we are organised – in other words, who is responsible for doing what. To perform health and safety duties properly requires necessary authority and resources. All our safety policies make it clear that this is delegated down the line management structure but *responsibility remains with the person making the delegation.*

#### 3.1 The Principles of our Arrangements

Risk assessment and management is fundamental to the way we manage health and safety at the House of Lords. We are committed to the Health and Safety Executive's *sensible risk management* agenda as follows.

Sensible risk management **is** about:

- ✓ Ensuring that workers and the public are properly protected.
- ✓ Providing overall benefit to society by balancing benefits and risks, with a focus on reducing real risks – both those which arise more often and those with serious consequences.
- ✓ Enabling innovation and learning, not stifling them.
- ✓ Ensuring that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust action.
- ✓ Enabling individuals to understand that as well as the right to protection, they also have to exercise responsibility.

Sensible risk management **is not** about:

- ✗ Creating a totally risk free society.
- ✗ Generating useless paperwork mountains.
- ✗ Scaring people by exaggerating or publicising trivial risks.

- ✘ Stopping important recreational and learning activities for individuals where the risks are managed.
- ✘ Reducing protection of people from risks that cause real harm and suffering.

### **3.2 Implementing the Policy**

This policy is the lead document for occupational health and safety in the House of Lords. All other health and safety documents at corporate or departmental level will match or exceed its principles.

This policy is supported by other corporate health and safety policies which explain common standards, systems, processes and improvement plans that apply across the Lords for various specific topics. The list is wide ranging and covers subjects such as hazardous substances, safe lifting, stress and wellbeing, personal protective equipment and asbestos etc.

Additionally, Departments and Offices may provide written guidance to help managers effectively define and communicate local procedures related to the workgroups activities and functions. Departments and Offices are responsible for making these arrangements accessible to their staff, by the most appropriate means of communication for their circumstances.

The arrangements for implementing the various policies are given in the Staff Handbook and are regularly reviewed and updated, if necessary. **Information Sheets** are also available which provide easy to read guides on workplace risks and control measures.

### **3.3 Performance Standards**

We need to be assured that, throughout the House, arrangements to control health and safety risks are in place and operate effectively. If we don't do this in a meaningful way, there will be no reliable information to inform managers how well the health and safety risks are controlled.

Performance standards will be agreed with the Health and Safety Committee to help the Administration measure the effectiveness of its health and safety management system. Up to date information will be available on the SHWS intranet pages but in general they will involve

- *reviewing operational arrangements locally*: Offices and Departments should regularly audit and inspect working areas.
- *performance at the organisational level* : The Safety, Health and Wellbeing team will make use of audits and statistics to ensure that there is a consistency in our risk management arrangements. This information will also allow comparison with sector or industry standards and best practice.





## House of Lords Health and Safety Policy (HSP 2/11) First Aid Policy and Procedure

This policy forms part of, and should be read in conjunction with the Health and Safety Policy. It applies to all staff, contractors, visitors and others who are involved in, or witness, an accident or incident on the Parliamentary Estate.

**In the event of a serious injury or illness e.g. loss of consciousness, severe chest pain or the casualty turning blue dial 3333 immediately and request an ambulance.  
DO NOT WAIT FOR A FIRST AIDER TO ATTEND**

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## **1.0 INTRODUCTION**

When employees become ill or suffer injuries at work, it is important that immediate first aid attention is obtainable and if necessary, an ambulance called. First aid given promptly and effectively can save lives; often it can assist in the prevention of minor injuries deteriorating into serious injuries. In many incidents/accidents it is the only treatment necessary. The First Aid at Work Policy explains the procedures that are in place to ensure that any person<sup>1</sup> on the Parliamentary Estate is able to get hold of a first aider when needed.

It covers:

- selection and training of first aiders
- contacting first aiders during normal working hours, out of hours
- first aid equipment
- first aid arrangements for special events.

This policy has been prepared with the assistance and agreement of the Health and Safety Committee.

## **2.0 POLICY**

### **2.1 Legal Requirements**

If a person is injured or becomes ill at work, regardless of whether the problem is caused by the work they do or not, it is important to give them immediate attention and call an ambulance in serious cases. First aid at work legislation covers the arrangements which employers should make to ensure this happens. It can save lives and prevent minor injuries becoming major ones.

The Health and Safety (First Aid) Regulations 1981 requires us to provide adequate and appropriate first-aid equipment, facilities and people so anyone on the Parliamentary estate can be given immediate help if they are injured or taken ill at work. What is 'adequate and appropriate' depends on the circumstances and this policy explains the arrangements in place, to make sure we have the proper first aid arrangements in the Houses of Parliament.

### **2.2 What this Means in Practice**

It is our policy that, in all Parliamentary buildings there are sufficient numbers of trained personnel, equipment and information available to ensure that someone competent in basic first aid techniques can rapidly attend an incident during normal working hours. Sufficient qualified first aiders are always accessible during normal hours in each building to attend an incident (see Appendix A).

As first aiders are provided for the benefit of all people on the Parliamentary estate, they are a shared resource. If a first aider is asked to attend a casualty, in most circumstances this must take precedence over other work duties. Refusal to attend a call out will be investigated by a member of the Safety, Health and Wellbeing Service (see section 2.4.3).

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<sup>1</sup> This includes employees of the Commons or Lords, Members/Peers and their staff, contractors, visitors and the general public.

## **2.3 Obtaining First Aid**

### **2.3.1 In the Event of a Serious Injury or Illness**

If a casualty loses consciousness, has severe chest pain or is turning blue, dial 3333 immediately and request an ambulance. Do not wait for a first aider to attend.

### **2.3.2 In Buildings Other than the Palace of Westminster**

For a minor injury or illness during normal working hours i.e. 9am- 5pm you can obtain first aid by:

- Looking at the list of first aiders on the intranet <http://intranet.parliament.uk/employment/health-safety-welfare/> and contacting them directly<sup>2</sup>
- Phoning the reception desk of the building you are in, giving the location of the ill/injured person and briefly explaining why you need a first aider. The person on duty will either give you the number of the first aider so that you can contact them directly OR will contact your nearest first aider on your behalf.

First aid can be obtained outside normal working hours by dialling x 3333.

### **2.3.3 Obtaining First Aid in the Palace of Westminster**

For a minor injury or illness you can obtain first aid by phoning any reception desk, asking a doorkeeper, policeman or security guard. Make sure you can give the location of the ill/injured person and explain why you need a first aider.

In an emergency dial x3333. If you are near a doorkeeper or policeman they will be able to assist.

### **2.3.4 First Aid/Medical Cover for Events or Large Gatherings**

When any events are organised at parliament, it is the event organiser's responsibility to ensure the availability of medical, ambulance and first-aid assistance as appropriate for all those involved in an event. The organiser must inform SHWS of the nature of the event, expected numbers and the profile of people attending the event. The medical services are extremely busy and the team will need to be told well in advance of the event.

SHWS will work with the event organiser or planning committee to produce a risk assessment and associated medical plan.

SHWS will:

- Liaise with London Ambulance Service if necessary, and
- Provide sufficient medical cover for the event (doctors, nurses and/or first aiders).

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<sup>2</sup> This information is kept as up to date as possible by the safety, health and wellbeing team, but it relies on first aiders notifying them of any changes in contact details.

Any doctors, nurses or first aiders, ambulance and medical workers available at the event will:

- have identification (nurses will wear uniforms where relevant)
- have protective clothing where relevant
- have relevant experience or knowledge of requirements for first aid at the event
- be physically and psychologically equipped to carry out the assigned roles.

Doctors or nurses attending the event will have no other responsibilities for the duration of the event.

### **2.3.5 First Aid Arrangements when Travelling on Official Business**

On occasions, staff may travel to remote corners of the globe on official business. Staff who are undertaking such trips should speak with the occupational health nurse adviser to see if any personal first aid equipment is recommended.

## **2.4 Duties**

The House of Commons and House of Lords safety policies explain our commitment to managing health and safety and also how we are organised, i.e. who is responsible for doing what. To perform health and safety duties properly requires necessary authority and resources. All our safety policies make it clear that this is delegated down the line management structure but responsibility remains with the person making the delegation.

## **2.5 All Persons Working on the Parliamentary Estate**

All persons working on the Parliamentary estate, including contractors are responsible for knowing how to contact a first aider (see 2.3).

### **2.5.1 Management Responsibilities**

#### **2.5.1.1 The Management Board**

The Management Board are responsible for ensuring the House complies with the Health and Safety (First Aid) Regulations via this policy, in their areas of command.

#### **2.5.1.2 Senior Managers**

Senior Managers must ensure that they have sufficient first aiders to meet the needs of their workgroup (further information is provided in Appendix A). If they are working in shared locations, they will need to liaise with colleagues in other offices to make sure that there is sufficient cover. There is an expectation that the first aiders will be used as a resource for both Houses and PICT and not just for individual management groups.

The Safety, Health and Wellbeing team have undertaken a risk assessment to gauge how many first aiders are likely to be required in each building but this is only indicative and the geography or local working patterns may mean that more first aiders are required. SHWS will assist senior management in determining the numbers of first aiders which should be available for their staff. If senior managers identify the need to increase numbers of first aiders, they should inform the Safety, Health and Wellbeing service.

Senior Managers must appoint at least one *first aid co-ordinator* to co-ordinate arrangements within the work group and liaise with other co-ordinators in the building and with SHWS (see 2.3.3 for co-ordinator duties).

### **2.5.1.3 Line Managers**

Line Managers must allow first aiders to attend relevant training (an initial three day course and then regular refresher training). There is also the expectation that first aiders will be able to attend to casualties without delay, when requested, or attend other official functions where a first aid presence is required. Managers are also responsible for ensuring that all staff are made aware of the arrangements in place to provide first aid. This needs to be included in the local induction of any new staff.

## **2.5.2 Other Responsibilities**

### **2.5.2.1 Safety Health and Wellbeing Service**

SHWS are responsible for the development and review of the first aid policy and associated arrangements. They will also monitor and audit the application of the policy to make sure there are appropriate levels of provision for first aid, the policy is applied consistently throughout the House and that the arrangements are fit for purpose.

SHWS will:

- provide guidance on the implementation of this policy
- nominate a lead first aider, to liaise with other first aiders and safety co-ordinators in the House
- identify the minimum numbers of first aiders needed in each building and in areas where the risk of injury is higher e.g. kitchens and workshops
- inform senior managers if it is believed that there are insufficient numbers of first aiders in a given location
- maintain a corporate database of all House appointed first aiders
- provide a list of first aiders to the reception desks of each building on the parliamentary estate<sup>3</sup>
- provide first aid supplies to nominated first aiders, on request
- investigate any issues which arise in relation to the provision of first aid at work, including refusal of first aiders to attend a request for assistance
- provide specialist support assessment of first aid requirements where the risk identifies this as a requirement.

### **2.5.2.2 First Aiders**

Fully qualified first aiders can provide first aid assistance in almost all situations likely to occur in the Houses of Parliament. They should be identifiable and will be given a small green first aid badge to pin onto the lanyard of their security pass. They will also receive a formal letter of appointment (Appendix E). Fully qualified First Aiders have gained a nationally-accepted First Aid at Work certificate and as such they are highly trained.

First aiders in the Houses of Parliament are responsible for:

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<sup>3</sup> The information will be kept as up to date as possible. It is the responsibility of the first aider to inform SHW of any changes to their contact details.



- responding promptly to calls for assistance within their area
- summoning further help if necessary
- reporting details of treatment provided to SHWS (see appendix F)
- ensuring that their first aid grab bag and/or nominated first aid box is adequately stocked at all times. Supplies can be obtained from SHWS (see Appendix B)
- ensuring that all used first aid material/soiled dressings etc are disposed of appropriately. Note that infectious items are to be treated as hazardous waste and placed in appropriate containers (e.g. yellow bags) and disposed of in accordance with local arrangements
- being available for first aid duty where the House has identified the need for first aiders to be present
- tell their first aid co-ordinator and SHW of any change of circumstances such as an office move, change of working hours or availability and periods of extended leave etc. allowing SHW to keep first aid notices up to date
- ensure that they maintain their competence<sup>4</sup> i.e. that they attend refresher training and any other update sessions organised by the House
- undertake a weekly test of specific defibrillators (where they are defibrillator trained).

A treatment form should be completed every time a first aider provides assistance to a casualty, including when the problem was illness rather than accident. As well as usual details of the accident (if appropriate) the name of the person giving first aid and summary details of the treatment given should be recorded (see Appendix F).

New first aiders will be offered an appointment with one of the occupational health nursing team and the lead first aider (SHWS) to discuss their training and House arrangements highlighting any issues which may be of relevance to someone new to the role.

**Emergency First Aiders:** Following completion of risk assessments, workgroups may identify the need to train additional staff in emergency first aid procedures, so they can act as “first responders”<sup>5</sup>. Managers should discuss such requirements with the Safety, Health and Wellbeing Service.

### 2.5.2.3 Hepatitis B

Training courses for first aiders in the workplace highlight the importance of preventing cross infection in first-aid procedures. First aiders are strongly advised to have a Hepatitis B vaccination (see Appendix D) to protect them whilst in the course of their duties. First aiders who wish to be vaccinated against Hepatitis B should contact the occupational health clinical adviser in the Safety, Health and Wellbeing Service.

### 2.5.2.4 First Aid Co-ordinators

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<sup>4</sup> SHW will maintain a database of all first aiders and will notify individuals of the dates of requalification etc. Whilst SHW will do all they can to make sure this information is accurate and that notifications are sent out on time, it is the responsibility of the first aider to make sure that their accreditation does not lapse.

<sup>5</sup> First responders will need to attend a one day HSE approved course on Emergency First Aid at Work.



The *First Aid Co-ordinator* should carry out the following duties on behalf of the management group:

- reviewing the SHWS assessment of first aid ensuring it meets the risk related to their area of work
- assisting with the recruitment of first aiders
- inducting new first aiders
- distributing information notices to first aiders and feeding back information to SHWS on any administration related to first aid provision
- ensuring first aiders in their area are stocking and replenishing first aid supplies via SHWS
- the display and updating of any first aid notices, with guidance from SHWS

In the House of Lords the role of First Aid Co-ordinators is usually carried out by Principal Attendants.

### **2.5.2.5 First Aid and Building Evacuation**

If possible, first aiders should take their grab-bags with them if the building they are in is evacuated. Regardless of whether they have their first aid grab bag or not, the first aiders should make themselves known to the Incident Control Officer and stand in the vicinity, in case their assistance is needed.

## **3.0 ARRANGEMENTS FOR FIRST AID PROVISION**

### **3.1 Selection of First Aiders**

First aiders are valuable to any workforce. The skills learned during training will increase a person's confidence in working life, help personal development and give satisfaction in knowing that they have the ability to help colleagues. First aiders also have skills which can be used at any time at home, at school or while travelling. Knowing what to do in an emergency can make the difference to a person's recovery and could even save their life. It is an important role and there are criteria which will be used when a member of House of Lords staff wishes to become a first aider. To be an effective first aider, we look for the following:

Personal qualities:

- reliable
- stay calm in an emergency and be fit enough to rapidly attend an incident
- willing to provide first aid to anyone at any time while at work and attend training courses to obtain and retain their qualification
- good communication skills, possess the ability to absorb new knowledge and learn new skills
- cope with stressful and physically demanding emergency procedures and be free from any condition which would impede them from carrying out their duties.

Availability:

- based on site for most of the working day/week (during core 'office hours')
- easily contactable and able to immediately respond to a first aid emergency (non-House employees and students on placement are not able to act as House first aiders.)



- First aiders line management must recognise that nominated staff will have to be able to leave their post at short notice to attend requests for first aid. The line manager must be able to support the first aider in undertaking these duties.

In order to be appointed as a First Aider:

- there must be a vacancy or a need in the department or building where the person works
- the person must hold the relevant first aid qualification
- a senior manager must agree to that individual attending the training course and give permission for the person to act as a first aider to the Houses of Parliament.

### **3.2 Applying to be a First Aider**

House first aiders are provided on a building-by-building basis taking into account the level of risk posed in each building. If a volunteer fulfils the criteria above and wishes to train as a House first aider, their name will be kept on a spreadsheet held by the SHWS. When there is a vacancy in their area the staff member will be contacted first subject to their line manager's approval and asked to undertake relevant training to qualify as a first aider<sup>6</sup>.

SHWS will then ensure that first aiders in the House are still suitable and whether they should be invited to re-qualify. First aiders who regularly refuse requests to undertake first aid duties will not be asked to re-qualify and may be removed from the list of official first aiders.

Offices that appoint external individuals who already hold a current first aid certificate should inform SHWS. SHWS will advise on the suitability of the certificate and if they are needed to act as a first aider on behalf of the House.

### **3.3 First Aid Training and Maintaining Competence**

First Aid courses are organised by the Human Resources Office (HRO) in liaison with the Safety Health and Wellbeing Service.

The initial training to be a first aider involves attending a three day course. Upon successful completion the first aiders receive certification to allow them to practise for three years, after which a re-qualification course becomes necessary. Courses run by the House are compliant with the current Health and Safety (first aid) Regulations 1981 – see Appendix C.

First Aid at Work courses do not cover the use of defibrillators. Attendance on a separate course to enable first aiders to use a defibrillator can be arranged by SHWS.

Every 3 years, first aiders must attend a two day requalification course, if they wish to renew their certificate. These courses are organised by the HRO, and updates the first aid skills for people who need to renew their statutory first aid at work certificate while their **existing certificate is still valid**. If a first aider lets their certificate lapse, they cannot attend the requalification course and instead have to retake the initial three day training course. It is the responsibility of the first aider to make sure that their certificate does not lapse.

Refresher training sessions are also organised by HRO/SHWS. The refresher course provides first aiders with an opportunity to practise and update their skills during their three

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<sup>6</sup> See Appendix X for details of first aid training and refresher courses



year period as a qualified first aider. First aiders must attend refresher training each year and each session will not exceed 3 hours in duration.

“**First Responder**” courses can be organised via SHWS and Learning and Development on request, should a risk assessment identify a need for such a service.

### **3.4 First Aid Equipment**

A kit for clearing up and disinfecting spillages of blood or other body fluids is available via our cleaning contractors. Please call the Attendants Office on x3366 if you require this service.

#### **3.4.1 Eyewash Bottles**

In areas where there is a risk of an eye injury (i.e. Kitchens and workshops), suitable eyewash facilities have been provided containing single use sterile bottles. Any eye wash provision must be correctly maintained e.g. must be in date with no broken seals. These should be checked and replenished by the first aider responsible for the area.

#### **3.4.2 Grab Bags**

House appointed first aiders are issued with a grab bag i.e. a fully stocked first aid kit. Each individual is responsible for the upkeep of the bag and this must be returned to SHWS if the first aider is no longer undertaking these duties. SHWS will replenish stock at the request of the first aider. The first aider will be expected to take the grab bag with him/her to incidents.

#### **3.4.3 First aid Rooms**

First aid rooms are located in some parts of the estate. The room may be used as a rest room for new and expectant mothers but this room must be vacated if needed by a first aider. The room must be kept clean and tidy at all times.

First aiders should notify accommodation services if the room has been used and needs to be cleaned. Cleaners should be contacted immediately any bodily fluids have been spilt in the room as a thorough cleaning will be needed.

Rooms occupied by first aiders, or holding a first aid box for general use should have an appropriate notice displayed on the outside of the entrance door. More information on the contents of a first aid room is given in (see Appendix B).

### **3.5 Information**

Accurate, accessible information on how to obtain first aid is essential for an effective response.

#### **3.5.1 Induction**

All new staff, students and visitors in a department should be provided with information by their line manager at induction on how to obtain first aid assistance.

This information should cover:

- general organisation of first aid in the department
- where to find information on first aiders

- emergency phone numbers.

### **3.5.2 First Aid Notices**

First aid notices should be posted up in communal areas, e.g. lift lobbies, entrance halls and in areas where enquiries on where to find a first aider are likely e.g. reception and messenger desks, general offices, notice boards and the intranet.

Notices should be easily recognisable through use of the standard first aid symbol (a white cross on a green background) and provide information on:

- how to contact the nearest first aider
- the location of the nearest accessible first aid box
- telephone numbers for obtaining emergency assistance

Arrangements for obtaining help outside normal hours (kitchens and workshops) should each have a notice posted up providing information on the nearest first aiders, first aid equipment and how to summon additional help if needed.

## **4.0 MONITORING AND AUDITING ARRANGEMENTS**

Compliance of this policy will be monitored by the Department of Facilities, working with the Safety Health and Wellbeing team, during inspections, on receipt of accident report forms and on discussion with a cross section of people who have duties in the policy.

The policy will be reviewed at regular intervals by SHWS and the House of Lords Health and Safety Committee to ensure it complies with current legislation and best practice.

Managers will also monitor and ensure that there is adequate First Aid cover within their Offices and teams.

Any non-compliance identified by any person on the estate should be reported to the Department of Facilities or SHWS.

**Appendix A**
**ASSESSING FIRST AID NEEDS**

There are a wide range of activities undertaken within the House. The purpose of carrying out assessments of need is to determine the level of first aid provision needed in each building, not just looking at departmental needs in isolation. **As with all risk assessments the first aid assessment of need should be kept under review and it is essential that senior managers look at the assessment to make sure that their needs are covered and let SHWS know of any anomalies or changes to their needs.**

A first aid needs-assessment has been carried out by SHWS. As the parliamentary estate is spread out, provision for first aid is considered on a building basis, but the assessment also reflects the number of occupants, the building size, layout and types of activities carried out in line with first aid at work regulations. Guidance from the Health and Safety Executive has been used as the basis for determining the numbers of first aiders in each location (see table 1).

**Table 1 : Suggested numbers of first-aid personnel to be available at all times people are at work <sup>7</sup>**

Type of Work	No of Employees	Number of first aiders
Low hazard e.g. offices, shops, Libraries	Less than 25	At least one appointed person
	20-50	At least one qualified first aider
	50+	At least one first-aider trained in FAW for every 100 employed (or part thereof)
Higher hazard e.g. light engineering and assembly work, food processing work with dangerous machinery or sharp Instruments	Less than 5	At least one appointed person
	5-50	At least one qualified first aider
	50 +	At least one first-aider trained in FAW for every 50 employed (or part thereof)

Similarly when night work or evening educational or recreational activities are regularly organised the persons in charge of that activity must be aware of the location of the first aid box and means of summoning assistance.

<sup>7</sup> "First Aid at Work: your questions asked" [www.hse.gov.uk/pubns/indg214.pdf](http://www.hse.gov.uk/pubns/indg214.pdf)



**Table 2** : Suggested numbers of fully qualified first aiders to be available on the parliamentary estate during working hours\* (November 2010)

<b>Building</b>	<b>First Aiders</b>	<b>Activity</b>
Norman Shaw South	2	Offices
Tothill Street	4	Offices
Canon Row	3	Offices
Old Palace Yard	2	Offices
Westminster Gym (Canon Row)	1	Gym
7 Millbank	6	Offices and Kitchens
Millbank House	4	Offices, Kitchen
1 Parliament Street	3	Kitchens, offices, workshops
Norman Shaw North	3	Offices, workshops
Portcullis House	8	Offices, kitchens, workshops
Palace of Westminster**	50	Kitchens, Offices, Workshops

\*actual numbers of first aiders will be in excess of the figures quoted above, to allow for absence etc

\*\* many of the Metropolitan Police Service are first aiders and can respond to emergencies, particularly out of hours.

SHWS will complete a formal review of this assessment on an annual basis, or earlier where circumstances change e.g. increase in staff numbers, relocation of an Office or a first aider or following an accident which highlights the need for more first aiders.

Where Offices/Teams have staff who work on their own/remotely/out of hours or regularly travel as part of their job, the first aid co-ordinator should assess the needs and work with the management group and SHWS to make special arrangements for these staff.

Staff working outside of normal working hours at the House must make sure that they know the location of an accessible first aid box and means of summoning help from security or duty staff.

**Appendix B****First Aid Room**

So that the facilities within the first aid/rest room is not abused it is recommended that access to these rooms are restricted.

To be effective the room should:

- Have a telephone (to dial internally) and display the contact numbers for local first aiders, reception and security
- Be large enough to hold a couch, desk, and chair and be easily accessible by stretchers and wheelchairs
- Have washable surfaces and adequate heating, ventilation and lighting
- Be kept clean, tidy and available and accessible during normal working hours.

Typical facilities and equipment:

- Adequate supply of first aid materials
- Couch and blankets
- Desk and chair
- Sink with hot and cold running water – if this is not possible then following alternative arrangements must be made
- Drinking water with disposable cups (via a water cooler)
- Hand sanitiser and paper towels
- Suitable and safe disposal containers for clinical waste

In addition, the first aider co-ordinators in the building should ensure that first aiders have responsibility for the room and its contents so that it is effectively managed.

**Contents of First Aid Grab Bag**

There is no mandatory list of items to put in a Grab Bag. It depends on what you assess your needs to be. As a guide, where work activities involve low hazards, a minimum stock of first-aid items in the bags supplied by SHWS is:

- a leaflet giving general guidance on first aid
- 20 individually wrapped sterile plasters (assorted sizes), appropriate to the type of work
- two sterile eye pads
- four individually wrapped triangular bandages, preferably sterile;
- six safety pins
- two large, individually wrapped, sterile, unmedicated wound dressings
- six medium-sized, individually wrapped, sterile, unmedicated wound dressings
- a pair of latex free disposable gloves).

It is recommended that you don't keep tablets and medicines in the first-aid Grab Bag.

**Appendix C****First Aid Training - Initial Training (3 day course)**

The House runs courses at set times during the year. The syllabus will give first aiders sufficient knowledge and confidence to deal with a first aid emergency in the workplace.

**Course content**

- Accidents and illness
- Using a first aid kit
- Simple record keeping
- Treatment of an unconscious casualty
- Heart attacks
- Resuscitation
- Shock
- Choking
- Bleeding
- Burns and scalds
- Poisoning
- Fractures
- Seizures
- Asthma
- Severe allergic reaction
- Eye injuries
- Low blood sugar
- Fainting.

**Course duration**

Three days. The course is usually offered as three consecutive days, however, we also offer it as a split course over several weeks at some centres.

**Assessment and certification**

After completing a final assessment successful candidates receive an HSE approved certificate valid for three years.

This course is legally compliant with the current Health and Safety (first aid) Regulations 1981. Upon successful completion of this three day course, first aiders receive certification to allow them to practise for three years after which a re-qualification course becomes necessary.

**Appendix D****Hepatitis B**

Hepatitis is a general term which means inflammation of the liver. Hepatitis B is caused by infection with the hepatitis B virus (HBV). This virus can be found in body fluids. This virus can be transmitted whenever body fluids come into contact with the broken skin of an uninfected person.

First aiders are advised to have a hepatitis B vaccine as it is possible that they could come into contact with body fluids when treating a casualty.

The vaccine is very safe and works very well to prevent the disease. This vaccine has successfully been proven to prevent infection in people exposed to the virus. After having the vaccine, a person will develop protective antibodies and subsequent immunity to hepatitis B virus infection.

A total of 3 doses of the vaccine are given over several months.



**Appointment Letter**

**Appendix E**

To: «Initial» «Surname»  
«Department»

DATE

cc. Department file copy

Designated First Aider

1. You are appointed a Designated First Aider for BUILDING LOCATION until DATE. The duties of Designated First Aiders include:
  - Maintaining your first aid Grab Bag for which you have agreed responsibility, including checking that items are in date and that sufficient stocks are maintained. Stocks are available on request from the Safety, Health and Wellbeing Service
  - Advising the Head of Department and management on matters relating to first aid requirements of staff in their area
  - Providing first aid to injured persons when requested. A Treatment Record Form must be completed and forwarded to the Safety, Health and Wellbeing for retention
  - Providing first aid cover for parliamentary events, if requested
  - Ensuring that adequate first aid cover is maintained in your building as far as possible
  - Attending relevant training course held during the year, details of which will be notified
  - Such other duties as assigned and detailed in the first aid policy and procedures

Signed

Notes:

- A. A Qualified First Aider who renders assistance to an injured person within the Parliamentary Estate is recognised by the House as acting in an authorised capacity in the event of any claim for compensation by the injured person, provided that the Qualified First Aider acts in a reasonable manner.
- B. Qualified First Aiders are advised when in doubt about the extent of injuries of an individual to call an ambulance or taxi. Where an individual refuses aid, that fact must be documented on the Treatment Record Form.





First aid treatment form

Appendix F

FIRST AID TREATMENT RECORD
Medical in Confidence when Completed

Form with sections: 1. Name of First Aider, Department; 2. Casualty's details (Name, Address, Job Title & Dept, Medical History); 3. About the injury and treatment (Was first aid needed, Accident form completed, Date and Time, Treatment details); 4. Outcome (Return to work, Advised to go home, etc.); Signature of First Aider, Report Date; and final questions about item replacement and training.

**House of Lords**  
**Health and Safety Policy (HSP) 04/12**  
**Control of Substances Hazardous to Health**  
**(COSHH)**

This policy forms part of, and should be read in conjunction with the House of Lords Health and Safety Policy. It has been agreed by the Health and Safety Committee.

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## Document Control

### Change Record

Version	Status	Date	Reviewers Name/s & Position/Location
0.1	Draft1	02/03/2012	Marianne McDougall, SHWS
0.2	Draft 2	01/10/2012	Jon Oliver, HOL POS
1.0	V1	23/10/2012	Jon Oliver, HOL POS
2.0	V2	01/11/2012	Marianne McDougall, SHWS



## 1.0 INTRODUCTION

This policy explains the arrangements in place across the House of Lords to protect employees, contractors and other persons who may be exposed to substances hazardous to health that are generated out of, or are used in connection with our work.

The House of Commons and House of Lords Code of Practice for the implementation of the COSHH Regulations has operated for many years, so managers and staff should already be aware of what is required to ensure that risks are controlled. This policy has been revised to reflect the view that any risk assessments should focus on 'practical steps to protect people from real harm and not bureaucratic back covering'<sup>1</sup>. It also introduces the new electronic system to record COSHH assessments.

Managers should review their existing arrangements as soon as reasonably practicable in the light of this revised policy, and thereafter on an annual basis to ensure they fully control the use of hazardous substances. The review will ensure the use of any substance hazardous to health is controlled and that staff who undertake assessments are identified and provided with any necessary training or re-training.

## 2.0 POLICY

### 2.1 Legal Requirements

The COSHH Regulations apply to any work involving a substance hazardous to health; the definition is given in Appendix A. The COSHH Regulations cover all work activities using such substances, including for example, workshop procedures, building and maintenance work, cleaning, catering and office work. Many industrial, commercial and domestic materials and preparations which are normally referred to by a trade or brand name, contain substances hazardous to health and their use is subject to the COSHH Regulations.

The Regulations apply to the use of hazardous substances in connection with work. For example:

- Work activities using adhesives, paints, cleaning agents, toner.
- Substances generated during work activities, e.g. fumes from soldering, mists and germs in metalworking fluids.
- Naturally occurring substances, e.g. legionella or leptospirosis.

#### 2.1.1 Policy Statement

To help us to provide safe working conditions, the risks of all activities involving the use of a substance hazardous to health, by parliamentary staff, will be assessed and recorded before that substance is used or generated in the workplace. Parliamentary staff will produce the assessments using the COSHH module of the e-safety system.

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<sup>1</sup> Bill Callaghan, Chair of the Health and Safety Commission, launched the 'Sensible Risk Management Principles' in August 2006,

Records of all substances which are hazardous to health and stored/used on the parliamentary estate will be available on the e-safety system, including associated material safety data sheets for such items.

Managers will ensure that:

- Staff and contractors are provided with appropriate information on the hazardous materials they are working with and/ or may encounter and the level of risk to which they may be exposed.
- Everyone involved in the risk assessment process receives suitable training.

The assessment process will identify risks that need priority attention, so resources can be allocated in the most beneficial way.

## **2.2 What this means in practice**

### *2.2.1 What is a COSHH assessment?*

A COSHH assessment should make people stop for a moment before they start a particular piece of work and think through the safety aspects of what they plan to do, from the receipt and storage of the materials to the disposal of the end products and waste. They can then judge what risks are involved and ensure that any precautions necessary for their own safety and that of others are worked out and implemented before they begin.

It is important to bear in mind that, even though it is because a substance hazardous to health is to be used that a COSHH assessment is necessary, **it is the work to be done, that is to say the process involving the hazardous substance, and not the substance itself, that is the subject of the assessment.** In many circumstances, an assessment of the risks from substances hazardous to health can be part of the general risk assessment process, and separate documentation will not be needed. Specialist staff in SHWS will give further guidance to managers and risk assessors on the best way to record these assessments on request.

### *2.2.2 Who does the assessment?*

Heads of department should nominate appropriate individuals to assess the risks related to substances hazardous to health. In most cases, departments will have risk assessors<sup>2</sup> or safety co-coordinators who will be able to do these assessments or to adapt the generic COSHH assessments produced by SHWS.

SHWS safety advisers are not automatically responsible for completing COSHH assessments, but they will give assistance to management groups and where required will recommend suitable preventative and protective risk control measures. SHWS may complete the assessments if a task is particularly complex or sensitive.

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<sup>2</sup> see sections 2.3.2- 2.3.6 of HSP 02/12, *Risk Assessment*, for more information.



## 2.2.3 *How is the assessment recorded?*

Assessments must be recorded on COSHH assessment pages of the parliamentary e-safety system <http://intranet.parliament.uk/employment/health-safety-welfare/> The module guides assessors through the process in three stages:

- Assessment of the hazard and identification of those at risk.
- Identification of the control measures that need to be put in place to reduce or eliminate risk.
- Assignment of actions to implement the control measures – note that in many cases actions will fall to line managers to complete.

The e-safety system holds the central record of all the COSHH assessments produced by parliamentary staff. Any assessments produced by third parties may also be uploaded onto the system. This enables information to be exchanged across Parliament, avoiding duplication of effort and creating consistency. It will also:

- Identify common assessments, allowing best practice to be shared through a consistent approach and easy exchange of information.
- Highlight areas that still require assessment.
- Highlight assessments that are due for review.
- Enable tracking of outstanding actions arising from the COSHH assessment.
- Target key areas for audit.
- Provide an effective monitoring tool for senior management.

More information is available on the “frequently asked questions” pages of the SHWS intranet.

## 2.3 **Duties**

The COSHH assessment process is not about creating huge amounts of paperwork, but rather about taking sensible measures to control the risks in our workplace. It is simply a careful examination of what, in our work, could cause harm, so that we can weigh up whether we have taken enough precautions or should do more to prevent anything untoward happening.

### 2.3.1 *Everyone working on the Parliamentary estate*

Everyone working on the parliamentary estate should make sure they understand the assessments relating to their work and follow any procedures which are in place to reduce the risk of harm. All staff should also:

- Take part in any training programmes.
- Report any problems to their line manager or supervisor.



- Report any symptoms of possible work related ill-health to their line manager.

### 2.3.2 *Senior Managers*

Senior managers such as Directors, Heads of Department or Service etc. have a key role in ensuring that COSHH assessments are completed for all tasks within their areas of control and that they are informed of any significant risks which may be identified.

They are responsible for compliance with this policy and should ensure that

- They know if substances hazardous to health are used in their area of command.
- Their risk assessors are competent to carry out COSHH assessments.
- Their departmental arrangements to control those risks are adequate and significant risks are given priority for action.
- The assessments are sufficient and the management responses fit for purpose in the particular circumstances of their department.

### 2.3.3 *Line Management Responsibilities*

Managers/supervisors are responsible on a day to day basis for ensuring the implementation of this policy for the activities within their control. Not all managers need to be expert at assessing risk, but they do need to understand what may cause their staff harm and what actions need to be taken to prevent ill health.

If you are a manager, you should ensure that:

- You have access to a competent COSHH assessor.
- COSHH assessments have been completed for work activities involving contact with substances hazardous to health and that your staff understand the key points of the assessment.
- Your staff work safely and follow any procedures which may have been developed as a result of the assessment.
- You complete any actions which have been identified by the assessment process and you report back to your senior manager accordingly.
- You monitor the assessment and review it on an annual basis or when significant changes in techniques, personnel or location take place.

To help you to manage the risks, you may need some training, or you may identify a training need for your staff. SHWS and L&D run a series of short courses and seminars to help you. Look on their intranet pages for more detail.

You will also find more guidance in a series of information sheets available on the SHWS intranet.



## 2.3.4 COSHH (Risk) Assessors

Assessors should have been nominated by management groups to complete risk assessments for their work areas, to adapt existing generic assessments and to assist managers to carry out periodic reviews.

In the majority of circumstances the risk assessor should be capable of assessing the risks from the use of substances hazardous to health, albeit they may need further training. SHWS should be contacted for guidance if an assessor feels that any situation is complex and beyond their experience, training, qualifications and knowledge.

**It is a manager's responsibility to take decisions based on the findings of the assessments and to implement those decisions.**

## 2.3.5 Competence and Training of COSHH Risk Assessors

Managers who nominate risk assessors need to be certain that the individual has the knowledge and skills to correctly perform their role. It is usually inappropriate for very junior or inexperienced workers to do the assessments since they may not have the necessary knowledge and skills.

Risk assessors should be able to make informed judgments about the risks associated with a situation or activity; they should:

- Have the necessary technical skills to assess the risks to work.
- Have knowledge of relevant rules and procedures.
- Have the ability to identify and evaluate the risks they/their colleagues are exposed to, and to suggest ways in which risks can be controlled.
- Know when to seek guidance from the Safety, Health and Wellbeing Service.

The House of Lords will provide training for staff carrying out risk and COSHH assessments - the type of training will depend on the complexity of the work and will explain how to record the assessments on the e-system. Assessor courses are currently provided centrally, and individuals who have attended this course will be competent to carry out risk assessments for their area of work (and other similar areas within the House) and to adapt existing generic assessments. Additional professional advice is available from SHWS for the more complex and technical areas of risk assessment.

Further guidance and practical information on how to carry out risk and COSHH assessments is given in the SHWS document Health and Safety Risk Management Guidance.





## 2.4 Safety, Health and Wellbeing Service

The specialist advisers in SHWS provide advice and guidance on legislative changes and good practice and, where necessary, provide expert advice to departments.

SHWS will:

- Develop and review the COSHH assessment policy, key procedures and guidance documentation.
- Produce generic COSHH assessments for common tasks, which risk/COSHH assessors can adapt to cover the circumstances of their workgroup.
- Monitor COSHH assessment documentation held on the e-system.
- Monitor existence and quality of COSHH assessments held on the e-system.
- Assist workgroups to find relevant standards and good practice guidance to aid COSHH assessment, on request.
- Assist with the identification and implementation of safe systems of work when required.
- Provide specialist support where required.

## 2.5 COSHH Assessments relating to Contractors, the self-employed or Members

**Contractors** must ensure that:

- Significant risks identified by their COSHH assessments are communicated to the appropriate parliamentary manager responsible for the contract or project.
- Adequate measures are taken to mitigate the risks to their own staff as well as parliamentary staff, Members and visitors.

It is also expected that safety method statements/safe systems of work will include risk control measures for substances hazardous to health, where applicable. This will be essential information for a permit to work application.

Contractors are required to co-operate fully with our procedures. SHWS and other managers within Parliament must be given copies of relevant COSHH assessments and associated safe systems of work, on request. This may be at any time in the life of a contract.

**Contract Managers** must ensure that the contractors are aware of their duties described in the previous paragraph. They must also let their contractors know of any risks to health identified by parliamentary assessors which may have an impact on the contractors work activities.

**Project leaders** are responsible for ensuring that all personnel who are working on particular tasks or groups of tasks are aware of the risks to health for that activity.



**Self Employed Persons and Members** are responsible for undertaking COSHH assessments for any activities under their control. They will be able to access the assessments on the e-system and may wish to use the generic risk assessments produced by SHWS as a starting point.

## 2.6 Record Keeping

Unless the COSHH assessments contain personal information, all will be available to view by parliamentary staff, via the e-safety system on the intranet<sup>3</sup>. Each department will be able to maintain an up-to-date COSHH assessment log on the e-system and this will feed in to the central record of all the risk assessments carried out by House staff.

The purpose of the central COSHH assessment database is to enable information to be exchanged within departments and across parliament, avoiding duplication of effort and creating consistency. The database will also:

- Identify common assessments, allowing best practice to be shared through a consistent approach and easy exchange of information.
- Highlight areas that still require assessment.
- Highlight assessments that are due for review.
- Track outstanding actions arising from the risk assessment.
- Target key areas for audit.
- Provide an effective monitoring tool for senior management and the Safety, Health and Wellbeing Service.

## 3.0 GUIDANCE

Guidance in support of the COSHH and risk assessment policy is held on the SHWS intranet pages. There is a frequently asked questions page, and further information related to the risk assessment process itself.

## 4.0 MONITORING PERFORMANCE

Monitoring of risk assessment must be carried out on a local and organisational level.

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<sup>3</sup> *COSHH assessments which contain personal information must still be produced on the e-safety system, but there is a facility to keep these assessments private.*



## 4.1 Organisational level

SHWS will audit the arrangements in place assessing the risks which may arise from the use of substances hazardous to health and will report findings to management groups, the Safety Committee and the Parliamentary Safety Assurance Board.

## 4.2 Local (Management) Level

Departments should have a programme of safety inspections of their areas, facilities, and assets. they should also have a programme of monitoring the quality and applicability of the COSHH assessments relevant to their activities.

Heads of Department and other senior managers should ensure that they have nominated someone to:

- Monitor that actions are being completed, relevant standards are being achieved, and that necessary safety records are being kept.
- Report on outcome and implication of this programme to the Health and Safety Committee.
- Maintain a record of outstanding safety issues and actions.
- Keep relevant managers informed of outstanding actions and the priority and timescale recommended for resolution of these actions.

Heads of Department etc may allocate these duties to their local safety co-ordinator and/or risk assessor.

SHWS will also monitor performance against the standards set out in the safety policy. The methods employed include:

- Evaluation of the incidence and nature of accidents, dangerous occurrences, and cases of work-related ill health.
- Tours and inspections of workgroups.
- Discussions with safety coordinators regarding progress on objectives.

## 4.3 Role of House Safety Committees and Safety Co-ordinators

SHWS and safety co-ordinators will monitor performance against the standards set out in the safety policy and associated documentation. The methods employed include:

- Evaluation of COSHH assessments.
- Discussions with safety co-ordinators regarding progress on objectives.

The Safety Committee will scrutinise the results of any performance monitoring at each meeting.

#### **4.4 Management review**

The Parliamentary Safety Assurance Board reviews performance annually, taking account of an Annual Report submitted by the Head of SHWS. The review is used to inform the identification of improvement objectives and plans.

The following issues will be considered:

- Overall safety performance of departments, including completion of COSHH assessments, outstanding actions and general management activity.
- Control of risks with high impact potential.
- Profile of accidents, dangerous occurrences, and work-related ill health.
- Level of input from the safety co-ordinators and risk/COSHH assessors.

**APPENDIX A****DEFINITION OF A SUBSTANCE HAZARDOUS TO HEALTH**

No work involving a substance hazardous to health may be undertaken until a suitable and sufficient COSHH assessment has been carried out. In all but the most straightforward cases (e.g. the use of Tipp-Ex), the assessment should be recorded, using the COSHH assessment forms on the e-safety system.

Substances hazardous to health are defined as:

- (a) Substances classified as **very toxic, toxic, harmful, corrosive or irritant** in Part I of the Approved List, which lists substances that are dangerous for supply within the meaning of the Chemicals (Hazard Information and Packaging for Supply) Regulations (CHIP Regulations). (The appropriate term and/or the corresponding hazard symbol should appear on the package or container in which the material is supplied and on any accompanying Safety Data Sheet).
- (b) Substances with a **WEL (Workplace Exposure Limit)**. These substances workplace exposure limits are listed in HSE Guidance Note EH 40, Occupational Exposure Limits (revised annually).
- (c) **Micro-organisms, which create a hazard to the health of any person.**
- (d) **Dust** of any kind, when present at a substantial concentration in air.
- (e) Any other substance, which creates a comparable hazard to health to any of the above.

This means that substances hazardous to health include:

- (i) Substances having long-term (chronic) effects, such as carcinogens, cumulative poisons, etc., as well as those producing immediate (acute) effects.
- (ii) Mixtures and preparations as well as single substances.
- (iii) Commercial products, such as cleaning materials, paints and varnishes, pesticides, etc., which contain substances hazardous to health.
- (iv) End-products and by-products of processes as well as starting materials.
- (v) Allergens, respiratory and skin sensitisers.
- (vi) Hazardous impurities in other substances.
- (vii) Asphyxiants.

It should be noted that the COSHH Regulations do not apply to the use of the large number of substances, which do not fall within the categories above. Nor do they apply to substances, which are dangerous solely by virtue of their physical properties (e.g. radioactive, flammable, explosive, high or low temperature, high pressure). Nevertheless an assessment of risks and of the precautions required to minimise those risks, along similar lines to a COSHH assessment, is recommended as good practice in any hazardous situation

Hazardous substances which are the subject of other statutory instruments:

- Control of Lead at Work Regulations 1998
- Control of Asbestos at Work Regulations 2002

## **APPENDIX B: DEFINITIONS**

**Hazard** – Something that has the potential to cause harm including ill health, injury, loss of product and/or damage to plant and property e.g. substances, machines, methods of work etc.

**Risk** – The likelihood of harm occurring and its severity (Severity x likelihood).

**Risk assessment** – A careful examination of what in your work could cause harm to people, so you can weigh up whether you have taken enough precautions or should do more to prevent harm.

**Dynamic risk assessment** – In some cases there may be unexpected or short temporary changes that require amendments to be made to risk assessment control measures. Examples could be a change in weather conditions or breakdown of heating. To avoid carrying out a new assessment the "comments" section on the risk assessment form can be used to document any changes.

**Significant risk** – Something with the potential to cause injury or illness.

**So far as is reasonably practicable** – Assessment of risk should be weighed against the time, effort involved, cost and difficulty of doing anything about it. The risk of not instituting safety measures or controls can be an option if the overall benefit in terms of reducing accidents or improving health and safety conditions is minimal compared with the time, effort, cost and inconvenience of introducing the measures.

**Suitable and sufficient risk assessment** – The level of detail in a risk assessment should be broadly proportionate to the risk and should:

- Ensure all relevant hazards are addressed.
- Address what actually happens in workplace or during work.
- Ensure all groups affected are considered taking account of groups who are particularly at risk.
- Take account existing preventative or precautionary measures and identify further measures.

**Risk controls** – Workplace precautions, for example physical safeguards, containment of airborne contaminants and noise, safe systems of work, competency and personal protective equipment.



**Risk control systems** – Arrangements that ensure the workplace precautions are implemented and kept in place e.g. designation of responsibility, training, supervision, work equipment, maintenance, performance measurement, audit, briefing and control of contractors.

# House of Lords

## Health and Safety Policy (HSP) 02/12

### Assessment of Safety Risks

This policy forms part of, and should be read in conjunction with, the House of Lords Health and Safety Policy. It has been agreed by the Health and Safety Committee.

It should also be read in conjunction with the House of Lords Risk Management Guide.

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## Document Control

### Change Record

Version	Status	Date	Reviewers Name/s & Position/Location
0.1	Draft 1	18/11/2011	Marianne McDougall, SHWS
0.2	Draft 2	10/12/2011	Marianne McDougall, SHWS
0.3	Draft 3	24/02/2012	Marianne McDougall, SHWS
0.4	Draft 4	02/03/2012	Marianne McDougall, SHWS
0.5	Draft 4	01/10/2012	Jon Oliver, HOL POS
1.0	V1	23/10/12	Jon Oliver, HOL POS
1.1	V2	01/11/12	Marianne McDougall, SHWS

## 1.0 INTRODUCTION

The House of Lords aims to provide a safe and healthy work environment where all risks are well managed and reduced to an acceptable level by taking reasonable precautions. Our safety policies adopt a sensible approach to risk management, based on the principles listed below, reflecting the Health & Safety Executive's view<sup>1</sup> that risk assessment should focus on 'practical steps to protect people from real harm and not bureaucratic back covering'.

### **Sensible risk management is about:**

- Ensuring that workers and the public are properly protected.
- Providing overall benefit to society by balancing benefits and risks, with a focus on reducing real risks – both those which arise more often and those with serious consequences.
- Enabling innovation and learning not stifling them.
- Ensuring that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust action.
- Enabling individuals to understand that as well as the right to protection, they also have to exercise responsibility.

### **Sensible risk management is NOT about:**

- Creating a totally risk free society.
- Generating useless paperwork mountains.
- Scaring people by exaggerating or publicising trivial risks.
- Stopping important recreational and learning activities for individuals where the risks are managed.
- Reducing protection of people from risks that cause real harm and suffering.

Risk assessment is a fundamental part of managing health and safety in Parliament; it provides sound economic benefits as well as satisfying legal requirements, but its clearest purpose is to protect the health and safety of people at risk. The findings of risk assessments should be used in planning activities and delivering services.

This policy explains the way in which we:

- Are accountable for managing health and safety risks.
- Evaluate significant risks to which staff, visitors and others are exposed.
- Identify those people who are likely to be exposed to the risk.
- Select realistic and practical precautions and control measures.
- Document our assessments and action plans.

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<sup>1</sup> Bill Callaghan, Chair of the Health and Safety Commission, launched the 'Sensible Risk Management Principles' in August 2006.



## 2.0 POLICY

### 2.1 Legal Requirements

Risk assessment is a valuable tool in helping to plan work, develop procedures, inform and train staff and reduce the number of accidents in the workplace. It is also a statutory requirement. Health and safety legislation cannot be enforced against the House in the same way as other public and private sector organisations. We have stated in our safety policy that we will meet our legislative obligations as if these applied to us and we will properly manage safety risks to staff, contractors and anyone who visits.

The requirement for a general assessment of risk is established in the Management of Health and Safety at Work Regulations (MHSWR) 1999. These regulations require employers to assess the risks to the health and safety of anyone who may be affected by their undertakings. MHSWR is very wide ranging and comprehensive in its coverage of places, situations, activities and other sources of workplace risk. The law does not expect employers to eliminate all risk, but we are required to protect people as far as reasonably practicable in the circumstances and we should regularly monitor and review the assessments to make sure we are “doing it right”.

There are also specific requirements for risk assessment in other regulations which place additional duties on the employer, usually in relation to people affected by the work. These regulations cover such diverse topics as hazardous substances, noise, working at height, manual handling, computer use, and confined spaces; a list of those which are likely to be applicable to our work is given in Appendix A.

#### 2.1.1 Policy Statement

To help us to provide safe working conditions, the risks of all activities, on and off site, which may affect the health and safety of our staff, visitors and others who use the estate will be assessed. The risk control measures that are implemented will be what is reasonably practicable in the circumstances and will be regularly monitored and reviewed.

In accordance with the Risk Management Guidance of both Houses, risks are owned by the Department best able to manage them, at the lowest level practicable<sup>2</sup> (Appendix B). Each Department is to ensure that risks are captured routinely by managers across the organisation and contribute to the overall decision making process by managers.

To do this, departments must:

- Identify the hazards associated with its activities and assess the risks arising from those hazards or adapt generic risk assessments produced by the Safety, Health and Wellbeing Service.
- Identify, implement, monitor and maintain control measures to eliminate or minimise the risks.
- Record the risk assessments on the e-health and safety database and include significant findings of the Departmental Risk Register.

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<sup>2</sup> Chapter 2: Risk Management Policy. House of Commons Risk Management Handbook, January 2011.



- Provide staff, contractors, visitors and others who use the estate with sufficient and appropriate information on the hazards they are working with and/or may encounter and the level of risk to which they may be exposed.
- Ensure that everyone involved in the risk assessment process receives suitable training.

Assessments of any work activity or environment will identify risks that need priority attention, so resources can be allocated in the most beneficial way. In some cases more detailed or specific risk assessments are required (such as those related to workshops, working at height, manual handling and display screen equipment).

## 2.2 What this means in practice

### 2.2.1 *What is a risk assessment?*

A risk assessment is a careful examination of the work activities that could cause harm to people, so that an employer can weigh up whether they have taken adequate precautions or should do more to prevent harm.

### 2.2.2 *Who does the assessment?*

Heads of Department should nominate appropriate individuals to assess workplace risk for their workgroup(s) or to adapt the generic risk assessments produced by SHWS. These risk assessors should have sufficient knowledge and experience to be able to make valid judgements (see sections 2.3.2- 2.3.6).

SHWS safety advisers are not automatically responsible for carrying out risk assessments, but they will give assistance to management groups and where required will recommend suitable preventative and protective risk control measures. SHWS may complete risk assessments if a task is particularly complex or sensitive. Over time, the Safety, Health and Wellbeing Service will produce a range of generic risk assessments to assist managers in completing their own documentation. The content of these generic assessments should be added to and edited as required, by each management group.

### 2.2.3 *How is the assessment recorded?*

Assessments must be recorded on risk assessment pages of the parliamentary e-safety system. <http://intranet.parliament.uk/employment/health-safety-welfare/>

The module guides risk assessors through the process in three stages:

- Assessment of the hazard and identification of those at risk.
- Identification of the control measures that need to be put in place to reduce or eliminate risk.
- Assignment of actions to implement the control measures – note that in many cases actions will fall to line managers to complete.

The risk likelihood/risk impact scale shown in Appendix D will be used in the risk assessment process.



The e-safety system holds the central record of all the risk assessments produced by parliamentary staff; risk assessments produced by third parties may also be uploaded onto the system. This enables information to be exchanged across Parliament, avoiding duplication of effort and creating consistency.

It will also:

- Identify common assessments, allowing best practice to be shared through a consistent approach and easy exchange of information.
- Highlight areas that still require assessment.
- Highlight assessments that are due for review.
- Enable tracking of outstanding actions arising from the risk assessment.
- Target key areas for audit.
- Provide an effective monitoring tool for senior management.

More information is available on the “frequently asked questions” pages of the SHWS intranet.

## **2.3 Duties**

Risk assessment is not about creating huge amounts of paperwork, but rather about taking sensible measures to control the risks in our workplace. It is simply a careful examination of what, in our work, could cause harm, so that we can weigh up whether we have taken enough precautions or should do more to prevent anything untoward happening.

### *2.3.1 Everyone working on the parliamentary estate*

Everyone working on the parliamentary estate should make sure they understand the assessments relating to their work and follow any procedures which are in place to reduce the risk of harm. All staff should also:

- Take part in any training programmes.
- Report any problems to their line manager or supervisor.
- Report all work related accidents or symptoms of ill-health to their line manager.

### *2.3.2 Senior Managers*

Senior managers such as Directors, Heads of Department or Service etc. have a key role in ensuring that risk assessments are completed for all tasks within their areas of control and that they are informed of any significant risks which may be identified. They are responsible for compliance with this policy and should ensure that:

- They are aware of the principal hazards and risks present in their area of command.
- Their departmental arrangements for risk assessment and control are adequate.
- Risk assessments are sufficient and the management responses fit for purpose in the particular circumstances of their department.
- Significant risks identified in the risk assessment are given priority for action.



- They have sufficient competent risk assessors appointed to cover the hazard and risk profile of their work activities.
- They are aware of the actions identified by their risk assessor(s) and that they nominate individuals within their management chain to complete the actions within a reasonable timescale.
- Complex or high risk activities are included in the Business Risk Register, following the criteria published for business risk<sup>3</sup>.
- There are arrangements in place to let contractors working for their Department know of significant findings of any relevant parliamentary risk assessments.

*Directors: Facilities, Estates, and PICT.* In addition to their responsibilities as senior managers, these Directors must ensure that there are arrangements in place to inform contractors of the significant findings from the risk assessments carried out for the activities affecting the contractor, in the area in which the work is to be carried out.

### 2.3.3 Line Management Responsibilities

Managers and supervisors are responsible on a day to day basis for ensuring the implementation of this policy for the activities within their control. Not all managers need to be expert at assessing risk, but they do need to understand what may cause their staff harm and what actions need to be taken to prevent any injuries or ill health.

If you are a manager, you should ensure that:

- There is either a nominated risk assessor within your section, or you have access to a risk assessor.
- The work your staff do has been risk assessed and that your staff understand the key points.
- You seek further advice and assistance from your assessor if anything on the assessment is not clear to you or if you think a more detailed assessment is needed.
- Your staff work safely and follow any procedures which may have been developed as a result of the assessment.
- You complete any actions which have been identified by the risk assessment process and you report back to your senior manager accordingly.
- You monitor the assessment and review it on an annual basis or when significant changes in techniques, personnel or location take place.

To help you to manage the risks, you may need some training, or you may identify a training need for your staff. SHWS and L&D run a series of short courses and seminars to help you. Look on their intranet pages for more detail.

You will also find more guidance in a series of information sheets available on the SHWS intranet.

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<sup>3</sup> See Annex 5; *Guide to Completing a Risk Register, House of Commons Risk Management Handbook, January 2001*



## 2.3.4 Health and Safety Risk Assessors

Risk assessors are nominated by management groups to complete risk assessments for their work areas, to adapt existing generic assessments and to assist managers to carry out periodic reviews. They will need to consult work colleagues and trade union safety representatives when completing the risk assessment, since they may have more knowledge of the work and may be able to offer practical solutions in controlling risk. In most circumstances, risk assessors will also be able to carry out assessments related to the control of substances hazardous to health (COSHH assessments). Further information is given in the COSHH policy, HSP4/12.

Risk assessments should be carried out before new tasks are started and must be recorded on the parliamentary e-safety system. Assessors need to decide which situations (workplaces and work activities) would also justify additional specific risk assessments, such as:

- Manual Handling (lifting up, putting down and carrying a load).
- Display Screen Equipment (computing and word processing).
- Workshop equipment (woodworking machinery etc).
- Hazardous substances.

In more complex risk assessments it may be necessary to draw on the expertise of several individuals to ensure that all aspects of the work are adequately covered. Where there are gaps in this knowledge, appropriate help and advice should be sought from safety co-ordinators or colleagues or the Safety, Health and Wellbeing Service.

SHWS have produced generic risk assessments to assist with the risk assessment process and to provide a basis for workgroups to consider their specific circumstances. Some assessments may not be relevant to all workgroups, others may need customising to suit specific locations and/or work activity and others may not need changing at all.

The generic assessments will need to be adapted by a risk assessor from each workgroup. The assessor will need to consider the generic hazards, risks and control measures listed on the form and add any specific items identified and decide whether or not anything needs to be amended.

Risk assessors will need to allocate actions to managers and staff within their own workgroup. The risk assessor may need to discuss this with a senior manager before finalising the documentation.

**It is a manager's responsibility to take decisions based on the findings of the assessments and to implement those decisions.**

## 2.3.5 Competence and Training of Risk Assessors

Managers who nominate risk assessors need to be certain that the individual has the knowledge and skills to correctly perform their role. It is usually inappropriate for very junior or inexperienced workers to do the assessments since they may not have the necessary knowledge and skills.



Risk assessors should be able to make informed judgments about the risks associated with a situation or activity.

They should:

- Have the necessary technical skills to assess the risks to work.
- Have knowledge of relevant rules and procedures.
- Have the ability to identify and evaluate the risks they/their colleagues are exposed to, and to suggest ways in which risks can be controlled.
- Know when to seek guidance from the Safety, Health and Wellbeing Service.

The House of Lords will provide training for staff carrying out risk assessments. The type of training will depend on the complexity of the work and will explain how to record the assessments on the e-system. Risk assessor courses are currently provided centrally, and individuals who have attended this course will be competent to carry out risk assessments for their area of work (and other similar areas within the House) and to adapt existing generic assessments. Additional professional advice is available from SHWS for the more complex and technical areas of risk assessment.

Further guidance and practical information on how to carry out risk assessments is given in the SHWS document, Health and Safety Risk Management Guidance.

## **2.4 Safety, Health and Wellbeing Service**

The specialist advisers in SHWS provide advice and guidance on legislative changes and good practice and, where necessary, provide expert advice to departments.

SHWS will:

- Develop and review the risk assessment policy, key procedures and guidance documentation.
- Produce generic risk assessments for common tasks, which risk assessors can adapt to cover the circumstances of their workgroup.
- Monitor risk assessment documentation held on the e-system.
- Monitor existence and quality of risk assessments held on the e-system.
- Assist workgroups to find relevant standards and good practice guidance to aid risk assessment, on request.
- Assist with the identification and implementation of safe systems of work when required.
- Provide specialist support where required.
- Liaise with the Risk Facilitator in OCE, to ensure that the health and safety risk management arrangements are joined up with the wider risk management arrangements of both Houses.





## 2.5 Risk Assessments related to Contractors, the self employed or Members of Parliament

**Contractors** must ensure that:

- Significant risks identified by their risk assessments are communicated to the appropriate parliamentary manager responsible for the contract or project.
- Adequate measures are taken to mitigate the risks to their own staff as well as parliamentary staff, Members and visitors.

It is also expected that safety method statements and safe systems of work will be produced for all jobs or tasks that contain some measure of risk. This will be essential information for a permit to work application.

Contractors are required to co-operate fully with our procedures, including the need to apply for Permits-to-Work where appropriate. SHWS and other managers within Parliament must be given copies of the risk assessments and associated safe systems of work, on request. This may be at any time in the life of a contract.

**Contract Managers** must ensure that the contractors are aware of their duties described in the previous paragraph. They must also let their contractors know of any risks identified by parliamentary assessors which may have an impact on the contractors work activities.

**Project leaders** are responsible for ensuring that all personnel who are working on particular tasks or groups of tasks are aware of the risk assessment for that activity.

**Self Employed staff or Members** are responsible for undertaking risk assessments for the activities under their control. They will be able to access the risk assessments on the e-system and may wish to use the generic risk assessments produced by SHWS as a starting point.

## 2.6 Record Keeping

Unless risk assessments contain personal information, all will be available to view by parliamentary staff, via the e-safety system on the intranet. Each department will be able to maintain an up-to-date risk assessment log on the e-system; this will feed in to the central record of all the risk assessments carried out by House staff.

The purpose of the central risk assessment database is to enable information to be exchanged within departments and across parliament, avoiding duplication of effort and creating consistency.

The database will also:

- Identify common assessments, allowing best practice to be shared through a consistent approach and easy exchange of information.
- Highlight areas that still require assessment.
- Highlight assessments that are due for review.
- Track outstanding actions arising from the risk assessment.



- Target key areas for audit.
- Provide an effective monitoring tool for senior management and the Safety, Health and Wellbeing Service.

### **3.0 GUIDANCE**

Guidance in support of the risk assessment policy is held on the SHWS intranet pages. There is a frequently asked questions page, and further information related to the risk assessment process itself.

### **4.0 MONITORING PERFORMANCE**

Monitoring of risk assessment must be carried out on a local and organisational level.

#### **4.1 Organisational level**

SHWS will audit the arrangements in place for assessing risk and report findings to management groups, the House of Lords Health and Safety Committee and the Parliamentary Safety Assurance Board.

#### **4.2 Local (management) Level**

Departments should have a programme of safety inspections of their areas, facilities, and assets and they should also have a programme of monitoring the quality and applicability of the risk assessments relevant to their activities.

Heads of Department and other senior managers should ensure that they have nominated someone to:

- Monitor that actions are being completed, relevant standards are being achieved, and that necessary safety records are being kept.
- Report on outcome and implication of this programme to the Health and Safety Committee.
- Maintain a record of outstanding safety issues and actions.
- Keep relevant managers informed of outstanding actions and the priority and timescale recommended for resolution of these actions.

Heads of Department etc. may allocate these duties to their local safety co-ordinator and/or risk assessor.

SHWS will also monitor performance against the standards set out in the safety policy. The methods employed include:

- Evaluation of the incidence and nature of accidents, dangerous occurrences, and cases of work-related ill health and the relation to the risk assessments.



- Tours and inspections of workgroups.
- Discussions with safety coordinators regarding progress on objectives.

#### **4.3 Role of House Safety Committees and Safety Co-ordinators**

SHWS and safety co-ordinators will monitor performance against the standards set out in the safety policy and associated documentation. The methods employed include:

- Evaluation of the risk assessments – reviewing consistency and approach.
- Tours and inspections of workgroups.
- Discussions with safety coordinators regarding progress on risk control action plans.

The Safety Committee will scrutinise the results of any performance monitoring at each meeting.

#### **4.4 Management review**

The Parliamentary Safety Assurance Board reviews performance annually, taking account of an Annual Report submitted by the Head of SHWS. The review is used to inform the identification of improvement objectives and plans.

The following issues will be considered:

- Overall safety performance of departments, including completion of risk assessments, outstanding actions and general management activity.
- The control of risks with high impact potential.
- The profile of accidents, dangerous occurrences, and work-related ill health.
- Level of input from the safety co-ordinators and risk assessors.

## APPENDIX A

### REGULATIONS REQUIRING SPECIFIC RISK ASSESSMENT

*This information should not be considered exhaustive, but is for guidance purposes only.*

The Management of Health and Safety Regulations cover general duties with regard to risk assessment however there are also other health and safety regulations which, if applicable, require employers to carry out more specific risk assessments. All those detailed below either contain a specific risk assessment requirement or imply the need to carry out a risk assessment.

Confined Spaces Regulations 1997  
Construction (Design and Management) Regulations 2007  
Control of Asbestos Regulations 2006  
Control of Lead at Work Regulations 1998  
Control of Substances Hazardous to Health Regulations 2002  
Health and Safety (Display Screen Equipment) Regulations 1992  
Ionising Radiations Regulations 1999  
Manual Handling Operations Regulations 1992  
Noise at Work Regulations 1989  
Personal Protective Equipment at Work Regulations 1992  
Provision and Use of Work Equipment Regulations 1998

The Management of Health and Safety at Work Regulations 1999 also require that employers must *assess the risks to the health and safety of new and expectant mothers*, ensuring that the health and safety of these employees and their children are not put at risk. You should also be aware of responsibilities to carry out risk assessments in connection with homeworkers and student placements.

Additionally the Fire Precautions (Workplace) Regulations 1997 (as amended) require the need to carry out an *assessment of fire risks in the workplace*. Generally these assessments are being undertaken by the Fire Safety team, however where a risk of fire is highlighted in any other type of assessment it should be recorded and suitable actions taken to control the risk.



## APPENDIX B

### HOUSE OF COMMONS RISK MANAGEMENT POLICY (EXTRACT)

(January 2011)

Risk management is one of the key management systems used to ensure the achievement of the House's business objectives as set out in its strategic, corporate and departmental business plans, and as such is an integral part of planning and performance management monitoring. Embedding risk management into working practices across the organisation is one step towards the House becoming more efficient and effective in managing its resources.

The policy on risk forms part of the House's corporate governance and internal control and assurance arrangements. When effective, the system of risk management (in conjunction with letters of assurance from members of the Management Board) allows the Clerk of the House, in his role as Accounting Officer, to sign with confidence the annual Statement on Internal Control that provides assurance to the public that the House is being managed effectively, for which he and the Management Board are accountable.

#### **The House of Commons Risk Management Policy is to:**

- Develop a systematic risk management system, using common terminology;
- integrate risk management with business planning (the business planning process sets objectives, agrees action plans and allocates resources);
- actively manage risk across the House service, by means of good internal controls, to a level that is acceptable;
- ensure that risks are captured routinely by managers across the organisation and contribute to the overall decision making process by managers;
- ensure that our Strategy, our Corporate Plan and our Departmental Plans are regularly reviewed to confirm we have identified all our risks;
- ensure that risks are owned by the Department best able to manage them, at the lowest level practicable;
- ensure responsibility for risk ownership is given to the person best able to manage it;
- judge the effectiveness of mitigations objectively, on the basis of evidence;
- ensure that all risk assessments are subject to informed challenge;
- develop an understanding of the costs of mitigating, and the potential costs of not mitigating, our risks;
- monitor and report regularly on the effectiveness of the risk management system and its effectiveness in assisting the House to achieve its aims and objectives;
- keep policy and practice under review;
- provide and maintain guidance on the techniques of risk management;
- ensure that programme/project risks are allocated within the Department structure; and
- ensure that House-wide projects that sit outside the departmental structure report to the Management Board as appropriate.

*Full text is available in the House of Commons Risk Management Handbook*



## APPENDIX C: DEFINITIONS

**Hazard** – Something that has the potential to cause harm including ill health, injury, loss of product and/or damage to plant and property e.g. substances, machines, methods of work etc.

**Risk** – The likelihood of harm occurring and its severity (Severity x likelihood).

**Risk assessment** – A careful examination of what in your work could cause harm to people, so you can weigh up whether you have taken enough precautions or should do more to prevent harm.

**Dynamic risk assessment** – In some cases there may be unexpected or short temporary changes that require amendments to be made to risk assessment control measures. Examples could be a change in weather conditions or breakdown of heating. To avoid carrying out a new assessment the "comments" section on the risk assessment form can be used to document any changes.

**Significant risk** – Something with the potential to cause injury or illness.

**So far as is reasonably practicable** – Assessment of risk should be weighed against the time, effort involved, cost and difficulty of doing anything about it. The risk of not instituting safety measures or controls can be an option if the overall benefit in terms of reducing accidents or improving health and safety conditions is minimal compared with the time, effort, cost and inconvenience of introducing the measures.

**Suitable and sufficient risk assessment** – The level of detail in a risk assessment should be broadly proportionate to the risk and should:

- Ensure all relevant hazards are addressed.
- Address what actually happens in workplace or during work.
- Ensure all groups affected are considered taking account of groups who are particularly at risk.
- Take account existing preventative or precautionary measures and identify further measures.

**Risk controls** – Workplace precautions, for example physical safeguards, containment of airborne contaminants and noise, safe systems of work, competency and personal protective equipment.

**Risk control systems** – Arrangements that ensure the workplace precautions are implemented and kept in place e.g. designation of responsibility, training, supervision, work equipment, maintenance, performance measurement, audit, briefing and control of contractors.



APPENDIX D: RISK LIKELIHOOD/IMPACT SCALE

Table One: IMPACT OF HARM (adapted from HoC Risk Management Handbook)

Hazard severity (impact of Harm)	Definition	Rating
Catastrophic	<p>Something which could cause multiple deaths and widespread destruction eg. fire, building collapse.</p> <p><b>Definition from HoC Risk Management Handbook</b></p> <ul style="list-style-type: none"> <li>• Severe disruption or interruption to the work of Members and their staff. Competence of senior management of the House Service may be questioned. Many high level complaints and escalations. Critical loss of confidence, delay and disruption to the work of the House.</li> <li>• Severe losses, penalties or unforeseen costs.</li> <li>• Severe threat that some services will be withdrawn or reduced.</li> <li>• Severe inconvenience, delay and disruption to all aspects of the work of the House.</li> </ul>	5
Major	<p>Something which could cause death, serious injury or permanent disability to an individual.</p> <ul style="list-style-type: none"> <li>• Serious disruption or interruption to the work of Members and their staff.</li> <li>• Competence of senior departmental management teams of the House Service may be questioned. Some high level complaints.</li> <li>• Serious loss of confidence, delay and disruption to the work of the House.</li> <li>• Serious losses, penalties or unforeseen costs.</li> <li>• Serious threat that some services will be withdrawn or reduced.</li> <li>• Serious inconvenience, delay and disruption to all aspects of the work of the House.</li> </ul>	4



**Table One (cont): IMPACT OF HARM** (adapted from HoC Risk Management Handbook)

Hazard severity (impact of Harm)	Definition	Rating
<b>Moderate</b>	<p>Something which could cause injury or disease capable of <b>keeping an individual off work for three days or more</b></p> <p><b>Definition from HoC Risk Management Handbook</b></p> <ul style="list-style-type: none"> <li>• Moderate disruption/ interruption to the work of Members and their staff. Competence of various directorate management teams of the House Service may be questioned. Some localised complaints and escalations.</li> <li>• Moderate loss of confidence, delay and disruption to the work of the House.</li> <li>• Moderate losses, penalties or unforeseen costs.</li> <li>• Moderate threat that some services will be withdrawn or reduced.</li> <li>• Moderate inconvenience, delay and disruption to all aspects of the work of the House.</li> </ul>	<b>3</b>
<b>Minor</b>	<p>Something which could cause minor injury, which would allow the individual to continue work after first aid treatment on site or at a GP/Walk in Service. The duration of the stoppage or treatment is such that the normal flow of work is not seriously interrupted.</p> <p><b>Definition from HoC Risk Management Handbook</b></p> <ul style="list-style-type: none"> <li>• Minor disruption or interruption to the work of Members and their staff. Competence of various local and section management teams of the House.</li> <li>• Service may be questioned. Some loss of confidence, delay and disruption to the work of the House.</li> <li>• Minor losses, penalties or unforeseen costs.</li> <li>• Minor threat that some services will be withdrawn or reduced.</li> <li>• Minor inconvenience, delay and disruption to all aspects of the work of the House.</li> </ul>	<b>2</b>
<b>In-significant</b>	<p>Something causing very minor injury, bruise, graze etc, no risk of disease.</p> <p><b>Definition from HoC Risk Management Handbook</b></p> <ul style="list-style-type: none"> <li>• Negligible disruption or interruption to the work of Members and their staff.</li> <li>• Notional losses, penalties or unforeseen costs.</li> <li>• Notional threat that some services will be withdrawn or reduced.</li> <li>• Notional inconvenience, delay and disruption to all aspects of the work of the House.</li> </ul>	<b>1</b>





Table 2: LIKELIHOOD OF HARM (adapted from HoC Risk Management Handbook)

Risk likelihood	Definition	Rating
<b>Almost certain</b>	<p>If the work continues as it is, there is 80- 100% certainty that an accident will happen, for example:</p> <ul style="list-style-type: none"> <li>• <i>A broken stair or broken rung on a ladder.</i></li> <li>• <i>Bare, exposed wiring.</i></li> <li>• <i>Unstable stacks of heavy boxes.</i></li> <li>• <i>Trailing wires.</i></li> <li>• <i>Broken or badly fitting guards on machinery.</i></li> <li>• <i>Untreated slippery floors during adverse weather.</i></li> </ul> <p>It is foreseeable that the accident could happen almost every day.</p>	<b>5</b>
<b>Likely</b>	<p>There is a chance that an accident will happen more often than not. Examples which have occurred on the parliamentary estate include:</p> <ul style="list-style-type: none"> <li>• <i>Spills onto floors which are not cleared up properly.</i></li> <li>• <i>Staff repeatedly moving heavy boxes or books.</i></li> <li>• <i>Frayed, damaged or uneven floors.</i></li> <li>• <i>Poorly lit corridors.</i></li> <li>• <i>Papers or books piled on top of cupboards.</i></li> </ul> <p>There may be additional factors could precipitate an incident but it is still likely to happen It is foreseeable that the accident could happen on a weekly basis.</p>	<b>4</b>



Table 2 (cont): LIKELIHOOD OF HARM (adapted from HoC Risk Management Handbook)

Risk likelihood	Definition	Rating
Possible	<p>The accident may occur if additional factors precipitate it, but it is unlikely to happen without them. Accidents which have happened on the parliamentary estate include:</p> <ul style="list-style-type: none"> <li>• <i>Unsecured riser panels falling onto a person.</i></li> <li>• <i>Shelves at head height becoming accessible following an office move.</i></li> <li>• <i>Wet utensils used when cooking in hot fat.</i></li> <li>• <i>Mixing of two chemicals liberating toxic fumes.</i></li> </ul> <p>It is foreseeable that an accident could happen on a monthly basis.</p>	3
Unlikely	<p>This incident or illness might occur but the probability is low and the risk minimal. It is probable that such an incident would not happen often – approximately once every six months.</p>	2
Rare	<p>There is really no risk present. Only under freak conditions could there be any possibility of an accident or illness. All reasonable precautions have been taken. This should be the normal state of the workplace. It is probable that such an incident would happen less than occur once a year or so in an operational environment.</p>	1

**House of Lords**  
**Health and Safety Policy (HSP) 04/12**

**Safe Use of Display Screen Equipment (DSE)**

*This policy forms part of, and should be read in conjunction with, the Health and Safety Policy.*

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## Document Control

### Change Record

Version	Status	Date	Reviewers Name/s & Position
0.1	Draft 1	10/09/2011	Marianne McDougall, SHWS
0.2	Draft 2	15/10/2011	Marianne McDougall, SHWS
0.3	Draft 3	18/11/2011	Marianne McDougall, SHWS
0.4	Draft 4	11/12/2011	Marianne McDougall, SHWS
0.5	Draft 5	18/02/2012	Marianne McDougall, SHWS
0.6	Draft 6	28/02/2012	Marianne McDougall, SHWS
0.7	Draft 7	01/10/2012	Jon Oliver, HOL POS
1	V1	22/10/2012	Jon Oliver, HOL POS
2	V2	01/11/2012	Marianne McDougall, SHWS



## 1.0 INTRODUCTION

The hazards associated with display screen equipment (DSE) are often underestimated, but bad posture, poor ergonomic design and insufficient breaks can lead to discomfort and sometimes chronic disorders which will affect your home and working life.

As most of us will use DSE whilst at work, the House has recognised this fact and has committed itself to try and minimise risks arising from DSE use. The House will provide suitable equipment, workstations, free eyesight tests and where necessary corrective glasses for its DSE users. Definitions of the key terms used in this document are given in Appendix A.

This Display Screen Equipment Policy sets criterion which you are expected to follow. The associated Information Sheets provide guidance on how the requirements of the Policy can be met and cover the following subject areas:

- Minimum standards for Workstations.
- Guide to setting up your workstation.
- Having problems? Troubleshooting Guide.
- Arrangements for Eyesight testing.
- How to get specialist workstation equipment on the Parliamentary Estate.

## 2.0 POLICY

### 2.1 Legal Requirements

The *Health and Safety (Display Screen Equipment) Regulations* aim to protect the health of people who work with DSE. That does not mean that DSE work is risky – it isn't, if the user follows good practice like setting up their workstation well and taking breaks in intensive work. The Regulations were introduced because DSE has become one of the commonest kinds of work equipment, so there is potential to make work more comfortable and productive for very large numbers of people by taking a few simple precautions.

This policy and guidance gives advice on compliance with the requirements of the legislation. The House of Commons, House of Lords and PICT have a specific obligation to ensure the health and safety of staff using display screen equipment as part of their work routine. This also includes staff using DSE at home on behalf of their employer. The duties are clear:

- To assess and review the health and safety risks to persons using DSE workstations, whether or not provided by the employer, and reduce risks so identified.
- To ensure that the display screen equipment work is periodically interrupted by breaks or changes in activity so as to reduce the workload on employees.



- Provide employees with initial eyesight testing on request, subsequent tests at regular intervals and special corrective appliances where tests show that normal corrective appliances cannot be used.

The Display Screen Equipment (DSE) Regulations do not contain detailed technical specifications or lists of approved equipment but state general objectives to ensure health risks are minimised. Such problems can usually be avoided by good ergonomic design of equipment and furniture, by considering the work to be done and by looking at the office environment.

## 2.2 What this means in practice

We must ensure that:

- Risk assessments are completed on all workstations provided by the House (this includes House employees, Members and their staff, contractors etc. **in relation to use of DSE equipment supplied by PICT**).
- All parliamentary workstations meet minimum requirements of the DSE Regulations.
- Information and training is provided on aspects of health and safety relating to the workstation, including details of any risk assessment arrangements.

We must also make sure that House employees who use DSE as part of their job can plan work to ensure adequate breaks away from computer work and have eyesight tests on request, and spectacles or other corrective appliances are provided if needed for computer work.

This policy applies to:

- Each Department or Office who has members of staff using Display Screen Equipment through the course of their work.
- Members of staff who use Display Screen Equipment either at work or at home as part of their work.
- Workstations provided by the House for staff use.

Section 2.3, 2.4 and 3.28 applies to Members and their staff who work on the parliamentary estate and use display screen equipment provided by PICT .

The policy does not apply to visitors who use Display Screen Equipment whilst on our premises.

## 2.3 Arrangements for Assessing Risk

Our arrangements have been devised to make sure computer work and workstations can be assessed by the individual in a simple and on-going way. We want to increase awareness of health and safety issues relating to the use of computers and workstation set-up and make sure that arrangements can be put into place to reduce the risks of injury or ill health.

### 2.3.1 *Staff of the House*

Regardless of your position, if you use DSE at work you are responsible for completing your own training and workstation assessment on a regular basis via the Online Risk Assessment package available via the Safety, Health and Wellbeing Service intranet pages. Your assessment should be reviewed in the following cases:

- If you have a major change in software or hardware.
- If you have a change to your workstation furniture or significant modification in lighting.
- If you move offices or desks.
- If your DSE related workload changes, in terms of either quantity or complexity.

If there is no up to date record of your assessment on the system, you may receive an email prompt reminding you to complete it. If you do not complete your assessment after three reminders your name will be forwarded to your line manager and Head of Department.

### 2.3.2 *Arrangements for Assessing Risk – Members of both Houses and contractors who have been provided with display screen equipment by PICT*

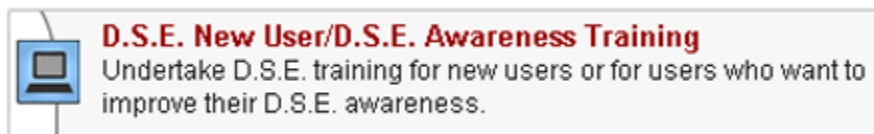
If you use DSE provided by PICT you must complete your own training and workstation assessment. You will not be able to access the on-line system, but you will find sufficient information and instruction on the SHWS web pages, to enable you to complete your assessment. The paper assessment form is also available online. Your assessment should be reviewed in the following cases:

- If you have a major change in software or hardware.
- If you have a change to your workstation furniture or significant modification in lighting.
- If you move offices or desks.
- If your DSE related workload changes, in terms of either quantity or complexity.

SHWS will ask to see a copy of your risk assessment if you contact them for further assistance<sup>1</sup>.

## 2.4 **Accessing the Awareness Training and Risk Assessment package**

The on-line awareness training and risk assessment package is easily accessible for staff of the House on the parliamentary intranet. The training is in two parts – new user and refresher training.



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<sup>1</sup> *Members only.*



## **D.S.E. Refresher Training**

Undertake D.S.E. training for users who want to refresh their D.S.E. awareness.

Once you have finished the online DSE training, you can start your DSE assessment. This is divided into 3 sections; each one covers a major section of DSE such as the monitor, the chair or the environment. Answers are in a Yes / No / Not Applicable format and all questions must be answered. Once the assessment has been completed, you have the opportunity to add comments or additional information relating to your workstation.

### *2.4.1 Risk assessment review - arrangements for staff of the House*

You need to forward your risk assessment to your manager, who is the person responsible for ensuring the issues you may have identified are settled. The assessment can be forwarded via the email facility on the e-system.

In most cases, your manager should be able to resolve outstanding issues without involving anybody else, particularly if your assessment highlights that you have insufficient breaks away from computer work. If your assessment highlights health issues which may be caused or exacerbated by using DSE equipment, a management referral should be made to SHWS.

Managers may wish to contact your Display Screen Equipment Assessor or in the absence of a DSE Assessor then your Department Risk Assessor in the first instance, if further guidance is needed (see section 3.24 for more detail on the role of the risk assessor). SHWS may be contacted if the problem is more complex and cannot be dealt with by the assessor alone – SHWS will access your up to date DSE assessment via the e-system. This document is the starting point of their investigations, and they will not be able to proceed without it.

Provision of specialist equipment must be arranged between your Department or Office and furnishings/PICT, as appropriate. SHWS do not need to be involved unless the DSE assessor feels that a more specialist assessment is needed, for example, if someone has an existing health condition which may be exacerbated by DSE work. If an assessment identifies the need for non-standard furniture or DSE related equipment whilst working on the parliamentary estate, you should forward your request to the relevant House authority (Furnishings/PICT etc); it *must* be accompanied by the up to date DSE assessment.

Please note that not all equipment is provided by centrally; some items must be funded out of local budgets. Further information is given in the leaflet “How to get specialist workstation equipment on the Parliamentary Estate”.

### *2.4.2 Risk assessment review - arrangements for Members and other persons who have been provided with DSE equipment by PICT*

Persons who are not employees but who have been provided with DSE equipment for use on the parliamentary estate should pass their completed assessments to their line manager for review and action. Members should be able to action the assessments themselves, seeking guidance from House staff as necessary, particularly if the assessment finds that the individual has insufficient breaks away from computer work.





If an assessment identifies the need for non-standard furniture or DSE related equipment whilst working on the parliamentary estate, the individual should forward their request to the relevant House authority (Furnishings/PICT etc); it *must* be accompanied by the up to date DSE assessment.

Not all equipment is provided centrally and you may find the leaflet “How to get specialist workstation equipment on the Parliamentary Estate” useful in helping you direct your request. Please note that you do not need to involve SHWS.

Members of both Houses may refer to SHWS (occupational health adviser or safety adviser) for further guidance, if needed. The process will be greatly speeded up if you can forward a copy of your risk assessment as soon as possible. This facility is not available to member’s staff or contractors.

## **2.5 Arrangements for Eyesight Testing – House staff only**

If you are DSE user, you have the right to request an eyesight test from your employer. The cost of the test and, where identified by the optometrist, the cost of the pair of basic, single prescription spectacles<sup>2</sup> will be borne by the House only if the correct procedure is adhered to; more information is given on the intranet: <http://intranet.parliament.uk/employment/health-safety-welfare/information-for-managers-and-staff/eyecare/>

DSE users who are not employees of the House are not entitled to use this scheme.

## **2.6 Arrangements for Eyesight Testing – Members and their staff**

Members should refer to the Members Expenses Section on extension 6096 for details of payments in relation to eyesight testing.

## **3.0 PEOPLE AND THEIR RESPONSIBILITIES**

The House of Lords safety policies explain our commitment to managing health and safety and also how we are organised – in other words, who is responsible for doing what. To perform health and safety duties properly requires necessary authority and resources. All our safety policies make it clear that this is delegated down the line management structure but *responsibility remains with the person making the delegation.*

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<sup>2</sup> This may include spectacle wearers whose spectacles are not suited to the focal distance required for DSE work, but does not include users who require corrective appliances for other normal visual defects.

### **3.1 Everybody**

Regardless of your position, if you use DSE at work which has been provided by PICT, you are responsible for:

- Completing your own training and workstation assessment on a regular basis via the Online Risk Assessment package (for House staff) or via the paper based system (members, their staff and contractors who are using parliamentary supplied DSE equipment).
- Repeating or reviewing your assessment if major changes are made to equipment or furniture, if workstations are relocated, if the nature of the work changes or if your health changes and you think it may be caused by or impact on your ability to use your workstation.
- Forwarding your assessment to your line manager for review, and/or seeking guidance from your local DSE assessor (for House staff only) if you need further help.
- Ensuring that you fully co-operate with this policy and follow any procedures designed to keep you safe and healthy.
- Adjusting your own workstation and work practices in accordance with the guidance in this document and on the online (or paper based) training.
- Reporting faults with equipment or furniture using the relevant arrangements available (for example the PICT Helpdesk). You should keep a record of the reference number for any calls made for future reference.
- Making sure that solutions to problems identified on your workstation assessments are progressed and completed with assistance from your manager as necessary.

#### *3.1.1 House staff*

If you are employed by the House or PICT, you are responsible for:

- Forwarding your DSE assessment to your line manager, for discussion or action as appropriate.
- Contacting your DSE assessor if there is an issue that you and your manager are not able to deal with – you will need to provide them with a copy of your completed workstation assessment, with the problem areas highlighted.
- Reporting any injuries or ill health related to your work computer or workstation set-up via the accident reporting arrangements (see HSP 01/11).

### **3.2 Management and Delivery Responsibilities**

#### *3.2.1 The Management Board*

The Management Board are responsible for ensuring the House complies with the Display Screen Equipment Regulations via this policy, in their areas of command.

#### *3.2.2 Senior Managers*

Senior managers must, in accordance with the House Safety Policy, ensure compliance with this policy in areas they have a management responsibility, so far as is reasonably practicable.



This means allowing sufficient resources, such as staff time and appropriate funding, to be available for putting the policy into practice. They must be assured that all managers and staff within their remit are familiar with this document, are aware of their responsibilities and that individuals have completed their training and workstation assessments where appropriate.

Senior managers need to ensure that there are sufficient DSE assessors appointed within their Department of Office to help with the review the DSE assessment process and if further action is required e.g. new chair provision (see 3.2.4).

### 3.2.3 *Line managers*

Managers are responsible for making sure that the arrangements detailed in this policy are implemented by staff within their remit. Line managers must:

- Make sure that staff are familiar with this policy and guidance.
- Ensure all staff within their team who work on computers complete the training and workstation assessment on a regular basis so they are aware of how to set-up workstations correctly and of any hazards that may be associated with using them.
- Ensure new users complete their workstation assessment on commencement of work.
- Assist with progression of recommendations arising from the individuals assessment as necessary.
- Make sure that any members of their team who are identified as being at particular risk (for example disabled or pregnant workers) are assessed separately and specifically – seek advice from SHWS.
- Encourage their team to report all work-related injuries or ill health occurring as a result of using a computer or workstation set-up to SHWS, on the accident/work related ill health form.
- Monitor the effectiveness of preventative measures by investigating injuries and ill health in accordance with the accident and ill health reporting policy.
- Ensure DSE assessors are given sufficient support to carry out their duties.

### 3.2.4 *DSE assessors*

Each department must have one or more assessors, trained to a higher level in the principles and practice of workstation assessment and problem solving. Training courses and regular updates are arranged through Learning and Development.

When choosing assessors, care should be taken to ensure they have adequate time and motivation to undertake this work. Individual workstation assessment will be carried out by all employees who use display screen equipment, using the electronic assessment tool which is available on the intranet, and DSE assessors may be contacted to provide assistance in resolving any outstanding problems.

DSE assessors will:

- When requested, assist users to seek help if they have difficulties with an issue which relates to DSE health and safety which cannot be resolved by the individual and their manager.
- Liaise with SHWS in relation to DSE assessments in more complex cases.
- Suggest referrals to Occupational Health/Health and Safety where appropriate.
- Keep records of their suggested DSE actions.



It is expected that in most cases, the individual and their manager should be able to resolve outstanding issues without involving anyone else, particularly if the assessment highlights that they have insufficient breaks away from computer work. If an assessment highlights health issues which may be caused/ exacerbated by using DSE equipment, a management referral should be made to SHWS.

### *3.2.5 Safety Health and Wellbeing Service*

SHWS are responsible for the development and review of the DSE policy and associated arrangements. They will also monitor and audit the application of the policy to make sure the policy is applied consistently throughout the House and that the arrangements are fit for purpose.

SHWS are responsible for:

- The development, monitoring and revision of this policy and guidance document.
- Provision of training and workstation assessments via the Online Risk Assessment package.
- Monitoring completion of training and assessments (for House staff only) and flagging up any areas of non-compliance to senior managers as appropriate.
- Providing advice and guidance on how to achieve, maintain, and improve a safe and healthy workstation set-up, environment and associated activities and provide appropriate assistance for House staff in completing their risk assessments where necessary.

### *3.2.6 Accommodation*

Those responsible for accommodation issues must ensure that all furniture and equipment supplied by the House for use on the parliamentary estate as standard conforms to the minimum specifications set out in the DSE Regulations. See DSE Information Sheet 1 on the intranet.

### *3.2.7 Non-House Employees (e.g. temporary or visiting workers or secondees)*

Employees carrying out work on behalf of the House of Lords must be treated as though they were employees whilst working for the House. Within a short period of them starting, they must complete a risk assessment to ensure the workstation is suitably set up and the work routine is reasonable. However, the House is not required to provide eye tests or training in safe use of DSE. Their own employer must provide eye and eye-sight testing and any corrective appliances and they are responsible for generalised training.

### *3.2.8 Members and Members staff*

Members and Members staff who use IT equipment on the parliamentary estate supplied by PICT must carry out a risk assessment of their workstation. DSE Information Sheet 4 explains how you can procure additional equipment which has been identified by the risk assessment

and can be found on the intranet. The SHWS do not routinely provide Members and their staff with advice and guidance on how to achieve, maintain and improve a safe and healthy workstation set-up, or give assistance for House staff in completing their risk assessments where necessary.

#### **4.0 MONITORING AND REVIEW**

Senior managers must periodically review their own procedures to ensure the requirements of this Policy are implemented, suitable and effective.

Safety, Health and Wellbeing will also carry out general and periodic audits using the online information to ensure compliance against this Policy

In addition, the House Health and Safety Committee may from time to time review the effectiveness of this system for the management of display screen equipment risk.

#### **5.0 FURTHER READING**

The Health and Safety Executive produces clear and informative guides on all aspects of working with display screen equipment. The pages can be accessed via this link:

<http://www.hse.gov.uk/msd/dse/>



## APPENDIX A

### DEFINITIONS

In respect of this Policy Standard, Display Screen Equipment and its use means:

- **Display Screen Equipment**; any alphanumeric, graphic display screen, laptop and CCTV / VDU monitor.
- **Use** means use for, or in connection with work.
- **User** any member of Staff who uses DSE as part of their work.
- **Workstation** exists wherever there is DSE. It includes: screen, desk, chair, keyboard, telephone, disk drive etc and the immediate environment around the DSE e.g. Windows.