Bridgeside House
Health, Safety and Security

Policies and Procedures by the Bridgeside House Management Group (BHMG) on behalf of

1. The Scottish Public Services Ombudsman (SPSO)
2. The Scottish Commission for Human Rights (SHRC)
3. The Children and Young People's Commissioner Scotland (CYPCS)

Note: <mark>Yellow highlighter</mark> indicates statements that need to be checked with the other office-holders, and may only be relevant to SPSO.

<mark>Blue Highlighter</mark> is used in this document to indicate links to other documents under review are required.

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Joint Statement of Principles

1.   The SPSO, SHRC and CYPCS are committed to promoting the health and safety, and well-being of all staff, and ensuring that our working environment supports this. Health and safety are key concerns for us and need to be managed robustly and effectively. The right approach will allow Bridgeside House to thrive, and help us control risks and cut costs.

2.   Our systematic approach to health and safety ensures we comply with all legislative obligations. It also ensures we all know what is expected of us and what we can expected of colleagues, by setting out the correct way of carrying out our duties. Perhaps most importantly, it provides a foundation for continually improving health and safety management within Bridgeside House.

3.   The Ombudsman and Commissioners' commitment: We will ensure that health and safety continues to be an integral part of the overall management culture and will seek to develop a positive attitude to health and safety amongst our own staff by:

   3.1.   visibly demonstrating a clear commitment to improving health and safety performance;

   3.2.   promoting co-operation by recognising that we each have an important contribution to make to effective health and safety management, and providing opportunities for participation and involvement in health and safety activities, for example, health and safety committees, risk assessment etc;

   3.3.   ensuring the communication of necessary information;

   3.4.   securing the competence of staff through training and coaching from the start of their employment; and

   3.5.   implementing systems, which will identify and deliver health and safety training needs arising from recruitment or changes in staff, procedures, or systems of work.

4.   The Bridgeside House Health and Safety Action Plan outlines specific objectives and realistic timescales for their accomplishment. The plan will be reviewed periodically, and implementation monitored.

General Health and Safety Policy Statement

5.   We recognise that it is our responsibility to ensure the health, safety and welfare at work of our own staff. This duty of care extends to other persons whilst they are on our premises or affected by our activities such as visitors and contractors etc.

6.   It is our policy to provide and maintain safe and healthy working conditions, equipment and systems of works for all staff and third parties. The organisations will

do all that is reasonably practicable to prevent personal injury and damage to property. This policy also includes the public, when they come into contact with our organisations or any of our services. We will also provide such information, training and supervision as is needed to support the above.

7.   We recognise that we have specific duties and statutory requirements, which include:

    7.1.   to provide and maintain safe and healthy working conditions;

    7.2.   to provide information, instruction, training and supervision as necessary to enable staff to perform their work safely and efficiently;

    7.3.   to make available all necessary safety devices and protective equipment and to supervise their correct use;

    7.4.   to communicate and as necessary consult with staff on health and safety issues;

    7.5.   to provide and maintain, so far as reasonably practicable, a safe place of work and safe means of access to and egress from that place of work; and

    7.6.   to provide and maintain a working environment that is, as far as reasonable practicable, safe, without risks to health and adequate as regards facilities and arrangements for welfare at work.

8.   The policy is communicated to all staff of our organisations. To enable our organisations to fulfil our duties and responsibilities as an employer all staff have a duty to exercise personal responsibility and to do everything within their power in the course of their employment to prevent injury or ill health to themselves or others.

9.   We will ensure that this policy is reviewed and amended to reflect any internal changes or legislative and regulatory requirements.

Judith **Scottish Human Rights Commission**	Bruce Adamson **Children and Young People's Commissioner for Scotland**	Rosemary Agnew **Scottish Public Services Ombudsman**

Health and Safety Responsibilities

10.   This section outlines the organisational structure that is in place to achieve the Joint Statement of Principles as outlined in Part 1 of this Policy Statement. The contributions to be made by managers and staff are summarised.

11.   In addition to the policies and guidance contained within this handbook, each organisation may have other relevant policies covering the health and safety of their staff which must also be referred to. Links to these documents are contained in Annex 1.

Ombudsman and Commissioner Responsibilities

12.   The Ombudsman and Commissioners have ultimate responsibility for ensuring the health, safety and welfare at work of their own staff and will ensure, through effective delegation to the Bridgeside House Building Coordinator; line managers; and others, the effective implementation of the Health and Safety Policy.

13.   This will be achieved by:

13.1.   ensuring that adequate resources are made available to enable the policy to be implemented;

13.2.   ensuring that health and safety is an integral part of the overall management culture and by developing a positive attitude to health and safety among staff by visibly demonstrating commitment to achieving a high standard of health and safety performance;

13.3.   appointing a competent person to assist the organisations to apply the provisions of health and safety legislation;

13.4.   ensuring the establishment and maintenance of health and safety management systems within all areas, which will ensure the assessment of risks and the effective planning, organisation, control, monitoring and review of the preventative and protective measures necessary to control the risks;

13.5.   ensuring that all staff are informed and made aware of their responsibilities and duties under the Bridgeside House Health and Safety Policy;

13.6.   ensuring that any training programmes required for compliance of this policy are provided; and

13.7.   ensuring that the effectiveness of the Bridgeside House Health and Safety Policy and of the procedures in place are monitored on an annual basis or when there are any significant changes to the working environment.

14. The organisations are responsible for:

   14.1. ensuring that those with delegated health and safety responsibilities carry them out effectively and in compliance with the Bridgeside House Health and Safety Policy;

   14.2. co-operating at all times with the staff in conjunction with the Building Coordinator and the relevant line manager to provide and maintain a safe and healthy working environment;

   14.3. ensuring that appropriate and proportionate disciplinary action is taken on those members of staff who persistently breach the Bridgeside House Health and Safety Policy and procedures in conjunction with the Building Coordinator and the relevant line manager; and

   14.4. ensuring all accidents are correctly investigated and recorded within the accident books, and that information passed on to senior management.

Line Manager Responsibilities

15. Line managers are responsible for their own departments and will organise the day-to-day work in compliance with the health and safety policy, and in particular must:

   15.1. implement the Bridgeside House Health and Safety Policy in relation to their area of responsibility, monitoring its application and ensuring its effectiveness;

   15.2. ensure, so far as is reasonably practicable, that conditions within their control are safe and without risk to health;

   15.3. ensure that all staff are made aware of the Bridgeside House Health and Safety Policy, arrangements and procedures relevant to their area of work. This should include any relevant regulations, approved codes of practice, or guidance notes;

   15.4. advise any person – staff, client, contractor or visitor - likely to be affected by any known hazard or risk at the workplace, of the protective or preventative measures to be taken to minimise risk;

   15.5. report all accidents and dangerous occurrences on the appropriate form as soon as possible after the incident, regardless of whether staff, client, contractor or visitor has been affected;

   15.6. investigate the causes of all accidents and dangerous occurrences, advise all persons who may be at risk and take steps to remove the hazard in order to prevent a recurrence of any incident;

   15.7. in the event of an accident resulting in a fatality or major injury, advise the relevant Ombudsman or Commissioner and members of the Bridgeside House Management Group (BHMG) immediately. The location of the accident should be sealed off to prevent access and to allow for an

immediate investigation by the appropriate authority, for example, Police, Health and Safety Executive;

15.8.   make regular audits and inspections of workplaces and ensure that safe and healthy working practices are adopted and maintained;

15.9.   all staff must be trained in the Bridgeside House fire procedures and evacuations;

15.10.   reporting any defects that require rectification to the Bridgeside House Management Group (BHMG) and arrange for the work to be carried out to the appropriate standard;

15.11.   ensuring The First Aid at Work Regulations are adhered to;

15.12.   ensuring disciplinary action is taken on those members of staff who persistently breach the Bridgeside House Health and Safety Policy and procedures;

15.13.   maintaining training records for all staff;

15.14.   ensuring any risks identified by any member of staff are acted upon immediately; and

15.15.   work with staff to provide and maintain a safe and healthy working environment and ensure any risks identified by a member of staff are acted upon immediately.

Building Coordinator Responsibilities

16.   The function of the Building Coordinator is one of administration and, within the sphere of their responsibiltiies, the application of the health and safety management systems. The Building Coordinator will assist in but not be solely responsible for developing corporate policy. They will be responsible for ensuring corporate policy is implemented. The Building Coordinator will:

16.1.   undergo suitable training and will familiarise themselves with the policies, procedures and arrangements as set out in the management system;

16.2.   identify training needs and organise training for other staff in relation to health and safety issues and ensure all staff receive appropriate instruction, information and training to reduce the risks associated with their work to an acceptable level;

16.3.   maintain the management system and all record-keeping systems (inspections, drills, audits, accidents) in an up-to-date and tidy condition;

16.4.   report on safety performance, safety failures, audit reports, inspections, drills, accidents and any requests for resources, support or funding for health and safety purposes;

16.5.   organise, attend and take the minutes of the health and safety committee and any other required safety meetings;

16.6. maintain a programme of risk assessments, requesting funding and resources from the either the Bridgeside House Management Group (BHMG) or office-holders as appropriate and as necessary to keep assessments and control measures current. Where the Building Coordinator believes that personnel are, or may foreseeably become, exposed to significant risk, direction will be sought from the Bridgeside House Management Group (BHMG) without delay;

16.7. ensure that health and safety considerations are taken into account in the Bridgeside House Management Group (BHMG) and individual organisation's purchasing policies, the objective being to minimise risks as early in the purchasing chain as is reasonably practicable;

16.8. ensure that significant safety failures are fully investigated and reported to the Bridgeside House Management Group, and/or to any appropriate enforcing authority;

16.9. initiate any suitable remedial procedures to reduce the likelihood of a similar incident recurring; and

16.10. ensure that all fire-fighting equipment, emergency lighting, alarms and first aid facilities are regularly inspected and made good as necessary as per the control manual, and will arrange, carry out and keep records of all drills and tests.

Bridgeside House Management Group (BHMG)

17. The BHMG is made up of a corporate services representative from each office and the Bridgeside House Building Coordinator. The role of the BHMG is to take collective responsibility for the decisions relating to the management of Bridgeside House shared resources, and 2nd tier resolution of disputes. The BHMG will meet regularly, sharing the Chair between all members, to ensure good governance, joint planning and management of BH shared facilities.

Staff Duties

18. Staff duties under section 7 of the Health and Safety at Work Act include co-operating with their employer to enable the employer to comply with the statutory duties for health and safety.

19. Staff must therefore:

19.1. inform their line manager of any situation or condition at work, which they consider being unsafe, unhealthy or could become unsafe or unhealthy;

19.2. have a regard for their own safety and welfare and that of others that may be affected by their actions or omissions at work;

19.3. not engage in any activities that could create a hazardous or unsafe condition, which could compromise themselves, other members of staffs or equipment supplied for use in the workplace;

19.4. adhere to the procedures and safe working practices, which are described in the Bridgeside House Health and Safety Policy;

19.5. properly use, maintain and store the personal protective equipment supplied for their safety, health and welfare;

19.6. ensure that any third party workers who are engaged in activities in their employer's workplace are made aware of and work within the health and safety policies and procedures that are in force;

19.7. immediately report any accident, incident or dangerous occurrence, regardless of severity, to their line manager so that it can be investigated and all reasonable and practicable measures can be taken to remove or minimise the cause(s);

19.8. not drink any form of alcoholic beverage in the workplace without the express permission of the appropriate Ombudsman or Commissioner;

19.9. not enter the workplace in an intoxicated condition or consume alcohol while going about company business or when in the charge of a vehicle; and

19.10. not ingest, inject or take in any manner whatsoever any form of drugs which could in any way affect their own ability to function in a safe manner. If drugs have been prescribed by a medical professional the member of staff must immediately inform his/her/their line manager if it may have an adverse effect on their ability to work in a safe manner.

Risk Assessments, Hazard identification, and Determining Controls

20. Bridgeside House Management Group (BHMG), represented by the Building Coordinator, maintains procedures for the on-going identification of risks and hazards to implement the necessary control measures. The completion of risk assessments is a statutory requirement.

21. The risk assessment process will be conducted as follows:

21.1. record the significant findings;

21.2. involve staff in the process (so far as reasonable practicable);

21.3. inform staff (of the risks identified and the precautions which they should take to ensure that the risks remain adequately controlled);

21.4. assess any additional risks, which may arise in relation to young persons, disabled persons and pregnant parent / nursing parent;

21.5. confirm that the risks are adequately controlled (or to identify and implement control improvements with appropriate priority); and

21.6.   review assessments wherever there is a reason to suspect they are no longer valid.

22.   Appropriate documentation will be produced by competent persons to record the findings of risk assessments carried out. Where necessary, safe working procedures will be developed to supplement risk assessments. Records of the completed risk assessments shall be retained and reviewed annually to ensure appropriate controls remain in place.

Information, Instruction and Training

23.   Line managers are responsible for ensuring that individuals under their control are fully aware of, and competent to undertake all delegated health and safety duties. Training is determined on site by reviewing the current work activities, roles and functions of the company.

24.   These needs will be met through induction training for new recruits, general health and safety training for all staff and any other specific health and safety training as deemed necessary.

25.   A record will be maintained as evidence that staff have received training.

Further areas of consideration

Welfare Provisions

26.   It is policy that provisions are made for a number of specific requirements relating to the following:

26.1.   ventilation, temperature and lighting;
26.2.   cleanliness and waste materials;
26.3.   room dimensions and space, including workstations;
26.4.   conditions of floors, traffic routes, doors and gates;
26.5.   falls or falling objects;
26.6.   organisation of traffic routes;
26.7.   sanitary and washing facilities; and
26.8.   drinking water.

Work Equipment

27.   The SPSO, SHRC and CYPCS shall comply with all aspects of the Provision and Use of Work Equipment Regulations 1998. The legislation covers work equipment

whether owned, hired or leased by the SPSO. It covers work equipment used in all workplaces where the Health and Safety at Work Act applies.

28. The relevant manager shall make arrangements for assessing the suitability of work equipment with respect to:

   28.1.   its initial integrity;
   28.2.   the place where it will be used; and
   28.3.   the purpose for which it will be used.

29. In addition, the Building Coordinator shall make arrangements for suitable maintenance, inspection, information, instruction and training. They shall also make specific provision for conformity with European Community requirements, specific dangers, markings and warnings.

Office Activities, including use of Display Screen Equipment (DSE)

30. Use of display screen equipment by our staff is subject to assessment under the Display Screen Equipment Regulations. The use of such equipment may present a risk of injury or ill health as a result of repetitive movements and we are committed to reducing these risks through suitable control measures.

31. Staff must report if they are suffering aches, pains, headaches or any other symptoms, which may be attributable to their use of display screen equipment at work.

Manual Handling and Lifting

32. Manual handling operations undertaken by staff are subject to assessment under the Manual Handling Operations Regulations. Staff who are required to carry out manual handling and lifting operations as a regular part of their work will be given basic training on correct lifting and handling techniques.

33. Manual handling risk assessments should also be reviewed annually to make sure that the precautions are still working.

34. All staff suffering from an acute injury or long-term ill health condition, likely to be aggravated by manual handling or lifting, must report this condition immediately to their line manager.

35. Please refer to the Manual Handling guidance document.

PDF
Getting to Grips
with Manual Handli

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Young Persons

36. Under the Management of Health and safety at Work Regulations 1999, an assessment of the risks to young people must be carried out, before they start work/work experience. A young person is defined as a person under the age of 18. Young people must be appropriately informed of the risks and the controls in place for their safety.

37. Line managers shall put in place measures to control the risks which will remove them altogether or reduce them to the lowest possible level; and let the parents/guardians of any students (and staff) below minimum school leaving age know the key findings of the risk assessment and the control measures.

38. It may be possible to use or adapt a general risk assessment for young people doing the same job or work experience. However, it is the responsibility of each line manager to ensure that any such adapted risk assessment is made specific to the individual young person in his/her area.

39. Line managers must not allow the young person to do the work where it is found that a significant risk remains in spite of best efforts to take all reasonable steps to control it.

New and Expectant Birth Parents

40. A new or expectant birth parent is defined as a member of staff who is pregnant, who has given birth within the previous six months or who is breastfeeding. Given birth is defined as a member of staff who has delivered a living child or after 24 weeks of pregnancy, a still-born child.

41. The risks to all new and expectant birth parents working for our organisations will be assessed, followed by regular reviews to update the assessment where necessary. We appreciate that many expectant birth parents do not wish to disclose their pregnancy until 12 weeks of the pregnancy has passed, however, we would strongly encourage any expectant birth parent to inform their line manager at the earliest possible time to ensure that we can assess the relevant working activities and alter where appropriate.

42. If a significant risk is identified, all reasonably practicable measures will be taken to avoid the risk, with advice from the Building Coordinator and the relevant HR Officer. This may include temporary adjustments to your working conditions and/or finding you suitable alternative work. If neither is feasible, the employer may suspend the member of staff from work on full pay on maternity grounds.

Violence

43. The Bridgeside House Management Group (BHMG) recognises the importance of including appropriate arrangements for dealing with violence in the workplace as an integral part of its Health and Safety Policy.

44. Our organisations will undertake to meet the duties placed on them under the Management of Health and safety at Work Regulations 1999 by ensuring that a system is in place to identify and assess the risks from violence in the workplace.

45. Where significant risks are identified, appropriate control measures will be implemented to reduce the risks to the lowest level reasonably practicable. Control measures will include training where it is deemed appropriate.

46. Staff are encouraged to report incidents of violent behaviour (verbal or physical) to which they have been subjected to their relevant line manager who will discuss/investigate the incident and, where possible, take action to prevent a recurrence. The action taken or proposed action must be recorded.

Electricity

47. The Bridgeside House Management Group (BHMG) is committed to managing the risks relating to electricity to a high standard and fully compliant with the relevant Electrical Safety legislation across the UK. This includes that where a duty of care exists that, as far as is reasonably practicable:

   47.1. all fixed electrical installations are installed and maintained in a safe condition;
   47.2. all portable electrical appliances are supplied and maintained in a safe condition and tested;
   47.3. all persons responsible for checking, inspecting and testing electrical equipment and installations are competent;
   47.4. all persons who use electrical appliances can do so safely without risk of harm from electricity;
   47.5. ensure staff are aware that cables must not be freyed or exposed, cords are tucked and tidied away neatly to avoid a trip hazards, sockets and power leads are not overloaded; and
   47.6. that there will be sufficient resources available to control all risks from electricity

Gas

48. Gas provided to Bridgeside House is the sole responsibility of the Landlord. The Bridgeside House Management Group (BHMG) commit to only using a registered

gas engineer, should it ever be required. The Gas Safety (Installation and Use) Regulations 1998 require all engineers involved in the installation, inspection, servicing, maintenance and repair of gas appliances to be on the Gas Safe Register™. No person may work on gas fittings or appliances unless they are competent to do so. The requirements apply to both natural and liquefied petroleum gas (LPG). All gas systems must be inspected and certified at least every 12 months by an appropriately qualified Gas Safe Registered Engineer.

Contractors and Sub-Contractors

49. Prospective service providers are required to furnish adequate and appropriate information to indicate their competence to perform the work safely and without risks to health. This may, for example require the contractor or sub-contractor to provide a method statement, supporting risk assessment, certificates of competence of their staff and/or certifications of plant/equipment to be used during the contract.

50. Contractors and sub-contractors must report to reception and must be met by a designated staff member. This person is responsible for ensuring that the contractors are provided with the information and instruction necessary to protect them from the risks arising out of our activities.

Cleanliness

51. All staff, contractors and visitors are expected to work in a safe and tidy manner. To this end, it is expected that:

51.1. toilets, washing facilities and drinking areas are kept clean and sanitary;

51.2. spillage of any liquids is cleaned up immediately;

51.3. keep all traffic areas clear to reduce the likelihood of slips or trips,

51.4. all debris and waste is disposed of safely and as soon as it is practically possible to do so; and removed to recycling bins

51.5. materials and equipment is safely stored and tidy.

Waste Disposal

51.6. Hazardous waste within Bridgeside House will be managed via the risk assessment process and where necessary a COSHH risk assessment will be carried out.

51.7. Non-hazardous waste should be disposed of into a skip or appropriate container as soon as practical and should not be allowed to build up and create a hazard.

51.8. Sharp debris should be dealt with appropriately before any handling takes place by brushing up debris and wrapping sharp objects carefully before disposing.

Safe Stacking and Storage

51.9.   All materials, products, equipment and debris on our premises should be stored in a manner that does not create or cause a hazard.

51.10.   Safe passage should be maintained at all times.

51.11.   Materials should be kept away from doorways and fire exits.

51.12.   Materials when not being used should be stored safely.

Working at Height

52.   Staff shall comply with all aspects of the Work at Height Regulations 2005 for operations involving work at height. The risk assessment process will identify how the potential work at height risks arise and how they impact on those affected. This information will then be used to make informed decisions on how the identified risks will be managed.

52.1.   All work at height shall be properly planned by a competent person(s).

52.2.   Work at height will not be carried out where it is reasonably practicable to carry out the work safely otherwise than from height (avoid).

52.3.   A suitable and sufficient assessment of the risks associated will be carried out with each job task that involves work at height.

52.4.   Steps will be taken to prevent, so far as is reasonably practicable, falls from height (prevent).

52.5.   Steps will be taken to mitigate the distance and consequences of a fall where it is not reasonably practicable to prevent a fall (mitigate).

52.6.   A Safe System of Work (SSoW) will be produced for each work at height task covering all aspects of the job, including the lead up to the job, the job itself and the necessary tidying up.

53.   All staff who are to undertake the task will be informed of the risk assessment findings and are personally responsible for ensuring that they understand and comply with the protective measures.

Communication and Consultation

54.   Staff will be informed as necessary on health and safety issues by one or more than the following:

54.1.   written instructions/information by email;

54.2.   one to one meetings;

54.3.   group meetings; and

54.4.   notice boards.

55. All staff must receive a copy of our Bridgeside House Health and Safety Policy and any subsequent amendments along with and the specific duties relevant to the member of staff. The organisations may require staff to sign documentation confirming they have read and understood the policy and the duties it places upon them. The signed documentation is held on their staff record.

Monitoring, Audit and Review of Safety Performance

56. The effectiveness of the policy will be monitored in the following ways:

57. Accidents at the following levels of severity will be analysed by the Building Coordinator with a view to determining and eliminating their causes:

    57.1. specified injury / dangerous occurrence / industrial disease;
    57.2. lost time accidents (seven days or more); and / or
    57.3. other injury

58. Regular and systematic inspections will be carried out to ensure that the requirements of the policy are being met; this will be achieved by carrying out regular audits.

59. Staff are reminded that they have a duty to report immediately to their line manager, any defect or safety concern of which they become aware. The Bridgeside House Management Group (BHMG) will review our safety performance on a regular basis and draw upon all available information to establish plans for on-going legislative compliance and improved health and safety risk control.

Review

60. This policy or any revision of it will be drawn to the attention of every staff member and new staff as they are recruited. The contents of documents produced under this policy will be brought to the attention of all staff to whom the contents are relevant. This policy and any documentation produced under it will be added to or modified as required and will be reviewed on a five year basis by an external health and safety consultant.

Annex 1: Specific Health and Safety Areas of Consideration

61. In addition to the policies and guidance contained within this handbook, each organisation may have other relevant policies covering the health and safety of their staff which must also be referred to, including:

SPSO Specific Health and Safety Areas of Consideration:

62. Additional policy references:
     62.1. Working for SPSO handbook for Scottish Public Services Ombudsman
     62.2. Communications Policy handbook for the Conduct and Behaviour policy, which provides guidance around expressing personal views on social media.
     62.3. SPSO - ICT handbook, which provides guidance on social media security.

63. Eye tests are available to all users of display screen equipment. We will make a contribution towards a frame and lens of their choice equivalent to the basic cost of a frame and single reflex lens at Specsavers or other similar supplier, to any member of staff who is identified by such eye test to require them, solely in respect of their use of display screen equipment.

Vehicles and Occupational Road Risk

64. The SPSO's operations involve the use of road vehicles. We ensure that all staff who drive for work purposes hold a valid UK license and have appropriate insurance. Staff will be requested to provide (at periodic intervals) their current, valid UK driving licence, insurance that covers business use and a current MOT certificate if necessary. Staff must inform their line manager immediately following any change to driving licenses including penalty points or disqualification.

65. Disciplinary action will be taken against any other person found to be driving without authorisation. Disciplinary action will be taken against any authorised driver who is driving a vehicle whilst under the influence of alcohol or drugs and/or driving in an unsafe manner.

66. A risk assessment will be carried out on the use of vehicles for work purposes.

67. Please refer to the following documents:

     67.1.   SPSO Guidance on Driving at Work
     67.2.   SPSO Travel and Subsistence Policy in the Governance, Risk and Finance Handbook
     67.3.   SPSO Annual Private Vehicle business use form

SHRC Specific Health and Safety Areas of Consideration:

    67.4.   SHRC Employee Handbook

    67.5.   Serious allergies have been identified in the office. Allergy Management is in place and signage placed visibly in the office and communal areas.

CYPCS Specific Health and Safety Areas of Consideration:

    67.6.

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Bridgeside House Personal Safety

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General Office Safety

1. The Bridgeside House location on McDonald road is well positioned to greatly reduce the likelihood of violent behaviour by visitors. The professional presentation of the building, reception area and surrounds all combine to present a calm environment which contributes to the diffusing of aggressive attitudes and behaviour. The directional signage to reception is clear, and no mention is made of the second floor. Additionally, the second floor offices display 'no entry' signage to discourage accidental unauthorised access to the secure working spaces. There is CCTV cameras installed in main entrance and reception area to deter any unwarranted behaviour and record any incidents.

2. All staff are responsible to ensure:

    2.1.   the mag-lock doors into the office spaces are closed at all times;
    2.2.   they carry their Access Fob at all times to enter the relevant office spaces[1];
    2.3.   all visitors are signed in by the Building Coordinator prior to accessing any office space,
    2.4.   they are trained and aware of the safety precautions they can take when meeting with an unknown visitor;
    2.5.   any visitor who appears aggressive in the entrance / reception area are not given access to any other part of the building;
    2.6.   when an aggressive visitor is detained in the reception/visitor room, notice is given to all members of staff to be cautious when exiting the building;
    2.7.   staff know that if they are alone in the office before or after normal office hours, they should not answer the office / front door unless they know it is safe to do so;
    2.8.   a manager is made aware of any incidents as soon as possible; and
    2.9.   a file note is taken by the staff member(s) involved in any incident and passed to the Building Coordinator, with an incident slip from the police if relevant.

Meeting with unknown visitors to the office

3. When meeting with an unknown visitor for the first time, it is recommended that two staff members should attend the meeting.

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[1] All staff and contractors must ensure they have their Access Fob is available for entry in and out of the office spaces. Any lost fobs must be reported to the Building Coordinator who will issue a replacement at a cost of £5 on a cost recovery basis.

4.   If a staff member has any concerns about their own personal safety, they should discuss this with their manager and do not, in any circumstances, attend the meeting alone.

5.   During a meeting, should a staff member feel the threat of any type of aggression or violence from a visitor, actions they can take include:

    5.1.   using a portable panic alarm for immediate assistance from a colleague;

    5.2.   pressing the hold-up alarm under the table in visitor room or behind Building Coordinator's desk for a direct link for Police Scotland assistance; and / or

    5.3.   requesting a colleague to dial '999' and request emergency assistance.

6.   SPSO staff: all SPSO complainants who would like to drop in to discuss their complaint should be encouraged to call the 0800 line first to arrange an appointment for a meeting. (SPSO staff should refer to: Meeting with complainants in the office.)

Lone Workers

In the office

7.   If a staff member will be working in Bridgeside House on their own, the staff member has a personal responsibility to ensure that someone knows they are in the office, at what time they are planning to leave and notifying when they have safely left work. Consideration should be given to the possible risks that the lone worker could face. Lone workers should not be at more risk than other staff and extra risk control measures may be required as the lone worker is more vulnerable when the unexpected happens. Lone workers should be capable of responding correctly to emergencies and should have access to adequate first-aid facilities.

8.   If undertaking lone working, staff should consider how they can raise the alarm in the event of an emergency or difficulty, for example, by carrying a personal mobile telephone. Where there are concerns, the staff member should approach their line manager.

Away from the office

9.   Before embarking on work away from the office, staff members will need to consider the implications for their health and safety and ensure that appropriate arrangements have been made to protect them against risk. If a member of staff is in any doubt, they should discuss the doubts with their line manager in the first instance.

10.   It is important that staff always let somebody know where they are going and their expected time of return. Where appropriate, a checking-in and checking-out system, or buddy system, should be employed by managers who have responsibility for lone

workers away from the office. In certain circumstances it may be necessary to double up staff on visits.

11.   Staff should remember that they are empowered to walk away from a situation where they feel their health and safety is being compromised.

12.   Staff who visit the premises of other organisations should ensure that they safeguard their own safety by reporting in and out, familiarising themselves with evacuation procedures, and abiding by any other procedures and conditions laid down for visitors.

Travel

13.   Staff members who are driving their own vehicle on the business of our organisations must comply with all legislation concerning the use of vehicles on the highway.

14.   Drivers on business must be alert to any circumstances that may increase the risk of accidents and act in an appropriate manner. It is important to take rest breaks during long journeys, or during periods of bad weather when the dangers increase and alertness must be maintained.

15.   If materials for use at work are to be carried, it is the responsibility of the driver to ensure that safe conditions of stowage and carriage are achieved. Work equipment should be carried in the boot or in a covered load area whenever practicable.

16.   Staff are reminded they have the legal duty to ensure that they are fit to work or drive safely. They should not be unfit to work or drive due to alcohol or drugs of any kind. Any action taken by the police, or any other substantive evidence of driving under the influence of drink or drugs whilst on business, will be treated as serious misconduct.

   16.1.   Staff should also remember to follow the undernoted guidance in respect of their personal safety:
      16.1.1. try to travel on busy routes, where possible;
      16.1.2. it is not recommended to pick up hitch-hikers;
      16.1.3. always lock thier car after entering or leaving it;
      16.1.4. have keys ready when approaching a vehicle to avoid delay in entering;
      16.1.5. check the interior of the car before entering it - especially the back seat - and carry a torch after dark;
      16.1.6. keep valuables secure and out of sight; and
      16.1.7. if followed, do not get out of the car, make sure that doors and windows are locked, sound the horn or flash the lights to attract

attention and use a mobile telephone (if they have one) to call for help.

Social Media

17. Social media refers to a variety of online interactive media that allows parties to communicate, share information, opinions or knowledge instantly in a public forum. Social media sites are continually developing but some examples include online social forums such as Twitter, Facebook and LinkedIn as well as blogs and video - and/or image-sharing websites such as YouTube, Flickr and Instagram.

18. Social media is a popular and accessible way to connect people and create a sense of community, however, these platforms can put at risk personal information and safety. Staff are responsible to ensure that appropriate steps are taken to safeguard personal information.

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Bridgeside House Hazardous products, PPE, Biohazards, Evidence Handling and Blood-Borne Viruses (BBVs)

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Overview

1. Due to the nature of our work, the risk to staff from exposure to hazardous substances is relatively small. We will ensure that no work is carried out which is liable to expose any staff or others to any product, chemical or substance hazardous to health unless a suitable and sufficient assessment of the risks created by that activity and of the steps needed to reduce the risks has been made.

Hazardous products

2. Exposure to hazardous products, chemicals or substances will either be prevented or, where this is not reasonably practicable, adequately controlled.

3. Staff will be provided with all necessary, information, instruction and training appropriate to their role to protect them from the risks associated with the hazardous substance in use. In particular, staff will be expected to follow safe working procedures and safe systems of work including the correct use of any personal protective equipment and clothing. Measures introduced to control exposure will be maintained, examined and tested to ensure their continued effectiveness. Personal protective equipment will be provided only as a last resort means of controlling exposure to hazardous substances.

4. Staff must report if they are suffering aches, headaches pains or any other symptoms, which may be attributed to their use of hazardous substances at work.

5. Each premises shall maintain a Control of Substances Hazardous to Health (COSHH) register to establish whether there are substances that are potentially hazardous to health at work, and if so then a written assessment will be required together with an in-depth study of the process/activity. The assessment must be suitable and sufficient and cover the risks created by the work and should identify the steps which need to be taken to control the risks.

Biohazards

6. The risk to staff from exposure to biohazards is relatively small. If contaminated with blood or other body fluids, staff members should take the following action without delay:

    6.1.   wash splashes off the skin with soap and running water;
    6.2.   if the skin is broken, encourage the wound to bleed, do not suck the wound – rinse thoroughly under running water;

6.3.   wash out splashes in your eyes, nose or mouth with plenty of tap water – do not swallow the water;

6.4.   record the source of contamination; and

6.5.   contact the nearest Accident and Emergency department for advice without delay and report the incident to the Building Coordinator.

Blood-borne viruses (BBVs)

7.   Blood-borne viruses (BBVs) are viruses that some people carry in their blood and which may cause severe disease in certain people and few or no symptoms in others. The virus can spread to another person, whether the carrier of the virus is ill or not.

8.   The main BBVs of concern are:

8.1.   Hepatitis B virus (HBV), hepatitis C virus and hepatitis D virus, which all cause hepatitis, a disease of the liver; and

8.2.   Human immunodeficiency virus (HIV) which causes acquired immune deficiency syndrome (AIDS), affecting the immune system of the body.

9.   These viruses can also be found in body fluids other than blood, for example, semen, vaginal secretions and breast milk. Other body fluids or materials such as urine, faeces, saliva, sputum, sweat, tears and vomit carry a minimal risk of BBV infection, unless they are contaminated with blood. Care should still be taken, as the presence of blood is not always obvious, and staff should follow the steps outlined above. Prompt medical advice is important. The circumstances of the incident need to be assessed and consideration given to any medical treatment required. Treatment might be appropriate following infection with a BBV, but to be effective, it may need to be started quickly, so contact should be made with the nearest Accident and Emergency department for advice, without delay.

10.   Experience, however, shows that the risk of BBV infection is low for the majority of occupations, as direct contact with blood and body fluids does not occur regularly.

11.   Generally, there is no legal obligation on staff members to disclose they have a BBV or to take a medical test for it. If a staff member is known to have a BBV, this information is strictly confidential and must not be passed on to anyone else without the staff member's permission.

Personal Protective Equipment (PPE)

12. The requirement for staff to use PPE is rare. In the first instance, we seek, so far as reasonably practicable, to ensure the adequate control of risks by means other than through the provision of personal protective equipment (PPE) and clothing. However, if the the nature of the operations means that the use of such protection is required, staff would be provided free of charge with PPE and clothing on a personal basis. Staff would be instructed in the correct usage and also as necessary, in correct storage and maintenance.

13. Staff would be required to confirm in writing that they have received the various items of PPE required for their job that have been identified as part of the risk assessment process. Staff would be reminded that failure that failure to use correctly the PPE / clothing with which they have been provided will result in disciplinary action being taken, such as verbal / written warnings or dismissal for persistent non-compliance.

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Bridgeside House Accident Reporting and First Aid

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Accident Reporting

1. Bridgeside House Management Group (BHMG) maintains and implements effective accident and incident reporting procedures to ensure immediate notification and investigation requirements are instigated. The prime function of these procedures is to prevent further recurrences and to identify and understand the primary and root causes.

2. The Building Coordinator will ensure compliance with the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Fatalities, specified injuries, notifiable diseases and dangerous occurrences must be reported to the HSE Incident Contact Centre as soon as possible.

3. Staff must report all accidents, injuries, cases of ill health arising out of work activities, potentially hazardous incidents and near-misses (such as incidents that might have resulted in a reportable occurrence but for luck or the exercise of due care) to the Building Coordinator.

4. All accidents and cases of work related ill health are to be recorded in the accident book. The accident book is kept by the Building Coordinator.

5. The Building Coordinator is responsible for investigating incidents and for taking any necessary follow up action after an accident/incident.

Incident Reporting

6. Staff are requested to report any incident (or near miss) to the Building Coordinator. Feedback will be given to staff member reporting an incident and if necessary action will be taken as soon as possible to rectify any reported incident.

First Aid Arrangements

7. The Building Coordinator will ensure sufficient numbers of trained persons and equipment are provided by each organisation to deal with accidents and injuries. First aid requirements will be identified through the risk assessment process to ensure the adequacy and appropriateness of first aid personnel, equipment and facilities. To this end, each organisation will be responsible for providing information and training on first aid to identified staff to ensure the needs of the organisation are met.

8. It should be noted that the Health and Safety (First Aid) Regulations 1981 place the responsibility on employers to provide first aid for their staff. Additionally, each

organisation should also ensure they are equipped to meet the first aid requirements of persons other than staff, for example, clients / visitors / contractors.

9.   In all cases a sufficient number of first aiders or emergency first aiders should be designated, taking into account annual leave and sickness absence etc. All first aiders and emergency first aiders will be appropriately trained by an accredited organisation.

10.   First aid boxes are located in each t-point, kitchen and welfare room. These are audited each quarter for supplies.

11.   Appointed persons are listed on the staff notice boards and the first aiders / medical advisers are the appointed person's responsible for calling an ambulance in an emergency situation.

12.   The Building Coordinator will facilitate regular update meetings with all Bridgeside House first-aiders and ensure the first aid requirements and provisions are adequate. If the Building Coordinator is not in the office when a serious incident arises, a manager will substitute for the Building Coordinator.

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Bridgeside House Security, Visitor Room and Panic Alarm Procedures

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Building Security

1.   Bridgeside House location is a low risk crime area and with the professional reception and open environment which contributes to diffusing possible unacceptable behaviour by presenting a welcoming reception.

Access Restrictions

2.   Bridgeside House has secured access for staff and designated contractors only, unless specifically authorised by a staff member. Visitors should be accompanied by a staff member whilst in the building.

3.   Staff and regular contractors who work in the building are given access by a security door fob. Each door fob is designated for specific areas in the builing thus restricting unauthorised access, and ensuring the security and confidentiality for each office space.

4.   For visitors and contractors without a secure door fob there is a video door entry system in place to allow authorised access. Clear signage directs all visitors and deliveries to reception on the firs floor where the Building Coordinator will provide appropriate assistance as required. All staff are encouraged not to open the building doors to any unannounced, unknown visitors, and to direct everyone to the first floor reception.

5.   The offices are alarmed and monitored by our external security partners outside of designated working hours 07:00 and 19:00 for any unauthorised access.

Closed-Circuit Television (CCTV)

6.   For safety, security and wellbeing of all persons using Bridgeside House two CCTV cameras and the associated electronic equipment has been installed in Bridgeside House. One camera focuses on the main entrance of the building, and one camera focuses on the corridor and reception on the first floor. This is a preventative measure designed to reduce the likelihood of criminal or threatening behaviour.

7.   The system is completely stand-alone, ie, not linked to any other IT network in the building. It is kept in a closed cupboard behind the Building Coordinator with password only access and the monitor turned off.

8.   Recordings are retained for 21 days and can only be downloaded directly from the hard-drive onto a USB device. Information cannot be shared, accessed or stored in any other way.

9.   Clear signage is located at the entrance doors of the building indicating SPSO is managing the CCTV with telephone and email contact details if required.

10.   Recordings will normally only be accessed for the following purposes:

   10.1.   after a potentially criminal or threatening incident has occurred, for the primary purpose of providing evidence to the police; and /or
   10.2.   where we have a legal obligation to access the recording, for example, to respond to a subject access request (SAR)

11.   Requests can be made by or on behalf of any BH tenant if they consider it meets the above criteria but any request must include a statement of reasons including, as far as possible the following:

   11.1.   time and date of recording sought;
   11.2.   any other informatoin which would help to ensure we have the correct segment (description of individuals/number of people involved);
   11.3.   reasons for seeking access.

12.   The building co-ordinator will identify whether we hold relevant footage and whether or not the footage includes any potentially identifiable third parties. In doing so, the building co-ordinator can ask for assistance. This may include allowing other people to view the footage.

13.   When a SAR request is made the rights of third parties should be protected by:

   13.1. limiting what we disclose;
   13.2. contacting the third party, when we can identify them, to seek their views and / or consent, prior to making any decision to disclose;

   If we cannot identify the third party, or consider contacting them would cause undue distress, we should not release any footage. When the disclosure involves the police, their views should be sought before contacting any third parties.

Visitor Room safety and guidance procedures with unknown visitor

14.   Safety is paramount. If a staff member finds themselves in a situation that they cannot, or believe they cannot manage, they should activate the alarm for assistance. They should never ask a colleague to meet with someone that they would not feel safe to meet.

   14.1.   To ensure adequate security for staff it is recommended that two members of staff should attend initial meetings with unknown visitors, where there is any cause for concern.

14.2.   On arrival the visitor will be met in the public Reception area. The staff member may choose to use the visitor meeting room, if comfortable. The initial instinctive feeling should be trusted when making a risk assessment.

14.3.   A meeting can take place at reception by sitting or standing. This can be a good way to control visitors time when gaining advice especially if the person is knows or their complaint is known and can easily be delt with without comiting time in the visitors meeting room.

14.4.   Before meeting a visitor, staff can arrange for the door to be left open or the Building Coordinator to interrupt the meeting if they are in any way concerned with the way the meeting is going, such as raised voices.

14.5.   Once in the visitor meeting room, visitors should sit at the rear of the room facing the door and staff members should position themselves nearest the door, where the panic button is. A tip to ensure you get seated in the correct position is to enter the visitor meeting room first and place your papers on the seat you would like to use, then invite the visitor in to join you at the seat across from you. Once the visitor has sat down return to reception to collect the portable panic alarm.

14.6.   If the staff member becomes concerned for thier safety during an interview, they should first try and excuse yourself and exit the room. If you cannot do so, or the situation escalates, activate the panic alarm for internal assistance and / or the hold-up alarm for immediate police attention.

SPSO visitors

15.   If possible, members of the public who attend the office to discuss an SPSO complaint should have an appointment pre-arranged via our 0800 line. At these times there must be sufficient cover to support an Assessment and Guidance (AG) team member and duty complaint reviewer (DCR) to attend an initial meeting for 30 minutes.

16.   If an existing complainant for whom we have a complaint on file comes to the office without an appointment and there are any concerns about safety or security, the staff member can decline to meet with them and may wish to consider offering them an alternative date and time, or arrange to telephone them.

17.   On occasion, we do receive visitors who wish our advice on a new complaint. If the Guidance and Assessment team have any concerns about a member of the public who arrives at reception they will not ask to meet with them in the visitor meeting room but will simply offer general advice via the reception area.

18. It is recommended that should it be required, the complainants are advised of the unacceptable actions policy and that everyone on both sides are treated with respect. This can be good way of setting the tone and controlling a situation if it starts to escalate by reminding them of the policy. The hold-up alarm and panic alarms can be used in a similar way to control the situation.

19. A member of the SPSO management team should always be informed of where a meeting with a complainant is being carried out.

20. Please note an induction loop system is available for use in the reception and meeting room for visitors who are hard of hearing (this is available from the building coordinator).

Types of Alarms

Hold-up alarms

21. Hold-up alarms are positioned under the reception desk and under the visitors' meeting room table. The hold-up alarms are silent so as not to antagonise a situation but have a direct link to Police Scotland for immediate response. The system is live when showing a green light. To activate a hold-up alarm in an emergency:

22. press both buttons under the desk simultaneously to engage device. The light will turn light amber.

23. Then hold both buttons for a count of five seconds and the light will turn red.

24. When the light is red this means the alarm has been activated for a 'blue light' Police Scotland immediate response.

Panic alarm – Personal / mobile

25. Personal mobile panic alarms are available for staff use and when activated sound an internal alarm in each office suite. They are also connected to the pager carried by the Building coordinator, so if the reception desk is vacated a response can be activated remotely. This alarm is not connected to Police Scotland but for internal use only should a staff member require immediate assistance. When the internal panic alarms are sounded, two managers / Building coordinator with attend the scene to assist and support.

Panic alarms - Facilities

26. Panic alarms are also installed in the wefare room, accessible toilets and shower cubicles and sound in the same way as the personal mobile panic alarms above.

Procedure on activation of panic alarms

27. When any panic alarm is activated, the alarm sound is generated at the alarm outstations panels located in all suites:

    27.1. first floor in the SPSO office, SHRC office, and Building Coordinator security cupboard; and
    27.2. ground floor in CYPCS office.

28. The panels display a message detailing which alarm has been activated and its location. The Building coordinator will be wearing a pager when in the office which also responds to the alarms. Outside the visitor room upon activation there is a flashing light above the door visually indicating the location of the alarm activation.

29. On activation, the Building Coordinator and / or managers near the activation point should immediately make their way to the location to provide assistance and support. If it is in response to an aggressive action in the visitors meeting room the response should be controlled and measured, and in the first instance no more than two people should enter the visitors area to provide support.

30. Once the support staff have arrived to provide support, another staff member should stand near the area advising colleagues not to enter the area, unless specifically qualified to assist with the situation. Other staff should be informed of the situation via email.

Responding to an aggressive / violent situation

31. When responding to a Personal mobile panic alarm, be aware that:

    31.1. bringing more people into a conflict situation can make the visitor feel outnumbered and escalate the situation,
    31.2. standing side by side, directly facing the individual can appear intimidating, splitting up and standing separately can help split the focus of attention and make it harder for the individual to focus all their attention in one direction,
    31.3. stepping into someone's personal space can make them feel very uncomfortable,
    31.4. physical contact can exacerbate the situation, even if the intention is for it to be supportive, and should be avoided, and

31.5. gradually lower your own voice to encourage someone to stop shouting and de-escalate the situation.

Deactivation of alarm

32. The panic alarms can be accepted and silenced by pressing 'A' on the display panels. The alarm must be deactivated and reset by the Building Coordinator from the alarm panel keypad in the Building Coordinator's cupboard behind reception desk. The code to reset the alarm is: v^^^^ (down, up, up, up, up)

33. Note: If any panic alarm is not reset then all alarms remain deactivated. Therefore, it is important to ensure all the panic alarms are reset. If in doubt, please contact the Building Coordinator.

34. The hold-up panic alarm light will change from red to green by pressing the two buttons for five seconds. The alarm panel does not need to be reset.

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Bridgeside House Fire Procedure

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Overview

1. The correct approach to fire safety is specifically one of fire prevention, i.e., to prevent fires breaking out. However, it would be dangerous to assume that fires can never happen. Therefore, systems are in place to ensure that:

    1.1.   fire can be detected in a reasonable time and people can be warned reliably;
    1.2.   people who may be in our buildings can get out quickly and safely;
    1.3.   staff in our buildings know what to do if there is a fire;
    1.4.   all premises have suitable and sufficient emergency procedures; and
    1.5.   there are adequate supplies of fire-fighting equipment available.

2. The minimisation of property damage is important but not if it jeopardises the safety of staff or third party. The safety of life must override all other considerations at all times.

3. In accordance with the Fire (Scotland) Act 2005 & Fire Safety (Scotland) Regs 2006 SPSO will ensure that a fire risk assessment is carried out on each site that we operate.

If You Discover a Fire

4. Immediately - operate nearest manual call point to activate a fire alarm. Call points are located at all fire doors and on all fire exit routes.

5. Attack the fire only if it is safe to do so and you are sure which fire extinguisher to use - otherwise evacuate premises by nearest exit. Do not take personal risks.

Fire Alarm and Evacuation Procedure

6. A continuous sound from the alarm is the evacuation signal and all persons should leave the premises immediately on hearing it.

7. On Hearing the Evacuation Signal

    7.1.   Evacuate and leave your floor by the nearest exit.
    7.2.   Leave the building by the nearest staircase – main staircase or rear fire exit.

7.3.   Do not stop to collect personal belongings.

7.4.   Do not use the lift.

7.5.   Do not re-enter the building until told to do so by the Chief Fire Warden.

7.6.   Assemble at the fire assembly muster point.

Fire Assembly Muster Points

8.   There is only one assembly muster point - opposite Bridgeside House on the opposite side of Bridgeside house on McDonald Road.

BHFireAssemblyMu
sterPoint20190626.p

Exit Routes

9.   When the fire alarm sounds look for the nearest green fire exit sign with person, arrow, door indicating the nearest fire exit for your location. All parts of Bridgeside House have access to two fire exit points. Each fire exit route has fire doors that have 60 minute smoke protection for anyone having difficulties departing the building.

10.   Exiting Leith Walk side of the building, taking you downstairs, exiting onto rear car park. Walk round from Peppermill Wynd safely to McDonald Road to fire assembly muster point.

General Guidance

11.   In the event of alarm activation, the Chief Fire Warden (or Deputy in their absence) will check the fire panel (located in the main entrance) to ascertain where the fire is located. The fire brigade can be alerted by activating the manual fire alarm call point or by calling them on (9) 999. Only one person should be liaising with the Fire Brigade, and in most cases that will be the Chief Fire Warden or Deputy Chief Fire Warden.

12.   All staff should:

12.1.   ensure they know where to find the nearest escape routes, manual call point and fire extinguishers,

12.2.   act quietly and close all doors and windows behind themselves,

12.3.   know who the floor fire Wardens are and ensure the fire Wardens know if they need assistance,

12.4.   group together with others from the same suite on arrival at the fire assembly muster point, and

12.5.   please use common sense.

Visitors to the Office

13.   All visitors are the responsibility of the person who is hosting them and should be accounted for and escorted by that person to the fire assembly muster point.

14.   Any contractors should be accounted for via the contractor sign in book.

Chief Fire Warden – response to people with accessibility issues

15.   Check for any activation of Refuge points. Anybody with PEEP (Personal Emergency Evacuation Plan) should be attended to by designated fire Warden for assistance exiting the building, or reported immediately to fire & rescue service on their arrival. For anybody exiting the building slowly the refuge points can be a place to rest to allow faster moving people past as they have 60 minutes of safety.

PersonalEmergency
EvacuationPlan (PEE

Refuge Points

16.   There are seven Refuge points, which are located on the staircase landing of each fire escape route. In the event of a fire these points provide smoke protection for 60 minutes. At each point there is a call button which reports to the main entrance where Chief Fire Warden and/or Fire & Rescue service can be contacted for a recovery plan.

Chief Fire Wardens

17.   Floor fire Wardens will ensure the evacuation is complete for all offices, meeting rooms, store rooms, toilets, kitchens, stairwells, hallways and common areas they are responsible for. The fire Wardens will be the last people to leave their respective floors. Each floor has assigned fire Wardens to cover in case of absences.

18.   Remember your fire Wardens may not be on the floor or in the building to complete their checks. If that is the case agree quickly with your colleagues who should check your area, then exit the building by the appropriate route. Whoever checks the area

should pay particular attention to the staircases, ensuring as far as possible that nobody has entered a checked area from a different staircase.

19. Once exited the building all fire Wardens should report to the Chief Fire Warden to update their areas are clear or report any issues i.e. sight of smoke or fire or person trapped.

20. This information will then be relayed to the Fire & Rescue service on arrival.

Responsibilities & Checking Routes in Evacuation

21. On the sound of the Fire Wardens are to Shout "Fire" to alert, then inform everyone to evacuate and head to nearest exit, leave personal belongings and close windows and doors as they go.

22. Ensure all internal doors, fire doors and windows are closed as you leave each area.

23. Check for any signs of fire or smoke and check if any smoke detectors overhead are flashing. Report to Chief Fire Warden and fire and rescue service.

24. Fire wardens that check toilets for male, female & accessible include all cubicles are clear If you find a locked toilet or cannot open a door that would normally open freely shout fire-evacuation to alert! if no answer then you should assume that there is a person in that area. If you cannot open the door leave the area immediately and let the Chief Fire Warden (or Deputy in their absence) know that you think there is someone left in the building giving the location. The Chief Fire Warden will check with the managers to see if there is anyone unaccounted for, and if there is, the Chief Fire Warden will let the Fire & Rescue service know that someone is missing.

25. Check refuge points and fire exit routes ensuring anybody with disabilities are assisted in line with their PEEP. Report anybody exiting building slowly to Chief Fire Warden.

26. Ensure all areas are fully evacuated.

Second Floor

27. Fire Warden 1 (suite 5 SPSO office & toilets): check Unicorn meeting room, office floor for suite 5 including Assessment & guidance team, Scottish welfare fund and Investigation 1 team, tea point 1, Archive room, Eagle room, Ombudsman office, Server room, the male and female toilets including cubicles are clear. Exit via east main fire escape route staircase.

28. Fire Warden 2 (suite 6 SPSO office & meeting rooms): check investigation 1 team, tea point 2, investigation 2, check Pine & Thistle meeting rooms are clear and doors closed. Printing and recycling area clear. Exit via back fire escape route staircase.

First Floor

29. Fire Warden 3 (all Suite 3 conference room and toilets): check suite 3 all SPSO office space including two offices behind glass at opposite ends, check all areas of conference room 2 and walk through to conference room 1, checking all alcoves and storage cupboards, check visitor meeting room and reception clear. From building coordinator reception desk collect contractor book, visitor book, Fire Emergency Evacuation plan folder. Check male toilet, shower room and female toilet as per procedure above and exit down main fire exit stair.

30. Fire Warden 4 (all Suite 4 SHRC, boardroom & kitchen): Check suite 4 SHRC office space, glass meeting room, meeting point and tea point are clear. Check Boardroom, accessible toilet, kitchen and welfare room are all clear. Head down via back fire exit stair from kitchen.

Ground and Basement

31. Fire Warden 5 (all Suite 2 CYPCS): check suite 2 CYPCS open plan office space is clear, check commissioner office, tea station and seating area all clear, all glass offices clear, project desk clear, office at back facing McDonald road clear, glass office clear, check storage rooms and printing area clear and exit via back fire exit down steps.

32. Fire Warden 6 (all Suite 1 HTA): Check Gas and power is turned off and kitchen is clear, HTA office space clear, meeting rooms and store rooms are clear, collect fire safety document pack and exit via main entrance. Once everyone has been accounted for report to the Chief Fire Warden.

33. Fire Warden 7 (ground floor toilets and basement): check the ground floor male, female and accessible toilet are clear. Check the basement shower facility / accessible toilet block is clear, check car park is clear and all internal doors and plant room are clear and closed in each area. Exit via car park east fire exit up steps to fire assembly muster point.

34. Once all staff and visitors are present and accounted for, each fire Warden should confirm to the Chief Fire Warden all people are accounted for and the floors are clear. The event attendance list, contractors book and visitor book on all external visitors, and business continuity plan and should be passed to the Chief Fire Warden at the assembly fire assembly muster point.

General Information

35. The fire alarm is connected directly to the Fire & Rescue service. On activation, they will send fire engines to the office. The Chief Fire Warden (or Deputy in their absence) will telephone Fire Brigade ((9) 999) to confirm there is a need for them to attend.

36. Automatic fire doors will be activated when alarm sounds and doors should close on their own. However, if you notice any door still open as you sweep the office please close it.

37. Fire Wardens should be aware of any staff that require assistance leaving the building - details will be in Fire Evacuation Emergency plan folder under PEEP. Staff should take responsibility for their own safety by informing fire Wardens if they think they would need assistance on evacuation. However, as fire Wardens will be sweeping the areas it may be necessary for them to ask another member of staff to provide this assistance. Please remember that if you need assistance you may need to wait until the majority of members of staff have left the area before you make your escape. If evacuation is not possible, the staff member should be left at a Refuge point with the door closed and the Chief Fire Warden should be alerted to inform Fire Brigade on arrival.

38. Fire Wardens are not required to rescue injured members of staff but inform Chief Fire Warden (or Deputy in their absence) and this can be passed to Fire & Rescue service.

Manual Call Points - Alarm

39. These are found on every floor at fire safety doors, enroute of fire escape on the main landings of the staircase including basement areas.

Automatic Doors and Lift

40. On the activation of alarm:

   40.1. both inner and outer glass doors from the main foyer will automatically release open and remain open;

40.2. doors to the staircase will automatically close on the alarm; and

40.3. the lift will automatically travel to the ground floor and doors close.

Location of Fire Extinguishers

Basement	Carpark Stair	On wall by building access from car park	1 Foam
	Rear Fire Exit	On wall as you exit Fire Exit door	1 CO2
	Carpark	South rear	1 Foam
		North rear	1 Foam and 2 CO2
Ground	Stair	By Entrance	1 CO2 and 1 Water
	Suite 2	In office on left	1 Foam and 1 CO2
		By Fire Exit by Printers	1 CO2 and 1 Foam
	Suite 1	Office	2 Foam, 1 CO2, 2 Water and 1 Fire Blanket
1st Floor	Stair	Landing on staircase	1 Water
	Suite 3	By reception / outside conference room 1	1 Foam and 1 CO2
		Fire Exit via kitchen	1 Foam and 1 CO2
	Suite 4	Outside accessible toilet by boardroom by wall	1 Foam and 1 CO2
		Inside office by pillar	1 CO2 and 1 Foam
		Kitchen by pillar	1 CO2, 1 Foam, and 1 Fire Blanket
2nd Floor	Suite 5	On Left on entrance wall by server room	1 Foam and 1 CO2
	Suite 6	On Left on entrance wall by tea station	1 Foam and 1 CO2
		By Fire Exit at rear by printing station	1 Foam and 1 CO2

	Stair	Landing on Staircase	1 Water

Types of Fire Extinguishers

41.   Each fire extinguisher is coloured red but has a coloured strip indicating type.

Type	Colour Code	Description and Uses
Water		Most common portable extinguisher **Used for** - fires involving most solid materials incl. wood, paper and textiles **Not for use on**- electrical, flammable liquid or fat fires or metal fires
Foam		**Used for** - burning flammable liquids (for example, oils). It works by smothering the fire. It can also be used for wood, paper and textiles **Not for use on** – electrical equipment or flammable metal fires
Carbon Dioxide CO2		**Used for** - electrical equipment fires. It can also be used for flammable liquids **Not for use on** – Wood, paper and textiles or flammable metal fires

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