

# Health and Safety Policy

This document aims to provide a safe, healthy and enjoyable workplace for our staff, students and clients.

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## 1. General Policy on Health and Safety

1. Wilderness Expertise recognises and accepts the responsibility as an employer for providing, so far as reasonably possible, safe and healthy work places and working environment for all its employees.
2. It is the policy of the Directors to take such steps as are reasonably practicable to meet this responsibility. To facilitate this proactive stance the following points must be focused upon:
  - a) The provision and maintenance of equipment and systems of work;
  - b) Arrangements for the use, handling, storage and transport of articles and substances;
  - c) The provision of information, instruction, supervision and where relevant training to enable employees to recognise hazards and contribute positively to the health and safety of themselves and others at work;
  - d) The provision and maintenance of means of access to places of work;
  - e) The maintenance of places of work in a safe condition;
  - f) Provision of a healthy working environment.
3. The responsibility for the co-ordination of safety policy, implementation of safe working practices, the provision of safety equipment where required and the publication of the health and safety instructions, rest with the nominated Safety officer.
4. Without detracting from the Safety Officer's role, an external safety advisor may provide competent technical advice on health and safety matters where this is necessary to assist those responsible.
5. Employees are reminded that it is their responsibility to communicate concerns over health and safety to the Safety Officer. In addition, if employees are asked to perform duties beyond their training they must bring this discrepancy to the attention of the Safety Officer or the safety advisor. Good communication at all levels is vital.
6. No safety policy is likely to be successful unless it actively involves employees themselves. In this connection the Director reminds all employees of their own duties under Section 7 of the Health & Safety at Work Act, 1974.
7. A copy of this statement will be issued to all employees on their taking up employment. Updated, reviewed or modified copies will be made available when they are produced.

Signed, .....Date, .....

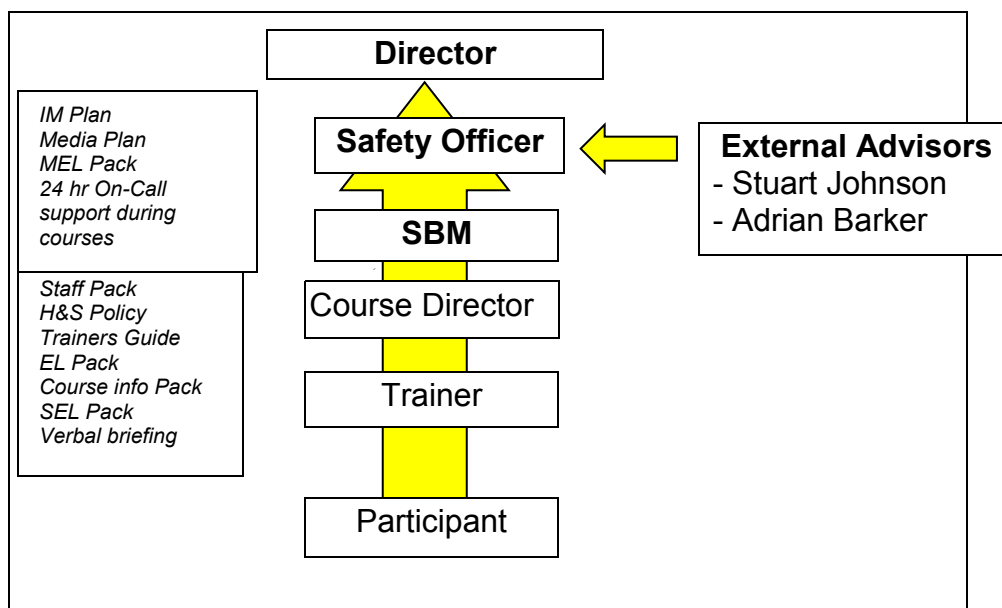
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## 2. Organisation for initiation of the policy

Satellite Business Managers (SBMs) are primarily responsible for the Health and Safety of their programmes and must ensure that this policy is adhered to. Naomi Roberts is the nominated Safety Officer and when required they may call upon Stuart Johnson (MIC) for land-based issues or Adrian Barker (BCU Level 5 coach) for Water Based issues who act as the external safety advisors respectively. To increase the awareness of the Policy, temporary employees will be required to sign the Policy document when they accept the contract.

Communication over safety issues should go through the hierarchy detailed below and to the Safety Officer as quickly as possible and where necessary as a written report.

The Health and Safety Hierarchy:



The safety systems in place should minimise the possible effect of the hazards. These systems must be adhered to. This will ensure employees' and client health and safety. Details of the specific systems and procedure are given in the next section.

It is the responsibility of SBMs to ensure that up to date staff files are kept on all activity instructors containing: their qualifications, CV, completed references, completed CRB check at enhanced level, Interview / Training dates, and signed copies of the Code of Conduct and Child Protection policy.

Wilderness Expertise is committed to using a 'Preventative Approach'. The following general factors act as guidelines of the preventative philosophy:

- Awareness of potential hazards and dangers.
- Sound judgement and experience of what constitutes a dangerous situation.
- Preventing access to dangerous situations for those ill equipped to cope.
- Appropriate supervision.
- Knowledge of how to help oneself and others in danger.

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As an overview the following assessment system is used to cover company activity:

- Identify possible hazards
- Assess risk. Who will be effected and how seriously.
- Rules and systems in place to avoid hazard, evaluate measure of control.
- Backup system. Action if an accident does occur.
- Monitoring and review:
  - i.e. Action if new hazard is located or a near miss occurs.

### **3. Risk Assessments and responsibilities**

This section outlines the general hazards encountered with specific activities. Every group / location will present different hazards. It is the responsibility of the SBMs to ensure that the correct assessment has been made. This may be delegated to a Course Director if a particular expertise is required, but must ultimately be authorised, by signature, by the SBM prior to the activity commencing. The following points are to be used to assess the risk of any activity or programme to produce a safe learning environment. For each activity an activity sheet must be filled out, a copy of an activity sheet is attached (section 5.1).

#### 3.1 Definitions:

- Hazard:** Anything that has the potential to cause injury or harm.
- Risk:** A set of circumstances, either individual or combined, that may lead to physical or emotional harm, to any individual involved in an activity.
- Acceptable Level:** The containment of those circumstances within a clearly defined framework of safety, that should prevent or reduce the possibility of any physical or emotional harm to any individual involved in an activity.

#### 3.2 The factors to be considered for all activities:

- Environmental:** Remoteness, History of hazards (e.g. past rock fall), weather, and terrain.
- Medical:** External Medical cover, location, quality. Possible infections, Medical history of individuals, Qualification of Instructor
- Human:** Discipline, control, Maturity, appreciation of risks/hazards, Drug use, Emotional stability
- Activity:** Match group ability to activity, Training / supervision
- Travel:** Quality of vehicle, Driver standard, Road conditions

The list above gives the details to be considered for all trips and the variables that arise for specific locations. The more general issues that are common to groups are covered in the following section.

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## 4 At Risk Groups

### 4.1 Adult Groups

| Hazard                                  | Risk   | Systems   | Back-up   |
|---|--------|---|---|
| Medical Illness                         | Med    | Medical Forms completed pre-activity<br>Ensure medicine carried, First Aider on site                                      | Research nearest hospital – see course info pack  |
| Psychological disturbance               | Varies | Discuss safety systems<br>Provide support   | Stop activity / comfort individual.   |
| Accidents due to bad behaviour          | Varies | Explain risks. Pre activity Brief lay down activity rules. 1-12 ratio (activity dependant, NGB guidelines to be followed) | Stop activity (Drop and Deal)<br>Stop individuals from participating.                                     |
| Injury due to incorrect manual handling | Varies | Ensure everyone is given appropriate brief on lifting and carrying of equipment and individuals                           | As with Accidents due to behaviour, in addition ascertain if there are any predisposing factors to hazard |

### 4.2 Youth Groups

| Hazard                                  | Risk   | Rules   | Back-up  |
|---|--------|---|--|
| Medical Illness                         | Med    | Medical Forms completed pre-activity<br>Parent consent/teacher<br>Ensure medicine carried First-Aider on site   | Research nearest hospital – see course info pack   |
| Psychological disturbance               | Varies | Discuss safety systems<br>Provide support   | Stop activity / comfort individual.  |
| Accidents due to bad behaviour          | Varies | Explain risks.<br>Pre activity Brief<br>Lay down activity rules.<br>1-12 ratio  | Stop activity (Drop and Deal)<br>Stop individuals from participating.                                    |
| Accidents due to bad behaviour          | Varies | <b>Ratios are critical. Factors include trainer experience, teacher presence and experience, and student needs</b><br>(activity dependant, NGO guidelines to be followed) | Stop activity  |
| Injury due to incorrect manual handling | Varies | Ensure everyone is given appropriate brief on lifting and carrying of equipment and individuals   | As with Accidents due to behaviour, in addition ascertain if there are any predisposing factorsto hazard |

#### 4.3 Instructors

| Hazard                                  | Risk   | Rules  | Back-up  |
|---|--------|--|--|
| Activity accident                       | Low    | Work within qualifications at known site. All instructors to hold an up to date first-aid cert.    | Medical cover<br>Course director<br>24 hr On-Call system<br>Insurance                            |
| Negligence                              | Low    | View all qualifications certificates before activity<br>References requested<br>Observations by CD | Insurance  |
| Child abuse                             | Low    | Criminal Background Check (CRB) on all delivery employees  | National Governing Body training   |
| Injury due to incorrect manual handling | Varies | Ensure everyone is given appropriate brief on lifting and carrying of equipment and individuals    | As with Accidents due to behaviour, in addition ascertain if there are any predisposing factors. |

#### 4.4 Office Workers

| Hazard                                  | Risk   | Rules   | Back-up   |
|---|--------|---|---|
| Electric Shock                          | Low    | Annual electrical check   | First Aider on site   |
| Fire                                    | Low    | Marked exits & extinguishers  |   |
| Manual handling                         | Low    | Mark heavy boxes<br>Induction / Staff training  |   |
| Injury due to incorrect manual handling | Varies | Ensure everyone is given appropriate brief on lifting and carrying of equipment and individuals | As with Accidents due to behaviour, in addition ascertain if there is and predisposing factor to hazard |

#### 4.5 First Aid Courses

| Hazard              | Risk | Rules   | Back-up                            |
|---------------------|------|---|------------------------------------|
| Moving casualties   | Med  | Brief about correct procedures                | First Aider on site and insurance. |
| Fire                | Low  | Brief about exits                             | First Aider on site                |
| Infection - Manikin | Low  | Use cleaning swaps<br>Change lungs frequently |                                    |

#### 4.6 Climbing Courses

Types Offered: Introduction / SPA Training / SPA Assessment

| Hazard                   | Risk | Rules  | Back-up  |
|--------------------------|------|--|--|
| Climbing accident        | Low  | Qualification to be checked<br>Site specific, SPA and above            | First Aider on site                            |
| Kit failure              | Low  | Equipment to be logged and checked.                                    | Monthly kit checks by SPA,<br>Annual FPE check |
| Individual accident      | Low  | Group control, discipline with a 2nd adult present. Hand rail use etc. | First aider on site                            |
| Rock Fall & Site Safety. | Low  | Recce. site and research history<br>MIA Advice / Helmets worn.         | First aider on site                            |

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#### 4.7 Travel

A course information pack is carried containing: Emergency information, Nominal roll, and mobile phone and contact numbers. (N.B. Minibus Safety RS GEN 146). MIDAS training is a minimum requirement to drive Minibus's on our courses. All members of the company that are required to drive company cars must be inducted by the Resource Manager for their safe and responsible use before they are authorised to drive. A copy of their driving licence should be held in staff files.

| Hazard                                | Risk | Rules   | Back-up  |
|---------------------------------------|------|---|--|
| Strains from Loading                  | High | Use Ladder provided.<br>Only adults on roof.  | First Aider present<br>Research nearest Hospital   |
| Accident from Poor driving            | Med  | Use only experienced drivers,<br>(Min 40 hrs)<br>MIDAS / PCV as required                                | First aid Kit carried<br>Fire extinguisher<br>Seat belts worn  |
| Accident from tired driver            | Med  | Regular stops to avoid tiredness<br>1 Passenger always awake with driver                                | First aid Kit carried<br>Fire extinguisher<br>Seat belts worn  |
| Accident from bad passenger behaviour | Low  | Seat belts worn<br>Safety brief at start<br>Caution individuals<br>Stop driving / turn back             | First-aid kit carried<br>Fire extinguisher<br>Seat belts worn  |
| Accident from mechanical failure      | Low  | Regular service<br>Initial check of: Brakes, Oil, Lubricants, and safety equipment. Check pre-departure | First aid Kit carried<br>Fire extinguisher<br>Seat belts worn<br>Stop and check as soon as warning light comes on Dash Board |
| Stranded                              | Low  | Route plan with ETA   | Mobile phone carried   |
| Trailers                              | Med  | Check lights, safety wire and attachment pre-departure  |  |

#### 4.8 Hill Walking

| Hazard                | Risk   | Rules  | Back-up                              |
|-----------------------|--------|--|--------------------------------------|
| Activity accident     | Varies | ML, BELA,WGL, DOE Gold as appropriate or above | MLTB guidelines followed             |
| Lost / injured        | Varies | Route cards, mobile phone carried              | First aid training. Course info pack |
| Hypo/<br>Hyperthermia | Varies | Observation, correct equipment, task selection | First aid training                   |

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4.9 Water sports course  
Open Canoe (Grade 1 - 3) / Kayaking (Grade 1 - 3) / Raft Building (still water)

| <b>Hazard</b>       | <b>Risk</b> | <b>Rules</b>   | <b>Back-up</b>                                       |
|---------------------|-------------|--|--|
| Activity accident   | Low         | Instructors to operate within guidelines of BCU and qualification level  | RLSS / CST & first aider & PFD                       |
| Freak conditions    | Low         | Research history and recce whole route   |  |
| Hypothermia         | Low         | Observe group, educate via briefing, low ratio, high visibility vests  | Medical training<br>Warming facility near by         |
| Equipment failure   | Low         | Kit Check and log.<br>PFD float test   |  |
| Drowning            | High        | Choose site, instruct lashings and check stability. If spray deck used & then group must practise capsize and swim. Safety brief given | RLSS & first aider & PFD<br>Throw lines<br>Tow lines |
| Entrapment by Ropes | Med         | Check lashings & observe teams closely. Safety boat or staff within reach at all times<br>Safety brief                                 | PFD<br>Throw lines<br>Tow lines                      |

4.10 Rock and Water sport Risk Assessment. incl. Gorge walking

| <b>Hazard</b>            | <b>Risk</b> | <b>Rules</b>   | <b>Back-up</b>                                |
|--------------------------|-------------|--|---|
| Activity accident        | Low         | Instructors to operate within guidelines for each location and MIA advice                          | RLSS / CST & first aider & PFD                |
| Freak conditions         | Low         | Research history and recce whole route   |   |
| Hypothermia              | Low         | Observe group, educate via briefing, low ratio, high visibility vests                              | Medical training<br>Warming facility near by  |
| Equipment failure        | Low         | Kit Check and log.<br>PFD float test   |   |
| Drowning                 | High        | Choose site, Safety brief given and check student competency                                       | RLSS or CST & first aider & PFD & Throw lines |
| Rock Fall & Site Safety. | Low         | Recce. Site and research history<br>MIA Advice / Helmets worn.                                     | First Aider on site                           |
| Climbing /accident       | Low         | Where potential confidence roping a minimum of ML (S) is required. For roped pitches SPA and above | First Aider on site                           |

#### 4.11 Coastal Combined rock and water sports (see 4.10)

| Hazard   | Risk | Rules   | Back-up   |
|----------|------|---|---|
| Drowning | High | Ensure instructor has knowledge of tides, currents, waves and their effects. Minimum of NSA beach life guard, L3 Sea kayak coach award or equivalent NGB. | Instructor to observe at least one session at different tide heights and sea conditions. Throw line and marine flares to be carried (swim fins dependent on route). |

#### 4.12 Significant risks:

##### Stoves

The Company uses three types of Stoves: Gas, Trangias and MSR's. They are dangerous and potentially life threatening. It is vital that training is given on the **first day of all camps** no matter how often the group has used the stoves before. The Safety guidelines must be enforced. All stoves are issued with guidelines and clear instructions and must be enforced.

The MSR must be used under supervision at all times. Trangias and Gas may be used un-supervised by experienced groups in the advanced stages of their DOE training.

#### 4.13 Activity Recommended Maximum Ratios

The table below outlines the generic levels, however group, site and activity specific risk assessments should be completed to ensure ratios are appropriate.

| Activity                         | Maximum Ratio                | NGB Guidelines for different levels |
|----------------------------------|------------------------------|-------------------------------------|
| Climbing                         | 1:12                         | MLTB                                |
| Abseiling                        | 1:12                         | MLTB                                |
| Mountain Walking                 | 1:12 / 1:16 (with assistant) | MLTB                                |
| Kayaking / Canoeing              | 1:12                         | BCU                                 |
| Kayaking / Canoeing Moving water | 1:6                          | BCU                                 |
| Caving                           | 1:12                         | Cave dependent                      |
| Sailing                          | 1:12                         | RYA                                 |
| Gorge                            | 1:12 (non tech)              | Technical gorges as location        |
| Mountain Biking                  | 1:12                         |                                     |
| Orienteering                     | 1:12                         | BOF                                 |
| Improvised Raft Building         | 1:12                         |                                     |
| Other (leadership / Medical etc) | 1:12                         |                                     |

Note: These are the recommended Maximum ratios for that generic activities, please refer to the Risk Assessments for each venue for further information on group ratios. Environmental and Client group factors will need to be taken into account and the Maximum ratio should be amended as appropriate to those conditions.

The considerations detailed above coupled with the specific factors mentioned in section 3 lead to a comprehensive assessment of the hazards. As a result the information gathered should be considered, and allow for an informed decision to be made by the SPM as to whether the activity falls into an acceptable level of risk that they are willing to take.

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## 5. Incident Management *(See the Emergency Response Plan for full details).*

Incidents will happen – what is crucial is how they are handled. Within the safety framework there are various management levels of response. No matter what the level of management, what is critical is that information is passed to the On – Call Company Representative as timely as possible where a coordinated approach can be maintained.

Level 1 – Undoubtedly the first person that has the responsibility to react is the most senior on site Leader/ instructor. Depending on the incident his or her knowledge and experience may allow him/her to deal with the situation locally. Notwithstanding this the incident must still be reported to the On Call System.

Level 2 – If the incident is such that it requires more robust management, then the On-Call system must be informed immediately. The necessary information, such as Location, details of Incident and person involved must be at hand. Assistance, resources and passage of information can then be coordinated through the On-Call system.

Level 3 – In the event of the incident warranting the use of the Emergency Services. In this case local management must be passed to the appropriate person on arrival. However it still remains important that the Leader/ Instructor, informs the On-Call system as soon as possible.

Regardless of the level of Incident an Incident Report form must be filled in and can be found at Insert 3.

**All communications going outside of the company must be done via the on-call system. Ensure students do not contact other individuals as this can cause miss communication and panic.**

## 6. Controls

### 6.1 Training

In order to maintain a high level of safety and quality of delivery all staff will have periodic training sessions to improve and enhance their experience. Peer 360 reviews and Personal Development plans are used to facilitate this process. Members of staff that hold key appointments, such as SBMs will attend external courses, i.e. Off Site Safety Management and relevant HSE qualifications.

### 6.2 Information Handouts

All amendments to company procedures will be circulated to all employees. In addition specific activity guidelines are available on request. These are normally direct from National Governing Bodies of the activities e.g. SPA guidelines for Climbing.

### 6.3 Communications

As a proactive and reactive measure all groups will carry a 24/7 method of communicating with the On-Call team. Depending on the Locations / conditions other forms of communication may be deemed necessary. The need for further forms of communication and the set check in times for the groups will be detailed in the risk assessment.

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## 7. Reviews

### 7.1 Internal Reporting

The established internal reporting of safety issues is highlighted in section 2 under the Health and Safety Hierarchy. The importance of reporting incidents or near misses should not be underestimated and this represents the route for all safety matters to be discussed or reported. Health and Safety matters should also be included in cross business unit meetings.

### 7.2 Externally Recording Accidents / Near Misses

For all Accidents and near misses a basic Accident and Near Miss form must be filled in and can be found at insert 2.

For serious accidents / incidents involving pupils, employees or others resulting in: Hospitalisation of a member of the public or client, a fatality as a result of an accident at work, an injury causing an employees absence of three or more days, a specified serious injury or a dangerous occurrence (ref. Accident Reporting Regulations EHS/G 1/95)

The following procedure must be followed:

- The Health and Safety Executive must be notified by telephone
- Form F2508 must be completed
- RIDDOR form to be completed
- One copy sent direct to the county Health and Safety Executive
- ECG will retain one copy.

For all accidents to employees

- Form BR29 (Revised 1/95) must be completed in duplicate.
- One copy is sent to the Area Education Officer.
- ECG retains the other.

For accidents to students / general public

- Form BR41 (revised 1/95) must be completed in duplicate
- One copy should be sent to the Area Education Officer.
- ECG retains the other.

All accidents, near misses and medical treatment of any description or severity must be logged in the ECG Safety Log. The safety officer must also be informed.

In the event that a group is off-site and unable to report the incident in person then a Report Form (insert 3) will be sent to the appropriate person for completion and should be returned to relevant SPM. A blank form is held in the CD pack and a comprehensive 'incident report form' will be sent if required. The forms will be transferred on to the Safety Log held for seven years.

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## 8 Health and Safety QA Checks

In addition to the requirements placed on the SBMs, outlined above, they are also required, where allocated, to carry out regular QA (Health and Safety) checks. These may include the following:

|  |   |
|--|---|
| Staff Files<br>Course / On Call packs<br>Instructor Qualifications | Activity Risk Assessments<br>The Safety Log |
|--|---|

| Item to be checked | Checked | Comments / Actions |
|--------------------|---------|--------------------|
|--------------------|---------|--------------------|

|   |  |  |
|---|--|--|
| Staff Files on Programme                    |  |  |
| Risk Assessments                            |  |  |
| On Call Packs                               |  |  |
| Staff Contacts                              |  |  |
| Climbing wall Log                           |  |  |
| Car   |  |  |
| Store Safety equipment update               |  |  |
| Office housekeeping                         |  |  |
| Programme Visit, on Site                    |  |  |
| Operations Log                              |  |  |
| Debriefed Management staff on Safety update |  |  |

This QA check will not be time consuming and will be linked to the On-Call year round duty Rota. The checks will be recorded on the weekly On-Call report, contained in the Ops Policy.

Irregular Checks of this QA system will be carried out by the ECG Nominated Safety Office and or any of the ECG staff. The Safety Log forms an integral part of our Safety System and is a Legal requirement, and in the event of any action being taken against ECG, will be used as evidence of good practice.

### Quarterly Quality / Safety Checks

Date.....

Name of person doing the checks .....

Quality Assurance documentation underpins the practical application of the Health and safety system of the company. See Operations policy for details.

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## 9 Supporting Documents

### Insert 1 Child Protection Policy Good Practice in the Care of Young People

Wilderness Expertise expects that you should always work to protect the welfare of young people in your charge, as well as protecting other staff by promoting good practice.

The following points form a Code of Conduct for all Wilderness Expertise Staff:

- Always be publicly open when working with young people, thereby avoiding situations where an instructor and a minor are completely unobserved.
- Where any form of manual support is required, this should be provided openly.
- A male and a female member of staff should always accompany mixed groups away from home / school.

All staff should be aware that as a general rule it **does not make sense to:**

- Spend excessive amounts of time alone with a minor away from others.

Staff representing Wilderness Expertise should **never:**

- Engage in rough, physical or sexually provocative games, including horseplay
- Share a tent / room alone with a minor – unless in an extreme medical emergency. Accommodation when on expedition should where reasonably possible be gender specific.
- Allow or engage in inappropriate touching in any form
- Allow young people to use inappropriate language unchallenged
- Make sexually suggestive comments to a young person even in fun
- Let allegations that a young person makes go unchallenged, unrecorded or not acted upon
- Do things of a personal nature that a young person can do for himself or herself – sometimes it may be necessary for staff to help young people with things of a personal nature if they have disabilities. In these situations, there is a need to be responsive to the young person's reactions and if a child is fully dependent upon you, talk with them about what you are doing and give them choices where possible.

If, during your care of a group of young people, you accidentally hurt one of them; one of them seems distressed in any manner; appears to be sexually aroused by your actions, or misunderstands or misinterprets something you have done, report any such incident as soon as possible to another member of The Course Director or another member of Wilderness Expertise staff. A written report detailing the incident should be submitted.

**I AGREE** to the above policy and acknowledge the copy of this statement.

Signed by

.....

Dated

.....

..

Name in Full

.....

Please return one of the signed copies to WE / WET / ME / BEEP, retaining the other copy for your records.

|           |                     |                                |              |                           |
|-----------|---------------------|--------------------------------|--------------|---------------------------|
| Author:   | Peter Harvey        | www.wilderness-expertise.co.uk | Version:     | 7.0                       |
| Reviewer: | Richard Mayon-White | Wilderness Expertise Ltd©      | Review Date: | 1 <sup>st</sup> July 2008 |

## Insert 2 Basic Accident / Near Miss report

To be completed after every incident that had the potential to cause personal injury, property damage or environmental impact.

|  |  |                                      |               |
|--|--|--------------------------------------|---------------|
| Name of trainer (filling out form)   |  | Date and time of incident            |               |
| Venue  |  | Client group                         |               |
| Activity   |  | Contact Address                      |               |
| Specific location  |  |                                      |               |
|  |  | Telephone / email contact            |               |
| Name of injured person   |  | M/F                                  | Date of Birth |
| Description of incident  |  |                                      |               |
| Names of witnesses / who they are and contact details  |  |                                      |               |
|  |  |                                      |               |
| Nature of Injury   |  | Action Taken / First Aid given       |               |
| <p>N.B. If Death / Major injury (hospitalised) or a dangerous occurrence which could have resulted in above, a RIDDOR form must also be filled in.</p> |  |                                      |               |
| Any suggested action to avoid recurrence of incident (trainer)   |  |                                      |               |
| Signature (of instructor filling out form) and date  |  | Signature of receipt by ECG and date |               |
| As a result of the above accident / near miss the ECG have taken the following actions:  |  |                                      |               |
|  |  |                                      |               |
| Signed ECG management.   |  |                                      |               |

### Insert 3 Incident Report

All Incidents must be reported using this template. The categories and questions are not exhaustive however they provide the core considerations for all reporting. No two incidents are the same therefore adapt this template as appropriate.

#### The Aim

Main report is designed to document key facts to support any future enquires and should be completed while the facts are fresh. The core of the report considers the events and staff involved. This is supported by Annex A, a 'First Aid Treatment Log' and Annex B a 'Follow up Log'.

#### An Incident is defined as:

- An accident that has, or had the capability to, caused personal injury, property damage or environmental impact;
- An event that required the use of restraint or undue physical contact such as an assault;
- A behavioural event that could effect the safety of the individual, group or trainer which required directed verbal reprimand and clarification;
- An event that could have serious financial impact on the operation;
- An event that could attract media/public/political/pressure group attention.

#### The next step:

Once you have completed the form pass it to the Company Health and Safety representative with all relevant correspondence and documentation.

The Health and Safety Representative will then compile a file on the events and decide on any further action. Further action may require an internal audit. This would include:

- Taking statements from witnesses;
- Taking copies of insurance arrangements, Health and safety policy, Staff Contracts and Staff Information Pack in place at the time of the incident;
- Taking copies of completed Risk Assessments, Safe systems of work, medical forms, parental consent forms and Activity request form;
- Collating all correspondence and material.

Once completed a report would be presented to appropriate employees, clients and the company directors.

This file must be copied to the insurance company and stored by Wilderness Expertise for 10 years.

|           |                     |                                |              |                           |
|-----------|---------------------|--------------------------------|--------------|---------------------------|
| Author:   | Peter Harvey        | www.wilderness-expertise.co.uk | Version:     | 7.0                       |
| Reviewer: | Richard Mayon-White | Wilderness Expertise Ltd©      | Review Date: | 1 <sup>st</sup> July 2008 |

## Section 1 The People involved

Fill in the details of the people involved in the incident. Include the person completing the form, Injured parties, First Aiders, Witnesses and key individuals.

| Details                          | Party 1 | Party 2 |
|----------------------------------|---------|---------|
| Name<br>In Full                  |         |         |
| Home address<br>with Post code   |         |         |
| Contact Number                   |         |         |
| Role in Incident                 |         |         |
| Job Title<br>(Student / trainee) |         |         |
| Employer                         |         |         |
| Employer address                 |         |         |
| Date of Birth                    |         |         |
| Male / Female                    |         |         |

| Details                          | Party 3 | Party 4 |
|----------------------------------|---------|---------|
| Name<br>In Full                  |         |         |
| Home address<br>with Post code   |         |         |
| Contact Number                   |         |         |
| Role in Incident                 |         |         |
| Job Title<br>(Student / trainee) |         |         |
| Employer                         |         |         |
| Employer address                 |         |         |
| Date of Birth                    |         |         |
| Male / Female                    |         |         |

## Section 2 The Incident details

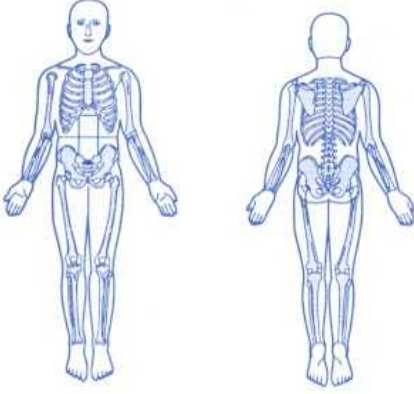
Fill in the details of the incident. Include all relevant variables & factors e.g. attitude, training, previous warnings, weather and briefings given. Be clear on who did what and on the names of any equipment/machinery involved.

| <b>Incident Date</b>   | <b>Incident Time</b> |
|--|----------------------|
| What were the parties doing before the incident?                 |                      |
| Describe the attitude of the group on arrival to the activity?   |                      |
| What was the exact location of the incident?                     |                      |
| What briefings were given to the parties involved?               |                      |
| What were the parties wearing (PPE)?                             |                      |
| What was the environment like?                                   |                      |
| Describe the events that lead up to the incident?                |                      |
| Describe the incident / events.                                  |                      |
| Describe the actions taken to manage the incident.               |                      |
| Describe the First Aid given at the time of incident.            |                      |
| What verbal recommendations were given to the group or casualty? |                      |
| Where any dangerous substances involved?                         |                      |
| What were the follow up actions?                                 |                      |

### Section 3 The Injury

Fill in the details of any injuries sustained. Long term treatment and checks on treatment should be recorded in annex A, 'The First Aid Treatment Log'.

|  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|--|---|---------------|--------------------------------------|--------------|---|---------------------------------------|---|-------------|---|--------|------------|--------|-----------------|------|
| <b>• CASUALTY DETAILS</b>  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Name .....   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Address  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| M/F Age..... Kin .....   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <b>• ASSESS</b>  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><b>Alert</b></td> <td style="width: 25%;"><b>Voice</b></td> <td style="width: 25%;"><b>Pain</b></td> <td style="width: 25%;"><b>Unresponsive</b></td> </tr> <tr> <td colspan="4" style="text-align: center;">Conscious = (Person Place Time Event)</td> </tr> </table>   |   | <b>Alert</b>  | <b>Voice</b>                         | <b>Pain</b>  | <b>Unresponsive</b>                           | Conscious = (Person Place Time Event) |   |             |   |        |            |        |                 |      |
| <b>Alert</b>   | <b>Voice</b>                                      | <b>Pain</b>   | <b>Unresponsive</b>                  |              |   |                                       |   |             |   |        |            |        |                 |      |
| Conscious = (Person Place Time Event)  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Airway</b></td> <td style="width: 50%;">Gag reflex Y/N    False Teeth    Y/N</td> </tr> <tr> <td></td> <td>Protection    Y/N    Suction or Clear    Y/N</td> </tr> <tr> <td></td> <td>Jaw Thrust    Y/N    C-Spine Collar    Y/N</td> </tr> </table>  |   | <b>Airway</b> | Gag reflex Y/N    False Teeth    Y/N |              | Protection    Y/N    Suction or Clear    Y/N  |                                       | Jaw Thrust    Y/N    C-Spine Collar    Y/N  |             |   |        |            |        |                 |      |
| <b>Airway</b>  | Gag reflex Y/N    False Teeth    Y/N              |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|  | Protection    Y/N    Suction or Clear    Y/N      |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|  | Jaw Thrust    Y/N    C-Spine Collar    Y/N        |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Breath</b></td> <td style="width: 50%;">Noise    Y/N    Aux. Muscles    Y/N</td> </tr> <tr> <td></td> <td>Bilateral Entry    Y/N    T. Deviation    Y/N</td> </tr> </table>   |   | <b>Breath</b> | Noise    Y/N    Aux. Muscles    Y/N  |              | Bilateral Entry    Y/N    T. Deviation    Y/N |                                       |   |             |   |        |            |        |                 |      |
| <b>Breath</b>  | Noise    Y/N    Aux. Muscles    Y/N               |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|  | Bilateral Entry    Y/N    T. Deviation    Y/N     |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Circ.</b></td> <td style="width: 50%;">Pulse Radial Y/N    Carotid Y/N</td> </tr> <tr> <td></td> <td>Strength .....    Rhythm .....</td> </tr> <tr> <td></td> <td>External Blood Loss Y/N    Stop serious bleeding</td> </tr> <tr> <td></td> <td>Cap. Refill &lt; 2sec    Y/N    Last Urination .....</td> </tr> </table> |   | <b>Circ.</b>  | Pulse Radial Y/N    Carotid Y/N      |              | Strength .....    Rhythm .....                |                                       | External Blood Loss Y/N    Stop serious bleeding  |             | Cap. Refill < 2sec    Y/N    Last Urination ..... |        |            |        |                 |      |
| <b>Circ.</b>   | Pulse Radial Y/N    Carotid Y/N                   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|  | Strength .....    Rhythm .....                    |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|  | External Blood Loss Y/N    Stop serious bleeding  |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
|  | Cap. Refill < 2sec    Y/N    Last Urination ..... |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <b>• QUESTIONS</b>   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Signs and Symptoms</td></tr> <tr><td>Allergies</td></tr> <tr><td>Medication (Tetanus)</td></tr> <tr><td>Past History</td></tr> <tr><td>Last meal / Alcohol</td></tr> <tr><td>Events</td></tr> </table>  | Signs and Symptoms                                | Allergies     | Medication (Tetanus)                 | Past History | Last meal / Alcohol                           | Events                                | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Provocation</td></tr> <tr><td>Quality</td></tr> <tr><td>Region</td></tr> <tr><td>Recurrence</td></tr> <tr><td>Relief</td></tr> <tr><td>Severity (1-10)</td></tr> <tr><td>Time</td></tr> </table> | Provocation | Quality   | Region | Recurrence | Relief | Severity (1-10) | Time |
| Signs and Symptoms   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Allergies  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Medication (Tetanus)   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Past History   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Last meal / Alcohol  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Events   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Provocation  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Quality  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Region   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Recurrence   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Relief   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Severity (1-10)  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Time   |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |
| Notes  |   |               |                                      |              |   |                                       |   |             |   |        |            |        |                 |      |

|  |            |    |     |      |     |     |  |
|--|------------|----|-----|------|-----|-----|--|
| <b>• Monitor and Record:</b>   |            |    |     |      |     |     |  |
| Check  | Time (min) |    |     |      |     |     |  |
|  | 0          | +5 | +10 | + 15 | +30 | +60 |  |
| Resps  |            |    |     |      |     |     |  |
| Pulse  |            |    |     |      |     |     |  |
| BP   |            |    |     |      |     |     |  |
| Temp   |            |    |     |      |     |     |  |
| AVPU   |            |    |     |      |     |     |  |
| Pupils   |            |    |     |      |     |     |  |
| Power  |            |    |     |      |     |     |  |
| C/Refill   |            |    |     |      |     |     |  |
| <b>N.B.</b>  |            |    |     |      |     |     |  |
| Pupils - R & L Size and Reaction   |            |    |     |      |     |     |  |
| Power - 0/5 nil 5/5 full Check Arms. Legs / U-L                                      |            |    |     |      |     |     |  |
| Check - Splints and Bandages   |            |    |     |      |     |     |  |
| C/Refill – 5 sec pressure record time to refill, (Norm 2 sec)                        |            |    |     |      |     |     |  |
| <b>Injury and Treatment</b>  |            |    |     |      |     |     |  |
|  |            |    |     |      |     |     |  |
| Collar Y/N    Oxygen Y / N    Food Y/N    Water Y/N                                  |            |    |     |      |     |     |  |
| <b>Evacuation Options</b>  |            |    |     |      |     |     |  |
|  |            |    |     |      |     |     |  |
| <b>Environmental Factors / Hazards</b>   |            |    |     |      |     |     |  |
|  |            |    |     |      |     |     |  |

## Section 4 The Verification

The people signing below verify that the details given above are accurate and true to the best of their knowledge.

The Person Completing the form

|      |  |           |  |
|------|--|-----------|--|
| Name |  | Signature |  |
| Date |  |           |  |

The Health and Safety Representative from Wilderness Expertise

|      |  |           |  |
|------|--|-----------|--|
| Name |  | Signature |  |
| Date |  |           |  |

The injured / Involved Party (if appropriate)

|      |  |           |  |
|------|--|-----------|--|
| Name |  | Signature |  |
| Date |  |           |  |

The Client (if appropriate)

|      |  |           |  |
|------|--|-----------|--|
| Name |  | Signature |  |
| Date |  |           |  |

## Annex A First Aid Treatment Log

Further to the details supplied in Part 3 the following actions were taken:

### Casualty

|               |                |                 |                |
|---------------|----------------|-----------------|----------------|
| Name          |                | Age             |                |
| Male / Female |                | Approx. Weight  |                |
| Injury        | (as in Part 3) | Cause of Injury | (as in Part 3) |

### Assessment / Treatment Session \_\_\_\_\_

|   |  |  |  |
|---|--|--|--|
| Time  |  | Date                                       |  |
| Completed by  |  | Training level                             |  |
| Patient Assessment<br>ABC<br>Head-toe check<br>Secondary survey of injury |  |  |  |
| Signs   |  | Symptoms                                   |  |
| Treatment Given   |  |  |  |
| Recommendations Given   |  |  |  |
| Further checks / action   |  |  |  |
| Handover to medical services Time / Date                                  |  | Details of Medical services (Medic's name) |  |
| Signed by First Aider   |  | Signed by 'Loco Parentis' present          |  |

## Annex B Follow Up Log

Further to the details supplied in the report this aims to document actions taken to review procedures and collect data. The Log should include:

- Post Incident Meetings
- Policy Review Meetings
- Procedure Review Meetings
- Tasks arising from the Review

| Date | Who | What | Comments |
|------|-----|------|----------|
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |
|      |     |      |          |