

# Health, Safety and Risk Management Policy

**Standing in the Gap Registered Charity No: 1174627**

Registered charity address: Ferndown House, Milton Road, Bloxham, OX15 4HD

[www.sitgap.org](http://www.sitgap.org)

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## General statement of policy

Standing in the Gap is committed to a rigorous process and a clear risk management policy helps ensure that:

- the identification, assessment and management of risk is linked to the achievement of the charity's objectives

- all areas of risk are covered - for example, financial, governance, operational and reputational
- a risk exposure profile can be created that reflects the trustees' views as to what levels of risk are acceptable
- the principal results of risk identification, evaluation and management are reviewed and considered
- risk management is ongoing and embedded in management and operational procedures

Standing in the Gap is fully committed to ensuring the Health, Safety and Welfare of all our trustees, employees, volunteers and those other parties that may be affected by our activities. We will endeavour to maintain a safe and healthy working environment as far as reasonably practicable in any place where we carry out work activities.

In relation to risk Standing in the Gap will:

- Identifying risks
- Assessing risks
- Evaluating what action needs to be taken on risks
- Ensure we have periodic monitoring and assessment

Standing in the Gap will strive to provide information, instruction, training and supervision to all employees and volunteers to enable them to avoid hazards and contribute to their own safety and health.

Standing in the Gap requires all trustees, employees and volunteers to ensure they carry out their duty under the Health and Safety at Work etc. Act 1974 and all other relevant legislation. All employees and volunteers must co-operate with the organisation to carry out their health and safety responsibilities. To neglect these responsibilities would be seen as a direct infringement of the Health and Safety policy and will be dealt with in accordance with the discipline policy or code of conduct for volunteers.

In particular trustees, staff and volunteers have a duty to:

- work safely, efficiently and without endangering the health and safety of themselves, their colleagues or any other person affected by the charities' activities
- adhere to safety procedures laid down by Standing in the Gap from time to time, and conform to all instructions given by those with a responsibility for health and safety
- record all accidents, near miss occurrences and hazardous situations in the Health and Safety/Accident book and report to the next staff/ trustees meeting. The accident book is kept in the external venue box.
- meet their other statutory safety obligations including that laid down in Section 8 of the Act, which states that "no person shall intentionally or recklessly interfere with or misuse anything provided in the interests of

health, safety or welfare in pursuance of any of the relevant statutory provisions”.

The health and safety team, in conjunction with the trustee board, will ensure that the Health, Safety and risk management system is reviewed in order to ensure that it complies with legislation, is relevant and is suitable and sufficient for the needs of Standing in the Gap. This policy will be reviewed every 3 years or where there are changes to legislation, changes within the organisation which have implications for Health and Safety, or changes in personnel who hold specific Health and Safety responsibilities.

## Organisation and responsibilities

### **Trustee Board**

Overall and final health, safety and risk responsibility within the organisation lies with the Trustee Board. The Trustee Board shall appoint a designated trustee who will work alongside the Clinical Director, as the health, safety and risk management team, to draw to the attention of the Trustee Board, staff and volunteers any health and safety matters that need to be discussed and/or acted upon.

For the purpose of this policy the designated Health and Safety trustee is: Bobbie Brown.

At each trustee meeting there will be an agenda item covering Health, Safety and Risk Management, as well as reviewing the risk register.

Trustees are satisfied that G Suite which is used for Standing in the Gap drive storage has adequate security: [https://workspace.google.co.uk/intl/en\\_uk/security/](https://workspace.google.co.uk/intl/en_uk/security/)

### **Delegated responsibilities**

The health, safety and risk management team shall be given delegated responsibility for ensuring that the Health and Safety policy is carried out within the organisation. In particular they will be given delegated responsibility for:

- investigating and reporting accidents
- making staff and volunteers aware of the specific fire escapes and fire extinguishers within any building we are using for charitable activities and ensuring that staff and volunteers are made familiar with the action to be taken in the event of a fire
- ensuring staff and volunteers are given a copy of this Policy and understand its contents
- drawing to the attention of the Trustee Board and staff any new legislation on health and safety relevant to the work of Standing in the Gap.
- drawing to the Trustee Board’s attention any matters with which they are unable to deal with and keep an appropriate register of risks, for regular review by the Board of Trustees, The risk register is kept on the trustees secure shared google drive.

## **Staff and volunteers**

All staff and volunteers have a responsibility to:

- read and fully understand Standing in the Gap's Policy statement and relevant procedures to be carried out in the event of an emergency. If there is any doubt about the meaning, staff must seek clarification from the health and safety team.
- co-operate with the Trustee Board and the health and safety team, as appropriate, to achieve a healthy and safe workplace and to take reasonable care of themselves and others
- report to the health and safety team within 24 hours any accident occurring whilst acting on behalf of Standing in the Gap.
- bring to the notice of the health and safety team any potentially dangerous circumstances that they are unable to put right.

## **1.. Types of and definitions of Risk**

### **Definition of Risk**

A risk is an uncertain event which may occur in the future preventing or delaying a charity's ability to realise and achieve its objectives. Examples include: the failure of a board of charity trustees in respect of governance obligations; staff unavailability; damage to buildings or work space; inability to raise sufficient income; and failure to comply with health and safety or other legal obligations. The likelihood of a risk occurring can only be estimated. To estimate risk properly, each risk should be identified, understood and evaluated by the board of charity trustees.

When considering risk Standing in the Gap consider the following categories:

### **Governance Risk**

Governance risks may include charity trustees not knowing or living up to their responsibilities; high board turnover; conflict on a board; conflicts of interest not properly managed; absence of relevant policies; failure to properly implement agreed policies; and policies not being reviewed. A significant governance risk may also arise where the charity trustees do not give due consideration to the charity's legal form and governing document and decide whether they are fit for purpose.

### **Operational and Strategic Risks**

Operational risks include volunteers or employees being unavailable for duty, or volunteers or employees that are only trained for one role and are unable to cover for another volunteer or employee in the event of an absence. A lack of planning in the event of charity premises being damaged and unusable for a period of time is also an operational risk.

Strategic risks include any risk which may cause a charity to be delayed or prevented from achieving its objectives. Examples include failure to control costs

or failure to understand the resources needed for a particular project or particular service that the charity wishes to offer.

### **Financial Risk**

Financial risks include failure to meet financial management and reporting requirements; failure to maintain prudent financial reserves; failure to plan to meet future needs; and failure to properly assess and understand the financial viability of the charity. Misunderstanding funder priorities, poorly articulated funding applications or missed deadlines for funding applications are all potential risks for the charity.

### **Environmental or External Risks**

Environmental or external risks include risks arising from a change in the overall environment in which the charity operates such as a change to Government policy that affects the charity. For example, a charity that is dependent on supported employment schemes could be affected if the Government decided to reduce or eliminate such schemes. Another example of environmental risk could be adverse publicity generated by another organisation resulting in loss of support for the charity.

### **Compliance Risk (law and regulations)**

Compliance risks may include failure to comply with legal or regulatory requirements, for example: legislation in respect of charity regulation; health and safety; child protection; data protection; employment law; or company law. Such failures may arise due to a lack of resources within the charity to meet the requirements, or due to a lack of knowledge within the charity of the legal or regulatory requirements that the charity is required to comply with. Failure to have an appropriate level of insurance in place for the charity is also a compliance risk.

Risk identification reflects the activities, structure and environment in which a particular Standing in the Gap operates. An overview of potential risks in each of these categories can be found in Appendix 1: Review of risks

Similarly, although the process of risk identification should be undertaken with care, the analysis will contain some subjective judgements - no process is capable of identifying all possible risks that may arise. The process can only provide reasonable assurance to trustees that all relevant risks have been identified.

## **2. Assessing Risk**

Identified risks need to be put into perspective in terms of the potential severity of their impact and likelihood of their occurrence. Assessing and categorising risks helps in prioritising and filtering them, and in establishing whether any further action is required.

Each risk is scored in terms of:

\* **likelihood** i.e. the probability of future occurrence, how likely the risk it is that the risk will occur and how frequently it has occurred in the past.

- \* **impact** i.e. the impact on the organisation and external stakeholders if the risk occurs.
- \* **effectiveness of existing controls** i.e. given the controls which are currently in place, how effective are they at mitigating the risk.

A scale of **1 to 5** is used for **Likelihood** and **Impact**, and **1 to 3** is used for the effectiveness of existing **Controls**, according to the following matrix:

Likelihood Scale of 1 - 5	Impact Scale of 1 - 5	Controls Scale of 1 - 3
1 = Rarely, if ever	1 = No significant impact	1 = Controls highly effective
2 = Possible	2 = Minor impact	2 = Controls effective, but could be improved
3 = Likely	3 = Significant but containable impact	3 = No controls / controls are ineffective
4 = Very Likely	4 = High impact	
5 = Unavoidable / already occurring	5 = Extremely detrimental impact	

The risk score is determined **by multiplying the risk impact by the risk likelihood by the effectiveness of the controls.**

The following traffic light system can be used on a risk register to highlight / prioritise risk:

Risk Level	Risk Score
High	25+
Medium	13 - 24
Low	0 - 12

### 3 Evaluating what action needs to be taken on the risks

Where major risks are identified, the trustees will need to make sure that appropriate action is being taken to manage them. This review should include assessing how effective existing controls are.

For each of the major risks identified, trustees will need to consider any additional action that needs to be taken to manage the risk, either by lessening the likelihood of the event occurring, or lessening its impact if it does. The following are examples of possible actions:

- the risk may need to be avoided by ending that activity (eg stopping work in a particular country)
- the risk could be transferred to a third party (eg use of a trading subsidiary, outsourcing or other contractual arrangements with third parties)
- the risk could be shared with others (eg a joint venture project)

- the charity's exposure to the risk can be limited (eg establishment of reserves against loss of income, foreign exchange forward contracts, phased commitment to projects)
- the risk can be reduced or eliminated by establishing or improving control procedures (eg internal financial controls, controls on recruitment, personnel policies)
- the risk may need to be insured against (this often happens for residual risk, eg employers liability, third party liability, theft, fire)
- the risk may be accepted as being unlikely to occur and/or of low impact and therefore will just be reviewed annually (eg a low stock of publications may be held with the risk of temporarily running out of stock or loss of a petty cash float of £25 held on site overnight)

Once each risk has been evaluated, the trustees can draw up a plan for any steps that need to be taken to address or mitigate significant or major risks. This action plan and the implementation of appropriate systems or procedures allows the trustees to make a risk management statement in accordance with the regulatory requirements.

Risk management is aimed at reducing the 'gross level' of risk identified to a 'net level' of risk, in other words, the risk that remains after appropriate action is taken. Trustees need to form a view as to the acceptability of the net risk that remains after management.

Good risk management is also about enabling organisations to take opportunities and to meet urgent need, as well as preventing disasters. Putting in place a risk management system need not be particularly onerous. For a very small charity, such as Standing in the Gap, the risk management system can simply be discussions at regular charity trustee meetings, identifying, evaluating and monitoring the risks. These will be recorded on the Standing in the Gap risk register.

## 4 Periodic monitoring and assessment

Risk management is a dynamic process ensuring that new risks are addressed as they arise. It should also be cyclical to establish how previously identified risks may have changed. Risk management is not a one-off event and should be seen as a process that will require monitoring and assessment. Staff will need to take responsibility for implementation. There needs to be communication with staff at all levels to ensure that individual and group responsibilities are understood and embedded into the culture of Standing in the Gap. A successful process will involve ensuring that:

- new risks are properly reported and evaluated
- risk aspects of significant new projects are considered as part of project appraisals
- any significant failures of control systems are properly reported and actioned

- there is an adequate level of understanding of individual responsibilities for both implementation and monitoring of the control systems
- any further actions required are identified
- trustees consider and review the annual process
- trustees are provided with relevant and timely interim reports

Standing in the Gap will be using a risk register (see Appendix 1) which seeks to pull together the key aspects of the risk management process. It schedules gross risks and their assessment, the controls in place and the net risks, and can identify responsibilities, monitoring procedures and follow up action required.

The trustees can monitor risk by:

- ensuring that the identification, assessment and mitigation of risk is linked to the achievement of the charity's operational objectives
- ensuring that the assessment process reflects the trustees' view of acceptable risk
- reviewing and considering the results of risk identification, evaluation and management
- receiving interim reports where there is an area needing further action
- considering the risks attached to significant new activities or opportunities
- regularly considering external factors such as new legislation or new requirements from funders
- considering the financial impact of risk as part of operational budget planning and monitoring

Annual monitoring by trustees supplemented by interim reports is likely to be sufficient for most charities where operating conditions are stable.

## 5. General arrangements

### **Accidents, near-miss occurrences and hazardous situations**

Standing in the Gap has a Health and Safety Accident Book located within the External venue kit and all incidents, no matter how small, must be recorded as soon as possible after the incident. The incident should also be reported to the health and safety team. In addition to reporting accidents it is equally important to report near misses and potential hazards so as to enable preventative action to be taken before it is too late. Once an incident has been recorded in the Accident Book the Sheet must be removed and stored separately, e.g. in the personnel file.

It is the responsibility of the health and safety team to ensure that any necessary follow up action is taken to reduce the risk of the accident or near miss reoccurring.

The health and safety team is responsible for reporting incidents which come within the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations (RIDDOR), to the Health and Safety Executive. RIDDOR covers the following incidents:



- (a) fatal accidents
- (b) major injury accidents/conditions
- (c) dangerous occurrences
- (d) accidents causing more than 7 days incapacity for work
- (e) certain work-related diseases.

A First Aid kit is available in the External venue kit.

### **Off site safety**

At present Standing in the Gap operates virtually and uses rental space from other organisations to provide its face to face interactions with clients. Standing in the Gap do utilise office space within the Clinical Directors home office for storage of equipment and records. The health and safety team are responsible for carrying out risk assessment on each venue/ project to ensure compliance with health and Safety requirements. All risk assessments are filed and stored either online or within lockable filing cabinets.

### **Personal safety**

- When setting up for talks at least two persons should be present: the presenter and 1-2 volunteers. At no time should a volunteer be alone with a talk participant.
- Staff or volunteers who are engaged on Standing in the Gap business as a lone worker should make it clear to their allocated buddy (and put in G Suite online Standing in the Gap diary) where they will be, how long for and how they can be contacted.
- Staff and volunteers should provide the Clinical Director with contact details of the person they would wish to be contacted in the event of an emergency. The designated trustee for health and safety also has access to this information.
- Staff who carry money for Standing in the Gap have the right to be accompanied by another person.
- Visits to the bank should not be at a regular time.
- Staff should not put themselves at risk on account of Standing in the Gap's property.
- All incidents of aggression or violence and any threat to personal safety should be reported to the health and safety team and recorded in the accident book.

### **Stress management**

Stress at work is a serious issue: workers can suffer severe medical problems, which can result in under-performance at work, and cause major disruptions to the organisation.

The responsibility for reducing stress at work lies both with employer and employee/ volunteer. Employees/volunteers should become aware of the causes of stress, and ensure that they do not work in a way which could cause them to suffer an increase in stress, nor cause an increase in stress on others.

If an employee/volunteer is suffering from stress, they should discuss this with their line manager at the first opportunity. Where practicable and reasonable, Standing in the Gap will seek to provide assistance to the employee.

Also See

Appendix 1: Template for Standing in the Gaps risk register.

## Appendix 1: Template used for Standing in the Gaps risk register.

The assessment matrix is available for reference at the end of this document.

Risk Register Standing in the Gap					
Risk No	Description of Potential Risk	Description of Potential Impact	Risk Owner	Steps to Mitigate	Monitoring Frequency
<b>Risk Category: Governance</b>					
1					
2					
<b>Risk Category: Strategic</b>					
1					
2					
<b>Risk Category: Compliance (Legal or Regulatory)</b>					
1					
2					
<b>Risk Category: Operational</b>					
1					
2					
<b>Risk Category: Financial</b>					
1.					
2					
3					
<b>Risk Category: Environmental or External</b>					
1					
2					
<b>Risk Category: Reputational</b>					
1					
2					

### The Matrix for assessing impact, likelihood and effectiveness of existing controls

Each risk is scored in terms of:

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