



# **RISK ASSESSMENT**

A guide for UNISON  
safety representatives



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By law, every employer must conduct a risk assessment on the work their employees do. This guide to risk assessment highlights the purpose and pitfalls of workplace risk assessments and aims to help safety representatives raise awareness among UNISON members.

It will also help UNISON safety representatives to keep a close eye on the management of health and safety in the workplace and ensure that good policies are matched by good practice.

Risk assessment means identifying the hazards in the workplace and assessing the likelihood that these hazards will cause harm to employees and others. It is part of the systematic approach that employers are now required by law to adopt in order to manage health and safety effectively. It helps spot the prevention or control measures needed to protect workers and the public from harm.

Employers are obliged by law to ensure that all aspects of all jobs have been vetted for hazards and that ‘reasonably practicable’ measures have been taken to ensure that workers are not put at risk. But remember, no one knows the problems of a job better than the worker who has to do it.

If risk assessments are done correctly they can mean that workers are properly informed about their working conditions, the risks and how to avoid them. It is the safety representative’s job to make sure this happens. However, while safety representatives can be involved in risk assessments, and should always be asked to comment on them, the responsibility of doing a risk assessment lies with management.

No workplace risks are inevitable. A properly managed workplace should be healthy and safe. And it is the employer’s responsibility to identify the risks and to take reasonably practicable measures to minimise them.

Too little regard for the health, safety and welfare of staff can mean that trained staff go sick or are forced to retire early. This isn’t good for the worker and isn’t good for the organisation.

Employers should ensure their staff are safe at work, and risk assessments should tell them what needs to be done to keep things that way. So what is going wrong?

UNISON believes that badly done risk assessments mean problems are underestimated, missed or just plain ignored. Which is why UNISON is demanding that employers make proper risk assessments and take them seriously.

## **Eight steps to safety in UNISON**

1. Use your rights. Safety representatives have legal rights to information and to be consulted about any health and safety matters in the workplace.
2. No assessment, no work. Employers should not ask anyone to undertake work unless that particular job or function has been the subject of a risk assessment and the worker expected to do the job has been informed of how to do the job safely. All workers have the right to refuse work that presents ‘a serious and imminent danger’.
3. Inspect. Inspections by safety representatives, surveys, ‘risk mapping’, or reviews of sickness absence and accident patterns and workplace health surveillance can identify the jobs causing the problems.
4. Get support. UNISON’s regional officers, backed by UNISON’s national Health and Safety Unit, deal with thousands of safety enquiries each year—you are never alone!
5. Campaign. UNISON’s campaigns on stress, back injuries, dermatitis and asbestos have made employers think twice about the risks they might face by ignoring safe practices.
6. Training. UNISON safety representative training and TUC courses mean that many representatives have more safety knowledge than their managers.
7. Costly business. In 1999, UNISON brought in almost £40 million in compensation for workers whose health was damaged in a workplace accident or by an occupational disease.
8. Blow the whistle. Where normal consultation channels have been exhausted and management still fails to act on workplace hazards, safety representatives can call in the official safety enforcement agencies—the Health & Safety Executive (HSE) or the local environmental health officer.

## **What is risk assessment?**

Risk assessment is a simple concept. It is the process of identifying what hazards exist in a workplace and how likely these hazards are to cause harm to workers and others, in order to decide what prevention or control measures are needed.

There are various ways of assessing what the level of risk is, and they are dealt with later in this booklet. However, they all involve making judgements about how acceptable a risk is. Management will always claim that risk assessment is a scientific process, but their decisions are based on values that the workers who take the risks may not share.

UNISON representatives have used risk assessments to press for and win better working conditions, more resources for health and safety and for greater workforce involvement in health and safety issues. However, none of this has happened by chance. The union has had to make sure that risk assessments deal with the issues which concern members promptly and thoroughly. There is no set way of doing risk assessments and employers can and do adopt a mixture of approaches. What is essential to remember as a safety rep is that risk assessments should be systematic and thorough and that they look at what happens in real workplaces, not what the employer thinks ought to happen.

This means talking to the people who do the jobs and have practical understanding of the hazards and risks involved. It means observing what goes on at first hand, not just sitting at a desk reading manuals. The test of a good risk assessment is whether it enables the employer to identify what the risks are and what they need to do to prevent or control those risks.

The Health & Safety Executive has described the basic steps of making risk assessments in a free publication, *Five Steps to Risk Assessment* (see page 34 for ordering details).

This pamphlet provides simple advice on risk assessment, aimed at small businesses. It is a useful starting point for doing risk assessments in any workplace, providing a systematic approach and a form.

The five steps can be summarised as follows:

- Step 1. Look for and list the hazards.
- Step 2. Decide who might be harmed and how.
- Step 3. Evaluate the risks arising from the hazards and decide whether existing precautions are adequate or whether more should be done.
- Step 4. Record the findings.
- Step 5. Review the assessment from time to time and revise it if necessary.

A methodical, step-by-step approach is essential and *Five Steps to Risk Assessment* is a useful start. However, UNISON believes that it should only be used as a starting point. In most organisations a more in-depth assessment is needed more regularly than the pamphlet suggests. The approach it suggests is really only suitable for small organisations where there are no major hazards.

### **Methods of risk assessment**

An employer might use a risk assessment to search for the hazards, jobs, work locations or management issues which could leave workers at risk.

Employers could look at:

- Hazards—for example, electrical safety, fire safety, manual handling, hazardous substances, work with VDUs, risk factors for repetitive strain injury, stress, lone working or violence.
- Tasks—for example, cleaning, maintenance work or dealing with the public.
- Locations—for example, laboratories, offices, libraries or work off-site.
- Organisational factors—for example, staffing policies, systems of work, equipment-purchasing policies, consultation and participation, management techniques or working hours.

In identifying hazards the employer needs to look at accident and sickness records to see what problems have been reported in the past.

There are various ways of assessing the risk once a hazard has been identified. The regulations make it clear that no one method will suit all circumstances, but whatever method is used must be 'suitable and sufficient'.

The simplest method is just ranking the risk and giving it a score, for example:

- 0 = no risk
- 1 = slight risk of not very serious injury
- 2 = moderate risk (more people likely to be injured or more serious injuries likely to occur)
- 3 = high risk (significant chance of serious injury or death)

What this does is look at the severity of the risk using a method that the text books call 'numerical quantification'. This is very subjective and has in-built assumptions about whether it is worth remedying 'slight risks' or even relatively high risks if they affect few workers.

Another system is using a chart called a matrix. Along one side of the chart will be the likelihood of something happening (such as an electric shock or a fall) and along the other side is the level of harm that will come from the risk if it happens (for example a bruise, long-term illness). The chart can have as many steps as you like, but most use either three, five or seven levels. The likelihood of something happening is then multiplied by the degree of harm it will cause and a decision on whether to take any action is made on the basis of how high a score you get. This method has the advantage of being simple to use and easy to understand, but is a bit mechanical and the criteria used are very subjective. It also does not take into account the number of workers involved.

A 5-level matrix might look like this:

Harm	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
		Likelihood				

The scoring might go like this:

Category	Harm	Likelihood
1	Non-injury	Almost impossible
2	First aid	Unlikely
3	< 3 days	Possible
4	> 3 days	Likely
5	Major injury	Almost certain

Here is an example of what an employer might set as a standard for action arising out of the assessment:

Risk rating	Action
1-4	No further action
5-9	Re-assess after next review
10-16	Within 3 months
17-25	Immediate

This example is based on a real-life situation. It shows that the employer decided that they could wait for up to three months before taking action where the risk assessment showed that the hazard created a likely probability that someone would be off work for over three days.

Here the safety representative would probably argue that action should be taken immediately if there was a score of 10 or over and a plan for action within three months for scores of 5-9

More sophisticated systems build in other factors such as the cost of any accident. An example of this is the risk calculator, which is widely used in industry. However, it is unlikely that any UNISON safety representatives will come across this system. Similarly, the methods used in ‘high risk’ industries such as nuclear power plants and chemical factories—known as HAZOP—are extremely specialised systems that require a detailed knowledge. These are covered by regulations dealing with major accident hazards and nuclear installations.

The purpose of all these systems is to help employers prioritise the risks that need to be tackled first. They are not intended as an exact science and should only be used as a guide. And your members—the ones having to take the risks—will probably have an entirely different assessment of the risk from the manager.

What all the systems have in common is that they put a value on people’s health. No system will claim it can remove risk. Instead it will attempt to reduce the risk to ‘as low as is reasonably practical’. However, what is reasonable to management may not be reasonable to you or your members. Usually decisions are based on the cost of putting things right, and the basis on which these decisions are made are totally arbitrary.

Many industries are quite open about the way they decide on whether to take action if there is a risk. They compare the cost to the company of a worker dying against the cost of introducing safety measures. This has resulted in the nuclear industry putting a value of £10 million on each life, compared to the £1 million figure the transport industry uses.

This is because the nuclear power industry knows that the effect of a death would greatly reduce confidence in the industry, so they put a higher ‘cost’ on preventing any of their workers being killed than in the transport sector, where the numbers of accidents are much higher, prosecutions are rare and civil actions are settled by insurers. These differences also reflect the public’s greater acceptance of some forms of risk compared to others.

The most important first step is to find out what system your employer uses. Make sure you understand it and be prepared to question the assumptions that are being made. You can also ask for training on it. Do not be afraid to challenge the findings of such schemes if you disagree with the results.

It is very important that health and safety representatives are aware of the limitations of risk assessments and use their rights to challenge any shortcomings.

Despite all the paperwork and charts that are often generated, risk assessment is an imprecise affair. Rough estimates of risk might be presented as fact. What is presented as an ‘acceptable’ level of risk might be far from acceptable to those asked to take these risks.

For example, suppose a ‘nuisance’ dust is assessed as causing no long-term health effects or debilitating short-term health problems. It is likely that there would be little priority placed on sorting it out.

But any dust in the workplace is an irritant—physical and mental—and affects the body’s ability to deal with infections, leaving a worker more vulnerable to coughs and colds. This shouldn’t be ‘part of the job’—the risk assessment should recognise this and include steps to remedy it.



## **UNISON's 25 steps to risk assessment**

UNISON's step-by-step approach should ensure that risk assessments in your workplace are worth the paper they are written on.

Management should:

1. Set up a programme of risk assessments.
2. Consult safety representatives about the appointment of 'competent persons'.
3. Appoint 'competent people'.
4. Decide on methods and approach.
5. Identify any other specific health and safety legislation which applies.
6. Collect information.
7. Consult safety representatives and employees about work and perceived hazards.
8. Observe what happens in practice.
9. Identify hazards.
10. Identify the harm that could arise from the hazards.
11. Identify those at risk.
12. Identify how they might be harmed.
13. Evaluate the likelihood of the harm occurring.
14. Evaluate the likely severity of the harm.
15. Evaluate the likely numbers who could be harmed.
16. Identify the control measures already in place, including information, instruction and training.
17. Evaluate the effectiveness of the control measures.
18. Decide what more needs to be done to eliminate or control risks, in accordance with the accepted priorities of risk prevention and control measures.
19. Record the assessments.
20. Provide safety representatives with copies of the assessments and supporting information.
21. Draw up an action plan and prioritise risks to be tackled.
22. Draw up a timetable for completion of action.
23. Allocate financial and staff resources for carrying out the action plan.
24. Implement measures.
25. Monitor the effectiveness of control measures and review the risk assessments at agreed regular intervals and whenever changes require it.

## **From assessment to prevention**

Don't let a risk assessment be a carefully filled-out, filed and forgotten piece of paper. The purpose of risk assessments is to enable the employer to identify the preventive and protective measures needed—and then to take them. So risk assessments should be seen as

just the first step in deciding a programme of action, identifying the problems and setting out a clear timetable for remedying them.

The purpose of the risk assessment is to make sure that something gets done to prevent or control the risk. This means removing the hazard from the workplace altogether or substituting a safer alternative, whether this is a piece of equipment, a substance or a way of working. Employers often forget this.

The first aim must always be to remove the hazard. If this is not possible then employers must set up control measures according to established principles of good occupational health practice and the general principles of prevention laid down in the Management Regulations. If an employer claims that a risk assessment has been done and the assessment says there is no problem, insist on seeing a copy of the written record of the assessment.

Safety representatives are entitled to their own opinions about the seriousness of the risk and the suitability or effectiveness of control measures. Likewise, representatives should question assessments that say nothing can be done to prevent or control a hazard.

## **Prevention priorities**

The Management of Health and Safety at Work Regulations 1999 (Management Regulations) lay down general principles of prevention which must be followed when deciding what to do about a possible hazard:

- Avoid the risk.
- Evaluate the risks which cannot be avoided.
- Combat the risks at source.
- Adapt the work to the individual—especially the design of workplaces, and the choice of work equipment and working and production methods—with a view, in particular, to alleviating monotonous work and work at a predetermined work rate and to reducing their effect on health.
- Adapt to technical progress.
- Replace the dangerous by the non-dangerous or the less dangerous.
- Develop a coherent, overall prevention policy which covers technology, organisation of work, working conditions, social relationships and the influence of factors relating to the working environment.
- Give collective protective measures priority over individual protective measures.
- Give appropriate instructions to employees.

Therefore, under the regulations, you cannot simply try to avoid a hazard by providing protective clothing. The employer has a duty, in law, to look first at removing the risk, or reducing it. While protective clothing may be necessary, it is a back-up to other measures and very much a last line of defence.

Some employers may try to rig the assessments to show that there isn't a problem and they don't need to do anything. You will need to challenge these assumptions in writing, using safety representatives' rights. Ask for details of the criteria used if you think that the results of the assessments are obviously flawed. Challenge in writing any that you don't agree with. Don't wait for the health and safety inspectors to call. There are too few of them, and they don't have enough resources. HSE inspectors are there to help us, but should only be used after discussion with the employers has failed.

## Risk assessment—a practical example

The Health and Safety Commission's Health Service Advisory Committee has produced the following case scenario outlining how to think through a risk assessment for the manual handling tasks undertaken by domestic service workers. The same methodical approach can be applied to other jobs and hazards.

The floor-buffing machines, cleaning materials and equipment used by domestic staff in a Victorian hospital are kept in a small store cupboard on the first floor of a three-storey building. All the shelves are above waist height and some heavy items, infrequently used, are stored on the top shelves. No steps are provided and most staff can only just reach the upper shelves. The store cupboard has no natural light and the light switch needs attention. When the light is switched on the bulb flickers and sometimes fails to light altogether. The fault has been reported to the domestic service manager.

The floor buffers are in daily use and are taken to the ground and second floor in a lift. The lift is also old, and although it is regularly serviced the lift car often stops a few inches above or below floor level. Several of the wards are interconnecting, with a slight change in floor level, and the floor buffers have to be carried up and down numerous steps. All the domestic staff received a lecture on manual handling when they started work at the hospital. One member of staff is now pregnant and another is coming up to retirement.

So what should a manual handling risk assessment look at and what should be done to make the workplace safer? The box below gives examples of what should be considered.

### **Risk factors**

#### *Task*

- Reaching above shoulder height for very heavy objects.
- Unbalanced carrying required when grasping loads on shelves that can only just be reached.
- Stooping to move equipment onto and off the floor from high shelves.
- Twisting likely, due to lack of space in store.
- Awkward movements to get equipment out of the lift and up and down steps.
- Heavy equipment and so on has to be transported over long distances between the store and site of use.

#### *Load*

- Floor buffers and other boxes and containers of cleaning materials are likely to be heavy and their weights may not be known.
- Some materials may be bulky and awkward to lift and carry and may be contained in flimsy cardboard boxes.
- Loads may not be securely packed, leading to shifting of the centre of gravity.
- Cleaning materials include dangerous substances, incurring particular risks if dropped.
- Risk of other injuries if heavy loads on the top shelves are full or are dropped.

#### *Working environment*

- Lack of space in stores.
- Very high storage shelves with no ladder provided for access.
- Heavy items stored above shoulder height.

- Inadequate lighting in stores creates slipping and tripping risks as well as manual handling risks.
- Risks of electric shock or fire from faulty switch.
- No trolleys, wheeled boxes or buckets on castors are available to move cleaning materials and equipment.
- Steps into and out of lift and between wards.
- Long distances between store room and areas where cleaning is required.
- Possible risk of cross-infection as equipment is moved between wards.

#### *Individual capability*

- Strenuous lifting creates risk for all staff, especially pregnant workers and those with a back problem.
- Top shelving unreachable by all but the tallest staff.
- Staff inadequately trained in load handling techniques and so on.

#### **Short and long-term measures to reduce risk**

- Light switch to be made safe immediately and need for improved artificial lighting, such as fluorescent light strip, to be reviewed.
- System for regular maintenance checks and for reporting faults on electrical equipment etc to be established.
- Change layout of storage room to optimise use of space and reduce handling.
- Arrange for heavy items to be stored at an appropriate lower level, for instance between mid-thigh and waist height—shelving may have to be reinforced for this purpose.
- Supply low-level trolleys so that heavy items may easily be pulled out from under shelves.
- Provide lower level shelving to eliminate the need for top shelves above shoulder height.
- Provide suitable and safe step stools for reaching higher shelves (if still needed) and train staff in their safe use.
- Establish stores on each floor or for individual wards or departments.
- Buffing machines should be available on each floor.
- Investigate budget requirements for long-term replacement of the lift.
- Liaise with supplier/manufacturer to ensure that all containers of supplies are clearly marked as to their contents and weight.
- Investigate the possibility of reducing the size of storage boxes and containers.
- Provide ramps or lifts to avoid the need to move equipment up and down steps.
- Provide suitable trolleys for transporting materials—these should be compatible with the shelving and be manoeuvrable into and out of the stores and so on.
- Review suitability of the buffing machines with regard to their weight, ease of use and manoeuvrability. If other models are available, which are more suitable? Consider a change over.
- Check that staff overalls allow sufficient ease of movement.
- Ensure that non-slip footwear is provided.

- If, after reorganisation of the work, equipment and environment, some manual handling tasks which present risks of injury still remain, then include practical training and refresher training in manual handling. Monitor the effectiveness of the training.
- Assess the capability of older workers and others with particular needs, such as pregnant women, and move them to lighter duties if necessary. This will require liaison with the occupational health department.

## What the law says and how to carry out assessments

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The Health and Safety at Work Act (HASAWA) 1974 places a general legal duty on all employers to ensure the health, safety and welfare at work of all their employees. More recent regulations flesh out the details, spelling out specific legal duties for employers to undertake—including risk assessments for every job and process in the workplace—and to act on.

The most wide-ranging requirements are included in the Management of Health and Safety at Work Regulations 1999 (Management Regulations). Regulation 3 places a legal duty on employers to carry out risk assessments as a first step in ensuring a safe and healthy workplace.

The Health & Safety Executive, in its guide to risk assessment requirements, says: ‘The risk assessment provisions of the Management Regulations are rather special. They require employers and self-employed people to assess the risks created by their undertakings so as to identify the measures they need to have in place to comply with their duties under health and safety law. As such, the assessment provisions of the Management Regulations are superimposed over all the other workplace health and safety legislation, including the general duties in the Health and Safety at Work Act.

‘This makes the Management Regulations risk assessment provisions very wide-ranging and all-embracing. They are comprehensive in coverage of places, activities and other sources of hazard. They require you to assess all the risks in your workplace. That is, what could cause harm to yourself, your employees (if any) and members of the public, and the likelihood that harm will occur in practice. You then need to decide on the precautions you must take to prevent this happening.’

### **Management Regulations: what your employer must do**

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The employer’s main risk assessment duties under these regulations are to:

- Make a suitable and sufficient assessment of the risks to the health and safety of their employees and the risks to others who may be affected.
- Identify the preventive and protective measures needed.
- Introduce the preventive and protective measures needed to improve workplace health and safety.
- Review the assessment if there is reason to believe that it is no longer valid—for example, if the process has changed, the building has been refurbished or an experienced worker has left.
- Keep a written record, where there are five or more employees, of the findings of the assessment and any groups of employees particularly at risk.
- Have arrangements for the effective planning, organisation, control, monitoring and review of the preventive and protective measures.

- Provide any health surveillance identified in the risk assessment.
- Appoint competent people to assist the employer.
- Establish procedures to be followed in the event of serious and imminent danger.
- Provide health and safety information, instruction and training for all employees.
- Consult with safety representatives.

Risk assessment in fact predates the Management Regulations—it was a requirement of previous health and safety regulations, including those dealing with asbestos work, noise, ionising radiation and the control of substances hazardous to health.

### **Suitable and sufficient?**

The Management Regulations require employers' risk assessments to be 'suitable and sufficient'. Advice on what this means is set out in the Approved Code of Practice to the Regulations drawn up by the Health and Safety Commission, and employers should refer to this to help them.

A suitable and sufficient risk assessment should enable the employer to identify and prioritise the measures that need to be taken, including the health and safety information and training that must be given to employees; any health surveillance that is required; any monitoring that needs to be carried out; and the procedures to follow in the event of serious or imminent danger. It must be carried out by a 'competent person'.

To be 'suitable and sufficient' the assessment must identify all the hazards and decide whether they have the potential to cause harm in the workplace. Employers are expected to familiarise themselves with the hazards and risks in their workplace—for example, by reading HSE guidance, the trade press, manufacturers' and suppliers' manuals and so on, as well as consulting employees, trade union safety representatives and outside experts where necessary. The method used should be appropriate to the complexity of the work activities and the risks involved.

Risk assessments must now pay attention to risks to women who are pregnant, have recently given birth or are breastfeeding. For example, manual handling may cause particular problems for pregnant workers.

In addition, employers are required to make special consideration of the risks faced by young workers. In particular to:

- Take particular account of young workers' lack of experience, absence of awareness of existing or potential risks, or their immaturity when they assess the risks to their health and safety. The assessment must now be made before the young person begins work and must address specific factors.
- Take account of the risk assessment in determining whether the young person is prohibited from doing certain work.

Risk assessment is not just about identifying the hazards from the actual work activity. Risk assessments should cover issues such as staffing levels which can seriously affect how work is done in practice.

Sometimes management will avoid assessing every individual job and workplace, and instead do a 'generic' risk assessment based on a sample which they then apply to all similar situations. This is often used on groups like home care workers, where the employer does not want to inspect every single client's house. The Health & Safety Executive has said that these generic risk assessments are acceptable if all the workplaces and jobs they are applied to are very similar. However, UNISON has always advised safety representatives to be cautious about this approach as no two workplaces, or workers, are really the same, so less obvious or one-off hazards can be missed.

**A suitable and sufficient risk assessment must:**

- Identify all the hazards—that is, those aspects of work that have the potential to cause harm:
  - substances
  - equipment
  - work processes
  - work organisation.
- Identify any specific regulations that must be complied with.
- Assess all the risks—that is, the likelihood that the harm will occur from the hazards identified.
- Be systematic in approach.
- Ensure that all aspects of the work activity are considered.
- Address what actually happens in the workplace, not what the staff handbook or works manual says should happen.
- Include non-routine operations such as:
  - maintenance operations
  - loading and unloading
  - changes in production cycles
  - patients or clients who have fallen down
  - spillages of cleaning or other chemicals.
- Address what happens during interruptions to the work activity.
- Ensure that everyone who might be affected—employees and others—is considered, for example:
  - office staff
  - night cleaners
  - maintenance staff
  - security guards
  - visitors.
- Identify groups of workers particularly at risk, such as:
  - young workers
  - inexperienced workers
  - lone workers
  - workers with disabilities
  - pregnant workers.
- Take account of existing preventive or precautionary measures and whether they are working properly.

## **Get it in writing**

The significant findings of a risk assessment must be recorded if there are five or more employees (although even where there are fewer than five a written record is useful evidence that the assessment has been carried out). The findings must be made available for inspectors and trade union safety representatives to inspect and satisfy themselves that the risk assessment carried out is both suitable and sufficient.

The 'significant findings' include:

- The significant hazards identified.
- The existing control measures in place and the extent to which they control the risks.
- Details of any aspects that need improving and of the people who could be affected, including any groups of workers particularly at risk.

The written risk assessment is a very important document. If it is done properly, it establishes that the employer recognises that the risk is present and should also explain the procedures the employer intends to use to control the risk.

Safety representatives can use the written assessments to check that all the risks are being covered. They can use the section on control measures as a basis for their planned routine inspections.

## **'Competent persons'**

Under the Management Regulations, employers must appoint 'competent persons' to assist them. These may be employees or outside consultants. However, if the employer already employs someone who is competent they have to use that person rather than contract the work out to an outside body or consultant.

There must be sufficient competent people to carry out the work and they must be given adequate time and adequate resources to carry out their functions, as well as having adequate decision-making authority. The Health and Safety Commission says management should take into account several factors when identifying competent people:

Competent people should have a knowledge and understanding of:

- The work being assessed.
- The principles of risk assessment and prevention of risk.
- Up-to-date health and safety measures.
- Identification of hazards at work.

Competent people should be able to:

- Identify health and safety issues.
- Assess the need for action.
- Design, develop and implement strategies and plans.
- Check the effectiveness of these strategies and plans.
- Promote health, safety and welfare advances and good practices.
- Know their limitations and when to call for others with specific skills and expertise.

However, it is important to remember that risk assessments are the responsibility of the employer, whoever performs the role of competent person. The UNISON safety representative may well know more about health and safety than anyone else in the building, but this does not mean that management can relinquish this responsibility. If



they haven't got the skills in house, management must ensure that they get properly trained and experienced staff. Employing consultants may seem to be the sensible option, but outside consultants rarely have the knowledge of the work to do a thorough risk assessment, and are unable to follow through the findings of the assessment.

UNISON files have shown that management is trying to get the best of both worlds—delegating risk assessment responsibilities to lower grade workers, then failing to act to remove risks themselves.

A UNISON local authority safety representative commented: 'We were concerned that low-grade supervisors and UNISON members were being given risk assessment duties that they did not have the time, authority, resources or training to do competently.'

A second safety representative told UNISON: 'They pass these responsibilities as far down the line as possible, getting bottom grade supervisors to do them, on top of all their other duties.'

Another said: 'UNISON explained to members the dangers of them agreeing to carry out risk assessments if they had not been trained. They accepted our arguments and all refused to undertake the risk assessments, and at the same time UNISON requested proper training. Now management has agreed to provide training for all staff when and where needed.'

Several UNISON representatives report that their management is either untrained, unwilling or unable to carry out risk assessments.

Getting management to provide proper information and training on risk assessment is often an important first stage in getting proper assessments done. An assessment can be neither 'suitable' nor 'sufficient' if the people doing it do not know what they are doing.

## **Your right to examine assessments**

The Approved Code of Practice to the Management Regulations makes it clear that safety representatives should have an important role in examining employers' risk assessments and deciding whether they are suitable and sufficient.

Safety representatives will obviously need help from UNISON to do this and this guide is intended to provide much of the background information required. UNISON representatives should first of all refer to what the Approved Code of Practice says is suitable and sufficient, as summarised on page 15. It is important that you are satisfied that the risk assessment covers all the hazards, all the relevant factors and all the people who may be affected.

## **Other laws that require risk assessment**

It's not just the Management Regulations that require risk assessments.

The main health and safety laws with their own risk assessment requirements are:

- Control of Substances Hazardous to Health Regulations
- Control of Asbestos at Work Regulations
- Control of Lead at Work Regulations
- Noise at Work Regulations
- Manual Handling Operations Regulations
- Health and Safety (Display Screen Equipment) Regulations
- Personal Protective Equipment at Work Regulations
- Fire Precautions (Workplaces) Regulations

These regulations will be relevant in safety discussions in most if not all workplaces where UNISON has members and UNISON has produced guidance for safety representatives on most of these (see page 34 for further information).

Other regulations, including the Pressurised Systems Regulations and the Ionising Radiation Regulations, also have specific risk assessment requirements, though they affect smaller groups of workers.

The HSE, in its guide to risk assessment requirements, says: ‘This guide should help to check that your assessment of the risks addresses all that might cause harm in your workplace. It will help you avoid going over again things that you have already done in examining that the precautions you have in place are reasonable and meet all that the law requires of you. It looks at the common features of these provisions, compares them, including their wording, and examines the significance of the differences between them’.

However, UNISON believes that it is important to look at the regulations dealing with specific hazards in detail when carrying out assessments. For example, the Manual Handling Operations Regulations list the factors you must consider if you or your workers have to lift loads that could cause injury.

## **Hazardous substances**

The law also requires employers to do a specific risk assessment when any dangerous substance is being used. The Control of Substances Hazardous to Health Regulations (COSHH) took effect in 1989. Like the Management Regulations, which were introduced four years later, they place duties on employers to assess the risks to health of exposure to hazardous substances in the workplace and bring in preventive measures.

Many employers have spent a huge amount of time and effort amassing detailed data sheets on all the chemicals used in their workplace. Once they have collected this information and filed it they think this is all they have to do.

But COSHH is not about assembling bulging files of chemical information. It’s about operating a methodical system which can identify existing and new workplace health and safety risks—and then tackle them.

There is no need to get sucked into intricate discussions about parts per million (the measurement of how much of a chemical is getting into the air) or the hazards of various chemicals. UNISON representatives know that if a member is suffering headaches or has had a skin rash from exposure to a cleaning fluid then something is wrong, regardless of the results of ‘scientific’ measurements. A simple survey of members, asking them about symptoms, can back up your arguments that exposure to a substance is hazardous.

Solutions need to be effective, with the real risks promptly tackled at source. Safety representatives need to keep up the pressure on employers to prioritise properly and take action on the real problems.

Employers’ first duties under COSHH are to avoid the risk by questioning whether a chemical has to be used at all, and then whether a safer chemical could be used instead.

In its guide, *Seven Steps to Successful Substitution of Hazardous Substances* (see page 34 for ordering details), the Health & Safety Executive says: ‘If you are an employer, you have a legal duty to run your business in a way that creates the least possible risk to yourself, your workers and the public. For example, under the Control of Substances Hazardous to Health Regulations (COSHH), you must:

- Assess how people’s health is at risk from substances you use at work.
- Take action to prevent or control these risks.

‘COSHH aims to prevent people being exposed to hazardous substances, rather than trying

to limit or control their exposure. Substituting one process, substance or system of work for another can be an important way of making sure that people are not exposed to hazardous substances’.

HSE’s seven steps to substitution are:

1. Decide whether the substance or process is a hazard. Is there a significant risk involved in storing, using or disposing of a substance?
2. Identify the alternatives.
3. Think about what could happen with the alternatives.
4. Compare the alternatives with each other and with the substance or process you are using at the moment.
5. Decide whether to substitute.
6. Introduce the substitute.
7. Assess how it is working.

Remember that substitutes for hazardous chemicals can themselves have dangers, so make sure that management gets all the information on the substitute before it is introduced, and that staff are monitored for any effects.

### **UNISON action on chemical risks—a case study**

Cleaners in a school in the North East were using a whole range of cleaning fluids from different manufacturers. The products were not even labelled, so the cleaners did not know which products to use in which circumstances, or what safety precautions they needed to take.

Using unlabelled chemicals is extremely risky. Some chemicals must be diluted for safe use, and certain chemicals must never be used together, such as acids and bleach.

Some cleaners had noticed that certain cleaning agents irritated their skin. Some of the chemicals smelt strange and triggered headaches.

The UNISON safety representative held a meeting with the cleaners to get their views and then carried out her own inspection. She reported all the risks she found to management in writing, asked them for their COSHH assessments of the products and for a meeting to discuss the problems.

It emerged that management had not done formal risk assessments of the products. It was agreed that management would, as a first step, obtain all the manufacturers’ safety data sheets for each product (data sheets include information about what is in the product, hazards, the control measures needed, storage requirements and so on) as a starting point for carrying out proper risk assessments.

Among the improvements that UNISON agreed with management were that only three main cleaning chemicals would be used, that these would be colour-coded and that all cleaners would be given training in their use, the risks of using the different products and the precautions to take.

### **Biological hazards**

In 1994, the COSHH regulations were updated to cover biological agents. At first glance it might appear that biological hazards arise solely in hospitals and labs. Think again.

The death of a Tower Hamlets council worker from tuberculosis (TB) has prompted UNISON to step up publicity on the risks of infection. The estate officer died of TB after

coming into contact with some of the poorest and most vulnerable people—who are at high risk of TB—through her job. UNISON advised that employers must manage the problem by identifying staff at risk of coming in close contact with TB, screening them and offering vaccinations to those who are not immune. TB has been identified as one of the ‘new epidemics’ in occupational health.

Homecarers and staff in residential homes have also been targeted by UNISON because of the health threat to residents from the germ (bacterium) methicillin-resistant *Staphylococcus aureus* (MRSA). MRSA lives harmlessly in the nose or on the skin of many healthy people, but in some people who are very ill with ulcers, sores and wounds it can cause serious illness. In hospitals it has been shown to transfer from person to person via the hands and skin, and can be transferred to people with surgical wounds by medical staff who have not disinfected their hands properly. UNISON is also concerned to prevent homecarers infecting people sent home after surgery.

## **New hazards**

As the type of work we do has changed over recent years, so have the kind of hazards we face. While the injuries and illnesses identified with manufacturing are important, the biggest causes of ill-health through work today are stress and musculoskeletal illnesses such as back pain and repetitive strain injury (RSI).

There are a wide range of hazards that we are only now beginning to recognise. These include:

- Infections—including hantavirus infection, chronic fatigue syndrome, AIDS, multi-drug resistant tuberculosis, hepatitis C.
- Stress—including burnout and post-traumatic stress disorder.
- Strains—musculoskeletal problems, including overuse injuries and ‘microtrauma’ injuries.
- Physical—electric and magnetic fields and possibly related cancers, reproductive problems and skin rashes.
- Chemical—conditions including multiple chemical sensitivity and male infertility.
- Hypersensitivity—sick building syndrome, new asthma disorders and other breathing problems.

The lesson is clear enough. Trust the evidence of your senses—sight, smell, hearing, touch—your surveys and your members because they are a far more sensitive gauge of work hazards—particularly ‘new’ hazards—than the occupational health and safety industry.

Risk assessments should cover all hazards in the workplace. They should not be restricted to obvious physical or chemical safety hazards such as electricity, fire, machinery or well-known dangerous chemicals. The less obvious or ‘hidden’ hazards also need to be addressed, including those listed above.

Risk assessments must cover all work activities, processes and systems, as well as equipment and substances. That means including issues like working hours and workload.

If management denies there is a problem, one way to get your own evidence is for the union to carry out a quick survey of the membership. This can be done for any hazard—from stress to violence to chemicals. A sample membership health survey is included on page 30.

## What are the hazards in your workplace?

### Physical hazards

- Fire
- Electricity
- Noise
- Vibration
- Slips, trips and falls
- Manual handling
- Non-ionising radiation
- Machinery
- Transport
- Awkward/fixed postures
- Display screen equipment
- Chemicals—liquids, dusts, mists, fumes, gases
- Drugs
- Asbestos
- Solvents
- Diesel
- Paints
- Lead

### Biological hazards

- Hepatitis
- MRSA (methicillin-resistant Staphylococcus aureus)
- Lab cultures
- Legionnaire's disease
- HIV
- Tuberculosis
- Weil's disease
- Psittacosis
- Animal allergens
- Plant allergens

### Psychosocial hazards

- Stress
- Bullying
- Violence
- Work overload
- Lack of control
- Long hours
- Shiftwork
- No/poor consultation
- No/poor support
- No/poor participation
- Monotonous or paced work
- Boredom
- Isolation

## **Does the assessment cover all relevant factors?**

Risk assessments must take into account all the relevant factors. For example, they must include ergonomic considerations such as the design of tools, equipment, workstations and workplaces, as well as the way jobs are carried out, to check that the job is suitable to the worker both physically and psychologically.

## **Making the job fit**

Management often tries to reduce the risk of an accident or injury by screening out workers from jobs rather than altering the job to fit the worker. This type of selection is not what the law intended and is usually of dubious validity. It can also discriminate against workers with a disability, or who are different from others.

Whenever equipment is being introduced at your workplace, you should not only make sure that a risk assessment is done on it before it arrives, but that your employer asks questions about all the circumstances in which the equipment or system will be used. For instance, is it easy to use? Does it suit everyone regardless of size, shape or disabilities? Is it comfortable? Has it been designed with the user in mind?

These questions can help to identify possible mismatches between the abilities and physical attributes of people and the demands of the equipment with which they work.

## **Is the workplace and work organisation included?**

Employers should consider the whole working environment—whether it is adequately lit, ventilated and heated, as well as whether there is enough space to do the job in safety and comfort.

They should look at organisational factors such as staffing levels, hours of work, and the way work is planned, and include examination of training provisions and supervision.

The overall culture of the organisation should be assessed. Inadequate resources, long hours, monotonous work, badly planned work, discrimination, bullying and poor management can all lead to fatigue, stress and an increase in accidents, incidents and ill-health.

## **Does the assessment cover everyone at risk?**

Risk assessments must cover everyone likely to be affected. This means not only the core workforce but also contractors, security staff, agency staff, night cleaners, visitors, clients or patients.

Risk assessments must also identify groups who may be particularly at risk, such as young workers, pregnant or breastfeeding workers, inexperienced workers and trainees, maintenance workers, shift workers and those working outside normal hours.

People with disabilities may be at special risk, so assessments should take account of their particular needs. Unfortunately many employers treat a person with a disability as the hazard instead of identifying what needs to be done to protect them. Safety representatives should be alert to this.

Account should also be taken of the risks to homeworkers, lone workers and people working away from the employer's premises who may be at increased risk of violence or stress. Pregnant women may be at particular risk.

## **Assessing your employer's action plan**

The risk assessment should identify what action the employer needs to take, firstly to prevent or eliminate the risks, and secondly to control or minimise those risks which cannot be eliminated. It should:

- Enable the employer to prioritise the action that needs to be taken so that the most serious risks are tackled first.
- Set out a timetable for the implementation of remedial action.
- Safety representatives should check their employer's action plan and ensure that the proposals arising from the risk assessments represent a clear strategy to improve health and safety in the workplace.
- Representatives should also check that it is clear who has responsibility for implementing the action and that resources have been made available to achieve the improvements required. There should be a proper system for keeping the assessments under review, plus procedures for reporting shortcomings that mean further preventive action is needed.

If you think your employer's risk assessments or action plans are inadequate—or if your employer is failing to implement the preventive or protective measures that have been identified—you can challenge such shortcomings and take up health, safety and welfare issues in the normal way. Employers may try to delay or avoid action because of cost or resource arguments. They may try to argue that certain workplaces are low-risk or that the hazards are not significant, so they don't need to look at them. These are not valid reasons for failing to act and you should challenge them and keep up the pressure on your employer in the normal way so that priorities for action can be agreed. The law says that your employer must provide a safe system of work as far as is reasonably practical. That means that all hazards that are identified must be removed or reduced wherever possible.

## **Record keeping**

Your employer must keep a record of accidents, injuries and near misses, however small. In addition, all serious accidents—or those which result in an absence of more than three days off work—must be reported to the enforcing authority. Your employer should keep records of all periods of sickness. Where a worker is at risk of exposure to a harmful substance they must offer health surveillance.

As a safety representative, you are entitled to see this information (although details that might identify the individuals concerned can be removed). The employer's records can be used to see whether there are any hazards or risks that have not been considered in the risk assessment.

## **Review**

Once the risk assessment is complete it must be kept under review and a further risk assessment carried out if there are changes to working patterns or the equipment used. It must also be reviewed if there has been an accident, incident or near miss. It is good practice to review all risk assessments on a regular basis, even if no changes have happened. This should usually be done every year. A form for use in requesting a review can be found on page 33.

## Assessing risk assessments

UNISON has drawn up the following checklist for safety representatives to help them assess and monitor their employer's risk assessments and action plan.

1. Is your employer carrying out risk assessments?

- Have assessments been carried out?
- If not, are arrangements in hand for them to be done?

2. Are resources available to carry out risk assessments properly?

- Do risk assessors have the necessary time, resources, training and authority to do proper risk assessments?

3. Who carries out risk assessments?

- Are they competent (do they have knowledge and understanding of the work involved, of the principles of risk assessment, prevention and control, and of current health and safety applications)?
- What qualifications/experience do they have?
- What information, instruction and training have they been provided with?
- Are outside consultants being used?
- Are specialists, such as ergonomists, brought in where necessary?
- Have safety representatives been consulted over the appointment of the competent persons?
- How will safety representatives and employees be involved?

4. Do assessments cover all the hazards and risks at work?

- Do assessments cover all areas, activities, processes, substances, equipment and departments?
- Do assessments cover systems of work, training, supervision and working environment?
- Do they cover work organisation and content?
- Do they cover hazards which you or UNISON members have identified?
- Do assessments look at what actually happens in practice and include non-routine operations such as maintenance?

5. Do assessments cover all those who could be affected?

- Are those working outside normal hours, visitors and sub-contractors covered?
- Have those particularly at risk (such as lone workers) been identified?
- Are specific risk assessments done for pregnant workers?
- Do individual assessments need to be carried out for some workers (for example, those working outside the main place of work)?

6. Are existing preventive measures being used properly?



- Are the control measures followed?
  - Do the control measures work?
  - Are they monitored?
  - Is information, instruction and training provision adequate?
7. Have measures been identified to prevent or control the risks to health and safety?
- Can hazards be eliminated (for example, by not using a hazardous substance if not essential)?
  - If not, can hazards be controlled at source (for example, by treating slippery steps rather than using a warning sign)?
  - If not, can hazards be isolated (for example by isolating a dusty area)?
  - If not, is suitable personal protective equipment provided as a last resort?
  - Is health surveillance necessary?
  - Have procedures for serious and imminent danger been drawn up?
  - Have safety representatives been consulted about the employer's plan to control risks?
8. Have safety representatives been given copies or access to the written risk assessments?
- Do they explain the hazards?
  - Do they explain the control measures?
  - Do they explain who is at risk?
  - Do they contain sufficient detail to allow safety representatives to judge whether they are adequate?
9. Are control measures being implemented?
- Has a plan of action been drawn up for implementing the control measures identified in the risk assessment?
  - Does the plan identify priorities?
  - Does the plan set out an agreed timetable for action?
  - Does the plan identify who is responsible for taking the action?
  - Has money been made available to implement the measures?
10. Are risk assessments kept up-to-date?
- Do planned reviews of risk assessments take place at regular intervals?
  - Are risk assessments redone before changes, such as new equipment or new ways of working, are introduced into the workplace?
  - Are risk assessments reviewed if evidence suggests that control measures are not adequate, for example following accidents, near misses, reports of ill-health, or findings from safety representatives' inspections?
  - Are risk assessments reviewed if there are other reasons to suspect they are invalid, for example in the light of new legislation or new medical evidence?

## Union involvement

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It is the employer's responsibility to carry out risk assessments. However, trade union safety representatives can play an important part in ensuring that they are done properly.

Safety representatives have extensive rights under the Safety Representatives and Safety Committees Regulations (SRSC). These rights are set out in full under Regulations 4, 5, 6, and 7 of SRSC and include the following:

- The right to be consulted.
- To investigate health and safety matters.
- To inspect the workplace.
- To receive information, including any risk assessments.
- To take paid time off to perform their functions and undergo training.

It is important that UNISON safety representatives use these rights to check their employers' risk assessments and plans for risk prevention and control. All the evidence shows that the safest workplaces are those where there are well organised and active safety representatives using their rights fully. The Health & Safety Executive has always maintained that safety representatives should be involved in risk assessments.

### **Consultation where UNISON is not recognised**

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Until October 1996, the term 'safety representative' meant trade union safety representative. The law said safety representatives only had the right to exist in workplaces with a recognised trade union. But a new law has changed that. Now members in workplaces where unions are not recognised—as well as workers in workplaces without any union—must be consulted about health and safety matters too. These regulations can help UNISON members become active on health and safety issues in workplaces where we do not yet have recognition.

### **We can make a difference—a case study**

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Since the introduction a year ago of the pat slide—a new type of lifting equipment—staff at Hereford Hospital have been saved from back pain and injury.

Manual handling injuries were common at the hospital—one recent survey had suggested that one in five health workers in the past 12 months suffered back pain that was so severe they were forced to take time off work. Several nurses and porters had to give up work because of injury over the years. But the UNISON branch discovered a piece of lifting equipment which they believe has saved numerous other health workers from pain and injury.

The pat slide—an unremarkable looking plastic board—is one of a number of items of lifting equipment which can safeguard nurses, porters and others expected to lift patients.

Before this was introduced, three or four members of staff had to push their arms under the patients in order to lift, an operation which was potentially traumatic and painful for the patients and dangerous for the staff. But the pat slide has been so successful that there have been no injuries through lifting since its introduction.

According to the UNISON branch, ‘even though each one only costs £110, we had to struggle to get them. Luckily our hotel services manager bought one, which helped us demonstrate how effective they are’.

It still took six months of determined campaigning before the UNISON branch persuaded the hospital trust’s other managers of the need to buy pat slides for all the wards at Hereford’s county and general hospitals.

## **Health and safety inspectors—what they do and where to find them**

If you’ve exhausted every stage of the official procedure and members are still being asked to work in hazardous situations, what do you do? One option is to talk to the official health and safety inspector. Health and safety inspectors who work for the Health & Safety Executive or local authority enforce health and safety laws and regulations and can prosecute employers for breaches of the law.

An inspector can:

- Issue an improvement notice so that an employer is required to take action to put things right in a specified time.
- Issue a prohibition notice stopping specific activities because of the ‘serious risk of personal injury’.
- Prosecute the employer in court. Penalties for breaking health and safety laws include fines and imprisonment of the employer.

Taking employers to court tends to be used as a last resort by the HSE. In general, the HSE inspectors seek to bring about improvements in the first instance by writing reports following their visits or inspections. HSE inspectors should contact and speak to safety representatives separately from management when they make their inspections. Safety representatives must be given a copy of the inspector’s report. This is a legal entitlement under Section 28(8) of the Health and Safety at Work Act.

The HSE Inspectorate is very under-resourced so workplace visits may be few and far between, unless there is a serious accident. So the HSE cannot be relied on to enforce the law for unions.

You should normally only contact the HSE after management has failed to respond in a reasonable time to issues you have raised through recognised channels and procedures in your workplace.

If you do call HSE inspectors in, you will have to convince them that your problem is a priority or a high risk. It can help if you can list a whole number of hazards, their severity, the number of workers affected and the regulations that the employer is breaking. The HSE will also want you to demonstrate that you have tried all avenues to sort the hazards out with your employer before reporting them.

HSE inspectors have enforced risk assessment duties and prosecuted employers over risk assessment failures in the past. Let employers know that they can be prosecuted for neglecting this duty.

Details of who your enforcing authority is, and how to contact them, should be displayed on a noticeboard in your workplace. If it is not, you can find out by calling your local HSE office. This is listed in the phone book under Health & Safety Executive.

### **Risk assessment checklist**

- Has a 'suitable and sufficient' assessment been done?
- Were UNISON representatives consulted?
- Do representatives have copies of all the assessments?
- Do assessments take account of skin problems?
- Are any members complaining of skin problems?
- Do assessments cover all the staff at risk from a substance or process?
- Could a safer substance or process be used?
- Are training and information specified in the assessment adequate?
- Is the risk assessment being complied with?

UNISON safety representatives have rights to make inspections, report hazards to management, receive information from employers and consult with members. The forms which follow are designed to help you use your rights successfully to tackle employers about their risk assessment duties and gain supporting information from members.

The membership workplace health survey (see page 30) and the report forms (see pages 31-33) should be photocopied for use. Alternatively you may wish to use them as a basis for designing your own forms.

The membership workplace health survey can be used to gather information to back up negotiations with the employer, especially where members are afraid to report problems in the accident book. A survey can be done anonymously.

A survey can also be a good way of raising awareness among members, showing them that the union is working for their health and safety, and getting their backing for your negotiations. Make sure they get to know the results of any survey, for example by holding a meeting or putting the results in a newsletter, or on noticeboards.

The report forms are designed to help you use your inspection and investigation rights to report hazards and deficiencies in risk assessments to your employer, and to use your consultation rights to see copies of risk assessments.

Written and dated reports to employers are important. These are evidence that an employer knew of a hazard. They can be shown to HSE inspectors—and if no real attempt has been made to remove or reduce the hazard, or a member is injured, they can provide evidence in support of a compensation case.

Always keep a copy of your completed form. Decide how long you will give your employer to respond before following it up. You can always do a follow-up report by photocopying the original form or resubmitting it with a dated note saying that you are still waiting for a response. Or, after a period of inaction, you can submit the original form to a more senior manager.

## **Membership workplace health survey**

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The questionnaire on the next page is designed to be used by safety representatives to get some idea about the state of members' health. It can be adapted to suit individual circumstances. For instance, in a call centre you might want to add a question about ringing in the ears. For parking attendants you would probably add questions about violence.

The results can be used to help prioritise union health and safety issues, identify members' concerns and draw management's and members' attention to occupational health problems. The result can supplement the information that safety representatives can get from their employers' accident records and sickness monitoring procedures.

## Membership workplace health survey

1. Do you suffer from any of the following (please tick as appropriate)?

	<i>Never</i>	<i>hardly ever</i>	<i>sometimes</i>	<i>often</i>
■ headaches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ eyestrain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ tiredness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ tension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ colds/flu etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ aches and pains in hands/wrists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ backache	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ rashes or itching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ difficulty sleeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. At work do you feel (please tick as appropriate)?

■ irritated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ angry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ frustrated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ helpless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ anxious	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ confused	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ bored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ happy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
■ enthusiastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Do you think these symptoms are related to your work or your workplace?

.....

4. Have you had any other illness that you think may be related to your work?  
(please give a brief description)

.....

.....

**UNISON report forms**

**UNISON'S risk report form**

The Management of Health and Safety at Work Regulations 1999 require employers to carry out risk assessments of all work areas and introduce control measures. I am concerned that a 'suitable and sufficient' risk assessment has not been carried out on the hazards, problems, tasks or work areas listed below.

Task or area of work:

.....  
.....

Description of problems/hazards:

.....  
.....  
.....  
.....

From name(s) of safety representatives(s):

.....  
.....

Date report submitted:

Management reply (action taken with date or reasons why action not taken):

.....  
.....  
.....  
.....  
.....

Name of manager:

.....

Date of reply:

.....

(Keep a copy of the above form)

### UNISON request for risk assessment records

The Management of Health at Safety and Work Regulations require employers to carry out 'suitable and sufficient' risk assessments of hazards and work tasks and bring in prevention and control measures based on these risk assessments. Employers are required to provide safety representatives with copies of the results of the risk assessments.

Please can you provide me with a copy of your assessment record(s) for the hazards, tasks, work area or jobs listed below:

List of hazards, tasks, work area, jobs: .....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

From (name of safety representative):  
.....

Date: .....

To (name of manager):  
.....



## UNISON request for a risk assessment review

I am concerned that the risk assessment for the hazard, task, work area or job listed below may no longer be valid. This means that the hazards to which it relates are no longer being adequately prevented or controlled.

Hazard, task, work area or job: .....

The risk assessment must be reviewed because (please tick as appropriate):

- An assessment has never been done
- People carrying out the assessment were not able to carry out a suitable and sufficient assessment because they did not:
- Have enough training
  - Have enough time
  - Have enough information
  - Consult with staff and safety representatives.
- An accident, near miss or ill-health incident has occurred.

The following control measures are not working/being used (give details):

.....

.....

.....

.....

.....

There has been a significant change in the matter it relates to, such as changes in work method, staffing, shift pattern, equipment, clerical, management responsibilities or structure (give details):

.....

.....

The assessment has not been reviewed for over a year (give date of last assessment).

.....

Other reasons (specify): .....

From (name of safety representative): ..... Date: .....

To (name of manager): ..... Date of reply: .....

(Keep a copy of the above form)

## Further information

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UNISON produces a number of guides and leaflets on the issues raised in this booklet, including a guide which covers much of the legislation referred to. It is called *The Health and Safety 'Six Pack'* (stock no. 1660). There is also a guide for safety representatives, inspection forms and booklets on stress, back pain, violence, lone working and many other relevant issues. Your branch secretary or publicity officer can order a copy of any of these from UNISON's Communications Department, 1 Mabledon Place, London WC1H 9AJ.

UNISON also produces information sheets on a wide range of issues, for example safety data sheets, asbestos, mobile phones, RSI, fire safety, eye tests and so on. For a full list contact UNISON's Health and Safety Unit (see address below).

Every branch should have a copy of the excellent TUC guide to health and safety *Hazards at Work*. This 300-page guide is an indispensable tool for every branch health and safety officer.

The Health & Safety Executive publications referred to in this booklet are available from HSE Books. To get a full list of both free and priced items, phone HSE on 01787 881165.

If you have a specific health and safety queries, your branch health and safety officer or branch secretary may be able to help you. If they are unable to answer the query, they can pass the request to the regional officer or to the Health and Safety Unit at head office. UNISON's Health and Safety Unit is at:

UNISON, 1 Mabledon Place, London WC1H 9AJ, tel: 020 7551 1446, fax: 020 7551 1766, e-mail: [healthandsafety@unison.co.uk](mailto:healthandsafety@unison.co.uk) .

### Your comments

UNISON welcomes comments on this booklet from branch safety officers and safety reps. Either write to or e-mail the Health and Safety Unit at the address above.





**For help when you need it  
call UNISONdirect  
Freephone 0800 5 97 97 50**

**For information visit  
[www.unison.org.uk](http://www.unison.org.uk)**