

GREATER LONDON AUTHORITY

[REDACTED]
(By email)

Our Ref: MGLA190919-2817

17 October 2019

Dear [REDACTED]

Thank you for your request for information which the Greater London Authority (GLA) received on 19 September 2019. Your request has been dealt with under the Freedom of Information Act 2000.

You requested:

I would like to request, a copy of the following legally required documentation from the Greater London Authority (GLA):

1. *Health and Safety 'Risk Assessment' under the Management of Health and Safety at Work Regulation 1999.*
2. *The GLA and 'Policy for Reasonable Adjustment' for people with mental or physical disabilities under the Equality Act 2010.*

Our response to your request is as follows:

1. Please find attached our risk assessments for Health and Safety
2. Reasonable adjustment, including reasonable adjustment for people with mental or physical disabilities, is covered by a number of different policies and documents at the GLA.

The following are attached:

- Managing disabled staff – managers' guidance
- Reasonable adjustment agreement form
- The GLA's Sickness Absence Policy
- The GLA's Recruitment and Selection Policy

Please note that some names of members of staff are exempt from disclosure under s.40 (Personal information) of the Freedom of Information Act. This information could potentially identify specific employees and as such constitutes as personal data which is defined by Article

4(1) of the General Data Protection Regulation (GDPR) to mean any information relating to an identified or identifiable living individual. It is considered that disclosure of this information would contravene the first data protection principle under Article 5(1) of GDPR which states that Personal data must be processed lawfully, fairly and in a transparent manner in relation to the data subject.

If you have any further questions relating to this matter, please contact me, quoting the reference MGLA190919-2817.

Yours sincerely



Information Governance Officer

If you are unhappy with the way the GLA has handled your request, you may complain using the GLA's FOI complaints and internal review procedure, available at:

<https://www.london.gov.uk/about-us/governance-and-spending/sharing-our-information/freedom-information>

Managing disabled staff – managers' guidance

Introduction

The GLA sets employment targets to ensure that our workforce profile is representative of all of London's communities and wants to recruit and retain more disabled people.

As a line manager you have a responsibility to make sure your disabled staff are treated fairly and have the same opportunities as their non-disabled colleagues.

Definition of disability

Under the law the term 'disability' is wide and people you might not regard as disabled and who may not even think of themselves as disabled are protected. This may include, for example, people with diabetes, asthma, back problems and mental health conditions like depression. Other people, who have cancer, multiple sclerosis (MS) and HIV are automatically covered.

The GLA recognises the broader, social model definition of disability in addition to the legal definition contained in the Equality Act. We ask employees and prospective employees to make their own assessment of whether they consider themselves to meet either definition of disability.

The legal duty to make reasonable adjustments

Disabled people are protected against discrimination at work under the Equality Act 2010. The law requires employers to make **reasonable adjustments** for disabled employees. This means removing barriers wherever possible that get in the way of a disabled person doing their job. This can mean changing where they work, the way in which they do their job or providing equipment to help them.

Examples of reasonable adjustments are:

- Giving some minor duties that a disabled person finds difficult to do to someone else.
- Providing specialist software or equipment, such as a specially designed chair or keyboard
- Allowing time off during working hours or rehabilitation, assessment or treatment, e.g. physiotherapy or psychotherapy.
- Allowing a disabled person to change their working hours for example to part-time, or perhaps starting and finishing later so they don't have to commute at rush hour
- Allowing someone to work at home for some of the time because the commute to work is too tiring or difficult.

Most adjustments cost nothing or very little. Where adjustments are expensive funding may be available from the government as part of the Access to Work scheme. Further advice is available from the HR Group.

What is reasonable?

The checklist at appendix 1 will help you decide whether or not a particular adjustment is reasonable, bearing in mind service needs. You might need to ask the HR group for advice. Remember also to always include the disabled person in discussions about what might be possible and reasonable.

A manager who makes reasonable adjustments realises that to get the best from their team they must recognise people's differences and where possible, accommodate them. Remember that treating everyone in the same way does not necessarily mean that you are treating them fairly.

Recruitment

As part of the recruitment process, administered by the HR group, applicants for GLA jobs are asked whether they have a disability and whether they need any adjustments to enable them to submit an application, attend the interview and selection process or to do their job. The HR group will alert managers to any adjustments requested and can advise on how they can be met.

The GLA operates a **guaranteed interview scheme** which provides for disabled applicants for jobs to be automatically selected for interview if they meet the essential criteria for the job. The HR group monitors applications and advises shortlisting managers when there are disabled applicants.

The role of Occupational Health

All prospective employees are subject to medical screening by our Occupational Health service. Occupational Health will provide advice to the HR group and the relevant line manager about any reasonable adjustments needed, based on their assessment of the employee.

Occupational Health can carry out **workstation assessments** to determine whether any specialist equipment is needed, for example a specially designed chair or keyboard. The HR group manage a corporate budget for major items of equipment but budget holders are expected to meet the cost of minor items such as footrests and document holders.

Where there is concern about the health of any employee, the manager may ask HR to arrange an appointment with Occupational Health to seek advice, including any adjustments that will assist in getting them back to work.

Induction and probation

If you know that a new employee has a disability, you should use the induction and probation process to regularly check that the adjustments are working and discuss any improvements that are needed. You may also need to make colleagues aware of reasonable adjustments, with the agreement of the employee, for example ensuring that written information is sent by email or in large print.

Learning and Development

All line managers should take a proactive role in the learning and development of their staff. This includes ensuring that the learning opportunities (both internal and external) are accessible for disabled staff. HR can, on request, arrange for adjustments to be made for the internal learning opportunities (such as large print, providing a BSL interpreter). The request should be made by the member of staff or by the line manager, with the agreement of the employee. Reasonable adjustments can also include using alternative learning methods (i.e. not limiting development to classroom-

based training), including 1:1 mentoring or coaching, seminars, distance learning, teambuilding, on-line learning, CD-based resources or work shadowing.

Managing performance

As a manager you need to monitor the performance of all members of your team and discuss this with them at regular one-to-one and performance review meetings. If an employee's performance deteriorates, or is not as good as it should be, you should always consider the possibility that they might have a disability. When discussing performance with the employee you should try to find out if there is anything about the working environment that is making it difficult for them to do their job. If so, you can then explore ways – together and by seeking advice from HR – to overcome these difficulties by making reasonable adjustments.

Time off for medical appointments or treatment

You might discover from the employee or an Occupational Health report that the employee needs time off work for regular treatment, for example physiotherapy or counselling sessions. In this situation you might together be able to agree reasonable adjustments that will help you and the organisation to accommodate the appointments. For example:

- Arranging appointments at the beginning or end of the day and making up time by starting or finishing later
- Making up the time during the rest of the week
- If the person works shifts, altering shift rotas to allow the person to go to appointments on days off
- For short, fixed periods of time, allowing the person to take the time they need without having to make it up.

If you cannot reasonably accommodate the time off that the person needs, for example because of service needs, you will need to ask HR for advice.

Managing sickness absence

The HR group provides monthly reports to managers on sickness absence of staff they manage, including the reasons for sickness absence. Currently the GLA does not record disability related sickness absence separately from other absence, although this is under review.

Not everyone with a disability will need to take time off work. If you have concerns about the attendance of someone you manage, you should talk to them about it and explore whether there are any adjustments to their working environment or working arrangements that might help them improve their attendance. If so, you should make adjustments where possible to help overcome the barriers they are facing. The law requires you to make reasonable adjustments if you know or could reasonably be expected to know someone is having problems doing their job because of a disability. You may need to ask the HR group for advice.

However, as part of the **back to work interview** and informal and formal **review meetings** under the Sickness Absence Policy, managers should try to find out, without being unreasonably intrusive, whether there is a disability related reason for the absence. If so, then this will need to be taken into account when considering

appropriate action under the policy. Each case will need to be considered on its merits, but you might decide that as a reasonable adjustment you will allow an employee who Occupational Health have said will need more time off sick than other employees a longer period of absence before triggering action under the policy. Other options might include:

- allowing the person to work from home if they find it difficult to come into work but are well enough to do some work
- Allowing the person to work additional hours and 'bank' extra hours to take when they are unwell

Allowing someone to take more unplanned time off sick than someone without a disability might not be possible or reasonable in their current job, for example because the job has time critical deadlines or because cover cannot be found for them at short notice. In this case, you should consult the HR group for advice.

You may be able to change some things immediately but it is likely that you will need more information before reasonable adjustments that will really help are identified and this may mean asking the HR group to refer the employee to Occupational Health. It is important to reassure the employee that what you want is advice on what reasonable adjustments can be made to help them to do their job and improve their attendance. Occupational Health may need to write to the person's GP or specialist for more information about their illness or disability but they cannot do this without the employee's consent.

Phased returns from long term absence

After a period of long term absence, there may be circumstances where the Occupational Health service advises that an employee phases their return to work over a period of time. Phased returns usually take place over a short period of a few weeks and enable the employee to build up their working hours gradually. Where appropriate and practicable, phased returns may also involve varying the employee's normal duties and/or allowing them to do some work from home.

Further details are contained in the Sickness Absence Policy and advice is available from the HR group.

Redeployment

If it is not possible to make reasonable adjustments in the employee's current job that mean the employee is able to meet the requirements of that particular job, the law requires employers to consider the further reasonable adjustment of redeploying the employee into another, more suitable vacancy, if available. The HR group can provide further advice.

Permanent ill-health

If no suitable redeployment is available, and where the Occupational Health adviser confirms that an employee is permanently unable to carry out their job due to ill health or infirmity, early retirement will normally be granted to members of the local government pension scheme, with enhanced pension benefits. Enhancements vary depending on the employee's expected ability to recover to obtain gainful employment by age 65.

Where the employee's condition does not meet the criteria for ill-health retirement with pension benefits, action under the Sickness Absence Policy will need to be considered. Managers should seek advice from the HR group.

Appendix 1

Factors to take into account when making decisions about reasonable adjustments:

- Has advice been sought from anyone else, e.g. Occupational Health adviser, Jobcentre Plus adviser?
- How effective will the adjustment be in preventing the disadvantage?
- Has advice been sought from anyone else, e.g. Occupational Health?
- How practical is it to make this adjustment? For example how long will it take to implement; will additional training be needed for the disabled person or anyone else?
- Are the financial and other costs reasonable?
- Is financial or other assistance available, e.g. Access to Work?
- What, if any, disruption will be caused by making the adjustment?
- What effect, if any, will the adjustment have on service delivery?
- What effect, if any, will the adjustment have on other employees?
- What adjustments have been made or are required for other employees in your team?
- Would making the adjustment result in unacceptable risks to the health and safety of any person (including the disabled person)?
- Would making the adjustment reduce a health and safety risk for anyone (including the disabled person)?
- Has the employee been consulted on the adjustment and agreed that it is needed?

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Reasonable adjustment agreement

This is a record of the reasonable adjustments agreed between the employee and line manager named below.

Employee's name:	
Job title:	
Unit/Directorate:	
Line manager's name:	

The purpose of this agreement is to:

- ensure that both the employee and the employer have an accurate record of what has been agreed;
- minimise the need to renegotiate reasonable adjustments every time the employee changes job, is relocated or is assigned a new manager within the organisation; and
- provide the employee and his or her line manager with the basis for discussions about reasonable adjustments at future meetings.

This agreement may be reviewed and amended as necessary with the agreement of both parties:

- at any regular one-to-one meeting;
- at a return-to-work meeting following a period of sickness absence;
- at six-monthly and/or annual performance reviews;
- before a change of job or duties, or the introduction of new ways of working; or
- before or after any change in circumstances for either party.

However, expert advice from third parties, such as occupational health advisers, Access to Work or IT specialists may be needed before changes can be agreed and implemented.

Employee

In the workplace

My disability has the following impact on me at work:
(include, for example: any aspects of the job that your disability would prevent you from doing easily; any impact on sickness absence levels)

I need the following reasonable adjustments, that have been agreed with my manager:
(Indicate whether adjustments are permanent or temporary, and the duration/review period where appropriate)

<u>Adjustment</u>	<u>Date implemented</u>	<u>Duration/review</u>
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Emergency contacts

If I become too unwell to remain at work, I am happy for my line manager to contact any of the following emergency contacts in the order of preference indicated below:

[insert details as appropriate]

Preference 1	Preference 2
Name:	Name:
Relationship to me:	Relationship to me:
Telephone number:	Telephone number:
Mobile telephone number:	Mobile telephone number:
Address:	Address:

I will let you know if there are changes to my condition that have an effect on my work and/or if the agreed adjustments are not working. We will then meet privately to discuss any further reasonable adjustments or changes that should be made.

If you notice a change in my performance at work or feel that these reasonable adjustments are not working, I would be happy to meet you privately to discuss what needs to be done.

Line manager

Keeping in touch

If you are absent from work because of sickness or for a reason relating to your disability for more than 7 days and have followed the usual procedures for notifying the GLA of your absence, I will keep in contact with you in the following way:

[insert details as agreed]

Who will contact whom?

How will contact be made? (email, telephone, text, letter, minicom)

How often? (daily, weekly, monthly)

When? (preferred day, preferred time)

Conversations while you are on sick leave

We have agreed that the topics that we will discuss while you are absent include:

[add/delete as appropriate]

- how you are feeling;
- what I can do to help;
- how your current work will be dealt with;
- the possibility of a planned phased return to work where appropriate; and
- the return to work date.

Return to work

When you are ready to return to work after a period of sickness or disability-related absence of more than 7 days, we will meet to review this agreement and make any necessary amendments.

At this return-to-work meeting we will also discuss:

[add/delete as appropriate]

- any current work issues;
- any phased return-or back-to-work plan;
- what to tell the team; and
- any assessments to review existing reasonable adjustments (such as by Access to Work or occupational health) and identify new adjustments that might be needed.

Unauthorised absences from work

If you are absent from work and have not followed the usual procedures for notifying us that you are sick or absent for a reason relating to your disability, we have agreed that I will try to contact you on your mobile and/or notify your emergency contact(s) as set out above.

Records

An up-to-date copy of this form will be retained by the employee, line manager and Human Resources, who will place a copy on the employee's personal file.

A copy of this form may also be given to a new or prospective line manager. If the employee changes job, is relocated or is assigned a new manager, the new manager should accept the adjustments outlined in this agreement as reasonable and ensure that they continue to be implemented. The agreement may need to be reviewed and amended at a later date but this should not happen until both parties have worked together for a reasonable period of time.

Employee's signature	Date
Manager's signature	Date

Sickness absence policy

1. Purpose and scope

- 1.1 This policy aims to ensure that the GLA meets its objectives of optimising attendance and delivering its duty of care to all staff. It aims to provide a framework for the fair, consistent and effective management of sickness absence across the GLA and for the management of performance and capability issues relating to ill-health. It is intended to complement the GLA's policies and procedures for helping individuals to improve the balance between home and work life, and other measures introduced to support people in the workplace.
- 1.2 The policy specifies the responsibilities of individuals and line managers in promoting good attendance and provides guidance on the process of monitoring and reviewing sickness absence and facilitating return to work.
- 1.3 In the majority of cases the adoption of good management practices will enable employees to achieve the required attendance. This policy outlines the actions to be followed in dealing with failure or inability to meet attendance standards.
- 1.4 This policy applies to all employees except:
 - employees during their probationary period, including probationers on fixed term contracts - where any attendance issues will be dealt with under the probationary assessment process.
 - Staff seconded to work in London's European Office – where a modified sickness absence procedure applies (see intranet for details).
- 1.5 This policy applies to the following employees, with modifications as indicated:
 - The Head of Paid Service (Chief Executive), the Monitoring Officer and the Chief Finance Officer ("the Statutory Officers") – where this policy will be modified by the terms of the Statutory Officers Protocol
 - Staff appointed by the Mayor under s 67(1) of the GLA Act 1999 (as amended) - where this policy will be modified by the terms of the Protocol on Mayoral appointments.
 - Staff appointed by the HOPS but managed by staff appointed by the Mayor under 67(1) – where this policy will be modified by the terms of the HOPS scheme of delegations (see appendix 5 of the Sickness Absence Policy)

2. Attendance standards

- 2.1 The GLA is committed to improving employee attendance through fair and effective attendance management procedures. The GLA will balance the needs of individual staff with the need for an effective and efficient organisation, recognising the impact of sickness absence on productivity, value for money and staff morale.
- 2.2 The GLA will be sympathetic and supportive in its approach to attendance management and will deal with issues in a confidential and sensitive manner. Managers will be encouraged to seek and follow expert advice on managing complex sickness issues.
- 2.3 The GLA will ensure that the management of attendance is consistent and fair and without bias in relation to age, disability, gender identity or gender expression, gender reassignment, marital status or civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation.
- 2.4 All employees must comply with the GLA's sickness absence policy and its aims to improve attendance standards through the provision of effective support and clear attendance standards for employees.

3. Responsibilities of managers

- 3.1 Managers will communicate attendance standards and manage attendance through the following measures:
- A structured induction into the GLA for all new employees
 - A formal probation process for all new employees
 - Employee performance review
 - Ensuring consistency in the application of policies and procedures
 - Clearly communicating procedures for reporting sickness/attendance
 - Accurate recording of sickness on the HR System
 - Ensuring sickness information is kept confidential
 - Maintaining contact with employees during periods of absence
 - Effective monitoring and support via return to work interviews
 - Making recommendations for referrals to Occupational Health
 - A process of informal and formal review meetings
 - Regular support and guidance to employees to enable them to improve attendance,
 - Monitoring workloads and hours worked and supporting staff to achieve a healthy home and work balance
 - Encouraging staff to proactively manage their own health issues by participating in workplace health initiatives and making use of appropriate advice and support from the Employee Assistance Programme
 - Monitoring team sickness absence to identify trends or themes and seeking HR advice where appropriate

- Attending absence management training and other appropriate GLA training programmes such as Well Being training.

4. Responsibilities of employees

4.1 Employees are expected to:

- Attend work unless unfit to do so
- Raise concerns with their manager if they believe that their job is causing or contributing to illness,
- Report sickness absences promptly, in accordance with the sickness absence reporting procedure (note: intranet version will link to relevant page) (see Appendix 1)
- Ensure that the appropriate GP fit notes are submitted in accordance with the policy and in order to qualify for occupational sick pay.
- Ensure that medical advice and treatment, where appropriate, is received as quickly as possible in order to facilitate a return to work
- Maintain regular contact with their manager during periods of sickness absence
- Communicate effectively with the manager about their sickness absence
- Participate openly in return to work interviews
- Co-operate fully with Occupational Health
- proactively manage their own health issues by participating in workplace health initiatives and make use of appropriate advice and support from the Employee Assistance Programme

5. Responsibilities of Human Resources

5.1 The Human Resources and Organisational Development (HR&OD) Unit will:

- Provide advice and support to line managers on managing attendance and ill-health issues where requested
- Provide training for line managers on managing attendance and ill-health issues and encourage participation in such training
- Oversee the maintenance of sickness records in the HR System and provide support to managers to access and review reports
- Arrange Occupational Health referrals, in consultation with managers
- Promote to staff and managers the range of GLA policies and initiatives aimed at encouraging work-home balance and workplace well-being

6. Assessing attendance

Short term absence

- 6.1 Short-term absence is broadly defined as a series of illnesses or where there is a pattern of absenteeism, which may be self-certified or certified by a medical practitioner.
- 6.2 See section 7 for details of how to deal with short term absence.

Long term absence

- 6.3 Long-term absence is defined as a continuous period of absence lasting for four consecutive weeks or more.
- 6.4 See section 8 for details of how to deal with long-term absence.

Chronic ill-health

- 6.5 Chronic ill-health may be defined as physical or mental illness which prevents an employee from attending work or impairs the individual's ability to carry out their full duties competently and without risk to self or others. This includes:
- Long term absence arising out of a single or underlying illness
 - Repeated shorter periods of absence arising out of a single or underlying illness
 - A chronic illness, where it is unlikely that the individual will recover sufficiently to return to their current job
- 6.6 Chronic ill-health may be identified during or following a period of long-term sickness absence, but may also be identified where no sickness absence has occurred.
- 6.7 See section 8 for details of how to deal with chronic ill-health.

7 Short-term absence procedure

7.1 Return to work interview

- 7.1.1 The manager should conduct a return to work interview following each occasion of sickness absence and as soon as possible after the employee returns to work to:
- Welcome them back and update them on what has been happening in their absence
 - Check they are fit to return and whether any support is required.
 - Check if there are any underlying problems, and discuss any link between health and the workplace
 - Discuss whether a referral to Occupational Health is appropriate
 - Check the 'reason for absence' input by the manager into the HR system and the start and end dates for the period of absence are correct.

- 7.1.2 Where the absence is for less than 7 days, the electronic entry on the HR system provides a sufficient record of the absence period.
- 7.1.3 Where the absence is for more than 7 days, the employee must provide a medical certificate (“fit note”) from their doctor confirming their sickness absence.
- 7.1.4 The meeting should be informal and can be very brief, depending on the nature of the absence.
- 7.1.5 Where possible, the cause of the absence should be identified and, where appropriate, support and guidance provided to try and avoid similar absences in the future, including any reasonable adjustments that may be appropriate.
- 7.1.6 The manager should make a written file note of the meeting. A copy of this note should be kept on the employee’s personal file.

7.2 Informal review meetings

- 7.2.1 Where an employee’s absence causes concern the manager will hold an informal review meeting with the individual to discuss their attendance. Trigger points requiring informal action are:
- certified or uncertified sickness absence exceeding 5 working days in any rolling six-month period, (pro-rata for part time staff) or
 - 3 or more occasions of sickness absence in any rolling six-month period, or
 - regular patterns of absence, for example, sickness absence that falls on Mondays or Fridays, or
 - absence levels just below the trigger point on a number of occasions.
- 7.2.2 The manager should review the employees’ attendance record during the last 12-month period and try to establish the nature and extent of any illness or illnesses.
- 7.2.3 The manager should verify that the record of absence is correct and try to find out if there is a particular problem resulting in sickness absence, and whether the GLA can provide any further assistance to the employee. Where appropriate, the manager should consider requesting a referral to Occupational Health (see Appendix 2). If a referral is made, the manager should explain to the employee the reason for the referral.
- 7.2.4 The manager should consider whether any reasonable adjustments are necessary, for example to working hours/patterns of work or physical adjustments (these may be short or long-term adjustments). *See section 12 for guidance on disabled employees and reasonable adjustments.*
- 7.2.5 The manager should make clear to the employee that a sustained improvement in their level of attendance is expected and agree an action plan with the employee for improving attendance. The manager should inform the employee that a failure to

achieve the required improvement within a specified time period might lead to formal action being taken under the procedure.

- 7.2.6 The manager should also raise any issues concerning failure to comply with the sickness reporting procedure at this review meeting, informing the employee that a failure to follow this procedure might lead to formal action being taken under the disciplinary procedure and/or loss of pay.
- 7.2.7 The manager should keep a written note of any meetings with the employee regarding their sickness absence. The manager should write to the employee within 5 working days of the meeting to confirm the details and any decisions reached and a copy of the letter and any notes made by the manager will be placed on the employee's personal file.

7.3 Formal sickness review

- 7.3.1 If, having taken these initial actions, attendance has not improved where it could have been reasonably expected to, a formal sickness review will be arranged between the line manager and the employee. A member of the HR&OD Unit will normally attend meetings at this stage.
- 7.3.2 The purpose of the meeting will be to:
- bring to the attention of the employee problems with their attendance record which impacts on their ability to perform the duties of their job
 - explain how it fails to meet required standards
 - give the employee the opportunity to explain any individual circumstances affecting their attendance or health, and
 - consider any advice received from Occupational Health as to whether there is an underlying medical reason for absences and whether treatment being received is likely to improve attendance.
 - where appropriate, set targets for improving attendance and decide over what period the improved attendance will be assessed.
 - establish any reasonable adjustments or other support required to encourage improved attendance. *See section 12 for guidance on disabled employees and reasonable adjustments.*
 - make clear to the employee that failure to achieve the required standards might lead to further formal action being taken under the procedure and ultimately to the termination of their employment.
- 7.3.3 Employees should be advised in advance (normally 5 working days) and in writing of the date and time of the meeting and that they may be accompanied by an accredited trade union representative or work colleague employed by the GLA. (See also section 10 – Scheduling of meetings.)

- 7.3.4 The manager will confirm the outcome of the formal review to the employee in writing within 5 working days and a copy of the letter will be placed on the employee's personal file.

7.4 Monitoring and review

- 7.4.1 The length of time the employee should be allowed to demonstrate improved attendance following an informal or formal sickness review will depend on a range of factors including:

- the nature of the employee's illness/personal circumstances
- the employee's general work and attendance record
- the length of the various absences and the period of attendance between them

- 7.4.2 The employee's attendance record should be closely monitored on a regular basis.

- 7.4.3 Where it becomes apparent during the process of the review that there is no significant improvement in the attendance record, further action should be taken immediately.

- 7.4.4 The relevant action will depend on the circumstances, but could include setting revised targets and bringing forward the date of the final formal sickness review.

7.5 Possible outcomes

- 7.5.1 Possible outcomes of the management action are:

- Attendance reaches the required standard – this should be recognised and the employee reminded that this level of attendance must now be maintained.
- Attendance improves but does not reach the required standard – the manager should consider if further time, reasonable adjustments, or appropriate support will allow the employee to reach the required standard. The employee should be informed that no improvement may ultimately lead to the termination of their contract of employment.
- No improvement – the manager should consult with a member of the HR&OD Unit and a final formal sickness review should be arranged.

7.6 Final formal sickness review

- 7.6.1 The general format of the final formal review hearing is set out in Appendix 3.

- 7.6.2 The final formal sickness review will be conducted by the Head of Unit, Assistant Director or Director.
- 7.6.3 Employees should be advised in advance (normally 5 working days) and in writing of the date and time of the meeting. (See also section 10 – Scheduling of meetings.)
- 7.6.4 Employees will be entitled to be accompanied at the meeting by an accredited trade union representative or work colleague employed by the GLA.
- 7.6.5 At the final formal review meeting the Head of Unit, Assistant Director or Director will consider all the relevant circumstances relating to the individual's attendance record.
- 7.6.6 The Head of Unit, Assistant Director or Director may decide to terminate the employee's employment on grounds of incapability. A member of the HR&OD Unit will be present at the meeting to provide advice and to ensure consistency.
- 7.6.7 When reaching a decision about whether or not to terminate employment, the Head of Unit, Assistant Director or Director will consider issues such as:
- The nature of the illness
 - The likelihood of the illness recurring or other illness arising
 - The length of the absences and the periods of good health between them
 - The need for the work to be undertaken
 - The impact of the employee's absence and ill-health on other employees and service delivery
 - The implementation of the GLA's policies and procedures
 - An assessment of the individual case, on its own merits
 - The actions that have been taken to attempt to enable the employee to continue in employment (including making reasonable adjustments and redeployment to an alternative job where appropriate)
 - Medical advice received
 - Representations made by the employee and/or their representative

This list is not exhaustive and the weight attached to each will depend on the circumstances of the case, whilst balancing the needs of the employee and the GLA.

- 7.6.8 If the decision is taken to terminate the employment, the employee will be entitled to the period of notice as specified in their contract of employment.
- 7.6.9 The employee will be notified of the decision and the reasons for it in writing within five working days of the meeting and a copy of the letter will be placed on the employee's personal file.
- 7.6.10 The employee must also be advised in writing of their right to appeal and the procedure to be followed. The procedure for appeals is set out in section 9.

8. Long-term absence or chronic ill-health procedure

8.1 Maintaining contact during long term absence

- 8.1.1 The manager should maintain regular contact with absent employees. This should be handled sensitively and may take the form of telephone calls, emails, text messages, letters, newsletters or home visits. Managers should agree with absent employees what information they would like to receive and by what means. A note of any contact should be kept on the employee's personnel file.
- 8.1.2 The manager should ensure that the employee provides medical certificates to cover all periods of absence beyond the first seven days.
- 8.1.3 The HR&OD Unit will notify the employee in writing when their entitlement to occupational sick pay is due to reduce or cease.
- 8.1.4 Whilst absent, the employee must be consulted on any changes affecting their job.
- 8.1.5 Employees will accrue annual leave during periods of long-term absence. Managers should consult the HR&OD Unit about how any outstanding leave should be dealt with on the employee's return.

8.2 Obtaining medical advice

- 8.2.1 A referral should be made to Occupational Health (see Appendix 2). If a referral is made, the manager should explain to the employee, either in person or in writing, the reason for the referral.

8.3 Formal review meeting

- 8.3.1 Where an employee has been absent for four consecutive weeks or more the manager will hold a formal review meeting with the individual to:
 - review the absence and share the information received from Occupational Health (if available)
 - establish any reasonable adjustments or other support required to support improved attendance. *See section 12 for guidance on disabled employees and reasonable adjustments.*
 - in cases of chronic ill-health or disability, consider, in the light of Occupational Health advice, whether redeployment is appropriate.
 - explain to the employee that if their absence continues with no prospect of a return to work, the GLA will need to consider the termination of their employment.
 - set timescales for further review or the next stages in the process.
 - confirm the employee's entitlement to occupational sick pay.

- 8.3.2 A member of the HR&OD Unit will normally attend meetings at this stage. Advice received from Occupational Health should be considered as to whether there is an underlying medical reason for absences and whether treatment being received is likely to improve attendance.
- 8.3.3 If relevant, the manager should also raise any issues concerning failure to comply with the sickness reporting procedure at this review meeting, informing the employee that a failure to follow this procedure might lead to loss of pay.
- 8.3.4 The review will normally be conducted as a face-to-face meeting, which could be at City Hall, in the employee's own home or at another suitable location. Where this is not practical, it may be appropriate for the review to take place in a telephone discussion. If it is not possible to hold the discussion by any of these means, it may be appropriate to hold the review with the employee's representative, or in their absence. Advice should be sought from the HR&OD Unit.
- 8.3.5 Employees should be advised in advance (normally 5 working days) and in writing of the date and time of the meeting and that they may be accompanied by an accredited trade union representative or work colleague employed by the GLA. (See also section 10 – Scheduling of meetings.)
- 8.3.6 The manager should write to the employee within 5 working days of the meeting to confirm the details and any decisions reached and a copy will be placed on the employee's personal file.

8.4 Further formal review meeting

- 8.4.1 The manager will agree a date to meet again, taking account of any information from Occupational Health. The length of time that should be allowed to assess any improvement in the employee's health will depend on the nature of the employee's illness and the particular circumstances in each case, but the date of the review will not normally be earlier than six weeks and not later than three months after the initial review meeting. The manager will continue to keep in touch with the employee. A member of the HR&OD unit will normally attend meetings at this stage.
- 8.4.2 The purpose of the meeting will be to:
- Review the absence and share any further information received from Occupational Health (if available)
 - discuss any reasonable adjustments or other support required to support improved attendance. *See section 12 for guidance on disabled employees and reasonable adjustments.*
 - in cases of chronic ill-health or disability, consider, in the light of Occupational Health advice, whether redeployment is appropriate.

- Explain to the employee that if their absence continues with no prospect of a return to work, the GLA will need to consider the termination of their employment.
 - Set timescales for further review or the next stages in the process.
 - Confirm the employee's entitlement to occupational sick pay.
- 8.4.3 Employees should be advised in advance (normally 5 working days) and in writing of the date and time of the meeting and that they may be accompanied by an accredited trade union representative or work colleague employed by the GLA. (See also section 10 – Scheduling of meetings.)
- 8.4.4 The manager will confirm the outcome of the formal review to the employee in writing within 5 working days.

8.5 Phased return to work

- 8.5.1 Where the employee returns to work after a period of long term absence, there may be circumstances where Occupational Health advises that an employee phases their return to work over a period of time. A phased return can help the employee acclimatise themselves back to the work routine and work tasks, whilst also checking that they are in fact fit enough to return. Pursuing this option may also mean that the employee is able to return to work earlier than they might otherwise have been able to. Where appropriate and practicable, phased returns may also involve varying the employee's normal duties. Phased returns usually take place over a short period of a few weeks and would not normally be expected to last more than eight weeks, enabling the employee to build up their working hours gradually.
- 8.5.2 The employee will be paid their normal contractual salary for hours worked and their contractual entitlement to occupational sick pay at the current time for the remainder of their full contracted hours.
- 8.5.3 After an absence of some time, the employee will need to be supported by their manager and colleagues to help them settle back into work. On the employee's first day back, the manager will welcome the employee back and discuss with them implementing a return to work plan.

8.6 Possible outcomes of long term absence or chronic ill-health/disability

- 8.6.1 Where after a period of review Occupational Health advises that:
- the employee is not capable of carrying out the duties of their post, or
 - there still no clear prognosis for the employee's return to work in the near future.

A final formal sickness review will be convened.

- 8.6.2 In the case of chronic ill-health, it is possible that advice may be received that the employee is no longer capable of carrying out the duties of their post, even though there has been no sickness absence, or where the degree of sickness absence has not triggered action under the sickness absence policy. In such cases, a final formal sickness review will still be convened.

8.7 Final formal sickness review

- 8.7.1 The general format of the final formal review hearing is set out in Appendix 3.
- 8.7.2 The final formal sickness review will be conducted by the Head of Unit, Assistant Director or Director.
- 8.7.3 Employees should be advised in advance (normally five working days) and in writing of the date and time of the meeting. (See also section 10 – Scheduling of meetings.)
- 8.7.4 Employees will be entitled to be accompanied at the meeting by an accredited trade union representative or work colleague employed by the GLA.
- 8.7.5 A member of the HR&OD Unit will be present at the meeting to provide advice to the Head of Unit, Assistant Director or Director and to ensure consistency.
- 8.7.6 At the final formal review meeting the Head of Unit, Assistant Director or Director will consider all the relevant circumstances relating to the individual's attendance record. The Head of Unit, Assistant Director or Director may decide to terminate the employee's employment on grounds of incapability. Where appropriate, the Head of Unit, Assistant Director or Director may decide to seek redeployment before effecting termination of employment (see para. 8.8)
- 8.7.7 If the decision is taken to terminate the employee's contract of employment, they will be entitled to the period of notice as specified in their contract of employment.
- 8.7.8 When reaching a decision about whether or not to terminate employment, the Head of Unit, Assistant Director or Director will consider issues such as:
- The nature of the illness
 - The likelihood of it recurring or other illness arising
 - The length of the absence(s) and any periods of good health between them
 - The need for the work to be undertaken
 - The impact of the employee's absence and ill-health on other employees and service delivery
 - The implementation of the GLA's policies and procedures
 - An assessment of the individual case, on its own merits
 - The actions that have been taken to attempt to enable the employee to continue in employment (including making reasonable adjustments)
 - The likelihood of suitable redeployment being available (see para. 8.8)

- Medical advice received
- Representations made by the employee and/or their representative

This list is not exhaustive and the weight attached to each will depend on the circumstances of the case, whilst balancing the needs of the employee and the GLA.

- 8.7.9 Before reaching the decision to dismiss a disabled employee on the grounds of ill health, the relevant Head of Unit/ Assistant Director/ Director and HR&OD Unit representative must be satisfied that every effort has been made to investigate alternative employment and to make any reasonable adjustments.
- 8.7.10 The employee will be notified of reasons for the decision in writing within 5 working days of the meeting.
- 8.7.11 The employee will also be advised in writing of their right to appeal and the procedure to be followed. The procedure for appeals is set out in section 9.

8.8 Redeployment on the grounds of capability (ill health)

- 8.8.1 Where Occupational Health advises that an employee is unable to return to the duties of their current job because of health reasons, but is able to perform other duties, the GLA will make every effort to identify suitable alternative employment. Occupational Health will provide advice on what might be suitable redeployment.
- 8.8.2 Employees who are able to attend work for other duties during this time should be given suitable temporary duties to undertake, or, if no suitable duties are available, the Director may authorise special leave.
- 8.8.2 The GLA will look for suitable redeployment for a period of three months. This will incorporate the employee's contractual notice period. If no suitable redeployment opportunities have been identified, at the end of the three month period the individual's employment will be terminated on the grounds of capability.
- 8.8.3 Redeployees may be given priority consideration for suitable alternative jobs with the Authority. Certain categories of redeployee may have priority consideration over others dependent upon individual circumstances. This will include an interview with the appropriate manager (in consultation with the HR&OD Unit) from the directorate in which the vacancy exists. The alternative job may be in the employee's existing directorate or in another directorate. Any potential redeployment opportunity should be checked for suitability with Occupational Health before an offer is made.
- 8.8.4 If a potentially suitable job has been advertised externally, it may be withdrawn to allow the redeployee to be considered for the post. If the short-listing stage has already been reached, then the redeployee may be given priority consideration before any competitive interview process is commenced.

- 8.8.5 The GLA will look for suitable redeployment at the employee's existing grade. If no suitable redeployment is available at the employee's existing grade, the GLA may offer alternative employment at a lower grade. Where redeployment is to a lower grade, there will be no salary protection

8.9 Early retirement on grounds of ill-health

- 8.9.1 Where Occupational Health confirms that an employee is permanently unable to discharge the duties of their post, and there is no comparable job in the GLA into which they can be redeployed, if the employee is a member of the local government pension scheme they may be eligible for retirement with immediate payment of pension benefits. The level of benefits awarded is dependent on the member's expected likelihood of being able to obtain "gainful employment" by age 65. The HR&OD Unit will confirm any such decision in writing to the employee, giving the appropriate contractual notice of the termination of their employment.

8.10 Terminal illness

- 8.10.1 When dealing with cases of terminal illness managers must be sympathetic to the individual circumstances of each case, ensuring that the employee's concerns are given serious attention.
- 8.10.2 Managers should be aware that individuals will be affected differently by their illness. Some employees will be able to attend work whilst others may find it impossible to continue working.
- 8.10.3 In the light of the circumstances and the employee's wishes, where the employee is a member of the Local Government Pension Scheme, the Pension Fund Authority will normally certify that the employee may be retired early on the grounds of permanent ill health.

9 Appeals against dismissal

- 9.1 The general format of the appeal hearing is set out in Appendix 4.
- 9.2 Notice of appeal against dismissal should be submitted to the Head of Human Resources within 10 working days of the date of the written confirmation of the outcome of the final formal sickness review meeting.
- 9.3 Appellants will be given notice in writing at least 10 working days in advance of the time and place of hearing.
- 9.4 Documentary evidence to be produced by either party must be made available for the information of the other party at such a time as is reasonable and practicable in all the circumstances and in any event to the HR&OD Unit no less than five working days in advance of the appeal.

- 9.5 Appeals against dismissals will be heard by the relevant Director, or if the Director has already been involved at the dismissal stage, by another Director.
- 9.6 The decision of the Director hearing the appeal will be communicated to the appellant in writing as soon as is practicable.
- 9.7 Should any action be withdrawn, any written reference should be removed from the employee's record and the employee notified accordingly, in writing as soon as possible.
- 9.8 The decision of the Director hearing the appeal is final within the GLA's procedures.

10 Scheduling of meetings

- 10.1 Where possible, the timing of all meetings covered by this procedure will be agreed with the employee. An employee who cannot attend a meeting should inform the manager in advance wherever possible.
- 10.2 If the employee's companion cannot attend on a proposed date, the employee can suggest another date so long as it is reasonable and is not more than five working days after the date originally proposed by manager. This five day time limit may be extended by mutual agreement.
- 10.3 If the employee fails to attend the meeting through circumstances outside their control and unforeseeable at the time the meeting was arranged, the manager should arrange another meeting. A decision may be taken in the employee's absence if they fail to attend the re-arranged meeting without good reason.
- 10.4 If the employee is unable to attend a meeting because of their ill-health, arrangements may be made for the meeting to take place at their home or other suitable venue. Advice will be sought from Occupational Health where appropriate.
- 10.5 A decision may be taken in the employee's absence if it is not possible to hold a meeting because of the employee's ill-health. In these circumstances, the employee will be given the opportunity to submit any representations they may wish to make in writing prior to the hearing. Any written representations submitted will be taken into consideration at the meeting in the employee's absence.

11 Pregnant employees

- 11.1 Under current employment law, it is automatically unfair to discriminate against or dismiss an employee for reasons related to their pregnancy. This includes pregnancy-related sickness absence. Further advice is available from the HR&OD Unit.
- 11.3 If an employee is absent from work because of a pregnancy related illness after the beginning of the fourth week before their expected week of childbirth, this will automatically trigger the start of the employee's maternity leave from the day following the first day of absence.

12 Disabled employees

- 12.1 Where there is concern about the sickness record of a disabled employee, or where the sickness absence gives rise to a disability, line managers should follow the procedure already outlined above. However, managers should bear in mind the legal requirement to make 'reasonable adjustments' and in these circumstances the following additional actions set out below should be taken.
- 12.2 When reviewing sickness absence records managers should consider making adjustments to trigger points for management action where appropriate.
- 12.3 During the informal stage, managers should inquire about the nature of the disability and try to identify any adjustments that can be made to assist the employee. Employees should be encouraged to provide as much information as possible, so managers can act on the information available.
- 12.4 Reasonable adjustments could include, for example, re-allocation of duties, changes to working hours/patterns of work, physical adjustments or the provision of special equipment. It could also include allowing the employee time off during working hours to attend hospital appointments, rehabilitation sessions, assessment or treatment. Further guidance on making reasonable adjustments is available on the intranet.
- 12.5 The onus will be on the employee to make the line manager aware of their disability. However, if the employee does not wish to disclose the nature of their disability to their line manager, arrangements will be made for them to discuss this with a member of the HR&OD Unit. This person will then be responsible for informing the line manager of any reasonable adjustments that the employee might need. The nature of the employee's disability will be kept confidential.
- 12.6 Before reaching any decision to dismiss a disabled employee on the grounds of ill health, the relevant Head of Unit/ Assistant Director/ Director and a HR&OD Unit representative must be satisfied that every effort has been taken to investigate alternative positions and to make any reasonable adjustments.

13 Disciplinary action relating to absence

- 13.1 The following issues will be dealt with under the GLA Disciplinary Procedure:
- failure to follow the sickness absence notification procedure without good reason
 - failure to provide medical certificates when required
 - abuse of the sickness scheme e.g. undertaking paid or unpaid employment elsewhere while absent on sick leave or engaging in activities inconsistent with sickness absence
 - falsification of medical certificates
 - a continuing pattern of unauthorised absences
 - failure to attend Occupational Health referrals or informal/ formal meetings

- 13.2 On each occasion of misconduct, action should be taken, following investigation, in accordance with the Disciplinary Procedure.

14 Other relevant information

- 14.1 The GLA has a number of employment policies, procedures and initiatives which support the health and well-being of employees. Further information is available on the intranet:

- Guidance on reasonable adjustments
- Health & safety policy
- Stress management policy
- Employee assistance programme
- Health screening
- Flexible working policy
- Trade in of annual leave for health-related benefits
- Staff discounts for gym membership and other health-related services

Procedure for notification of sickness absence

1. Managers are responsible for ensuring that employees are clear about the Authority's procedure for reporting sickness absence. Managers must explain the standards of attendance required of individual employees as part of the induction process. Managers will also review attendance records as part of the probationary and performance review process.
2. Assistant Directors /Heads of Unit are responsible for implementing the Authority's reporting procedures and for ensuring the full and accurate collection of sickness absence data within their Sections.
3. Employees who are absent from work due to sickness or injury must notify their line manager as soon as possible on the first day of absence and by no later than 10am.
4. The unavailability of the line manager is not a sufficient reason for the sickness not to be reported and in these circumstances, managers must designate an alternative contact point. Brief details of the illness should be provided to the line manager and individuals should provide an indication of when they are likely to return to work.
5. Following the notification of absence on the first day, the line manager will log onto People Manager and open a sickness absence period for the employee. Where known, the line manager will include the reason for absence and the anticipated return date.
6. The absence period remains 'open' on the system until the employee returns to the office.
7. Managers should try to maintain regular contact with employees, especially if it appears that the individual will be absent for some time. Similarly, employees should also keep in regular contact with their managers during the period of absence.
8. The line manager will meet with the employee at the end of the absence period to conduct the 'return to work' meeting. At the meeting the line manager and employee will confirm the 'sickness absence category' and the absence dates.
9. Following the meeting, the line manager will log onto People Manager to complete and close the sickness absence record. The absence period will calculate and update overnight. The employee will be able to view the absence record via their Employee Self Service (ESS).
10. An entry on the HR System should be completed for each occasion of absence, irrespective of the length of absence and/or whether a doctor's certificate has been submitted.

11. For absences of seven days or less the HR System entry provides a sufficient record. On the eighth day of continuous sickness absence (including weekends) employees should provide their line manager with a GP's Fit Note, to sit alongside the system record.
12. The information provided on fit notes and held in the HR System must be treated in the strictest confidence.
13. Managers are responsible for reminding employees that, if there is a period of absence not reported correctly or covered by a fit note, there may be a loss of entitlement to sick pay. The GLA reserves the right not to accept back dated medical certificates.
14. Where an employee falls sick or is injured while on annual leave, the employee may be granted the same number of days' replacement annual leave as the number of days lost due to sickness or injury, at the absolute discretion of the HR&OD Unit, provided that:
 - The total period of incapacity is fully certificated by a qualified medical practitioner. Where the employee is overseas when they fall ill or is injured, evidence must still be produced that the employee was ill by way of either a medical certificate or proof of a claim on an insurance policy for medical treatment received at the overseas location.
 - The employee contacts their manager (by telephone if possible) as soon as they know that there will be a period of incapacity during annual leave.
 - In these circumstances, the employees annual leave and sickness absence records on the HR system will need to be adjusted manually by the HR&OD unit.

Occupational health service referrals

1. The manager will make the decision to refer an employee to the Occupational Health service, in consultation with the HR&OD Unit. There is no facility for employees to refer themselves to Occupational Health.
2. The role of Occupational Health is to provide impartial medical advice to management on the impact of a clinical condition on an individual's ability to perform their duties. Advice sought will include the prognosis and timescales for recovery, the likelihood of further absence in the future and advice on any recommended adjustments in the workplace.
3. Information provided by Occupational Health will be used by the GLA to make an informed decision about an employee's employment.
4. Before requesting a referral to Occupational Health the manager must explain to the employee why they are being referred.
5. The HR&OD Unit will liaise with Occupational Health to arrange the appointment.
6. As part of the assessment, Occupational Health may need to contact the employee's GP or hospital consultant for further information, subject to the consent of the employee.
7. The Access to Medical Reports Act 1988 allows individuals access to medical reports prepared by a medical practitioner who has responsibility for the care of that individual. Employees will be asked to sign a consent form to allow Occupational Health to approach the employee's GP or consultant for information. The employee has the option under the Access to Medical Reports Act to:
 - a) Withhold their consent;
 - b) To consent to the application for a report but state that they would like to see the report prior to it being sent to the HR&OD Unit.
8. Following the assessment, Occupational Health will send any advice in writing to the HR&OD Unit. A copy will be sent to the employee at the same time. This advice is confidential to the manager, the HR&OD unit and the employee. The advice will not include disclosure of any confidential medical information without the employee's consent.
9. Employees are required to attend appointments with Occupational Health. If an employee refuses or fails to attend an appointment, and is unable to provide an appropriate explanation, this may lead to disciplinary action. It is in the interests of the employee to attend appointments with Occupational Health. This will enable an informed decision to be made regarding an employee's health and their

employment with the GLA. If medical information is not available, the GLA will take action under the sickness absence policy based on such information as is available.

Final formal sickness review procedure

1. The Head of Unit, Assistant Director or Director conducting the review should introduce all parties present and explain the purpose of the review. The Director / Head of Service should ensure that everyone has the documentation that will be referred to at the hearing.
2. The employee's line manager will present the facts of the case.
3. The other parties may question the line manager on the presentation in the following order:
 - the employee or their trade union representative / work colleague
 - the Director / Head of Service
4. The employee will then present their case.
5. The other parties may then question the employee on the presentation, in the following order:
 - the line manager
 - the Head of Unit / Assistant Director / Director
6. The employee or their trade union representative/work colleague will have the opportunity to sum up their presentation, without introducing any new evidence, and the line manager will then have the opportunity to sum up their presentation.
7. The Head of Unit / Assistant Director / Director will then ask both sides to withdraw and will reach a decision on the basis of the evidence presented in the course of the review. The Director / Head of Service may call an adjournment in order to consider the decision more fully.
8. Once a decision has been reached, the Head of Unit, Assistant Director or Director may decide to recall both parties to inform them of the decision. The decision should, in any event, be confirmed in writing to the employee within five working days and copied to the employee's representative and to the line manager.
9. The Head of Unit, Assistant Director or Director may require that other evidence should be produced in order to ensure that all the necessary facts can be considered before making a decision on the case. The Head of Unit, Assistant Director or Director may decide to adjourn the review meeting to allow for this if necessary.

Final formal sickness review - appeal hearing procedure

1. The officer hearing the appeal (referred to as the Appeal Hearing Officer) should introduce all parties present and explain the purpose of the hearing. The Appeal Hearing Officer should ensure that everyone has the documentation that will be referred to at the hearing.
2. The appellant or their trade union representative or work colleague should present the grounds for the appeal.
3. The other parties may then question the appellant on the grounds of appeal in the following order:
 - the original Hearing Officer
 - the Appeal Hearing Officer
4. The Hearing Officer will then respond to the appeal, setting out the justification for their original decision.
5. The other parties will then question the Hearing Officer in the following order:
 - the appellant or their trade union representative / work colleague
 - the Appeal Hearing Officer
6. The Hearing Officer, followed by the appellant will then sum up their respective cases without introducing any new evidence.
7. The Appeal Hearing Officer will then ask both sides to withdraw in order that they can consider their decision.
8. The decision of the Appeal Hearing Officer may be given to the parties verbally after deliberation or later in writing. The decision should, in any event be confirmed in writing to the appellant within five working days and copied to the appellant's representative and to the Hearing Officer.
9. The decision of the Appeal Hearing Officer is final within the GLA's procedures.

Specific provisions for designated staff

1. Formal action against Head of Paid Service (HOPS) appointees managed by Mayoral appointees

- 1.1 Mayoral appointees may undertake informal and formal sickness reviews relating to HOPS appointees in accordance with this procedure, except where the potential outcome is one of dismissal.
- 1.2 When it becomes apparent that dismissal may be an appropriate outcome, the manager will refer the matter to the Executive Director of Resources, who will make arrangements for the final formal sickness review to be dealt with by a HOPS appointee or other appropriate individual instead. In the event of an appeal against dismissal, the hearing officer will also be a HOPS appointee.
- 1.3 Mayoral appointees may give evidence in formal sickness reviews, regardless of the potential outcome, in compliance with this procedure.

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Before subsequent use, check with the document's author.**

Document author	██████████
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1	Original version.	
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5	Minor changes to language to remove gendered terms e.g. he/she and	August 2018

	inclusion of gender identity and gender expression.	
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Recruitment and Selection Policy

1. Introduction

- 1.1 The Authority recognises its staff as being fundamental to its success and is committed to ensuring the staff with the right skills and abilities are employed by the organisation. Appointment of the highest calibre candidates is dependent on effective recruitment and selection processes.
- 1.2 The Authority aims to recruit a workforce at all levels that reflects the rich diversity of London's population. Equality of opportunity is integral to the recruitment process and therefore, it is important to ensure the processes used for recruitment and selection are fair, consistently applied, transparent, objective and efficient.
- 1.3 The Recruitment and Selection policy will cover all aspects of the recruitment process from the revision or development of the job description through to the appointment stage. The policy has been prepared with reference to UK employment legislation and best recruitment practice.
- 1.4 The policy should be read in conjunction with the managers' guidelines on recruitment, the appropriate sections of the Head of Paid Service Staffing Protocol and the Competency Framework and guidelines.
- 1.5 Directors or heads of unit are responsible for ensuring that the recruitment and selection policy are fully implemented in their respective areas.
- 1.6 The Assistant Director, Human Resources and Organisational Development has overall responsibility for reviewing the recruitment and selection policy in conjunction with the Resourcing Manager, managers and Unison.

2. Scope

- 2.1 This policy applies to the recruitment and selection of all staff to the GLA.
- 2.2 It normally applies to all fixed-term, secondment or substantive appointments advertised internally and externally.
- 2.3 Engagement of 'temporary agency workers is covered by the ['Temporary agency workers – manager's guidance'](#).
- 2.4 The appointment of consultants is covered by the Authority's Contracts and Funding code.

3. Principles

- 3.1 All appointment decisions will be made on merit.
- 3.2 The Authority will ensure the recruitment and selection of its staff is conducted in a professional, timely and responsive manner and in compliance with current employment legislation and best recruitment practice.

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- 3.3 The Authority will provide appropriate training and support to those involved in recruitment and selection and panel members must attend the training before participating in recruitment and selection activities.
- 3.4 Recruitment and selection is a key public relations exercise and should enhance the reputation of the authority.
- 3.5 The Authority will adhere to these principles to ensure the best candidates are appointed fairly.

4. Responsibilities

- 4.1 The chair of the panel is responsible for the final selection decision, having taken responsibility to ensure that the recruitment and selection policy has been applied and adhered to.
- 4.2 The manager, in liaison with the recruitment team, is responsible for preparing and agreeing a recruitment plan ahead of each campaign. Particular attention should be paid to the timescales and responsibilities contained within the managers' guidelines.
- 4.3 The Head of HR is responsible for the advertising budget and will ensure that the choice of advertising media represents value for money.
- 4.4 The resourcing team are responsible for managing the recruitment and selection process in line with the recruitment plan agreed with the manager.

5. Preparation

- 5.1 To commence the recruitment process the manager must seek authorisation by completing an 'approval to fill a vacant post' form or a Short Term Assignment Form and forwarding a signed copy to the recruitment team.
- 5.2 To ensure the most transparent and effective recruitment process, the recruiting line manager must ensure adequate preparation takes place before the advertisement is placed. This includes, ensuring that the job description and person specification are accurate, evaluated and the necessary steps are taken to plan the selection process and timescales for each stage of recruitment.

6. Documentation

- 6.1 All stages of the selection process will be documented. This will require records of selection decisions at shortlist and interview stages and will include clear reasons for rejecting the applicants at each stage.
- 6.2 Completed documentation must be returned to the recruitment team following each stage of the process. In line with the Data Protection Act (1998), the Authority is committed to ensuring any personal information collated during the

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recruitment process remains confidential and is only referred to for recruitment related purposes.

6.3 The Authority's policy for retaining recruitment documentation, including personal information, monitoring forms, interview notes and test scores is as follows:

- The application form of appointed candidates will be retained on the employee's personal file
- The appointed candidates interview notes and test scores will be held on the central recruitment file for a period of 6 months.
- The application forms, interview notes and test scores of those candidates who were not appointed will be held on file for a period of 6 months from the interview date. At 6 months, all information relating to the non-successful candidates will be removed from the Authority's files.

7. Advertisements

- 7.1 Normally vacancies will be advertised internally first to provide staff with development opportunities. If there is evidence that the skills and experience required are not available in-house, then the post will be advertised internally and externally at the same time.
- 7.2 The principles of advertising posts will be subject to the organisational position at any given time.
- 7.3 Internal vacancies will normally have a minimum advertising period of one week.
- 7.4 Internal vacancies are advertised through London@Work and the intranet for eligible Authority staff to apply or through the GLA Group secondment scheme to widen the potential pool of applicants. If no appointment is made via the internal recruitment process, then the post can be advertised externally.
- 7.5 Online recruitment websites are the Authority's main approach to advertising.
- 7.6 External vacancies will normally have a minimum advertising period of two weeks. Vacancies will be advertised externally via the Authority's vacancy page and other online recruitment sites.
- 7.7 The recruitment team will advise managers on advertising options for each campaign, ensuring the most cost effective solutions for attracting a suitable pool of candidates. One of the characteristics of a suitable pool of candidates is one which is ethnically and gender diverse. HR may make additional efforts to attract suitable candidates if the initial application pool is not sufficiently diverse.
- 7.8 All adverts will include a flexible hiring statement to promote the GLA's inclusive approach to working flexible working, unless a business case is provided clearly outlining why the role cannot offer flexible working options.

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- 7.9 Adverts with national and local press or specialist trade publications will only be considered for senior level roles, posts that are difficult to fill or for large or targeted campaigns, subject to a business case from the recruiting manager.

8. Selection

- 8.1 For all vacancies, the selection process will consist of short-listing and interview as a minimum. The manager may also decide to include a test exercise as part of the interview process or as a long-list method, if a large number of high quality applicants have applied.
- 8.1 All selection exercises will be against the criteria outlined in the job description and person specification, which includes technical experience, skills, qualifications and behavioural competencies. The process must be evidence-based and candidates asked to demonstrate their relevant skills, competencies, experience and qualifications to perform the role as outlined in the person specification.
- 8.2 Short-listing must be undertaken by at least two people who are involved in the interview process. Interviews for substantive vacancies must be conducted by a panel of at least three people and interviews for fixed-term contracts or secondments, a panel of at least two people. Panel members must have attended the Authority's recruitment and selection training course. Wherever possible, the panel should be representative.
- 8.3 All selection decisions must be based on merit, against the person specification and recorded. Each member of the interview panel will be responsible for independently scoring each candidate against the selection criteria before an objective discussion by the panel is taken to reach an appointment decision.

9. Offers of Employment

- 9.1 Once a decision has been made, recorded and documented and the manager has confirmed with the recruitment team that the applicant has provided proof of eligibility to work in the UK, an offer of employment may be made. The offer will be made in line with the pay and grading rules and will be subject to the applicant satisfactorily completing all of the required pre-employment checks as set out in section 11.

10. Feedback

- 10.1 The panel are responsible for ensuring all candidates are notified of the interview outcome and for providing each interviewed candidate with feedback within a reasonable timeframe.
- 10.2 All feedback should be provided verbally over the telephone (or in person for internal candidates). If a candidate requests for their feedback in writing, the panel should contact a member of the recruitment team before this is provided.

11. Pre-employment clearances

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- 11.1. The pre-employment clearances outlined in this section need to be satisfactory to the GLA before the appointment can be confirmed and a start date letter issued. The HR team, where necessary, may take additional steps to address any adverse information (see 11.8)
- 11.2. Eligibility of Employment
All shortlisted candidates will be asked to provide proof of eligibility of employment to the recruitment team when they attend their interview. The recruitment team holds a comprehensive list of documents that may be accepted as proof of eligibility of employment.
- 11.3. References
In order to ensure an effective and robust selection process, two written references are to be obtained before the contract of employment is confirmed. Where possible, both references should be from previous employers (one being from the current or most recent employer). The human resources group will request references, once an offer has been made.
- 11.4. Qualifications
Some Authority posts require specific academic or professional qualifications in order to perform the duties of the post. If a qualification is a requirement of the role, shortlisted candidates will be asked to provide proof of qualifications to the recruitment team when they attend their interview.
- 11.5. Occupational Health Screening
Prospective employees will be required to complete a health questionnaire and, in some cases, attend an occupational health interview and receive medical clearance before they start as part of the pre-employment process. This will ensure that the candidate is fit to perform the duties effectively and ensure that obligations under health and safety legislation are met.
- 11.6. Unspent criminal convictions, cautions or bind-overs (self-declaration)
Applicants complete a self-declaration form, which provides details of criminal convictions, cautions, or bind-over orders that are not spent. This information is not available to selection panel and only at conditional offer stage, the HR team review the information provided in this section.
- 11.7. Criminal Records Checks
Some Authority posts require a criminal record check to be obtained because the post holder will be required to work with children and/or young people as part of their duties. Prospective employees must not commence employment with the Authority unless a criminal record check has been returned from the Disclosure and Barring Scheme (DBS) granting clearance for the individual to begin employment with the Authority.
- 11.8. Steps to address any adverse information provided as part of the pre-employment checks may include:
- Contacting the candidate to clarify information provided in the application form (and verifying it when necessary);
 - Referral to Occupational Health;
 - Validating referee details;

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- Contacting an academic/professional institution to prove necessary level of qualification is met in the absence of a formal certificate
- Requesting explanations for, and evidence relating to, significant gaps in recent employment; and
- Gathering more information on any unspent convictions and whether the nature/severity of the offence will pose any risk (whether reputational or otherwise) to the GLA, or impacts on the role for which they have applied.

If it is a condition of the role to hold DBS clearance and this clearance fails, it is highly likely the offer will be withdrawn.

12. Monitoring

- 12.1 All applicants will complete an application form, which includes a separate equal opportunities monitoring form. The monitoring form is removed from the application prior to the short-listing stage and is only seen by the recruitment team.
- 12.2 The information collated from the monitoring forms will be used for monitoring purposes only and to assess the Authority's performance against diversity targets and equal opportunities policy. Monitoring reports will be produced by the resourcing manager on a quarterly basis and shared with directors and heads of service.
- 12.3 The shortlist and interview panels will be provided with anonymised reports of candidates applying for and being shortlisted by ethnicity, gender and disability. The panels should use the reports to satisfy themselves that, where possible, the applicant pool is representative of London's diverse community.

13. Equal opportunities and diversity

- 13.1 The HR group carry out a range of activities aimed at attracting and recruiting applicants from a wide range of minority groups. These activities include:
- Delivering 'get a job' workshops for charities and organisations representing minority groups.
 - Where possible, aim to provide representative selection panels.
 - Guaranteed Interview Scheme
 - Targeted campaigns to attract widest pool of applicants
 - Provide 'name-blind' applications to shortlist panels.
- 13.2 This policy recognises the importance of ensuring applications are ethnically and gender diverse, which is why additional efforts to attract suitable candidates may be made in certain circumstances if the application pool is not sufficiently diverse.
- 13.3 It is also important that the shortlisted candidates are as diverse as possible and selection panels are asked to consider this before finalising any shortlist.
- 13.4 The Authority operates a guaranteed interview scheme for disabled candidates. Those candidates who demonstrate 'acceptable performance' against the

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requirements outlined in the person specification will be guaranteed an interview. More information about the guaranteed interview scheme is available on the intranet.

- 13.5 Reasonable adjustments must be made to the selection process and/or workplace to enable disabled individuals to participate in the recruitment and selection process on an equal basis, obtain, and remain in work.

14. Complaints

- 14.1 Applicants who feels they have been treated unfairly or that the principles of this policy have been breached can make a complaint to the resourcing manager. If resolution is not reached, the complaint will be dealt with through the Authority's complaints procedure, or if more appropriate, the GLA Grievance Procedure.

Document author	██████████ (Resourcing Manager)
Issue no.	2
Date of release	October 2017
Next review date	October 2021
Status	Live

Assessment No:

RISK ASSESSMENT

Organisation	Greater London Authority	Date prepared	15/2/2018
Address	City Hall, The Queen's Walk, London, SE1 2AA	Review date	
Assessors name			
Position	Health & Communities	Tel	020 7983 [redacted]

Work area being assessed	Communities & Intelligence	Describe in more detail what goes on there	This covers the following teams: • Health, Education & Youth • Intelligence • Culture • Team London & Sport • Communities & Intelligence
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Manager's declaration (not to be signed off until risk assessment is completed)

Signature of Assessor:

Name (printed):

Date: 27.02.18

Directorate:

Signature of Director:

Name (printed): Jeff Jacobs

Date: 8.3.18

Signature of the Chair of the Management Health and Safety Committee:

Name (printed): Martin Clarke

Date: 15.3.18

RISK ASSESSMENT

STEP 1 – How can people get hurt? Use this list as a check and add other items, unique to your work area, if necessary. Step back and consider any other hazards and involve managers and staff in deciding what is to be included.

HAZARDS

1. Access / egress (obstructions?)	11. Hand tools	21. Slipping, tripping, falling	How else can people get hurt (specify below)
2. Asbestos	12. Hazardous substance exposure	22. Special needs e.g. pregnancy, elderly, disabled and young persons	
3. Compressed gases (storage and use)	13. Working at height (including ladders, scaffolding)	23. Violence (attack and public disorder)	
4. Confined spaces	14. Lighting	24. Welfare issues	
5. Display screen equipment (DSE)	15. Lone working	25. Working environment (including temporary workplaces)	
6. Electricity (including portable appliances)	16. Manual handling	26. Working patterns / work organisation	
7. Emergency procedures – fire safety, first aid	17. Noise exposure (including equipment, headphones)	27. Stress	
8. Fire (building aspects)	18. Office equipment (e.g. photocopiers, shredders)	28. External events organised by the GLA	
9. Flammable materials	19. Air quality		
10. Food hygiene	20. Radiation (RF, microwaves)		

Groups at particular risk:

The presence of any of the following groups will affect the level of risk associated with the hazards you have identified above. Indicate all the groups relevant to this risk assessment.

Children (including unauthorised access)	✓	Contractors / sub-contractors	✓
Pregnant women and nursing mothers	✓	Individuals with disabilities or medical conditions	✓
New employees	✓	Members of the public	
Young, inexperienced workers	✓		

RISK ASSESSMENT

Assessment No:

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Display screen equipment (DSE)	Staff – bad posture causing limb disorders, RSI, eye strain or stress	- All staff to complete on-line H&S e-module - Advice from C&I H&S co-ordinators - Individuals can be referred to occupational health for further assessment - Staff asked to complete DSE self assessments every 3 years - H&S bulletins include information on DSE good practice	Low (S2, L3)	Advice from C&I H&S co-ordinators DSE forms to be completed by all new starters Updated DSE forms every 3 years Ad hoc advertising of H&S disciplines
Electricity (including portable appliances)	Staff – electric shocks, burns or explosion	Ensure all GLA owned equipment is purchased by TG and routinely PAT tested to ensure it is fit for purpose All faults with electrical equipment to be reported to FM helpdesk immediately	Low (S2, L2)	Related through communication in London@work for staff awareness Annual checks of all GLA electrical equipment

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Emergency procedures – fire safety, first aid	Staff, external visitors and the general public Fire Injury, loss of life caused by fire or other threatening conditions First aid Bomb, flood, fire arms	All staff to attend mandatory security briefing led by FM. H&S co-ordinators to ensure staff are aware of evacuation procedures. Fire wardens assigned to each floor Staff in all areas can hear the fire alarm Weekly fire alarm testing 1 Evacuation per annum Adequate first aid equipment on each floor Staff aware of how to access first aid treatment All staff aware of emergency procedures including fire assembly points (Potter's Fields) and fire action procedure located on landing of stairs First aiders trained and updated lists held by FM/Security Restricted access to danger areas Refresher training for fire wardens	Low (S3, L2)	Firefighting equipment available and staff aware of its location Conduct random H&S inspections Fire doors to be kept closed and free from obstruction
Food hygiene	Staff Poor hygiene around desk/tea point areas	Desks cleared very night and food put away in the fridge Food not to be stored in pedestals or in or around the work areas Be considerate of food smells	Low (S2, L2)	Desk areas to be cleared every night and food put away in the fridge Keep hygiene as high profile item in team/manager meeting
Hazardous substance exposure	Staff Exposure to possible excess of ozone emitted Exposure to toner spills	Where possible place equipment in a separate room away from staff Ensure staff know how to dispose of used/empty printer cartridges/batteries etc	Low (S2, L2)	Toner to be changed by ICT staff

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk* High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Long working	Staff Officers working alone. Unable to call for help in the event of an accident or injury	Security staff patrol the building out of office hours Sign in/sign out by the security office during out of office hours	Low (S2, L2)	Staff should make it known to managers about their whereabouts off site and stay in contact with the office
Manual handling	Staff Poor handling techniques which cause work related musculoskeletal disorders through lifting boxes, moving furniture or repetitive filling	Eliminate the need for office staff to move heavy loads – ask FM to book porters Introduce handling aids such as safety stools, trolleys Train staff in handling and storing loads safely Assess appropriate storage arrangements such as shelving heights to meet specific loads Manual handling training can be provided if required	Low (S2, L2)	Contact porters to move heavy items Introduce handling aids such as trolleys Assess storage arrangements are adequate for items stored (height and weight)
Noise exposure (including equipment, headphones)	All groups Noise from equipment can cause noise pollution	Ensure noisy equipment not stored by staff, close the door to create a barrier Staff should wear headphones when they need to access internet broadcasts	Low (S2, L2)	Remind staff through bulletins to respect their colleagues around them by keeping the noise levels down
Office equipment (e.g. photocopiers, shredders)	Staff Injury from equipment caused by sharp edges (shredders etc), moving parts or incorrect use. Failure to maintain equipment to specified standards resulting in failure of electrical/mechanical integrity	All guards on equipment must be kept in place and maintained Only staff trained in the safe use of equipment should be allowed to operate it Maintenance service agreements with competent contractors to be in place	Low (S2, L2)	All guards around machines to be kept in place Machines maintained on a regular basis Staff to be aware machines are hot internally before un-jamming

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk' High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Slipping, tripping, falling	Staff/external visitors/public Spillages, trip hazards, working above head height	Keep floors and gangways clear at all times. Ensure loose wires under desks are kept tidy – check during H&S inspections. Do not allow staff to have medium to heavy boxes higher than head height. Ensure all staff know who to report accidents and where accident book is kept Staff instructed not to leave desk draws open or to climb onto furniture to reach high shelves – use correct stools Spills, especially on shiny floor surfaces, to be protected until they are mopped and dried Staff informed of hazards of running in the workplace	Low (S3, L2)	Keep walk ways clear of obstruction or trailing cables Ensure loose wires under desks are tidied by TG (through inspections) Do not stack boxes higher than 4ft Ensure all staff know how and where to report an accident Close all filing cabinets and pedestal doors/draws Use correct stools to stand on Highlight dangers of running in the workspace

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Violence (attack and public disorder)	GLA staff and the public are vulnerable to verbal and physical attack from the general public	Permanent security presence at City Hall Security staff complete bag search on all bags of external visitors and pass through detector Every member of staff to wear their staff passes whilst in the building Security patrol the building regularly Reception to be informed of external visitors by GLA staff in advance of arrival Visitors to report to reception and obtain guest pass which must be displayed at all times	Low (S3, L2)	Ensure security is present at all times during public open hours Reception to be informed of all external visitors by GLA in advance of arrival Random security and bag search for staff
Special needs e.g. pregnancy, elderly, disabled and young persons	Working environment becoming unsuitable due to advancement of pregnancy Standard workstation/workplace layout may introduce unnecessary restrictions on some disabled persons Some disabled persons may be more susceptible to certain risks e.g. those with diminished sight may be more susceptible to bumping into or tripping over hazards Emergency evacuation procedures may be disrupted Slower response to emergency situations Eyesight, hearing and perception of danger lower in the elderly.	City Hall is a fully accessible building Re-assess DSE assessment during the later stages of pregnancy or upon request by an individual Carry out specific assessments of workstations. Consider what the person can do rather than what the person cannot do. Carry out specific young workers risk assessment for members of staff under the age of 18 Consider asking a member of staff to look out for the needs of the disabled especially in the case of emergency evacuation or skills. Ensure all gangways are kept clear of tripping hazards	Low (S2, L2)	H&S reps and fire wardens to take responsibility in ensuring all wardens have a strategic plan amongst themselves to clear their floor quickly and efficiently as well as being able to deal with any special needs for staff or external visitors.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Working environment (including temporary workplaces)	Staff Untidy working environment may lead to unsafe and risky incidents, such as fire hazards and pest infestations Staffing feeling displaced after restructures and through hot-desking. No connected support work.	Inspection walks to identify problem areas and staff emailed to request compliance Staff reminded to keep food stored in heavy duty containers and not to leave food out overnight Lack of motivation can lead to stress, which can lead to time off or even depression	Low (S2, L2)	Ensure staff are aware of the wellbeing network that can advise and assist with well being in the work place Random Inspections to identify areas not in compliance. Relevant managers/staff informed.
External events organised by the GLA	All people at risk during conference e.g. speakers, delegates by trip hazards, blocked fire exits etc.	All delegates informed of location of fire exits and escape routes. Risk assessments completed prior to the event as part of the planning process and complete safety checklist before event.	Medium (S3, L3)	Ensure all staff know there are risk assessments and procedures for external events to reduce the risk of harm to staff, participants and audience.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk* High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
Stress	Staff	Sickness is monitored and managers are aware of the process that they need to use if they feel that further action/support is needed. Ensure all staff are aware of the employee assistance programme During periods of change several approaches are in place: - Wellbeing training for managers and staff - Employee assistance programme - Additional support, advice and information is available from HR	Medium (S3, L3)	Sickness is monitored and managers are aware of the process that they need to use if they feel that further support is required. Make staff aware the employee assistance programme is a confidential advice centre which is a free resource for GLA staff.
Working patterns / work organisation	Staff Working out of office hours or working offsite Accidents or emergencies arising out of the work and the lack of first aid equipment Fire Inadequate provision of rest, hygiene and welfare facilities Violence from members of the public	Lone working procedure policy on the GLA Intranet	Low (S2, L2)	If staff work off site alone, managers need to alert them to the LWP on the intranet. Up-to-date contact numbers are maintained

Assessment No:

RISK ASSESSMENT

STEP 3 – Action plan – give details of actions to be taken that will reduce risks to health and safety.

Describe as fully as possible the action to be taken	Who is responsible for ensuring the action is carried out?	Date by which action is to be completed	Confirmation that required action has been completed (Signature of person responsible for ensuring action completed and date)
DSE to be completed by all new starters and reviewed by H&S co-ordinator	Line Managers/ H&S co-ordinator	Within 1 week of starting	
First aid procedures to be included in emails to staff. First aid box checked on H&S inspection walks	H&S co-ordinator	ongoing	
New staff to be escorted on a walk-around the building, highlighting evacuation routes, gathering points etc.	H&S co-ordinator	ongoing	
All staff to completed e-learning H&S module	H&S co-ordinator	ongoing	
Line managers to attend classroom-based training	H&S co-ordinator	ongoing	
Conduct H&S workarounds to identify potential risks etc	H&S co-ordinator/ C&I director	ongoing	

Assessment No:

RISK ASSESSMENT

Table 1 Classification of risk

Risk analysis / Priority of action matrix

SEVERITY	LIKELIHOOD				
	1 Very Unlikely (Isolated event - no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (For feasible under unusual circumstances)	4 Likely (Easily foreseeable - odd incident may have occurred)	5 Very Likely (Common occurrence - aware of incidents)
1 Negligible (No visible injury - no pain)	Low	Low	Low	Low	Low
2 Slight (Minor cuts, bruises - no long term effects)	Low	Low	Low	Medium	Medium
3 Moderate (Heavy bruising, deep flesh wound. Lost time accident)	Low	Low	Medium	High	High
4 Severe (Lost time accidents and major injuries)	Low	Medium	High	High	High
5 Very Severe (Long term disability or death)	Low	Medium	High	High	High

Distribution of completed assessment

Employees			Others (e.g. Contractors)	
Name	Job Title	Work Area	Company Name	Contact Name
	Senior Co-Ordinator	Health & Communities		

RISK ASSESSMENT

Company Name	Greater London Authority	Date Prepared	November 2016
Address	City Hall, The Queen's Walk, London, SE1 2AA	Review Date	December 2017
Assessors Name	[REDACTED]		
Position	H & S Coordinator (Environment)	Tel	020 7983 [REDACTED]

Work Area Being Assessed	DE&E Area 4 th Floor	Describe in more detail what goes on there:	This assessment considers only the foreseeable hazards and resulting risks associated with the general operation of the DE&E Division on 4 th floor
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Manager's Declaration (Not to be Signed Off Until Risk assessment is Completed)

Signature of Assessor: [REDACTED] Name (printed) [REDACTED] Date November 2016

Department/Location DE&E Directorate Tel/email [REDACTED]

THE MANAGER SHOULD NOW DELETE ONE OF THE FOLLOWING AND SIGN THE FORM

ACCEPTANCE: The activity may continue but any additional control measures identified that will further reduce the risk will be included in a Departmental Action Plan.

PROHIBITION: I am not satisfied that the risk(s) identified are acceptable without additional control measures being in place. I have therefore taken action to prevent the activity continuing.

Signature of Manager [REDACTED] Name (printed) FRANK FLETCHER Date 9/12/16

Department/Location DE&E Tel/email [REDACTED]

Departmental Action Plans should specify WHAT actions need to be taken, by WHOM and by WHAT DATE

RISK ASSESSMENT

STEP 1 –How can people get hurt? Use this list as a check and add other items, unique to your work area, if necessary. Step back and consider any other Hazards! Involve the managers, staff and where necessary the safety professionals, in deciding what is to be included.

HAZARDS

1. Access/Egress (Obstructions?)	11. Hand Tools	21. Slipping, Tripping, Falling	X	How Else Can People Get Hurt (specify below)
2. Asbestos	12. Hazardous Substance Exposure	22. Special Needs eg pregnancy, elderly, disabled and young persons	X	
3. Compressed Gases (Storage and Use)	13. Heights (inc ladders, scaffolding)	23. Violence (attack and public disorder)	X	
4. Confined Spaces	14. Lighting	24. Welfare Issues	X	
5. Display Screen Equipment (DSE)	X 15. Lone Working	25. Working Environment (inc Temporary Workplaces)	X	
6. Electricity (inc. Portable appliances)	X 16. Manual Handling	26. Working Patterns / Work organisation		
7. Emergency Procedures – fire safety, first aid	X 17. Noise Exposure (inc Equipment, Headphones)	27. Stress	X	
8. Fire (Building Aspects)	18. Office Equipment (e.g. Photocopiers, Shredders)	28. External events organised by GLA	X	
9. Flammable Materials	19. Air Quality	29.		
10. Food Hygiene	20. Radiation (RF, Microwaves)	30.		

Groups at Particular Risk:

The presence of any of the following groups will affect the level of risk associated with the hazards you have identified above. Indicate all the groups relevant to this risk assessment.

Children (inc unauthorised access)	Contractors / Sub-contractors / Staff from Other Departments	
Pregnant Women and Nursing Mothers	X Individuals with disabilities or medical conditions	X
New Employees	X Members of the Public (visitors)	X
Young, Inexperienced Workers	X	

RISK ASSESSMENT

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
5. Use of Display Screen equipment	Staff Adopting poor posture causing discomfort and/or muscle strain, possibly leading to work related upper limb disorders. Eye strain and or stress. The above hazards can be exacerbated by the extended use of portable computers (laptops).	Advice available from H&S Coordinator and referrals via HR to occupational health specialists. H & S Induction offered to all staff. Details of DSE workplace assessment given. Staff asked to complete DSE Self Assessments every 6 years or when they move desk or install a significant piece of equipment.	Medium (S3, L3)	Yes: Continual awareness programme via newsletters and periodic updated DSE workplace assessments.
6. Use of Electricity	Staff Exposure to shock, burns or explosion.	Ensure all equipment purchased is via an approved supplier and fit for purpose. All equipment is subject to an electrical test (PAT) prior to use and labelled to that effect. (November 2016) Electrical equipment is subjected to regular pre use visual inspection by user and during office inspection. (Look for frayed cables, damage or scorch marks). Staff instructed not to bring electrical equipment into the workplace without prior management agreement. Again this equipment to be tested for electrical/mechanical safety.	Medium (S3, L2)	No

7. Emergency procedures	All groups of people affected Fire Injury/loss of life caused by fire or other life threatening situations, eg bombs.	Fire wardens appointed and identified in induction document and intranet pages. Fire wardens update training as requested by FM. Adequate fire fighting equipment available and staff aware of its location, but advised not to use unless actual danger to life. All staff in all working areas can hear fire alarms. All staff aware of emergency evacuation procedures including fire assembly points (Potters Field) and fire action procedure located on landing of staircases at induction. Fire Drills have taken place at specified frequency. Fire doors to be kept closed, free from obstructions and not wedged open. Fire alarm tested every Friday. Mandatory attendance of Security Briefings (dates supplied on bulletin). H&S Rep (PC) has attended update session with security in October 2016 First Aiders available via Security. They will also arrange external evacuation if necessary. Adequate first aid equipment available – first aid boxes available at tea points.	Medium (S4, L2)	Yes: First Aid box to be checked regularly. First Aid procedures and Fire Wardens to be included in bi-annual H&S Bulletins. Security Briefing dates supplied on Newsletter
14. Lighting levels	Staff Inadequate levels of lighting lead to eyestrain or staff failing to see obstructions resulting in tripping over or bumping into items. Excessive levels of lighting may cause glare with similar results to above.	Lighting levels must be adequate for the task. If in doubt seek professional advice. Beware of sudden dramatic changes in lighting levels as this can result in temporary loss of visual perception. FM are able to reduce light if necessary and requested.	Low (S2, L2)	No
15. Lone Working	Staff Officers working alone. Unable to call for help in the event of an accident/injury.	Security staff undertake periodic walk-around out of office hours. Sign in/out when not during office hours.	Low (S2, L2)	No

16. Manual Handling	Staff Poor handling techniques leading to injury. Consider activities such as: Moving boxes of leaflets, moving publications, setting up and stacking of archive boxes. Repetitive filing. Movement of furniture.	Eliminate the need for office staff to move at risk loads – ask porters who have been trained. Assess appropriate storage arrangements such as shelving heights to meet specific loads.	Medium (S3, L3)	Yes: All staff to at least attend basic H&S training, staff reminded to book themselves on a course in bi-annual bulletin and via introductory email.
18. Office Equipment General	Staff Injury from equipment caused by sharp edges, (shredders etc) moving parts or incorrect use. Failure to maintain equipment to specified standards resulting in failure of electrical/mechanical integrity.	All guards on equipment must be kept in place and maintained. Only staff trained in the safe use the equipment should be allowed to operate it. Maintenance service agreements with competent contractors to be in place.	Low (S2, L2)	No
19. Air Quality eg working in high/low temperatures and poor humidity	Staff Working in excessively high temperatures leading to increased fatigue and loss of concentration resulting in working errors. High humidity levels lead to staff discomfort such as high perspiration levels. Working in low temperatures leading to loss of manual dexterity resulting in working errors. Low humidity levels leads to staff discomfort such as dry eyes and lips.	AC office to regulate temperature and maintain a comfortable office temperature. Access to drinking water. Provision of extract fans in toilets and shower rooms, where applicable.	Low (S2, L2)	No
21. Slipping, tripping and falling	All groups of people affected Slipping, tripping and falling by all types of people whilst in City Hall.	Floors (in particular gangways stairs and steps) maintained in good condition free from tom carpets, loose mats, trailing cables or loose paper/plastic sheets. Staff instructed not to leave desk draws open or to climb onto furniture to reach high shelves – use correct stools. Spills, especially on shiny floor surfaces to be protected until they are mopped up and dry. Staff informed of hazards of running in the workplace.	Medium (S3, L3)	Yes: A check for slipp and trip hazards can be incorporated into the H&S walk around.

<u>22. Special Needs</u> Pregnancy People with Disabilities The very old or young	Groups of people with special needs i.e. pregnant women, people with disabilities, the very old or very young. Working environment becoming unsuitable due to advancement of pregnancy. Standard workstations/workplace layout may introduce unnecessary restrictions on some disabled persons. Some disabled persons may be more susceptible to certain risks e.g. those with diminished sight may be more susceptible to bumping into or tripping hazards. Emergency evacuations procedures may be disrupted. Provide suitable access into building for visitors with disability. Unpredictable actions in the young emergency situations may seem exciting not as a danger. Slower response to emergency situations. Eyesight, hearing and perception of danger lower in the elderly.	City Hall is a fully accessible building. Re-assess DSE assessment and general assessment covering other work activities during later stages of pregnancy or on request of individual. Carry out specific assessments of workstations/workplace layout. Consider what the person can do rather than what the person can not do. Carry out specific young workers risk assessment for members of staff under the age of 18. Consider asking a member of staff to 'look out for' the needs of the disabled especially in case of emergency evacuation or drills. Where the elderly are present consider allocating someone to take responsibility in case of emergency. Again ensure all gangways are kept clear of tripping hazards.	Low (S2, L2)	No
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23. Violence (verbal and physical attack and public disorder)	GLA staff and the public vulnerable to verbal and physical attack from the general public.	Permanent security presence at City Hall. Security staff complete bag search on all bags of visitors. Every member of staff are to show their GLA staff badges to Security staff on arrival at City Hall. Security complete tour of building every ten minutes to increase presence. Reception staff are to be informed of visitors by GLA staff in advance. Visitors are to report to both receptions to sign in and obtain 'visitors badge' for that day and return badge at end of day.	Low (S2, L2)	No
24. Welfare Facilities eg toilets, food preparation	Staff Poor and unhygienic work surfaces. No cleaning regime in place for fridge's microwaves.	Cleaners employed and cleaning programmes in place.	Low (S2, L2)	No
25. Working Environment	Staff Untidy working environment may lead to unsafe and risky incidents, such as fire hazards and pest infestations. Mouse problem in building Hot desking issues leading to stress for staff.	Quarterly walks to pick up extreme untidiness and report emailed to staff requesting compliance. Staff reminded to keep food stored in containers and not to leave food out overnight via induction document and quarterly newsletters. Direct requests to FM for cleaners to sanitise areas showing any form of infestation. Continuing highlighting of problem at FM meetings.	Low (S2, L2)	No

27. Stress	Staff	Sickness is monitored and managers are aware of the process that they need to use if they feel that further action/support is needed. Stress policy available for staff online via "Be supported online portal. Wellness group have specific actions on this area via the mental health sub-committee – H&S rep is on this team.	Medium (S3 L4)	No
28. External Events eg GLA staff organising conferences	All people at risk during conference eg speakers, delegates by trip hazards, blocked fire exits etc.	Delegates informed of location of fire exits, escape routes and emergency assembly point through hotel contact. Compulsory risk assessment completed prior to event as part of planning process and complete safety checklist before event starts.	Medium (S3, L3)	No

RISK ASSESSMENT

STEP 3 – Action Plan – Give details of actions to be taken that will reduce risks to health and safety.

Describe as fully as possible the action to be taken	WHO is responsible for ensuring the action is carried out?	Date by which Action is to be completed	Confirmation that required Action has been completed (Signature of person responsible for ensuring action completed & Date)
5. All staff to complete a DSE assessment these will be held centrally. Forms to be reviewed and staff updated on any common issues.	H&S Coordinator, team representatives and managers Members of staff	Ongoing Email to team representatives sent in August 15 for training matrix update	These are updated for each quarterly corporate meeting and submitted to FM by [REDACTED] (H&S coordinator)
7. First Aid procedures to be included in Induction Document and bi-annual Newsletter, First Aid box checked regularly	H&S Coordinator, team representatives and managers	Ongoing H&S induction document updated August and to be circulated to team reps at Sept meeting	[REDACTED] to circulate to team reps for forwarding to all teams due January 2016
16. Staff who have not undertaken basic induction training in electrical safety, manual handling etc. should attend as appropriate.	Line Managers Individuals	Ongoing On induction document and bi-annual newsletter, staff recommended to utilise porter staff who have had the necessary training.	Managers responsibility, also noted by [REDACTED] in newsletter – September 2015
21. During the health and safety walk around, identification of slip and trip hazards to be included.	Directorate Management (coordinated by H&S representative) Individuals to report	Ongoing Next walkabout to be scheduled by CMT support for FFS in 2016	[REDACTED] to arrange walkabout with Fiona Fletcher Smith and [REDACTED] January 2016

27. Stress.	Managers/ Human Resources Members of team and individual	Ongoing Available resource highlighted in induction and newsletter and to be agenda item at next reps meeting. PC has attended Resilience training.	Be supported and resilience training highlighted in Newsletter from [REDACTED] September 2015

RISK ASSESSMENT

Table 1 Classification of Risk

Risk Analysis/Priority of Action Matrix

SEVERITY	LIKELIHOOD				
	1 Very Unlikely (fresh event - no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (Foreseeable under unusual circumstances)	4 Likely (Easily foreseeable - odd incident may have occurred)	5 Very Likely (Common occurrence - aware of incidents)
1 Negligible (No visible injury - no pain)	Low	Low	Low	Low	Low
2 Slight (Minor cuts, bruises - no long term effects)	Low	Low	Low	Medium	Medium
3 Moderate (Heavy bruising, deep flesh wound. Lost time accident)	Low	Low	Medium	High	High
4 Severe (Lost time accidents and major injuries)	Low	Medium	High	High	High
5 Very Severe (Long term disability or death)	Low	Medium	High	High	High

Distribution of Completed Assessment

[illegible]

RISK ASSESSMENT		Assessment No: #06122017	
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Organisation	External Affairs Directorate – 5 th Floor, Greater London Authority			Date prepared	December 2017
Address	City Hall, The Queen's Walk, London, SE1 2AA			Review date	
Assessors name				July 2018	
Position	H&S Co-ordinator			Tel	

Work area being assessed	External Affairs Directorate	Describe in more detail what goes on there	The External Affairs Directorate is responsible for communicating and promoting the Mayor's strategies and policies and the work of the Greater London Authority
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Manager's declaration (not to be signed off until risk assessment is completed)			
Signature of Assessor:		Name (printed):	
Directorate:	External Affairs	Date:	
Signature of Director:		Name (printed):	Emma Strain
Signature of the Chair of the Management Health and Safety Committee:		Name (printed):	Martin Clarke
		Date:	11.1.18

Assessment No:
#06122017

RISK ASSESSMENT

Address	External Affairs Directorate – 5 th Floor, City Hall		Date Prepared	December 2017
Assessors Name	[REDACTED]		Review Date	July 2018
Position	Business Support Co-ordinator /H&S Co-ordinator		Tel	[REDACTED]

Work Area / Activity Being Assessed	External Affairs Directorate	Describe in more detail what goes on there / what is involved:	The External Affairs Directorate is responsible for communicating and promoting the Mayor's strategies and policies and the work of the Greater London Authority.
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Manager's Declaration: ~~Not to be signed OFFICIAL Risk assessment is Completed~~

Signature of Assessor

Name (printed)

Date ...December 2017

Tel/email

THE MANAGER SHOULD NOW DELETE ONE OF THE FOLLOWING AND SIGN THE FORM

ACCEPTANCE: The activity may continue but any additional control measures identified that will further reduce the risk will be included in a Departmental Action Plan.

PROHIBITION: I am not satisfied that the risk(s) identified are acceptable without additional control measures being in place. I have therefore taken action to prevent the activity continuing.

Signature of Manager

Name (printed) Emma Strain

Date 19 December

Tel/email

4166

Departmental Action Plans should specify WHAT actions need to be taken, by WHOM and by WHAT DATE



RISK ASSESSMENT

Assessment No:

STEP 1

— Who could get hurt and how? Use this checklist to identify hazards present. Step back and consider any other Hazards unique to your work area and add them to the list. Involve the managers, staff and where necessary the safety professionals, in deciding what is to be included.

Record all the groups of people who could be harmed by each hazard by inserting the appropriate abbreviation from the list below in the box adjacent to the hazard.

REMEMBER — The presence of groups such as children, members of the public, inexperienced workers, etc could increase the level of risk and additional control measures may be necessary

General		Groups at Particular Risk			
Employees	E	Children (inc unauthorised access)	C	Contractors / Sub-contractors / Staff from other Depts	CO
All (i.e. — everyone on the premises, inc visitors, etc)	ALL	Pregnant Workers & Nursing Mothers	P	Individuals with Disabilities or Medical Conditions	D
		New Employees	N	Members of the Public	MP
		Young, inexperienced workers	Y		

HAZARDS

1. Access/Egress (Obstructions?)	E	10. Hazardous Substances (COSHH)		19. Storage	E	How Else Can People Get Hurt (specify below)
2. Asbestos		11. Heights (inc ladders, scaffolding)		20. Stress	E	
3. Compressed Gases		12. Lifting Equipment		21. Violence (attack and public disorder)	ALL	
4. Confined Spaces	E	13. Lone Working	E	22. Welfare	E	
5. Display Screen Equipment (DSE)	E	14. Manual Handling		23. Working Patterns / Work organisation		
6. Electricity (inc. Portable appliances)	E	15. Noise Exposure (inc Equipment)				
7. Fire (Building Aspects, inc storage of Combustible & Flammable materials)	E	16. Office Equipment (e.g. Photocopiers, Shredders)	E			
8. Food Hygiene	E	17. Pressure Systems				
9. Hand Tools		18. Slipping, Tripping, Falling	E			

Assessment No:

RISK ASSESSMENT

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
Access/Egress (Obstructions?)	Falling or knocking into obstructions	Ensure pathways are kept clear and things are properly stored away	Low	Yes – raise awareness
Confined Spaces	All staff, with restricted space can cause stress and poor posture problems. Additional "furniture" has resulted in less space, along with limited number of desks available for staff, so there are a few cases of 3 into 2 on some desks.	Staff are advised not to sit in locations where there is restricted space and also where their presence can impact on other members of staff, such as perimeter benches. Staff are also advised not to clutter up areas of high staff density.	Medium	Yes - raise awareness of hot-desks and ensure perimeter benches are not used as permanent desks, and staff respect the space around colleagues working next to them.
Display Screen Equipment (DSE)	Poor posture, eye strain, lighting	All staff to complete DSE forms, and encouraged to take regular breaks	Medium	Yes – DSE forms are filled in and raise awareness

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
Electricity (inc. Portable appliances))	Exposure to shock or fire, Staff. Risk of injury due to inappropriate use of electrical equipment or exposure to faulty equipment. Provision of hire equipment, particularly for external events may increase such risk.	Ensure equipment is PAT tested and is fit for purpose. Staff are advised to use electrical items only in accordance with correct procedures for their use. Appliances used work setting must be PAT tested. All equipment supplied and operated by external contractors must be PAT tested, with necessary indemnity in place against any risk that might arise as a result of negligence, faulty operation etc.	Low	Yes – awareness
Fire (Building Aspects, inc storage of Combustible & Flammable materials)	Injury through fire	Staff to follow instructions given over tannoy system and by fire marshals regarding evacuation procedures.	Low	Yes – awareness
Food Hygiene	All Staff General food brought in for teams e.g. biscuits cakes chocolates should be kept in a sealed container once opened to avoid contamination. Food left exposed for long periods of the day can easily collect germs/bacteria, as well as attracting insects and rodents. Receptionists etc with external caterers – risk of food poisoning	Food is covered over when left unattended and any unwanted food is placed in the bins at the tea point at the end of the day. Ensure all staff comply with GLA regulations on use of external caterers and monitor these potential risks.	Trivial (S1, L2)	No Yes – Compliance with GLA regulations and awareness of these – informed at team meetings

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
Lone Working	Officers working early or late may be unable to call for help in an emergency Event project management can involve long hours and erratic work patterns. Events often take place in the evenings or at weekends and can place a significant onus of responsibility on those involved. In the period leading up events individuals may need to work long hours, with out breaks and this can lead to tiredness, stress, loss of concentration etc.	Encourage staff to inform security if they are working late. As with stress, good time management is essential and individuals are encouraged to plan their time to take account of periods where increased pressure is likely. Staff are encouraged to take TOIL following major events.	Trivial (S1, L1)	No
Office Equipment (e.g. Photocopiers, Shredders)	Staff Injury from equipment caused by sharp edges, (shredders etc) moving parts or incorrect use. Failure to maintain equipment to specified standards resulting in failure of Electrical/mechanical integrity. Removing paper jams from copiers can sometimes result in minor cuts & grazes.	All guards on equipment must be kept in place and maintained. Only staff trained in the safe use the equipment should be allowed to operate it. Maintenance service agreements with competent contractors to be in place.	Low (S2, L2)	Yes

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
Slipping, Tripping, Falling	Staff Slipping on magazines, newspapers, tripping over boxes, recycle newspaper bags left in walkways and/or handbags by desks. Most recently an increase in wipe boards with large bases have increased the risk of tripping.	Floors (in particular gangways and by desks) maintained in good condition free from, loose floor tiles, trailing cables or loose paper/plastic sheets boxes and bags. Regular collection of media monitoring recycling bags Staff instructed not to leave desk draws open or any other potential trip or slip hazards, for example, boxes or confidential and/or recycle bags. All staff also instructed not to climb onto furniture. Staff informed of hazards of running in the workplace	Medium (S2, L5)	Yes, tidy up loose cables under several desks throughout Directorate Improve standards of housekeeping by tidying up items on floor e.g. box files, newspapers etc.
Storage	Staff High number of leaflets, boxes & newspapers located in limited storage areas around workstations within the directorate. Boxes left on the floors and walk way obstructing access to other cupboards and exit.	Ensuring boxes and newspapers are stored safely with easy access, away from walkways and the exit. Staff aware of potential dangers.	Low (S2, L3)	Yes, move non-essential items to the archive room and dispose of out of date items.
Stress	Staff – Overworking and having to meet short deadlines	Awareness of the demand on the team and pressures on individual staff, provide support as necessary through discussion, ensuring staff plan ahead, ongoing discussion of priorities with senior managers, re-allocation of tasks, additional resource and support where necessary.	High	Yes – Manager being aware of the signs and applying the HR Stress Management Policy

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
Violence (attack and public disorder)	Staff Staff could be attacked while attending external meeting/event late at night and on their way home from the same meeting/event, especially during winter. Staff in public areas of the building are vulnerable to verbal and physical attack from the general public. Staff at risk in person, over the phone or through incoming mail.	Staff should, where possible, carry mobile phones, usually personally owned. Normally two or more staff attend most external meetings/events but it is foreseeable for staff to attend these on their own. In most cases taxis are used if travelling home very late. All PLU staff are trained to deal with incidents over the phone. The City Hall reception area CCTV is in operation along with security staff. Pre-registration of delegates, appropriate levels of security and staff fully briefed on emergency procedures.	Medium (S3, L3)	No
Welfare	Staff Staff working long hours can become tired and loose concentration, resulting in accidents.	Encourage staff to take regular breaks.	Low (S2, L2)	No

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RISK ASSESSMENT

Assessment No:

STEP 3 -- Action Plan -- Give details of actions to be taken that will reduce risks to health and safety.

Describe as fully as possible the action to be taken	WHO is responsible for ensuring the action is carried out?	Date by which Action is to be completed	Confirmation that required Action has been completed (Signature of person responsible for ensuring action completed & Date)
Tidy up loose cables under several desks throughout Directorate	Technology Group / Facilities	Regular checks would be welcome. On-going	Ongoing
Improve standards of housekeeping by tidying up items on and around their workstations e.g. box files, newspapers, papers bags, shoes, unused equipment etc. This regular "spring clean" should include moving non-essential storage items to the archive room and disposing of out of date items.	All Staff	Every 3 Months	Ongoing Office housekeeping blitz due over Christmas period
Ensure all staff complete DSE Assessment forms and offer training where required	Manager & Health & Safety Co-ordinator	Every 3 years or after a desk move and new starters to complete a DSE assessment within 2 months of starting.	Ongoing -- new starters are being added.
Restrict staff from using their own/unchecked equipment. Arrange PAT test equipment where required	Manager & Health & Safety Co-ordinator	On-going	Ongoing. Items of concern are looked for in walkabouts.
To make staff aware, send out regular notifications of the Health and Safety policies & procedures.	Health & Safety Co-ordinator	Every 3 Months	Ongoing -- next notification due late December 2017.
Raise awareness of hot-desks and ensure perimeter benches are not used as permanent desks by staff.	Manager & Health & Safety Co-ordinator	On-going	Ongoing - Hot desk allocation being managed by EA Business Support.

Risk Analysis/Priority of Action Matrix

SEVERITY	LIKELIHOOD				
	1 Very Unlikely (Freak event - no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (Foreseeable under unusual circumstances)	4 Likely (Easily foreseeable - odd incident may have occurred)	5 Very Likely (Common occurrence - aware of incident)
1 Negligible (No visible injury - no first aid required)	Trivial	Trivial	Low	Low	
2 Slight (Minor cuts, bruises - no long term effects)	Trivial	Low		Medium	
3 Moderate (Heavy bruising, deep flesh wound. Lost time working)	Low	Low	Medium		
4 Severe (Lost time accidents and major injuries)	Low	Medium		High	
5 Very Severe (Long term disability or death)	Medium	Medium	High		Immediate

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RISK ASSESSMENT		Assessment No: 4	
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Organisation	Greater London Authority	Date prepared	21 st December 2017
Address	City Hall, The Queen's Walk, London, SE1 2AA	Review date	31 st December 2018
Assessors name	[REDACTED]		
Position	Health and Safety Co-ordinator	Tel	020 7983 [REDACTED]

Work area being assessed	Mayor's Office [REDACTED] Floor	Describe in more detail what goes on there	This assessment considers only the foreseeable hazards and resulting risks associated with the general operation of the Mayor's Office which are located on the [REDACTED] Floor.
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Manager's declaration (not to be signed off until risk assessment is completed)

Signature of Assessor: [REDACTED] Name (printed): [REDACTED] Date: 21st December 2017

Directorate: [REDACTED] Name (printed): [REDACTED] Date: 22nd December 2017

Signature of the Chair of the Management Health and Safety Committee: *M.D. Bell* Name (printed): *M.D. Bell* Date: *8.3.18*

Assessment No.:

Steps

1. Access /
2. Asbestos
3. Compressed
4. Confined
5. Display
6. Electricity
7. Emergency aid
8. Fire (build)
9. Flammable
10. Food hygiene

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The press

Children (Incl.)	
Pregnant women	
New employees	
Young, Incl.	

RISK ASSESSMENT

Assessment No:

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
5. Use of Display Screen equipment	Staff Adopting poor posture causing back/neck discomfort/disorders. Eye strain and or stress.	Regular DSE carried out every 24 months. Advice available from H&S Coordinator and managers can authorise a consultant to advise. Individuals can be referred to Occupational Health H & S induction offered to all staff. Details of DSE assessment given. Monthly H&S walkabouts pick up posture and working environment issues	Medium (S3, L3)	No
6. Electricity including portable appliances	Staff Injury caused by electric shock from bare wires.	PAT tests carried out on all appliances on a yearly basis to ensure work equipment in efficient working order and good repair.	Medium (S3, L3)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
7. Emergency procedures	All groups of people affected Fire Injury/loss of life caused by fire or other life-threatening situations. Failure to evacuate building promptly PEEP's not completed so lack of clarity of how to deal with evacuation First Aid Failure to react in good time to injured party may result in condition worsening. Bomb/Flood/Other Injury/loss of life Firearms procedure emergency – all staff to attend briefing	Fire wardens appointed and staff know their identity. Adequate fire-fighting equipment available and staff aware of its location. All staff in all working areas can hear fire alarms. All staff aware of emergency evacuation procedures including fire assembly points (Potters Field) and fire action procedure located on landing of staircases. Vulnerable staff have completed their own PEEP Routine Fire Drills take place at specified frequency. Fire doors to be kept closed, free from obstructions and not wedged open. First Aiders appointed. First Aid boxes checked as part of FM's daily walk about. All accidents are to be reported in the GLA Accident Book including those that affect GLA employees, contractors and members of the public, and that: Staff aware of Run, Hide, Tell strategy IN ALL CASES RESTRICT ACCESS TO STAFF TO DANGER AREAS.	Medium (S4, L2)	Yes
15. Lone Working	Staff Officers working alone. Unable to call for help in the event of an accident/injury.	Security staff walk around out of office hours. Sign in/out of office hours.	Low (S2, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
18. Office equipment (e.g. photocopiers, shredders)	All groups of people affected Risk of trapping and entanglement	Shredders adequately guarded and have automated emergency stop function and be fitted with an tangled (jewellery, scarves, hair etc.) should be kept away from the equipment. Staff have appropriate training.	Low (S2, L2)	No
	Ozone	Regularly service equipment as to manufacturers recommendations. Equipment that is heavily used should be placed in a well-ventilated area, away from workstations.	Low (S1, L1)	No
	Fire	The amount of combustible material around the machine is limited and good housekeeping standards kept.	Medium (S5, L2)	No
	Electrical Hazards	All electrical equipment over 2 years have an annual PAT testing schedule. Damaged equipment is not used. Power circuits are protected for earth leakage by residual current devices. Power cables do not trail in walkways and a cable bridge is used if this cannot be avoided. Only competent individuals use the equipment. Only trained individuals alter the equipment.	Medium (S5, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
21. Slipping, tripping and falling	All groups of people affected Slipping, tripping and falling	Floor coverings maintained in good condition free from torn carpets, loose mats, trailing cables or loose paper/plastic sheets. Staff instructed not to leave desk draws open or to climb onto furniture to reach high shelves – use correct stools. Spills, especially on shiny floor surfaces to be protected until they are mopped up and dry. Staff informed of hazards of running in the workplace. Staff to report potential hazards. Walkways kept clear of tripping hazards. Ensure all accidents are reported to FM. Staff should refer to the accident reporting guidelines	Medium (S3, L2)	Yes. A check for slip and trip hazards are incorporated into the H&S walk around. Foot stool provided to access high level shelving in storage area.
22. Special Needs Pregnancy People with Disabilities The very old or young	Groups of people with special needs i.e. pregnant women, people with disabilities, the very old or very young. Working environment becoming unsuitable due to advancement of pregnancy. Standard workstations/workplace layout may introduce unnecessary restrictions on some disabled persons. Some disabled persons may be more susceptible to certain risks e.g. those with diminished sight may be more susceptible to bumping into or tripping hazards. Emergency evacuations procedures may be disrupted. Provide suitable access into building for visitors with disability	City Hall is a fully accessible building. Re-assess DSE assessment and general assessment covering other work activities during later stages of pregnancy or on request of individual. Carry out specific assessments of workstations/workplace layout. Consider what the person can do rather than what the person cannot do. Fire wardens to 'look out' for the needs of the disabled especially in case of emergency evacuation or drills	Low (S2, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk* High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
24. Welfare issues	All groups of people affected Ventilation Temperature Lighting Cleanliness and waste disposal	Adequate supply of fresh air. Suitable ventilation in the form of air conditioning and access to mechanical ventilation system. Indoor temperature provided is reasonable and comfortable. Heating system and air conditioning installed. Sufficient lighting installed and natural light to enable people to work and move about safely. Cleaning and disposal of waste carried out routinely in order to maintain good standards of cleanliness and hygiene.	Low (S1, S1) Low (S1, S1) Low (S1, S3) Low (S1, S1)	No No No No
25. Working Environment	Staff Unlidy working environment may lead to unsafe and risky incidents, such as fire hazards and pest infestations.	Quarterly walks to pick up extreme untidiness and report emailed to staff requesting compliance. Staff reminded to keep food stored in containers and not to leave food out overnight.	Low (S2, L2)	No
26. Working patterns / work organisation	Staff Working extended hours may lead to stress.	Ensure all staff are aware of the Employee Assistance Programme Ensure a good work/life balance amongst staff. Managers meet with staff regularly on a 1:1 basis and include workload as part of discussions	High (S4 L4)	No
7. Stress	Staff	Ensure all staff are aware of the Employee Assistance Programme. Ensure a good work/life balance amongst staff. Managers meet with staff regularly on a 1:1 basis and include workload as part of discussions.	High (S4 L4)	No

	Assessment No:
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RISK ASSESSMENT

STEP 3 – Action plan – give details of actions to be taken that will reduce risks to health and safety.
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Describe as fully as possible the action to be taken	Who is responsible for ensuring the action is carried out?	Date by which action is to be completed	Confirmation that required action has been completed (Signature of person responsible for ensuring action completed and date)
5. All staff to complete a DSE assessment these will be held centrally. Forms to be reviewed and staff updated on any common issues.	H&S Coordinator	Ongoing	
12. New staff will be trained as part of their induction into the organisation.	Managers	Ongoing	
21. During the health and safety walk around, identification of slip and trip hazards to be included.	H&S Coordinator	Ongoing	
27. Stress.	Managers/Human Resources	Ongoing	

RISK ASSESSMENT

Table 1 Classification of risk

Risk analysis / Priority of action matrix

SEVERITY	LIKELIHOOD				
	1 Very Unlikely (Isolated event - no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (Foreseeable under unusual circumstances)	4 Likely (Easily foreseeable - odd incident may have occurred)	5 Very Likely (Common occurrence - aware of incidents)
1 Negligible (No visible injury - no pain)	Low	Low	Low	Low	Low
2 Slight (Minor cuts, bruises - no long-term effects)	Low	Low	Low	Medium	Medium
3 Moderate (Heavy bruising, deep flesh wound, lost time accident)	Low	Low	Medium	High	High
4 Severe (Lost time accidents and major injuries)	Low	Medium	High	High	High
5 Very Severe (Long term disability or death)	Low	Medium	High	High	High

Distribution of completed assessment

Distribution of completed assessment				
Employees			Others (e.g. Contractors)	
Name	Job Title	Work Area	Company Name	Position in Company
	Senior Executive Assistant	Mayor's Office	WYG	Associate Health and Safety Consultant

RISK ASSESSMENT		Assessment No:	
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Organisation	Greater London Authority	Date prepared	7 December 2017
Address	City Hall, The Queen's Walk, London, SE1 2AA	Review date	December 2018
Assessors name	[REDACTED]		
Position	H & S Coordinator/Management Committee Representative (Resources & Corporate Management Team)	Tel	020 7983 [REDACTED]

Work area being assessed	Offices used by Teams within the Resources	Describe in more detail what goes on there	This assessment considers only the foreseeable hazards and resulting risks associated with the general operation of the Resources and CMT which are located on the following floors LG, G, 5 th , 6 th , 7 th and corporate shared desks
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Manager's declaration (not to be signed off until risk assessment is completed)

Signature of Assessor: [REDACTED] Name (printed): [REDACTED] Date: 7 December 2017

Directorate: Resources and Corporate Management Team

Signature of Director: *M. D. Belle* Name (printed): Martin Clarke, Executive Director, Resources Date: 5.3.18

Signature of the Chair of the Management Health and Safety Committee: *M. D. Belle* Name (printed): Martin Clarke Date: 5.3.18

	Assessment No:
RISK ASSESSMENT	

STEP 1 – How can people get hurt? Use this list as a check and add other items, unique to your work area, if necessary. Step back and consider any other hazards and involve managers and staff in deciding what is to be included.

HAZARDS					
1. Access / egress (obstructions?)	11 Hand tools		21 Slipping, tripping, falling	X	How else can people get hurt (specify below)
2 Asbestos	12. Hazardous substance exposure	X	22 Special needs e.g. pregnancy, elderly, disabled and young persons	X	
3 Compressed gases (storage and use)	13. Working at height (including ladders, scaffolding)		23 Violence (attack and public disorder)	X	
4. Confined spaces	14 Lighting	X	24 Welfare issues	X	
5. Display screen equipment (DSE)	15. Lone working	X	25. Working environment (including temporary workplaces)	X	
6. Electricity (including portable appliances)	16 Manual handling	X	26. Working patterns / work organisation	X	
7. Emergency procedures – fire safety, first aid	17 Noise exposure (including equipment, headphones)	X	27 Stress	X	
8. Fire (building aspects)	18. Office equipment (e.g. photocopiers, shredders)	X	28 External events organised by the GLA	X	
9. Flammable materials	19. Air quality	X			
10. Food hygiene	20. Radiation (RF, microwaves)	X			

Groups at particular risk:			
The presence of any of the following groups will affect the level of risk associated with the hazards you have identified above. Indicate all the groups relevant to this risk assessment.			
Children (including unauthorised access)	X	Contractors / sub-contractors	X
Pregnant women and nursing mothers	X	Individuals with disabilities or medical conditions	X
New employees	X	Members of the public	X
Young, inexperienced workers	X		

RISK ASSESSMENT

Assessment No: 1

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
5. Use of Display Screen equipment	Staff Adopting poor posture causing discomfort and/or muscle strain, possibly leading to work related upper limb disorders. Eye strain and or stress. The above hazards can be exacerbated by the extended use of portable computers (laptops).	Advice available from H&S Coordinator. Line managers can authorise a consultant to advise. Individuals can be referred to Occupational Health A DSE assessment can also be carried out by White, Young & Green. H & S Induction offered to all staff via e-module. Details of DSE assessment given. Managers are also required to attend a H & S Managers training course. Staff asked to complete DSE Self Assessments every 36 months or after installation of a significant piece of equipment or after a move. H&S bulletins will include information on DSE good practice.	Medium (S3, L3)	H&S bulletins includes information on this. New staff are made aware of the e-module H&S training.
6. Use of Electricity	Staff Exposure to shock, burns or explosion.	Ensure all equipment purchased is via an approved supplier and fit for purpose. All equipment is subject to an electrical test (PAT) prior to use and labelled to that effect. Electrical equipment faults should be reported to the FM Helpdesk	Medium (S3, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk' High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
7. Emergency procedures	All groups of people affected Fire Injury/loss of life caused by fire or other life-threatening situations First Aid Failure to react in appropriate time to injured party may result in condition worsening. Bomb/Flood/Other Injury/loss of life Security Awareness	Fire wardens appointed and staff know their identity. Adequate fire fighting equipment available and staff aware of its location. All staff in all working areas can hear fire alarms. All staff aware of emergency evacuation procedures including fire assembly points (Potters Field) and fire action procedure located on landing of staircases. Routine Fire Drills take place at specified frequency. Fire doors to be kept closed, free from obstructions and not wedged open. Fire alarm tested every Friday. First Aiders appointed. First Aid boxes checked as part of FM's daily walk about. All accidents are to be reported in the GLA Accident Book including those that affect GLA employees, contractors and members of the public, and that: Occur on site Local road traffic accidents Has potential for injury or damage Are incidents of violence Adequate first aid equipment available – first aid boxes available at tea points. Security briefings run by FM. IN ALL CASES RESTRICT ACCESS TO STAFF TO DANGER AREAS.	Medium (S4, L2)	First Aid procedures and Fire Wardens to be included in H&S Bulletins also available on the intranet. First Aid assistance telephone number to be published. Ext. [REDACTED] All staff to attend Security briefings. This is mandatory. Regular reminders to staff about security procedures i.e. Tailgating through security gates, wearing staff ID.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
10. Food Hygiene	Users of Café facilities.	Ensuring that staff employed in the café are qualified in the relevant areas. This is the responsibility of the café contractor. Contract Manager (FM) to ensure that food hygiene is a priority.	(S1, L2)	Contract manager (FM) to ensure that food hygiene is a priority.
12. Exposure to Hazardous Substances e.g. photocopying/printing / facsimile	Staff Exposure to possible excess of ozone emitted. Exposure to toner spills.	Where possible place equipment in a separate room or where not possible by window away from staff. Ensure staff know of disposal regime for toner spills or used/empty cartridges.	Low (S2, L2)	Yes. Staff trained in changing toner.
14. Lighting levels	Staff Inadequate levels of lighting lead to eyestrain or staff failing to see obstructions resulting in tripping over or bumping into items. Excessive levels of lighting may cause glare with similar results to above	Lighting levels must be adequate for the task. If in doubt seek professional advice. Beware of sudden dramatic changes in lighting levels as this can result in temporary loss of visual perception.	Low (S2, L2)	Yes. Previously staff have asked for lighting above desks to be reduced. Also, staff have asked to sit near a window for natural light.
15. Lone Working	Staff Officers working alone. Unable to call for help in the event of an accident/injury.	Security staff walk around out of office hours. Sign in/out out of office hours. Staff who work external/ alone should complete a Lone Working Risk Assessment	Low (S2, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
16. Manual Handling	Staff Poor handling techniques leading to injury. Consider activities such as: Moving boxes of leaflets, moving publications, setting up and stacking of archive boxes. Repetitive filing. Movement of furniture	Manual handling training available if required. If staff regularly have to carry out minor lifting or moving tasks, then a call should be raised with the Helpdesk for the porters to assist. Use trained assessor/trainer to assess risk of loads – inform staff of assessment findings. Train staff in handling and storing loads safely Introduce handling aids such as safety stools, trolleys. Assess appropriate storage arrangements such as shelving heights to meet specific loads.	Medium (S3, L3)	All staff to undertake H&S e-module training, staff reminded to complete the e-module training via introductory e-mail and quarterly bulletin sent to staff. All Managers should attend the Managers H&S training.
17 Noise	All groups Noise from Internet broadcasts or equipment can cause noise pollution.	Ensure noisy equipment not stored by staff, close the door to create a barrier for large noisy jobs. Provide headphones for staff requiring access to Internet broadcasts.	Low (S2, L2)	No
18. Office Equipment General	Staff Injury from equipment caused by sharp edges, (shredders etc) moving parts or incorrect use. Failure to maintain equipment to specified standards resulting in failure of electrical/mechanical integrity.	All guards on equipment must be kept in place and maintained. Only staff trained in the safe use of the equipment should be allowed to operate it. Maintenance service agreements with competent contractors to be in place.	Low (S2, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
19. Air Quality eg working in high/low temperatures and poor humidity	Staff Working in excessively high temperatures leading to increased fatigue and loss of concentration resulting in working errors. High humidity levels lead to staff discomfort such as high perspiration levels. Working in low temperatures leading to loss of manual dexterity resulting in working errors. Low humidity levels lead to staff discomfort such as dry eyes and lips.	Provision of windows with restricted opening. Provision of electric heaters or fans. Access to drinking water. Maintain a comfortable office temperature. (16 degrees C after one hour) Consider introduction of plants or humidifier. Provision of extract fans in toilets and shower rooms, where applicable.	Low (S2, L2)	No.
21. Slipping, tripping and falling	All groups of people affected Slipping, tripping and falling by all types of people whilst in City Hall.	Floors (gangways, stairs and steps) maintained in good condition free from torn carpets, loose mats, trailing cables or loose paper/plastic sheets. Staff instructed not to leave desk draws open or to climb onto furniture to reach high shelves – use correct stools. Spills, especially on shiny floor surfaces to be protected until they are mopped up and dry. Staff informed of hazards of running in the workplace. Staff to report potential hazards. Unused pedestals to be returned to FM or recycled to new team members. Ensure all accidents are reported to FM. Staff should refer to the accident reporting guidelines.	Medium (S3, L3)	Yes. A check for slip and trip hazards are incorporated into the H&S walk around. Ladder provided to access high level shelving in main storage area.

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
22. Special Needs Pregnancy People with Disabilities	Groups of people with special needs i.e. pregnant women, people with disabilities, the very old or very young. Working environment becoming unsuitable due to advancement of pregnancy. Standard workstations/workplace layout may introduce unnecessary restrictions on some disabled persons. Some disabled persons may be more susceptible to certain risks e.g. those with diminished sight may be more susceptible to bumping into or tripping hazards. Emergency evacuations procedures may be disrupted. Provide suitable access into building for visitors with disability.	City Hall is a fully accessible building. Re-assess DSE assessment and general assessment covering other work activities during later stages of pregnancy or on request of individual. Carry out specific assessments of workstations/workplace layout. Consider what the person can do rather than what the person can not do. Carry out specific young workers risk assessment for members of staff under the age of 18. Consider asking a member of staff to 'look out for' the needs of the disabled especially in case of emergency evacuation or drills. Where the elderly are present consider allocating someone to take responsibility in case of emergency. Again, ensure all gangways are kept clear of tripping hazards.	Low (S2, L2)	No
The very old or young	Unpredictable actions in the young emergency situations may seem exciting not as a danger. Slower response to emergency situations. Eyesight, hearing and perception of danger lower in the elderly.			

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
23. Violence (verbal and physical attack and public disorder)	GLA staff and the public vulnerable to verbal and physical attack from the public.	Permanent security presence at City Hall. Security staff complete bag search on all bags of visitors. All staff should wear their GLA staff passes at all times in the building. Passes should be shown to security on entry to the building. Security situated around the building to increase presence. Reception is to be informed of visitors by GLA staff in advance. Visitors are to report to reception to sign in and obtain 'visitors badge' for that day and return badge at end of day. Visitors should be let through the security gate on the ground floor one at a time by the officer responsible for their visit.	Low (S2, L2)	Yes.
24. Welfare Facilities eg toilets, food preparation	Staff Poor and unhygienic work surfaces. No cleaning regime in place for fridge's microwaves.	Cleaners employed and cleaning programmes in place.	Low (S2, L2)	No
25. Working Environment	Staff Unlidy working environment may lead to unsafe and risky incidents, such as fire hazards and pest infestations.	Regular walks to pick up extreme untidiness and report emailed to staff requesting compliance. Staff reminded to keep food stored in containers and not to leave food out overnight. Staff reminded about food stuff over the festive period.	Low (S2, L2)	No

What could cause harm? (List here the things you have noted on the previous page)	Who might be harmed and how? (Always give particular consideration to people with special needs)	Control measures What do you do already to stop these people getting hurt?	Residual risk High / Medium / Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Yes / No If 'Yes' give details in the action plan
26. Working Patterns/ Work organisation	Hot-desking Staff not ensuring that the desk they are working at is set up correctly Working from home Workstation at home is not set up in the proper way.	Ensure all staff are informed of their responsibility to ensure that the desk they work, whilst hot-desking is set up correctly Ensure all staff are informed of their responsibility that the workstation they work on whilst working from home is set up correctly and the correct equipment is used.	Low (S3, L3)	Yes. Staff reminded in the H&S bulletin of their responsibility to ensure that their workstation is set up correctly.
27. Stress	Staff	Ensure all staff are aware of the Employee Assistance Programme. During periods of change several approaches are in place. The Well-being training for managers and staff The Employee Assistance Programme. Additional support, advice and information is available from the HR & OD team. The Well-Being network is being supported by senior management. The network has a programme of activities which staff are encouraged to support. A team of officers meet regularly to ensure that the work relating to well-being is embedded into the organisation.	Medium (S3 L4)	No.
28. External Events eg GLA staff organising conferences	All people at risk during conference eg speakers, delegates by trip hazards, blocked fire exits etc.	Delegates informed of location of fire exits, escape routes and emergency assembly point through hotel contact. Compulsory risk assessment completed prior to event as part of planning process and complete safety checklist before event starts.	Medium (S3, L3)	No

RISK ASSESSMENT

STEP 3 – Action plan – give details of actions to be taken that will reduce risks to health and safety.

Describe as fully as possible the action to be taken	Who is responsible for ensuring the action is carried out?	Date by which action is to be completed	Confirmation that required action has been completed (Signature of person responsible for ensuring action completed and date)
5. All staff to complete a DSE assessment these will be held centrally. Forms to be reviewed and staff updated on any common issues.	H&S Coordinator	Ongoing	
7. First Aid procedures to be included in Quarterly Bulletin, First Aid box checked on Quarterly Walk	H&S Coordinator	Ongoing	
7. First Aid assistance number should be published in the Quarterly Bulletin to ensure that staff know who to contact if there is a First Aid emergency.	H&S Coordinator	Ongoing	
12. New staff to be trained in Hazardous Substances.	H&S Coordinator/Line Manager	Ongoing	
12. Monitoring of who has completed the Hazardous Substances training.	H&S Coordinator	Ongoing	
16. Staff who have not received basic induction training in electrical safety, manual handling etc. should complete the e-learning module.	Line Managers	Ongoing	
21. During the health and safety walk around, identification of slip and trip hazards to be included.	Directorate Management (coordinated by H&S representative)	Ongoing	

23. Violence (verbal and physical attack and public disorder) Introduction of additional and enhanced security measures and procedures for high risk City Hall meetings and events. Introduction of pre-meetings for high risk meetings and events in City Hall, including intelligence gathering prior to an event, using both internal and external resources. Additional training: •Physical Intervention, Situational Awareness and Active Threat Training	FM	Ongoing	
27. Stress	Managers/ Human Resources	Ongoing	

	RISK ASSESSMENT		Assessment No:
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Table 1 Classification of risk

Risk analysis / Priority of action matrix

SEVERITY	LIKELIHOOD				
	1 Very Unlikely (Isak event - no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (Forseeable under unusual circumstances)	4 Likely (Easily foreseeable- odd incident may have occurred)	5 Very Likely (Common occurrence - aware of incidents)
1 Negligible (No visible injury - no pain)	Low	Low	Low	Low	Low
2 Slight (Minor cuts, bruises - no long term effects)	Low	Low	Low	Medium	Medium
3 Moderate (Heavy bruising, deep flesh wound. Lost time accident)	Low	Low	Medium	High	High
4 Severe (Lost time accidents and major injuries)	Low	Medium	High	High	High
5 Very Severe (Long term disability or death)	Low	Medium	High	High	High

Distribution of completed assessment				
Employees			Others (e.g. Contractors)	
Name	Job Title	Work Area	Company Name	Contact Name

RISK ASSESSMENT		Assessment No: 1	
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Company Name	Greater London Authority	Date Prepared	29/03/2018
Address	Ground Floor. 169 Union Street London. SE1 0LL	Review Date	28/02/2018
Assessors Name	[REDACTED]		
Position	Business Support Officer	Tel	020 7983 [REDACTED]

Work Area Being Assessed	Ground Floor. 169 Union Street London SE1 0LL	Describe in more detail what goes on there:	This assessment considers only the foreseeable hazards and resulting risks associated with the general operation of the Housing and Land team, which is located on the ground floor West side of the London Fire Brigade Building.
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Manager's Declaration (Not to be Signed Off Until Risk assessment is Completed)

Signature of Assessor: [Redacted] Name (printed) [Redacted] Date 29/03/2018
Department/Location Housing and Land Tel/email 020 [Redacted] [Redacted]@london.gov.uk

THE MANAGER SHOULD NOW DELETE ONE OF THE FOLLOWING AND SIGN THE FORM

ACCEPTANCE: The activity may continue but any additional control measures identified that will further reduce the risk will be included in a Departmental Action Plan.

PROHIBITION: I am not satisfied that the risk(s) identified are acceptable without additional control measures being in place. I have therefore taken action to prevent the activity continuing.

Signature of Manager [Redacted] Name (printed) David Lunt Date 14/05/18
Department Housing and Land Tel/email 020 7983 [Redacted] [Redacted]@London.gov.uk.....

Departmental Action Plans should specify **WHAT** actions need to be taken, by **WHOM** and by **WHAT DATE**

M. J. Allen C. G. 18

Assessment No: 1

RISK ASSESSMENT

STEP 1 –How can people get hurt? Use this list as a check and add other items, unique to your work area, if necessary. Step back and consider any other Hazards! Involve the managers, staff and where necessary the safety professionals, in deciding what is to be included.

HAZARDS			
1. Access/Egress (Obstructions?)	11. Hand Tools	21. Slipping, Tripping, Falling	How Else Can People Get Hurt (specify below)
		X	

2. Asbestos		12. Hazardous Substance Exposure		22. Special Needs eg pregnancy, elderly, disabled and young persons	X
3. Compressed Gases (Storage and Use)		13. Heights (inc ladders, scaffolding)		23. Violence (attack and public disorder)	
4. Confined Spaces		14. Lighting		24. Welfare Issues	
5. Display Screen Equipment (DSE)	X	15. Lone Working	X	25. Working Environment (inc Temporary Workplaces)	X
6. Electricity (inc. Portable appliances)	X	16. Manual Handling	X	26. Working Patterns / Work organisation	X
7. Emergency Procedures – fire safety, first aid	X	17. Noise Exposure (inc Equipment, Headphones)		27. Stress	X
8. Fire (Building Aspects)		18. Office Equipment (e.g. Photocopiers, Shredders)	X	28. External events organised by GLA	X
9. Flammable Materials		19. Air Quality		29.	
10. Food Hygiene		20. Radiation (RF, Microwaves)		30.	

Groups at Particular Risk:			
The presence of any of the following groups will affect the level of risk associated with the hazards you have identified above. Indicate all the groups relevant to this risk assessment.			
Children (inc unauthorised access)		Contractors / Sub-contractors / Staff from Other Departments	
Pregnant Women and Nursing Mothers	X	Individuals with disabilities or medical conditions	X
New Employees	X	Members of the Public	X
Young, Inexperienced Workers	X		

RISK ASSESSMENT

Assessment No: 1

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk* High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
5. Use of Display Screen equipment	Staff Adopting poor posture causing back/neck discomfort/disorders. Eye strain and or stress.	Regular DSE carried out every 36 months. Advice available from H&S Coordinator and managers can authorise a consultant to advise. Individuals can be referred to Occupational Health. A DSE assessment can also be carried out by White, Young & Green. H & S Induction offered to all staff. Details of DSE assessment given. Bi-annual H&S walkabouts pick up posture and working environment issues.	Medium (S3, L3)	We provide local induction via introductory email for new starters. This includes information on DSE forms.
6. Electricity (inc. Portable appliances)	Staff members sitting at desks in the directorate	Ensuring that portable appliances that are not GLA owned are minimised and that PAT		

		testing is completed on all items that are used.	Low (S3,L1)	No
7. Emergency procedures	All groups of people affected Fire Injury/loss of life caused by fire or other life threatening situations. Failure to evacuate building promptly PEPs not completed so lack of clarity of how to deal with evacuation First Aid Failure to react in good time to injured party may result in condition worsening. Bomb/Flood/Other Injury/loss of life	Fire wardens appointed and staff know their identity. Adequate fire fighting equipment available and staff aware of its location. All staff in all working areas can hear fire alarms. All staff aware of emergency evacuation procedures including fire assembly points (Mint Street Park) and fire action procedure located on landing of staircases. Vulnerable staff have completed their own PEP Routine Fire Drills take place as specified and facilitated by the LFB who manage (and occupy) the building. Fire doors to be kept closed, free from obstructions and not wedged open. First Aiders appointed. First Aid boxes checked as part of FM's daily walk about. Mandatory attendance of security Briefings All accidents are to be reported in the GLA Accident Book including those that effect GLA employees, contractors and members of the public, and that: IN ALL CASES RESTRICT ACCESS TO STAFF TO DANGER AREAS.	Medium (S4, L2)	We provide local induction via introductory email for new starters. This includes information on Fire Wardens, the emergency no , links to the emergency evacuation procedures and mandatory attendance of security briefings

9. Flammable Materials	All groups of people affected There are many flammable items in the office, such as paper, cardboard and clothing items. Whilst none of these would start a fire, many would aid a fire to spread if one were to break out	Ensuing that the directorate is kept tidy, that cupboards are shut where possible, and that paper and boxes are stored in cupboards (again shut where possible) or away from areas where electrical appliances are used where possible.	Low (S3,L1)	No
15. Lone Working	Staff Officers working alone. Unable to call for help in the event of an accident/injury.	There is a 24 hour reception/security staff on the ground floor Sign in/out of office hours.	Low (S2, L2)	No
16. Manual Handling	Staff Lifting and moving furniture could cause injury.	Some staff have had training in manual handling, and there is a GLA porter service to ensure that items can be removed from the floor if they are leaving the building or staff need assistance.	Low (S2,L1)	No
18 Office Equipment	Staff Staff who don't know how to use machinery or are attempting to open and fix electrical items could be harmed whilst doing so.	Staff inform the FM Helpdesk when there is a problem and they come and solve the problem. Photocopiers will often identify problems and provide instructions for fixes if staff are using them, so they are unlikely to attempt to put their hands somewhere in the machines that they shouldn't/	Low (S2,L1)	No

21. Slipping, tripping and falling	All groups of people affected Slipping, tripping and falling	Floor coverings maintained in good condition free from torn carpets, loose mats, trailing cables or loose paper/plastic sheets. Staff instructed not to leave desk draws open or to climb onto furniture to reach high shelves – use correct stools. Spills, especially on shiny floor surfaces to be protected until they are mopped up and dry. Staff informed of hazards of running in the workplace. Staff to report potential hazards. Walkways kept clear of tripping hazards. Ensure all accidents are reported to FM. Staff should refer to the accident reporting guidelines.	Medium (S3, L2)	Yes. A check for slip and trip hazards are incorporated into the H&S walk around. Foot stool provided to access high level shelving in storage area.
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<u>22. Special Needs</u> Pregnancy People with Disabilities The very old or young	Groups of people with special needs i.e. pregnant women, people with disabilities, the very old or very young. Working environment becoming unsuitable due to advancement of pregnancy. Standard workstations/workplace layout may introduce unnecessary restrictions on some disabled persons. Some disabled persons may be more susceptible to certain risks e.g. those with diminished sight may be more susceptible to bumping into or tripping hazards. Emergency evacuations procedures may be disrupted. Provide suitable access into building for visitors with disability.	169 Union Street is a fully accessible building. Re-assess DSE assessment and general assessment covering other work activities during later stages of pregnancy or on request of individual. Carry out specific assessments of workstations/workplace layout. Consider what the person can do rather than what the person can not do. Fire wardens to 'look out for' the needs of the disabled especially in case of emergency evacuation or drills. Gangways are kept clear	Low (S2, L2)	No
25. Working Environment	Staff Untidy working environment may lead to unsafe and risky incidents, such as fire hazards and pest infestations.	Quarterly inspections undertaken by H&S Managers and Coordinators. Any risks to be directly resolved or reported to FM. any examples of extreme untidiness noted and emailed to staff requesting compliance. Staff reminded to keep food stored in containers and not to leave food out overnight.	Low (S2, L2)	No

26 Work organisation/working patterns	Staff Staff need to be able to handle their workloads and prioritise	Staff can train in Time Management and have flexible working arrangements to ensure that they can balance peaks and troughs in their workloads.	Low (S2,L1)	No
27. Stress	Staff	Ensure all staff are aware of the Employee Assistance Programme. Ensure a good work/life balance amongst staff. Line managers meet with staff regularly and include workload as part of discussion,	High (S4 L4)	Circulate notes from Wellness being network group of which I am a member. The Wellness being Network group are in the process of creating a newsletter for new starters – signposting them to areas of interest.
28. External events organised by GLA	Staff Staff that organise events should be aware of GLA policy and attend any relevant training	Event risk assessment to be carried out where applicable.	Low (S2,L1)	No

RISK ASSESSMENT	Assessment No: 1
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STEP 3 – Action Plan – Give details of actions to be taken that will reduce risks to health and safety.

Describe as fully as possible the action to be taken	WHO is responsible for ensuring the action is carried out?	Date by which Action is to be completed	Confirmation that required Action has been completed (Signature of person responsible for ensuring action completed & Date)
5. All staff to complete a DSE assessment every 3 years, these will be held centrally. Forms to be reviewed and staff updated on any common issues. Staff can also request a DSE assessment from the Health and Safety Co-ordinator whenever then need one.	H&S Coordinator	Ongoing	
12. New staff will be trained as part of their induction into the organisation.	H&S Coordinator	Ongoing	
21. During the health and safety walk around, identification of slip and trip hazards to be included.	Business Manager	Ongoing	
27. Stress.	Managers/ Human Resources	Ongoing	
29. New staff will be trained on external site visits.	Managers/Human Resources	Ongoing	

RISK ASSESSMENT

Table 1 Classification of Risk

SEVERITY	Risk Analysis/Priority of Action Matrix				
	LIKELIHOOD				
	1 Very Unlikely (freak event – no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (Foreseeable under unusual circumstances)	4 Likely (Easily foreseeable- odd incident may have occurred)	5 Very Likely (Common occurrence – aware of incidents)
1 Negligible (No visible injury – no pain)	Low	Low	Low	Low	Low
2 Slight (Minor cuts, bruises – no long term effects)	Low	Low	Low	Medium	Medium
3 Moderate (Heavy bruising, deep flesh wound. Lost time accident)	Low	Low	Medium	High	High
4 Severe	Low	Medium	High	High	High

<i>(Lost time accidents and major injuries)</i>					
5 Very Severe (Long term disability or death)	Low	Medium	High	High	High

Distribution of Completed Assessment					
Employees			Others (e.g. Contractors)		
Name	Job Title	Work Area	Company Name	Contact Name	Position in Company
David Lunts	Executive Director H&L	Fifth Floor. The Queen's Walk, London SE1 2AA floor office/Ground Floor, 169 Union Street SE1 0LL			
Jamie Ratcliff	Assistant Director, Housing and Land	Ground Floor. 169 Union Street SE1 0LL			
	Health & Safety Committee member	Ground Floor. 169 Union Street SE1 0LL			
		First Floor. 169 Union Street SE1 0LL			

RISK ASSESSMENT		Assessment No:	
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Organisation	Greater London Authority	Date prepared	05 December 2017
Address	City Hall, The Queen's Walk, London, SE1 2AA	Review date	05 December 2018
Assessors name	[REDACTED]		
Position	H & S Coordinator (Secretariat)	Tel	020 7983 [REDACTED]

Work area being assessed	Offices and work areas used by secretariat staff	Describe in more detail what goes on there	This assessment considers only the foreseeable hazards and resulting risks associated with the general operation of the Secretariat team which are located on the 6th and 7th Floor
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Manager's declaration (not to be signed off until risk assessment is completed)			
Signature of Assessor:	[REDACTED]	Name (printed):	[REDACTED]
		Date:	12/01/18
Directorate: Secretariat			
Signature of Director:	<i>E. Lillie</i>	Name (printed):	Ed Williams
		Date:	09/01/18
Signature of the Chair of the Management Health and Safety Committee:	<i>M. D. Lillie</i>	Name (printed):	MODERN CENTRES
		Date:	5.3.18

RISK ASSESSMENT

STEP 1 –How can people get hurt? Use this list as a check and add other items, unique to your work area, if necessary. Step back and consider any other Hazards! Involve the managers, staff and where necessary the safety professionals, in deciding what is to be included.

HAZARDS

1. Access/Egress (Obstructions?)	x	11. Hand Tools		21. Slipping, Tripping, Falling	x	How Else Can People Get Hurt (specify below)
2. Asbestos		12. Hazardous Substance Exposure	x	22. Special Needs eg pregnancy, elderly, disabled and young persons	x	
3. Compressed Gases (Storage and Use)		13. Heights (inc ladders, scaffolding)		23. Violence (attack and public disorder)	x	
4. Confined Spaces		14. Lighting	x	24. Welfare Issues	x	
5. Display Screen Equipment (DSE)	x	15. Lone Working		25. Working Environment (inc Temporary Workplaces)	x	
6. Electricity (inc. Portable appliances)	x	16. Manual Handling	x	26. Working Patterns / Work organisation		
7. Emergency Procedures – fire safety, first aid	x	17. Noise Exposure (inc Equipment, Headphones)	x	27. Stress	x	
8. Fire (Building Aspects)		18. Office Equipment (e.g. Photocopiers, Shredders)	x	28. External events organised by GLA	x	
9. Flammable Materials		19. Air Quality	x	29		
10. Food Hygiene	x	20. Radiation (RF, Microwaves)		30.		

Groups at Particular Risk:

The presence of any of the following groups will affect the level of risk associated with the hazards you have identified above. Indicate all the groups relevant to this risk assessment.

Children (inc unauthorised access)		Contractors / Sub-contractors / Staff from Other Departments	X
Pregnant Women and Nursing Mothers	X	Individuals with disabilities or medical conditions	X
New Employees	X	Members of the Public	
Young, Inexperienced Workers	X		

RISK ASSESSMENT

STEP 2 – Now assess the risks from the hazards identified on the previous page by completing the form below.

What could cause HARM? (List here the things you have noted on the previous page)	WHO might be Harmed and HOW? (Always give particular consideration to people with special needs)	CONTROL MEASURES What do you do already to stop these people getting hurt?	Residual Risk High/Medium/Low (See Table 1 to help you)	Can further actions be taken to reduce the level of risk? Y / N If 'Yes' give details in Action Plan
1. Access/ Egress (Obstructions?)	Falling or knocking into obstructions	Ensure walkways are kept clear and items are properly stored	Low (S3, L2)	Yes- Continue to remind staff of the potential dangers. Continue to undertake regular H&S walkabouts
5. Use of Display Screen equipment	Staff Adopting poor posture causing discomfort and/or muscle strain, possibly leading to work related upper limb disorders. Eye strain and or stress. The above hazards can be exacerbated by the extended use of portable computers (laptops).	Advice available from H&S Coordinator and line managers can authorise a consultant to advise. Individuals can be referred to Occupational Health A DSE assessment can also be carried out by White, Young & Green. H & S Induction offered to all staff via e-module. Details of DSE assessment given. Staff asked to complete DSE Self Assessments every 36 months or after installation of a significant piece of equipment. Quarterly H&S bulletins will include information on DSE good practice.	Medium (S3, L3)	Quarterly H&S bulletins includes information on this. We now provide local induction via introductory email for new starters. This includes info. on DSE forms. H&S induction training is an e-module.
6. Use of Electricity	Staff Exposure to shock, burns or explosion.	Ensure all equipment purchased is via an approved supplier and fit for purpose. All equipment is subject to an electrical test (PAT) prior to use and labelled to that effect. Electrical equipment faults should be reported to the FM Helpdesk	Medium (S3, L2)	No
7. Emergency procedures	All groups of people affected Fire	Fire wardens appointed and staff know their identity. Adequate fire fighting equipment available and staff	Medium (S4, L2)	First Aid procedures and Fire Wardens to be included in

	Injury/loss of life caused by fire or other life threatening situations. First Aid Failure to react in good time to injured party may result in condition worsening. Bomb/Flood/Other Injury/loss of life Security Awareness	aware of its location. All staff in all working areas can hear fire alarms. All staff aware of emergency evacuation procedures including fire assembly points (Potters Field) and fire action procedure located on landing of staircases. Routine Fire Drills take place at specified frequency. Fire doors to be kept closed, free from obstructions and not wedged open. Fire alarm tested every Friday. First Aiders appointed. First Aid boxes checked as part of FM's daily walk about. All accidents are to be reported in the GLA Accident Book including those that affect GLA employees, contractors and members of the public, and that: Occur on site Local road traffic accidents Has potential for injury or damage Are incidents of violence Adequate first aid equipment available – first aid boxes available at tea points. Security briefings run by FM. IN ALL CASES RESTRICT ACCESS TO STAFF TO DANGER AREAS.	Quarterly H&S updates. This information is also contained in the Health and Safety induction email sent to new starters All staff to attend Security briefings. This is mandatory. Regular reminders to staff about security procedures i.e. Tailgating through security gates, wearing staff/visitor passes.		
10: Food Hygiene	Staff Food brought in for teams should be stored in a sealed container once opened to avoid contamination. Food left exposed for long periods of time can attract bacterial germs as well as insects and rodents. Receptions etc with external contractors – risk of food poisoning	Staff reminded no food should be left out overnight. Cleaners have been instructed to throw food left out in the bin. Ensure all staff comply with GLA regulations on the use of external caterers and monitor these potential risks.	Low (S1, L2)	Remind staff of food hygiene protocols and also of the GLA regulations on the use of external caterers.	

12. Exposure to Hazardous Substances e.g. photocopying/printing /facsimile	Staff Exposure to possible excess of ozone emitted. Exposure to toner spills.	Where possible place equipment in a separate room or where not possible by window away from staff. Ensure staff know of disposal regime for toner spills or used/empty cartridges.	Low (S2, L2)	Yes. Staff should be advised to seek assistance from the IT helpdesk to change toner
14. Lighting levels	Staff Inadequate levels of lighting lead to eyestrain or staff failing to see obstructions resulting in tripping over or bumping into items. Excessive levels of lighting may cause glare with similar results to above.	Lighting levels must be adequate for the task. If in doubt seek professional advice. Beware of sudden dramatic changes in lighting levels as this can result in temporary loss of visual perception.	Low (S2, L2)	Yes. Staff reminded of the importance of correct lighting.
16. Manual Handling	Staff Poor handling techniques leading to injury. Consider activities such as: Moving boxes of leaflets, moving publications, setting up and stacking of archive boxes. Repetitive filing. Movement of furniture.	Manual handling training available if required. If staff regularly have to carry out minor lifting or moving tasks, then a call should be raised with the Helpdesk for the porters to assist. Use trained assessor/trainer to assess remaining at risk loads – inform staff of assessment findings. Train staff in handling and storing loads safely. Introduce handling aids such as safety stools, trolleys. Assess appropriate storage arrangements such as shelving heights to meet specific loads.	Medium (S3, L3)	All staff to complete H&S e-module training, staff reminded to complete the e-module training via introductory e-mail and quarterly bulletin sent to staff.
17. Noise	All groups Noise from Internet broadcasts or equipment can cause noise pollution.	Ensure noisy equipment not stored by staff, close the door to create a barrier for large noisy jobs. Provide headphones for staff requiring access to Internet broadcasts.	Low (S2, L2)	No
18. Office Equipment General	Staff Injury from equipment caused by sharp edges, (shredders etc) moving parts or incorrect use. Failure to maintain equipment to specified standards resulting in failure of electrical/mechanical integrity.	All guards on equipment must be kept in place and maintained. Only staff trained in the safe use of the equipment should be allowed to operate it. Maintenance service agreements with competent contractors to be in place.	Low (S2, L2)	No

19. Air Quality eg working in high/low temperatures and poor humidity	Staff Working in excessively high temperatures leading to increased fatigue and loss of concentration resulting in working errors. High humidity levels lead to staff discomfort such as high perspiration levels. Working in low temperatures leading to loss of manual dexterity resulting in working errors. Low humidity levels leads to staff discomfort such as dry eyes and lips.	Provision of windows with restricted opening. Provision of electric heaters or fans. Access to drinking water. Maintain a comfortable office temperature. (16 degrees C after one hour) Consider introduction of plants or humidifier. Provision of extract fans in toilets and shower rooms, where applicable	Low (S2, L2)	No.
21. Slipping, tripping and falling	All groups of people affected Slipping, tripping and falling by all types of people whilst in City Hall.	Floors (in particular gangways stairs and steps) maintained in good condition free from torn carpets, loose mats, trailing cables or loose paper/plastic sheets. Staff instructed not to leave desk draws open or to climb onto furniture to reach high shelves – use correct stools. Spills, especially on shiny floor surfaces to be protected until they are mopped up and dry. Staff informed of hazards of running in the workplace. Staff to report potential hazards. Ensure all accidents are reported to FM. Staff should refer to the accident reporting guidelines.	Medium (S3, L3)	Yes. A check for slip and trip hazards are incorporated into the H&S walk around. High step provided to access high level shelving in print rooms.

<u>22. Special Needs</u> Pregnancy People with Disabilities	Groups of people with special needs i.e. pregnant women, people with disabilities, the very old or very young. Working environment becoming unsuitable due to advancement of pregnancy. Standard workstations/workplace layout may introduce unnecessary restrictions on some disabled persons. Some disabled persons may be more susceptible to certain risks e.g. those with diminished sight may be more susceptible to bumping into or tripping hazards. Emergency evacuations procedures may be disrupted. Provide suitable access into building for visitors with disability. Unpredictable actions in the young emergency situations may seem exciting not as a danger. Slower response to emergency situations. Eyesight, hearing and perception of danger lower in the elderly.	City Hall is a fully accessible building. Re-assess DSE assessment and general assessment covering other work activities during later stages of pregnancy or on request of individual. Carry out specific assessments of workstations/workplace layout. Consider what the person can do rather than what the person can not do. Carry out specific young workers risk assessment for members of staff under the age of 18. Consider asking a member of staff to 'look out for' the needs of the disabled especially in case of emergency evacuation or drills. Where the elderly are present consider allocating someone to take responsibility in case of emergency. Again ensure all gangways are kept clear of tripping hazards.	Low (S2, L2)	No
23. Violence (verbal and physical attack and public disorder)	GLA staff and the public vulnerable to verbal and physical attack from the general public.	Permanent security presence at City Hall. Security staff complete bag search on all bags of visitors. All staff should wear their GLA staff passes at all times in the building. Passes should be shown to security on entry to the building. Security complete tour of building every ten minutes to increase presence. Reception are to be informed of visitors by GLA staff in advance. Visitors are to report to reception to sign in and obtain 'visitors badge' for that day and return badge at end of day.	Low (S2, L2)	Yes.
24. Welfare Facilities eg toilets, food preparation	Staff Poor and unhygienic work surfaces. No cleaning regime in place for fridge's microwaves.	Cleaners employed and cleaning programmes in place.	Low (S2, L2)	No

25. Working Environment	Staff	Quarterly walks to pick up extreme untidiness and report emailed to staff requesting compliance. Staff reminded to keep food stored in containers and not to leave food out overnight.	Low (S2, L2)	No
27. Stress	Staff	Ensure all staff are aware of the Employee Assistance Programme. During periods of change several approaches are in place: The Well-being training for managers and staff The Employee Assistance Programme. Additional support, advice and information is available from the HR & OD team. The Well-Being network is being supported by senior management. The network has a programme of activities which staff are encouraged to support. A team of officers meet regularly to ensure that the work relating to well-being is embedded into the organisation.	Medium (S3 L4)	No.
28. External Events eg GLA staff organising conferences	All people at risk during conference eg speakers, delegates by trip hazards, blocked fire exits etc.	Delegates informed of location of fire exits, escape routes and emergency assembly point through hotel contact. Compulsory risk assessment completed prior to event as part of planning process and complete safety checklist before event starts.	Medium (S3, L3)	No
RISK ASSESSMENT Assessment No: 3				

STEP 3 – Action Plan – Give details of actions to be taken that will reduce risks to health and safety.

Describe as fully as possible the action to be taken	WHO is responsible for ensuring the action is carried out?	Date by which Action is to be completed	Confirmation that required Action has been completed (Signature of person responsible for ensuring action completed & Date)
5. All staff to complete a DSE assessment these will be held centrally. Forms to be reviewed and staff updated on any common issues. Health and Safety matrices to be kept up to date.	Line managers and H&S Coordinator	Ongoing, due to turnover of staff	
7. First Aid procedures to be included in Quarterly Bulletin, First Aid box checked on Quarterly Walk	H&S Coordinator	Ongoing	
7. First Aid assistance number should be published in the Quarterly Bulletin to ensure that staff know who to contact if there is a First Aid emergency.	H&S Coordinator	Ongoing	
12. New staff to be trained in Hazardous Substances.	H&S Coordinator/Line Manager	Ongoing	
21. During the health and safety walk around, identification of slip and trip hazards to be included.	Directorate Management (coordinated by H&S representative)	Ongoing	
27. Stress.	Managers/ Human Resources	Ongoing	

RISK ASSESSMENT

Table 1 Classification of Risk

Risk Analysis/Priority of Action Matrix

SEVERITY	LIKELIHOOD				
	1 Very Unlikely (Isolated event - no known history)	2 Unlikely (Unlikely sequence of events)	3 Possible (Foreseeable under unusual circumstances)	4 Likely (Easily foreseeable - odd incident may have occurred)	5 Very Likely (Common occurrence - aware of incidents)
1 Negligible (No visible injury - no pain)	Low	Low	Low	Low	Low
2 Slight (Minor cuts, bruises - no long term effects)	Low	Low	Low	Medium	Medium
3 Moderate (Heavy bruising, deep flesh wound, lost time accident)	Low	Low	Medium	High	High
4 Severe (Lost time accidents and major injuries)	Low	Medium	High	High	High
5 Very Severe (Long term disability or death)	Low	Medium	High	High	High

Distribution of Completed Assessment

Employees			Others (e.g. Contractors)		
Name	Job Title	Work Area	Company Name	Contact Name	Position In Company