Wharfedale Rugby Union Football Club

Health and Safety Policy

Season: 2025/ 26

General Policy Statement

Health and Safety at Work etc Act 1974

Safety at Sports Grounds Act 1975

Wharfedale Rugby Union Football Club (WRUFC) aims to comply with all Health and Safety legislation & relevant Government guidance in the case of transmissible disease by assessing risks and providing and maintaining adequate controls of risks arising from all our work activities. The priority shall be to protect our employees, other people who are affected by our activities and the environment.

Through correct delegation of responsibilities, the policy shall:

- Maintain a safe and healthy working environment
- Provide and maintain safe plant and equipment
- Provide information, instruction, training and supervision
- Ensure safe handling and use of substances
- Consult our employees on matters affecting their health and safety

WRUFC offers their full support and commitment on all Health and Safety issues and will provide sufficient funds and resources to enable correct implementation of the policy.

The successful implementation of the policy relies on, all responsibilities being fulfilled and a general aim of continuous improvement through monitoring and an annual review.

Signed on behalf of the of Wharfedale Rugby Union Football Club

John Sykes

General Committee Chairman

October 2025

Organisation

The overall and final responsibility for Health and Safety is that of General Committee of Wharfedale Rugby Union Football Club. The General Committee will appointment one or more competent persons to assist with the undertaking and to comply with its relevant statutory requirements under the Management of Health and Safety at Work Regulations 1999. To ensure Health and Safety standards are maintained and improved, it shall be the duty of designated Officers to implement the policy on a day to day basis.

All employees, whether paid or voluntary also have clear legal responsibilities for their own health, safety and welfare and for others who may be affected by their acts or omissions. In addition, all employees are required by law to co-operate with the management of the club and any delegated officers regarding matters of Health and Safety.

Members of the General Committee are required to:

- Give appropriate priority to Health and Safety matters.
- Provide adequate resources and support to any appointed Health and Safety professional.
- Ensure that the objectives of the Health and Safety policy are being met.
- If applicable, provide necessary Health and Safety training

Designated Club Officers are required to:

- Ensure that all hazards and associated risks are identified and suitable control measures are implemented.
- Communicate information regarding Health and Safety Matters effectively.
- Identified and implement safe systems of work.
- Promote good housekeeping standards.
- Provide adequate provisions for the supply of suitable safety equipment.
- Ensure that all plant, equipment and tools are used correctly, maintained in a safe working condition and adequately stored. Where necessary, ensure any defective plant, machinery, tools or equipment is taken out of use until effectively repaired or replaced.
- Ensure that all hazardous and dangerous substances are identified and stored correctly in accordance with the COSHH assessments and COSHH data.
- Ensure all accidents are fully investigated.

Employees are required to:

- Carry out a pre-start visual inspection of area prior to the commencement of their duties. Report any issues immediately to a General Committee and any designated Club Officer.
- Co-operate with Members of the General Committee and any designated Club Officers on health and safety matters.
- Take reasonable care of their own Health and Safety.
- Comply with control measures that have been identified as part of the club Risk Assessment programme.
- Not interfere with anything provided to safeguard their Health and Safety.
- Use and store all plant, equipment and tools are safely
- Report any defective plant, machinery, tools or equipment are reported and ensure it not used until effectively repaired or replaced.
- Use all Personal Protective Equipment as directed.
- Use all Hazardous Substances in compliance with the COSHH Assessment and COSHH Datasheets.
- Understand and comply with the Fire and Emergency evacuation procedures.
- Understand and comply with the First Aid arrangements.
- Comply with all instructions given to ensure their personal safety and the safety of others.
- Dress appropriately for their particular working environment or undertaking.
- Conduct themselves in an orderly manner in the workplace.
- Ensure that all accidents are reported and liaise with the Health & Safety Representative during any investigation.
- At all times maintain good housekeeping standards.

Arrangements

Fire and Evacuation

Wharfedale Rugby Football Club gives fire safety the greatest priority. The main clubhouse building has a P1 rated fire detection system installed. In compliance with its statutory duties under the Regulatory Reform (Fire Safety) Order 2005, the club has a Fire Risk Assessment, which will be reviewed on an annual basis. Various fire-fighting equipment is provided at strategic locations throughout the premises. It is the ethos of the club that fire-fighting equipment is only to be used to aid means of escape during an emergency. All fire exits, fire escape routes and access to fire-fighting equipment must be kept clear from any obstructions at all times. Fire doors must never be wedged open. All fire detection and fire-fighting equipment will be inspected and maintained an annual basis by a competent person. The alarm sounders are tested on a monthly basis and fire evacuation drill undertaken annually.

In the event of an incident requiring evacuation the fire alarm will sound. All stadium users should proceed to primary point and await instructions. Announcement and instructions will be made via the public address system or via the stewards.

The club have identified the following muster points:

Area	Primary point	Route	Secondary point
Clubhouse Main Stand Terracing Changing Rooms	Centre of First Team pitch	Via scoreboard gate from First Team pitch along Wharfeside Avenue coned side.	Upper Wharfedale School
Scratching Shed Terracing Wharfeside Avenue	Centre of training pitch behind low stand	Via gate in hedge through Tom Slater's garden, along unmade road to Wharfeside Avenue and thereafter down coned side.	Upper Wharfedale School
Second Team Pitch Car Parks	Centre of Second Team pitch	Along Wharfeside Avenue coned side.	Upper Wharfedale School

All stadium users are asked to remain calm and not panic. Please abide by these instructions as they have been prepared after much consideration and consultation with the Emergency Services with YOUR safety in mind. Please do not set your own "agenda" as you may be causing risk to yourself and others and impeding the efforts of the Emergency Services.

First Aid and Immediate Care

Wharfedale RUFC has a responsibility towards the health and safety of those people who use the club facilities. During rugby activities, in common with all sports, players, officials or spectators may suffer injury or sudden illness. While the arrangements for spectators and officials are likely to be the same as for any other sport, because rugby is a full contact sport, the arrangements for players will need to reflect this. It is the club's responsibility to ensure that arrangements are in place so that participants receive appropriate immediate attention if they are injured or taken ill, until the emergency services arrive.

While there is a general requirement, it should be recognised that there is variation in the level of care that that would be considered appropriate and this will depend on the individual circumstances at the club. It will also depend on what is reasonably practicable for the club to provide. In order to provide a safe environment in which the game can be enjoyed by all, the club should encourage members, coaches and volunteers to attend a first aid training course so that they can respond to basic first aid situations with confidence.

During any activity, the number and type of first aid personnel and facilities should be based on a risk assessment. This process is no different from other risk assessments carried out for Health and Safety purposes. In assessing the need, the club will consider the following:

- Playing and non-playing hazards and risks.
- The club's history of injuries and accidents, including any relevant research.
- The number of people involved (players and spectators).
- The needs of players at away matches
- The nature (adult/child) and distribution of the players (size of site / more than 1 site).
- The remoteness of the site from emergency medical services.
- Use of shared facilities and first aid resources
- Holiday and other absences of first aid trained personnel.
- Additional requirements for special groups i.e. children, players with disabilities.

Once the risk assessment is complete and the level of first aid cover has been decided, additional risk management measures will be considered:

- Emergency procedures will be developed
- Emergency services contact details must be readily available;
- Ambulance access to the pitch/training ground must be maintained at all times.
- Establish contacts with the local NHS Ambulance Trust and Hospital Emergency Department. Maintain a good of level of communication with them on the clubs activities, especially festivals.
- Appropriate first aid facilities and equipment based on their risk assessment and level of training of personnel.
- Regular training of personnel in assisting first aiders should be carried out.
- First aid equipment must be appropriately, stored, maintained, and cleaned.

First Aid Training

The club is also aware that there are different levels of training required in order to provide first aid and immediate care cover. These are outlined below:

Appointed person – Emergency first aid at work (EFAW) training enables a first-aider to give emergency first aid to someone who is injured or becomes ill while at work. This course takes a minimum of 6 hours training and a certificate will be issued by a recognised awarding body.

First Aider – First aid at work (FAW) training includes EFAW and also equips the first-aider to apply first aid to a range of specific injuries and illness. This course takes a minimum of 18 hours training and a certificate will be issued by a recognised awarding body. A First Aider holds a current First Aid certificate issued by a recognised awarding body i.e. Ofqual approved training organisation, HSE First Aid at Work approved training organisation, Red Cross or St John Ambulance. Examples of suitable courses:

- HSE First Aid at Work
- St John Ambulance Activity First Aid course
- Red Cross Standard Certificate in First Aid course

FAW and EFAW certificates last for three years. Before their certificates expire, first-aiders will need to undertake an FAW requalification course or an EFAW course, as appropriate, to obtain another three-year certificate.

HSE strongly recommends that first-aiders undertake annual refresher training, over half a day, during any three-year FAW/EFAW certification period. Although not mandatory, this will help qualified first-aiders maintain their basic skills and keep up to date with any changes to first-aid procedures.

Immediate Care Training

Health professionals could also provide first aid and immediate care subject to registration or membership of their relevant regulatory body or society, along with have appropriate training in immediate first aid care and experience providing cover for rugby or other contact sports. If working outside the NHS they will require their own indemnity insurance.

- Therapists registered with relevant regulatory body or society
- Paramedic registered with the Health Professions Council (HPC)
- Nurse registered with the United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC)
- Doctor registered with the General Medical Council (GMC)

Examples of immediate care courses approved or accredited by the Faculty of Pre-hospital Care (Royal College of Surgeons of Edinburgh) available include:

- RFU Pitch Side Immediate Trauma Care Course (PSITCC)
- Rugby Football League Course
- Jockey Club Course
- Resuscitation and Emergency Medicine On-field Course (REMO)
- AREA Course (Football Association)
- Pre-Hospital Emergency Care Course
- BASICS Immediate Care Course
- Advanced Trauma Life Support Course (orientated towards hospital based care)

First Aid Equipment

The club will ensure that a minimum level of first aid equipment is suitably stocked first aid box for the club house and first aid bags for pitch-side trained personnel. First aid equipment will only be provided appropriate to the level of training of the first aider or immediate care provider. Although there is no specified review timetable, many items, particularly sterile ones, are marked with expiry dates. They will be replaced by the dates given and expired items disposed of safely. Minimum first aid box contents are as follows:

- Guidance card
- Assorted adhesive dressings (plasters) x 20
- Sterile eye pads (No. 16) x 2
- Medium sterile wound dressings (No. 8) x 6
- Large sterile wound dressings (No. 9) x 2
- Short life triangular bandages x 4
- Disposable gloves (pair) x 3
- Antiseptic wipes x 6
- Emergency foil blanket x 1
- Disposable resuscitation aid x 1

First Aid Facilities

WRUFC have identified that it is necessary and reasonably practicable to provide a suitable medical room. The room will be warm, have good lighting, and contain essential first aid facilities and equipment. The Medical Room is be reserved specifically for providing first aid and the designated person (first aider or appointed person) is responsible for the room. The minimum requirements of the clubs medical / first aid room will be as follows:

- 10ft x 10ft minimum room size
- A sink with hot and cold running water
- Drinking water and disposable cups
- Soap and paper towels
- A refuse container
- A store for first aid materials
- A container for the safe disposal of clinical waste
- A couch with waterproof protection, clean pillows and blankets
- A chair

- A telephone or other communication equipment with the club telephone number to be displayed prominently.
- A record book for recording incidents where first aid has been given
- At least 3 electricity points.
- One examination couch
- Anglepoise lamp for head/scalp laceration – mouth injuries/eye injuries
- Availability of ice
- Trolley for suture material, instruments, bandages etc
- Stretcher – Scoop preferably
- Hines cervical collar
- Air splint for leg/arm fractures
- Airway tube
- Ambu bag
- Defibrillator (sited outside physio room – checked by medical staff)
- Lockup cupboard for drugs/surgical instruments
- First Aid cabinet to include :-
    - Gauze swabs
    - Assorted waterproof sticking plasters
    - Crepe bandages 5cm x 10cm (for knee and ankle)
    - Elastic adhesive bandages 10cm/7.5cm/5cm & 2.5cm
    - Adhesive tape 5cm & 2.5cm, triangular bandages
    - Antiseptic cream / solution, smelling salts

First Aid Signage

All First Aid at Work first aid boxes will be identified with a white cross on a green background. Similarly, first aid rooms will be easily identifiable by white lettering or a white cross on a green background. The signs will be placed where they can be seen and easily identified.

First Aid Kits

All team coaches are issued with first aid kits.

Concussion Protocol

A documented concussion protocol has been developed to ensure satisfactory aftercare is provided & all other interested parties (e.g. Parents/ Carers, Doctor, school etc) are notified of the event & aftercare requirements.

Record Keeping

It is good practice for First Aiders to record incidents that required their attendance. A copy of a first aider's record log should be forward to the Health and Safety Representative periodically. The information recorded will be used to identify injury and accident trends and possible areas for improvement in the control of health and safety risks. It can also be used for reference in future risk assessments. Useful information for a first aider to record should include:

- Date, time and place of incident
- Name and job of the injured or ill person
- Details of the injury/illness and what first aid was given
- What happened to the person immediately afterwards (for example went home, went back to work, went to hospital)
- Name and signature of the first aider or person dealing with the incident

Accident Procedure

The First Aider record log is not the same as the statutory accident book required under the H&SAW Regulations, though the two could be combined. All accidents, however trivial; which occur on the Club's premises must be reported and recorded in the accident book. The accident book is located behind the clubhouse bar and the Health and Safety Representative must be informed when any entry is made.

Accident prevention is valued by Wharfedale Rugby Union Football Club and employees are requested to take all necessary steps including the use of safety equipment or procedures to enable such prevention. In particular, employees must undertake to familiarise themselves with, and abide by, the written instructions and advice contained in the appendix to this document insofar as they are applicable to the areas in which the employees work.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013

All fatalities, major injury accidents and dangerous occurrences must be reported to the enforcing authority (normally HSE) immediately by telephone. The telephone report will be followed by the submission of an official report form F2508 within 15 days of the accident. This will normally be carried out by the Health & Safety Representative.

All employees will report any disease or occupational ill health as soon as they are aware or suspect they are suffering ill effects as a result, or in connection with, their duties as employees. Such diseases, etc will be recorded as for accidents and the enforcing authority will be notified on official form F2508.

Accidents and cases of ill health will be investigated to endeavour to identify the cause of the accident or ill health. Measures for prevention will be devised wherever possible in order to attempt to prevent recurrences.

Full co-operation is required from all employees during any investigation by the Club, insurers and/or enforcing authority inspectors.

Specified Injuries to workers include:

- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injuries likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalds) which covers more than 10% of the body or causes significant damage to the eyes, respiratory system or other vital organs
- Any scalding requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat induced illness

Over-seven day incapacitation of a worker

Accidents must be reported where they result in an employee or self-employed person being away from work or unable to perform their work duties for more than seven consecutive days as the result of their injury. This seven day period does not include the day of the accident. The F2508 form should be completed and be sent to the Enforcing Authority.

Over three day incapacitation

Accidents must be recorded but not reported where they result in a worker being incapacitated for more than three consecutive days.

Non-Fatal accidents to non-workers (e.g members of the public)

Accidents to members of the public or others who are not at work must be reported if they result in an injury and the person is taken directly from the scene of the accident to hospital for treatment to that injury. Examinations and diagnostic tests do not constitute 'treatment' in such circumstances.

THERE IS NO NEED TO REPORT INCIDENTS WHERE PEOPLE ARE TAKEN TO HOSPITAL PURELY AS A PRECAUTION WHEN NO INJURY IS APPARENT.

Occupational Diseases

Employers and self-employed people must report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work. These diseases include carpal tunnel syndrome; severe cramp of the hand or forearm; occupational dermatitis; hand-arm vibration syndrome; occupational asthma; tendonitis or tenosynovitis of the hand or forearm; occupational cancer or any disease attributed to an occupational exposure to a biological agent.

Risk Assessment

Since 1993, it has been a legal requirement for all employees and self employed people to carry out a suitable and sufficient risk assessment of their activities at work which could affect the health and safety of themselves, their employees or anyone else.

If an accident occurs, the investigating authorities will ask to see evidence that the process of risk assessment has been conducted. If it cannot be shown that "reasonably practicable" consideration to working safely it becomes more difficult to demonstrate a responsible approach. All the law requires is that reasonable steps are taken, to try to be as safe as possible and use a logical method for checking what has been done.

A suitable and sufficient risk assessment is required to be carried by the Club. A risk assessment is a careful examination of what could cause harm to people in a particular workplace. It will help weigh up whether enough precautions have been taken or whether more should be done to prevent harm. The aim is to minimise the risk of someone getting hurt or becoming ill. Risk assessment is carried out in five stages:

1. Identify the hazards
2. Decide who might be harmed and how
3. Evaluate the risks to decide whether existing precautions are adequate or whether more should be done.

4. Record your findings
5. Review your assessment and revise it if necessary

Hazard = anything that can cause harm
Risk = the likelihood that somebody will be harmed by the hazard.

Step 1 – Identify Hazards
Look only for hazards which could reasonably expect to result in significant harm under the conditions in the working environment. Generic hazards identified, arising out of the Club's activities can be found below. This is not an exhaustive list and the following examples should be used as a guide only:

- Asbestos
- Chemicals (e.g. battery acid)
- Crowds
- Display Screen Equipment
- Dust
- Electricity
- Fire (e.g. from flammable materials)
- Food hygiene
- Fumes
- Hazardous substances
- Lone working
- Low temperature
- Machinery and equipment
- Manual Handling
- Motor transport
- Moving parts of machinery
- Noise
- Personal injury
- Poor lighting
- Pressure systems
- Slipping/tripping hazards (e.g. carpet, facilities ducting)
- Vehicles

- Vibration
- Work at height
- Young persons

Step 2 – Who might be harmed?

There is no need to list individuals by name – just think about the groups of people (e.g. staff, students, contractors, members of the public, other exhibitors, etc). Pay particular attention to the following as they may be more vulnerable:

- Members of the public/visitors
- Employees or visitors with disabilities
- Lone workers

Step 3 – Is more needed to control the risk?

For the hazards listed, do the precautions already taken:

- Meet the standards set by legal requirement
- Comply with a recognised industry standard?
- Reduce the risk as far as reasonably practicable?
- Have any of the following been provided;
    - Adequate information, instruction or training?
    - Adequate systems or procedures?

If it can be demonstrated that the above has been done, then the risks are adequately controlled. Where the risk is not adequately controlled, indicate what more could be done in the action plan section.

Step 4 – Record your findings:

All Risk Assessments must only be recorded on the approved Club template. The template format must not be altered or changed in any way without the prior knowledge and permission of the Health and Safety Representative.

Step 5 – Review and Revision:

On the review, check that the precautions for each hazard, are still adequately controlling the risk. If not, indicate the action needed, making changes when you bring in, for example; new machines, substances or procedures, as they may introduce significant hazards.

The risk associated with the various hazards identified depends on the employee's particular task. However, as some tasks are allocated only to certain workers (normally those trained to carry out the tasks), exposure to the hazards associated with those tasks will be limited to those employees who have the knowledge, skill and experience to understand the hazards and guard against them.

The Club has a number of generic risk assessments in place which can be found as part of the Health and Safety Manual. These do not identify exhausted hazards but provide a general overview and are intended that they are used as a guide or base. It is the responsibility of each department as to whether additional specific risk assessments are required.

Electrical Equipment

The Club aims to comply with the Electricity at Work Regulations 1989 and the guidance form contained in HS (R) "Memorandum of Guidance of the Electricity at Work Regulations 1989". In addition, the Club will also comply with other codes of practice, guidance and the current edition of the IEE Regulations. Electrical work and installation will be carried out only by those persons deemed to be competent to do so.

Electrical hazards arise from poor design, construction and installation, inadequate standards of maintenance, or misuse and incorrect operation. The Club will reduce these hazards to a minimum by the use of competent persons, using safe systems of work, approved materials and equipment and through regular testing and inspection.

Employees who use electrical equipment must report any fault or defect immediately to a committee member. Employees must not attempt to carry out any repairs or interfere with any equipment unless they are designated competent to do so.

As soon as employee becomes aware of any defect, they should stop using and isolate the equipment by removing the power source. They should then report the defect. All Employees will be given documented training to ensure that this procedure is followed.

Portable Appliance Testing (PAT)

All electrical equipment will have at least a visual inspection before it is used. Routine inspection and preventative maintenance are essential if accidents are to be avoided. All Clubs owned portable apparatus, including extension leads, will be recorded in a register. The register will indicate how often each item should be recalled for routine inspection and maintenance. The frequency of the recall will depend on the type and use of the apparatus based on an assessment of risk.

No personal electrical equipment may be used until it has been PAT tested. Employees must examine all items of equipment before use and report any suspected defects to a member of the Committee.

Wherever possible, electrical tools and equipment should ideally be rated at 110v. This significantly reduces the risk of harm from electrocution that occurs when 240v appliances are used. Where 240v appliances are used they must be used in conjunction with an RCD. Employees are also reminded about the following points:

- Electrical equipment, such as vacuum cleaners, must be used with care. The plug must be properly removed from the wall socket and not pulled out by using the mains lead.
- Plugs and leads are to be examined before use for signs of wear and damage.
- On no account must electrical equipment be allowed to come into contact with water.
- Do not use electrical equipment with wet hands.
- Do not leave unattended equipment connected to the power supply and/or switched on.
- Do not attempt to remove replaceable parts of a machine while the machine is connected to the power supply.
- Employees may only use equipment after they have had instructions and training in their use. If not fully trained and/or confident of that training – do not use the equipment.
- Do not overload electrical plugs by the use of adapters.

Any electrical shocks suffered by any employee, player, visitor etc. must be reported immediately and entered into the accident book and reported to the Health and Safety Representative.

Substances Hazardous to Health

Control of Substances Hazardous to Health Regulations 2002 (COSHH) is the law that requires employers to control substances that are hazardous to health. Most businesses use substances, or products that are mixtures of substances. Some processes create substances. These could cause harm to employees, contractors and other people. COSHH covers substances that are hazardous to health. Substances can take many forms and include:

- Chemicals
- Products containing chemicals
- Fumes
- Dusts
- Vapours
- Mists
- Nanotechnology
- Gases and asphyxiating gases and
- Biological agents (germs). If the packaging has any of the hazard symbols then it is classed as a hazardous substance.
- Germs that cause diseases such as leptospirosis or legionnaires disease.

Before procuring any substance that could potentially be hazardous to health, the Club will ensure that the following has been considered, in order of priority:

- Eliminate the use of a harmful product or substance and use a safer one
- Use a safer form of the product, e.g. paste rather than powder
- Change the process to emit less of the substance
- Enclose the process so that the product does not escape
- Extract emissions of the substance near the source
- Have as few works in harms' way as possible
- Provide personal protective equipment (PPE) such as gloves, coveralls and a respirator. PPE must fit the wearer.

The Club will ensure that that a suitable COSHH assessment has been carried out for any hazardous substances, to be used by any employees. The COSHH assessments will need to address all associated hazards. Copies of COSHH assessment and COSHH datasheets will be readily accessible for reference at all times.

The Club also expects to see evidence that any contractors work on site have made their own staff and sub-contractors aware of the COSHH assessments and COSHH datasheet information.

Consideration must also be given to the building occupiers that potentially could be exposed to fumes that may extend beyond site boundaries.

If applicable the Club will provide evidence that workers are not being exposed to levels exceeding the Occupational Exposure Levels (OEL) and stated on COSHH assessment and COSHH datasheets.

Any work carried out using hazardous substances must be within accordance of the COSHH assessments and COSHH datasheet information at all times.

Slips, Trips and Falls

Slips, trips and falls are the single most common cause of injuries at work and account for over a third of major injuries reported each year.

The Club therefore requires strict observance of the Workplace (Health, Safety and Welfare) Regulations 1992 that specifies that floors must be suitably surfaced, in good condition and free from obstructions.

Employees are encouraged to report; to a committee member, any obvious hazards to safe movement, including:

- Spillage of wet and dry substances
- Trailing cables
- Miscellaneous rubbish
- Loose rugs or mats
- Slippery surfaces
- Poor lighting
- Smoke/steam obscuring view
- Unmarked changes of level or slopes.

Notices are to be prominently displayed when floors are being cleaned and floor cleaners are to wear appropriate footwear.

Pedestrian routes and emergency entrances and exits are to be kept free from avoidable obstructions.

Unavoidable ground-level obstructions are to be cordoned off.

Warning signs are to be prominently displayed when hazards exist from overhead working, and areas into which objects from overhead working might fall are to be cordoned off to prevent pedestrian or motor access.

Asbestos

There are three main types of asbestos still found in premises. These are commonly called blue asbestos (crocidolite), brown asbestos (amosite) and white asbestos (chrysotile) All are dangerous but the blue and brown are more so than the white. They cannot be identified just by their colour. Asbestos containing materials (ACM) were used in the construction of buildings from the early years of the 20th century until 1980. Breathing in air containing asbestos fibres can lead to asbestos-related diseases, mainly cancers of the lung and chest lining. There is usually a long delay between first exposure to asbestos and the onset of disease of 20-40 years.

There are several pieces of legislation covering the use of ACMs. The most recent is the Control of Asbestos at Work Regulations 2006. These regulations include the requirement on employers to 'manage' the asbestos in their buildings. In summary, such management involves:

- Identify ACM or suspected ACM are present through surveying
- Assume that materials contain asbestos unless there is strong evidence that it does not
- Check the condition of the materials
- If the material is in poor condition or maintenance or refurbishment is to take place arrange for the material to be sampled and identified
- Record the location and condition of the ACM/ assumed ACM on a plan or drawing
- Assess whether the condition or location means the material is likely to be disturbed
- Monitor the condition of ACM/ assumed ACM to check on possible deterioration
- Prepare and implement a plan to manage these risks

- Estates Department/Health & Safety Officer will decide action i.e. label, encapsulate or remove.

The management of ACMs in the fabric of buildings is primarily the responsibility of the Club. The Club takes all appropriate steps to comply with asbestos related legislation, approved codes of practice and standards. In particular it seeks to ensure that any work involving ACM will not lead to any person being exposed to greater than the legally stated 'control' levels of asbestos fibres in air.

No employee is permitted to carry out any work on the fabric of any building or engage contractors to do so, without due consultation with the Committee regarding the possible presence of ACMs, in case such work leads to accidental asbestos fibre release from drilling, cutting or breaking ACMs.

All employees have a duty to report any damage to asbestos materials or to materials suspected of containing asbestos to a Committee Member.

The Club follows the procedures set out in the management summary. A management survey of all WRUFC buildings has been carried out and suspected ACMs have been sampled, identified and recorded by an approved asbestos survey team. The Club maintains an asbestos register of 'what is where'. ACM considered to be in poor condition has been removed by licensed contractors.

Remaining ACMs, not considered to be a risk, are labelled where practical, sealed/encapsulated where practical, monitored at reasonable intervals (the Health and Safety Representative arranges for such monitoring) and removed when convenient or when noted to be deteriorating unacceptably.

The replacement, removal, sealing and major work to asbestos containing materials is carried out by licensed contractors engaged solely by the Health and Safety Representative. All such work is carried out in accordance with legal requirements and HSE codes of practice. The Health and Safety Representative makes the arrangements for air sampling/clearance certificates.

Remaining ACMs sustaining minor damage will be repaired, labelled, resealed/encapsulated and monitored at reasonable intervals.

If maintenance or refurbishment works are to take place where ACM is known to be present, this is either removed before work commences if necessary or the presence of the ACM is brought to the attention of the contractor or maintenance staff so as to prevent inadvertent contact and potential damage.

When buildings are shut down for major refurbishment or change of occupancy, then the possibility of more extensive ACM replacement programmes will be considered.

In accordance with the regulations prohibiting the supply, import and use of asbestos and asbestos based products, the Club does not purchase any such products or materials.
Maintenance work may involve encounters with asbestos such as: lagging on pipes and boilers; insulation board in walls on doors and ceilings; asbestos cement for roof and wall covering pipes and tanks; in some decorative plaster. The area in which employees are to work should be checked against the survey register.
If any material or dust is uncovered and it is suspected to be ACM, staff are to assume it is asbestos until determined otherwise - Stop work and get advice.
The HSE has issued safe working practice guidance for working on small amounts of asbestos containing material. However, these only apply after a suitable and sufficient risk assessment by a competent person which determines that predetermined 'control limits' will not be exceeded.

Where an incident arises that may have resulted in an uncontrolled release of asbestos into the work place at a concentration that might have exceeded the appropriate control limit, e.g. removing pipe lagging subsequently revealed to be asbestos, the following procedures will be implemented:

- The area should be immediately evacuated and steps taken to secure the affected area from re-entry of unauthorised persons
- The Health and Safety Representative must be notified as soon as possible in order that the cause of the exposure can be firmly established
- If applicable the enforcing authority will be notified
- Specialist contractors will undertake air sampling and microscopic examination to determine fibre in air levels and the type of asbestos fibres - if any
- Specialist contractors will be employed to thoroughly clean all visible debris and dust
- On completion, air sampling will again be carried out and if satisfactory a clearance certificate will be issued

- The employer is obliged to keep health records for the affected persons. Such records must be kept for at least 40 years. A record of any exposure to asbestos above legal action limits will be placed on any affected employee's personnel file. A copy of the record will be sent to the employee instructing him that it should be retained indefinitely
- The Health and Safety Representative will put in place appropriate control measures.

Display Screen Equipment (DSE)

The Club will endeavour to comply with the Health and Safety (Display Screen Equipment) Regulations 1992 and follow guidance produced by the HSE.

There are a number of potential risks from using D.S.E., but these are preventable if the equipment is used correctly. The Club will undertake a DSE assessment of all DSE equipment.

DSE users are permitted to use discretion as to how they carry out tasks. Individual control and common sense over the nature and pace of work and breaks is often required.

Short, frequent breaks are more satisfactory than occasional long breaks e.g. a 5 minute break after 50 minutes continuous display screen work is likely to be better than a 15 minute break every 2 hours.

Manual Handling

The Club accepts that there is a risk of injuries to employees from manual handling operations. To prevent and reduce these risks, it will comply with requirements of Manual Handling Operations Regulations 1992 and guidance given by the HSE.

As a starting point, no employee will be expected to and, therefore, must not move any load that they think is liable to cause injury. Employees should have regard to good manual handling techniques and follow the approved systems of work including the use of any manual handling aids provided. .

Employees who have to carry out manual handling operations will be adequately trained in the process and the best way to move loads so as to reduce the risk of injury.

The Club will identify all manual handling operations by the means of Risk Assessments and this includes pushing, pulling, lifting, carrying and supporting a load. The Club will use a competent person to assess the risks from manual handling operations identified.

In the first instance, if the task can be avoided then it should be. If the task can be automated or mechanised, it will be assessed to reduce the risks to the lowest level possible.

All remaining manual handling operations that involve a risk of injury and cannot be avoided, automated or mechanised, will be assessed to reduce the risks to the lowest level reasonably practicable.

Good Lifting and Handling Practice – Advice to Employees

The safest and best way of lifting and loading will vary depending on the size, shape and weight of the object you need to move. However, there are a few general principles that will help you ensure good practice.

Stop and Think:

The first and probably the most important step in lifting safety is to stop for a moment and think. Think about the object you are going to lift, how you are going to lift it and what you need to do once you have lifted it. At this stage you should identify any hazards that may be involved in the operation. Remember, you are assessing the risks to your own health and safety. Some of the most important things to consider are:

Assessing the load:

- What is the weight of the load?
- Is the weight evenly distributed, is it unstable or unbalanced?
- Is it sharp or are there other hazards (e.g. hot, cold, oily etc). Do you need protective equipment?
- Does the size or shape make it difficult to handle safety?

Assessing the task:

- Are there any mechanical aids that can be used to assist with the job?
- Do I need help with the load (even light loads may need two people to lift them safely if they are large or bulky)?

- Is the working area clean and tidy or are there any obstructions, tripping or slipping hazards that need to be removed first?

Don't forget that manual handling is not just about lifting loads, they also have to be moved. It is just as important to check the route you are going to be taking as it is to check the area you are lifting in. Again, remember to look for slipping and tripping hazards along the route. If you need to carry the load for any distance consider the need to stop to take short rests or adjust your grip. If you do need to stop, try to find somewhere to place the load that is about waist height rather than on the floor, because when you start off again the lift is much safer. Just a little forward planning can help make your job much safer and a lot easier at the same time.

Adopt a Good Posture:

A good posture is essential to ensure safe manual handling and any good posture must start with a firm and stable base. So, make sure you are wearing suitable footwear and not lifting from a slippery or unstable position. Start the lift with the feet slightly apart (around the width of your shoulders is about the right spacing). Where the size of the load allows, it is best to position your feet either side of it with your leading leg as far forward as you feel comfortable with. If you need to separate your feet much wider than the width of your shoulders, you should think about getting someone to help, even though the load may be fairly light. Now bend your knees so that your grip on the load is as near to level with your waist as possible. Do not kneel or bend your knees beyond the point where it gets difficult to straighten them up again. Remember, keep the back straight (you may find tucking your chin in slightly helps). Keep your shoulders level and facing in the same direction as your hips; do not twist to one side.

Get a Firm Grip:

Lean forward a little over the load if it helps you to get a good grip. The best type of grip to use depends on the sort of object you will be lifting, but the most important thing is to make sure the load is not going to slip. Use gloves wherever they help improve your grip and always use them if the objects are sharp or hazardous. If you find you have to vary or adjust your grip during the move make sure you do it as smoothly as possible. You will find that a hook type of grip is far less tiring then keeping your fingers straight and trying to grip the side of an object.

Do Not Snatch or Jerk:

All lifting and moving operations should be carried out as smoothly as possible. Snatching or jerking the load produces a strain on your body that is much higher than it would be if the operation were carried out in a smooth continuous movement. Remember that this advice also applies to tasks where you need to push or pull objects as well. If you find the need to reposition the load or change your grip after the initial lift, consider resting the load on a bench or table to do this.

Noise

The Club recognises the risk from exposure to excessive noise to employees at work. The Club will therefore comply with the Noise at Work Regulations 2006 and guidance produced by HSE. Where necessary the Club will make a noise assessment where employees are likely to be exposed to:

- 80dB(A) - lower action value
- 85dB(A) - upper exposure action value
- 87dB(A) - exposure limit value

The assessment will be made by a competent person and will:

- Identify which employees are exposed
- Provide such information as to permit compliance with the Club's statutory duties
- Be reviewed when the original assessment is no longer valid

The Health & Safety Representative will keep such noise assessments.

The Club will in all cases try to reduce noise to the lowest level by precautions and methods other than by the use of personal hearing protection, i.e. at source.

Where employees are exposed or may be exposed to noise levels of 80dB(A) or above, the Club will provide appropriate personal ear protection. Where employees are exposed to noise levels at 85dB(A) with exposure limit value employees will be provided with and must wear personal ear protection and its use is mandatory.

The Club will establish, where necessary, ear protection zones that will be indicated by the relevant sign in accordance with the Safety Signs Regulations. All employees must wear ear protection within designated areas.

Ear protection equipment will be maintained by the Club and employees are required to report any damage or defect to the Health & Safety Representative. For those employees required to wear such ear protection in areas at 80dB(A) or over, they will be provided with adequate information, training and instruction with regard to:

- The risk of hearing damage.
- Steps to minimise the risk.
- Where and when to wear ear protection and where the ear protection can be found.
- Their duties under the Noise Regulations and the Personal Protective Equipment at Work Regulations 1992.

Personal Protective Clothing (PPE)

The Club aims to fully meet the requirements of the Health and Safety (Personal Protective Equipment) Regulations (PPE) 1992 and requires employees to be provided with suitable and effective personal protective equipment (PPE) and clothing. Such provision will be specified by the relevant Risk Assessments. The Club recognises that PPE is a last resort in reducing and preventing risk.

Employees must co-operate with the Club in the use of PPE and must wear such PPE if instructed to do so. Employees will receive training in the correct use of PPE including the reasons for it being worn.

Employees must abide by the rules in relation to PPE and must not misuse or intentionally damage any PPE. Employees must report any damaged, worn or defective PPE immediately to the Health and Safety Representative. Failure to comply with the PPE requirements will lead to disciplinary action.

PPE that is provided to be worn within the Club must be stored within the Club in the areas provided. PPE is provided free of charge on the basis that it is used only for the purpose for which it is provided. Damaged, worn or defective PPE will be replaced by the Club as soon as it is reported.

PPE will be provided in accordance with European Standards and carry the EC mark for PPE.

Head protection should generally be worn where there is a risk of a head injury due to falling objects or in confined spaces where there is a risk of hitting the head.

Eye protection will be provided in accordance with the PPE Regulations 1992 and for any situation where there is a risk of eye injury, particularly the use of machinery which can transmit hazardous particles or for areas where hazardous substances are used.

Any employees who require eye protection should ensure that they use the correct protection to the task, the risks involved and that task training is given in the use of the PPE.

Respiratory protection will be provided only to nominated employees for specific situations; the appropriate instruction and training in its use will be given.

Safety footwear will be provided for those employees whose work involves a significant risk of injury to the foot. Normally safety footwear will be provided to those employees working in the appropriate areas. All employees need to be aware of the importance of wearing strong footwear with a good grip to prevent slips on the floor.

Protective clothing will be provided for those who work outdoors in inclement weather.

Protective gloves will be provided to a variety of employees for various tasks. The particular type will be decided by means of Risk Assessment.

Where PPE is provided to protect the employee against hazardous substances, the Club retains the responsibility for the cleaning of the items. Employees are not to take such items home for cleaning.

It should be noted that whilst PPE still carries a BS number current regulations require that all PPE conforms to CE standards. Where an item of equipment does not carry a “CE” mark then it may not be supplied as PPE and an alternative must be found.

Lone Working

Where possible; lone working should be avoided. A lone worker has no immediate recourse in the event of attack, illness or accident. All potential lone working situations will be subjected to Risk Assessment before work commences. Medical fitness for lone working will in future be considered after employment as required.

Machinery and Equipment

The Club aim is to provide, for employees' use, equipment which is, so far as reasonably practicable, safe and without risk to health. The Club will therefore satisfy the requirements of all legislation in relation to equipment and in particular the Provision and Use of Work Equipment Regulations (PUWER) 1998.

The Club will endeavour to ensure that the right equipment is purchased. Prior to use, equipment will be checked and any manufacturer's guidance will be considered. Information, instruction and training will be given to employees who will use the equipment. Such training will include risks, the preventative and protective measures, the correct use of guards, systems of work and any personal protective clothing that is required to be worn.

Employees must not use any equipment unless they are competent to do so and have received the necessary information, instruction and training.

Employees must report any damage, malfunction or unsafe equipment to their Head. Employees must not interfere with or repair any equipment unless competent and authorised to do so.

All equipment will be maintained in efficient working order. Particular items of equipment will have a routine and planned maintenance programme. Any equipment that requires legal testing or maintenance will be entered in the relevant register or log and such maintenance kept up to date by the Health and Safety Representative.

Proper and safe procedures will be adopted for maintenance of equipment, including the isolation of sources of energy. The following general principles will be applied:

- Identifying the hazard – The main risks associated with equipment are; contact; entanglement; being struck by ejected particles; trapping; burns through friction contact; and from being struck by materials being machined.
- Eliminating or reducing the hazard - Using enclosed areas by guarding; using recognised manufacturers; filling in any gaps, etc.
- Using safeguards – Trip devices; electro-sensitive systems; two hand control devices; and mechanical devices using interlocks.

- Using safe working practices – Physical safeguards reduce risk, however, safe systems of work must be adopted including planning, setting, use, adjustment and maintenance.

Particular requirements and regulations apply to certain machinery and will be complied with appropriately:

- Grounds Maintenance Machinery
- Workshop Machinery

Housekeeping

The general tidiness and cleanliness of the premises is a key factor in the promotion of health and safety and can contribute greatly to reducing risks and accidents.

All employees are responsible for the general state of the premises in respect of rubbish and debris. Employees must dispose of any waste material in the containers provided and must not allow accumulations of waste material.

All employees must keep their own areas of responsibility clean and tidy. Corridors need to be kept free not only from solid objects but also from any fluids or liquids. Spillages must be cleaned up immediately using appropriate materials and observing the relevant warning signs during and after the operation.

No combustible materials must be allowed to accumulate, and all entrances and exits must be kept free from object that is likely to affect safe movement through them.
(Employees will be responsible for clearing away any and all mess or surplus material of which they are the cause and for placing it in the relevant containers.)

Motor Transport & Driving

Drivers are to obey all applicable traffic laws. Only authorised personnel are permitted to drive the Club vehicles. All prospective drivers must supply a copy of their valid driving licence to the Health and Safety Representative. The Club expresses the right to refuse or withdraw authorisation. All occupants in the van must wear seatbelts at all times. No driver shall operate the vehicle for more than 8 hours in a 24 hour period. No mobile phone usage is permitted by the driver while operating the van. It is the responsibility of the driver to assess the van for road worthiness prior to departure.

The interaction of vehicles and pedestrians on Club premises will be subjected to regular Risk Assessment with outcomes communicated to relevant employees. Matchday traffic control measures are in place for all 1st XV home games; which is managed by strategically placed stewards wearing illuminated fluorescent jackets. All drivers must confine their speed to 10mph in the car park.

Work at Height

The Work at Height Regulations 2005 came into force on 6 April 2005. The Regulations apply to all work at height where there is a risk of a fall liable to cause personal injury.

They place duties on employers, the self-employed, and any person that controls the work of others (for example facilities managers or building owners who may contract others to work at height).

The Work at Height (Amendment) Regulations 2007 which came into force on 6 April 2007 apply to those who work at height providing instruction or leadership to one or more people engaged in caving or climbing by way of sport, recreation, team building or similar activities in Great Britain. As part of the Regulations, duty holders must ensure:

- All work at height is properly planned and organised
- Those involved in work at height are competent
- The risks from work at height are assessed and appropriate work equipment is selected and used
- The risks from fragile surfaces are properly controlled
- Equipment for work at height is properly inspected and maintained

There is a simple hierarchy for managing and selecting equipment for work at height. Duty holders must:

- Avoid work at height where they can
- Use work equipment or other measures to prevent falls where they cannot avoid working at height
- Where they cannot eliminate the risk of a fall, use work equipment or other measures to minimise the distance and consequences of a fall should one occur

The Regulations include schedules giving requirements for existing places of work and means of access for work at height, collective fall prevention (e.g. guardrails and working platforms), collective fall arrest (e.g. nets, airbags etc), personal fall protection (e.g. work restraints, fall arrest and rope access) and ladders.

The use of Ladders and step ladders should only be used for straightforward, short duration work. They should be in good condition, be fit for purpose and used correctly. The Club is responsible for ensuring that all operatives are suitably trained in their safe use.

All independent scaffolds and tower scaffolds for access and material handing purposes shall be erected in accordance with BS EN 12811-1-1: 2003. All scaffolding and scaffold towers shall be erected only by trained and authorised competent persons. Evidence of competency should be available for inspection. Any scaffold which remains erected for more than one week should be inspected at least once per week and after bad weather which may have an effect on strength and stability. The inspection is to be carried out by a competent person and a record of all inspections is to be retained on site for inspection.

Only authorised persons are permitted to access roof areas. Any contractors engaged to carry out work at high level, must have a suitable and sufficient risk assessment in place prior to the commencement of any works. Where no access or fall prevention measures are provided the main contractor is responsible for ensuring that all operatives can access and work in a safe manner. Weather conditions must be suitable for the work being undertaken. It should be ensured that no person, work equipment (including PPE) or materials can fall or be blow off any roof.

Legionella

Wharfedale RUFC accepts that the safe operation and management of water supplies and associated plant and equipment requires a high level of management commitment, professional and technical competencies and the provision of adequate resources.

Legionnaires' Disease is a potentially fatal form of pneumonia which can affect anybody, but which principally affects those who are susceptible because of age, illness, immunosuppression, smoking etc.

It is caused by the bacterium Legionella pneumophila and related bacteria that can be found naturally in environmental water sources such as rivers, lakes and reservoirs, usually in low numbers. As they are commonly found in environmental sources they may also be found in purpose built water systems such as cooling towers, evaporative condensers and whirlpool spas.

If conditions are favourable the bacterium may grow creating conditions in which the risk from Legionnaires' disease is increased. It is therefore important to control the risks by introducing measures outlined in the Approved Code of Practice & guidance document Legionnaires' disease - The Control of legionella bacteria in water systems (L8).

A risk assessment of the water services should be arranged through the General Committee in order to identify potential problems in the system, for example, excess storage capacity, temperature distribution problems, low water usage, inappropriate materials, etc.

In the event of adverse water results, the Health and Safety Representative should immediately review the risk by identifying which areas of the water system may be affected, the number of outlets which may generate an aerosol and the probability of there being a significant pathogen level in any such areas. This information should be forwarded immediately to General Committee to enable them to identify and revise risk to susceptible individuals in the affected areas.

Scalding

Many sports clubs have increased water temperatures for a number of reasons but mainly to satisfy hot water demand and efficient running of the boiler rather than to control legionella. High water temperatures create a scalding risk. When water temperatures are in excess of 44 °C, there is a high risk of burns and scalds to anyone with reduced sensitivity to temperature or anyone who cannot react appropriately, or quickly enough, to prevent injury

such as children. It is essential that where vulnerable people are at risk from scalding during whole body immersion water temperatures do not exceed 44 °C. If bathing facilities are accessible by vulnerable service users then the following set of steps should be taken:

- Fitting of thermostatic mixing valves (type 3) - to prevent water at greater than 44 °C (showers should not exceed 41 °C) being discharged from taps where there is potential for whole body immersion. It is particularly important that thermostatic mixing valves (TMVs) are maintained to the standard recommended by the manufacturer. If water exceeds 44 °C from the tap, staff should report this to the person in charge and access to the bath/shower concerned restricted until such time as repairs or other remedial action have been carried out.
- A documented maintenance schedule should be followed
- Periodic monitoring of the outlet water dispensing temperature
- Risk assessments need to take into account the vulnerability of all those who have access to the bathing facilities
- Labelling hot water outlets with ‘very hot water’ signs will help to prevent inadvertent scalding.

Corona Virus Disease (COVID)

The Club will follow Government guidance to avoid & reduce the risk of spreading Corona Virus or any other pandemic causing pathogen.