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H & S Guidance - Residential Care Homes

INTRODUCTION

The residential care sector caters for a wide range of client needs which involve a variety of workplace activities. Residential Care Homes are those homes providing round the clock social assistance to children, the aged and the special categories of people, where the provision of education or health is not the main activity. The responsibilities of care home proprietors are subject to a range of health and safety legislation. For each workplace activity a safe system of work should be implemented, staff should receive appropriate training and all equipment should be maintained in good condition.

MAIN LEGISLATIVE REQUIREMENTS

1. **The Health and Safety at Work etc. Act 1974.** Employers have a general duty to ensure, so far as is reasonably practicable, the health, safety and welfare at work of their employees and others who may be affected by their work activities.
2. **The Management of Health and Safety at Work Regulations 1999** require employers to assess the risks to employees and other who may be affected by their undertaking, ie. residents.
3. **The Control of Substances Hazardous to Health Regulations 1999.** Employers are required to prevent or control exposure to hazardous substances at work. Hazardous substances can include cleaning chemicals as well as potentially harmful biological agents contained in clinical waste or soiled laundry.

MAIN HAZARDS ASSOCIATED WITH RESIDENTIAL CARE HOMES

a Injuries Arising from Lifting

Almost four out of every ten accidents reported by this sector arise from manual handling. In order to prevent such injuries The Manual Handling Operations Regulations 1992 require employers to avoid hazardous manual handling operations so far as is reasonably practicable. Employers should make a suitable and sufficient assessment of hazardous manual handling operations



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which cannot be avoided and reduce the risk of injury via appropriate systems of work, including training. There are a range of hoists and other equipment which should be used to reduce risk.

b Biological Agent Hazards

Hazards arise from the handling of clinical waste and soiled laundry, which can be contaminated with a variety of pathogenic organisms. Such hazards should be identified and assessed under the provisions of the COSHH Regulations 1999. Procedures for the safe handling, segregation, storage, spillage control and disposal should be laid down and staff should be trained accordingly. Staff should be protected against hazardous substances they may use in their work activities. Staff in residential care homes are particularly at risk from clinical waste, including soiled laundry. Therefore, staff should be trained in safe working procedures and hygiene standards, as well as being provided with appropriate protective equipment.

c Hazardous Water Temperatures

At water temperatures over 50°C there is a risk of scalding which rises with increasing temperatures. The risk is increased in care homes as residents are elderly and may be prone to sensory loss. For situations where whole body immersion takes place, such as baths and showers and these are accessible to residents, water temperatures should be controlled to 43°C. Circulating hot water should be at over 60°C, to avoid risks associated with Legionella.

Safe hot water systems include thermostatic mixers with fail-safe devices, single lever mixers or control mechanical mixers with built-in tamperproof hot water limiting devices. Access to areas should be restricted and some residents may require supervision by adequately trained staff.

d Hot Surfaces

Depending on the client group in care homes, there is a risk that contact with hot surfaces, such as pipes and radiators can occur and the resident is unable to move away. The result can be severe burns or in some cases, fatalities. Where the client group presents a risk, surface temperatures should be reduced to 45°C, or surfaces guarded to protect contact.



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e Electrical Safety

The Electricity at Work Regulations 1989 require employers to maintain electrical systems and equipment in safe working order. All electrical equipment should be installed and maintained by a competent person and it is recommended that fixed electrical installations should be inspected at least once every five years. Simple, regular in-house checks of equipment should also be carried out by a competent person at a frequency appropriate to the risk. Any required corrective action should be carried out immediately.

f General Environment Hazards

Floors: In order to prevent slips, trips and falls, floors should be of a non-slip design and the use of mats and rugs on polished floors should be avoided. Floors should be kept clean, in good repair and free from obstacles at all times. During cleaning warning signs should be used to make residents aware of potentially slippery surfaces.

Stairs: Stairs should be properly maintained, constructed and well lit with hand rails on both sides of the stairway.

Windows: Many fatal accidents have occurred in residential care homes when people have fallen through windows. Where a risk is identified in resident's care plans, windows which are sufficiently large and at a height that poses a risk should be restricted to an maximum opening of 100mm. This will apply where the potential fall height from the window could cause injury. All windows should be glazed with toughened safety glass, which conforms to BS6262, and be marked so that people are made aware of the presence of glazed areas.

CHECKLIST

RESIDENTIAL CARE HOMES

- 1 Has a comprehensive risk assessment been carried out? Yes No
- 2 Have other relevant assessments, such as COSHH and manual handling, been carried out? Yes No
- 3 Has suitable and sufficient training and supervision been implemented? Yes No



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| 4 | Have suitable records of assessments and their findings been made, if required? | Yes | No |
| 5 | Is potentially hazardous manual handling avoided where possible, e.g. by providing lifting aids? | Yes | No |
| 6 | Are thermostatic mixing valves at hot water outlets operating at the required temperature? | Yes | No |
| 7 | Are hot surfaces protected from contact by residents? | Yes | No |
| 8 | Are window opening restricted, where this is appropriate? | Yes | No |
| 9 | Is clinical waste properly bagged and disposed of and segregated from general waste? | Yes | No |
| 10 | Are staff provided with appropriate protective equipment with regard to clinical and chemical hazards? | Yes | No |
| 11 | Are all staff familiar with the accident reporting requirements of RIDDOR 1995, such as the requirement to report certain specified injuries, diseases and dangerous occurrences? | Yes | No |

REFERENCES/FURTHER DETAILS

1. Health and Safety in Residential Care Homes. HSG 220 (HSE). ISBN 0-7176-2082-4.

This publication provides extensive guidance under the following headings:-

- Legal duties
- Management of health and safety
- Reporting of accidents
- First aid
- Hazardous substances
- Control of infection
- Moving and handling
- Aggression and violence to staff
- Work related stress
- Legionella
- Water temperatures and hot surfaces
- Utilities
- Asbestos
- General working environment
- Kitchen health and safety
- Laundry health and safety
- Outdoor health and safety



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Advice on some of these issues can also be found elsewhere in this manual.

2.Key Fact Sheet on Injuries within Residential Care Homes reported to Local Authorities 1991/92 to 1995/96. 1997 (HSE).

3.Handling Home Care. Achieving Safe, Efficient and Positive Outcomes for Care Workers and Clients. HSG225. (HSE).