

Home Safe brief – August Presenter notes

Slide 1

We are going to spend the next twenty minutes introducing the Home Safe Plan going through a bit of the background for initiating the plan and what it will mean for us.

The plan is a quite big reduction from the earlier Integrated Safety Plan measured in number of projects but has the aim to provide greater impact. The belief is that we will improve more by doing a few things better. In total we have reduced from 154 projects to 21 of which 10 are work force safety projects.



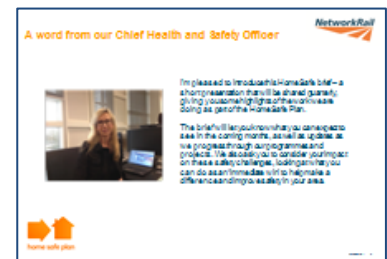
Slide 2

A welcome from Lisbeth Fromling

“I’m pleased to introduce this Home Safe brief – a short presentation that will be shared quarterly, giving you some highlights of the work we are doing at national level as part of the Home Safe Plan.

The brief will let you know what you can expect to see in the coming months, as well as updates as we progress through our programmes and projects. We also ask you to consider your impact on these safety challenges, looking at what you can do as an ‘immediate win’ to help make a difference and improve safety in your area.

I hope you enjoy this short session”



Slide 3

The Home Safe Plan consists of 21 national projects which have been identified to provide the biggest risk reduction to our work force, public and passengers.

The plan is a product of a risk ranking exercise of 154 ongoing projects which, all together, were recognised as being too much for the organisation to process.

The 21 projects are:

1. Fatigue Risk Management
2. Risk Management inc WARAs & Risk Awareness
3. Management of Occupational Road Risk (MORR)
4. Sentinel Enhancement



5. Electrical Safety Delivery (ESD)
6. Safer Trackside Working (STW)
7. Planning and Delivering Safe Work (PDSW)
8. Procuring for Contractor Safety
9. Safety Hour
10. Community Safety
11. Level Crossing Risk Reduction
12. Platform Train Interface (PTI)
13. Prioritised Technology for Level Crossing Safety
14. Identification & Monitoring Train Accident Risk Reduction
15. Health & Wellbeing Respiratory
16. Health & Wellbeing Medical Standards
17. Health & Wellbeing Resilience
18. Health & Wellbeing First Aid
19. Manual Handling
20. Business Critical Rules (BCR)
21. Integrated Management System (IMS)

This month's brief focuses on first aid, risk management and manual handling.

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In a recent site visit to a Shrewsbury depot, a bottle of sterile emergency eye wash that was over 20 years out of date was in the first aid kit at a first aid point beside the battery charging area where there is a risk of being splashed by battery acid. Should an incident have occurred, this eye wash would not have been suitable to treat the injury.



This example supports the need for first aid processes, training and resources to be reviewed throughout the business to ensure the services we have available are fit for purpose. First Aid is part of the Home Safe Plan, and over the next 6 months a comprehensive review will take place which will look to encompass

- A First Aid standard for the business
- An update to first aid training
- Introduction of an online community for our trained first aiders to offer support
- A range of 'how to' first aid videos
- An animation showing extraction and first aid support on track
- The introduction of 'refresher training' courses for first aiders which will be introduced in 2017

Case study in support of first aid review (location shown in image on slide):

On 24 June 2014 a track worker was struck by a passenger train travelling at about 80mph. The accident happened on the top of an embankment about ten metres high (shown in the image). The lookouts had warned the team of the approach of a southbound train, and a short time after this had passed, and before the COSS had

given permission for anyone to return to the track, the lookouts gave another warning, for a northbound train.

At about the time this warning was given, the team leader began to walk along the side of the line, with his back to the approaching northbound train. As he walked, he moved closer to the line, and the train struck him on his right shoulder and threw him down the side of the embankment. Other members of the team gave him first aid treatment and called the emergency services, and an air ambulance helicopter landed on the railway. The casualty was airlifted to hospital, but he had suffered life-changing injuries.

One of the Rail Accident Investigation Branch's (RAIB) learning points as a result of this accident was the importance of first-aid training for staff working in high-risk areas. This was addressed to Network Rail and covered the company's policy on first aid at work.

Questions to consider

**When was the last time your first aid kit was checked and replenished?
Whose responsibility is it?**

Are you first aid trained?

Do you know who your first aiders are and how to contact them?

When did you last complete your training? (First Aiders should requalify every three years)

Slide 5

Getting a risk assessment right helps our staff do their jobs safely and properly and we need everyone to follow the right risk assessment for the job they are doing.

Sometimes doing a risk assessment means we have to change the way we do a job so that we can ensure we keep ourselves and our colleagues healthy and safe.



When colleagues are involved in an incident leading to injury it often is the result of a risk assessment being inadequate or the controls not being properly used. We can prevent this from happening by making sure our risk assessments are all up to date and correct for the task, and that they are followed by everyone working on site.

A risk assessment which is just a paper in a file has no value. We need to use them. Then they can save many employees from getting injured. Planning and risk assessments are key to improving our safety performance.

Questions to consider

Do you change your working processes to comply with risk assessments?

How often do you access the Work Activity Risk Assessments (WARAs) that are available on Connect?

Do you feel you can stop a job to do another risk assessment if it does not feel safe?

Do you risk assess small jobs in your mind even if it is a small task that does not need a written risk assessment?

Slide 6

Manual handling does not refer just to lifting, but also to pulling, pushing or carrying loads. Whilst the risk can be greater with heavy loads, even small loads can lead to injury if the manual handling operation is difficult or frequent. Injuries from manual handling can be caused by the size and shape of a load, but other factors also contribute such as loads that have to be lifted/moved at high/low levels, poor technique, uneven or slippery ground conditions and uncoordinated team lifting.



Poor manual handling can affect anyone, whether it's moving equipment, rails and sleepers out on track, lifting boxes in the office or operating manual signal levers.

Manual handling operations can put pressure on certain parts of the body. The most well-known and obvious are injuries to the back (such as slipped/ruptured disks), but soft tissue damage can also occur in the shoulders, neck, hands, arms or feet. Injuries resulting from poor manual handling can be cumulative and often are not easy to attribute to a particular lifting operation.

Network Rail is committed to treating manual handling injuries amongst its staff. We already have put in place a physiotherapy service that aims to assist to treat such injuries (and other injuries that are not directly related to manual handling). RehabWorks can be contacted at referrals@rehabworks.co.uk or by calling 0333 222 0710 and selecting option 2. Please note that all referrals have to be made by a line manager.

The Manual Handling Improvement Plan has been established to understand our biggest risks, engage staff at the frontline to do what we can to reduce those risks (in the short-term) and to put in place the changes to processes, standards, purchasing, training and behaviours necessary to manage risks. To make big changes will take longer and funding is being sought to make more significant changes to the biggest risks over the medium term (e.g. by changing tools and providing mechanical handling aids).

Today Manual Handling is the second largest contributor to Lost Time Injuries.

Contact email for further information and support – handling@networkrail.co.uk

Questions to consider

What are the most difficult manual handling tasks you face?
Could you change a task to eliminate handling a very heavy item?

Have you received training on manual handling? Do you think the training could be improved to help reduce risk?

Has anyone experienced a manual handling injury and is happy to share their story with the team?

Did you know the physiotherapy service was available? Do you have any experience to share of the service?

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As there is no doubt we still need to improve significantly, we also need to celebrate that we are getting better.

In 2015/2016 we celebrated

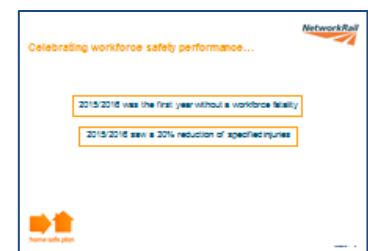
- The first year in which we have had no workforce fatalities
- 10% reduction of Lost Time Injuries – less incidents
- 30% reduction of specified injuries – less severe incidents

This was fantastic, but we still need to aim higher! In 2016/2017 we would like to reduce these injuries by **at least** another 10%.

Questions to consider

What can we do to help reduce the number of incidents further?

Do you have all risks in mind when you do your job – also when you have done a job many times?



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If you have any feedback, queries or ideas that could support the progression of the Home Safe Plan or would like to share what you have been doing to support progression in your area we would like to hear from you! You can...

Speak to your Health & Safety lead

Email safetycommunications@networkrail.co.uk

Post on Yammer with #homesafeplan



The Health and Safety team would love to hear what you have been doing to make improvements, or any ideas you would like to suggest to help get Everyone Home Safe Every day.

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Please thank all for listening in and being part of improving safety in Network Rail.

