



# FOLKESTONE NEPALESE COMMUNITY (FNC)

## HEALTH & SAFETY POLICY & PROCEDURES

**Reviewed: March 2024**

**Next Review Due: March 2026**

**Approved by: Board of Trustees**

**Endorsed by: Executive Committee (Operational Implementation)**

**Lead Responsible Officer: General Secretary / Programme & Centre Manager**

**Version: 2.0**

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### 1. POLICY STATEMENT

Folkestone Nepalese Community (FNC) is committed to ensuring a safe, healthy and welcoming environment for all staff, volunteers, beneficiaries, visitors, contractors and partners.

FNC will:

- Comply with all UK Health & Safety legislation
- Prevent accidents and work-related ill health
- Provide safe premises, equipment, and working conditions
- Identify, assess and minimise risks
- Provide training, supervision, and guidance
- Learn from incidents and continually improve

The Trustee Board has overall responsibility for Health & Safety.

Operational responsibility is delegated to the **General Secretary / Programme & Centre Manager**, supported by the **Executive Committee**.

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### 2. LEGAL FRAMEWORK

FNC complies with all relevant health and safety laws including:

- Health and Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- RIDDOR 2013 (Reporting of Injuries, Diseases and Dangerous Occurrences)
- COSHH 2002
- Regulatory Reform (Fire Safety) Order 2005
- Food Safety Act 1990
- Manual Handling Operations Regulations 1992

FNC also adheres to:

- Charity Commission Governance requirements
  - Local Authority regulations
  - Insurance requirements
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### **3. ROLES & RESPONSIBILITIES**

#### **3.1 Board of Trustees (Strategic Responsibility)**

The Trustees will:

- Approve the Health & Safety Policy
  - Ensure compliance with charity law and H&S regulations
  - Review quarterly H&S reports
  - Ensure risks are managed appropriately
  - Ensure suitable insurance is held (Employers' Liability, Public Liability)
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#### **3.2 Trustee Chair**

- Provides oversight and ensures the policy is implemented
  - Liaises with the General Secretary on H&S incidents
  - Ensures serious incidents are escalated appropriately
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#### **3.3 General Secretary / Programme & Centre Manager (Operational Lead)**

The GS / PCM is responsible for day-to-day management of Health & Safety across FNC and the FNC Centre:

- Conducts and updates risk assessments
  - Ensures monthly building and safety checks
  - Leads fire safety procedures and drills
  - Maintains accident/incident logs
  - Ensures PAT testing and equipment safety
  - Ensures staff and volunteers receive H&S induction
  - Ensures accessibility and reasonable adjustments
  - Reports quarterly to Trustees
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#### **3.4 Executive Committee**

Supports operational implementation including:

- Monthly H&S walkthroughs
  - Monitoring event/activity risks
  - Ensuring volunteers follow procedures
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#### **3.5 Staff & Volunteers (Individual Duty of Care)**

All must:

- Take reasonable care of their own and others' safety
- Follow FNC safety procedures



- Complete required training
  - Report hazards, accidents, or concerns immediately
  - Not misuse safety equipment
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### **3.6 Contractors**

Contractors must:

- Comply with FNC safety rules
  - Carry out work safely
  - Provide risk assessments where required
  - Report hazards and incidents to the General Secretary
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## **4. RISK ASSESSMENT**

- Carried out annually and reviewed after any incident
- Required for all activities, events, and equipment
- Monthly safety checks of all premises
- Special assessments for:
  - Lone working
  - Fire safety
  - Food safety
  - Trips/events
  - Vulnerable adults or children

All risk assessments are stored centrally by the GS / PCM.

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## **5. ACCIDENT & INCIDENT REPORTING**

### **5.1 Recording**

- All accidents, near misses and hazards must be recorded in the Accident Logbook
- A Safeguarding Incident Form must be used for safeguarding-related concerns

### **5.2 RIDDOR**

The GS / PCM must report to the HSE where required:

- Fatalities
- Major injuries
- Injuries requiring 7+ days absence
- Dangerous occurrences
- Work-related diseases



Trustees must be notified immediately.

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## **6. FIRST AID**

- At least one trained First Aider must be available during Centre operating hours
  - A stocked first aid kit must be accessible on site
  - All incidents requiring first aid must be logged
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## **7. INFECTION CONTROL**

- High standards of hygiene maintained at all times
  - Regular cleaning schedules
  - PPE available when needed
  - Staff given information on infection risks
  - Handwashing facilities and sanitiser available
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## **8. MEDICATION**

FNC does not store or administer personal medication.  
Individuals remain responsible for their own medicines.

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## **9. FIRE SAFETY**

- Fire risk assessment completed annually
  - Fire evacuation plan displayed clearly
  - Fire drills at least every 6 months
  - Fire extinguishers checked monthly
  - All staff and volunteers receive fire safety induction
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## **10. FOOD HYGIENE**

Where food is prepared/served:

- Volunteers/staff handling food must hold Level 2 Food Hygiene
  - Kitchen areas must be kept clean and safe
  - Allergens must be managed responsibly
  - Catering logs maintained
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## **11. EQUIPMENT & PREMISES SAFETY**

- Annual PAT (Portable Appliance Testing)
- Monthly site inspections



- Immediate reporting of defects
- External maintenance contractors used where required

Responsibility: General Secretary, supported by Property Secretary.

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## 12. VIOLENCE, AGGRESSION & ABUSE

Zero tolerance.

Linked policies:

- Safeguarding Policies
- Bullying & Harassment
- Complaints Procedures

All incidents must be reported immediately.

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## 13. DRIVING & TRANSPORT

Anyone driving on FNC business must:

- Hold valid insurance including **business use**
  - Ensure their vehicle is roadworthy
  - Follow FNC travel safety guidelines
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## 14. COMMUNICATION & TRAINING

- All new staff and volunteers receive H&S induction
  - Annual refresher training
  - Emergency procedures displayed clearly in the Centre
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## 15. MONITORING & REVIEW

The GS / PCM submits:

- Monthly operational reports
- Quarterly updates to Trustees and Executive Committee
- Annual formal review

The policy is reviewed **every two years** or earlier if required.

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## DOCUMENT CONTROL

**Version:** 2.0

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