

**Section 4**

# Managing People



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## Section Introduction

This section of the Health, Safety and Wellbeing Manual explains the practice of managing people to ensure everyone understands the risks and hazards within the workplace, and receives proper induction and training. It also provides guidance on how to ensure the health and wellbeing of staff, manage change effectively, and limit the impact of fatigue.



### Step 1



This step deals with the induction process and describes important health, safety and wellbeing information that everyone must know. It also covers the important health and safety information that contractors and partners must know before work starts.

### Step 2



This step outlines the process for identifying and planning health and safety training and competency needs, as well as the requirement to maintain a record of local health, safety and wellbeing arrangements within the workplace.

### Step 3



This step provides guidance in ensuring the health and wellbeing of our employees. It provides details of the support and services available to manage our health and wellbeing.

### Step 4



Step 4 deals with the process of managing change, so potential health and safety risks are considered, assessed and, where identified, minimised.

### Step 5



Step 5 details the steps a manager must take to support any member of a team who is working 12 consecutive hours or more at a time.



# Step 1 – Workplace Induction

All employees, visitors, contractors and partners in the workplace must receive a proper induction so they fully understand the hazards and risks related to their workplace and obtain important health and safety information.

Induction [templates are available here](#). These can be downloaded and used as the basis for creating your specific office, site and visitor inductions. Once created, the specific induction must be reviewed at least annually and when significant changes occur at the workplace, such as construction projects or the installation of new plant and machinery. When creating a specific workplace induction use the latest completed SHE 1 Work Safety Checklist to ensure that the hazards and risks present at the workplace are included in the induction.

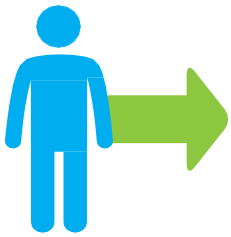
Further guidance on site induction can be found in [Part 1 of Section 5: Managing Site and Field Activities and Part 1 of Section 6: Managing in the Office](#).

## New employee induction



Induction is there to ensure that the new starter fully understands the requirements of the Management System and their responsibility towards health, safety and wellbeing within the workplace. Once the start date of the new employee has been confirmed, complete a checklist of activities relating to the new employee, including health, safety and wellbeing, as outlined in the HR People Portal Manager Hub Induction section. Complete the [‘Health and safety checklist’ \(SHE 15\)](#) to assist you in choosing the activities.

## Transferring employees



All employees transferring from one workplace to another must receive on-site induction. This includes a briefing on the hazards and risks specific to their role and the place where they will be carrying out their duties. Use the latest completed ‘Work safety checklist’ (SHE1) and point out the hazards and risks as you physically walk around the workplace. They must also be briefed on the relevant Risk Assessment Guidance identified from the ‘Work safety checklist’.

## Site visitor: Important safety information



Sites will have visitors from time to time. Whether they are contractors, consultants or visiting employees, it is your responsibility, and/or the person they are visiting, to ensure they:

- Sign the visitors book.
- Are briefed on the site rules.
- Have received a copy of the appropriate tri-fold leaflet, which outlines common hazards within water and waste operations.

## Contractors and Partners

- Contractor and partners must be given important safety information, as outlined in [Section 7, Managing Contractors](#), Step 3.

## Induction records

Managers must maintain all records of induction, including refresher training, in the local health and safety records and/or as described in the HR People Portal.





## Step 2 – Identifying Training Needs

### Reviewing training needs

All employees must receive the right level of health and safety training before work starts. Make sure training needs are continually identified and monitored. For example, training:

- That forms part of induction (new employee or those new to the role).
- Required for a specific safety role (first aider, fire warden etc.).
- Required by the Health and Safety Management System.
- Required during periods of organisational change.
- To introduce new product and plant.

Once the training needs have been identified, you must consider the proper method of training. For example:

- Formal training courses.
- On-the-job training by an experienced employee.
- Delivering a specific task's Toolbox Talk.
- Doing a briefing on a specific safety role.
- Giving instructions on how to use a new product or plant.

Formal health and safety training courses are listed on Learning on Tap.

Note: Sometimes training will require pre-requisites; for example, a medical is required for training on confined space entry.

The Safety, Health and Wellbeing Team and your local health and safety advisor are there to assist you in choosing and delivering the right training solution.

### Booking and recording the training

All health and safety training requirements must be booked via Learning on Tap, taking into consideration working patterns, and standby (to avoid last minute cancellations). Before training starts, ensure attendees complete all required pre-requisites. If alternative methods of training are delivered, record this in your local health and safety arrangements, as evidence that training has been provided and responsibilities fully understood.



### Local health and safety arrangements



Ensure records of local health and safety arrangements are maintained. The key health and safety procedure '[Development of local organization and arrangements' \(HSP 11\)](#) provides guidance and details on this procedure, and is available from the Health and Safety SharePoint Portal.



## Step 3 – Health and Wellbeing

Thames Water recognises that not only is the organisation legally responsible for looking after their employees' health and wellbeing, it is also good for their business to do so. Taking a pro-active approach to improve health in the workplace can have a positive effect on both productivity and morale. Examples of how to do this include:

- Managing and controlling risk by identifying health hazards within the workplace. To do so, use the ['Worksafety survey checklist' \(SHE 1\)](#) and follow the process outlined under [Section 3, Managing Risk](#), of this manual.
- Taking appropriate action to reduce the risk of employees' developing work-related ill health – both physical and psychological.
- Taking appropriate action early-on if employees have a health issue affecting them at work, or if they're being ill-affected by their work.
- Encouraging employees to actively engage with health initiatives across the business and take responsibility for their own health.

The Occupational Health team offers a range of support in this regard.

Contact Occupational Health via: [occupational.health@thameswater.co.uk](mailto:occupational.health@thameswater.co.uk)

### Managing fitness for work

#### Pre-placement

Be aware of the pre-placement processes and the initial assessment of fitness for work. Before candidates are employed by Thames Water, HR arranges a pre-placement screening to ensure employees are assessed as fit for the specific work they must carry out. This is done at the same stage as the employment offer (a medical questionnaire is sent out with the offer of employment). At the end of the screening process, HR informs you about the

outcome of the occupational health assessment. A person's medical suitability for employment falls into three categories:

- Fit for proposed employment.
- Fit for proposed employment but requires adjustments to carry out the role safely and effectively.
- Unfit for proposed employment, which results in the offer being terminated.

Note: Best practice would be to ensure this process is fully completed prior to commencing employment.

#### Working in confined spaces

A confined space is defined as:

“Any place, including a chamber, wet well, sewer, service reservoir, settlement tank or similar in which, by virtue of its enclosed nature, there arises a specific reasonable foreseeable risk.”

Any workers required to work in confined spaces must undergo a medical examination with Occupational Health to ensure they are fit to carry out their duties before receiving the appropriate CP1/CP2 training.



Note: Fitness for CP1 and CP2 duties must be assessed every three years, before re-training. Once you reach the age of 60, it must be assessed annually.

If an employee is required to complete CP1 or CP2 training, they must pass a medical examination to ensure they are fit to carry out confined space duties while wearing a compressed air breathing apparatus. A face-fit test is carried out as part of the medical. These medicals are done by Occupational Health every three years (from 60 and above, they are done annually). Medicals are booked via [occupational.health@thameswater.co.uk](mailto:occupational.health@thameswater.co.uk).

If at any time there are concerns regarding a worker's ability to carry out confined space duties, or they've been absent for a long period, it is imperative to arrange a re-assessment.

The key health and safety procedure, "[Management of confined spaces](#)" (HSP 14), provides more details and guidance, and is available from the Health and Safety SharePoint Portal.

### Prescribed duties

Workers carrying out prescribed duties must complete a [Prescribed Duty Questionnaire](#) every three years (or after long periods of absence) to monitor fitness for work. For example, if working with mobile plant, lone working, accessing platform work, operating a chainsaw, a boatman and doing night work. It is the line manager's responsibility to identify individuals who carry out prescribed duties, and to issue the prescribed duties questionnaire. The questionnaire is available from the [Fitness to Work](#) section of the Occupational Health SharePoint Portal.

### Musculoskeletal (bone/muscle/joint) disorders

If you experience musculoskeletal problems (for example, back pain, knee or shoulder problem affecting you at work or causing absence, speak to your manager.

They can refer you to Occupational Health, who can set up an early intervention plan that will work, or full work duties, faster. Referrals are made using the Cohort system which is found on the [Occupational Health SharePoint Portal](#) pages.

The company also has a fast-track physio process to facilitate early access to physiotherapy treatment, offering up to six sessions of treatment at designated physiotherapists in the Thames Water area. They will send a short report on the individual, along with any recommendations or required work adjustments, to you and your manager after the first assessment and at the end of the treatment plan.

Managers can refer workers directly for fast-track physiotherapy. Access any further details on the [Occupational Health SharePoint Portal](#) page.

### Employees' health referral

Changes in behaviour, fitness to carry out the role, a pattern emerging regarding short-term absences, stress-related health symptoms or a musculoskeletal condition, can all have a detrimental effect on an individual's health. It can result in long-term sick leave. Early intervention in support of the employee can have a positive impact on their recovery and can lead to an early return to full work.

A referral to Occupational Health before an individual takes sick leave, or within the first 2-3 days of absence (particularly for employees with stress or a musculoskeletal problem), can ensure they receive appropriate treatment and provides advice to both the individual and line manager. This process encourages an early return to work.

Once the individual has been assessed by Occupational Health, they and their manager will receive a copy of the Occupational Health Advisor's report. The individual must discuss this with their line manager, agreeing on any recommendations made, so that a plan can be set up and followed. Regularly review any adjustments made in the workplace.



## Stress

In addition to protecting your physical health, the company has a responsibility to look after your psychological wellbeing. We all experience episodes of working under pressure, but when the pressure becomes too great or continues for long periods of time, we may find it difficult to cope and deal with stress. We may also experience stress because of pressures outside of the work environment, which could affect our work.

You and your manager are responsible for identifying any specific stressors in the workplace that could affect you. Control measures must be put in place to reduce the risk of experiencing stress-related ill health. Even though we may not be able to control pressures outside of work, we can provide short-term support at work to help you cope and reduce your risk of becoming unwell or taking sick leave.

Issue a referral to Occupational Health as soon as possible if the above indicators exist. Referrals are made using the Cohort system which is found on the [Occupational Health SharePoint Portal](#) pages.

Carrying out an individual stress assessment can help you identify any specific stressors affecting you, whether work or home-related. It can also help identify what actions are required to reduce the stress-related risk. Access the [Individual Stress Assessment tool](#) and guidance document on the Wellbeing SharePoint Portal page. This guidance document explains the actions you can take to reduce stress-related risks. You can also access resilience training and counselling support via the company Employee Assistance Programme (EAP).



## Alcohol and drugs policy and guidance

Inappropriate use of alcohol, drugs and substances can adversely affect judgment, behaviour, capability, productivity, safety and health. Thames Water has a **zero policy** on drugs and alcohol and carries out new starter testing for all new employees. We also conduct random and for-cause-testing during the year. For further details on our alcohol and drugs policy, access the HR section of the Portal.





## Managing risks to health

### Identifying the hazards and risks

The table below provides a quick reference guide as to who might be at risk of specific hazards within the workplace, and the type of assessment that may be required.

Advice on whether audiometry, vibration or respiratory surveillances are required is available from Health and Safety Advisors.

	Prescribed duties questionnaire	Skin surveillance	Audiometry	Vibration surveillance	Respiratory surveillance	Leptospirosis card	Tetanus & Polio vaccination	Pneumococcal vaccination
Operator	•	•	•			•	•	
Technician	•	•	•			•	•	
Shift Controller	•	•	•			•	•	
Mechanical Fitter	•	•	•	•		•	•	
ICA Technician	•	•	•			•	•	
Flusher	•	•				•	•	
Network Engineer	•					•		
Network Service Technician	•					•		
Water Quality	•					•		
Laboratory Analyst	•	•				•		
Welder								•

### Working in areas of high noise

All workplace areas with excessive noise must carry out a noise assessment. Anyone working in these areas will require health surveillance. Managers must notify Occupational Health if workers are at risk. Occupational Health will arrange to carry out an appropriate health surveillance. The key health and safety procedures, ['Noise' \(HSP 13\)](#) and ['Hearing conservation' \(HSI 26\)](#) provide more detailed guidance and is available on the Health and Safety SharePoint Portal.



If individuals regularly work in Hearing Protection Zones (5 hours per week or more, where noise levels are recorded at 85 – 95 dB [A], or 30 mins per week or more, where noise levels are recorded at > 95dB [A]) they will require appropriate health surveillance and effective measures put in place to protect their health. Appropriate health surveillance consists of completing a questionnaire and undergoing a hearing test (audiometry testing) before work starts in a designated hearing protection zone, or as soon as possible after an area is designated as a hearing protection zone. Follow up testing is then carried out at specific intervals. SAP reminders are also created to ensure both manager and employee book the relevant follow-up testing.

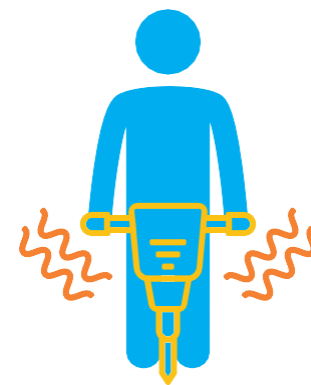


## Working with vibrating plant and tools

### Hand arm vibration (HAV)

Working with power tools can result in HAV; for example, when working with grinders and hand-guided machines such as lawn mowers and strimmers. Prolonged exposure to this hazard can harm your health, depending on the frequency of the vibration and the length of exposure. Signs and symptoms include:

- Prolonged tingling in fingers and hands.
- Reduced sense of touch and temperature.
- Blanching of the fingers and loss of grip strength.



At Thames Water, work involving power tools and hand-guided machines usually doesn't occur that often, which ensures HAV exposures are kept at a minimum. If your work is likely to involve the continuous use of vibrating power tools or hand-guided machines, report this to your line manager. They may have to consult the local Health and Safety Advisor to discuss whether this work poses an increased risk of HAV. If it does, the line manager must contact [Occupational Health](#) to arrange an appropriate health surveillance to be carried out for employees who are at increased risk. For the health surveillance, an employee must complete a questionnaire and an Occupational Health Professional must carry out a follow-up examination to check for early signs and symptoms. Afterwards, the line manager will be notified of the employee's fitness to work with handheld or guided tools. Follow-up testing is carried out at specific intervals.

The key health and safety procedure, "[Hand arm vibration](#)" (HSP 41), provides more detailed guidance and is available from the Health and Safety SharePoint Portal.

### Whole body vibration (WBV)

Using mobile plant such as tele-handlers or dumpers, for example, can cause WBV. Prolonged and regular exposure can cause harm to health, usually in the form of lower back pain. It is important to note, however, that lower back pain is prevalent in the general population. It can be caused by a variety of events and may not necessarily be the result of using or driving heavy plant at work. It is therefore not possible to easily identify causes of lower back pain.

If an individual is identified as being at risk (according to a risk assessment), or reports any symptoms, [Occupational Health](#) must be contacted to carry out a health surveillance. They must identify the cause of the problem and notify the individual and their line manager on their fitness to work with mobile plant.

## Working with substances and biological agents

### Skin surveillance

Anyone coming into regular contact with substances such as mineral oils, greases, and solvents (classified as skin irritants or sensitisers) that are known to cause Occupational Dermatitis,

must be subject to regular skin surveillance. Line managers are responsible for identifying any employees working with such substances, and appointing a responsible person, trained by Occupational Health, to carry out and report on this surveillance every six months.



### Respiratory surveillance (Spirometry)



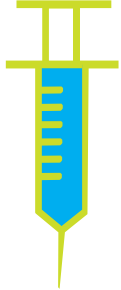
Anyone coming into regular contact with substances known to cause respiratory health problems (for example, dust) must regularly undergo health surveillance by [Occupational Health](#). The surveillance includes a respiratory questionnaire and a lung function test. Obtain further guidance on whether respiratory surveillance is required from the local Health and Safety Adviser.

## Asbestos

If work is carried out in any known asbestos areas (as identified in the Asbestos Management Plan) it must be controlled in accordance to [HSP 22](#). If anyone is potentially exposed to asbestos, it is critical that you notify [Occupational Health](#) as soon as possible. They will add the person's name to the Asbestos Exposure register.

The key health and safety procedures, [HSP 22](#) and [HSI 26](#) on asbestos, provide more detailed information that must be followed when working with asbestos. They are available from the Health and Safety SharePoint Portal.

## Immunisation for working with sewage, sewage sludge and polluted water



All employees who come in contact with polluted waters should be given the “Working with Sewage Green Card” and “Leptospirosis Blue Card”, which are available on the Occupation Health SharePoint Portal [here](#).

Regarding Tetanus & Polio; it is recommended that workers likely to come into contact with sewage and sewage sludge keep their Tetanus and Polio immunisations up to date (every 10 years). This can be provided by the GP free of charge as part of the UK vaccination schedule.

More information can be found in [Working with sewage, sludge and polluted waters](#) on the OH SharePoint page.

## Manual handling

Ensure manual handling activities are carried out with proper control measures in place. The proper control measures are outlined in ‘Risk assessments’ under [Section 3 of the Health, Safety and Wellbeing Manual – Managing Risk](#). To prevent musculoskeletal disorders and back injuries ensure the following:

- Where possible, avoid manual handling activities.
- Where manual handling cannot be avoided, provide appropriate mechanical aids; for example, conveyors, sack barrows and trolleys. For further advice, contact your Health and Safety Advisor.
- If it is necessary to carry out regular manual handling tasks, split the loads or packages to reduce the weight, ensure they are stored at waist height (where possible), and minimise the distance they must be carried.
- If necessary, classify some manual handling tasks as “two man” tasks. Note – these must be clearly identified and communicated.
- Training is provided for all those involved in this work. For further information, contact your Safety Advisor.



Request advice from Occupational Health if anyone suffers from musculoskeletal (bone/muscle/joint) disorders, before starting any manual handling activities. They will provide details regarding the employee's fitness to carry out manual handling activities, and any adjustments or restrictions that may be required to ensure they carry out their work activities safely.

If an employee develops symptoms of a musculoskeletal (bone/muscle/joint) problem, refer them to [Occupational Health](#) as soon as possible. They may also benefit from a course of physiotherapy treatment. Find details on this treatment earlier on in the chapter.

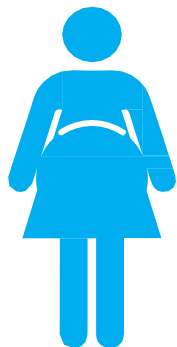
## Display screen equipment (DSE)

All regular users of DSE equipment must:

- Be identified.
- Receive training on how to set up the workstation.
- Complete a DSE assessment via our online platform, Cardinus. Details are outlined under [Section 6 of the Health, Safety and Wellbeing Manual – Managing in the Office](#).

Anyone defined as a regular user of DSE is entitled to an eye test. Find further details on the Eye Care Policy via [Benefits on Tap](#).

## Maternity



Expectant mothers must, as soon as possible, carry out a pregnancy assessment. This is to ensure any potential work-related risks to the mother and baby are identified and controlled. The assessment may highlight the need for adjustments within the workplace.

Find the link to the [Risk assessment for pregnant workers](#) on the Occupational Health SharePoint Portal page. Adjustments must be discussed with the employee. The line manager will monitor these carefully throughout the term of the pregnancy to ensure they are effective, and to make further adjustments, as required.

For further information refer to the HR Section of the Portal which provides comprehensive advice on how to manage maternity within the workplace.

## First Aid

Each location must have the correct coverage of first aiders and mental health first aiders. The required coverage is determined during the assessment of the workplace, and considers a range of factors; for example, the nature of the work, hazards and risks within the workplace, and working patterns. Once identified, and if they have successfully completed the appropriate training, formally appoint first aiders into the role.

Post a list of appointed first aiders and mental health first aiders for the premises on suitable notice boards throughout the office, along with the location of the nearest first aid box.

The health and safety procedure, [‘First aid provision’ \(HSP 39\)](#), provides further guidance on how to assess the required number of first aiders. It also details the qualities a first aider must have, for selection purposes. Access HSP 39 under the Health and Safety SharePoint Portal.



## Lone working

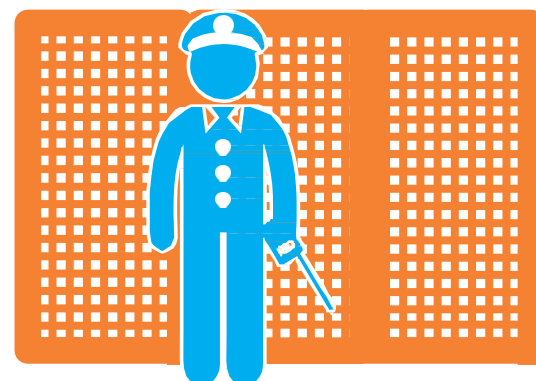
Many members of the team spend some, or perhaps most, of their working-time working alone. This is either because their normal workplace is isolated, or because it is a role requirement. We have a duty to ensure that arrangements are in place for ensuring the safety of lone workers, who are defined as:

**“Employees who work by themselves without close or direct supervision.”**

All lone workers must be issued with a prescribed duty questionnaire (available from the [OH Fitness to Work](#) SharePoint Portal page). The health and safety procedure, [‘Lone working’ \(HSP 8\)](#), provides further guidance on how to:

- Identify lone workers.
- Determine the category of lone workers.
- Arrange medicals.
- Implement risk assessment guidelines.
- Instruct the team on how to set up and use the lone working system.

It also outlines the activities that are regarded as prohibited regarding lone working in Thames Water. HSP 8 is available from the Health and Safety SharePoint Portal.



## Monitoring

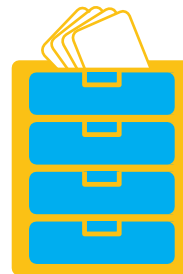
### (SHE 6 series) Active monitoring

As part of the monthly [SHE 6 inspections](#), consider the health of individuals, to ensure they are not exposed to hazards that have the potential for ill health.

## (SHE 1) Reviewing the work safety survey checklist

Review the [‘Work safety survey checklist’ \(SHE 1\)](#) to ensure all hazards relating to health are identified following any changes within the workplace and/or on an annual basis.

Also consider any further training requirements, or if the change involves operating new equipment or plant.



## Managing records

Maintain accurate records of correspondence and assessments of health-related issues.

The Health and Wellbeing process is guided by statutory requirement and also employee health data. Statutory requirements for health surveillance and fitness to work are constantly changing in response to statutory changes. This is updated in our policies and procedures. The Wellbeing process is guided by health data generated through sickness absence management and results from our personal medical assessments. The common health issues are identified and wellbeing plans are made to address these concerns. The impact of initiatives is reviewed through sickness absence data and the following years personal medical assessment data.

In addition, the H&S team will consult with our contractors, supply chain and union representatives on an annual basis to further plan and develop objectives for the following year. The Occupational Health & Wellbeing manager has key responsibility in analysing the health of the workforce and coordinating the consultation sessions with our partners. The communications team will then be consulted to plan a 12 month the health and wellbeing communications plan. The H&S management team and the Head of H&S will work together to finalise the objectives. The progress of the objectives are formally reviewed quarterly with the H&S management team; they are locally reviewed monthly by the Occupational Health & Wellbeing manager.



## Step 4 – Managing Change

Any business change within the workplace is subject to review to assess its impact on health, safety and wellbeing. Typically, change can result in the re-structuring of departments, transfer or removal of posts, or the outsourcing of activities, which may be detrimental to health and safety standards. Accordingly, potential risks must be considered, assessed and, where identified, minimised.

The key health and safety procedure, [‘Management of change’ \(HSP 4\)](#), provides instruction and assistance in recognising and controlling health, safety and wellbeing risks caused by changes in the organisation. HSP 4 is available from the Health and Safety SharePoint Portal.



## Step 5 – Working Long Hours, Tiredness and Fatigue

[Essential Standard ES 25, 'Tiredness and Fatigue'](#), provides guidance for managers, supervisors and those planning and scheduling work activities on how to limit the impact of fatigue. It also provides guidance for those who carry out the work. ES 25 is available from the Health and Safety SharePoint Portal.

### Key Messages:

- Consider fatigue when planning work and shift patterns.
- Complete a risk assessment to review the effects of fatigue on work activities.
- Plan work so that no one is scheduled to work more than 12 hours (excluding handover time). If someone must work longer than 12 hours, discuss this with their manager and complete an assessment accordingly.
- Stand down anyone who shows signs of fatigue.
- Empower employees to stop work if they become tired and fatigued.
- TW has introduced a maximum of 16hrs work in any 24hr period for employees and our supply chain partners should consider their approach to this.

