

Civil Aviation Authority Retired Staff Association (CAA RSA)

Health and Safety Policy

General Statement

The CAA RSA is committed to the Health, Safety and Welfare of its members and members of the public who are involved with its activities. Our aim is to take all reasonable care to ensure that any premises used have a safe environment and any activities that are undertaken are conducted safely.

Members are required to maintain a healthy and safe environment and to report hazards, accidents and dangerous occurrences to the RSA Committee.

This policy will be reviewed regularly and revised as necessary.

Organization and Responsibility

The overall responsibility for health and safety lies with the RSA Central Committee who will appoint a member with specific responsibility for Health and Safety. This member will report to the Committee, at each of its regular meetings, on Health and Safety matters and the policy and procedures will be regularly reviewed and updated.

The Central Committee member with Health and Safety responsibility will ensure that the Local Branch Committees are aware of their responsibilities for the health and safety of their local members, and any members of the public, involved with the branch activities. In addition this member will monitor Health and Safety issues and report to the Central Committee at each meeting.

It will be the responsibility of each Local Branch Committee to take all reasonable care to ensure that any premises it uses are a safe environment, any activities it undertakes are conducted safely and it complies with the procedures. Responsibility for Health and Safety matters of the branch will rest with the chairman unless a member is appointed to this role.

All RSA members and any involved members of the public are reminded that they are responsible for their own Health and Safety and the safety of others and must report any factor affecting health or safety.

Procedures

Breaches of this policy or events where the health or safety of RSA members, or members of the public, were affected or endangered will be recorded as

incidents and will be immediately reported to the Local Branch Committee who will complete an Incident Report Form.

The Local Branch Committee will immediately raise any issues affecting Health and Safety with the Central Committee and will pass completed Incident Report Forms to the Central Committee. Contact will be via the Central Committee member with responsibility for Health and Safety or one of the Committee Officers.

For each incident the Central Committee will assign a responsible person to carry out the necessary follow up action and report back to the Central Committee.

Public Liability Insurance Responsibility

In the interests of its members and any involved members of the public the CAA RSA carries Public Liability Insurance.

It is the responsibility of the Central Committee, Local Branch Committees and any other concerned member to ensure that when a sub-contractor is used, for example a coach company, they carry the same or higher level of Public Liability Insurance as the CAA RSA.

Where an insurance claim may result due to an accident an Incident Report Form must be completed immediately and the Central Committee member with Health and Safety responsibility or the Treasurer informed.

Distribution

This document will be distributed to all Central Committee and Local Committee Members and made available to all members through the local branches. In addition the document will be held on the RSA website.

Report form
CAA RSA H&S INCIDENT/ACCIDENT

Name & Address of person involved

Member of RSA/Guest*

Date & Time of incident

Was medical attention required? Yes/No* (*If yes include in 'brief description' below*)

Did incident occur a) On hired/private* premises b) In hired/private* vehicle

c) Outside at organized outing/event?*

Was the hirer of the vehicle or premises informed? a) Yes b) No c) Don't know*

Was the hirer of the vehicle or premises insured? a) Yes b) No c) Don't know*

If on a premises was it entered in the accident book? a) Yes b) No c) Don't know*

Details of premises, vehicle or location.

A brief description of Incident/Accident.

Names and contact details of witnesses

Action taken

Signature and date.

When complete please forward to - R C Morris, RSA H & S Rep, 31 Besbury Close, Dorridge,
Solihull, West Midlands, B93 8NT. T – 01564773482 E- Robinnimbo@aol.com

* Circle as appropriate.

Please use one form per person involved in Inc/Acc.