

#### **Outcomes**

The signatory of the current health and safety policy will confirm that the facility being assessed meets:

- Health and Safety at Work Act 1974
- Management of Health and Safety at Work Regulations 1999
- Regulatory Reform (Fire Safety) Order 2005
- Current health and safety legislation
- Procedures, so far as reasonably practicable, for the health, safety, and welfare of those who may be affected

## Essential Pre-Assessment Questions (The assessor will require to see evidence of compliance to the following challenges)

## **Health and Safety Management System**

#### **EXAMPLES OF BEST PRACTICE**

Safety system procedures must cover all key activities for staff, customers, and others, including instructions and guidance on the actions required to ensure a safe environment for staff and customers. Good practice models include:

- HS(G)65 Successful Health & Safety Management
- ISO45001:2018 Occupational Health and Safety Management Systems

Processes in place to regularly review and update the procedures and policy systems, including the health and safety management system.

## **Health and Safety Policy Statement**

## **EXAMPLES OF BEST PRACTICE**

The health and safety policy statement should be signed by the person within the organisation responsible for health and safety.

- The policy statement should set out the responsibilities of the organisation and its employees, containing a
  commitment to providing a safe and healthy working environment, with both effective systems and procedures that
  influence the organisation, arrangements, premises, and equipment
- The statement should be regularly reviewed and must consider any significant changes in size and or organisational structures

## **Employers and Public Liability Insurance Certificate**

## **EXAMPLES OF BEST PRACTICE**

The organisation should ensure that current insurance certificates for public and employer liability are in place, and the employer liability certificate should be readily accessible to all employees.

### **Fixed Electrical Installation Inspection Certificate**

## **EXAMPLES OF BEST PRACTICE**

A fixed wiring periodic inspection and test should be carried out in accordance with the 'Electricity at Work Act 1989' and 'Requirements for Electrical Installations (IEE Wiring Regulations BS 7671)', with records maintained on site:

- Annually for swimming pools and fire alarm installations
- Three-yearly for other leisure facilities (including dual-use facilities), theatres and emergency lighting installations
- Five-yearly for the village halls and community centres, residential accommodation, offices, and educational establishments (not open to the general public).

The certificate will describe if the test is satisfactory or unsatisfactory.

An 'Unsatisfactory' certificate will list the actions to be addressed. All Code 1, Code 2 or FI actions should be addressed, or a plan should be in place to address these actions within a reasonable timespan, with evidence of completion held with the original report.

FI is described as 'Further investigation required without delay.' It applies to anything within your fixed wire system that requires further investigation as a matter of urgency.

\*Note: Following the first inspection of a brand-new building, the examiner may reduce or extend the inspection period to a maximum of 5 years. Any extension and the reason why should be recorded on the inspection certificate, and a risk assessment should be completed. Operators should liaise with their insurance company and local licensing authority in relation to licenced premises to ensure their timescales are met.









### **Risk Assessments**

### **EXAMPLES OF BEST PRACTICE**

Risk assessments should be carried out and recorded in accordance with 'Management of Health & Safety at Work Regulations 1999' and be available to all staff. They should be:

- Current
- Suitable and sufficient, with all significant hazards recorded
- Effective control measures in place relevant to the facility
- Formally reviewed on a planned regular basis, as per 'INDG163' or after an accident, incident, near miss or the purchase of new equipment
- Completed for premises, tasks, activities, and people

Risk Assessments related to infectious diseases and viruses, including those identified during a pandemic/epidemic, will be checked and must be regularly reviewed and updated in line with public health guidance. This should include a room-by-room assessment of ventilation in controlling the risk of transmission.

## Fire Risk Assessment (Site-Specific)

#### **EXAMPLES OF BEST PRACTICE**

A fire risk assessment should be carried out by a competent person and recorded in accordance with the 'Regulatory Reform (Fire Safety) Order 2005'. It should consider the following elements:

- Current
- Suitable and sufficient
- · Sources of ignition
- Sources of combustion
- Sources of oxygen
- Fire detection
- Escape routes and evacuation
- Firefighting equipment
- Supporting building plans
- Formally reviewed on a planned regular basis, as per 'INDG163', after changes within the building, incidents, the purchase of new equipment or as per the recommendation within the fire risk assessment

The fire risk assessment will provide recommendations for regular inspection. These inspections should be conducted, recorded and records maintained on site.

## Control of Substances Hazardous to Health (COSHH) Assessments & Data Safety Sheets (SDS)

## **EXAMPLES OF BEST PRACTICE**

Processes and procedures should be created for the safe use, storage, and handling of substances, including chemicals, in accordance with 'Control of Substances Hazardous to Health Regulations, 2002' (COSHH), including the following:

- · Safety data sheets (SDS) documentation provided for all hazardous substances currently in use
- COSHH assessment documentation completed for all hazardous substances currently in use
- Adequate 'Personal Protective Equipment' (PPE) available for appropriate staff
- Chemicals stored safely, including segregation of acids and alkalis
- Containers clearly labelled
- Ensuring that bunds hold at least 110% of the capacity of the chemical stored
- A plan in place to deal with chemical spills and other major incidents

Training records in place for staff handling chemicals, including chemical use, PPE, and emergency action

## **Emergency Action Plan/Procedures**

### **EXAMPLES OF BEST PRACTICE**

Facility-based emergency procedures (Emergency Action Plan) should be developed for all potential emergency situations with documented, defined action to be delivered where applicable. Key areas to consider should include:

- Evacuation for fire, bomb, and chemical spillage
- Structural damage
- Electricity failure

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Gas or chemical leak









- Lost persons
- Lack of clarity in the pool
- First aid

The procedure should be implemented, reviewed and available to staff with a training process in place.

## **Emergency Lighting Test Certificate and Service Record**

## **EXAMPLES OF BEST PRACTICE**

Emergency lighting should be tested for function in accordance with 'Regulatory Reform (Fire Safety) Order 2005', with records maintained on site:

- Monthly statutory checks
- A test of the battery backups (discharge test) was completed
- Annual maintenance and service of equipment undertaken by a trained competent person
- As recommended by the fire risk assessment.

### **Fire Alarm Test Certificate and Service Records**

#### **EXAMPLES OF BEST PRACTICE**

The fire alarm should be tested regularly for function in accordance with 'Regulatory Reform (Fire Safety) Order 2005', with records maintained on site:

- Weekly statutory checks demonstrating a planned approach to checking all call points on a rotational basis
- Six-monthly maintenance and service of equipment undertaken by a trained competent person. 100% of the system should be serviced within twelve months over a minimum of two visits, not exceeding 6 months. \*
- As recommended by the fire risk assessment.
- \* Please note BS 5839-1 Fire detection and fire alarm systems for buildings has been updated (43.2 Periodic inspection and test of the system), now states 'Successive inspection and servicing visits should be undertaken at intervals of approximately 6 months (see Note 1). NOTE 1 It would be acceptable for one inspection, test and service of the system to be carried out any time between 5 months and 7 months after the previous inspection, test and service.'

### Asbestos Survey/Register

### **EXAMPLES OF BEST PRACTICE**

An asbestos survey should be carried out for all buildings built before 2000 in accordance with the 'Control of Asbestos Regulations 2012'. If asbestos is located, a register should be completed, and control measures implemented, including:

- An established process for addressing the management of asbestos, including defining the duty holder
- A regime of regular inspection
- Information for contractors and/or visitors
- Guidance on what to do if asbestos is disturbed
- A plan of the location of asbestos in the building, which is understood by staff.

### **Legionella Risk Assessment**

## **EXAMPLES OF BEST PRACTICE**

A Legionella risk assessment should be carried out by a competent person and recorded in accordance with 'Legionella L8'. It should contain responsibilities (duty holders) and recommendations to reduce the risk of an outbreak, which may include:

- Flushes of underused outlets
- Water temperature checks (less than 20° centigrade for cold, more than 50° for hot)
- Calorifier temperature checks
- Microbiological water tests
- Shower heads descaling
- Chlorination regime
- Tank inspections
- Detailed/accurate schematic drawings of all hot and cold domestic water services

The above inspections/ tests should be carried out, recorded and records maintained on site.

The risk assessment must be formally reviewed regularly and specifically whenever there is reason to suspect it is no longer valid. An indication of when to review the assessment and what to consider should be recorded in the current risk assessment.









This may result from and include:

- Changes to the water system or its use
- Changes to the use of the building in which the water system is installed
- The availability of new information about risks or control measures
- The results of checks indicate that control measures are no longer effective
- Changes to key personnel
- A case of Legionnaires' disease/legionellosis associated with the system

#### **Gas Boiler Service Records**

### **EXAMPLES OF BEST PRACTICE**

Gas boilers should be serviced in line with legislation and manufacturer's instructions, with records maintained on site:

Annual maintenance and service of equipment undertaken by a trained competent person

## **Passenger Lifts and Hoist Examination and Inspection**

#### **EXAMPLES OF BEST PRACTICE**

Passenger lifts and hoists should be serviced in accordance with 'Lifting Operations and Lifting Equipment Regulations (LOLER) 1998' and manufacturer's instructions, with records maintained on site:

- Passenger lifts, six-monthly thorough examination, maintenance and service undertaken by a trained competent person
- Hoists (including pool and disabled) undergo a six-monthly, thorough examination, maintenance and service undertaken by a trained competent person.
- Mobile elevated work platforms should be serviced in accordance with 'Lifting Operations and Lifting Equipment Regulations (LOLER) 1998' and manufacturer's instructions, with records maintained on site:
- A six-monthly thorough examination, maintenance undertaken by a trained competent person.

### Safeguarding

## **EXAMPLES OF BEST PRACTICE**

Safeguarding policies, procedures and training are in place to ensure a safe environment for children, young people, and vulnerable adults, with evidence available on site:

- Safeguarding Policy
  - o Up to date and reviewed, which includes localised reporting processes for incidents and potential concerns
  - o Evidence that relevant staff have been trained on the policy
- Designated Safeguarding Lead
  - o Designated safeguarding lead(s) appointed and are known to staff
  - o Designated safeguarding lead(s) contactable whenever the centre is open
  - Designated safeguarding lead(s) aware of their responsibilities
- Safe Recruitment Practice
  - Risk assessment(s) in place for safeguarding children and vulnerable adults, which is used to determine the centre's/ organisation's eligibility policy, including Disclosure and Barring Scheme (DBS) ('Disclosure Scotland' in Scotland) policy
  - New applicants are DBS checked if eligible, and all available information is risk-assessed to judge the suitability of applicants
- Clubs and External Organisations
  - There is a process in place to ensure clubs have safeguarding practices, including a safeguarding policy, current insurance, appropriate coaching qualifications and personnel DBS checked if eligible

\*Note: Copies of DBS certificates can only be held under certain circumstances and must be retained securely under the control of a designated person only. In general, centres should not have certificates or copies of certificates for staff or external club coaches. Centres/ organisations cannot hold copies of DBS disclosures for external clubs and other hirers; this is only permitted for those employing or deploying staff (paid or volunteers) and not someone simply providing a venue for activities. However, it is reasonable for the venue to require confirmation from the club/ hirers that they have a safe recruitment practice (amongst other arrangements) in place and that all eligible coaches, etc., have been subject to a DBS check and assessment through the club/ organisation/ NGB. Management might check this compliance in a variety of forms, including signed agreements, signed terms and conditions, spot checks or audits.







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## **Personal Safety and Harassment Policy**

### **EXAMPLES OF BEST PRACTICE**

Evidence of a personal safety and harassment policy (whether separate to, or contained within policies such as a Code of Conduct, Safeguarding or an Equal Opportunities Policy) that are made available to all staff and members, outlining guidelines for everyone within the facility, clearly identifying acts of harassment and intimidation with defined reporting steps for breaching, and support for staff with procedures and training on how to respond to issues and concerns raised.

- Evidence of a policy/policies provided to staff and to customers detailing your organisation's zero tolerance of intimidation or harassment, including sexual harassment within your facilities.
- Evidence of two training records or inductions demonstrating that the staff have been trained regarding issues of harassment and intimidation, such as sexual harassment arising in the facility, how to identify, report and escalate.

ukactive and Sport England's This Girl Can campaign as part of the Safer Spaces to Move project have created a set of resources and guidance for operators that can be used to help create the procedures and policies (such as a code of conduct and personal safety and harassment policy) to better enable facilities to respond to sexual harassment and intimidation, as well as access to training to support staff. You can find these resources in the Safer Spaces to Move resource hub:

https://saferspacestomove.ukactive.com/





