



BE SAFE

BACKGROUND

In 2013 a report was commissioned by BEVA into work related injuries to equine practitioners. The findings showed that being an equine vet is one of the highest risk civilian occupations and it was clear more guidance was needed so that equine practitioners and those affected by their action could carry out their tasks with horses more safely.

OBJECTIVES

The objectives of this document are to provide guidance for those handling and involved with horses; to make workers aware of the steps that you can take to make it as safe as reasonably possible and how to risk assess a situation and limit the risk that you and others are exposed to.

SCOPE

The scope of this document is to educate all stakeholders on the risks associated with current practice in order to challenge the prevailing attitudes/culture. It will also outline how to make "on the spot" or "mental" risk assessments when approaching each case as well as written risk assessments. It will identify the major risks and what to address when assessing them.

WHAT THIS DOCUMENT DOES NOT COVER

This document is not meant to provide an exhaustive list of risks or the procedures that need to be assessed.

These need to be carried out by the practice by someone with personal knowledge of the tasks to be undertaken and with some Health & Safety experience or training.

Nor is this document intended to cover all the Health & Safety legislation that may apply to your business.

Further guidance can be found on the HSE website: www.hse.gov.uk

STOP & THINK



MENTAL / ON THE SPOT RISK ASSESSMENTS

Although this document explains how to carry out a risk assessment, one of the key points is that the procedure of risk assessment is not just a paper exercise it is also a mental process that needs to be carried out in the field.

Practitioners and staff need to consider if your practice policy is right – stop and think!

Although written risk assessments are important the most important thing is to consciously review whether these apply to an individual case – are these steps carried out in a practical way.



INTRODUCTION

Horses can cause severe injury even when undertaking routine procedures and there are many steps that can be taken to reduce the risks. Much has been said with regards to whether vets will have to wear protective headgear or body protectors for all tasks in future and this is not the conclusion you should make from this document. Headgear will only protect part of your head once the incident is happening, it much more important to try and prevent that incident from happening in the first place by implementing control measures at an earlier stage. Only if it is not possible to implement the control measures or even after implementing the control measures if the risk is considered too high, should Personal Protective Equipment be considered; it is your last line of defence not your first port of call to reduce the risks.



The key things to take out of this document are to challenge the current perceptions, to do on the spot risk assessments as well as ones on paper, what other control measures can help make the task safer and when to stop the task if it's become too dangerous

PERSONAL PROTECTIVE EQUIPMENT

PPE is your last line of defence not your first port of call.

RISK ASSESSMENTS

The Management of Health and Safety at Work Regulations 1999 contain the requirement to carry out a 'suitable and sufficient' general assessment of risk. You must therefore assess the risks arising out of your work activity or workplace conditions to which employees, self-employed persons and others, such as horse owners and their grooms, are exposed.

Identifying hazards and assessing the risks they create is essential for good management (not to mention required by law!). Unless you know what hazards exist on your premises or during your tasks, and the scale of risk they present, you cannot know whether they need to be controlled or decide how they should be managed.

Risk assessments should be carried out by a 'competent person', that is someone with the necessary skills, information, training, industry knowledge and experience, plus other qualities required to perform a suitable and sufficient assessment of the risks.

They will also require a system, such as this one, to work to and adequate time in which to perform the task.

This assessment of risk is nothing more than a careful look at what activities or items in your business could cause harm to people. You will need to decide what measures you should take to comply with your legal duties, including the Health and Safety at Work Act 1974 and the more specific duties elsewhere (such as welfare conditions etc.). Once you have decided the level of risk, you need to put in place necessary preventive and protective measures.



WHEN DID YOU REVIEW YOUR RISKS?

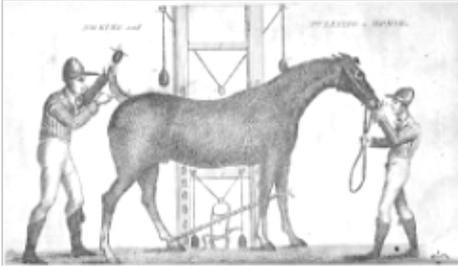
Does your current documentation need to be reviewed in light of the injury survey findings?



KEEP IN MIND

HAZARDS

A 'hazard' could be an unsafe activity, equipment or an unsafe condition - anything that can cause harm (eg. The horse, specific veterinary procedures, damaged tack, chemicals, electricity, manual handling etc.)



RISKS

'Risk' is the chance (big or small) of harm actually being done

KNOWLEDGE

Your knowledge of what goes on at your practice or off site is essential to making a useful assessment

OBJECTIVE

Assessing risks is not an end in itself. The objective is to consider what protective measures are needed and to act to put them in place.



FACTS

7-8 Injuries

Over a 30 year working life an equine vet can expect to sustain between seven and eight workplace injuries.

23%

23% of injuries require hospital treatment

44%

44% of injuries result in time off work.

RISK ASSESSMENTS - PROCESS

The process is known as 'risk assessment' and, essentially, your practice's working procedures should reflect your risk assessments.

Risk assessment is a mental process: you need to think about what you do and how to do it safely. Don't be put off by the phrase; it's just about carrying out the following steps:

- **Look** for the hazards
- **Decide** who might be harmed and how
- **Evaluate** the risks arising from the hazards and take action to reduce or control them
- **Record** your findings i.e. what you are going to do to control the risks
- **Review** your assessments and revise if necessary i.e. if you have reason to believe that they are no longer valid (after an accident?) or there has been a significant change in the activity, conditions or personnel.



STEP BY STEP

STEP 1 LOOK FOR THE HAZARDS

LOOK

Look around the workplace and watch how people work. Look at facilities, tasks, equipment, substances etc.

THINK

Use your experience of the industry and the tasks being undertaken - records of past incidents, accidents, health problems and near misses should help

TALK

Ask staff what they think - they may be aware of hazards that you are not

CHECK

Read manufacturers' instructions and other information, including Industry / HSE guidance; the aim is to spot significant hazards. Every business is different and what you consider significant at your practice needs to be taken into account. There is no dividing line between what is and isn't significant - you must decide relative to your workplace.

TRIVIAL ACTIVITIES

Trivial activities and risks, or those parts of everyday life like sweeping up can be ignored.

STEP 2 WHO MIGHT BE HARMED AND HOW

Identify the people who could be harmed, and how many: eg employees (particularly new or untrained, casual or part-time staff), contractors, visitors, members of the public and clients.



STEP 3 EVALUATE THE RISKS ARISING FROM THE HAZARDS AND TAKE ACTION TO REDUCE OR CONTROL THEM

- Look at the likelihood of accident or injury arising from the task or site
- Plan what needs to be done and when to reduce this risk
- Make your plan realistic and achievable
- Tackle the most important problems first

THINK

- **What would be the worst possible consequences of an accident involving that hazard?**
- **Could the hazard be eliminated? Is the job necessary, or could it be changed to make it safer?**
- **Is the procedure essential**, are there safer alternatives (albeit more expensive)?
- **If the job cannot be eliminated or modified, how can it be made safer?** Can you use stocks? Can you sedate the horse? Would a more experienced handler reduce the risk?
- **What training and supervision is needed?** Should there be specific training involving horse handling and behaviour training?
- **Are any staff ignoring safety rules**, thus putting themselves or others at risk? Are staff using mobile phones while carrying out procedures or driving? Do you allow staff to flout safety rules or turn a blind eye to unsafe practices?
- **Do you need to provide additional personal protective equipment (PPE)?** e.g. Non-latex gloves for handling chemicals or wearing protective headgear etc.
- **Are there staff on site who need special consideration?** Are there work experience students, young workers or those with a disability or special needs?

STEP 4 RECORD YOUR FINDINGS

To comply with practice standard scheme requirements or if you have five or more individual employees, full time or part time (this can include the self-employed), you must record the significant findings of your risk assessment stating what you will do to control the risk e.g. practice rules, systems of work, procedures and what you need to do to make the workplace safe.

Risk assessments can be written in a number of different ways. Some people like to use columns for each of the five steps whilst others write a paragraph or two for each assessment and form a list of practice safety rules. What matters is that it has a clear outcome stating what you mean to do

BUT it is important to understand that an HSE Inspector's primary concern is that you have thought about the hazards and risks and acted upon your conclusions. The documentation is there as supporting proof. It is also invaluable for instructing staff on the work systems in place at your practice.

Many employers with four or fewer staff prefer to record their findings. This shows that the assessments have been carried out, and can be used to give to new staff.

STEP 5 REVIEW AND MONITOR YOUR ASSESSMENTS AND REVISE IF NECESSARY

You will need to review your assessments (and your rules and procedures) to reflect any changes to the task concerned or in respect of any equipment used. Reviews will also be needed if there have been any significant changes to the person doing the job - for example if the job holder becomes pregnant, or disabled in any way.

REVIEW THEM NOW based on the findings of the survey.



HORSE HAZARDS

This is not intended to be an exhaustive list, and employees may consider that other hazards exist, in which event the person responsible for safety should be notified so as they can be assessed and, where possible, appropriate steps taken to reduce the risk.

Due care and attention should however be shown to the horses at all times.

Horses are a major hazard and can be a risk in the following ways.

- **Kicking** – whether predictable or otherwise, horses do kick and caution should be taken at all times when leading, catching, holding or otherwise handling horses to avoid placing yourself where you can be kicked from either the front or hind legs.
- **Biting** – again, whether predictable or otherwise, horses do on occasions bite, and again, care should be taken to stay out of reach or have the horse suitably restrained.
- **Rearing/bucking** – horses may rear/buck without any warning, and again precautions should be taken as far as reasonably practicable to avoid any injury arising from that whether riding or handling the horse from the ground.
- **Falls** – horse can react very quickly to individual stimuli and to a combination of events and can lead to falls by the rider from several metres or for the horse to fall/slip over.
- **Loose horses** - these are predictable only in that they are unpredictable and can gallop blindly into stationary objects and people.
- **Barging/crushing** – being knocked over or being crushed against walls or other objects
- **Head butting/being hit by the head** – either from above when horses bring part of their head into contact with you or deliberately using their head to knock you out of the way as a reaction.
- **Zoonoses/pathogens** – Infectious diseases horses may carry

PERSONNEL



OTHER CONDITIONS

Other conditions that may need assessing depending on the specific situation may be the difference between working outdoors compared to working indoors (climate, weather, terrain), specifics relating to the horse (age, temperament, experience, distress levels), what the conditions are (near a main road, work area access, lighting), who are the likely handlers (professional stables, young persons, what experience they have, what they're wearing or do you need to take assistance with you) or are other emergency services or assistance required (lifting equipment, road control, horse transport).

The veterinary surgeon undertaking a procedure is responsible for consequences resulting from your actions. You are responsible for ensuring that those handling or riding horses are competent. This includes clients as well as your own staff.

All employees must be trained in the correct handling of horses and should not attempt to handle any horses without such training. Regular, day-to-day tasks involving the normal care and welfare of the horses plus any treatments shall be carried out in accordance with the practice's standing instructions. Simple handling tasks may be done in the horse's own stable with adequate assistance but for more involved tasks the horse must be correctly and adequately restrained.

Employees should make sure that the area in which the task is to be carried out is suitable for the task, and free from obstructions. Some tasks which may be thought likely to cause the horse to resist the procedure, or act in an excitable or dangerous manner, may require permission, additional restraints or assistance as necessary. Consultation with a senior member of the practices staff or the horse's owner may be necessary.

Only those with adequate experience should ride a horse which is known to be excitable or temperamental. It is the responsibility of each employee to ensure they ride with the appropriate equipment and safety clothing.

Suitable tack should be used depending on the risk. A head collar may be enough to restrain a horse in a stable or during basic examinations but further restraint may require the use of a bridle, chifney, twitch, stocks, sedation etc.

Lungeing of young/inexperienced horses and trotting up should only be carried out in a defined area for lungeing or suitable area for trotting up by an authorised person. It is best practice to wear properly fitting protective headgear and gloves while lungeing.

The owner should be consulted prior to stabling a horse at your premises. Any horse that has a vice or temperament problem that is staying at your site should have this indicated by a prominent warning sign, and access limited to experienced personnel only.

WHEN TO SAY NO

you need to consider when to say no. When the situation is too dangerous or risky to continue and when you have to bring a horse in to the practice for safety reasons.



PERSONAL PROTECTIVE EQUIPMENT (THE OTHER PPE)

The following PPE can be considered depending on risk assessments but this is the last line of defence, not your first port of call.

HEADGEAR

Protective headgear should be worn by staff as appropriate that is correctly fitted and secured. These may be skullcaps, riding hats or any other protective helmets. They should be inspected annually as a minimum by an appointed member of staff and if there has been any impact or the rider has suffered concussion then the skullcap should be replaced. It is advisable to wear protective headgear when carrying out higher risk tasks as spelt out below. If in doubt wear a hat. Managers and partners are also required to wear headgear when applicable.

BODY PROTECTORS

Body protectors should be worn when appropriate or as spelt out in the risk assessment for that task and should be correctly fitted and secured. It is recommended that the body protector should be replaced at least every 3 years and checked for dents immediately after an accident. They should be made available for other procedures as appropriate.

The above items are classed as PPE (Personal Protective Equipment) and must be made available free of charge by the employer for use at work only.

Below are other items that may be deemed suitable, advisable or PPE depending on the risk assessments:

GLOVES

It is advisable to wear gloves when lungeing and leading. Gloves should also be worn when handling chemicals or dealing with animals with infectious or contagious conditions.

GOGGLES/VISORS

To protect eyes when handling certain chemicals or carrying out certain dental procedures.

FOOTWEAR

Suitable boots with smooth sole and heel should be worn at all times when mounted. Wellington boots or other ribbed soled footwear are not considered suitable footwear when mounted. Flip flops, sandals and fashion shoes are not deemed suitable to wear when handling horses on the ground. Steel toe capped boots or solid leather boots are deemed suitable for handling horses on the ground.

EAR PLUGS/PROTECTORS

To protect from noise from certain equipment.

OVERALLS

Should be worn whilst doing certain tasks and during handling of chemicals etc.

DUST MASKS

May be used when working with hay, straw or shavings or powdered chemicals. They can also be used when using certain dental equipment.

REFLECTIVE CLOTHING

When horses are being exercised or trotted up in poor visibility, particularly on roads, then the riders/handlers should all wear reflective tabards/fluorescent clothing.



OTHER CLOTHING ETC

Other clothing related issues that may need further consideration include:

- Unsuitable jewellery (eg flamboyant earrings, rings, bracelets, brooches) must not be worn when staff are working with horses.
- Long hair should be tied back or secured so as not to impair visibility or to risk entanglement with equipment, tack of horses.
- Soaps and perfumes which sexually arouse colts must be avoided
- Wounds and cuts should be covered when working with horses



HIGHER RISK TASKS AND EXAMPLE CONSIDERATIONS

The following is a list of procedures that research has shown has the highest risk and are the most likely cause of injury. The list is not exhaustive and other precautions as well as those relating to the horse have been listed that may have a bearing on the task. The hazards and risks may be individual or any combination of hazards could be present that may all need assessing. Every situation will be different:

GENERAL HORSE HANDLING IN & OUT OF STABLE; LAMENESS EXAMINATION, TROTTING UP, ETC.

Hazard: horse (kick injuries, bites, stamping/crush injuries, head butts, zoonoses), horse falling/slipping over, other horses in the area, horse getting loose, vehicles (if trotting up in the road/yard), slips, trips and falls.

Example Control Measures: Find out any information relating to the horse (age, temperament etc) prior to the task. Ensure horse is suitably restrained (headcollar, bridle, chifney) and the handler is competent to handle the horse. Tack is in a suitable state of repair for the task. Remove horse from the field if with other horses. Avoid trotting up on a public road or stop traffic/make sure you have a good view of oncoming traffic/do not trot horse up past moving traffic. Do not lunge on a slippery surface. Always take protective headgear with you as minimum PPE. Ensure you have suitable footwear and other clothing on. Ensure you are in a suitable area, free from trip hazards and enclosed if possible. Handler stands same side as the vet. Ensure those not needed for the task are kept out of the way. Use sedation if appropriate for the task and temperament of the horse. High levels of hygiene observed. Consider the kick zone by the horse.

MINOR SURGICAL PROCEDURE, INTRA ARTICULAR INJECTION, SARCOID OR OTHER SKIN PROCEDURE, ABDOMINAL TAP

Hazard: horse (kicks, bites, stamping/crushing, head butts), sharps/needles, chemicals (from medicines, anaesthetics etc.), Electrical (from clippers etc)

Example Control Measures: Horse handling guidance plus - Position yourself so as not to get kicked, ensure needle is covered by the sheath unless actually injecting. Ensure you are not in a position where you or the handler can have sharps accidentally knocked into you. Dispose of sharps into a sharps container. Consider using stocks if available. Consider whether to have a handle on the scalpel (unless the horse is under GA). COSHH assessments

DISTAL NERVE BLOCK, FEMALE REPRODUCTIVE PROCEDURE, STANDING CASTRATION, MALE REPRODUCTIVE EXAMINATION, FOALING RELATED EXAMINATION, RECTAL EXAMINATION

Hazard: horse (kick injuries, stamp/crush injury), sharps/needles, chemicals,

Example Control Measures: see horse handling guidance plus - further restraints (twitch, stocks), ensure needles is covered by the sheath unless actually injecting/dispose of needles and sharps in sharps box, PPE (skullcap and/or body protector).

ENDOSCOPY/GASTROSCOPY/DENTAL PROCEDURES /NASO-GASTRIC INTUBATION

Hazard: horse (kick injuries, head butt, crush/stamp/bite) manual handling (equipment), electrical, trip hazards, sharps (horse's teeth, tools), Chemicals (sedatives). Dust/aerosolised dental tissue.

Example Control Measures: See horse handling guidance plus - PAT testing of electrical equipment, circuit breakers, area to be kept clear of trip hazards. Do not stand directly in front of horse. Additional restraints (twitch, (may be a hazard in its own right) stocks, gag) PPE (skullcaps). Masks and goggles for certain dental procedures. Do not put hand in horse's mouth unless it has a gag on to feel teeth. Consider use of protective head gear and sedation when using a gag.

LAMENESS RELATED RADIOGRAPHY

Hazards: Horse (kick injuries, head butt, bites, stamps/crush) Radiation, electrical (equipment), manual handling, trip hazards

Example Control Measures: See horse handling guidance plus - Radiation protection systems and supervision in place. PAT testing of electrical equipment, circuit breakers, area to be kept clear of trip hazards, additional restraints (twitch, stocks). PPE (gown and gloves). Cassette and generator placement. Clear communication.

PERFORMING EUTHANASIA AND GENERAL ANAESTHESIA AND RECOVERY

Hazard: Horse (falling unpredictably), kick injuries including after being euthansed, stamp, crush, bite), firearms, Chemicals (sedatives), Noise.

Example Control Measures: See horse handling guidance plus - good communication. Bystanders to be kept at a minimum and behind the vet. Handler hands horse to the vet immediately before euthanising or stands behind vet. Firearm protocols are in place. PPE (hearing protection).





SUMMARY

It is not always suitable to do a Risk Assessment on paper that will cover all tasks in all situations, particularly in the field, so practitioners need to be much more proactive in mentally assessing the risks for tasks, if necessary making a conscious risk assessment in the field, before they carry out a task. They need to recognise that alarm bells are ringing if the risk is too high and that if the assessment falls into the red area (as per the risk/priority matrix above) then further measures are needed to be put in place. Hopefully this document will help guide you through the procedures for written and dynamic risk assessments allowing you to take practical steps to reduce the risk and prevent an accident happening.

Health & safety needs to come from the top down. The director/partners need to ensure that their support filters down through the hierarchy of staff. It's not just a case of passing this information on to the next person in the line it's a case of ensuring people are following the guidance, supporting staff when they decide further measures are needed (perhaps when a vet decides a horse needs to be brought in to a more controlled area when the client doesn't want it, if the vet has safety concerns); ensuring clients understand that the vet's safety is paramount and that you draw up a policy that can be supported by the entire practice if there's a dispute.

The risk assessments that you draw up need to be followed in the field and in practice but are not fixed, stationary documents. They're dynamic procedures that will constantly evolve depending on specific situations and your own experiences.

Support the risk assessments with site rules and policies that can be highlighted to new staff and implemented across the board.



LIKELIHOOD	5	Very High (Fatality / Business closure)	5	10	15	20	25
	4	High (Major injury / damage, Lost time business interruption, disablement)	4	8	12	16	20
	3	Moderate (Lost time injury, illness, damage, lost business)	3	6	9	12	15
	2	Slight (minor injury / damage / interruption)	2	4	6	8	10
	1	Negligible (delay only)	1	2	3	4	5
			Improbable / very unlikely	Unlikely	Possible / may happen	Likely	Almost certain / imminent
			1	2	3	4	5
SEVERITY (CONSEQUENCE)							

SUMMARY		SUGGESTED TIMEFRAME
12-25	High	As soon as possible
6-11	Medium	Within next 3-6 months
1-5	Low	Whenever viable to do so



RISK ASSESSMENT

TASK TITLE:		ASSESSMENT NUMBER:	
DATE:		TOTAL RATING:	
TASK DESCRIPTION:			
PERSONS AT RISK:			
EMPLOYEE CASUAL YOUNG PERSON ALL		PUBLIC CONTRACTOR TRAINEE OTHER (client or their staff)	
HAZARDS:			
WORST CASE SENARIO:		MEASURES ALREADY IN PLACE:	
5. VERY HIGH 4. HIGH 3. MODERATE 2. SLIGHT 1. NEGLIGIBLE			
		RATING:	
LIKLEHOOD:		MEASURES NEEDED TO PUT IN PLACE:	
5. IMMINENT/ALMOST CERTAIN 4. LIKELY 3. POSSIBLE 2. UNLIKELY 1. IMPROBABLE			
		RATING:	
ASSESSOR	SIGNED	DATE:	REVIEW:

