



Unit 9 RIDDOR in Social Care Services

Learning Outcomes

By the end of this unit the learner will be able to:

- ✓ Discuss the three main categories of falls classified under RIDDOR
- ✓ Understand the precautions that must be taken to safeguard care home residents
- ✓ Identify which accidents and injuries should be reported under RIDDOR

Unit 9

RIDDOR in Social Care Services

Accident data continue to highlight the serious issue of service users falling from windows or balconies in health and social care premises. These often result in fatal or serious injury and there have been several successful prosecutions by HSE following accidents to vulnerable people.

Categories of Accidents

There are three broad categories of falls:

- Accidental falls;
- Falls arising out of a confused mental state;
- Deliberate self-harm.

Accidental falls can occur where a person is sitting on a window sill, or where the sill or banister height is low and acts as a pivot, allowing them to fall. These are rare but can affect employees as well as service users.

Many reported accidents involve people in either a temporary or permanent confused mental state, often caused by:

- Senility or dementia;
- Reduced mental capacity;
- Mental disorder;
- Alcohol or drugs (both prescribed and illegal).

In some cases, individuals try to escape from an environment they perceive to be hostile, or use a window, believing it to be an exit, unaware that they are not at ground level. Other factors may include unfamiliarity with new surroundings (eg short stays at respite care centres), uncomfortable temperatures, broken sleep and medication effects. Deliberate self-harm is a recognised risk for people with certain mental health conditions. Although not reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), suicides can still be a matter for investigation.

What the Law says

The following legislation applies to employers' duties to service users:

- Health and Safety at Work etc Act 1974, section 3
- Management of Health and Safety at Work Regulations 1999, regulation 3

Complying with the following legislation, dealing with employers' duties to employees, will also help reduce the risk to service users:

- Workplace (Health, Safety and Welfare) Regulations 1992

Regulation 14 applies to glazing material and where necessary requires windows to be constructed of safety material (eg safety glass) or otherwise protected against breakage (eg by means of a screen or

barrier). The Approved Code of Practice (ACOP) states that if a person going through the glass would fall from a height, and a screen or barrier is used, then it should be designed to be difficult to climb.

Regulation 15 applies to risks associated with windows, skylights and ventilators. Where there is a risk of falling from height, the ACOP requires provision of devices that prevent the window opening too far (eg window restrictors). The bottom edge of open able windows should be at least 800 mm above floor level, unless there is a barrier to prevent falls.

Other Legal Requirements

Fire safety

Residential care premises, or rooms or homes owned within the care facility, should have an evacuation plan and suitable means of escape. Fire safety guidance for residential care premises states that using windows as a means of escape is not normally acceptable and should only be considered in exceptional circumstances.

Building Regulations

Building Regulations do not require windows to be fully open able in every room within care or nursing home settings. They refer to the need for suitable limiters or guarding for windows above ground floor where there is a risk of falling.

What you need to do

Risk Assessment

To adequately manage the risk of falls from windows or balconies, the care provider needs to assess the premises and service users. Where assessment identifies that individuals are at risk from falls then adequate arrangements should be in place.

This should include assessing the risk that furniture, or other items, may enable them to climb over barriers, or access windows which might otherwise be inaccessible.

Control Measures

Suitable controls may include:

- Fitting adequate window restrictors;
- Ensuring balconies have edge protection that is sufficiently robust, and of suitable design (including height, and the size of any openings in it), to prevent accidental falls;
- Fitting an adequate screen or barrier to prevent service user access to a window or balcony edge;
- Restricting access to upper floors.

Window Restrictors

Where vulnerable people have access to windows large enough to allow them to fall out and be harmed, those windows should be restrained sufficiently to prevent such falls. Window restrictors should:

- Restrict the window opening to 100 mm or less;
- Be suitably robust to withstand foreseeable forces applied by an individual determined to open

the window further;

- Be sufficiently robust to withstand damage (either deliberate or from general wear);
- Be robustly secured using tamper-proof fittings so they cannot be removed or disengaged using
- Readily accessible implements (such as cutlery) and require a special tool or key. Please note that 'safety restricted hinges' that limit the initial opening of a window can be overridden without the use of any tools and are not suitable in health and social care premises where individuals are identified as being vulnerable to the risk of falls from windows.

Care providers should also:

- Ensure the window frames to which restrictors are fitted are sufficiently robust;
- Consider any impact on the comfort of service users from reduced natural ventilation and provide adequate cooling where necessary (eg high-level and/or restricted aperture ventilation, fans or air conditioning). The NHS has produced guidance⁴ on dealing with extreme heat and heat waves.

Balconies

Where assessment identifies that service users are at risk of falling, then sufficient protection should be provided to prevent them from accessing balconies or climbing over the balcony edge protection. This should take into account furniture or features with footholds which may allow access over the barrier (eg chairs, tables, plant pots, walls etc).

Restricting Access to upper Floors

Where service users are at risk of falling, the care provider must decide whether to apply protective measures throughout the premises, or to ensure that they only have access to safe areas, for example the ground floor.

Maintenance

Maintenance must ensure that all safety fixtures and fittings are functioning effectively and their performance has not deteriorated as a result of use, wear or tampering.

Training

Adequate training and supervision should be provided to ensure that staff understand the risks, the precautions required, and the need to report any defects or concerns to a responsible person.

Further Reading:

- ✓ First Aid Manual 11th Edition: Written and Authorised by the UK's Leading First Aid Providers Flexibound – 1 July 2021 by DK
- ✓ Health and safety in care homes – 1 Jun. 2014 by Health and Safety Executive (HSE)