



St Clears Town Council

Volunteer Policy and Procedures

Introduction

1. This document sets out the policy and procedures relating to the engagement and management of volunteers in activities authorised by St Clears Town Council. The Town Council recognizes that volunteering can benefit the council, the community, and the volunteers themselves.

Policy

2. The Town Council maintains a list of volunteers (name and address, telephone number and/or email). Volunteers are asked to notify the Town Council of any changes to those details. If volunteers no longer wish to volunteer, they should contact the Clerk to have their details removed from the Volunteer List. The details included in the Volunteer List are presented at Annex A.
3. Volunteers must be competent to carry out a role. The nature of skills required will depend on the activity.
4. If required, appropriate training will be provided in advance of the volunteer working on site. The minimum level of training should be sufficient to ensure maintenance of the health and the safety of volunteers and any people who might be affected by the work, as far as reasonably practicable.
5. Volunteers should be informed about the task and its purpose, health, safety, and supervision arrangements before commencement of work.
6. All works undertaken by volunteers takes account of the Health & Safety at Work Act.
7. Volunteers working at the sole request of and under the sole control of the Town Council will be insured under the Town Council's Public Liability and Employers Liability cover.
8. Volunteers should only carry out tasks allocated to them.
9. Prior to work commencing, a visual inspection of the site must be carried out to ensure that there are no obvious hazards. These inspections are to be recorded.
10. There should be a method of communication for emergency purposes.
11. Volunteers must have due regard to the fact that they are carrying out authorised work on behalf of the Town Council and as such are representing the Council, in terms of both the quality of work and possible interaction with the public.
12. If a volunteer raises a complaint that cannot be resolved at the time, then a complaint should be instigated in accordance with St Clears Town Council's Complaints Procedure.
13. A copy of this policy must be given to volunteers the first time they undertake work on behalf of the Town Council. The policy will be re-issued to volunteers if any material changes to the policy are made.

Procedures

14. A risk assessment should be undertaken before commencement of work. The Town Clerk is to receive a copy of the risk assessment. An example Risk Assessment is at Annex B.
15. Volunteers must undergo an induction briefing appropriate for the task(s) being undertaken. This

should include a description of the work to be undertaken and known issues and risks associated with the site.

16. Volunteers will be expected to sign the briefing sheet, showing that they have received an induction brief, they understand the nature of the work, they recognize the risks associated with the task and agree to comply with instructions provided during the induction brief. This document is not intended to form a contract. Volunteers will also be expected to confirm that they do not have any medical issues that would put either them or other volunteers at risk.

17. On completion of the work, the supervisor is to forward the completed induction brief to the Town Clerk with a completed summary of the work undertaken. Retention of induction briefs will allow the Town Council to record work and ultimately acknowledge the contributions to the community made by volunteers.

18. An example Induction Brief and volunteer sign-up sheet is at Annex C.

St Clears Town Council – Volunteer List

The St Clears Town Council Volunteer List is maintained by the Town Clerk. All information will be kept safe and confidential.

It is essential that a volunteer advises the supervisor of an activity or the Town Clerk of any illness or ailment that could put either themselves or other volunteers at risk of either injury or harm, while working on a task.

Where a volunteer can no longer support the community, they are to contact the Town Clerk requesting their details are removed from list at the earliest opportunity.

Your Contact Details	
Name:	
Address:	
Home phone:	
Mobile:	
Email:	
Signature:	Date:

ANNEX B TO ST CLEARS TOWN COUNCIL VOLUNTEER POLICY & PROCEDURES

DATED JUNE 2023

Litter Pick Risk Assessment for St Clears Town Council

No	ITEM	HAZARD	THOSE IN DANGER	Risk Rating before control measures			MEASURES /COMMENTS	Risk Rating after control measures		
				SEVERITY 1-10	LIKELIHOOD 1-10	RISK RATE		SEVERITY 1-10	LIKELIHOOD 1-10	RISK RATE (RESULT)
1	Passing Traffic	Be aware of traffic on the roads and road safety.	Participants	8	6	48	Briefing at the start of the Litter Pick by the supervisor. Participants access restricted to pavement and footpaths. High visibility vests to be supplied and appropriate traffic warning / controls to be utilised.	8	2	16 (A)
2	Hygiene	Cuts, grazes, germs	Participants	4	4	16	Briefing at the start of the Litter Pick by the supervisor Protective Gloves to be worn. First Aid Kit to cover cuts however minor with tape following consultation as to allergies to tape etc. Warn re avoiding rubbing mouth and eyes whilst working. Wash hands and forearms before eating and drinking, etc or going to the toilet.	2	2	4 (A)
3	Slips, Trips, and Falls	Slips strains, trips, and falls due to working on grass verges, lifting heavy objects, working near kerbs	Participants	6	4	24	Briefing at the start of the Litter Pick by the supervisor. Heavy items will not be moved but will be identified and details of location to be recorded then reported by the supervisor/Clerk to the correct Unitary Council Department	6	2	12 (A)

No	ITEM	HAZARD	PERSONS IN DANGER	Risk Rating before control measures			MEASURES /COMMENTS	Risk Rating after control measures		
				SEVERITY 1-10	LIKELIHOOD 1-10	RISK RATE		SEVERITY 1-10	LIKELIHOOD 1-10	RISK RATE (RESULT)
4	Hazardous Waste	Syringes, liquids in bottles and gas canisters etc	Participants	6	4	24	Briefing at the start of the Litter Pick by the supervisor and any items to be identified and details of location to be recorded then reported by the organiser/Clerk to the correct Unitary Council Department Gloves will be issued to participants	4	2	8 (A)
5	Fly Tipping	Waste too heavy or too high volume – unsuitable for manual handling	Participants	4	3	12	Briefing at the start of the Litter Pick by the supervisor and any items to be identified and details of location to be recorded then reported by the supervisor/Clerk to the correct Unitary Council Department	4	1	4 (T)
6	Adverse Weather	Risk of sunstroke and sunburn from hot weather. Risk of trips and slips in wet weather.	Participants	3	3	9	Consider weather forecast before confirming litter picking event. Wear appropriate clothing/hat/footwear. Drink plenty of water. Take suitable rest breaks.	2	1	2 (A)
7	Other Dangers	Giant Hogweed Skin irritation, rashes blistering	Participants	2	6	12	Briefing at the start of the Litter Pick by the Organiser a photograph shown of the plant to help with identification and any plants identified, details of the location to be recorded then reported by the organiser/Clerk to the correct Unitary Council Department. Gloves issued to participants.	1	2	2 (A)

RISK ASSESSMENT CARRIED OUT BY:

Signature:

Date:

Risk Assessment Scoring Matrix

Likelihood	Severity					
	Multiple Death (10)	Single Death (8)	Major Injury (6)	Lost Time Injury (4)	Minor Injury (2)	Delay (1)
Certain (10)	100	80	60	40	20	10
Very Likely (8)	80	64	48	32	16	8
Likely (6)	60	48	36	24	12	6
May Happen (4)	40	32	24	16	8	4
Unlikely (2)	20	16	12	8	4	2
Very Unlikely (1)	10	8	6	4	2	1

Score	Priority	Action
1 – 16	LOW	Action is required to reduce the risk, although low priority.
17 – 36	MEDIUM	Action required to control. Interim measures may be necessary in the short term.
37 – 100	HIGH	Action required urgently to control risks. Unacceptable Immediate action required

ST CLEARS TOWN COUNCIL – [TASK NAME]
INDUCTION BRIEF AND VOLUNTEER ACKNOWLEDGEMENT

Supervisor:

Date:

Start Time:

Finish Time:

Location: (To be defined by supervisor)

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Description of Activity: (To be summarised by supervisor)

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Tools to be Used: (To be listed by supervisor, taking note of the risks associate with using these tools (for instance cuts and grazes))

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Hazards and Safety Measures:

- All work undertaken by volunteers shall have regard to the Health & Safety at Work etc. Act 1974 and related health & safety legislation.
- You should not undertake the work defined if you have either an injury or illness that could increase risk of further injury or illness either to you or fellow volunteers. If you are unsure of the likelihood of increased risk due to either injury or illness, you should contact the supervisor before starting work.
- You will not be asked to work at height.
- Jewellery, necklaces, watches and ideally should not be worn – wearing them present risk of injury.
- Appropriate footwear must be worn. Ideally, sturdy boots covering the ankle and providing support on uneven ground should be worn. Open-toed shoes or sandals, trainers (footwear without a heel) must not be worn. Doing so increases risk significantly.
- Long hair must be tied up to avoid it getting caught in the activity.
- Gloves should be worn where appropriate.

First Aid:

- When a volunteer is wounded (serious cuts and grazes) undertaking authorised work, the supervisor should be notified as soon as possible. A first aid kit is held by the supervisor.
- In the case of serious injury, immediate first aid should be administered, and the supervisor informed.
- The supervisor is expected to carry with them a mobile telephone. Where necessary, the emergency services will be called.

VOLUNTEER ACKNOWLEDGEMENT

- I understand the scope of work described by the supervisor and agree to abide by the direction relating to this work that they give.
- I agree to comply with all health and safety direction and training I am given in support of this work.
- I agree that I am fit and healthy to undertake this work.
- I agree to make the supervisor aware of any changes to my contact details or health.

Name (Printed)	Contact Details Unchanged (Tick to confirm)	Signature

POST ACTIVITY COMMENTS