

Town Clerk's June 2026 Report

ASH Waste Services – Bailey Hill Centre

Following the introduction of monthly waste collections at the Bailey Hill centre, issues continue to be experienced with missed collections by ASH Waste Services.

The revised collection schedule was introduced following discussion with ASH and a review of the Centre's current usage levels, which identified that fortnightly collections were no longer necessary. Whilst the change was intended to reduce costs and improve the management of waste collections at the site, reliability concerns remain.

The matter continues to be raised with ASH Waste Services and officers are monitoring the situation closely to ensure that the agreed service is delivered consistently. A further update will be provided should the issues persist.

Mold Bus Station Toilets – Further Correspondence with Flintshire County Council

On the 4th June 2026, I wrote to Flintshire County Council seeking clarification regarding the future operation of the Bus Station Toilets and the implications of the current timescales associated with the proposed Asset transfer.

The correspondence acknowledged the work being undertaken by Flintshire County Council to progress the outstanding information requests but highlighted that a significant amount of key information remained outstanding, including the building condition surveys, drainage surveys, leasehold arrangements and details relating to the TUPE process. Members had expressed concerns that, without this information, the Council was not yet in a position to make a fully informed decision regarding any potential transfer.

The correspondence also noted the Town Councils understanding that Flintshire County Council currently only has budget provision in place to operate the facility until September 2026. Clarification was therefore sought regarding Flintshire County Council's intentions should a decision not be reached by the date due to the delays in receiving the information required to enable Members to properly consider the proposal.

Specifically, clarification was requested on:

- Whether Flintshire County Council intends to continue operating the Bus Station Toilets beyond September 2026 whilst discussions remain ongoing.
- Whether any contingency arrangements have been identified should a transfer not be completed by that date.
- Whether there is a risk that the facility could close before Mold Town Council has had the opportunity to fully consider the proposal and complete any necessary transfer arrangements.

Since the correspondence was sent, a meeting has been arranged with Katie Wilby, Flintshire Council Council on the 19th June to discuss. The Mayor, Deputy Mayor and Town Clerk will attend on behalf of Mold Town Council.

It is anticipated that the meeting will provide an opportunity to discuss the proposed invested in the facility, obtain further clarification on the outstanding matters and better understand

Flintshire County Council's intentions regarding the future operation of the toilets whilst discussions relating to any potential asset transfer continue.

A further verbal update will be provided to Members following the meeting.

Benches Mold Bus Station

Following consideration of this matter at the previous Town Council meeting, further discussions have taken place with Flintshire County Council regarding the condition of the benches located within the Mold Bus Station.

Members may recall that the original proposal involved Flintshire County Council funding the materials required for refurbishment works, with the Town Council's Facilities Officer undertaking the repairs free of charge. Whilst the Town Council had initially explored the option of replacing the existing timber slats with composite materials to provide a more durable, lower-maintenance solution, Flintshire County Council advised that funding for this option was not available.

I have since been in further contact with Flintshire County Council, who have confirmed that they are willing to contribute up to £40 per bench towards refurbishment works. Whilst this remains significantly below the estimated cost of composite replacements, it may assist with the replacement of damaged timber slats and associated materials.

Members are invited to consider whether they wish to proceed with the refurbishment of the benches using traditional timber materials, with Flintshire County Council contributing up to £40 per bench towards the material costs and the Town Council's Facilities Officer undertaking the works. Members may also wish to consider whether a phased approach should be adopted, focusing initially on those benches which are currently unusable due to their condition, or whether the Town Council wishes to fund the additional estimated cost of approximately £310 per bench to enable the installation of composite replacement slats, providing a more durable, lower-maintenance solution in the longer term.

Recommendation

To consider the offer from Flintshire County Council to contribute up to £40 per bench towards refurbishment works and determine whether:

- a) The benches should be refurbished using timber replacement slats; or
- b) The Town Council should meet the additional estimated cost of approximately £310 per bench to facilitate the installation of composite replacement slats;

and to authorise the Town Council's Facilities Officer to undertake the agreed works.

Audit Wales/ One Voice Wales Podcast Recording Invitation

Further to the previous report, the Audit Wales podcast recording took place at the Bailey Hill Centre on Thursday 11th June.

The recording focused on examples of good practice within the Town and Community Councils sector and provided an opportunity to showcase some of Mold Town Council's successful initiatives and community partnerships.

Councillor Chris Bithell and Pete Dando participated in the recording, speaking about the development and success of the Town Council's Youth Council project. The session also included

participation from two students from Mold Alun High School., who shared their personal experiences of being involved with the youth council. and the positive engagement with local democracy and community issues.

I also participated in the recording discussion the Council's heritage initiatives, with particular reference to the ongoing work and achievements at Bailey Hill.

The recording session was extremely positive and provided an excellent opportunity to promote the work of Mold Town Council, its partners and the young people involved in the projects. Many thanks to all who participated.

The podcast is expected to be release during August 2026. Once available, it will be circulated to all Members and promoted through the Council's social media channels.

County Forum Update

Following correspondence from Mold Town Council regarding the absence of County Forum meetings, Flintshire County Council has confirmed that discussions have taken place between the Chief Executive and Chief Officers and a decision has been made to reinstate the County Forum.

The Forum will now meet twice yearly, with meetings being held in the Auditorium at Ty Dewi Sant, Ewloe.

Flintshire County Council has advised that the first meeting is scheduled to take place during September 2026. In preparation for the meeting, the Council intends to review and refresh the Shared Community Charter (2018) and circulate a revised draft to Town and Community Council Clerks for comment. A number of potential meeting dates will also be circulated, with the preferred date being selected based on availability across the sector.

Town and Community Councils will be invited to submit agenda items in advance of the meeting. Flintshire County Council has advised that agenda items should relate to matters of county-wide relevance and interest to the wider Town and Community Council sector, rather than issues affecting individual communities only.

The reinstatement of the County Forum is welcomed and will provide an opportunity to strengthen communication, partnership working and engagement between Flintshire County Council and Town and Community Councils across the County. Members will be kept informed of further developments as arrangements progress.

Mold Cemetery – Land \Registry

With the support of Councillor Guest I am continuing to work to regularise the land ownership position relating to Mold Cemetery.

During investigations, it was identified that part of the land forming Mold Cemetery is currently included within Land Registry Title CYM418048, for which Flintshire County Council is the registered proprietor. Historical title documentation has been reviewed, including conveyances dated 1966 and 1996, which indicate that ownership of the cemetery land vested in the former Joint Burial Committee and subsequently in Mold Town Council following local government reorganisation and the transfer of interests from Argoed Community Council.

Correspondence was sent to Flintshire County Council's legal representatives notifying them of Mold Town Council's intention to apply to HM Land Registry to register the relevant cemetery land

in the name of Mold Town Council. The Council has also sought confirmation that Flintshire County Council has no objection to the removal of the affected area from Title CYM418048.

To assist in progressing the matter, a meeting has been arranged for **15 June 2026** between the relevant parties to discuss the historical ownership position, review the available documentation and consider the steps required to facilitate the proposed Land Registry application.

This work forms part of the wider review of the Council's land ownership records and will help ensure that the Land Registry accurately reflects the Town Council's ownership and responsibility for Mold Cemetery.

A further update will be provided to Members following the meeting and upon receipt of any response from Flintshire County Council.

Upcoming Meetings

- 19th June – Teams Meeting with Katie Wilby to discuss Bus Station Toilets
- 1st July – attending the One Voice Wales Conference with Councillor Sarah Taylor.
- 6th July – online meeting with Cittaslow UK Members to make the relevant arrangements to hand over control of the Cittaslow Bank Account and formally be removed from membership.



Annual Return for the Year Ended 31 March 2026

Accounting statement 2025-26 for:

Name of body: Mold Town Council

	Year ending		Notes and guidance
	31 March 2025 (£)	31 March 2026 (£)	
Statement of income and expenditure/receipts and payments			
1. Balances brought forward	430,687	444,177	Total balances and reserves at the beginning of the year as recorded in the financial records. Must agree to line 7 of the previous year.
2. (+) Income from local taxation/levy	320,435	338,881	Total amount of income received/receivable in the year from local taxation (precept) or levy/contribution from principal bodies.
3. (+) Total other receipts	114,151	124,937	Total income or receipts recorded in the cashbook minus amounts included in line 2. Includes support, discretionary and revenue grants.
4. (-) Staff costs	179,996	211,269	Total expenditure or payments made to and on behalf of all employees. Include salaries and wages, taxable allowances, PAYE and NI (employees and employers), pension contributions and termination costs. Exclude reimbursement of out-of-pocket expenses.
5. (-) Loan interest/capital repayments	0	0	Total expenditure or payments of capital and interest made during the year on external borrowing (if any).
6. (-) Total other payments	241,100	251,710	Total expenditure or payments as recorded in the cashbook minus staff costs (line 4) and loan interest/capital repayments (line 5).
7. (=) Balances carried forward	444,177	445,016	Total balances and reserves at the end of the year. Must equal (1+2+3) – (4+5+6).
Statement of balances			
8. (+) Debtors	11,614	17,329	Income and expenditure accounts only: Enter the value of debts owed to the body at the year-end.
9. (+) Total cash and investments	467,624	445,362	All accounts: The sum of all current and deposit bank accounts, cash holdings and investments held at 31 March. This must agree with the reconciled cashbook balance as per the bank reconciliation.
10. (-) Creditors	35,061	17,675	Income and expenditure accounts only: Enter the value of monies owed by the body (except borrowing) at the year-end.
11. (=) Balances carried forward	444,177	445,016	Total balances should equal line 7 above: Enter the total of (8+9-10).
12. Total fixed assets and long-term assets	309,486 RESTATED	319,631	The asset and investment register value of all fixed assets and any other long-term assets held as at 31 March.
13. Total borrowing	0	0	The outstanding capital balance as at 31 March of all loans from third parties (including PWLB).

Annual Governance Statement

We acknowledge as the members of the Council, our responsibility for ensuring that there is a sound system of internal control, including the preparation of the accounting statements. We confirm, to the best of our knowledge and belief, that for the year ended 31 March 2026:

	Agreed?		'YES' means that the Council:	Toolkit
	Yes	No*		
1. In consultation with the community, we have developed a vision and purpose for the Council and used this vision to inform the Council's plans, budget and activities.	Yes		Has consulted with the community and focussed its activities to meet the community's needs	A, C
2. We have adopted a Code of Conduct for members and officers and implemented an appropriate training plan for members to ensure all councillors understand their role and responsibilities.	Yes		Ensures that councillors understand and are equipped to deliver their roles and responsibilities.	B
3. We have ensured that we electronically publish the information the Council is required to publish by law, on its website at Mold Town Council	Yes		Is transparent about its activities and provides the public with all information required by law	A, C, D, E
4. We have taken all reasonable steps to ensure that the Council complies with relevant laws and regulations when exercising its functions, including employment of staff and payment of allowances to members.	Yes		Has only done things that it has the legal power to do and has conformed to codes of practice and standards in the way it does so	
5. We have adopted standing orders, financial regulations and terms of reference and ensure that these are followed when conducting business including functions delegated to committees.	Yes		Has adopted rules and procedures to govern how the Council conducts its business including procurement of goods and services.	B, E
6. We have put in place arrangements for: <ul style="list-style-type: none"> • Effective financial management including the setting and monitoring of the Council's budget and preparation and approval of the annual accounts • Maintenance and security of accurate and up to date accounting and other financial records • Identifying potential liabilities, commitments, events and transactions that may have a financial impact on the Council. 	Yes		Calculated its budget requirement in accordance with the law and properly monitors its financial position throughout the year and has prepared and approved its accounts in accordance with legislation	D
7. We have maintained an adequate system of internal control and management of risk, including: <ul style="list-style-type: none"> • measures designed to prevent and detect fraud and corruption including clearly documented procedures for authorising and making payments • assessment and management of risks facing the Council • an adequate and effective system of internal audit and reviewed the effectiveness of these arrangements. 	Yes		Made proper arrangements and accepted responsibility for safeguarding the public money and resources in its charge including arranging for a competent person, independent of the financial controls and procedures, to give an objective view on whether these meet the needs of the body.	D, E
8. We have taken appropriate action on all matters raised in previous reports from internal and external audit.	Yes		Considered and taken appropriate action to address weaknesses /issues brought to its attention by internal and external auditors.	D, E
9. We have provided proper opportunity for the exercise of electors' rights in accordance with the requirements of the Public Audit (Wales) Act 2004 and the Accounts and Audit (Wales) Regulations 2014.	Yes		Has given all persons interested the opportunity to inspect the body's accounts as set out in the notice of audit issued by the Auditor General.	E
10. General power of Competence – The Council has resolved to adopt the General Power of Competence set		No	Meets the eligibility criteria to exercise the general Power of	E

* Please include an explanation for any 'No' answers

out in Local Government and Elections (Wales) Act 2021			Competence	
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Additional disclosure notes

Include here any additional disclosures the Council considers necessary to aid the reader's understanding of the accounting statement and/or the annual governance statement.


The following information is provided to assist the reader to understand the accounting statement and/or the Annual Governance Statement	
<p>1. Expenditure under S137 Local Government Act 1972</p> <p>Section 137(1) of the 1972 Act permits the Council to spend on activities for which it has no other specific powers if the Council considers that the expenditure is in the interests of, and will bring direct benefit to, the area or any part of it, or all or some of its inhabitants, providing that the benefit is commensurate with the expenditure. Section 137(3) also permits the Council to incur expenditure for certain charitable and other purposes. The maximum expenditure that can be incurred under both section 137(1) and (3) for the financial year 2025-26 was £11.10 per elector.</p> <p>In 2025-26, the Council made payments totalling <u>£ 10,745</u> under section 137. These payments are included within 'Other payments' in the Accounting Statement.</p>	
2.	

Trust Funds

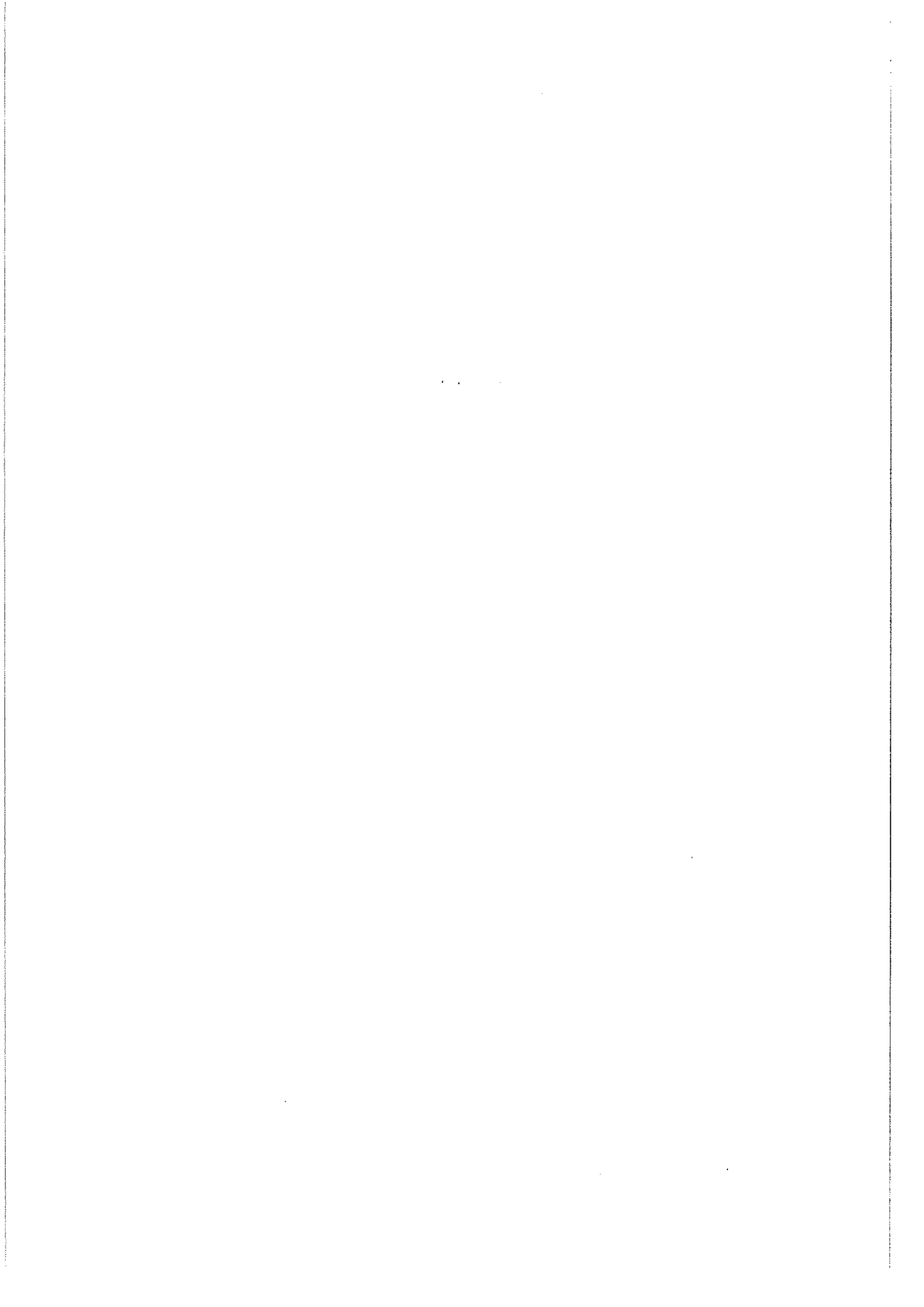
Trust funds – The Council acts as sole trustee for and is responsible for managing trust fund(s)/assets. We exclude transactions related to these trusts from the Accounting Statement. In our capacity as trustee, we have discharged our responsibility in relation to the accountability for the fund(s) including financial reporting and, if required, independent examination or audit.	Yes	No	N/A N/A	Has met all of its responsibilities where it is a sole managing trustee of a local trust or trusts.
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Council approval and certification

The Council is responsible for the preparation of the accounting statements and the annual governance statement in accordance with the requirements of the Public Audit (Wales) Act 2004 (the Act) and the Accounts and Audit (Wales) Regulations 2014.

Certification by the RFO I certify that the accounting statements contained in this Annual Return present fairly the financial position of the Council, and its income and expenditure, or properly present receipts and payments, as the case may be, for the year ended 31 March 2026.	Approval by the Council I confirm that these accounting statements and Annual Governance Statement were approved by the Council under minute reference:
	Minute ref:
RFO signature: 	Chair signature:
Name: JOANNE LANE	Name:
Date: 12.06.26.	Date:

* Please include an explanation for any 'No' answers



Annual internal audit report to:

Name of body:

MOLD TOWN COUNCIL

The Council's internal audit, acting independently and on the basis of an assessment of risk, has included carrying out a selective assessment of compliance with relevant procedures and controls expected to be in operation during the financial year ending 31 March 2026.

The internal audit has been carried out in accordance with the Council's needs and planned coverage. On the basis of the findings in the areas examined, the internal audit conclusions are summarised in this table. Set out below are the objectives of internal control and the internal audit conclusions on whether, in all significant respects, the following control objectives were being achieved throughout the financial year to a standard adequate to meet the needs of the Council.

	Agreed?				Outline of work undertaken as part of the internal audit (NB not required if detailed internal audit report presented to body)
	Yes	No*	N/A	Not covered**	
1. Appropriate books of account have been properly kept throughout the year.	✓				
2. Financial regulations have been met, payments were supported by invoices, expenditure was approved and VAT was appropriately accounted for.	✓				
3. The body assessed the significant risks to achieving its objectives and reviewed the adequacy of arrangements to manage these.	✓				
4. The annual precept/levy/resource demand requirement resulted from an adequate budgetary process, progress against the budget was regularly monitored, and reserves were appropriate.	✓				
5. Expected income was fully received, based on correct prices, properly recorded and promptly banked, and VAT was appropriately accounted for.	✓				
6. Petty cash payments were properly supported by receipts, expenditure was approved and VAT appropriately accounted for.	✓				
7. Salaries to employees and allowances to members were paid in accordance with contracts/ minuted approvals, and PAYE and NI requirements were properly applied.	✓				
8. Asset and investment registers were complete, accurate, and properly maintained.	✓				

* Please include an explanation for any 'No' answers

	Agreed?				Outline of work undertaken as part of the Internal audit (NB not required if detailed internal audit report presented to body)
	Yes	No*	N/A	Not covered**	
9. Periodic and year-end bank account reconciliations were properly carried out.	✓				
10. Accounting statements prepared during the year were prepared on the correct accounting basis (receipts and payments/income and expenditure), agreed with the cashbook, were supported by an adequate audit trail from underlying records, and where appropriate, debtors and creditors were properly recorded.	✓				
11. Trust funds (including charitable trusts). The Council has met its responsibilities as a trustee.			✓		

For any risk areas identified by the Council (list any other risk areas below or on separate sheets if needed) adequate controls existed:					
	Agreed?				Outline of work undertaken as part of the Internal audit (NB not required if detailed internal audit report presented to body)
	Yes	No*	N/A	Not covered**	
12.					
13.					
14.					

* If the response is 'no', please state the implications and action being taken to address any weakness in control identified (add separate sheets if needed).

** If the response is 'not covered', please state when the most recent internal audit work was done in this area and when it is next planned, or if coverage is not required, internal audit must explain why not.

[My detailed findings and recommendations which I draw to the attention of the Council are included in my detailed report to the Council dated 19/05/2026.] * Delete if no report prepared.

Internal audit confirmation

I/we confirm that as the Council's internal auditor, I/we have not been involved in a management or administrative role within the body (including preparation of the accounts) or as a member of the body during the financial years 2024-25 and 2025-26. I also confirm that there are no conflicts of interest surrounding my appointment.

Name of person who carried out the Internal audit:	JDH BUSINESS SERVICES LTD
Signature of person who carried out the Internal audit:	<i>JDH Business Services Ltd</i>
Date:	19/05/2026

* Please include an explanation for any 'No' answers



Mold Town Council

Financial year ending 31 March 2026

1. Date of announcement: **25th June 2026**
2. Each year the annual accounts are audited by the Auditor General for Wales. Prior to this date, any interested person has the opportunity to inspect and make copies of the accounts and all books, deeds, contracts, bills, vouchers and receipts etc relating to them for 20 working days on reasonable notice. For the year ended 31 March 2026, these documents will be available on reasonable notice on application to:

Jo Lane – Town Clerk and Finance Officer

townclerk@moldtowncouncil.org.uk

01352 751819

Unit 10, Daniel Owen Precinct, Mold, Flintshire CH7 1AP

between the hours of 10am and 2pm on Monday to Friday

commencing on **06 July 2026**

and ending on **31 July 2026**

3. From 14 September 2026, until the audit has been completed, Local Government Electors and their representatives also have:
 - the right to question the Auditor General about the accounts.
 - the right to attend before the Auditor General and make objections to the accounts or any item in them. Written notice of an objection must first be given to the Auditor General. A copy of the written notice must also be given to the council.

The Auditor General can be contacted via: Community Council Audits, Audit Wales, 1 Capital Quarter, Tyndall Street, Cardiff, CF10 4BZ or by email at communitycouncilaudits@audit.wales.

The audit is being conducted under the provisions of the Public Audit (Wales) Act 2004, the Accounts and Audit (Wales) Regulations 2014 and the Auditor General for Wales' Code of Audit Practice.

Cyngor Tref Yr Wyddgrug

Blwyddyn ariannol sy'n dod i ben 31 Mawrth 2026

1. Dyddiad cyhoeddi **25 Mehefin 2026**
2. Bob blwyddyn mae'r cyfrifon blyneddol yn cael eu harchwilio gan Archwilydd Cyffredinol Cymru. Cyn y dyddiad hwn, mae gan unrhyw berson sydd â diddordeb gyfle i archwilio a gwneud copiâu o'r cyfrifon a'r holl lyfrau, gweithredoedd, contractau, biliau, talebau a derbynebau ac ati sy'n ymwneud â hwy am 20 diwrnod gweithio ar rybudd rhesymol. Ar gyfer y flwyddyn a ddaeth i ben 31 Mawrth 2026, bydd y dogfennau hyn ar gael ar rybudd rhesymol ar gais i:

Jo Lane – Clerc y Dref a Swyddog Cyllid

townclerk@moldtowncouncil.org.uk

01352 751819

Uned 10, Canolfan Daniel Owen, Yr Wyddgrug, Sir y Fflint CH7 1AP

rhwng oriau 10.00yb a 2.00yp o ddydd Llun i ddydd Gwener

gan ddechrau **06 Gorffennaf 2026**

ac yn gorffen ar **31 Gorffennaf 2026**

3. O 14 Medi 2026, hyd nes y bydd yr archwiliad wedi'i gwblhau, mae gan Etholwyr Llywodraeth Leol a'u cynrychiolwyr hefyd:

yr hawl i holi'r Archwilydd Cyffredinol am y cyfrifon.

yr hawl i fynychu gerbron yr Archwilydd Cyffredinol a gwneud gwrthwynebiadau i'r cyfrifon neu unrhyw eitem ynddynt. Rhaid rhoi hysbysiad ysgrifenedig o wrthwynebiad i'r Archwilydd Cyffredinol yn gyntaf. Rhaid rhoi copi o'r hysbysiad ysgrifenedig i'r cyngor hefyd.

Gellir cysylltu â'r Archwilydd Cyffredinol drwy: Archwiliadau Cyngorau Cymuned, Archwilio Cymru, 1 Capital Quarter, Stryd Tyndall, Caerdydd, CF10 4BZ neu drwy e-bost yn communitycouncilaudits@audit.wales.

Mae'r archwiliad yn cael ei gynnal o dan ddarpariaethau Deddf Archwilio Cyhoeddus (Cymru) 2004, Rheoliadau Cyfrifon ac Archwilio (Cymru) 2014 a Chod Ymarfer Archwilio Archwilydd Cyffredinol Cymru.



Mold Town Council – Health and Safety Action Plan 2026-27

Ref.	Action	Priority	Responsible Officer	Target date	Actions to date	Status	Completion Date
1.	Commission asbestos surveys for Town Council Offices, Bailey Hill Centre and Cemetery Tool Shed. Create asbestos register and asbestos management plan.	High	Town Clerk	Sept 2026		Not started	
2.	Arrange IOSH Managing Safely training (or equivalent) for managers and supervisors with H&S responsibilities.	Medium	Town Clerk and Facilities Officer	Dec 2026		Not started	
3.	Complete First Aid Needs Assessment covering all locations, staffing levels, lone workers and emergency response arrangements.	High	Town Clerk	Sept 2026		Not Started	
4.	Ensure sufficient First Aid at Work/Emergency First Aid at Work trained personnel are available across all work locations and absences.	High	Town Clerk – All staff	Sept 2026		Not Started	
5.	Establish first aid arrangements for remote and cemetery workers and provide training where required.	High	Town Clerk	Sept 2026		Not Started	
6.	Complete risk assessment for ride-on mower operations.	High	Town Clerk	July 2026		Not Started	
7.	Provide and record training for all ride-on mower operators.	High	Cemetery Superintendent	Sept 2026		Not Started	
8.	Train operatives in the safe use of grass-cutting equipment and maintain training records.	High	Cemetery Superintendent	Sept 2026		Not Started	
9.	Replace outdated Health & Safety Law posters and display current versions at Town Council Offices, Bailey Hill Centre and Cemetery Tool Shed.	Low	Town Clerk	Dec 2026	Completed by the Facilities Officer	Completed	05.06.2026

10.	Repair cemetery roads and pathways to eliminate trip hazards and reduce risk of slips, trips and falls.	High	Cemetery Superintendent	Ongoing		Ongoing	
11.	Implement annual COSHH assessment review programme.	Medium	Support Officer – Leila	Aug 2026		Not Started	
12.	Provide COSHH awareness training and record all instruction given to employees.	Medium	Town Clerk	Sept 2026		Not Started	
13.	Establish annual risk assessment review programme and ensure all assessments are dated and reviewed.	High	Town Clerk	Aug 2026		Not Started	
14.	Remove combustible storage and maintain clear access around electrical switchgear at Bailey Hill Centre.	High	Facilities Officer and Support Officer – Leila	July 2026		Not Started	
15.	Review and update Health & Safety Policy to reflect current structure and legislation.	High	WorkNest Consultant and Town Clerk	Aug 2026	No changes required – to be agreed at June Town Council Meeting.	Ongoing	
16.	Purchase suitable taller professional-grade stepladders for office	Medium	Town Clerk	July 2026		Not Started	
17.	Replace domestic stepladders with BS EN131 Professional standard equipment.	High	Town Clerk	July 2026		Not Started	
18.	Introduce stepladder pre-use inspection procedure and staff briefing.	Medium	Town Clerk	July 2026		Not Started	
19.	Ensure alternative work platforms are used where three points of contact cannot be maintained.	Medium	Town Clerk, Facilities Officer and cemetery Superintendent	Immediate		Not Started	
20.	Commission updated Fire Risk Assessment for Bailey Hill Centre.	High	Support Officer – Leila	July 2026		Not Started	
21.	Establish annual Fire Risk Assessment review programme for all premises.	High	Support Officer – Leila	Ongoing		Not Started	

22.	Check boiler settings to ensure hot water storage temperatures reach 60°C.	High	Facilities Officer	July 2026		Not Started	
23.	Implement monthly Legionella temperature monitoring programme for hot and cold water systems.	High	Facilities Officer	Aug 2026		Not Started	
24.	Record all Legionella checks, inspections, sampling and flushing activities.	High	Facilities Officer	Immediate		Not Started	
25.	Identify and flush infrequently used outlets weekly and maintain records.	High	Facilities Officer	Immediate		Not Started	
26.	Arrange annual inspection of hot water tanks and calorifiers and retain records.	Medium	Facilities Officer and Support Officer – Leila	Sept 2026		Not Started	
27.	Develop and document Legionella outbreak response procedure.	Medium	Town Clerk	Sept 2026		Not Started	
28.	Complete DSE workstation assessments for all office-based staff and implement actions identified.	Medium	Town Clerk, Events and Community Engagement Officer and Support Workers	Aug 2026	Following completed 1-2-1's all staff members have been asked to complete.	Ongoing	
29.	Provide DSE training and workstation set-up guidance to all users.	Medium	Town Clerk, Events and Community Engagement Officer and Support Workers	Aug 2026		Not Started	
30.	Undertake comprehensive lone working risk assessments for all locations including evening work, violence, vulnerable persons and emergencies.	High	Town Clerk	Aug 2026		Not Started	

31.	Implement lone worker emergency arrangements and communication procedures.	High	Town Clerk	Aug 2026		Not Started	
32.	Develop manual handling risk assessments for cemetery operations and other relevant activities.	Medium	Cemetery Superintendent	Sept 2026		Not Started	
33.	Ensure staff have access to current risk assessments and maintain records of communication and updates.	Medium	Town Clerk	Sept 2026		Not Started	
34.	Provide managers with stress awareness and management training.	Medium	Town Clerk	Dec 2026		Not Started	
35.	Establish Employee Assistance / counselling support arrangements for staff wellbeing.	Medium	Personnel Committee	Dec 2026		Not Started	
36.	Provide staff with guidance on heat stress, cold stress and UV exposure for outdoor work.	Low	Town Clerk	July 2026		Not Started	
37.	Ensure all inflatables used at Council events have valid PIPA certification and inspection documentation.	Medium	Events and Community Engagement Officer	Ongoing		Completed	
38.	Create a Continuity Plan for Mold Town Council	Medium	Town Clerk	August 2026	Drafted – to be presented to P&A Committee on the 14 th July 2026.	Ongoing	

Monitoring: Progress against this Action Plan will be reviewed quarterly by the Policy & Audit Committee. Staff-related actions, including training, wellbeing and competency matters, will also be reported to the Personnel Committee as appropriate. An annual summary report will be presented to Full Council.

General Risk Assessment

Mold Town Council

Mold Town Council, Unit 10

Daniel Owen Precinct, Mold, Clwyd, CH7 1AP

01 Jun 2026

Mark Beddall



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Section 1 - Executive Summary

1 Executive Summary

Organisation Description	This GRA was completed for Mold Town Council. This comprises of a leased Town Hall Office, Bailey House a small community centre with a private dwelling on the top floor (not in the GRA) and Mold Town Cemetery. At the time of the audit there were 7 people employed with no young workers and no pregnant ladies however there are approximately 60 and 100 volunteers.
Organisation Category	Town Council.
Enforcement History / Significant Incidents	None as stated.
Areas Assessed	Town Hall office which is leased, ground floor of the Bailey House, tool shed and grounds of the cemetery.
Areas Not Assessed	Private dwellings at both Bailey House and the cemetery.
Visit Attendance	Jo Lane-Town Clerk and Finance Officer- Mark Beddall-WorkNest Health and Safety Consultant.
Overall People At Risk	All employees, Contractors, Members of the public, Visitors, Customers, Volunteers, Lone workers.
Scope	The purpose of this report is to provide a general assessment of the health and safety risks arising from the premises and the activities under the control of ,Mold Town Council Unit 10, Daniel Owen Precinct, Mold, CH7 1AP to determine the adequacy of the existing controls, and to provide information on the further actions required to reduce risk in line with current legal requirements and best practice. The report has been produced as a result of discussions and questions, a review of sample evidence and a walk around inspection. It should be noted that any conclusions as to the deficiencies highlighted in this report are not, and must not be taken to be a comment on the commitment or effectiveness of any person or group of persons employed within the business. It must be stated that the conclusions made within this report are based on the discussions and sample evidence presented by Jo lane during the course of the review. Absence of any comment on any particular feature must not be taken as an indicator of compliance with any statutory obligations.
Other Comments	Town Hall Office, Bailey Hill Centre and Mold Cemetery are included in this audit.

1.2 Actions Requiring Immediate Attention

There are no Actions requiring immediate attention






1.3 Overall Risk Rating Table

The following risk rating table shows the score attained against each area assessed. The maximum score for each section is 20 points, however, if actions have been identified this score will be reduced in line with the following:

Scoring guide: * = Deduct 15, ** = Deduct 10, *** = Deduct 5

	Satisfactory	Priority 1 Actions*	5+ Priority 2 Actions**	1-4 Priority 2 Actions or Priority 3 Actions ***
Asbestos Management				15
Cemetery Safety	20			
Church and Parish Events				15
Contractor Management	20			
Display Screens				15
Electrical Safety				15
Fire Safety Overview				15
First Aid At Work				15
Grass Cutting				15
COSHH				15
Legionella Management				15
Lone Work				15
Management of H and S				15
Managing Manual Handling Operations	20			
Outside Work				15
Personal Protective Equipment	20			
Ride On Mowers				15
Stepadders				15
Stress Management				15
Tree Management	20			
Work Equipment	20			
Workplace H and S				15
Sub Total	120	0	0	240
Total	360			
Available Score	440			

Score	82%
--------------	------------





	Intolerable	< 65%
	Substantial	65-74%
	Moderate	75-84%
	Tolerable	85-94%
	Trivial	95% >

1.4 Calculated Overall Risk Rating

Moderate

Section 2 - General Risk Assessment Action Plan

2.1 Action Priority Summary

	Priority 1	0
	Priority 2	6
	Priority 3	29
	Priority 4	0

2.2 General Risk Assessment action plan

Asbestos Management

Observation	Action Required: Asbestos Management
Recommendation	A suitable asbestos survey is required in the Town Council Offices, Bailey Hill Centre and the Cemetery Tool Shed in order to provide accurate information on the location, amount and condition of asbestos-containing materials (ACMs), their condition and whether remedial action is required. This information should be captured in asbestos register and an asbestos management plan for the premises.
Priority	3
Complete By	30/08/2026

Church and Parish Events

Observation	Action Required: Church/Parish Events- Bouncy Castles Etc
Recommendation	Ensure that all bouncy castles and other inflatables fully comply with the guidance issued by the PIPA Inflatable Play Inspector Scheme. This guidance can be downloaded from www.pipa.org.uk
Priority	3
Complete By	30/08/2026

Display Screens

Observation	Action Required: Display Screens- Information Etc
Recommendation	Provide all users with information, instruction and training in the correct layout and set up of the workstation. Record all instruction given.
Priority	3
Complete By	30/08/2026

Display Screens

Observation

Action Required: Display Screens- Workstations

Recommendation

Complete a DSE assessment for each workstation and determine the need for additional control measures to reduce the risk of ill health. All assessments should be regularly reviewed as required. A suitable form can be found in the client login area of safetynest.

Priority

3

Complete By

30/08/2026

Electrical Safety

Observation

Action Required: Electrical Safety- Other Controls

Recommendation

Ensure that electrical switchgear areas are kept free from storage of combustible materials and access to the switchgear kept free of obstructions in Baily Hill location.

Priority

3

Complete By

30/08/2026

Fire Safety Overview

Observation

Action Required: Fire Safety Overview - Risk Assessment

Recommendation

The FRA should be reviewed at least annually or more frequently if there are any significant changes to the building or activities within.

Priority

3

Complete By

30/08/2026

Fire Safety Overview

Observation

Fire Risk Assessment-Baily Hill.

Recommendation

The Fire Risk Assessment for Baily Hill was last completed by Eryri Consulting in April 2021 and therefore is out of date. A new one must be sought as soon as.

Priority

2

Complete By

31/07/2026

First Aid At Work

Observation

Action Required: First Aid At Work- Needs Assessment

Recommendation

Carry out a first aid needs assessment to determine what level of first aid provision is required for your workplace. The assessment must consider the work undertaken, employee numbers, distribution and working patterns, any

pre-existing medical conditions and the ability of emergency services to reach the premises.

Priority 3
Complete By 30/08/2026

**First Aid At Work
Observation**

Action Required: First Aid At Work- Personnel

Recommendation

A suitable number of trained first aiders to cover all working shifts and other absences (e.g. Holidays, sickness etc) should be provided. Your first aiders should be trained in the full First Aid at Work qualification or Emergency First Aid at Work qualification.

Priority 3
Complete By 30/08/2026

**First Aid At Work
Observation**

Action Required: First Aid At Work- Equipment

Recommendation

Establish arrangements for the provision of first aid for remote workers. Please provide training for the employee at the cemetery.

Priority 3
Complete By 30/08/2026

**Grass Cutting
Observation**

Action Required: Grass Cutting- Controls

Recommendation

Train operatives in the use of the grass cutting equipment.

Priority 3
Complete By 30/08/2026

COSHH

Observation

Action Required: COSHH- Information & Assessment

Recommendation

It is recommended that COSHH assessments are reviewed at least annually to verify that control measures remain adequate to control any health risk.

Priority 3
Complete By 30/08/2026

COSHH

Observation

Action Required: COSHH-Training & Supervision

Recommendation Provide employees with information, instruction and training on the significant findings of risk assessments associated with the use of or exposure to hazardous substances e.g. limitations of use, control measures to be used, lifestyle factors that may increase risk etc. All training should be recorded.

Priority 3

Complete By 30/08/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls

Recommendation Carry out a monthly check on the cold water entering the building and cold water at locations around the premises to verify that the temperature is below 20°C, the minimum growth temperature for Legionella bacteria. Record all readings.

Priority 2

Complete By 31/07/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls

Recommendation Carry out a monthly check on hot water outlets in rotation to verify that the hot water in circulation is above 50°C. Record all readings.

Priority 2

Complete By 31/07/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls

Recommendation Check the boiler settings to ensure that water is being heated for distribution to taps and showers to 60°C.

Priority 2

Complete By 31/07/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls

Recommendation Develop procedures for dealing with a potential outbreak situation.

Priority 3

Complete By 30/08/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls
Recommendation Train employees involved in facilities management and building services maintenance with responsibility for carrying out preventive maintenance, water checks/ treatments in the risks and nature of the disease as well as specific monitoring procedures in line with the requirements of L(8).
Priority 3
Complete By 30/08/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls
Recommendation Ensure that hot water tanks and calorifiers are inspected on an annual basis. Record all findings.
Priority 3
Complete By 30/08/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls
Recommendation Flush infrequently used outlets on a weekly basis. Maintain a record as evidence.
Priority 3
Complete By 30/08/2026

Legionella Management

Observation Action Required: Legionella Management - General Controls
Recommendation Ensure that all checks and sampling are recorded.
Priority 3
Complete By 30/08/2026

Lone Work

Observation Action Required: Lone Work - Miscellaneous
Recommendation There is one for the cemetery workers but not for the other two locations. Undertake a lone working risk assessment which covers work undertaken by lone workers. Ensure working when dark or at night is covered in the lone working risk assessment. Young workers, women, new and expectant mothers, and the disabled should be included, to ensure they are not put at any greater risk when working alone. Consider where potential violence / criminal activity may place workers at higher risk.

Priority 2
Complete By 31/07/2026

Management of H and S

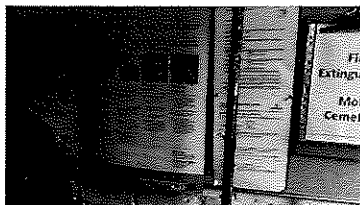
Observation Action Required: Management of H&S - Policy
Recommendation Last completed in 2024. Review and update the Health and Safety Policy in line with the current company structure and current legislation.
Priority 3
Complete By 30/08/2026

Management of H and S

Observation Action Required: Management of H&S - Risk Assessment
Recommendation It was noted that there is a risk assessment review in place however there were risk assessments seen in Baily Hill that were out of date. Establish a programme of risk assessment review. This should be done at least annually and when there are any significant changes. The review will need to be recorded on the risk assessment.
Priority 3
Complete By 30/08/2026

Management of H and S

Observation Action Required: Management of H&S - Notices
Recommendation Display a copy of the current Health and Safety Law poster in a prominent position in all three locations (one is up in the cemetery tool shed however is old and needs to be replaced).
Priority 3
Complete By 30/08/2026



Management of H and S

Observation Action Required: Management of H&S - Organisation
Recommendation Training is required to ensure that senior levels of management with responsibility for strategy are competent to undertake their health and safety

responsibilities. Training is required to ensure that middle levels of management and supervisory staff with responsibilities for implementation are competent to undertake their health and safety responsibilities. We recommend an IOSH Managing Safely course.

Priority 3
Complete By 30/08/2026

Outside Work

Observation Action Required: Outside Work- Hot/Cold Environments
Recommendation Provide workers with advice on the effects of heat / cold stress.
Priority 3
Complete By 30/08/2026

Ride On Mowers

Observation Action Required: Ride On Mowers- Risk Assessment
Recommendation Complete a risk assessment for the mowers operations.
Priority 2
Complete By 31/07/2026

Ride On Mowers

Observation Action Required: Ride On Mowers- Risk Assessment
Recommendation Operators must be trained in the use of the ride on mowers.
Priority 3
Complete By 30/08/2026

Stepladders

Observation

Action Required: Stepladders- Controls

Recommendation

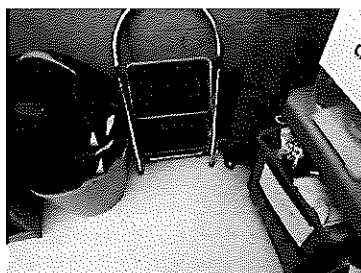
Do not use domestic (BS2037/ BS1129 Class 3, or BS EN131 Non-Professional) stepladders. They should be Class 1 or EN 131 standard (or EN 131 Professional for new equipment). These were observed in the main office and the Baily Hill location.

Priority

3

Complete By

30/08/2026



Stepladders

Observation

Action Required: Stepladders- Controls

Recommendation

Provide taller stepladders when accessing the store room in the office.

Priority

3

Complete By

30/08/2026

Stepladders

Observation

Action Required: Stepladders- Controls

Recommendation

Should there need to be significant periods during the activity when a hand hold cannot be achieved that may result in injury then an alternative work platform must be chosen.

Priority

3

Complete By

30/08/2026

Stepladders

Observation

Action Required: Stepladders- Controls

Recommendation

Instruct stepladder users to check them before use to ensure they are in good repair and clean. Guidance is available in the Guidance section of your WorkNest H&S staff handbook.

Priority

3

Complete By

30/08/2026

Stress Management

Observation

Action Required: Stress Management- Controls

Recommendation

Managers should be provided with training in relation to the management of stress.

Priority

3

Complete By

30/08/2026

Workplace H and S

Observation

Action Required: Workplace - Floors & Traffic Routes

Recommendation

Carry out repairs to the roads and paths to reduce the risk of injury from slips, trips and falls in the cemetery.

Priority

3

Complete By

30/08/2026

Section 3 - Report Index

3.1 Risk Assessments and Audit Index

No.	Hazard Topic
3.2.1	Asbestos Management
3.2.2	Cemetery Safety
3.2.3	Church and Parish Events
3.2.4	Contractor Management
3.2.5	Display Screens
3.2.6	Electrical Safety
3.2.7	Fire Safety Overview
3.2.8	First Aid At Work
3.2.9	Grass Cutting
3.2.10	COSHH
3.2.11	Legionella Management
3.2.12	Lone Work
3.2.13	Management of H and S
3.2.14	Managing Manual Handling Operations
3.2.15	Outside Work
3.2.16	Personal Protective Equipment
3.2.17	Ride On Mowers
3.2.18	Stepladders
3.2.19	Stress Management
3.2.20	Tree Management
3.2.21	Work Equipment
3.2.22	Workplace H and S

3.2 Risk Assessments and Audits

3.2.1 Asbestos Management

Hazard	Inhalation of asbestos fibres	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.1.1 Asbestos Management

Compliance with standard - **NO**

Action Required: Asbestos Management A suitable asbestos survey is required in the Town Council Offices, Bailey Hill Centre and the Cemetery Tool Shed in order to provide accurate information on the location, amount and condition of asbestos-containing materials (ACMs), their condition and whether remedial action is required. This information should be captured in asbestos register and an asbestos management plan for the premises.

3.2.1.2 Asbestos Training

Compliance with standard - **NA**

3.2.2 Cemetery Safety

Hazard	Collapse of memorials, Collapse of excavations, Slips, trips and falls
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Tolerable
Residual Risk	Tolerable
Not defined	

3.2.2.1 Cemetery Safety- Controls

Compliance with standard - **YES**

Risk assessments are completed for grave excavations.

Grave excavations are adequately supported to prevent accidental collapse.

Open grave excavations are adequately covered or fenced off to prevent persons inadvertently falling into them.

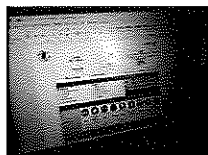
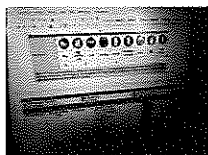
No Memorial stones are surveyed for structural integrity. Surveys of memorial stones are recorded.

Dangerous memorial stones are taped off and warnings posted.

Dangerous memorial stones are fenced off and laid flat.

Groundsmen are required to report any dangerous memorial stones.

Groundsmen are trained to survey memorial stones.



3.2.3 Church and Parish Events

Hazard	Guidance must be issued by the PIPA Inflatable Play Inspector Scheme.	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.3.1 Church and Parish Events- Tower Tours
Compliance with standard - **NA**

3.2.3.2 Church and Parish Events- Catering
Compliance with standard - **NA**

3.2.3.3 Church and Parish Events- Facilities Hire
Compliance with standard - **YES**

Whenever the premises are hired, a formal booking agreement that sets out the conditions of hire is agreed and signed by the event organiser.

A risk assessment is in place before the premises are hired out to confirm that the premises are safe for the use intended.

The Parish has obtained written confirmation from any hirers that they have public liability cover for their activities while the church premises are being hired.

The organisation hiring the facility have public liability insurance in place that extends to include covering the activities within the event.

3.2.3.4 Church and Parish Events- Food Banks
Compliance with standard - **NA**

3.2.3.5 Church and Parish Events- Bouncy Castles Etc
Compliance with standard - **NO**

Action Required: Church/Parish Events- Bouncy Castles Etc Ensure that all bouncy castles and other inflatables fully comply with the guidance issued by the PIPA Inflatable Play Inspector Scheme. This guidance can be downloaded from www.pipa.org.uk

Employees that will operate the bouncy castles and inflatables are suitably experienced and trained adult personnel. Also, where the company is responsible for the setting up, operation and supervision of the bouncy castle, the employees are also suitable trained and experienced.

The company hiring the equipment provide evidence of a current Public Liability insurance policy with a limit of indemnity of at least a £2 million.

3.2.3.6 Church and Parish Events- Bell Ringing
Compliance with standard - **NA**

3.2.3.7 Church and Parish Events- Performances & Services
Compliance with standard - **NA**

3.2.4 Contractor Management

Hazard	Injury to contractors, Injury to staff, Injury to public
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Tolerable
Residual Risk	Tolerable
Not defined	

3.2.4.1 Contractor Management- Competence

Compliance with standard - **YES**

Suitable arrangements to establish contractor competence proportionate to the level of risks and the complexity of the activities are in place.

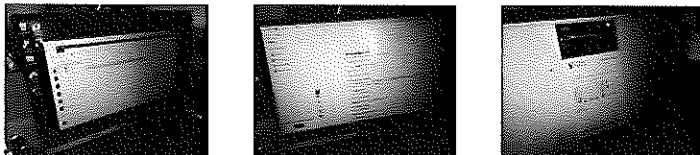
Evidence of contractor's training and competency was available at the time of this GRA. Evidence seen- Woodworks Tree Management.

Contractors are provided with relevant information on the client's safety arrangements and applicable rules.

Evidence that contractor's risk assessments and method statements have been provided, checked and considered adequate prior to the commencement of work was available evidence seen-Roberts Garden and Tree Services Hedge trimming-20-10-2025.

The client is satisfied that their contractor(s) hold adequate insurance for the activities that are carried out. This may include public liability, employer's liability and/or professional indemnity insurance.

Contractors do not sub contract work out to a third party without the express permission of the client and relevant checks of the subcontractor have been carried out by the Contractor.



3.2.4.2 Contractor Management- Checks/Supervision

Compliance with standard - **YES**

Checks on the installation and working practices of the contractor are carried out by the client at intervals proportionate to the risks presented and these are recorded.

3.2.5 Display Screens

Hazard	Musculoskeletal injuries due to poor posture, Unsuitable furniture/bad workstation design, RSI due to heavy workload using the keyboard/mouse, Eyestrain due to poor lighting, Unsuitable computer screen, Incorrectly positioned screen
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Moderate
Residual Risk	Tolerable
Not defined	

3.2.5.1 Display Screens- User Identification

Compliance with standard - **YES**

Employees who are DSE users have been identified.

3.2.5.2 Display Screens- Information Etc

Compliance with standard - **NO**

Action Required: Display Screens- Information Etc Provide all users with information, instruction and training in the correct layout and set up of the workstation. Record all instruction given.

3.2.5.3 Display Screens- Workstations

Compliance with standard - **NO**

Action Required: Display Screens- Workstations Complete a DSE assessment for each workstation and determine the need for additional control measures to reduce the risk of ill health. All assessments should be regularly reviewed as required. A suitable form can be found in the client login area of safetynest.

3.2.5.4 Display Screens- Eye Tests

Compliance with standard - **YES**

Users of DSE equipment have been offered eye tests

3.2.5.5 Display Screens- Corrective Appliances

Compliance with standard - **YES**

Corrective appliances have been provided for users who require them for DSE work and suitable records have been kept.

3.2.6 Electrical Safety

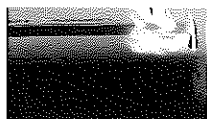
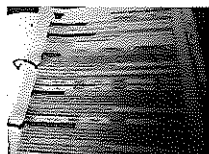
Hazard	Electric shock, Fire, Explosion	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.6.1 Electrical Safety- Fixed Wiring Compliance with standard - YES

Fixed wiring tests have been conducted in accordance with the industry standard.

An Electrical Installation Condition Report (EICR) has been obtained for the recent fixed wiring test and is held on file. The building was re-wired by Direct Interiors Ltd on the 30-01-2025 for the Town Council Office. Baily Hill was completed by Mega Electrical on the 01-04-2025.

The recent fixed wiring test has identified the electrical installation as being in a satisfactory condition.



3.2.6.2 Electrical Safety- Portable Appliances

Compliance with standard - **YES**

Portable appliance testing, as appropriate to the equipment, is up to date. Last completed by Jackson Fire and Security on the 22-05-2025.

There is an inventory of all portable electrical appliances in use.

All employees have been instructed and/or trained to visually inspect portable electrical appliances before use.

Low voltage portable electrical appliances are used where there is an increased risk of electrical hazards due to workplace hazards or environment.

Residual current protection is used in conjunction with portable electrical appliances where there is an increased risk of electrical hazards due to workplace hazards or environment.



3.2.6.3 Electrical Safety- Other Controls

Compliance with standard - **NO**

Action Required: Electrical Safety- Other Controls Ensure that electrical switchgear areas are kept free from storage of combustible materials and access to the switchgear kept free of obstructions in Baily Hill location.

All electric cupboards and switch rooms were observed to be secured to prevent unauthorised access.

Adequate electrical sockets were observed to be available throughout the premises to minimise the need to have multi-point adapter sockets or trailing cables.

There are no EV charging points at the premises.

3.2.7 Fire Safety Overview

Hazard	Sources of Ignition, Combustible material, Inadequate means of detection/ alarm systems, Inadequate controls, emergency procedures, training, drills etc, Inadequate access and arrangements for emergency services
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Substantial
Residual Risk	Tolerable
Not defined	

3.2.7.1 Fire Safety Overview - Risk Assessment

Compliance with standard - **NO**

There is a fire risk assessment dated 11-03-2025 and compiled by Fletcher Risk Management Ltd which covers all areas of the building or site.

Action Required: Fire Safety Overview - Risk Assessment The FRA should be reviewed at least annually or more frequently if there are any significant changes to the building or activities within.

The current fire risk assessment was completed by Tim Fletcher ABBE Level 4 Diploma in FRA on the 11-03-2025 who appears to meet the criteria of a competent individual as stipulated within BS 8674

There have been no significant changes at site that could affect the fire risk. This includes the following:

- No structural Alterations
- No changes to the use of the building
- No changes in activities
- No significant changes in staff
- No fire service notices or involvement
- No changes in legislation
- There have not been any fires



3.2.7.2 Fire Safety Overview - Additional Observations

Compliance with standard - **NO**

Fire Risk Assessment-Baily Hill. The Fire Risk Assessment for Baily Hill was last completed by Eryri Consulting in April 2021 and therefore is out of date. A new one must be sought as soon as.

3.2.8 First Aid At Work

Hazard	Delayed response leading to injuries/ill health being exacerbated.	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Substantial	
Residual Risk	Tolerable	
Not defined		

3.2.8.1 First Aid At Work- Needs Assessment

Compliance with standard - **NO**

Action Required: First Aid At Work- Needs Assessment Carry out a first aid needs assessment to determine what level of first aid provision is required for your workplace. The assessment must consider the work undertaken, employee numbers, distribution and working patterns, any pre-existing medical conditions and the ability of emergency services to reach the premises.

3.2.8.2 First Aid At Work- Personnel

Compliance with standard - **NO**

Action Required: First Aid At Work- Personnel A suitable number of trained first aiders to cover all working shifts and other absences (e.g. Holidays, sickness etc) should be provided. Your first aiders should be trained in the full First Aid at Work qualification or Emergency First Aid at Work qualification.

3.2.8.3 First Aid At Work- Equipment

Compliance with standard - **NO**

First aid kits were provided at key locations and were accessible to all employees. Kits were checked to ensure they are fully stocked and in date with suitable records kept.

First aid kits are regularly checked to ensure they remain in date and fully stocked. Records are kept of these checks.

Action Required: First Aid At Work- Equipment Establish arrangements for the provision of first aid for remote workers. Please provide training for the employee at the cemetery.

Automated external defibrillators are provided and staff have been trained in their use. The three locations all have defibs in place.



3.2.8.4 First Aid At Work- Other
Compliance with standard - NA

3.2.9 Grass Cutting

Hazard	Mechanical, Noise, Vibration, Mobile plant, Slips, trips and falls, Adverse weather conditions, Fire and explosion.	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.9.1 Grass Cutting- Controls

Compliance with standard - **NO**

Action Required: Grass Cutting- Controls Train operatives in the use of the grass cutting equipment.

Operatives are issued with head, ear, foot and eye protection.

Operatives are instructed to stop machines and not to smoke whilst refuelling.

Employees are instructed to report details of faults or damage to equipment and the equipment is taken out of use until effective repairs have been carried out.

The drive mechanisms, pulley shafts and cutters of the machines are adequately guarded.

Operatives have been instructed to stop machinery if approached by another employee or third party.

3.2.10 COSHH

Hazard	Exposure by inhalation, Exposure by ingestion, Exposure by skin contact, Exposure by contact with eyes, Exposure by injection	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

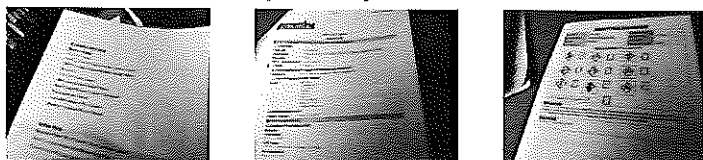
3.2.10.1 COSHH- Information & Assessment
 Compliance with standard - **NO**

The hazardous substances used, stored, created on or transported from the premises are known to the client e.g. inventory, list, risk assessments etc and this is reviewed regularly.

Health and safety data sheets have been obtained from the manufacturers/suppliers for all substances hazardous to health used or stored.

Assessments of the health risks to employees for processes involving hazardous substances have been carried out.

Action Required: COSHH- Information & Assessment It is recommended that COSHH assessments are reviewed at least annually to verify that control measures remain adequate to control any health risk.



3.2.10.2 COSHH-Storage
 Compliance with standard - **YES**

Substances hazardous to health are stored safely.

3.2.10.3 COSHH- Local Exhaust Ventilation
 Compliance with standard - **NA**

3.2.10.4 COSHH- PPE & RPE
 Compliance with standard - **NA**

3.2.10.5 COSHH- Emergencies & Health Surveillance
Compliance with standard - **NA**

3.2.10.6 COSHH-Training & Supervision
Compliance with standard - **NO**

Action Required: COSHH-Training & Supervision Provide employees with information, instruction and training on the significant findings of risk assessments associated with the use of or exposure to hazardous substances e.g. limitations of use, control measures to be used, lifestyle factors that may increase risk etc. All training should be recorded.

3.2.11 Legionella Management

Hazard	Inhalation of Legionella bacteria
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Substantial
Residual Risk	Tolerable
Not defined	

3.2.11.1 Legionella Management - General Controls Compliance with standard - NO

The premises have been assessed by a competent person to identify potential sources of Legionella growth and dissemination. All three locations were completed by Green Contract Services on the 08-1-2026.

Action Required: Legionella Management - General Controls Carry out a monthly check on the cold water entering the building and cold water at locations around the premises to verify that the temperature is below 20°C, the minimum growth temperature for Legionella bacteria. Record all readings.

Action Required: Legionella Management - General Controls Carry out a monthly check on hot water outlets in rotation to verify that the hot water in circulation is above 50°C. Record all readings.

Action Required: Legionella Management - General Controls Check the boiler settings to ensure that water is being heated for distribution to taps and showers to 60°C.

There are no showers in the building.

Action Required: Legionella Management - General Controls Develop procedures for dealing with a potential outbreak situation.

Action Required: Legionella Management - General Controls Train employees involved in facilities management and building services maintenance with responsibility for carrying out preventive maintenance, water checks/ treatments in the risks and nature of the disease as well as specific monitoring procedures in line with the requirements of L(8).

Action Required: Legionella Management - General Controls Ensure that hot water tanks and calorifiers are inspected on an annual basis. Record all findings.

Action Required: Legionella Management - General Controls Flush infrequently used outlets on a weekly basis. Maintain a record as evidence.

The domestic water system is subject to routine maintenance by a competent person.

Action Required: Legionella Management - General Controls Ensure that all checks and sampling are recorded.



3.2.11.2 Legionella Management - Cooling Towers Compliance with standard - NA

3.2.12 Lone Work

Hazard	Delayed access to first aid/emergency services etc., Unsafe use of work equipment, Manual handling activities, Lack of supervision, Violence / Aggression
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Moderate
Residual Risk	Tolerable
Not defined	

3.2.12.1 Lone Work - Prohibitions

Compliance with standard - YES

No prohibitions are required to be put in place for lone workers.

Fumigation work is prohibited when working alone.

Live electrical work is prohibited when working alone.

Lone workers are prohibited from carrying/using explosives.

Confined space work is prohibited when working alone.

Working with chainsaws is prohibited when working alone.

3.2.12.2 Lone Work - Monitoring/Supervision

Compliance with standard - YES

Monitoring systems in place record relevant information (e.g. the lone workers' current location, when the lone worker has returned to their head base / home etc.

Lone workers are periodically supervised to ensure that safe practices are being adhered to.

3.2.12.3 Lone Work - Emergencies

Compliance with standard - YES

The provisions in place for lone workers with regards to emergencies (e.g. fire, equipment failure, illness, accidents etc.) are satisfactory.

Lone workers have access to mobile communications-mobile phone, 2 way radio etc..

CCTV monitoring is in place by Flintshire Council.

Suitable first aid provision is in place for lone workers, which covers access to supplies and treatment.

3.2.12.4 Lone Work - Miscellaneous

Compliance with standard - **NO**

Action Required: Lone Work - Miscellaneous There is one for the cemetery workers but not for the other two locations. Undertake a lone working risk assessment which covers work undertaken by lone workers. Ensure working when dark or at night is covered in the lone working risk assessment. Young workers, women, new and expectant mothers, and the disabled should be included, to ensure they are not put at any greater risk when working alone. Consider where potential violence / criminal activity may place workers at higher risk.

Limits have been set on what work can be done alone.

Items can be lifted safely by lone workers.

3.2.13 Management of H and S

Hazard	Inadequate safety management system
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Moderate
Residual Risk	Tolerable
Not defined	

3.2.13.1 Management of H and S - Policy

Compliance with standard - **NO**

Action Required: Management of H&S - Policy Last completed in 2024. Review and update the Health and Safety Policy in line with the current company structure and current legislation.

The Health and Safety Policy has been brought to the attention of staff and a record of this has been made to demonstrate compliance.

The Health and Safety Policy is made available to all staff.



3.2.13.2 Management of H and S - Comms & Consultation

Compliance with standard - **YES**

Suitable arrangements are in place for regularly communicating with and consulting staff on Health and Safety matters.

Health and Safety is a regular agenda item on meetings that are held with staff. Last completed on the 28-05-2026.



3.2.13.3 Management of H and S - Training

Compliance with standard - YES

Induction training for new staff includes health and safety subjects.

Arrangements have been made for staff to be given basic Health and Safety training.

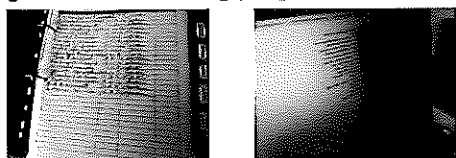
Accurate records of the training provided are maintained.

Training needs are re-assessed and reviewed:

- As jobs change;
- As a result of health and safety monitoring;
- As a result of accidents, incidents and cases of ill-health;
- Where risk assessments identify a need.

And refresher training is carried out as and when needed.

E-learning is used to provide staff with training on health, safety and other subjects as part of the organisation's training programme. This is provided by WorkNest.



3.2.13.4 Management of H and S - Risk Assessment

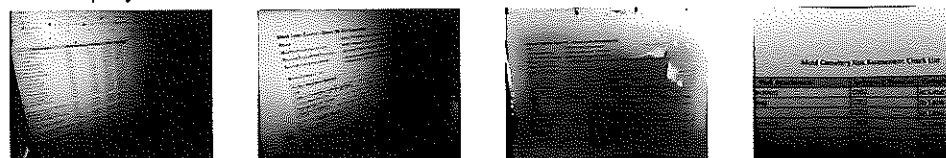
Compliance with standard - NO

Risk assessments are in place for the organisation's activities.

Risk assessments are carried out by suitably competent persons.

Action Required: Management of H&S - Risk Assessment It was noted that there is a risk assessment review in place however there were risk assessments seen in Baily Hill that were out of date. Establish a programme of risk assessment review. This should be done at least annually and when there are any significant changes. The review will need to be recorded on the risk assessment.

Staff are informed of the risks and precautions established in the risk assessments. There is also a record of when employees have been informed of the contents of the Risk Assessments



3.2.13.5 Management of H and S - Accidents Etc
Compliance with standard - **YES**

There is a near miss or incident reporting procedure in place and staff have been made aware of it.

All serious accidents and/or incidents are investigated to determine the probable cause and if any actions have been identified to prevent reoccurrence.

An Accident Book is provided for the recording of accidents.

There are arrangements in place to report any work-related ill-health.

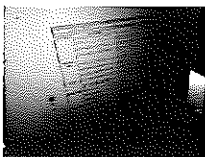
Suitable arrangements are in place for reporting accidents, diseases and dangerous occurrences to the enforcing authority.

3.2.13.6 Management of H and S - Emergency Plans
Compliance with standard - **YES**

Procedures for serious or imminent danger are established.

Staff are provided with suitable training in emergency plans and understand their role within them.

There are suitable arrangements with external emergency services or utility companies in the event of an emergency.



3.2.13.7 Management of H and S - Notices
Compliance with standard - **NO**

Action Required: Management of H&S - Notices Display a copy of the current Health and Safety Law poster in a prominent position in all three locations (one is up in the cemetery tool shed however is old and needs to be replaced).

A copy of the employers liability insurance certificate is displayed or is available in electronic form to all employees. Displayed in all three locations. Provided by Hiscox and is valid until 31-0-2027.

No smoking signs are displayed at entrance to buildings.



3.2.13.8 Management of H and S - Organisation

Compliance with standard - **NO**

The organisation has an effective structure in place for the management of health and safety.

The most senior member of the management team has accepted that they have overall and final responsibility for the safe running of the business.

Those managers to whom specific responsibilities have been allocated have had those responsibilities issued to them and/or included in their job descriptions.

Action Required: Management of H&S - Organisation Training is required to ensure that senior levels of management with responsibility for strategy are competent to undertake their health and safety responsibilities. Training is required to ensure that middle levels of management and supervisory staff with responsibilities for implementation are competent to undertake their health and safety responsibilities. We recommend an IOSH Managing Safety course.

Staff have been informed to whom they should report any concerns about health and safety issues, so that the management can address them.

3.2.13.9 Management of H and S - Monitoring Etc

Compliance with standard - **YES**

Monitoring of health and safety controls and standards is carried out and recorded.

There is a Health and Safety action plan, which is prioritised and monitored to ensure that actions are taken within a suitable time frame. Actions are also allocated to specific individuals.

The company has established performance criteria for health and safety.

Performance for health and safety is fed back to the most senior level of the organisation.

3.2.14 Managing Manual Handling Operations

Hazard	Musculoskeletal injuries
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Tolerable
Residual Risk	Tolerable
Not defined	

3.2.14.1 Managing Manual Handling Operations
 Compliance with standard - **YES**

So far as is reasonably practicable the manual handling of loads likely to result in a risk of injury is avoided.

Manual handling assessments have been completed for operations which are likely to cause a risk of injury and it is not reasonably practicable to avoid. These assessments take into account Task, Load, Environment and Individual Capability and other factors.

Manual handling assessments are reviewed if it is suspected they are no longer valid and/or there has been a significant change in the operation.

Employees are provided with information and training on manual handling operations including the measures in place to prevent injury and safe systems of work. Evidence seen- Rob Williams completed on the 15-04-2026.

As identified in the manual handling assessments, suitable personal protective clothing is provided. The clothing does not impede the wearers ability to safely undertake manual handling duties.



3.2.15 Outside Work

Hazard	Mechanical failure of playground equipment, Falling from equipment, Slips, trips, and falls, Immersion in water & drowning, Frostbite, Trench Foot, Heatstroke, Sunburn, Slips, Trips, Falls, Drowning, Infection, HIV, Hepatitis B or C, Leptospirosis, Tetanus, Electric shock
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Moderate
Residual Risk	Tolerable
Not defined	

3.2.15.1 Outside Work- Hot and Cold Environments

Compliance with standard - **NO**

A risk assessment has been carried out prior to work and considers susceptibility of individuals' health / fitness.

Suitable personal protective clothing has been provided for workers exposed to cold or excessive heat

Workers are encouraged to cover up when working outdoors to avoid exposure to UV radiation.

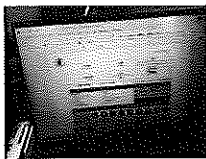
Shading is provided for those working in sun.

Heating or cooling is provided to ensure ambient temperature is obtained for working.

Exposure time is reduced to a minimum to avoid any heat / cold stress.

Regular breaks are provided for workers working in hot/cold environments allowing them to cool/warm up.

Action Required: Outside Work- Hot/Cold Environments Provide workers with advice on the effects of heat / cold stress.



3.2.15.2 Outside Work- Weather
Compliance with standard - **YES**

A risk assessment has been carried out prior to work and covers the effects adverse weather conditions e.g. ice, wind, snow.

Gritting materials are available for workers in order to treat work areas in use when icy weather.

Suitable clothing / equipment is provided for those having to work in wet, windy, icy, wintry, fogging conditions.

3.2.15.3 Outside Work- Water (Risk Assessment)
Compliance with standard - **NA**

3.2.15.4 Outside Work- Water (Communications)
Compliance with standard - **NA**

3.2.15.5 Outside Work- Water (Work Platforms)
Compliance with standard - **NA**

3.2.15.6 Outside Work- Water (Rescue)
Compliance with standard - **NA**

3.2.15.7 Outside Work- Water (PPE)
Compliance with standard - **NA**

3.2.15.8 Outside Work- Water (Buoyancy Aids)
Compliance with standard - **NA**

3.2.15.9 Outside Work- Water (Other Controls)
Compliance with standard - **NA**

3.2.15.10 Outside Work- Biological Hazards

Compliance with standard - **YES**

Risk assessment for work near or on water considers the possibility of Leptospirosis (Weil's Disease).

Suitable vaccinations are offered to employees potentially at risk from biological hazards.

3.2.15.11 Outside Work- Overhead Power

Compliance with standard - **NA**

3.2.15.12 Outside Work- Buried Services

Compliance with standard - **NA**

3.2.16 Personal Protective Equipment

Hazard	Failure to provide the correct PPE for the risks involved, Worn, damaged or ineffective PPE
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Tolerable
Residual Risk	Tolerable
Not defined	

3.2.16.1 Personal Protective Equipment- Controls
 Compliance with standard - **YES**

Risk assessments have been carried out to determine the need for PPE.

Employees are issued with PPE appropriate to the hazards to which they may be exposed.

Employees receive instruction and training in the wearing of PPE.

A procedure has been established to enable employees to report defective PPE.

Appropriate accommodation is provided for the storage of PPE when it is not in use.

The PPE does not increase the overall risk to the employee.

Where different items of PPE are required to be worn they are compatible with each other.

PPE is periodically checked to ensure it remains effective against the risk for which it is designed.

3.2.17 Ride On Mowers

Hazard	Cuts, abrasions, entanglement, Amputation , Adverse weather, Overturning of mower, Ejected objects/particles	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Intolerable	
Not defined		

3.2.17.1 Ride On Mowers- Risk Assessment

Compliance with standard - **NO**

Action Required: Ride On Mowers- Risk Assessment Complete a risk assessment for the mowers operations.

Action Required: Ride On Mowers- Risk Assessment Operators must be trained in the use of the ride on mowers.

Employees have been instructed to stop machinery if approached by another employee or third party.

3.2.17.2 Ride On Mowers- Protection/Warning

Compliance with standard - **YES**

The seat of the ride on mowers is fitted with an automatic cut off switch.

The drive mechanisms, pulleys, shafts and cutters of the mowing machines seen are adequately guarded.



3.2.17.3 Ride On Mowers- Refuelling

Compliance with standard - **YES**

Operators have been provided with appropriate refuelling equipment.

There is a dedicated refuelling procedure for the mowers.

Employees have been instructed regarding the hazards involved and the safety precautions to be observed when storing, handling and dispensing petrol.

3.2.17.4 Ride On Mowers- Inspection/Test Etc
Compliance with standard - **YES**

Pre use inspection and testing is done to ensure that all guards are correctly adjusted and working and all safety systems operate correctly. All checks and tests are recorded.

Mowers are regularly serviced in line with the supplier's recommended servicing schedule and records kept. JT Williams Machinery and tool hire on the 20-05-2025.

3.2.17.5 Ride On Mowers- Operation
Compliance with standard - **YES**

The area to be mowed is cleared, beforehand, of all objects which could be picked up and thrown by the mower.

Mowing does not take place when there is inadequate lighting.

When parking or leaving a machine unattended, it is immobilised to provide for public safety and prevent vandalism.

3.2.18 Stepladders

Hazard	Falls from a height, Falling objects	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.18.1 Stepladders- Controls Compliance with standard - NO

Stepladders are only used for a short duration to put away and retrieve stock or to carry out minor repairs to the property or fixtures.

Action Required: Stepladders- Controls Do not use domestic (BS2037/ BS1129 Class 3, or BS EN131 Non-Professional) stepladders. They should be Class 1 or EN 131 standard (or EN 131 Professional for new equipment). These were observed in the main office and the Baily Hill location.

Action Required: Stepladders- Controls Provide taller stepladders when accessing the store room in the office.

Action Required: Stepladders- Controls Should there need to be significant periods during the activity when a hand hold cannot be achieved that may result in injury then an alternative work platform must be chosen.

Action Required: Stepladders- Controls Instruct stepladder users to check them before use to ensure they are in good repair and clean. Guidance is available in the Guidance section of your WorkNest H&S staff handbook.

Stepladder users wear suitable footwear.

Stepladder users are competent to use them safely and have received suitable training. Working at Height Training takes place.

3.2.19 Stress Management

Hazard	Increased occupational ill health. poor performance from fatigue/debility affecting concentration, increased absence, high staff turnover, low morale	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.19.1 Stress Management- Controls
 Compliance with standard - **NO**

The organisation has assessed the risks of stress in the workplace in line with established best practice such as the HSE Management Standards.

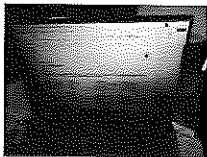
Staff have been consulted on stress either directly or via representatives.

A stress policy has been implemented with clear plan and allocated responsibilities. Periodic checks are made to monitor the effectiveness of the policy through assessing new risks, employee consultation and reviewing employee absence and and turnover data.

There is an Mental Heath First Aider in place.

Action Required: Stress Management- Controls Managers should be provided with training in relation to the management of stress.

A process is in place to ensure individual assessments for employees who experience stress or related mental health issues are performed.



3.2.20 Tree Management

Hazard	Trip hazards by root and buttress damage to footpath surfaces., Broken branches, Severe weather damage, Collapsing trees, Falling branches, Dead or diseased material
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Tolerable
Residual Risk	Tolerable
Not defined	

3.2.20.1 Tree Management - Location

Compliance with standard - YES

The zoning of trees is current and up to date

The Arboriculture officer is aware of frequently visited areas

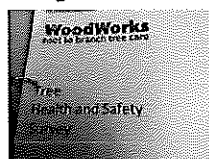


3.2.20.2 Tree Management - Inspection

Compliance with standard - YES

Trees are regularly inspected on their structure and health

Damage to trees is appropriately recorded and dealt with.



3.2.20.3 Tree Management - Reporting

Compliance with standard - YES

A system to enable people to report damage to trees, such as vehicle collisions, and to trigger checks following potentially damaging activities is in place.

A system to enable people to report damage by trees is in place

3.2.20.4 Tree Management - Maintenance

Compliance with standard - **YES**

Trees are being properly maintained and looked after

Serious structural faults are dealt with quickly to prevent an accident happening

3.2.20.5 Tree Management - General/Legal Nuisance

Compliance with standard - **YES**

Trees blocking daylight from habitable rooms and gardens to a severe and unreasonable degree are being dealt with when necessary.

General checks are in place to tree branches that obstruct or become entangled with utility services equipment such as electricity lines, telephone cables or street lighting and signage.

General checks are in place to any sign of tree roots proliferating drains and causing blockages and or damaging any underground services such as drains, electricity, telephone cables and gas mains

3.2.20.6 Tree Management - Damage Prevention

Compliance with standard - **YES**

The appropriate action (pruning/felling) of trees is being undertaken when there is the potential of damage to surrounding structures such as buildings, walls and fencing.

3.2.20.7 Tree Management - Disease Prevention & Control

Compliance with standard - **YES**

A procedure for Removal of infected limbs or Felling of diseased trees as appropriate and in accordance with guidance is in place

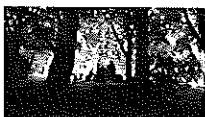
3.2.20.8 Tree Management - Highway Safety

Compliance with standard - **NA**

3.2.20.9 Tree Management - Monitoring

Compliance with standard - **YES**

Monitoring to ensure that the arrangements are implemented in practice



3.2.20.10 Tree Management - Notices

Compliance with standard - **YES**

Appropriate notices and warning signs are being used when necessary

3.2.20.11 Tree Management - Competence

Compliance with standard - **YES**

All the above are being surveyed & undertaken by a competent and qualified person.

3.2.21 Work Equipment

Hazard	Misuse of equipment, Breakdown / failure, Insufficient guarding, Use by untrained personnel
People Exposed To Hazard	As defined in Executive Summary
Area Where Hazard Present	As defined in Executive Summary
Current Risk	Tolerable
Residual Risk	Tolerable
Not defined	

3.2.21.1 Work Equipment- Suitability
 Compliance with standard - **YES**

Work equipment provided is suitable for the processes, tasks and environment.

3.2.21.2 Work Equipment- Maintenance
 Compliance with standard - **YES**

Work equipment is subject to a planned maintenance system/inspection programme.

Maintenance logs and inspection records are kept for all work equipment.

3.2.21.3 Work Equipment- Safety
 Compliance with standard - **YES**

Written safe working practices have been provided for the safe use of work equipment.

The use of work equipment is restricted to trained/experienced or authorised personnel.

Suitable guards are fitted to prevent access to dangerous parts of any work equipment.

Work equipment provided has a means to isolate from any energy sources e.g. Electricity, gas, compressed air etc.

Work equipment risk assessments have been completed and they have been communicated to all staff concerned. There is also a record of this.

Safety signs/information on work equipment is suitably displayed, easily readable and where required, conforming to legislation.



3.2.22 Workplace H and S

Hazard	Various.	
People Exposed To Hazard	As defined in Executive Summary	
Area Where Hazard Present	As defined in Executive Summary	
Current Risk	Moderate	
Residual Risk	Tolerable	
Not defined		

3.2.22.1 Workplace - Cleanliness & Waste
Compliance with standard - **YES**

The furniture, walls and floors are kept clean and in good decorative order.

General housekeeping is adequate and the accommodation is tidy and free from any waste build-up and any slipping or tripping hazards.

Adequate and suitable waste receptacles are provided throughout the workplace.

3.2.22.2 Workplace - Doors & Gates
Compliance with standard - **YES**

Sliding doors have effective mechanism to prevent the door coming off the tracks.

Powered doors/gates are maintained regularly. Last completed by Safe and Secure on the 12-11-2025.



3.2.22.3 Workplace - Falls/Falling Objects
Compliance with standard - **YES**

Stored materials and objects are stable.

Shelving is strong and secure and suitable for the materials stored on it.

Changes of level on flooring are marked.

Filing cabinets are fitted with anti-tilt mechanisms.

Suitable edge protection is provided at all edges where a person may fall.

Areas in which objects may fall from overhead are kept secure by preventing access by people.

3.2.22.4 Workplace - Floors & Traffic Routes

Compliance with standard - **NO**

The floors are free from slipping and tripping hazards.

The floors/floor coverings are in good condition.

Action Required: Workplace - Floors & Traffic Routes Carry out repairs to the roads and paths to reduce the risk of injury from slips, trips and falls in the cemetery.

The outdoor surfaces are suitably drained and arrangements made to clear snow or ice in winter months.

Suitable handrails are fitted to stairs/steps.

Access steps into the premises are in good condition.

Pedestrian and vehicle traffic routes are organised to ensure safe working practices.

3.2.22.5 Workplace - Lighting

Compliance with standard - **YES**

The workplace including stairs and facilities are sufficiently lit by a combination of natural light and artificial lighting.

Lighting on traffic routes is adequate so people/vehicles can move around safely.

Adequate lighting is provided to all of the external areas.

3.2.22.6 Workplace - Room Dimensions/Space

Compliance with standard - **YES**

Workrooms have enough free space to allow people to get to and from workstations and to move with ease.

3.2.22.7 Workplace - Smoking

Compliance with standard - **YES**

A 'No Smoking' policy is in place throughout the premises and no evidence of illicit smoking was observed.

3.2.22.8 Workplace - Temperature

Compliance with standard - **YES**

Readily-accessible thermometers are available to monitor the workplace temperature.

Workroom temperature is suitably maintained at a comfortable level and at least 16°C for office areas and 13°C for when work involves substantial physical activity.

Rest areas, toilets, showers, and changing rooms are maintained at a comfortable level.

All reasonable effort has been made to maintain temperature at a comfortable level when working with hot/cold processes.

Alternative conveniently accessible places are provided for employees to warm/cool themselves periodically throughout the day/shift.

3.2.22.9 Workplace - Ventilation

Compliance with standard - **YES**

An adequate supply of air is provided either through mechanical ventilation or openings /windows, such that stale air / fumes are removed.

Air inlets are positioned away from any flues and exhaust ventilation systems.

There is no air conditioning within the building.

3.2.22.10 Workplace - Welfare

Compliance with standard - **YES**

Suitable and sufficient sanitary conveniences are provided and readily accessible.

Sanitary conveniences have warm/hot water, soap and means of drying.

Sanitary conveniences are suitably ventilated, lit and kept clean.

An adequate supply of water is readily available and cups provided.

An adequate, suitable and secure space is provided to store workers' belongings.

Suitable and sufficient rest areas are provided with seating and with clean surface on which to place food.

Suitable changing facilities are provided with storage for work clothing.

The rest area includes the facility to prepare or obtain a hot drink.

A means of heating food is provided where hot food cannot be obtained nearby.

3.2.22.11 Workplace - Transparent/Translucent Surfaces

Compliance with standard - **NA**

3.2.22.12 Workplace - Window Restrictors
Compliance with standard - **NA**

3.2.22.13 Workplace - Workstations & Seating
Compliance with standard - **YES**

Suitable seating and workstations are provided for workers which enable them to undertake their roles safely and comfortably.

Seating provided gives adequate support for the lower back and footrests are provided for those that need them.

3.2.22.14 Workplace - Pest Control
Compliance with standard - **NA**

Section 4 - Supporting Photographs



Section 5 - Protocol and Disclaimer / Limit of Advice

5.1 Protocol

Introduction / Process

This report is a General Risk Assessment of the significant health and safety issues within your organisation and been prepared by a your Consultant following an inspection of your premises, an examination of documentation and discussions with relevant persons. The primary purpose of this report is to comment on the adequacy of existing risk controls and provide you with the details of improvements required to your health and safety arrangements in order to comply with legislative requirements and best practice. Implementing these improvements will help prevent accidents or ill health to those who may be affected by your undertaking.

This report reflects the situation found at the premises at the time of the visit and is based upon the information and evidence provided to the Consultant. If evidence was not available to corroborate an action the Consultant is likely to have raised an action to this effect. The accuracy of the report is therefore dependant on the quality of the information made available to the Consultant.

The scope of the report is limited to the areas specified under the 'Areas Assessed' part of Section 1 above.

Prioritising Health and Safety Actions

All health and safety actions identified by the Consultant are shown in Section 2 of this report - 'General Risk Assessment Action Plan' and are prioritised as follows:

Priority	Complete By	Definition
1	Immediate (But within 30 days).	Requires Immediate Remedial Action - (For Intolerable / Substantial Risks) The safety or fire issue has been assessed as having a high likelihood of causing serious harm. The activity / situation must not continue until the risk has been reduced. If it is not possible to reduce the risk then the activity / situation must be prohibited. If any work is in progress it must be stopped and alternative safe means of carrying out the work identified. Likely regulatory enforcement action: Prohibition Notice.
2	Within 60 days.	Requires Remedial Action (For Moderate Risks) Some additional controls are necessary within the defined timescale. Easily remedied issues should be carried out immediately or in a very short timescale. The introduction of interim control measures needs to be evaluated. Regular monitoring of existing controls is essential. Likely enforcement action: Improvement Notice.
3	Within 90 days.	Requires Some Additional Controls In Due Course Or Maintain Control Measures And Review If There Are Any Changes (For Tolerable Risks). Some additional controls are necessary. Consideration may be given to a more cost-effective solution. Regular monitoring of existing controls is essential. Likely enforcement action: Informal Notice possibly leading to an Improvement Notice if enforcement advice not followed.
4	Within 180 days.	Improvements should be carried out as advised. These may be best practice or industry standard and may require long-term investment.

It is strongly advised that you complete the actions within the recommended timeframes shown. This will help to improve health and safety conditions within your workplace and reduce the likelihood of an accident occurring and/or any legal action being taken against your company in the criminal or civil courts. To help manage risks and actions identified in this report please refer to the library of information held in the Worknest portal.

5.2 Disclaimer / Limit of Advice

In compiling this report every effort has been made to cover the significant hazards and risks likely to affect your organisation. It is based on a combination of observations made by the Consultant at the time of the visit, examination of relevant documents and information provided by your representatives which is accepted in good faith as being factual, accurate and valid. Absence of any comment on any particular topic must not be taken as an indicator of compliance with any statutory obligations.

This report should not be relied upon as a complete suite of risk assessments covering every aspect of your operation. It is the starting point where you can decide whether you are doing all that is reasonably practicable in controlling the risks identified or whether a more detailed and specific risk assessment is required. For example you may have several pieces of machinery with dangerous parts that must be guarded against hence it is incumbent on you to compile an individual assessment on each machine.

Whilst our Consultants make every reasonable effort to access all areas of the premises for which you are responsible, there may be some areas that are inaccessible, or are difficult to access due to the fabric of the building and to do so would cause unnecessary damage or are outside of the scope of the works requested. Any such areas which were not accessed during this risk assessment have been detailed in the Executive Summary.

It is your responsibility to validate this report to ensure that all reasonably foreseeable hazards have been considered and that safe, appropriate and legal implementation of any remedial action is made. It is recommended that this assessment is reviewed at least annually and/or whenever there is a significant change within your business and that you continue to apply regular general risk reducing control measures as defined by your policies and procedures.

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