



Pest Control Policy

| Policy number and category | IC 03 | Infection Control | | |
|---|---|-------------------|--|--|
| Version number and date | 2 | April 2025 | | |
| Ratifying committee or executive director | Trust Clinical Governance Committee | | | |
| Date ratified | July 2025 | | | |
| Next anticipated review | July 2028 | | | |
| Executive director | Executive Director of Finance | | | |
| Policy lead | Head of Facilities Management, SSL | | | |
| Policy author (if different from above) | Senior Food Safety and Quality Assurance Manager | | | |
| Exec Sign off Signature (electronic) | 13 Tomling | | | |
| Disclosable under Freedom of Information Act 2000 | Yes | | | |

Policy context

The Health and Social Care Act 2008 requires that effective systems are in place to protect patients and staff from the risk of acquiring healthcare associated infection. An effective and operational pest control policy will be required as part of the evidence portfolio for compliance with the Care Quality Commissioning standards.

Policy requirement (see Section 2)

This policy (and any supporting procedures) applies equally to staff in a permanent, temporary, voluntary or contractor role acting for or on behalf of Birmingham and Solihull Mental Health NHS Foundation Trust.

All staff have a role to play in preventative pest control, from complying with guidance found in the Trust Food Safety Policy through to maintaining high standards of tidiness and cleanliness in work areas to reporting the presence of or suspicion of pests.

Change Record

| Date | Version | Author (Name & Role) | Reasons for review / Changes incorporated | Ratifying Committee |
|---------------|---------|--|---|------------------------|
| April 2025 | 2 | Gemma Harvey, Senior Food Safety and Quality Assurance Manager | Three Yearly Review | CGC |
| | | | | |
| | | | | |

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1 Introduction

1.1. Rationale

- 1.1.1. The presence of pests can be offensive, present infection hazards, contaminate foodstuffs, damage materials and structure or be a nuisance. Once established, pests can be difficult and costly to deal with. Satisfactory standards of pest control in both clinical and non-clinical areas are an integral part of providing an optimum environment for the delivery of good quality patient care. The evidence of pests can also adversely affect the perception of the organisation and damage its reputation. See Appendix 2 for a list of common pests.
- 1.1.2. The Health and Social Care Act 2008 requires that effective systems are in place to protect patients and staff from the risk of acquiring healthcare associated infection. An effective and operational pest control policy will be required as part of the evidence portfolio for compliance with the Care Quality Commissioning standards.
- 1.1.3. Birmingham and Solihull Mental Health NHS Foundation Trust recognises its legal obligation to take necessary measures to prevent the risk of pest infestation in all food storage, distribution and catering areas, in addition to timely and safe treatment and eradication, to ensure good standards of pest control in all other areas of its sites.

1.2. Scope

- 1.2.1. This Policy (and any supporting procedures) applies equally to staff in a permanent, temporary, voluntary or contractor roles acting for or on behalf of Birmingham and Solihull Mental Health NHS Foundation Trust.
- 1.2.2. All staff have a role to play in preventative pest control, from complying with guidance found in the Trust Food Safety Policy, through to maintaining high standards of tidiness and cleanliness in work areas, to reporting the presence or suspicion of pests.

1.3. Principles

- 1.3.1. It is the intention of this policy to provide guidance to ensure that all appropriate steps are taken to comply with the duty to manage pest activity within the organisation and to comply with pest control related legislation, approved codes of practice, guidance and relevant standards.
- 1.3.2. The Policy's specific objectives are:
 - Reduce the risk of pests that can carry infectious organisms that may transfer from insects and animals to humans and therefore cause a risk to service users, staff or visitors.

- II. To set out Pest Control Policy and procedures that all Trust staff are required to comply with.
- III. To set out pest control Policy and procedures that all Service Providers to the Trust (and any sub-contractors of these Services Providers) are required to comply with.
- IV. There is a contract for pest control in place, which incorporates regular and proactive monitoring of Trust premises in addition to timely and safe treatment and eradication.
- V. To establish pest control standards that are required to be incorporated into all new capital and other developments for the Trust's services. Ensuring that any refurbishment works do not damage any pest-proofing measures in place (such as pigeon netting) and incorporate any new standards of best practice.
- VI. To provide a framework and requirements for the auditing of the compliance with this Policy and its Procedures.
- VII. To set out the roles and responsibilities of Trust staff and its Service Providers and sub-contractors and any associated training required.
- VIII. To set out provisions for review of this Policy and its Procedures
- 1.3.3. 'The Trust positively supports individuals with learning disabilities and ensures that no-one is prevented from accessing the full range of mental health services available. Staff will work collaboratively with colleagues from learning disabilities services and other organisations, in order to ensure that service users and carers have a positive episode of care whilst in our services. Information is shared appropriately in order to support this.'

2. POLICY

- 2.1. Staff must have received appropriate instruction and training and be familiar with the operational requirements of this Policy, including the requirements of the "Procedures" section relevant to their area of responsibility.
- 2.2. Details of individual delegated responsibilities are highlighted in section 4 of the Policy.
- 2.3. Advice regarding implementation, operational requirements, record keeping etc. will be provided by Estates and Facilities Management.
- 2.4. This Policy must be utilised in conjunction with the Trust Cleaning Policy and Trust Food Safety Policy.
- 2.5. The Trust and its contractors will ensure that risk assessments are undertaken and in place for pest control tasks and substances used. The Estates and Facilities Management Team are responsible for ensuring that a fully qualified and

- competent pest control contractor is employed.
- 2.6. The Trust and its contractor must satisfy itself that the Pest Control Contractor uses all appropriate personal protective equipment when handling chemicals or pests, these will include, gloves, face mask, eye protection and any other equipment necessary.
- 2.7. All risk assessments, method statements, certification provided by the contractor will be recorded and reviewed as per contract requirements. Where mechanical equipment is required, such as a mobile elevated work platform, or working in height or in confined spaces, the Estates Management team will be responsible for issuing a permit to work and access.

3. PROCEDURE

3.1. Pest Control Contract

- 3.1.1. The Trust and its contractors will ensure that a pest control contract is in operation at all times. The contract will be monitored and managed by the Estates and Facilities Department nominated officers, against the contract specification.
- 3.1.2. All pesticides used by the Trust's pest control contractor will be approved in accordance with the Control of Pesticides Regulations (COPR) 1986 (as amended 1997), be strictly controlled and monitored and fully comply with the requirements of the Control of Substances Hazardous to Health (COSHH) Regulations 2002.
- 3.1.3. The pest control contractor shall carry out routine inspections of Trust premises in line with frequency set out in the contract specification.
- 3.1.4. The pest control contractor is required to respond to emergency call out visits within six (6) hours of the call out (within working hours or first thing the next morning). Automatic follow up visits will be made by the Pest Control Contractor to monitor and undertake further treatment following the initial treatment undertaken during emergency call outs.
- 3.1.5. Clinical staff shall ensure that the pest control contractor is escorted around the buildings at all times and at the secure sites, the domestic supervisor will arrange for the pest control contractor to be escorted.
- 3.1.6. Due to the particular vulnerability of catering areas there will be a strict timetable of inspection. Main catering areas, including dining rooms, regen, ADL and production kitchens will be inspected at a defined frequency.
- 3.1.7. The pest control contractor will use active measures to prevent pest activity and to

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monitor the pest situation on site. These may include:

- Rodent monitors will be placed externally around sites for any activity.
- Identifying where any additional electronic fly killing units may be needed within food handling areas.
- Insect monitors, these are sticky boards which are placed in specific areas to monitor the types and number of insects within the area.
- Identifying the need for additional fly screens in food handling areas to prevent insects from entering buildings whilst the windows are open.
- Chemical pesticides, if necessary to remove a pest infestation.
- 3.1.8. Each routine, follow-up or emergency call-out visit will be documented in the form of a written treatment report, with one copy (hard copy) kept on Trust premises and a secondary copy stored on contractors electronic reporting portal. The written treatment report contains the following detail:
 - Trust premises and area(s) inspected Contract and works number
 - Date and time in and time out
 - Type of visit Routine, follow up or call-out Pesticide used and its quantity
 - Treatment detail
 - Status of pests/hygiene
 - Any proofing, monitors, housekeeping or hygiene recommendations to eliminate the reason or cause of infestation.
 - · Technicians name and signature
 - Client (Trust) name and signature

3.2. Reporting Pests

3.2.1. All sightings of pests or evidence of their existence should be reported in the first instance to the Estates and Facilities Department and Amey/Equans Helpdesk .. Appendix 4 explains the pest reporting procedure to be followed, making sure that an Eclipse Incident form is completed.

3.3. Prevention of Pests

- 3.3.1. The Food Hygiene (Amendment) Regulations 1990 states that 'the walls, doors, windows, ceiling, woodwork and all other parts of the structure of every food room shall be kept clean and in such good order, repair or condition as to prevent as far as reasonably practicable the entry of birds and any risk of infestation by rats mice, insects or other pests'
- 3.3.2. Basic Pest Control Measures In All Areas
 - Food must always be covered and stored off the floor. Once opened must be either be stored in pest proof containers which are cleaned before refilling or stored in the original packaging.
 - Food stock must be rotated frequently to ensure items do not remain in the

back of cupboards providing harbourage to pests.

- To dispose of personal foodstuffs in kitchen waste bins with lids and not leave food wrappers or food waste in open bins.
- To store personal food items, such as tea bags, sugar biscuits etc. in plastic/metal containers with tight lids.
- Accumulation of static/stagnant water should be avoided. Spillages should be promptly dealt with.
- Buildings should be of sound structure and well maintained, drains should be covered, and leaking pipe work repaired and damaged surfaces made good. Defects should be reported to the Estates and Facilities Department
- Cracks in plaster and woodwork, unsealed areas around pipe work, damaged tiles, badly fitted equipment and kitchen units are likely to provide excellent harbourage and should be maintained in a suitable condition.
- Fly screens in catering production kitchens and all food areas should always be closed when windows are open.
- Doors to food storage/preparation areas must be kept closed and adequately proofed to prevent access to pests. Where appropriate the doors should be fitted with metal kick plates at base of door.
- Treatment with insecticides and rodenticides alone is seldom sufficient; attention must be paid to good hygiene and structural maintenance.
- All Trust employees are required to take care that their actions do not facilitate or encourage the ingress of pests such as ants, cockroaches and rodents etc. It is recommendation that all users of a building do NOT feed any birds, pests etc and keeping external doors/closing windows closed at night to prevent ingress.
- Not to intentionally interfere with any items of pest proofing e.g. fly screens, netting, or spikes installed to deter pests.
- Not to intentionally introduce anything into the workplace that could harbour pests without obtaining explicit permission e.g. unauthorised pets.
- To maintain a tidy workplace, free from clutter or items stored incorrectlyboxes on the floor etc., where pests could nest.
- To inform their manager of any matters that they consider represents a shortcoming in the pest control arrangements.

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3.3.3. Basic control measures for staff involved in food handling (including Catering Staff and Food Handlers, Housekeepers, O.T.'s etc.)

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- Waste food must be double bagged in black bags and put in the appropriate waste bins. The lids of any outside bins must be kept closed to prevent access by pests to the food source.
- · No food is left out in kitchen, serving areas or after food service.
- Exercise stock rotation to ensure that foods are not left in stores for long periods
 of time.
- Sightings of pests or evidence of their existence are reported to Estates and Facilities Department and with Amey/Equans Helpdesk, an Eclipse must be raised
- Report any defects that could lead to pest ingress to their manager, Matron or CNM and Eastes and Facilities departments (i.e. damaged bait boxes, pigeon netting, fly screens etc.).
- Area(s) thoroughly and sufficiently cleaned after an infestation has been dealt with by professional pest contractors.

3.4. Infection Control

- 3.4.1. Pests can carry a large number of disease organisms as well as carrying contaminated material with them. Therefore, it is imperative that pests are controlled to ensure they do not ingress into the healthcare environment.
- 3.4.2. The Trust's Infection Prevention Team and the Trust's Health and Safety Team should be informed of any serious infestation. They will monitor the situation and assess the potential impact on service users and the environment and advise on the appropriate corrective actions to ensure service user safety.
- 3.4.3. In exceptional circumstances, where there is an imminent risk to health from an infestation the Environmental Health Office should be informed via the Senior Food Safety and Quality Assurance Manager.

3.5. Visiting Pets

- 3.5.1. In principle pets should not be brought into healthcare settings, except for guide dogs/canine helpers or as part of the national Pet Therapy scheme. However, there may be occasions when a visiting pet, is beneficial to a particular in-patient for instance a cat or other animal and under these exceptional circumstance's agreement should be sought from the Trust's Infection Prevention Team and an appropriate risk assessment should be carried out, along with checks that the animals are being sourced from a reputable organisation.
- 3.5.2. For other pets these should be dealt with on a case-by-case basis with the ultimate decision being taken by Trust's Infection Prevention Team.

3.6. Quality Monitoring

3.6.1. The Trust will carry out regular monitoring of the quality and procedures of the Trust's Pest Control Provider.

Pest Control Policy IC 03 Birmingham and Solihull Mental Health Foundation Trust 3.6.2. The Quality Monitoring standards are set out in the contract specifications.

3.7. Training Requirements

- 3.7.1. Ward and Department Managers are responsible for ensuring that their staff are fully familiarised and instructed in the requirements of this Policy (and Procedures herein).
- 3.7.2. The Pest Control Contractor are responsible for providing, at the request of the Trust and its contractors, relevant training information for their field technicians working within Trust premises.

3.8. Cleaning Inspections

3.8.1. During the course of routine audits of cleanliness in clinical and non-clinical areas, staff will visually assess the environment for any signs of pest activity or building deterioration which may lead to pest ingress. Any concerns will be reported immediately to the Estates and Facilities Team and Amey/Equans Helpdesk.

3.9. Catering/Food Safety Audits and Inspections

3.9.1. During the course of routine audits and inspections of Trust food areas such as production kitchens, dining areas and ward kitchens, staff will visually assess the environment for any signs of pest activity or building deterioration which may lead to pest ingress. Any concerns will be reported immediately to the Estates and Facilities Team or Amey/Equans Helpdesk.

4. Responsibilities

| Post(s) | Responsibilities | Ref |
|----------------------------------|--|-----------|
| Chief Executive | The Chief Executive has overall responsibility for the provision of a safe and healthy workplace environment for all employees as required by the Health & Safety at Work Act 1974 and delegates this responsibility to senior managers of the trust as detailed in this policy. Overall responsibility for pest control shall include ensuring arrangements are in place for identifying and managing the requirements of legislation relating to pest control and ensuring that adequate resources are provided to implement the policy. | |
| Executive Director of Nursing | The Executive Director of Nursing undertakes the role of 'Director of infection Prevention and control. They are responsible for overseeing the Infection Prevention Partnership Committee work programme which includes receiving quarterly reports on standards and any pest infestations. | |
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| | | , |
|---------------------------------|--|---|
| | Ensuring any breaches in hygiene standards are addressed through line management arrangements. To ensure that staff undertake statutory and mandatory training in infection prevention and control in accordance with the Trust Training Policy. To undertake investigations in relation to complaints of Pest Control infestations or whereby in adherence to standards have been identified in Serious Incidents relating to the management of infectious conditions. | |
| Trust Infection Prevention Team | The Trust's Infection Prevention Team should be informed of any serious infestation, and the Team will monitor the situation and assess the potential impact on service users and the environment and advise on the appropriate corrective actions to ensure service user safety. To report, in exceptional circumstances, where there Is an imminent risk to health from infestation to inform the Environmental Health Office. To review and agree visiting pets for inpatient areas. | |
| SSL Board | The SSL Board has responsibility for ensuring that the Trust has systems in place which comply with the "Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance" (DOH December 2010) and other guidance with regard to the provision of Pest Control Services – including but not limited to; • Ensuring the Trust Board is made aware of any issues which may affect the patient environment. • To be aware of their own role and responsibilities with regard to Pest Control with a view to minimising the risk of infection in accordance current legislation and best practice guidance. | |

5. Development and Consultation process:

An outline of who has been involved in developing the policy and procedure including Trust forums and service user and carer groups.

| Consultation summary | |
|-------------------------------------|------------|
| Date policy issued for consultation | April 2025 |

| Number of versions produ consultation | ced for | 1 | |
|---|------------------|---------|--------------------|
| Committees / meetings wh formally discussed | ere policy | Date(s) | |
| | | | |
| Where received | Summary of feedb | ack | Actions / Response |
| | | | |
| | | | |

6. Reference documents

BSMHFT Food Safety Policy

BSMHFT Cleaning Policy

BSMHFT Infection Control Policy

Control of Substances Hazardous to Health Regulations (2002) (as amended). Health and Safety Executive. (2002).

Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance" (DOH December 2010)

7. Bibliography:

No Documents

8. Glossary:

"COSHH" - Control of Substances Hazardous to Health

9. Audit and assurance:

| Element to be monitored | Lead | Tool | Frequency | Reporting Committee |
|--|--|---------------------|-----------|------------------------|
| Number of Pest Control callouts | Estates & Facilities via Hotel Services Managers/Ca tering Managers/Co ntract monitoring officer | Audit Pro- forma | Quarterly | IPPC |
| Number of actions taken in response to pest issues | Estates & Facilities via Hotel Services Managers/Ca tering Managers/Co ntract monitoring officer | Audit Pro- forma | Quarterly | IPPC |
| Eclipse Reports/Incidents relating to Pest Control | Estates & Facilities via Hotel Services Managers/Ca tering Managers/Co ntract monitoring officer | Audit Pro- forma | Quarterly | IPPC |

10. Appendices:

Appendix 1 - Equality Analysis Screening Form

Appendix 2 - List of Pests most common in Healthcare Environment

Appendix 3 - Pest Reporting Procedure

Appendix 4 - Contact details by site

Appendix 1

Equality Analysis Screening Form

A word version of this document can be found on the HR support pages on Connect http://connect/corporate/humanresources/managementsupport/Pages/default.aspx

| Title of Policy | Pest Control Policy | | | | | |
|-------------------------------|----------------------------|--|----------------------------|--|--|--|
| Person Completing this policy | Gemma Harvey | Role or title Senior Food Safety and Quality Assurar | | | | |
| Toron completing the policy | Gomma Harvey | Tiolo or titlo | Manager | | | |
| Division | Estates and Facilities SSL | Service Area | Estates and Facilities SSL | | | |
| Date Started | March 2025 | Date | April 2025 | | | |
| Date Started | IMAICH 2023 | completed | April 2023 | | | |

Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.

This Policy (and any supporting procedures) applies equally to staff in a permanent, temporary, voluntary or contractor roles acting for or on behalf of Birmingham and Solihull Mental Health NHS Foundation Trust. All staff has a role to play in preventative pest control, from complying guidance found in the Trust Food Safety Policy through to maintaining high standards of tidiness and cleanliness in work areas to reporting the presence or suspicion of pests.

Who will benefit from the policy?

Trust Staff, Service Users and Carers and Pest Control Staff

Does the policy affect service users, employees or the wider community?

Add any data you have on the groups affected split by Protected characteristic in the boxes below. Highlight how you have used the data to reduce any noted inequalities going forward

Potentially can affect service users in patient wards

Does the policy significantly affect service delivery, business processes or policy? How will these reduce inequality?

Potentially does affect service delivery is pests are present, due to the subsequent pest control measures and decontamination.

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Commented [GH6R5]: Completed with Lynn

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| Does it involve a significant commitment of resources? | | | | | | |
|--|-------------------|--------------|------------|---|--|--|
| How will these reduce inequality? | | | | | | |
| The Trust does employ a pe | st control comp | any | | | | |
| Does the policy relate to a | n area where th | ere are kn | own inequ | ualities? (e.g. seclusion, accessibility, recruitment & progression) | | |
| N/A | | | | | | |
| Impacts on different Perso | nal Protected | Characteri | stics – He | elpful Questions: | | |
| Does this policy promote eq | uality of opportu | ınity? | | Promote good community relations? | | |
| Eliminate discrimination? | | | | Promote positive attitudes towards disabled people? | | |
| Eliminate harassment? | | | | Consider more favourable treatment of disabled people? | | |
| Eliminate victimisation? | | | | Promote involvement and consultation? | | |
| | | | | Protect and promote human rights? | | |
| Please click in the relevan | t impact box a | nd include | relevant | data | | |
| Personal Protected | No/Minimum | Negative | Positive | Please list details or evidence of why there might be a positive, | | |
| Characteristic | Impact | Impact | Impact | negative or no impact on protected characteristics. | | |
| | | | | it is anticipated that age will not have an negative impact in terms of | | |
| Age | × | | | discrimination as this policy ensures that all employees should be | | |
| Age | ^ | | | treated in a fair, reasonable and consistent manner irrespective of | | |
| | | | | their age. | | |
| Including children and people | | | | | | |
| Is it easy for someone of an | | _ | | | | |
| Are you able to justify the le | gal or lawful rea | sons when | your servi | ce excludes certain age groups | | |
| | | | | it is anticipated that disability will not have an negative impact in terms | | |
| Disability | x | | | of discrimination as this policy ensures that all employees should be | | |
| Disability | ^ | | | treated in a fair, reasonable and consistent manner irrespective of | | |
| their disability. | | | | | | |
| ' ' | • | | | learning disabilities and those with mental health issues | | |
| Do you currently monitor wh | o has a disabilit | y so that yo | ou know ho | ow well your service is being used by people with a disability? | | |

| Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families? | | | | | |
|--|-------------------|--------------|---|---|--|
| | | | | it is anticipated that gender will not have an negative impact in terms | |
| | | | | of discrimination as this policy ensures that all employees should be | |
| Gender | X | | | treated in a fair, reasonable and consistent manner irrespective of | |
| | | | | their gender. | |
| This can include male and fe | emale or someo | ne who has | s complete | d the gender reassignment process from one sex to another | |
| Do you have flexible working | arrangements | for either s | ex? | | |
| Is it easier for either men or | women to acces | ss your poli | icy? | | |
| | | | | it is anticipated that marital status will not have an negative impact in | |
| Marriage or Civil | x | | | terms of discrimination as this policy ensures that all employees | |
| Partnerships | ^ | | | should be treated in a fair, reasonable and consistent manner | |
| | | | | irrespective of their marital status. | |
| People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters | | | | | |
| Are the documents and infor | mation provided | d for your s | ervice refle | ecting the appropriate terminology for marriage and civil partnerships? | |
| | | | it is anticipated that pregnancy or maternity will not have an negative | | |
| Pregnancy or Maternity | x | | | impact in terms of discrimination as this policy ensures that all | |
| ., | ^ | | | employees should be treated in a fair, reasonable and consistent | |
| | | | | manner irrespective of their pregnancy or maternity. | |
| This includes women having | • | • | • | | |
| | | • | • | t natal mothers both as staff and service users? | |
| Can your service treat staff a | and patients with | n dignity an | a respect | relation in to pregnancy and maternity? | |
| | | | | it is anticipated that race or ethnicity will not have an negative impact | |
| Race or Ethnicity | x | | | in terms of discrimination as this policy ensures that all employees | |
| | | | | should be treated in a fair, reasonable and consistent manner | |
| irrespective of their race or ethnicity. | | | | | |
| Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees | | | | | |
| What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language? | | | | | |
| What arrangements are in place to communicate with people who do not have English as a first language? | | | | | |

| Religion or Belief | x | | it is anticipated that religious beliefs will not have an negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their religious beliefs. | |
|---|------------------|---------------------|---|--|
| Including humanists and nor | | | | |
| Is there easy access to a pro- | • | • | · | |
| When organising events – L | o you take nece | essary steps to m | nake sure that spiritual requirements are met? | |
| Sexual Orientation | x | | it is anticipated that sexual orientation will not have an negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their sexual orientation. | |
| | I images that co | ould be people fro | om any background or are the images mainly heterosexual couples? ut' or would office culture make them feel this might not be a good idea? | |
| Does stall ill your workplace | | e about being of | it is anticipated that transgender or gender reassignment will not have | |
| Transgender or Gender Reassignment | x | | an negative impact in terms of discrimination as this policy ensures that all employees should be treated in a fair, reasonable and consistent manner irrespective of their transgender or gender reassignment status. | |
| This will include people who | are in the proce | ess of or in a care | e pathway changing from one gender to another | |
| Have you considered the possible needs of transgender staff and service users in the development of your policy or service? | | | | |
| Human Rights | x | | This policy is written to promote equality and remove any discrimination to ensure that everyone can fulfil their full potential within a Trust that is inclusive, compassionate, and committed. This is keeping in line with our Trust values, the NHS People's Plan commitment to equality, diversity and inclusion and reflects the provisions of the Equality Act 2010. | |

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| including ag visitors, stal work in parti | applies to <u>all</u> , including applicants applying for a job, staff gency, bank and volunteers, services users and carers, keholders, an any other third-party organisations who nership with the Trust will work with the organisation to reduce impact of any |
|---|---|
|---|---|

Affecting someone's right to Life, Dignity and Respect?

Caring for other people or protecting them from danger?

The detention of an individual inadvertently or placing someone in a humiliating situation or position?

If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)

| | Yes | No | | |
|--|-------------|---------------|------------|-----------|
| What do you consider the level of negative impact to be? | High Impact | Medium Impact | Low Impact | No Impact |
| | | | | х |

If the impact could be discriminatory in law, please contact the **Equality and Diversity Lead** immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.

If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the **Equality and Diversity Lead** before proceeding.

If the policy does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the **Equality and Diversity Lead.**

Action Planning:

How could you minimise or remove any negative impact identified even if this is of low significance?

Managers will work with estates and facilities to reduce impact of any detriment experienced by reports of concern.

How will any impact or planned actions be monitored and reviewed?

Regular audits and policy updates. Feedback of reports of concerns. Concerns to be escalated through Governance routes.

How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.

Policies will be available Trust-wide and promoted in ways that are accessible to all staff.

Please save and keep one copy and then send a copy with a copy of the policy to the Senior Equality and Diversity Lead at bsmhft.edi.queries@nhs.net The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.

List of Pests most common in Healthcare Environments:

BED BUGS

Bed bugs are parasitic insects that feed on blood. Their preferred habitat is in houses, especially beds or other areas where people sleep. They are mainly active at night but are not exclusively nocturnal and can feed on their hosts without being noticed.

There are a number of health effects which can occur from bed bug bites; these include skin rashes, psychological effects and allergic symptoms. A bed bug infestation is caused when they are carried from one infested place to another either by animals or humans or they can infest from another dwelling where there is easy access through ducts or false ceilings for example. They can be detected by their characteristic smell of rotting raspberries and can be found singularly but usually congregate once they are established.

HOUSEFLIES

Significance

Houseflies can transmit intestinal worms, or their eggs and are potential vectors of disease such as dysentery, gastro-enteritis, typhoid, cholera and tuberculosis. They will frequent and feed indiscriminately on any liquefiable solid food, putrefying material or food stored for human consumption.

Control

Flies have rapid, prolific breeding habits and high mobility. In order to break the life-cycle, control measures should be directed against larval and adult flies.

Hygiene/management

Satisfactory hygiene is necessary to limit potential breeding sites and food sources. Entry of flies into buildings can be prevented by 1.12mm mesh fly screen, air curtains, bead screens or self closing door equipment with rubber seals.

COCKROACHES

Distribution

Cockroaches are common in premises associated with the production or handling of food. Gregarious and nocturnal they spend the day hiding in cracks and crevices around areas such as sinks, drains, cookers, the back of cupboards and in refrigerator motor compartments. They favour buildings with service ducts and complex plumbing installations which allow them to travel freely.

Significance

Cockroaches are potential vectors of diseases such as dysentery, gastroenteritis, typhoid and poliomyelitis. Their diet is omnivorous and includes fermenting substances, soiled dressing, hair, leather, parchment, wallpaper, faeces and food for human consumption. The latter may be contaminated either by the mechanical transfer of causative agents of disease from the insect's body, or by transmission in the faeces.

Control

Monitoring and control is essential although successful control of cockroaches is a complex subject, and depends very much upon tailoring control measures to the species concerned. Infestations can be difficult to control as cockroach eggs are poorly penetrated by insecticides. Consequently surveillance of the area by the pest control

contractor may need to be prolonged.

Hygiene/management

A high standard of hygiene will deny sources of food and hiding places.

ANTS

Black Ants:

Foraging worker ants cause a nuisance as they travel widely in search of food, following well-defined trails and clustering around the food source. Sweet foods are preferred. They are obviously an unpleasant sight and may damage food for human consumption.

Pharaoh's Ants:

These 2mm omnivorous light brown ants are half the size of black ants. They cannot breed without artificial heat, are very persistent and pose a serious cross infection risk in hospitals. The ants may be found in wall cavities, heating pipes, behind sinks and ovens and therefore in laundry/linen rooms, clinical and residential areas. They are particularly attracted to sweet or light protein.

Hygiene/management

Although frequently inaccessible and difficult to destroy, ants' nests must be eradicated. If infestation is to be successfully controlled, hormone treatment is required which sterilises the female ant.

WASPS AND BEES

Wasp stings cause pain and distress. Some individuals are particularly sensitive. Wasp nests are only used for one season, so it may be possible to put up with the problem temporarily. They are often found in cavities in brickwork, in air bricks and roof vents. The nest can be treated by the Trust's pest control contractor; such work may be best carried out in the evening or weekend as poisoned stupefied wasps can cause problems. Particular attention should be paid to areas around rubbish bins that could be kept in a hygienic condition.

For bee nests or swarms, a specialist contractor can be contacted to remove the bees safely from site. Identification of nests or swarms must be reported using the procedure in Appendix 3 and site contact details in Appendix 4 of this policy.

OTHER INSECT PESTS

There are many other insect pests that occur sporadically in hospitals. The most common of these being flies of various species, crickets, silverfish and stored product insects and mites which can be found infesting dried foods such as flour weevils.

MICE AND RATS

These are the vertebrates with greatest potential for damage to food stocks and building fabric in hospitals. Modern rodenticides are extremely efficient in the eradication of mice and rats from hospitals.

The Trust will notify the relevant local authority of any infestation of its land or buildings by rats and mice in "substantial numbers" as required by the Prevention of Damage by Pests Act 1949. Rodents have been known to gnaw through electric cables and cause fires. All sightings and other evidence of their presence should be reported. The Trust will take reasonable steps to ensure that its buildings are rodent proofed by, for example, fitting collars where pipes pass through walls and by filling gaps in the building fabric, etc. All

food and organic waste shall be kept in rodent proof containers.

BATS

Bats are protected by the Wildlife and Countryside Act 1981 and the Conservation (Natural Habitats, etc) Regulations 1994. The penalties for contravention are severe. If bats are discovered in any of the Trust's buildings or on any of its land they must not under any circumstances be killed, expelled, stopped from gaining access, touched or disturbed. Contractors must be prevented from doing work anywhere near them. English Nature should be contacted for advice.

RIRDS

The nuisance of birds can be controlled in the first instance by preventative measures, e.g. blocking of nesting holes and the application of devices to discourage perching. Netting and trapping can also be considered with the aim of immediate release away from the area/location of capture. As a last resort birds may be culled by shooting with the approval of the Trust Chief Executive and local police authority. No attempt should be made to poison them. Whichever method is employed it should take into account whether the birds are currently in a nesting season or whether they are protected by law. Advice should be sought from the Royal Society for the Protection of Birds.

SQUIRRELS

The most serious damage in urban areas arises where the squirrel enters the roof spaces of premises by climbing the walls or jumping from nearby trees. Once inside, they chew woodwork, ceilings, electrical wiring insulation or tear up loft insulation to form a drey. The best method of control is to proof the building/loft. Prevention is better than cure. If a cure is required, the best form of control is trapping with the use of a squirrel trap.

FOXES

Foxes may occasionally spread disease such as toxocara and leptospirosis but the risk is believed to be small. There may be damage to grounds caused when digging for food and the indiscriminate depositing of faeces.

RABBITS

Rabbits can cause great damage by burrowing under buildings and putting at risk the foundations of buildings, however there is strict guidelines on their removal so please contact the nominated officer for advice. This applies to any suspected myxomatosis cases.

MOLES

Moles are a widespread species and are not protected by conservation legislation, only having basic protection from cruelty under the Wild Mammals Protection Act 1996.

The mole is a common British mammal and, although not often seen, the results of its tunnelling are well known and may cause damage in a range of situations. In gardens and amenity areas, molehills and tunnels can be a nuisance. In agriculture, contamination of grass by soil may lead to poor quality silage being produced. There is also a risk of damaging grass cutting machinery. Mole runs may disturb roots and adversely affect plant growth.

Before carrying out any mole control, it is important to consider if such action is warranted or if the molehills and tunnels can be tolerated. Where control measures can be justified, there are two main methods, trapping or poisoning with aluminium phosphide. Please note that strychnine hydrochloride can no longer be legally purchased or used for mole

control in the UK.

DEER

From 1 October 2007, under the Deer Act 1991 (as amended), all wild deer with the exception of Muntjac (Muntiacus Reevesi) are protected by a close season. The Regulatory Reform (Deer) (England and Wales) Order 2007 amends the original Act and will improve deer welfare in a number of ways.

The best long-term solution to reduce the damage caused by deer is to achieve an adequate cull each year and so reduce the local deer population. This is best achieved through a wider, co-coordinated cull undertaken by a local Deer Management Group (DMG) rather than on an ad-hoc basis by individuals. However, the legislation makes provisions for actions that can be taken in exceptional circumstances where problems cannot readily be resolved through normal deer management.

BADGERS

Badgers and their setts are protected under the Protection of Badgers Act 1992, which makes it illegal to kill, injure or take badgers or to interfere with a badger sett. Interference with a sett includes blocking tunnels or damaging the sett in any way. The majority of problems posed by badgers can be resolved non-lethally, normally by the partial or complete closure of the sett of the badger(s) causing the problem. Sett closures require a license.

APPENDIX 3

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Pest Reporting Procedure

 All sightings of pests and/or evidence of their existence should be reported in the first instance to the Estates and Facilities Department or the Equans/Amey Helpdesk as needed. (see Appendix 4 for contact telephone numbers). An Eclipse should also be raised.

For out of hours issues emergency problems contact the Estates On-Call Manager. If necessary, the Estates On-Call Manager will contact the pest contractor out of hour's service.

- 1. When reporting, the following information must be provided:
 - i. The location, i.e., ward, department, clinic, etc.
 - ii. Precise location, i.e. bathroom, office, etc.
 - iii. The type of pest if known
 - iv. Possible numbers and the frequency of sighting
 - v. The name of the person reporting
 - vi. The date and time of the sighting
- **3.** In the event that a satisfactory response is not received within 24 hours of the time of reporting the Estates and Facilities Department should be contacted by telephone or email.
- **4.** Follow advice given by the pest control contractor following attendance/treatment. This may include advice on housekeeping, cleaning and maintenance issues.
- **5.** An Eclipse report should be completed for any incidences of a serious infestation.

APPENDIX 4

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Contact details by site

- Amey Helpdesk (Northern Area of the Trust) 0344 701 6504 facilities.helpdesk@amey.co.uk
- Barberry Domestic Office (Barberry, Oleaster) Ext 2049 or 2052
- Zinnia Domestic Office (Zinnia Centre and Community Sites) Ext 5308 or 5309
- Reaside Domestic Office (Reaside and Hillis Lodge Ext 3034 or 3038
- Ardenleigh Domestic Office (Ardenleigh and Rookery Gardens) Ext 4431
- Tamarind Domestic Office Ext 0521
- SSL Estates On-call Manager (via Reaside Switchboard - 01212013000
- Estates Helpdesk (Monday Friday 8am -4pm) 01213012550

Commented [CR7]: Add Estates and Facilities office numbers or emails to escalate issues as per no 3 of pest reporting procedure

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