




# Health and Safety Policy

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Disclosable under Freedom of Information Act 2000	Yes	

## POLICY CONTEXT

Section 2 of the Health and Safety at Work etc Act 1974 requires the Trust to prepare and as often as may be appropriate revise a written statement of his general policy with respect to the health and safety at work of his employees and the organisation and arrangements that are in place for carrying out that policy, and to bring the statement and any revision of it to the notice of all of its employees. This policy enables the Trust to meet this legal requirement. It clearly sets out the expectations and responsibilities of all individuals in contributing to developing and maintaining a positive health and safety culture.

## POLICY REQUIREMENT

The policy will include a statement of intent as it relates to the safety and welfare of all staff and those affected by our activities; the arrangements for delivering this and key organisational responsibilities to enable this delivery.

## CONTENTS

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<b>1</b>	<b>INTRODUCTION .....</b>	<b>3</b>
1.1	Rationale (Why).....	3
1.2	Scope (Where, When, Who).....	3
1.3	Principles (Beliefs).....	3
<b>2</b>	<b>POLICY (What) .....</b>	<b>4</b>
<b>3</b>	<b>PROCEDURE.....</b>	<b>5</b>
<b>4</b>	<b>RESPONSIBILITIES .....</b>	<b>20</b>
<b>5</b>	<b>DEVELOPMENT AND CONSULTATION PROCESS.....</b>	<b>35</b>
<b>6</b>	<b>REFERENCE DOCUMENTS .....</b>	<b>35</b>
<b>7</b>	<b>BIBLIOGRAPHY .....</b>	<b>35</b>
<b>8</b>	<b>GLOSSARY .....</b>	<b>35</b>
<b>9</b>	<b>AUDIT AND ASSURANCE .....</b>	<b>36</b>
<b>10</b>	<b>APPENDICES .....</b>	<b>37</b>

# **1 INTRODUCTION**

## **1.1 Rationale (Why)**

The Trust is committed to ensuring the safety and welfare of its staff and anyone else that may be affected by its activities during the delivery of its services. In order to do this it aims to:

- provide adequate control of the health and safety risks arising from our work activities;
- consult with our employees on matters affecting their health and safety;
- provide and maintain safe plant and equipment;
- ensure safe handling and use of substances;
- provide information, instruction and supervision for employees;
- ensure all employees are competent to do their tasks, and provide suitable and sufficient training and development to ensure this;
- prevent accidents and cases of work-related ill health;
- maintain safe and healthy working conditions; and
- review and revise this policy as necessary at regular intervals.

The Trust is required to discharge its duties under the Health and Safety at Work etc. Act (1974) and allied legislation and European Directives. This will be achieved by maintaining safe conditions and working environments for all areas of activity under its control, so far as is reasonably practicable.

## **1.2 Scope (Where, When, Who)**

This is a Trust wide policy and applies to all staff, service users, volunteers, visitors and contractors regardless of location and needs to be considered for any activity being undertaken on behalf of the Trust or for the use of any of its premises.

## **1.3 Principles (Beliefs)**

The Trust is committed to an open, transparent and systematic approach to the management of risk in order to ensure the health and safety of all staff and others who use or may be affected by our services. To enable this all staff should be aware of appropriate arrangements that the Trust has put in place to ensure their safety and be confident that corrective actions will be taken where safety concerns are identified.

Clear roles and responsibilities must be identified to ensure the implementation of the arrangements/ procedures that the Trust has identified to enable it to discharge its legal duties.

The Trust is committed to adopting a proactive approach in its management of risks and will ensure that safety is a key consideration in any decision making process.

## **2 POLICY (What)**

- 2.1 All staff have a responsibility for their own health and safety and for ensuring that acts of omission or commission do not result in harm to themselves or others. Where possible staff should address any concerns that they become aware of and where this is not practicable to ensure that unsafe acts or conditions are reported to their supervisor or other appropriate person who can take action. Appropriate concerns should be raised via the normal management process, using the Trust Incident reporting system or via local Health and Safety committees.
- 2.2 To ensure continuous improvement all Services will systematically review all risk assessments at least once a year and ensure that actions are prioritised in line with the Trust Risk Management Policy.
- 2.3 The Trust Health, Safety and Fire Committee will be responsible for overseeing the prescribed arrangements in this policy to ensure the health and safety of staff, service users and anyone that may be affected by its activities. The committee will report to the Clinical Governance Committee.

### **3 PROCEDURE**

In order to meet the requirements of specified health and safety legislation, the Trust must be able to clearly demonstrate its arrangements for addressing identified hazards. These are listed below and will be considered in further detail in turn.

#### **Health and Safety Arrangements:**

- 3.1 Accidents and Incidents
- 3.2 Asbestos Management
- 3.3 Control of Substances Hazardous to Health
- 3.4 Display Screen Equipment
- 3.5 Driving
- 3.6 Electrical Safety
- 3.7 Fire Safety
- 3.8 First Aid
- 3.9 Food Hygiene
- 3.10 Housekeeping
- 3.11 Information, Instruction and Training
- 3.12 Legionella Management
- 3.13 Ligature Risk Management
- 3.14 Lone Working Management
- 3.15 Management of Contractors
- 3.16 Manual Handling
- 3.17 Noise and Vibration
- 3.18 Organisational Change
- 3.19 Permits to Work
- 3.20 Personal Protective Equipment
- 3.21 Protecting the Environment
- 3.22 Refurbishments and Construction Projects
- 3.23 Resolution of Health and Safety Matters
- 3.24 Risk Assessments
- 3.25 Security Management
- 3.26 Visitors and Contractors
- 3.27 Work Equipment
- 3.28 Work Experience and Placements

### **3.1 Accidents and Incidents**

The prevention of accidents and ill health is the responsibility of all staff irrespective of grade or position.

The Trust is committed as an organisation to reducing the likelihood of accidents and ill health and will take all reasonably practicable steps to do so.

Where an accident does occur it must be reported as soon as possible to your immediate supervisor. The relevant processes should then be used for recording and investigation of the incident.

The reporting of accidents is important on three fronts:

1. If we know what caused an accident or near miss we can take measures to try to prevent it happening again.
2. We can feed the information back in to the risk assessment process thereby increasing the protection of all personnel in the future.
3. We can comply with the Health and Safety Executive (HSE) requirements that certain accidents are fully investigated and reported to them in accordance with the law – failure to do so is a criminal offence.

Upon receipt of the accident information the line manager will do initial investigations and update the record.

Where a near miss occurs it should also be recorded and investigated. The reporting of near misses is extremely important, as addressing these will prevent actual incidents occurring.

\* A near miss is an incident that had the potential to cause harm or loss but did not materialise due to other factors.

### **3.2 Asbestos Management**

The Control of Asbestos Regulations requires the organisation to manage asbestos that is present in any of its premises. This duty includes providing training for appropriate staff, conducting regular surveys and inspections to identify asbestos and ensure that it is in good condition and where this is not the case to remove or encapsulate. The organisation also needs to ensure that where asbestos has been identified that this information is easily accessible to all staff and to contractors who are doing work on the Trust's behalf.

All staff have a duty to report any concerns that they may have in relation to asbestos management. For example where asbestos has been damaged or to check the asbestos register before commencing any work that affects the fabric of the building.

All contractors visiting Trust premises are required to view the asbestos register prior to commencing any work and to sign a signing in form.

Asbestos has the potential to cause harm through the inhalation of fibres, which remain in the lining of the lungs. Provided the materials are intact and in sound condition then the potential for harm is extremely low. Once the materials are

disturbed or worked upon – particularly through the use of power tools for drilling, cutting and sanding then the risk to health increases significantly.

All identified asbestos materials should be overtly marked and under **no circumstances** must any person irrespective of grade or position disturb them. Any damage noted must be reported to the SSL immediately.

No contractors should be employed without clearance from the respective Contract Administrator who will ensure that all relevant paperwork is in place and suitable and will determine the likelihood of asbestos disturbance.

Please refer to the ***Asbestos Management policy*** for further details.

### 3.3 Control of Substances Hazardous to Health (COSHH)

The Control of Substances Hazardous to Health Regulations place duties upon the Trust to protect its employees and others from risks to their health from hazardous substances, through risk assessment, control strategies and through limiting exposure.

COSHH lays down a hierarchy of duties to reduce exposure that must be followed in this order:

- (a) **Eliminate** the substance or **Substitute** it for a safer alternative e.g. replace a lead paint with a water-based paint
- (b) **Segregate or Enclose the hazard** i.e. make it safe by positioning it away from people who could be affected by it
- (c) **Minimise the generation of the substance** e.g. replacing lids on paints and adhesives etc between jobs to reduce vapours
- (d) **Local Exhaust Ventilation** e.g. extraction hoods over appliances
- (e) **General Ventilation** e.g. ensuring that there is sufficient natural ventilation by opening doors and windows
- (f) **Limit numbers exposed** e.g. prevent access to the area
- (g) **Reduce the exposure period**
- (h) **Cleaning, Storage and Disposal procedures**
- (i) **Suitable Personal Protective Equipment (P.P.E)**
- (j) **Hygiene Arrangements** e.g. no smoking, eating, drinking, suitable washing and cleaning facilities etc.

Hazardous substances may be solid, liquid, dust, fume, vapour, gas, or micro-organism and have the potential to be harmful to health.

Under the CHIP Regulations, hazardous substances must be labelled appropriately.

Before introducing any new substance or preparation subject to these regulations, discussions should take place with the Health and Safety department who will determine whether a written COSHH assessment is required and provide any additional advice.

A standard COSHH assessment form is available on Connect or from the Health and Safety department for the introduction of any new substance.

### 3.4 Display Screen Equipment

To ensure the health safety and welfare of all Trust employees, all DSE workstations, the work equipment and the environment they are in will be assessed for suitability. As the furniture that is purchased is generally standard and meets the requirements, initial assessment will be by the individual following training. Where further concerns are identified the individual or his/ her line manager should contact the H&S department for support.

All DSE 'Users' must complete this training.

The Trust will take all reasonably practicable steps to remedy any risks found as a result of the assessment.

We will make provisions for eye tests and eye examinations for 'Users' as defined under the Health and Safety (Display Screen Equipment) Regulations 1992 and will make a contribution towards corrective spectacles where tests have indicated a need (for DSE purposes).

### Homeworking and Agile Working

Please refer to sections 3.8 and 3.9 of the Display Screen Equipment policy for guidance on these areas.

### *Helping Yourself*

Staff should carry out the following to assist themselves when working with DSE:

Check for glare and reflections on the screen. Try to adjust your environment by closing blinds tilting / adjusting the screen so that reflections and glare are minimised

Do not sit too close to the monitor - 24" or an arms-length is the preferred distance.

**If you have a wrist rest or a palm/mouse rest, use it between keying tasks, not while typing.**

When you use your keyboard or mouse avoid placing or supporting your wrists on sharp edges or on your desktop.

As you use your keyboard or mouse, make sure that your elbow is next to your side.

Keep your wrist relaxed and straight – do not bend it up, down, or to either side.

Keep your shoulders relaxed. Do not hunch or shrug.



**Take frequent short breaks.** Get up and walk around at least a couple of times every hour.

**Focus on a distant object and blink** to allow moisture in to the eyes.

**Vary your tasks throughout the day.** Do something different with your hands and arms for a while.

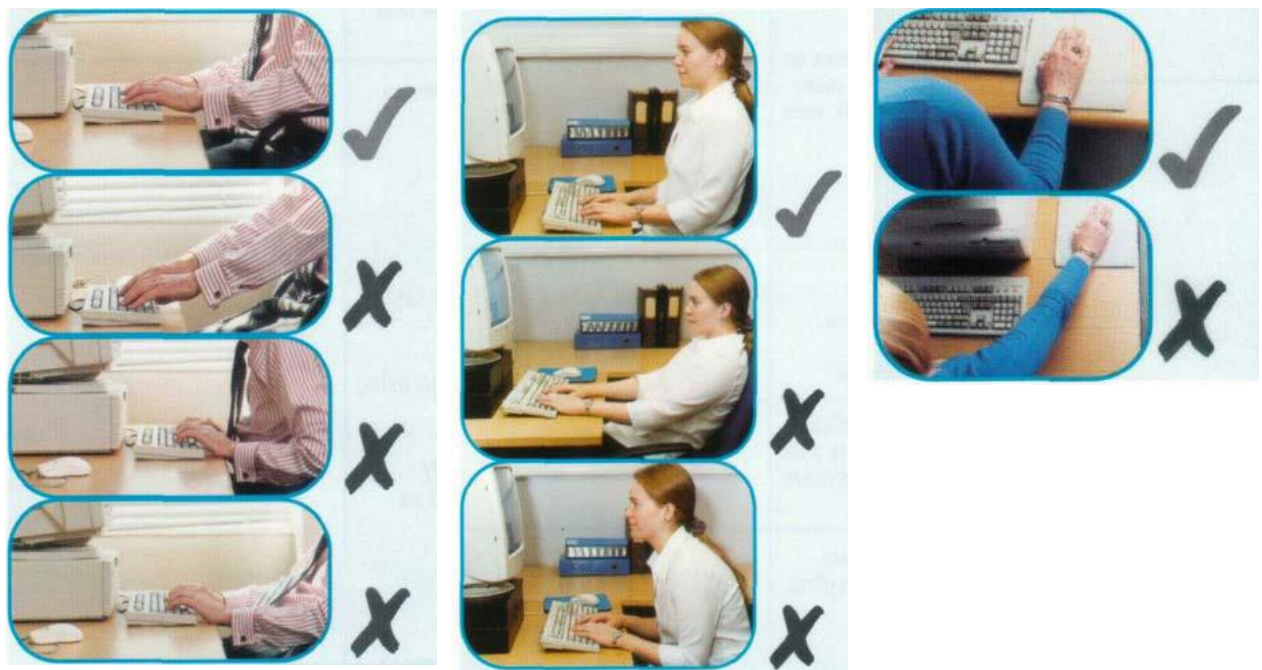
**Use a light touch** on the keyboard and for better control of the mouse.

**Do regular stretching exercises throughout the day.** Gently flex and stretch your fingers, hands, arms, back and neck

**Use software features** to customise your mouse to help you reduce stress to your arm, wrist or hand by minimising repetitive or awkward motions.

Be alert to signs of discomfort:

If at any time during or after typing you feel pain, weakness, numbness or tingling in your hands, wrists, elbows, shoulders, neck or back or if you have any reason to believe that you might be experiencing discomfort as a result of typing or from using the mouse, inform your line manager.



### **3.5 Driving**

Only personnel who have the requisite licenses or authorisations are permitted to drive vehicles on or off Trust sites whilst conducting tasks in connection with work.

Before driving, users should check that the vehicle is safe to be used with no obvious defects. If any defects are found, then these should be reported to supervision and resolved before the vehicle is driven again (reporting to supervision relates to vehicles owned by the Trust).

All vehicles should be driven with due care and attention, consistent with prevailing conditions and pedestrians.

Mobile data devices should only be used in Trust vehicles in line with the relevant policy, risk assessment and the authorisation of management as required.

If a vehicle is being used to carry waste (especially waste that meets the Hazardous Waste Regulations) then before driving, users should check that the vehicle has the necessary permits or licences to carry the type or volume of waste being carried. Management advice should be sought if necessary.

### **3.6 Electrical Safety**

Defective or misused electrical equipment is a significant cause of workplace fires and may result in electric shock and death.

Under no circumstances must unqualified staff ever attempt to modify, repair or maintain electrical equipment. Users do have a role to play however through User Checks which involve visual inspections of equipment on a daily / pre use basis.

Only competent electrical personnel are to work on electrical installations and to maintain and test electrical equipment whether it be fixed or portable.

Any defective items identified by users are to be brought to the attention of management, labelled and taken out of service until disposed of or repaired by a competent person.

Where extension leads and adapters are used they are to be used as per their rating, manufacturers' instructions and not used to accommodate other adapters and extensions.

All electrical switch gear / control cabinets in Trust buildings are to remain locked at all times and access is forbidden to unauthorised personnel. These cabinets should also be suitably labelled.

The introduction of new servers or plant and equipment must be subject to risk and impact assessments, which consider not only the electrical demand but also the effect on the local environment - overheating, noise etc.

Arrangements for the testing of portable appliances (PAT testing) are made on an annual basis (where necessary) by SSL.

### 3.7 Fire Safety

The Trust will ensure that it discharges its duties as required under the Regulatory Reform (Fire Safety) Order 2005 by conducting regular risk assessments of its premises and implementing corrective actions, training staff in line with their responsibilities and conducting regular drills to ensure staff are aware of the procedures.

The Trust will also ensure that there are adequate fire detection and fire fighting measures in place and that such equipment is adequately maintained and accessible as relevant.

All staff have a responsibility for ensuring that fire escape routes are kept clear of obstacles and that they evacuate the building upon hearing the alarm or raise the alarm if they discover a fire.

Staff must not interfere with equipment or facilities provided in the interest of fire safety, for example wedging fire doors open or removing fire extinguishers from allocated locations.

### 3.8 First Aid

The law dictates that the Trust must have adequate provision of first aiders and first aid facilities in the workplace. Minimum levels of cover are required which may amount to **Emergency First Aid at Work** or **First Aid at Work qualified** in each circumstance.

First Aider notices should be erected in the workplace and will inform you of the position of the nearest First Aider.

The notice will also inform you of the position of the nearest First Aid box the contents of which must be maintained.

A first aider's role is to preserve life following an accident / incident until such time as the emergency services arrive. Reasonable requests from a first aider to assist should be observed.

The first aider should be prepared to accompany the injured party to hospital where such a need exists. If the first aider feels that the injured party does not need an ambulance then the first aider can use a taxi or other personal car to take the party to hospital (personal vehicles need to be appropriately insured for business use). The first aiders own vehicle should not be used as he / she must be in a position to resume first aid attention should circumstances dictate.

The nearest hospitals are likely to be:

City Hospital Birmingham	Tel: 0121 554 3801
Good Hope Hospital	Tel: 0121 378 2211
University Hospital Birmingham	Tel: 0121 432 3232
Heartlands Hospital	Tel: 01788572831

*Please refer to the First Aid policy for more details.*

### **3.9 Food Hygiene**

For more detailed information on this area, please refer to the Trust Food Hygiene Policy, which covers food safety legislation.

All areas where food is prepared for service users and staff areas are required to have a food safety system based on HACCP principles. In training kitchens and NAIPS units, a local policy will be based around the Food Standards Agency, “Safer food better business” to ensure food is prepared, cooked and served in a safe method. Local monthly or bi monthly ward kitchens inspections should also occur.

Staff kitchens need to be kept in a clean and hygienic state. Domestic staff are not responsible for cleaning e.g. washing up of mugs etc in staff areas. Staff fridges should not be overfilled and where the door seals are broken, the fridge should be replaced. To avoid health and safety hazards of defrosting fridges, only larger fridges should be ordered when being replaced.

All items of small equipment e.g. microwaves, kettles etc require annual PAT testing via the Estates programme.

Food supplied to the Trust must only be purchased from safe suppliers that have been audited externally. Where food is purchased for events not procured through the Trust, the hygiene ratings should be checked and only establishments with a rating of 4 or 5 must be used.

### **3.10 Housekeeping**

Poor housekeeping is one of the primary causes of fires in the workplace and is a significant contributory factor in many slipping and tripping incidents.

Please maintain good housekeeping standards by:

Keeping your work area clean and tidy

Keeping all pedestrian traffic routes and emergency exits free from debris and accumulations

Ensuring the prompt disposal of waste

Cleaning up spillages immediately

Housekeeping will be audited as part of the site health and safety inspections.

### **3.11 Information, Instruction and Training**

In line with the requirements of section 2 of the HSAWA 1974, the Trust has a duty to ensure that all staff are suitably trained and developed to carry out their work safely. This also includes the provision of relevant information and instruction to enable those individuals to demonstrate competence and discharge any duty as outlined by the organisation.

Specific training will be delivered in line with role requirements and this will usually be approved via the Learning and Development process, following authorisation by a line manager or at a relevant committee. All individuals have a duty to co-operate with his/ her employer by attending such courses where they have been identified.

Training should be reviewed to ensure it is fit for purpose and meets the needs of the organisation. Where relevant, training should also be refreshed in line with the Trust's policies and procedures.

### **3.12 Legionella Management**

Legionnaire's disease is a water borne biological disease. There is an agreed procedure in place to manage this risk in line with the requirements of L8 and the SSL arranges this. Allied to this is the Legionella Management policy, which details what must be achieved.

There is also a monthly Water Management Group that addresses any emerging risks and discusses any best practice or shared learning.

### **3.13 Ligature Risk Management**

Ligature risks continue to pose a challenge to service user safety and to this end a number of actions are taken to manage this. A ligature risk assessment must be completed for all inpatient units at least annually and community buildings where patients are seen will have a section on ligature risk management in the environmental assessment. Staff will take account of specific risks when formulating care plans and will identify the appropriate control measures, which may be a mixture of clinical interventions and changes to the physical environment.

*See the Ligature Risk Reduction Policy for more details.*

### **3.14 Lone Working Management**

The Trust must consider the potential risks associated with Lone Working and determine what the appropriate measures should be to manage any identified risks.

Some of the dangers that may be encountered on a daily basis can be compounded when faced in isolation. These factors must be assessed and considered fully when planning tasks and activities.

We need to consider:

Can an *isolated* worker adequately control the risks associated with the activity/ situation?

It might be that there is a history of aggression in the role or the person suffers from a pre-existing condition, which makes them vulnerable when working alone. These are factors that must be considered in the risk assessment process.

Precautions should take account of normal and foreseeable emergencies i.e. equipment failure, fire, assaults, illness and accidents.

Some of the more straightforward precautions can include contacting a colleague at a predetermined time / interval and use of telephone contact.

If additional safety precautions are identified then these should be addressed prior to work commencing.

Managers should ensure that specific procedures are in place for managing lone working and that all staff concerned are aware of these. Where provided, staff must also utilise the Trust lone working device.

Please see the *Lone Working Policy* for more details.

### **3.15 Management of Contractors**

When contractors and sub-contractors are employed by, or on behalf of the Trust, the Contract Administrator (CA)/ Project Manager must make sure that every contract awarded, requires that contractors and sub-contractors will adopt safe methods of work and has an adequate Safety Management system in place. This means complying with the relevant health and safety legislation including the Health and Safety at Work, etc Act 1974, the Management of Health and Safety at Work Regulations and, where relevant, the Construction (Design and Management) Regulations and any other regulations related to the specific contracted activity.

If a contractor or sub-contractor fails to meet the health and safety standards required by the Trust or the requirements of the contract, the relevant CA must seek timely remedial action to ensure compliance. We may exclude contractors that continually fail to use safe working practices from tendering for future work for the Trust.

The Trust's health and safety team has right of entry into any of the contractor's areas of work at any Trust premises at all times to do any necessary accident investigation procedures or to make sure that safe systems of work are in place and are being followed.

### **3.16 Manual Handling**

The Trust recognises the importance of correct lifting techniques and good ergonomics in preventing ill-health and injuries. To address these issues a Manual Handling Policy exists and a program of Manual Handling Training has been consistently rolled out across the Trust.

Please refer to the *Manual Handling* policy for more details.

### **3.17 Noise Control**

The Control of Noise at Work regulations 2005 requires that the Trust takes appropriate steps to ensure that its employees or those affected by its activities are not exposed to noise levels that could affect their level.

To discharge this duty the Trust will ensure that where possible engineering controls are put in place to manage noise exposure and prevent exposure above the 'action levels'. Where it is not possible to do this, a risk assessment should be conducted to determine the best control measures to manage the risk. These measures might include personal protective equipment and monitoring regimes such as regular noise surveys.

For those employees who work in areas where they are regularly exposed to higher levels of noise, they will also be on the health surveillance program with Occupational Health to ensure that their health is not being adversely affected.

### **3.18 Organisational Change**

It is recognised that the organisation will go through periods of change. Prior to the implementation of change the Trust will ensure that the relevant risk and impact assessments have been completed and that there is adequate consultation and communication with staff associations and relevant staff.

The Quality Impact Assessment can be used to support this.

### **3.19 Permits to Work**

Permits to work are required for the following activities both within buildings or if used externally:

- Use of Bitumen Boilers (Hot Work)
- Welding / Burning / Hot Cutting (Hot Work)
- Use of Angle grinders / Cutting disks (Hot Work)
- Confined Spaces – any area in which oxygen deficiency, flammable, or dangerous fumes or vapours are liable to be present to such an extent as to involve a risk to persons entering.
- Work on High voltage electrical equipment
- Working at heights / roofs
- Modifications to safety systems

Personnel must not conduct the above work without a signed permit from Estates Services or the relevant department (Contract Administrator).

### **3.20 Personal Protective Equipment (PPE)**

The Trust is committed to reducing risks in the workplace in so far as is reasonably practicable.

Nevertheless there will be certain circumstances where the use of personal protective equipment will be required. These will be provided based on risk assessment and will be procured using the Trust procedure.

To be effective PPE has to have the following characteristics:

- Be appropriate for the job and hazards involved
- It has to fit correctly
- It has to be properly stored and maintained
- And most importantly – it has to be worn in accordance with the findings of risk assessments and where circumstances dictate

Where PPE has been provided all relevant employees have a legal duty to wear/ use it in line with any Trust guidance that is issued. PPE (especially those used in infectious or contagious activities) must be disposed of in line with Trust Infection Prevention and Control and Waste Management policies.

### **3.21 Protecting the Environment**

The Trust has a legal duty to prevent pollution and to protect the Environment.

To meet this aim it shall be the duty of all employees to:

- Keep a clean and tidy site
- Obtain clearance from the Estates Services department before pouring any chemical substances down **any** drains
- Be aware of any relevant emergency procedures
- Report any leaks, spillages or unusual emissions at the earliest opportunity
- Control and minimise waste
- To segregate waste (pre-treatment of waste regulations) and re-use or if not recycle waste where possible
- To switch off machinery and any other electrical items if safe to do so when not in use

Estates Services co-ordinates and updates the *Waste Management policy*.

### **3.22 Refurbishments and Construction Projects**

All construction work, including design and demolition works, must comply with the requirements of the Construction (Design & Management) (CDM) Regulations. There must be adequate consultation between the client, designer, CDM co-ordinator, principal and other contractors and site management.

For non-CDM projects, all relevant risk assessments and method statements must be submitted to the Contract Administrator or Project Manager and signed off before any work commences. There should also be on-going monitoring to ensure contractor compliance with the necessary requirements.

### **3.23 Resolution of Health and Safety Matters**

All staff must follow health and safety policies and protocols by using recognised working practices and by keeping their workplace safe.



Health and safety matters can be dealt with more effectively and speedily in an atmosphere of mutual confidence and trust, which promotes a positive health and safety culture.

It is anticipated that most health and safety matters can be resolved informally between the individual and their supervision who may, if necessary seek the assistance or guidance of the Health and Safety team and / or staff associations/ unions.

Where an individual feels that they are unsatisfied and the matter remains unresolved then they can take the matter further with their safety committee representative.

The representative will then be in a position to discuss the matter with the supervisor or refer it to the relevant Operational level Health and Safety Committee. Where deemed necessary and if of a strategic nature, matters can be raised at the Trust Health, Safety and Fire Committee.

In certain circumstances the gravity of the matter and the potential exposure of the organisation will dictate that matters will be pursued through the formal stages of disciplinary proceedings. The need for disciplinary action will only follow once other avenues have been exhausted.

A local health and safety lead must be nominated for each site (depending on the size of the building this will be per ward/ function or for the building) and will act as a link between local staff and the wider organisation via the appropriate health and safety committee.

### **3.24 Risk Assessments**

Risk Assessments are key to the reduction of risk within the organisation. The real purpose of them is to make us stop and think – **‘What happens if?’** e.g.:

- What happens if we do not record service users’ details correctly?
- What happens if we allow inexperienced staff to conduct activities for which they do not possess the appropriate skills or competency?

Once we have considered **‘What happens if?’** we need to consider how severe an outcome might be and how likely it is that the outcome might occur.

Those conducting risk assessments should have the relevant training and should use only the approved Trust forms for recording them.

There are different types of risk assessments – environmental, ligature, task specific or individual etc. Risk assessments should be reviewed at least annually or sooner if there are any changes to tasks, processes, infrastructure, services offered, equipment etc.

Environmental and Ligature risk assessments will be completed using a multi-disciplinary approach, which involves a member of the Health and Safety team, an Estates Manager or Officer and the local Ward or Service Manager.

Risk assessments submitted to the Health and Safety team will be stored centrally on Connect and action plans will be followed up on a quarterly basis to ensure the completion of identified actions.

### **3.25 Security Management**

In accordance with NHS Protect security standards, the Trust will endeavour to ensure that security management provision is achieved and maintained to the documented standards. To facilitate this, the Trust Employ a qualified Local Security Management Specialist (LSMS), to undertake the full range of security management work detailed within these standards and have appointed a member of the Executive Board, with responsibility for overseeing strategic management and support for all security management work within the Trust.

The LSMS provides support and guidance to the Trust to ensure compliance with statutory requirements and guidance issued by NHS Protect, specifically in relation to the protection of people, property and assets, drugs and prescription forms. The LSMS also works to develop and maintain liaison between the Trust and its external partners in relation to all areas of security management.

### **3.26 Visitors and Contractors**

Where possible the Trust will make visitors and contractors aware of specific hazards that are relevant to a particular site. The Trust will ensure that its premises are safe so far as is reasonably practicable to prevent injury to visitors.

Staff in receipt of visitors need to make any necessary arrangements prior to a visit to ensure that the visitor will be safe during their time in the organisation. Visitors must be issued with a visitor badge and sign in and out of the visitors' book. Where relevant they must be escorted at all times. The staff receiving the visitor will be responsible for their safety during the visit.

The suitability, competency, appointment and safety of Contractors must be in line with the requirements of relevant documents relating to Contractor Management. Support can be obtained from the Health and Safety team where necessary.

The Trust has a duty to ensure the health, safety and welfare of contractors whilst working on Trust premises and all personnel have a duty to ensure that contractors are safe.

Particular responsibilities lie with those who select and bring contractors on to Trust premises.

### **3.27 Work equipment**

Providing and using the correct work equipment, along with appropriate safe systems of work and training are essential to minimise health and safety risks. Departments must ensure that any work equipment supplied is checked and that individuals receive adequate instructions and training as appropriate and take relevant safety precautions before using it. They must also get the best appropriate

advice available before new or replacement equipment is supplied, installed, sited or fitted in work premises.

Departments must maintain comprehensive records for all plant and equipment controlled by them, and have a clear system for correct maintenance, training and inspection. They are also legally required to keep inspection and test certificates and thorough examination reports up to date for hoists, compressors, vehicles and other plant and equipment or, on expiry, take the item out of service until newly certificated. They must keep these records and copies of the certificates on site or in a suitable location.

Work equipment should only be procured using Trust approved processes and suppliers.

### **3.28 Work Experience and Placements**

Where there has been an agreement between the Trust and another organisation or agency to accommodate a student for work experience or placement the Trust will treat that individual as an employee for the purposes of health and safety legislation.

The organisation or agency will be responsible for completing any necessary risk assessment (supported with information from the Trust as necessary) and ensuring that appropriate insurance is in place.

There should be clear communication regarding the expectations for both parties for the duration of the placement.

Please refer to the *Work Experience policy* for further details.

## 4 ORGANISATIONAL RESPONSIBILITIES

Post(s)	Responsibilities	Ref
Chief Executive	<p>The overall and final responsibility for health and safety is that of the Chief Executive. In particular s/he:</p> <ul style="list-style-type: none"> <li>• Has the direction and control of the Trust and thus has responsibility for its activities and operations</li> <li>• Must discharge the general duties of an employer, under Section 2 HASAWA 1974 in respect of all employees and volunteers through the health and safety management systems of the Trust, and by oversight through corporate governance</li> <li>• Has a duty under Section 4 HASAWA 1974 to ensure that premises owned by the Trust are safe.</li> <li>• Identify any members of staff having direct responsibility for particular health and safety matters, ensuring that they have the training, information and resources required</li> <li>• Must ensure that so far as the activities of the Trust affect the health and safety of non-employees, such persons are not exposed to risk, in so far as is reasonably practicable</li> <li>• Ensure that staff with control of resources (financial and other) give due regard to health and safety matters.</li> <li>• The Chief Executive's "undertaking" for the purposes of Section 3 HASAWA 1974 includes monitoring the effectiveness and efficiency of the Trust's Health and Safety Management systems.</li> </ul>	
Executive Director for Health and Safety	<p>The Executive Director of Quality, Improvement and Patient Experience has been allocated 'director level' responsibility for determining and overseeing the strategic direction of health and safety issues on behalf of the Chief Executive. In particular s/he will:</p> <ul style="list-style-type: none"> <li>• Have responsibility for devising, making and approving the health and safety policy;</li> </ul>	

	<ul style="list-style-type: none"> <li>• Approve the Trust's Health and Safety Policy/Strategy;</li> <li>• Formulate and agree plans to review progress and achieve continuous improvement to develop the Trust and the Policy/Strategy</li> <li>• Establish strategies to implement policy and integrate these into the general activities of the Trust;</li> <li>• Assign responsibilities for planning, measuring, reviewing and auditing health and safety policies and procedures;</li> <li>• Specify the structure and supporting plans for implementing policy and strategy;</li> <li>• Liaise with the Health and Safety Manager and Trade Unions to further improve health, safety and welfare standards Trust wide</li> <li>• Ensure that health and safety performance is regularly reviewed and report back to the Chief Executive.</li> </ul> <p>In addition, the Executive Lead will chair the Strategic Health and Safety Committee and promote effective measures to manage the risks from the Trust's activities.</p>	
Executive Directors	<p>Executive Directors are accountable to the Chief Executive for matters of a strategic nature thereby satisfying him/ her that duties are being met.</p> <p>In particular they will:</p> <ul style="list-style-type: none"> <li>• Maintain a broad awareness of statutory requirements for health and safety and the specific issues which are relevant to the Trust's operations in this respect;</li> <li>• Ensure the allocation of sufficient financial and human resources to meet the requirements of this policy and the policies and procedures, which supplement it;</li> <li>• Facilitate, encourage and contribute to the review of the management of health and safety within the Trust; and</li> <li>• Through corporate health checks and other appropriate performance measures, monitor performance indicators relating to health and safety, encourage excellence and ensure that timely and appropriate remedial action is taken when required.</li> </ul>	

<p>Associate/ Clinical and Medical Directors – <i>Associate Directors will also have oversight of the Operational Health and Safety committees under their areas of control</i></p>	<p>Associate, Clinical and Medical Directors are accountable to the Chief Executive for the implementation and performance management of the Trust Health and Safety Policy for the areas under their control.</p> <p>More specifically each is responsible for (with the use of Trust resources) ensuring that:</p> <ul style="list-style-type: none"> <li>• The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under their control;</li> <li>• Maintaining an up to date outline knowledge of the statutory requirements relating to health and safety which are relevant to their activities;</li> <li>• Set key performance indicators for health and safety in line with the business planning process and operational health and safety requirements;</li> <li>• Operational level safety plans are developed in line with the Trust Health and Safety Plan;</li> <li>• Compliance is monitored by reviewing performance in the completion of health and safety plans, risk assessments and accident investigation and recommendations have been implemented</li> <li>• All significant incidents are investigated and the work activities / processes are improved to prevent reoccurrence;</li> <li>• Regular health and safety meetings for the business areas are held and chaired by a senior manager with delegated responsibility;</li> <li>• Ensuring the need for funds or resources for operational/ health and safety requirements is considered alongside all other budget and resource management planning.</li> <li>• Accommodation needs are appropriate according to the tasks that are to be carried out in that facility;</li> <li>• A training programme exists to instruct persons under your control in the requirements of their role in the organisation, health and safety and in the safe systems of work relevant to their workplace and work activities;</li> <li>• Persons under your control are released from their duties to attend relevant training</li> </ul>
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	courses / development briefing opportunities;	
Clinical Leads/ CNMs/ CSMs/ Corporate Managers	<p>Clinical Leads and Service Development Managers have responsibility for ensuring that:</p> <p>The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under your control. Communication and consultation occurs with other managers in matters where co-dependencies exist.</p> <p>Each is responsible for ensuring that:</p> <ul style="list-style-type: none"> <li>• They maintain an up to date outline knowledge of the statutory requirements relating to health and safety which are relevant to their activities;</li> <li>• Staff under your control conduct and where necessary review risk assessments and systems of work relating to their activities;</li> <li>• Arrangements for consultation with staff to develop risk assessments for work activities, operations and equipment exist and are used;</li> <li>• COSHH assessments are completed and implemented prior to the person(s) using the hazardous substances;</li> <li>• All incident / hazard reports are reported via the relevant reporting procedures;</li> <li>• All significant incidents that affect persons under your control are thoroughly investigated and documented and recommendations are prioritised and implemented. These should also be fed back into the risk assessment;</li> <li>• Recommendations from fire risk assessments are implemented and communicated;</li> <li>• Adequate first aid equipment is available on site and trained first aiders are available on;</li> <li>• Operational health and safety committee representatives are notified of any health and safety concerns that have local or Trust implications.</li> <li>• Succession planning in relation to health and safety is maintained for each role – Fire Wardens / First Aid etc.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Joint safety inspections of the workplace are undertaken every six months/ annually with the assistance of Estates and health and safety and the recommendations are prioritised and implemented;</li> <li>• The work environment under your control is adequate in terms of heating, lighting, equipment, space and ventilation. Shortcomings are brought to the attention of SSL;</li> <li>• Training needs are identified through the risk assessment and Appraisal processes and then communicated to the Learning and Development department;</li> <li>• All new staff are inducted through the Trust Induction programme</li> <li>• All equipment or services are purchased through the Contracts and Purchasing department or approved contractual agreements.</li> </ul>	
Ward Managers/ Matrons/ Supervisors/ Corporate Leads	<p>Ward Managers, Lead Nurses and Matrons have responsibility for ensuring that:</p> <ul style="list-style-type: none"> <li>• The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under your control.</li> <li>• They maintain a good working knowledge of applicable statutory requirements, related guidance and internal rules and procedures, which relate to their areas of operation.</li> <li>• Consultation occurs with staff to develop risk assessments for all work activities, operations and equipment under your control. Assessments are recorded, reviewed, signed off and copies forwarded to the Health and Safety team to be posted on Connect;</li> <li>• Substances are assessed, stored, handled and transported in accordance with COSHH regulations;</li> <li>• All items of PPE that are provided are readily available and maintained in good condition;</li> <li>• All significant incidents are investigated, recorded and the recommendations implemented and fed back into the relevant risk assessment;</li> </ul>	



	<ul style="list-style-type: none"> <li>• All vehicles used for work purposes are in good condition, regularly serviced and maintained with any defects reported by drivers.</li> <li>• The workplace is maintained in a clean and tidy condition. Defects are promptly reported and action taken for urgent situations;</li> <li>• Training requirements of personnel are recorded and training including, on the job training is recorded using the Appraisal system;</li> <li>• New staff are inducted through the Trust Induction programme;</li> <li>• All equipment or services are purchased through the contracts and purchasing department or approved contractual agreements. Risk assessments form the basis for the specification;</li> </ul>	
All Staff	<p>Each individual has an obligation to take reasonable care of his / her own health and safety and for the safety of others that may be affected by their actions or inactions. All staff must co-operate with their managers and supervisors. In addition to this general requirement the following responsibilities are placed upon staff members:</p> <ul style="list-style-type: none"> <li>• To comply with all health and safety instructions whether written or verbal;</li> <li>• Report any damage or defective equipment or any health and safety problems to a supervisor and where appropriate, to an identified health and safety representative;</li> <li>• Take care of yourself and others;</li> <li>• Not to misuse or interfere with any equipment provided for your health and safety;</li> <li>• Wear the correct clothing for the working conditions and job being done. This may be prescribed in any risk assessment, safe system of work, risk control strategy or procedure that may be documented for the task being performed;</li> <li>• Use machinery, equipment, substances, transport equipment or safety devices/ equipment in accordance with training and instruction provided;</li> <li>• Report any medical condition to their immediate supervisor and the Occupational</li> </ul>	

	<p>Health provider which may/ could affect health and safety at work;</p> <ul style="list-style-type: none"> <li>• Attend training courses when requested and complete all training / development / briefing events or opportunities when requested to do so;</li> <li>• Report all accidents, incidents, near misses, hazards whether injured or not to a supervisor;</li> <li>• Not undertake any repairs (however minor) unless they have been specifically authorised and are competent to do so;</li> <li>• Become knowledgeable and competent with the work activity, process you undertake and of the procedures / systems that are in place to minimise or eradicate risks;</li> <li>• To assist the employer in developing risk assessments and to become knowledgeable and familiar with risk assessments relevant to their occupation / role;</li> <li>• Not to use or bring into work any unauthorised equipment or protective clothing;</li> <li>• Be aware of the emergency evacuation procedures, location of welfare facilities, first aid and fire fighting equipment (if trained to use it).</li> </ul>	
Local H&S Lead	<p>With appropriate training, to have responsibility for:</p> <ul style="list-style-type: none"> <li>• Acting as a link between a specific site/ ward or function and the wider organisational health and safety management system via the relevant H&amp;S committees or other relevant forums</li> <li>• Raise local H&amp;S issues of non-compliance with local managers and escalate as necessary</li> <li>• Link in with local union H&amp;S leads as required</li> <li>• Facilitate local H&amp;S inspections, investigations and other relevant work where necessary</li> <li>• Represent their site/ ward or function at local H&amp;S committees</li> </ul>	
Health and Safety Team	<p>The Health and Safety team is responsible for providing advice and information on the application of health and safety legislation</p>	

	<p>within the Trust. The Health and Safety team is responsible within the health and safety policy for advising on, formulating and developing health and safety policies and for promoting a positive health and safety culture to secure the effective implementation of policies.</p> <p>Specifically having responsibility for ensuring that:</p> <ul style="list-style-type: none"> <li>• The Health and Safety Management system allocates responsibility for health and safety with line management in accordance with legislative requirements and the 'Responsibilities' section of this Policy;</li> <li>• Develop and review a long-term strategy and action plan for continuous improvement of Health and Safety compliance for the Trust;</li> <li>• Develop and Review annual and specific health and safety plans throughout the Trust;</li> <li>• Ensure that appropriate guidance and cost effective advice is provided to the Chief Executive and the Trust on all health and safety issues;</li> <li>• Identify, interpret and advise on relevant Health and Safety legislation and Codes of Practice and maintain up-to-date guidance for the Trust;</li> <li>• Advise on all safety aspects including equipment, processes and materials, particularly when new items are to be introduced;</li> <li>• Maintain an up to date Health and Safety site on Connect to communicate policies, procedures, guidance and best practice to implement the safety management system;</li> <li>• Promote best practice in relation to health and safety issues, and advise staff on potential health factors associated with work activities and workplace hazards;</li> <li>• Advise and where necessary assist in the investigation of accidents and near misses to determine root causes, accident trends and means to prevent recurrence;</li> <li>• Monitor the reporting and documentation of accidents and near misses in line with Trust Policy;</li> </ul>	
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	<ul style="list-style-type: none"> <li>• Establish appropriate working relationships with the Health and Safety Executive, and other relevant external and internal bodies, to ensure that all advice given is in line with current Directives;</li> <li>• Work with Trade Unions' Safety Representatives on safety matters and encourage their active participation in work-place inspections and safety committees;</li> <li>• Manage the requirement of risk assessments, conducting specific assessments where necessary to ensure that the organisation's liabilities in terms of Health and Safety are adequately addressed;</li> <li>• Attend the relevant health and safety committees and identify key priorities and agenda items, and ensure the Committee reflects the on-going needs of the Trust;</li> <li>• Oversee a Trust wide monitoring/ audit programme ensuring that the relevant findings are reported to appropriate management and groups within the Trust;</li> <li>• Prioritised health and safety training is incorporated within the Trust's training programme whilst reviewing training requirements and making appropriate adjustments as demanded by legislative changes;</li> <li>• The Trust is advised of the appropriate level of resources or funding to meet health and safety plans and objectives throughout the organisation;</li> </ul>	
Occupational Health	<p>The Occupational Health Provider is responsible for providing support, advice and guidance to the Trust as it relates to health matters.</p> <p>Specifically it will be responsible for ensuring the:</p> <ul style="list-style-type: none"> <li>• Promotion of best practice in relation to occupational health issues, and advise staff on potential health factors associated with work activities and workplace hazards</li> <li>• Provisions are made for health assessments to be conducted for new and existing staff in line with the requirements of legislation and their roles and records are kept.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Where legislative requirements and risk assessments dictate that health / medical / biological surveillance is undertaken on exposed employees and records are kept for at least 40 years;</li> <li>• In liaison with Human Resources Business Partners and line managers risk assessments are conducted for staff returning to work to ensure that they are not placed at greater risk due to their condition / demands of the work activity;</li> <li>• Provide appropriate rehabilitation interventions. Support and give advice to managers and staff regarding rehabilitation, recuperation and medical redeployment, with regard also for organisational policy that may affect these activities</li> </ul>	
Human Resources	<p>The Deputy Director of Human Resources has responsibility for ensuring that:</p> <ul style="list-style-type: none"> <li>• The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under their control</li> </ul> <p>HR Business Partners and their teams have responsibility for ensuring that:</p> <ul style="list-style-type: none"> <li>• Suitable advice is given to the organisation as it relates to employment relations and employee entitlements.</li> <li>• Advice is provided to managers to support them in managing sickness absence</li> <li>• Arrangements are implemented to ensure that only competent individuals having the appropriate knowledge, skills and aptitude are recruited to fill vacant posts;</li> <li>• All new employees including agency staff and temporary staff undergo the corporate induction programme;</li> <li>• Procedures are in place for enforcing the Trust's safety rules</li> </ul>	
	<p>The Head of Learning and Development will be responsible for identifying and providing solutions to the identified needs of the on-going Health &amp; Safety training needs analysis.</p> <p>Particularly Learning and Development will have responsibility for ensuring that:</p>	

Learning and Development	<ul style="list-style-type: none"> <li>• The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under their control;</li> <li>• Training needs analyses are conducted annually through the risk assessment and Appraisal processes by line managers to determine the training requirement;</li> <li>• To ensure that when notified of the projected training needs for each financial year adequate funding and prioritisation of resources may be allocated to ensure that at least the minimum health and safety legislative training requirements are met;</li> <li>• Where necessary for health and safety reasons sufficient planning incorporates the anticipated needs for refresher training requirements;</li> <li>• There is delivery of suitable and sufficient health and safety courses to meet legal and organisational requirements, prioritised on a risk assessed basis.</li> <li>• Learning facilities and learning activities are suitably and sufficiently risk assessed cognisant not only of the venue, the learning to be undertaken but also the profile of the trainees such as those with disabilities and or learning difficulties and the need to evacuate in an emergency;</li> <li>• A central system is maintained to administer Trust learning records for all learning activities including on the job training. Also to ensure that learning is recorded for each employee's personal employment record.</li> </ul>	
Estates and Facilities (SSL)	<p>The SSL has responsibility for ensuring that:</p> <ul style="list-style-type: none"> <li>• The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under their control;</li> <li>• All structural aspects of the Trust's estate holdings including temporary buildings and ancillaries are surveyed and maintained on a periodic basis in accordance with health and safety and building legislation;</li> <li>• To ensure that relevant contractors and sub-contractors are appropriately selected</li> </ul>	

	<p>and monitored to ensure compliance with relevant Trust policies and other legislation;</p> <ul style="list-style-type: none"> <li>• Waste streams within the Trust are adequately managed from source through to disposal;</li> <li>• Plant, equipment, services and premises owned or occupied by the Trust is maintained in an efficient state and in efficient order so as not to give rise to danger and is inspected and maintained in accordance with all statutory requirements;</li> <li>• Appropriate fire fighting, fire detection and fire signage equipment is provided and maintained in accordance with relevant British Standards and Building Regulations;</li> <li>• All construction and other works commissioned under SSL's control, complies with Construction, Design and Management Regulations and other relevant legislation;</li> <li>• Local exhaust ventilation is subjected to statutory inspections at periods not exceeding 14 months;</li> <li>• To ensure that the Asbestos Management Plan and procedures are complied with;</li> <li>• To monitor that the Asbestos Registers are in place and the systems are being adhered to in accordance with the Control of Asbestos at Work Regulations 2012;</li> <li>• That systems are in place to monitor and reduce the risk of Legionella in water supplies in accordance with the Approved Code of Practice - L8;</li> <li>• Condition surveys are conducted periodically to proactively identify and resolve problems;</li> <li>• Accommodation needs are appropriate according to the tasks that are to be carried out in that accommodation and comply with relevant legislation;</li> <li>• The Chief Finance Officer is notified of additional funding required as identified through surveys or capital asset expansion;</li> <li>• That any shortfalls in staff and or resources are accounted for and addressed so as not to create additional health and safety risks.</li> </ul>	
ICT	The ICT department has responsibility for ensuring that:	

	<ul style="list-style-type: none"> <li>• The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated and acted upon by persons under their control;</li> <li>• Equipment purchased complies with the requirements of legislation and enable staff to make adjustments as necessary to ensure their safety</li> <li>• Relevant contractors and sub-contractors are appropriately selected and monitored to ensure compliance with relevant Trust policies and other legislation;</li> <li>• These contractors have presented all necessary paperwork such as risk assessments and method statements before any works commence</li> <li>• The Chief Finance Officer is notified of additional funding required as identified through surveys or capital asset expansion;</li> <li>• Any shortfalls in staff and or resources are accounted for and addressed so as not to create additional health and safety risks.</li> <li>• Staff under their control receive relevant Health and Safety training to enable them to work safely</li> </ul>	
Safety Representatives	<p>In accordance with the provisions of the Health and Safety at Work etc Act 1974 recognised trade unions representing the interests of Trust personnel are entitled to appoint safety representatives to consult with management in matters relating to health and safety and to carry out the functions detailed in the Safety Representatives and Safety Committees Regulations 1977, as amended.</p> <p>These functions include:</p> <ul style="list-style-type: none"> <li>• Representing the employees in discussions with the employer on health, safety or welfare issues and in discussion with the HSE or other enforcing authorities;</li> <li>• Familiarising themselves with the health and safety policy, procedures, rules and arrangements for securing safe and healthy working conditions;</li> <li>• Being involved with the risk assessment procedures;</li> <li>• Attending Strategic and Operational Health and Safety committees as required and play an active role in accident prevention and the development of recommendations</li> </ul>	



	<p>for improving health and safety arrangements in the Trust;</p> <ul style="list-style-type: none"> <li>• Inspecting the workplace in conjunction with the Health and Safety Advisors and others;</li> <li>• Reporting to managers any hazards, conditions or circumstances identified or reported to them which they consider are likely to adversely affect health and safety;</li> <li>• Investigating notifiable accidents, cases of diseases or ill health and dangerous occurrences</li> </ul>	
Contractors	<p>Contractors have the responsibility within this policy for ensuring that:</p> <ul style="list-style-type: none"> <li>• All staff under their direction and control complies with all relevant statutory requirements;</li> <li>• All their staff comply with relevant Trust Policies;</li> <li>• Their organisation undertakes a commitment to proactively manage Health and Safety through line management responsibilities and accountabilities and can demonstrate this through formal documentation;</li> <li>• Contractors and sub-contractors take reasonable care for their health and safety and that of others and report any issues that they become aware of;</li> <li>• Contractors and their staff provide suitable and sufficient risk assessments and method statements to ensure that activities can be managed safely and in accordance with the law;</li> <li>• All contractors and subcontractors view the asbestos register and associated pictures / location information to ensure that they will not disturb asbestos containing materials or if there is any likelihood that they will, then they must contact personnel within the SSL for advice and guidance. Signing of the register to confirm this;</li> <li>• All contractors and subcontractors must report immediately any damage to asbestos, or suspected asbestos containing materials if so discovered;</li> <li>• All contractors and subcontractors must have sufficient knowledge, skills, aptitude and resources to conduct their activities</li> </ul>	

	<p>safely and without risk to health. No contractor is to work on any system beyond his / her knowledge or capability;</p> <ul style="list-style-type: none"> <li>• All contractors and subcontractors must comply with all lawful directions given by the responsible persons appointed by the Trust;</li> <li>• All contractors and subcontractors must ensure that their staff comply fully with this policy and all arrangements under this policy;</li> <li>• Contractors and sub-contractors must not misuse or interfere with anything provided to them in the interests of health and safety;</li> <li>• All contracts entered into to impose these responsibilities</li> </ul>	
Visitors	All visitors to Trust premises must comply with the policies and procedures that been put in place to ensure their safety.	

## 5 DEVELOPMENT AND CONSULTATION PROCESS

Consultation summary		
Date policy issued for consultation		March 12, 2020
Number of versions produced for consultation		1
Committees or meetings where this policy was formally discussed		
Trust Health, Safety and Fire Committee		May 2020
Policy Development Management Group		April 2020
Where else presented	Summary of feedback	Actions / Response
Circulated to Trust Health, Safety and Fire Committee	No comments received	

## 6 REFERENCE DOCUMENTS

- The Health and Safety at Work etc Act 1974 - <http://www.legislation.gov.uk/ukpga/1974/37>
- The Management of Health and Safety at Work Regulations 1999 - <http://www.legislation.gov.uk/uksi/1999/3242/regulation/3/made>
- The Workplace (Health, Safety and Welfare) Regulations 1992 - <http://www.legislation.gov.uk/uksi/1992/3004/contents/made>
- The Control of Substances Hazardous to Health Regulations 1992 - <http://www.legislation.gov.uk/uksi/2002/2677/regulation/1/made>
- Other relevant H&S legislation

## 7 BIBLIOGRAPHY

None

## 8 GLOSSARY

None

## 9 AUDIT AND ASSURANCE

Element to be monitored	Lead	Tool	Frequency	Reporting Arrangements	Acting on Recommendations and Lead(S)	Change in Practice and Lessons to be shared
Health and Safety Committees (Trust and Operational) taking place	Health and Safety Manager	Availability of Minutes of meetings	Quarterly	Health and Safety Committees, CGC	Chairs of Committees	CGC
Safe environment for staff, service users and visitors to our premises	Health and Safety Manager	Integrated Inspections; Environment, Ligature and Individual Risk Assessments	Inspections - annually Risk Assessments – annually or as processes or the environment changes	Health and Safety Committees	Line Managers, Senior Managers, Estates and Facilities	Internal Alerts system; Health and Safety Committees
Implementation of Health and Safety procedures	Health and Safety Manager	Integrated Inspections	Annually	Health and Safety Committees (including site specific ones)	Health and Safety team, Line Managers	Local committees, Incident Reviews
Relevant staff receive training commensurate to their roles	Health and Safety Manager	Insight and other L&D Recording systems	Annually	Health and Safety Committees	Learning and Development, Line Managers	Trust/ Operational Health and Safety Committees
Accident and incident reporting and investigation	Health and Safety Manager	Eclipse data	Daily and as required	Health and Safety Committees	Health and Safety team, Managers	Health and Safety Committees

## 10 APPENDICES

### Appendix 1

#### Equality Analysis Screening Form

<b>Title of Policy</b>	<b>Health and Safety Management</b>			
<b>Person Completing this Policy</b>	<b>Natassia James</b>	<b>Role or title</b>	<b>Head of H&amp;S and Regulatory Compliance</b>	
<b>Division</b>	<b>Governance</b>	<b>Service Area</b>	<b>Corporate</b>	
<b>Date Started</b>		<b>Date completed</b>	<b>March 2020</b>	
<b>Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.</b>				
The aim of the policy is to outline the Trust's arrangements and organisational structures that are in place to manage the risks that staff, service users, visitors and others to our premises and involved in our activities could be exposed to.				
<b>Who will benefit from the policy?</b>				
Everyone that could be affected by the Trust's activities.				
<b>Impacts on different Personal Protected Characteristics – Helpful Questions:</b>				
Does this proposal promote equality of opportunity? Eliminate discrimination? Eliminate harassment? Eliminate victimisation?		Promote good community relations? Promote positive attitudes towards disabled people? Consider more favourable treatment of disabled people? Promote involvement and consultation? Protect and promote human rights?		
<b>Please click in the relevant impact box or leave blank if you feel there is no particular impact.</b>				
<b>Personal Protected Characteristic</b>	<b>No/Minimum Impact</b>	<b>Negative Impact</b>	<b>Positive Impact</b>	<b>Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.</b>
<b>Age</b>	<b>No</b>			
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your proposal? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				

<b>Disability</b>	<b>No</b>			
Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how 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?				
<b>Gender</b>	<b>No</b>			
This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your proposal?				
<b>Marriage or Civil Partnerships</b>	<b>No</b>			
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 information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?				
<b>Pregnancy or Maternity</b>	<b>No</b>			
This includes women having a baby and women just after they have had a baby Does your service accommodate the needs of expectant and postnatal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?				
<b>Race or Ethnicity</b>	<b>No</b>			
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?				
<b>Religion or Belief</b>	<b>No</b>			
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				
<b>Sexual Orientation</b>	<b>No</b>			
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				

<b>Transgender or Gender Reassignment</b>	<b>No</b>			
This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your proposal or service?				
<b>Human Rights</b>	<b>No</b>			
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?				
<b>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)</b>				
	<b>Yes</b>	<b>No</b>		
<b>What do you consider the level of negative impact to be?</b>	<b>High Impact</b>	<b>Medium Impact</b>	<b>Low Impact</b>	<b>No Impact</b>
				<b>X</b>
If the impact could be discriminatory in law, please contact the <b>Equality and Diversity Lead</b> 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 <b>Equality and Diversity Lead</b> before proceeding.				
If the proposal 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 <b>Equality and Diversity Lead</b> .				
<b>Action Planning:</b>				
How could you minimise or remove any negative impact identified even if this is of low significance?				
N/A				
How will any impact or planned actions be monitored and reviewed?				

N/A
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.
N/A
Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at <a href="mailto:hr.support@bsmhft.nhs.uk">hr.support@bsmhft.nhs.uk</a> . 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.



## BSMHFT Health and Safety Policy Statement



Birmingham and Solihull Mental Health Foundation Trust places quality at the centre of all that we do and one strand of this is safety.

Safety is everyone's responsibility and forms an integral part of the day to day activities of every member of the Trust. All staff should have a clear understanding of their role and responsibilities in providing a safe environment for themselves and service users thus supporting the provision of high quality care.

To this end it is the policy of the Trust so far as is reasonably practicable to:

- *Prevent accidents and cases of work-related ill health and provide adequate control of health and safety risks arising from work activities.*
- *Provide adequate training to ensure employees are competent to do their work.*
- *Engage and consult with employees on day-to-day health and safety conditions and provide advice and supervision on such matters.*
- *Implement emergency procedures – evacuation in case of fire or other significant incidents.*
- *Maintain safe and healthy working conditions, provide and maintain plant, equipment and machinery, and ensure safe storage/use of substances.*

As Chief Executive I accept responsibility for the health and safety of other people to include service users, carers and visitors who may be affected by the Trust's activities in line with legal requirements.

To this end the Trust will comply with the requirements of the Health and Safety at Work etc Act 1974, all other relevant statutory provisions and recognised codes of practice. As Chief Executive I expect all members of the Trust – all staff and volunteers, irrespective of grade or position and all contractors working on behalf of the Trust, to co-operate fully in the achievement of this policy.

The allocation of responsibilities for health and safety matters with accountability to me and the particular arrangements made to implement the policy are set out in Sections 3 and 4 of the Health and Safety policy.

**Chief Executive:** Roisin Fallon-Williams

A handwritten signature in dark ink, appearing to read 'Roisin Fallon-Williams'.

**Date:** November 2019

## Health and Safety Committees

### Trust Health, Safety and Fire Committee - Terms of Reference

1.	Purpose and Aims of the Group/Committee
	<p>The Health and Safety Committee shall act as the focal point for all matters relating to the management of Fire, Security, health and Safety. More specifically the Committee aims:-</p> <ul style="list-style-type: none"> <li>• To advise and assure the Trust Board and its committee structure on all matters relating to Fire, Security, Health and Safety</li> <li>• To review performance of the Trust against compliance with regulations, policies and procedures and communicate concerns through the Committee structure</li> <li>• To provide expert advice, guidance and policy throughout the organisation on all matters pertinent to Fire, Security, Health and Safety</li> </ul>
2.	Duties/Core Delegated Responsibilities and Accountabilities
	<ul style="list-style-type: none"> <li>• To develop, consult upon and implement health and safety policies, procedures and related strategies and ensure that these documents are reviewed at least every 3 years to ensure fitness for purpose</li> <li>• To establish a Training Needs Analysis and monitor the effectiveness of all training related to security, fire, health and safety including manual handling and EBME</li> <li>• To consider submissions by Trade Unions, H&amp;S advisors and other group participants including submissions from operational health and safety groups</li> <li>• To monitor the performance of operational level health and safety groups, recognising and sharing good practice and identifying and supporting areas for improvement</li> <li>• To receive reports relating to Health and Safety related incidents including RIDDOR. Identify trends and learning points and provide expert advice for mitigation and strengthened controls</li> <li>• To receive reports relating to the status of CAS and Patient Safety Alerts and govern effective implementation</li> <li>• To consider findings from regulatory inspections/reports nationally pertinent to the Fire, Security and Health and Safety agenda to identify any learning opportunities for the Trust</li> <li>• To receive, consider and act upon findings from any local inspections/audits (either internal or via external bodies) pertinent to the Fire, Security and Health and Safety agenda</li> <li>• To govern effective compliance with Environmental Risk Assessments and Ligature Risk Assessments ensuring that these are completed to a high standard within required timeframes</li> <li>• To consider and discuss National Guidelines for the NHS on health and safety management as they arise</li> <li>• To consider the general prioritisation of Health and Safety issues and timescales for completion</li> <li>• To identify issues of a pressing nature and consider justification for escalation in terms of resources and timescales</li> <li>• To feed into corporate processes for business planning and the capital programme in support of key risks identified across the Health and Safety agenda</li> </ul>

	<ul style="list-style-type: none"> <li>To establish an annual programme of communications and publicity in the workplace relating to Fire, Security and health and safety and monitor effectiveness</li> <li>To produce an Annual Report for receipt by the Trust Board</li> </ul>
<b>3.</b>	<b>Membership</b>
	<ul style="list-style-type: none"> <li>Chair: Associate Director of Governance</li> <li>Head of H&amp;S and Regulatory Compliance (Deputy Chair)</li> <li>Local Security Management Specialist</li> <li>Service Area Representatives</li> <li>SSL Representative</li> <li>Union Representatives</li> <li>Fire Safety Advisor</li> <li>Health and Safety Advisor</li> <li>Health and Safety Officer</li> </ul> <p>In Attendance as Required:-</p> <ul style="list-style-type: none"> <li>Infection Control Representative</li> <li>Physical Health Representative</li> <li>Mental Health Act Legislation Manager</li> <li>Learning and Development Representative</li> <li>Occupational Health Representative</li> <li>Legal Services Representative</li> <li>Human Resources Representative</li> </ul>
<b>4.</b>	<b>Quoracy</b>
	The Chair or Deputy Chair plus 50% of the membership including at least two representatives from Operational health and safety groups.
<b>5.</b>	<b>Meeting Arrangements</b>
	<ul style="list-style-type: none"> <li>Members will attend at least 75% of meetings</li> <li>The Committee will meet at least every three months</li> <li>Administrative functions of the Committee will be governed by the Health and Safety Manager. This includes agenda setting, collation and distribution of papers and minute taking. Minutes will be circulated no later than 10 working days after close of the meeting</li> <li>Meeting dates must be arranged annually in advance and be supported by a work programme</li> </ul>
<b>7.</b>	<b>Reporting Arrangements</b>
	The Committee shall be accountable and report into the Integrated Quality Committee on a quarterly basis by means of an escalation report and copies of minutes Health and Safety Operational Groups for each service area, plus corporate teams will report into the Health and Safety Committee on a quarterly basis
<b>9.</b>	<b>Effectiveness of the Group/Committee Function</b>
	The Committee will carry out an annual effectiveness review using a standardised Trust template.



## Operational Health and Safety Committees – Terms of Reference

1.	Purpose and Aims of the Group/Committee
	<p>The Operational Health and Safety Committee shall act as the focal point for all matters relating to the management of Fire, Security, health and Safety. More specifically the Committee aims:-</p> <ul style="list-style-type: none"> <li>• To advise and assure the Trust Health, Safety and Fire Committee on all matters relating to Fire, Security, Health and Safety</li> <li>• To review performance of the Service Area against compliance with regulations, policies and procedures and communicate concerns up to the Trust Health, Safety and Fire Committee</li> </ul>
2.	Duties/Core Delegated Responsibilities and Accountabilities
	<ul style="list-style-type: none"> <li>• To consider the practical application and implementation of health and safety policies and the introduction of new health and safety legislation at an operational level.</li> <li>• To identify health and safety priorities within their local business plans and integrate health and safety management within general management functions.</li> <li>• To develop local procedures which promote the safety and health of personnel within their operational are.</li> <li>• To ensure that systems exist so that any delegated responsibility is accompanied by a training programme suitable for the role.</li> <li>• To develop and monitor the delivery of an operational level annual health and safety plan which is linked and central to the business planning cycle.</li> <li>• To set targets and have monitoring in place for their achievement. This is to include effective performance management in terms of risk assessments and safe systems of work, accident, near-miss and injury reduction targets</li> <li>• Ensure that systems exist at an operational level to accommodate training for new staff, those who have moved roles, those who have new responsibilities</li> <li>• To ensure that incidents are reported, recorded and monitored e.g. for trends and appropriate action is taken if deemed necessary at an operational level.</li> <li>• To ensure that data from incident / accident reports is considered as part of risk management strategy of the business area.</li> <li>• To ensure that short / long term management of problems arising from incidents are considered i.e. revised risk assessment, return to work policies, working with occupational health and HR within the Trust</li> <li>• To identify issues of a pressing nature and to consider justification for escalation in terms of resources and timescales to the Strategic Health and Safety Committee.</li> <li>• To consider submissions by Trade Unions, H&amp;S Advisors and other group participants.</li> <li>• Consider and report quarterly to the Strategic Health and Safety Committee on the performance of the business area against the Operational Health and Safety Plan.</li> <li>• To distribute its minutes to members, notice boards, Connect and other local committees</li> </ul>

	<ul style="list-style-type: none"> <li>• To consider, determine and implement any appropriate operational level actions in respect of force wide accident / incident statistics and ill health statistics</li> <li>• To learn from the outputs from accident / incident / ill health/ major incident investigations where applicable</li> <li>• To consider, determine and implement any appropriate operational level actions arising from inspections / observations or notices from enforcement agencies and auditing bodies such as CQC/ HSE</li> <li>• To raise awareness of health and safety issues and monitor the adequacy of health and safety communication and publicity in the workplace</li> </ul>
3.	<b>Membership</b>
	<ul style="list-style-type: none"> <li>• Chair: Service Area Manager/ CNM/CSM</li> <li>• Deputy Chair</li> <li>• Representatives from services/ wards</li> </ul> <p>In Attendance:-</p> <ul style="list-style-type: none"> <li>• Health and Safety/ Fire/ Security Representative</li> <li>• Union Representative</li> </ul>
4.	<b>Quoracy</b>
	The Chair or Deputy Chair plus 50% of the membership including at least two representatives from Operational health and safety groups.
5.	<b>Meeting Arrangements</b>
	<ul style="list-style-type: none"> <li>• Members will attend at least 75% of meetings</li> <li>• The Committee will meet at least every three months</li> <li>• Administrative functions of the Committee will be governed by the Service Manager/ CNM/ CSM. This includes agenda setting, collation and distribution of papers and minute taking. Minutes will be circulated no later than 10 working days after close of the meeting</li> <li>• Meeting dates must be arranged annually in advance and be supported by a work programme</li> </ul>
7.	<b>Reporting Arrangements</b>
	The committees shall be accountable and report into the Trust Health, Safety and Fire Committee on a quarterly basis by means of an escalation report and copies of minutes.
9.	<b>Effectiveness of the Group/Committee Function</b>
	The Committees will carry out an annual effectiveness review using a standardised Trust template.

## Structure of Health Safety and Fire Committees

# Trust Health, Safety and Fire Committee

Operational  
Health and  
Safety  
Committee

Operational  
Health and  
Safety  
Committee

Operational  
Health and  
Safety  
Committee/  
Management  
Meetings

Corporate  
Health and  
Safety  
Committee

Operational  
Health and  
Safety  
Committee

### Attendees of Trust H&S Committee - Quarterly

Chair – Appropriate Executive Lead or Delegated Representative  
Head of H&S and Regulatory Compliance  
Service Area Representatives  
Chair of Corporate H&S Committee  
SSL Representative  
Health, Safety and Fire Advisor  
LSMS Officer  
Staff Side Representatives

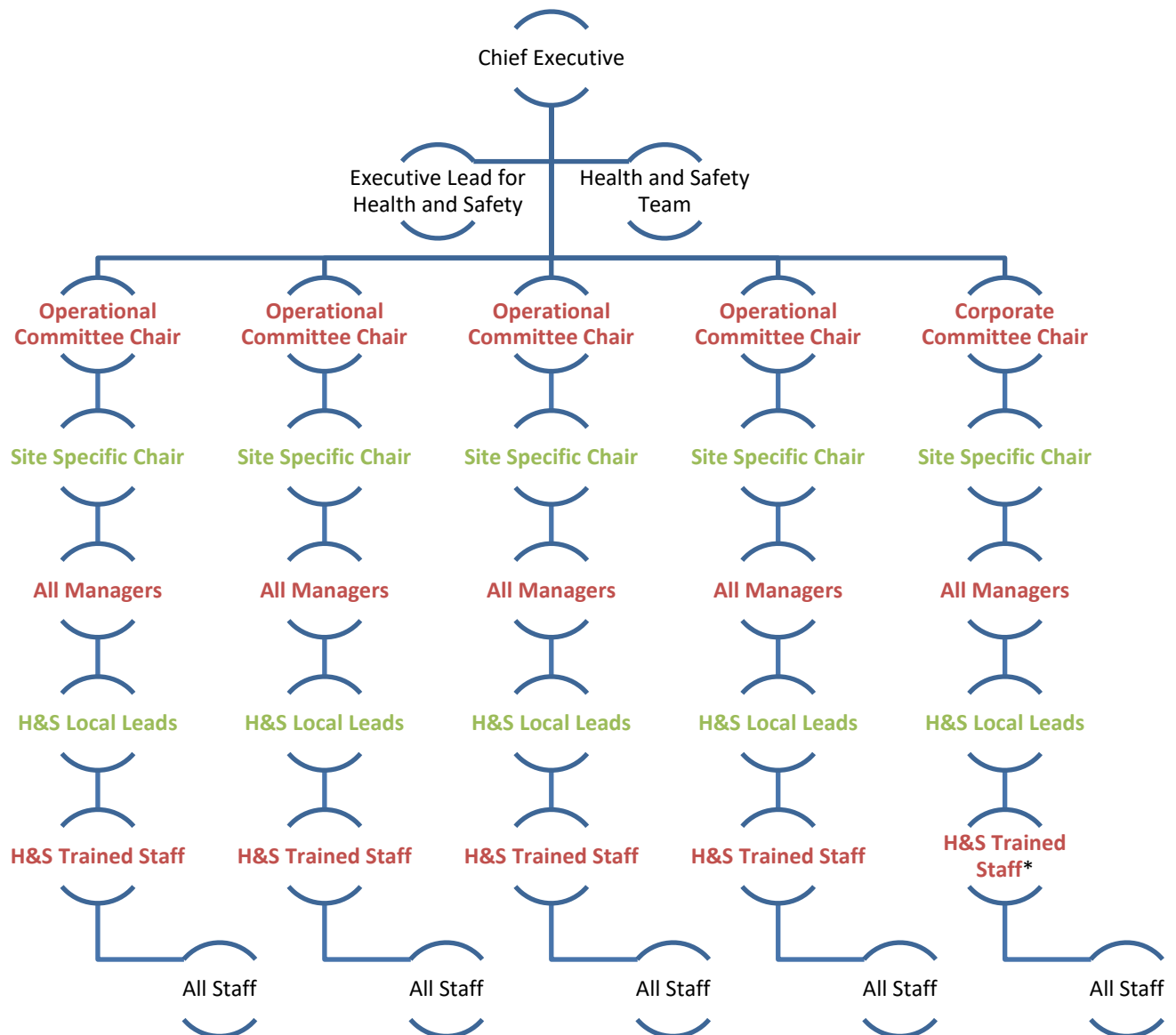
Attend as required  
Occupational Health Representative  
Legal Representative  
Human Resources Representative

### Attendees of the Operational H&S Committees

#### Quarterly

Chair – Associate Director for Operational/ Corporate Area or Delegated Representative  
Operational Area Service Leads  
Health, Safety and Fire Advisor – as requested  
LSMS Officer – as requested  
Local Union H&S Lead  
Estates Representative

## H&amp;S Accountability Structure



\*H&S trained staff, for example First Aiders, Risk Assessors, Fire Wardens etc

Please note that although the Chief Executive is ultimately accountable for health and safety matters, all staff have an equal responsibility for ensuring/enabling good health and safety practices in the workplace.