Health and Safety Policy

Policy number and category	**RS 16**	**Health and Safety**
Version number and date	**5**	**August 2023**
Ratifying committee or executive director	**Trust Health, Safety and Fire Committee**	
Date ratified	**September 2023**	
Next anticipated review	**September 2026**	
Executive Director	**Chief Nursing Officer/Executive Director of Quality & Safety**	
Policy lead	**Head of H&S and Regulatory Compliance**	
Policy author *(if different from above)*	**As Above**	
Exec Sign off Signature (electronic)		
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

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. 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 (until the Retained EU Law Bill is approved). 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 Trust Clinical Governance Committee quarterly.

2.4   The Trust Health and Safety Policy Statement outlining the organisation's commitment to safety can be found at Appendix 2. This must be signed at every policy review or on appointment of a new Chief Executive.

3 PROCEDURE

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 are detailed **here**.

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

4 ORGANISATIONAL RESPONSIBILITIES

Post(s)	Responsibilities	Ref
Chief Executive	The overall and final responsibility for health and safety is that of the Chief Executive. In particular s/he: • Has the direction and control of the Trust and thus has responsibility for its activities and operations. • 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. • Has a duty under Section 4 HASAWA 1974 to ensure that premises owned by the Trust are safe. • Identify any members of staff having direct responsibility for particular health, and safety matters, ensuring that they have the training, information and resources required. • 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. • Ensure that staff with control of resources (financial and other) give due regard to health and safety matters. • 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.	
Executive Director for Health and Safety	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: • Have responsibility for devising, making, and approving the health and safety policy. • Approve the Trust's Health and Safety Policy/Strategy. • Formulate and agree plans to review progress and achieve continuous improvement to develop the Trust and the Policy/Strategy • Establish strategies to implement policy and integrate these into the general activities of the Trust. • Assign responsibilities for planning, measuring, reviewing, and auditing health and safety policies and procedures. • Specify the structure and supporting plans for implementing policy and strategy. • Liaise with the Head of H&S and Regulatory Compliance and Trade Unions to further improve health, safety, and welfare standards Trust wide. • Ensure that health and safety performance is regularly reviewed and report back to the Chief Executive.	

	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.	
Executive Directors	Executive Directors are accountable to the Chief Executive for matters of a strategic nature thereby satisfying him/ her that duties are being met. In particular they will: • 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. • Ensure the allocation of sufficient financial and human resources to meet the requirements of this policy and the policies and procedures, which supplement it. • Facilitate, encourage, and contribute to the review of the management of health and safety within the Trust; and • 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.	
Associate/ Clinical and Medical Directors – *Associate Directors will also have oversight of the Operational Health and Safety committees under their areas of control*	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. More specifically each is responsible for (with the use of Trust resources) ensuring that: • The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated, and acted upon by persons under their control. • Maintaining an up-to-date outline knowledge of the statutory requirements relating to health and safety which are relevant to their activities. • Set key performance indicators for health and safety in line with the business planning process and operational health and safety requirements. • Operational level safety plans are developed in line with the Trust Health and Safety Plan. • Compliance is monitored by reviewing performance in the completion of health and safety plans, risk assessments and accident investigation and recommendations have been implemented. • All significant incidents are investigated, and the work activities / processes are improved to prevent reoccurrence. • Regular health and safety meetings for the business areas are held and chaired by a senior manager with delegated responsibility. • Ensuring the need for funds or resources for operational/ health and safety requirements is considered alongside all other budget and resource management planning.	

	• Accommodation needs are appropriate according to the tasks that are to be carried out in that facility. • 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. • Persons under your control are released from their duties to attend relevant training courses / development briefing opportunities.	
Clinical Leads/ CNMs/ CSMs/ Corporate Managers	Clinical Leads and Service Development Managers have responsibility for ensuring that: 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. Each is responsible for ensuring that: • They maintain an up-to-date outline knowledge of the statutory requirements relating to health and safety which are relevant to their activities. • Staff under your control conduct and where necessary review risk assessments and systems of work relating to their activities. • Arrangements for consultation with staff to develop risk assessments for work activities, operations and equipment exist and are used. • COSHH assessments are completed and implemented prior to the person(s) using the hazardous substances. • All incident / hazard reports are reported via the relevant reporting procedures. • 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. • Recommendations from fire risk assessments are implemented and communicated. • Adequate first aid equipment is available on site and trained first aiders are available on. • Operational health and safety committee representatives are notified of any health and safety concerns that have local or Trust implications. • Succession planning in relation to health and safety is maintained for each role – Fire Wardens / First Aid etc. • 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.	

	• 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. • Training needs are identified through the risk assessment and Appraisal processes and then communicated to the Learning and Development department. • All new staff are inducted through the Trust Induction programme. • All equipment or services are purchased through the Contracts and Purchasing department or approved contractual agreements.	
Ward Managers/ Matrons/ Supervisors/ Corporate Leads	Ward Managers, Lead Nurses and Matrons have responsibility for ensuring that: • The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated, and acted upon by persons under your control. • They maintain a good working knowledge of applicable statutory requirements, related guidance and internal rules and procedures, which relate to their areas of operation. • 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. • Substances are assessed, stored, handled, and transported in accordance with COSHH regulations. • All items of PPE that are provided are readily available and maintained in good condition. • All significant incidents are investigated, recorded and the recommendations implemented and fed back into the relevant risk assessment. • All vehicles used for work purposes are in good condition, regularly serviced and maintained with any defects reported by drivers. • The workplace is maintained in a clean and tidy condition. Defects are promptly reported, and action taken for urgent situations. • Training requirements of personnel are recorded and training including, on the job training is recorded using the Appraisal system. • New staff are inducted through the Trust Induction programme. • All equipment or services are purchased through the contracts and purchasing department or approved contractual agreements. Risk assessments form the basis for the specification.	
All Staff	Everyone 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: • To comply with all health and safety instructions whether written or verbal. • 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. • Take care of yourself and others. • Not to misuse or interfere with any equipment provided for your health and safety. • 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. • Use machinery, equipment, substances, transport equipment or safety devices/ equipment in accordance with training and instruction provided. • Report any medical condition to their immediate supervisor and the Occupational Health provider which may/ could affect health and safety at work. • Attend training courses when requested and complete all training / development / briefing events or opportunities when requested to do so. • Report all accidents, incidents, near misses, hazards whether injured or not to a supervisor. • Not undertake any repairs (however minor) unless they have been specifically authorised and are competent to do so. • 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. • To assist the employer in developing risk assessments and to become knowledgeable and familiar with risk assessments relevant to their occupation / role. • Not to use or bring into work any unauthorised equipment or protective clothing. • Be aware of the emergency evacuation procedures, location of welfare facilities, first aid and firefighting equipment (if trained to use it).	
Local H&S Lead	With appropriate training, to have responsibility for: • Acting as a link between a specific site/ ward or function and the wider organisational health and safety management system via the relevant H&S committees or other relevant forums • Raise local H&S issues of non-compliance with local managers and escalate as necessary. • Link in with local union H&S leads as required. • Facilitate local H&S inspections, investigations and other relevant work where necessary.	

	• Represent their site/ ward or function at local H&S committees	
Health and Safety Team	The Health and Safety team is responsible for providing advice and information on the application of health and safety legislation 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. Specifically having responsibility for ensuring that: • 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. • Develop and review a long-term strategy and action plan for continuous improvement of Health and Safety compliance for the Trust. • Develop and review annual and specific health and safety plans throughout the Trust. • Ensure that appropriate guidance and cost-effective advice is provided to the Chief Executive and the Trust on all health and safety issues. • Identify, interpret, and advise on relevant Health and Safety legislation and Codes of Practice and maintain up-to-date guidance for the Trust. • Advise on all safety aspects including equipment, processes, and materials, particularly when new items are to be introduced. • 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. • Promote best practice in relation to health and safety issues and advise staff on potential health factors associated with work activities and workplace hazards. • Advise and where necessary assist in the investigation of accidents and near misses to determine root causes, accident trends and means to prevent recurrence. • Monitor the reporting and documentation of accidents and near misses in line with Trust Policy. • 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. • Work with Trade Unions' Safety Representatives on safety matters and encourage their active participation in work-place inspections and safety committees. • 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.	

	• 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. • Oversee a Trust wide monitoring/ audit programme ensuring that the relevant findings are reported to appropriate management and groups within the Trust. • 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. • The Trust is advised of the appropriate level of resources or funding to meet health and safety plans and objectives throughout the organisation.
Occupational Health	The Occupational Health Provider is responsible for providing support, advice, and guidance to the Trust as it relates to health matters. Specifically, it will be responsible for ensuring the: • Promotion of best practice in relation to occupational health issues and advise staff on potential health factors associated with work activities and workplace hazards. • 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. • 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. • 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. • 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.
Human Resources	The Deputy Director of Human Resources has responsibility for ensuring that: • The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated, and acted upon by persons under their control. HR Business Partners and their teams have responsibility for ensuring that: • Suitable advice is given to the organisation as it relates to employment relations and employee entitlements. • Advice is provided to managers to support them in managing sickness absence.

	• Arrangements are implemented to ensure that only competent individuals having the appropriate knowledge, skills and aptitude are recruited to fill vacant posts. • All new employees including agency staff and temporary staff undergo the corporate induction programme. • Procedures are in place for enforcing the Trust's safety rules.	
Learning and Development	The Head of Learning and Development will be responsible for identifying and providing solutions to the identified needs of the on-going Health & Safety training needs analysis. Particularly Learning and Development will have responsibility for ensuring that: • The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated, and acted upon by persons under their control. • Training needs analyses are conducted annually through the risk assessment and Appraisal processes by line managers to determine the training requirement. • 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. • Where necessary for health and safety reasons sufficient planning incorporates the anticipated needs for refresher training requirements. • There is delivery of suitable and sufficient health and safety courses to meet legal and organisational requirements, prioritised on a risk assessed basis. • 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. • 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.	
Estates and Facilities (SSL)	The SSL has responsibility for ensuring that: • The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated, and acted upon by persons under their control. • 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.	

	- To ensure that relevant contractors and sub-contractors are appropriately selected and monitored to ensure compliance with relevant Trust policies and other legislation. - Waste streams within the Trust are adequately managed from source through to disposal. - 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. - Appropriate firefighting, fire detection and fire signage equipment is provided and maintained in accordance with relevant British Standards and Building Regulations. - All construction and other works commissioned under SSL's control, complies with Construction, Design and Management Regulations and other relevant legislation. - Local exhaust ventilation is subjected to statutory inspections at periods not exceeding 14 months. - To ensure that the Asbestos Management Plan and procedures are complied with. - 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. - 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. - Condition surveys are conducted periodically to proactively identify and resolve problems. - Accommodation needs are appropriate according to the tasks that are to be carried out in that accommodation and comply with relevant legislation. - The Chief Finance Officer is notified of additional funding required as identified through surveys or capital asset expansion. - That any shortfalls in staff and or resources are accounted for and addressed so as not to create additional health and safety risks.	
ICT	The ICT department has responsibility for ensuring that: - The objectives outlined within the Health and Safety Policy and associated documentation are fully understood, communicated, and acted upon by persons under their control. - Equipment purchased complies with the requirements of legislation and enable staff to make adjustments as necessary to ensure their safety. - Relevant contractors and sub-contractors are appropriately selected and monitored to ensure compliance with relevant Trust policies and other legislation. - These contractors have presented all necessary paperwork such as risk assessments and method statements before any works commence.	

	• The Chief Finance Officer is notified of additional funding required as identified through surveys or capital asset expansion. • Any shortfalls in staff and or resources are accounted for and addressed so as not to create additional health and safety risks. • Staff under their control receive relevant Health and Safety training to enable them to work safely.
Safety Representatives	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. These functions include: • Representing the employees in discussions with the employer on health, safety, or welfare issues and in discussion with the HSE or other enforcing authorities. • Familiarising themselves with the health and safety policy, procedures, rules and arrangements for securing safe and healthy working conditions. • Being involved with the risk assessment procedures. • Attending Strategic and Operational Health and Safety committees as required and play an active role in accident prevention and the development of recommendations for improving health and safety arrangements in the Trust. • Inspecting the workplace in conjunction with the Health and Safety Advisors and others. • Reporting to managers any hazards, conditions or circumstances identified or reported to them which they consider are likely to adversely affect health and safety. • Investigating notifiable accidents, cases of diseases or ill health and dangerous occurrences.
Contractors	Contractors have the responsibility within this policy for ensuring that: • All staff under their direction and control complies with all relevant statutory requirements. • All their staff comply with relevant Trust Policies. • Their organisation undertakes a commitment to proactively manage Health and Safety through line management responsibilities and accountabilities and can demonstrate this through formal documentation. • 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. • 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.

	- 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. - All contractors and subcontractors must report immediately any damage to asbestos, or suspected asbestos containing materials if so discovered. - All contractors and subcontractors must have sufficient knowledge, skills, aptitude, and resources to conduct their activities safely and without risk to health. No contractor is to work on any system beyond his / her knowledge or capability. - All contractors and subcontractors must comply with all lawful directions given by the responsible persons appointed by the Trust. - All contractors and subcontractors must ensure that their staff comply fully with this policy and all arrangements under this policy. - Contractors and sub-contractors must not misuse or interfere with anything provided to them in the interests of health and safety. - All contracts entered into *to* impose these responsibilities.	
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	May 22, 2023
Number of versions produced for consultation	1
Committees or meetings where this policy was formally discussed	

Where else presented	Summary of feedback	Actions / Response

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
Health and Safety Committees (Trust and Operational) taking place.	Head of H&S and Regulatory Compliance	Availability of Minutes of meetings	Quarterly	Health and Safety Committees, Trust CGC
Safe environment for staff, service users and visitors to our premises	Head of H&S and Regulatory Compliance	Integrated Inspections; Environment, Ligature, and Individual Risk Assessments	Inspections - annually Risk Assessments – annually or as processes or the environment changes	Health and Safety Committees
Implementation of Health and Safety procedures	Head of H&S and Regulatory Compliance	Integrated Inspections	Annually	Health and Safety Committees (including site specific ones)
Relevant staff receive training commensurate to their roles.	Head of H&S and Regulatory Compliance	Insight and other L&D Recording systems	Annually	Health and Safety Committees
Accident and incident reporting and investigation	Head of H&S and Regulatory Compliance	Eclipse data	Daily and as required	Health and Safety Committees

10 APPENDICES

<div align="right">**Appendix 1**</div>

<div align="center">**Equality Analysis Screening Form**</div>

Title of Policy	Trust Health and Safety Policy		
Person Completing this policy	Natassia James	**Role or title**	Head of H&S and Regulatory Compliance
Division	Governance	**Service Area**	Corporate
Date Started	May 2023	**Date completed**	May 2023

Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.
The purpose of the policy is to provide a framework that ensures that risks in the workplace are identified, assessed, and reviewed to ensure the safety of all that could be affected by the Trust's activities. It also ensures that where risk are identified, adequate control measures are put in place to mitigate those risks.
Who will benefit from the policy?
Anyone that could be affected by the Trust's activities – staff, service users, visitors, contractors etc.
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***
Positively affects staff, service users, visitors, contractors etc safety.
Does the policy significantly affect service delivery, business processes or policy?   ***How will these reduce inequality?***
The policy will reduce inequality by enabling the use of data and feedback from staff, service users, visitors, contractors etc to implement safe systems of work and focus investment based on the needs of identified groups. While the policy is there to ensure that all are kept safe while in the workplace, some groups may require more investment than others to achieve this. By clearly outlining the

requirements of legislation for specific groups such as new and expectant mothers, young people and those with disabilities etc, the policy can ensure that those needs are adequately met.

Does it involve a significant commitment of resources? *How will these reduce inequality?*
There may sometimes be the need for financial investment following the completion of risk assessments that have identified areas for improvement.
Does the policy relate to an area where there are known inequalities? (e.g. seclusion, accessibility, recruitment & progression)
No

Impacts on different Personal Protected Characteristics – *Helpful Questions:*	
Does this policy 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?*

Please click in the relevant impact box and include relevant data				
Personal Protected Characteristic	**No/Minimum Impact**	**Negative Impact**	**Positive Impact**	**Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.**
Age			x	The incident data has not been analysed based on this protected characteristic however we know that where there is an ageing population, then more adjustments are likely to be needed for some staff to ensure their safety while at work. This would be achieved using specific risk assessments for individuals or those groups as appropriate.
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your policy?				

Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
Disability			x	There is a requirement for reasonable adjustments to be made for those with disabilities and the policy will ensure that this achieved following the completion of an individual risk assessment and appropriate mitigations implemented. We also see this where all staff with a disability a Personal Emergency Evacuation Plan (PEEP) have completed by their line manager to ensure their safe evacuation during an emergency.
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?				
Gender			x	The requirement for the completion of suitable and sufficient risk assessments will ensure that all groups are provided with adequate training and supervision to ensure they can deliver their tasks safely. We are aware of the challenges of patient on staff assaults in the mental health setting, but the policy ensures that staff are able to safely manage these scenarios.
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 policy?				
Marriage or Civil Partnerships			x	
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?				
Pregnancy or Maternity			x	All new and expectant mothers must have a risk assessment completed at agreed intervals by their line manager or trained

				assessor to ensure that neither them nor their unborn child is put at risk while undertaking work activities.
This includes women having a baby and women just after they have had a baby. Does your service accommodate the needs of expectant and post-natal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect relation into pregnancy and maternity?				
Race or Ethnicity	x			
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?				
Religion or Belief	x			
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?				
Sexual Orientation	x			Where specific religious equipment or clothing has the potential to create a risk while working on a mental health wards/ settings, specific discussions and risk assessments will take place for those individuals and appropriate mitigations agreed.
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?				
Transgender or Gender Reassignment	x			
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 policy or service?				

Human Rights	x			To ensure the safety of themselves and others, staff might be asked to comply with rules at work that they might not always agree with, for example the wearing of PPE, being immunised etc.

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)

		No		
What do you consider the level of negative impact to be?	**High Impact**	**Medium Impact**	**Low Impact**	**No Impact**
				x

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?

Ensure the completion of suitable and sufficient risk assessments and that these are clearly communicated to all relevant staff.

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

Use of incident data and feedback through H&S meetings and other forums.

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.

Show where feedback from staff, service users and other groups has led to changes being made.
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

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

Date: May 2023

Health and Safety Committees

Trust Health, Safety and Fire Committee - Terms of Reference

1.	Purpose and Aims of the Group/Committee
	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:- • To advise and assure the Trust Board and its committee structure on all matters relating to Fire, Security, Health and Safety. • To review performance of the Trust against compliance with regulations, policies and procedures and communicate concerns through the Committee structure. • To provide expert advice, guidance, and policy throughout the organisation on all matters pertinent to Fire, Security, Health and Safety.
2.	Duties/Core Delegated Responsibilities and Accountabilities
	• 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. • 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. • To consider submissions by Trade Unions, H&S advisors and other group participants including submissions from operational health and safety groups • To monitor the performance of operational level health and safety groups, recognising and sharing good practice and identifying and supporting areas for improvement • 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. • To receive reports relating to the status of CAS and Patient Safety Alerts and govern effective implementation. • 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. • 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. • To govern effective compliance with Environmental Risk Assessments and Ligature Risk Assessments ensuring that these are completed to a high standard within required timeframes. • To consider and discuss National Guidelines for the NHS on health and safety management as they arise. • To consider the general prioritisation of Health and Safety issues and timescales for completion • To identify issues of a pressing nature and consider justification for escalation in terms of resources and timescales. • To feed into corporate processes for business planning and the capital programme in support of key risks identified across the Health and Safety agenda • To establish an annual programme of communications and publicity in the workplace relating to Fire, Security and health and safety and monitor effectiveness.

	• To produce and Annual Report for receipt by the Trust Board
3.	Membership
	• Chair: Executive Director of Quality and Safety (Chief Nurse) • Deputy Chair: Executive Director of Finance • Deputy Director for Nursing and Quality • Associate Director for Secure Care and Offender Health • Associate Director for ICCR • Associate Director for Acute and Urgent Care • Associate Director for Specialties • Chair of Corporate Health and Safety Committee • Head of H&S and Regulatory Compliance • Local Security Management Specialist • SSL Representative • Staff Side Representatives • Fire Safety Advisor • Occupational Health Representative In Attendance as required: • Infection Control Representative • Physical Health Representative • Mental Health Act Legislation Manager • Learning and Development Representative • Legal Services Representative • Human Resources Representative
4.	Quoracy
	The Chair or Deputy Chair plus 50% of the membership including at least two representatives from Operational health and safety groups.
5.	Meeting Arrangements
	• Members will attend at least 75% of meetings. • The Committee will meet at least every three months. • Administrative functions of the Committee will be governed by the Head of H&S and Regulatory Compliance. 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. • Meeting dates must be arranged annually in advance and be supported by a work programme.
7.	Reporting Arrangements
	The Committee shall be accountable and report into the Quality, Patient Experience and Safety Committee, on a quarterly basis by means of an escalation report. Health and Safety Operational Groups for each service area, plus corporate teams will report into the Trust Health and Safety Committee on a quarterly basis.
9.	Effectiveness of the Group/Committee Function

	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
	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:- • To advise and assure the Trust Health, Safety and Fire Committee on all matters relating to Fire, Security, Health, and Safety • 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
2.	Duties/Core Delegated Responsibilities and Accountabilities
	• 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. • To identify health and safety priorities within their local business plans and integrate health and safety management within general management functions. • To develop local procedures which promote the safety and health of personnel within their operational are. • To ensure that systems exist so that any delegated responsibility is accompanied by a training programme suitable for the role. • 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. • 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. • Ensure that systems exist at an operational level to accommodate training for new staff, those who have moved roles, those who have new responsibilities. • 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. • To ensure that data from incident / accident reports is considered as part of risk management strategy of the business area. • 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 • 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. • To consider submissions by Trade Unions, H&S Advisors, and other group participants. • 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.

	- To distribute its minutes to members, notice boards, Connect and other local committees. - To consider, determine and implement any appropriate operational level actions in respect of force wide accident / incident statistics and ill health statistics. - To learn from the outputs from accident / incident / ill health/ major incident investigations where applicable. - 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 - To raise awareness of health and safety issues and monitor the adequacy of health and safety communication and publicity in the workplace.
3.	Membership
	- Chair: Service Area Manager/ CNM/CSM - Deputy Chair - Representatives from services/ wards In Attendance:- - Health and Safety/ Fire/ Security Representative - Union Representative
4.	Quoracy
	The Chair or Deputy Chair plus 50% of the membership including at least two representatives from Operational health and safety groups.
5.	Meeting Arrangements
	- Members will attend at least 75% of meetings. - The Committee will meet at least every three months. - 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. - Meeting dates must be arranged annually in advance and be supported by a work programme.
7.	Reporting Arrangements
	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.	Effectiveness of the Group/Committee Function
	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 – Executive Director for Quality and Safety (Chief Nurse)
Deputy Chair - Executive Director for Finance
Deputy Director of Nursing and Quality
Head of H&S and Regulatory Compliance
Associate Directors for Operational Areas (x4)
Chair of Corporate H&S Committee
SSL Representative
Fire Safety Advisor
LSMS Officer
Staff Side Representatives
Occupational Health Representative

Attend as required:
Legal Representative
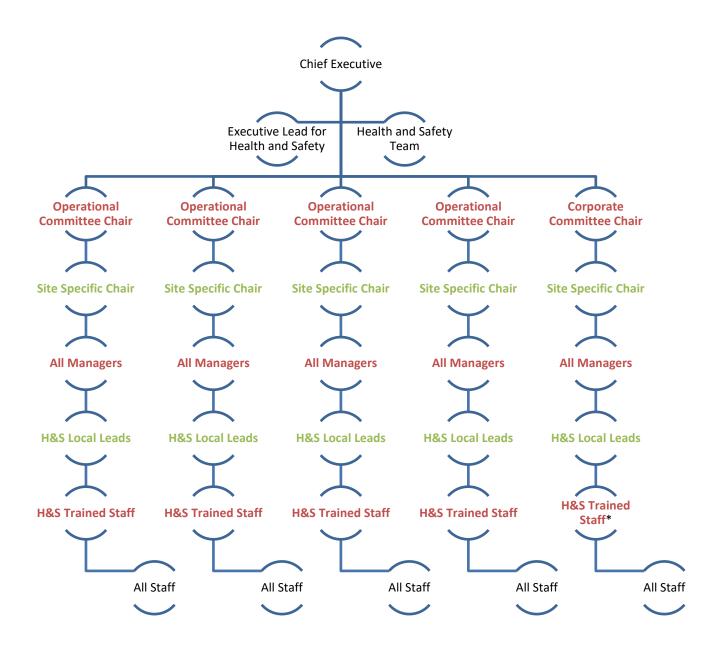Human Resources Representative

Attendees of the Operational/ Local 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&S Accountability Structure

Chief Executive

Executive Lead for Health and Safety

Health and Safety Team

Operational Committee Chair — Site Specific Chair — **All Managers** — H&S Local Leads — **H&S Trained Staff** — All Staff

Operational Committee Chair — Site Specific Chair — **All Managers** — H&S Local Leads — **H&S Trained Staff** — All Staff

Operational Committee Chair — Site Specific Chair — **All Managers** — H&S Local Leads — **H&S Trained Staff** — All Staff

Operational Committee Chair — Site Specific Chair — **All Managers** — H&S Local Leads — **H&S Trained Staff** — All Staff

Corporate Committee Chair — Site Specific Chair — **All Managers** — H&S Local Leads — **H&S Trained Staff*** — All Staff

*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.

RIDDOR and Reporting COVID19 Cases in Staff

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) requires that where staff have been exposed to a biological agent at work, it should be reported to the HSE (the coronavirus would be in this category). In normal circumstances, this would be very easy to determine however due to the prevalence of COVID19 in the general population, it is more difficult to determine if a member of staff who has contracted it has done so during the course of their work.

The HSE has published guidance on this, detailed below and along with what could be used as 'reasonable evidence', as a Trust we need to determine when we would decide that there was a case to report.

HSE's guidance:

You must only make a report under RIDDOR, relating to coronavirus, when:

- an unintended incident at work has led to someone's possible or actual exposure to coronavirus. This must be reported as a dangerous occurrence.
- a worker has been diagnosed as having COVID-19 and there is reasonable evidence that it was caused by exposure at work. This must be reported as a case of disease.
- a worker dies as a result of occupational exposure to coronavirus.

If there is reasonable evidence that someone diagnosed with COVID-19 was likely exposed because of their work you must report this as an exposure to a biological agent using the case of disease report. An example of a work-related exposure to coronavirus would be a health care professional who is diagnosed with COVID-19 after treating patients with COVID-19.

Now that testing has commenced for staff, service areas will start recording positive cases and this data can be used as the starting point to determine whether further investigation is needed.

Points to be considered as 'reasonable evidence':

- Inpatient settings:

  o The staff member was working on a ward with confirmed cases of COVID19 prior to their diagnosis.
  o The staff member had regular exposure to the confirmed patients on that ward.
  o The staff diagnosis was within the timeframe of exposure to COVID positive patients.
  o Do other members of the staff household have COVID19 and what was the order of infection?
  o Access to required PPE.
- Community Staff
  o The staff member has had contact with confirmed COVID19 patients.
  o The staff diagnosis was within the timeframe of exposure to COVID positive patients.
  o Access to required PPE.
  o Do other members of the staff household have COVID19 and what was the order of infection?
- Where there is a possibility that it was occupational exposure, refer the case to occupational health for further investigation.

Process for Determining if a Staff COVID Positive Case is Reportable to the HSE under RIDDOR

After being tested, staff reports positive COVID19 result to line manager or result comes in via IPC

With staff member's consent this is shared with the Health and Safety team

Was the staff member working on or had contact with a ward with COVID19 positive patients/ working in the community and had contact with COVID19 positive patients at the time of contracting the disease?

No

Yes

No further actions, no report is made under RIDDOR - record of findings included on individual's personnel file.

Record the staff details and investigate further to determine the order of infection on the ward/ in the team.

Using all details gathered and with advice from HR and Legal services, H&S will decide if the case is reportable to the HSE.

Report made or not made to the HSE, and decision is recorded.

Any relevant documents, including outcome saved on individual's personnel file.