

Health & Safety Policy	Corporate/Strategic Register No: 09030 Status: Public
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Developed in response to:	Trust Requirement Good Governance
Contributes to CQC fundamental standard:	15

Consulted With	Post/Committee/Group	Date
JCNC	Union staff side circulation	April 2016
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The Health and Safety Group		April 2016
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Version Number	4.0
Issuing Directorate	Estates & Facilities Management
Ratified by:	Document Ratification Group
Ratified on:	22 nd September 2016
Trust Executive Sign off Date	October 2016
Implementation Date	4 th October 2016
Next Review Date	August 2019
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Policy to be followed by (target staff)	All staff
Distribution Method	Intranet and Website
Related Trust Policies (to be read in conjunction with)	<ul style="list-style-type: none"> • Risk Management Strategy & Policy • Incident Policy ,Serious Incident Policy • Claims Policy • Complaint handling (including the Independent Review process) • Fire • Security & Violence & Antisocial Behaviour Policies • Infection Prevention Assurance Framework • Moving and Handling Policy • Mandatory Training (Training Needs Analysis) • Supporting staff involved in a traumatic incident, complaint and claim • Safe Use of Medical Devices • Contractor Permit to work • Medical Gases • Stress • Lone Worker Policy • Maternity, Adoption & Paternity • Safety of Young Workers Under the Age of 18 • Control of Contractors Policy • Learning from Experience Policy

Document Review History

Version No	Authored/Reviewed by	Active Date
1.0	Neil Paull	23rd April 2009
2.0	Leanne Wilson	22nd July 2010
3.0	Ryan Curtis	23rd May 2013
3.1 amendment to 7.4	Ryan Curtis	23rd October 2014
3.2 Working Draft	Ryan Curtis	23 rd May 2016
4.0 Formal Review	Ryan Curtis	4 th October 2016

Statement of Intent

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Statement of Intent

The Chief Executive of Mid Essex Hospital Services NHS Trust (hereinafter referred to as “the Trust”) is ultimately responsible for the Trust’s Health and Safety matters and is committed to the health, safety and welfare of all employees and those who may be affected by work related activities.

In recognition of the obligations imposed under the Health and Safety at Work act 1974, Section 2(3), the following policy has been prepared as appropriate to the present organisation and in accordance with current legislation. The Policy will be reviewed annually, as the Trust changes and/or when legislation, code of practice and official guidance dictate.

The Trust has a Health and Safety Group which is made up of both management and trade union/staff representatives, with the Director of Estates and Facilities as the Director reporting to the Board on Health and Safety matters, in her/his absence the nominated Executive will Chair on her/his behalf. The day-to-day management of health and safety for the Trust has been delegated to respective Directorate Managers. Additional specialist support for health and safety has also been identified for specific information and guidance, (e.g. Senior Fire Officer, Local Security Management Specialist) these roles have been identified in the Accountability and Authority section of the Policy.

To further maintain and promote the implementation of the Policy and enable employees to function efficiently with regard to health and safety information; instruction; training and supervision will be provided in accordance with identified needs. The Training and Development department will liaise with both internal and external providers to facilitate the provision of identified training needs. Health and Safety audits will be carried out at regular intervals to monitor the effectiveness of controls and arrangements implemented by all managers in relation to their risks and assessments carried out within their areas of control.

Whilst overall responsibility to provide and maintain safe and healthy working conditions, equipment and systems of work rests at the highest level of management, every individual has a responsibility to ensure, so far as is reasonably practicable, that the work environment and their activities are as safe and healthy as possible for everyone.

Clare Panniker
Chief Executive

Sheila Salmon
Chairman

This statement is supported on behalf of the represented unions and employees by;

Chair of Staff-side JCNC

1.0 Purpose

- 1.1 It cannot be made the responsibility of a single individual or be consigned to a specific department to discharge the Trust's integrated Health, Safety and Welfare agenda. This policy sets out the accountability and authority arrangements and health and safety risks on which the Trust will improve its health and safety culture.
- 1.2 This policy is set in the context of the Trust's overall strategic intent to provide excellent clinical services that distinguish the Trust from its competitors. In particular, this means Trust staff providing good patient care and enhancing the overall 'patient experience'. Centrally, the Trust must ensure that it, as an organisation, is a good place to work for staff with high standards of teaching and training.
- 1.3 This policy sets out the Trust's approach to health and safety and the resources that contribute to a learning culture in a just and fair organisation.

2.0 Scope

- 2.1 This policy applies to all employees (permanent, temporary, agency or locum) and contracted staff who work for the Trust or on Trust premises during the course of their employment. It also applies to patients and visitors that are on any premises under the control of the Trust.

3.0 Accountabilities and Authority

3.1 Duties of an Employer

- 3.1.1 Under The Health and Safety at Work Act 1974 employers are required to ensure, so far as is reasonably practicable, the health, safety and welfare at work of their employees and the health and safety of others affected by their undertakings.

- 3.1.2 These duties include providing:

- a safe and healthy workplace
- safe equipment and safe systems of work
- adequate information, instruction, training and supervision

3.2 Trust Board

- 3.2.1 The Trust Board have a legal duty to ensure health, safety and welfare legislation is adhered to. In delegating these duties to the Chief Executive the Trust Board will ensure the necessary resources and assistance are available for these duties to be implemented.
- 3.2.2 The Trust Board will oversee the development and improvement planning within the Trust and is responsible for reviewing the Trust's integrated risk management structure, performance and for leading the health and safety culture of the Trust.

3.3 The Audit Committee

3.3.1 The Audit Committee will routinely audit all risk management activity within the Trust, including the Risk Assurance Framework.

3.4 **Patient Safety and Quality Committee**

3.4.1 The Patient Safety Committee will analyse and set the strategy for handling all aspects of clinical risk threatening patient safety within the Trust and other patient safety issues.

3.5 **Health Safety and Wellbeing Governance Group**

3.5.1 The Health Safety and Wellbeing Governance Group will oversee the development, implementation and monitoring of the Trust Health, Safety and Well-being Strategy. They will ensure that there is clear prioritisation of the management of non-clinical risk, using the Risk Assurance Framework to highlight key risks, both directorate and cross-directorate, ensuring comprehensive risk assurance framework is maintained and reviewed regularly, ensuring that any risks identified as medium or high are reported to the Patient Safety and Quality Committee.

3.6 **Health and Safety Group**

3.6.1 The Health and Safety Group will be a proactive force in promoting the highest standards of health and safety. The Group will have management and union/staff representative at a high level, focusing on the Trusts health and safety performance issues under the Health and Safety at Work Act 1974. The Health and Safety Group has delegated powers to the Trust board. It will be informed of significant risks to enable it to monitor and help the Trust improve the health and safety of employees and those who may be affected by any work related activities. Its' function will include:

- a review of the Trust activity against current Health and Safety legislation, codes of practice and relevant guidance
- proposals to Directorates for improving measures relating to risks identified and/or likely to affect employees and others within their environment
- co-opting specialist advice on significant risk issues as they are brought to the Group's attention
- compile an annual report on the Trust's Health and Safety matters
- it will report directly to the Board any significant risk

3.7 **Director of Strategy and Corporate Services**

3.7.1 The Director of Strategy and Corporate Services is the executive lead responsible for the Trust's health and safety and will implement and ensure that the Health and Safety Policy is monitored in relation to the Trust's risk by:

- communicating the Policy to everyone who works at the Trust
- ensuring the Policy is implemented by everyone who works in the Trust
- ensuring that the Trust Board and Patient Safety and Quality Committee are informed as required on health and safety matters affecting employees and those who may be affected by work related activities
- delegating the performance of some of the duties related to health and safety matters to Directors, Directorate Managers under his/her control

3.8 **Head of Governance**

3.8.1 The Head of Governance is accountable to the Trust Board for Governance including the management of clinical risk and patient safety. The Head of Governance has authority for the Trust on these issues.

3.9 **Executive Directors**

3.9.1 The Executive Directors are responsible for reporting and acting on behalf of the Board in respect of Trust wide risks within their management responsibility, this includes:

- compliance with current legislation and codes of practice
- supporting the Chief Executive on Health and Safety initiatives made on behalf of the Trust Board
- reporting to the Chief Executive any non-compliance with the Health and Safety Policy in reducing workplace accidents and work related ill health and the measures necessary to eradicate the non-compliance identified

3.10 **Health and Safety Manager**

3.10.1 The Health and Safety Manager is responsible for ensuring that the Board, managers and clinicians have the information they need to manage their identified health, safety and welfare risks. They will also support the Chief Executive in developing and maintaining the Trust's health and safety culture, monitoring and reporting on the health and safety activity of the Trust by:

- providing competent and professional advice to all levels of staff
- keeping the Chief Executive, Directors, and Managers advised on actual or anticipated changes in health and safety legislation and accepted best practice
- providing reports to management on health and safety matters in accordance with the Trust's risks and key performance indicators
- liaising with external stakeholders as necessary

3.11 **Directorate Managers**

3.11.1 Directorate Managers are responsible for managing the day to day health and safety within the Trust's systems. They have authority for risk treatment in their area, and should identify accordingly the steps they have taken to reduce risk, and record these measures appropriately. They may identify co-ordinators to support their Directorate in the identification and management of hazards, they will however be ultimately responsible for the risk controls within their area, including:

- ensuring the Trust/Departmental Policy is implemented by everyone for whom they have managerial responsibility
- communicating the Policy to everyone for whom they have managerial responsibility
- ensuring supervisory staff understand the health and safety duties placed upon them with regard to providing instruction, training and information

- co-ordinating the risk assessment process for their area, by ensuring staff are appropriately trained to carry out activities in a safe and healthy environment
- ensuring that risk assessments are undertaken, risks are appropriately controlled and communicated to employees so far as those risks that may affect them
- ensuring equipment provided is suitable for purpose, maintained in good repair, free from defects and that equipment defects are reported and attended to promptly

3.12 Directorate Risk Leads / Co-ordinators

3.12.1 Directorate Risk Leads / Co-ordinators are responsible for producing Risk Assessments, given the authority in progressing and delivering risk assurance, monitoring local health and safety policies and procedures and ensuring that the key performance indicators for the Trust's Health and Safety culture are achieved by;

- Communicating Trust instructions, learning and guidance to staff throughout the Division and/or Directorate and other duties delegated to them by the Directorate Manager
- Assembling information on health and safety matters, communicate with line managers and supervisors as a focal point for the exchange of health and safety information

3.13 Duties of Employees

3.13.1 Employees also have a duty to:

- co-operate with their employer on matters of health and safety,
- take reasonable care of their own safety
- take reasonable care of the health and safety of others
- use the appropriate Personal Protective Equipment provided where necessary
- not interfere with or misuse anything provided in the interest of health, safety and welfare
- report faulty equipment
- not use any equipment unless appropriately trained
- inform The Trust of any work situation which would represent a serious and immediate danger to health and safety; and of any matter which would reasonably consider represented a shortcoming in the employer's arrangements for health and safety

3.13.2 All staff have a responsibility for their own, co-workers and others health and safety as a result of their actions or inaction. All staff should make themselves familiar with the Trust Policy and their Directorate policies and procedures. The Trust Health and Safety Policy will be available on the Trust's Intranet site.

3.13.3 Every member of staff is responsible for ensuring that their own actions contribute to the wellbeing of patients, staff, and visitors and the organisation. They are expected to contribute in the identification, reporting and assessment of risks and to take positive action to manage them appropriately. Where the performance of any member of staff is managed by the setting of objectives, objectives will be raised through appraisal process and will include measurable objectives relating to risk management and governance.

3.13.4 Any member of staff involved in an adverse incident can obtain immediate advice and support from their line manager. All staff involved in an incident should have the opportunity to provide information and statements about the incident, and have feedback on the outcome of the investigation. For further information on support for staff involved in an incident, complaint or claims, refer to the Supporting staff involved in a traumatic incident, complaint and claim.

3.13.5 Staff are expected to monitor their training requirements and bring to the attention of their managers when they are approaching the need to attend mandatory and refresher training.

3.14 **Patient and Visitors Responsibility**

3.14.1 Patients and visitors have a role in identifying and reducing risk. They are expected to co-operate with Trust staff. They also have a responsibility to identify any issues or information that may place them at risk whilst receiving care within the Trust.

3.14.2 Patients and visitors are encouraged to report incidents and share knowledge in relation to their care or condition which may minimise the likelihood of an adverse event.

4 **Specialist Health and Safety Support**

4.1 **Health and Safety Manager**

4.1.1 The Health and Safety Manager functions as the specialist health and safety adviser for the Trust and will collaborate with directorate leads to ensure risks are reported, given appropriate risk treatment. He/She will have day to day responsibility to:

- be responsible for advice on the establishment, development and implementation of the Trust's safety, health and welfare provisions to meet the requirements of the Health and Safety at Work Act, and other subordinate legislation
- co-ordinate departmental procedures within the Trust policy and ensure that in consultation with Head of Departments, Safety Representatives /Groups, training needs are met, including participation in the training provided
- advise the Trust's Health and Safety Group
- provide specifications of safe working practices in consultation with management and the Trust's Health and Safety Group and to determine levels of responsibility and prepare procedures for all levels of employees
- consult with the Heads of Department, Safety Representatives/Groups, monitor accident reports and review continuously accident reporting and investigation procedures to comply with statutory requirements and the Trust's policy
- promote an awareness of health and safety practices within the Trust to provide satisfactory publicity and guidance notes at all levels and locations.
- in co-operation with Heads of Department, regularly review methods of working to ensure safe working practices on all aspects of safety, health and welfare
- support the development of the Health and Safety Work Plan and Risk Assurance Framework
- represent Health and Safety on policy groups, reviewing current and new policies

4.2 **Local Security Management Specialist (LSMS)**

4.2.1 The LSMS's role, as described by the NHS Security Management Service, is to:

- create a proactive security culture
- assist with crime reduction
- identify staff training needs
- communications; including distribution and management of security alerts
- detect and report security Incidents
- investigate security incidents
- apply sanctions and gain redress to recover costs
- work closely with the Police and other stakeholders to ensure the safety of the Trust's assets including staff safety
- liaise and advise on security of all the locations within the Trust, carry out inspections, write reports and advise the Trust, to liaise with Estate / Facilities management on the design and installation of CCTV and security systems
- work closely with the NHS Security Management Service (SMS) and the Trust's Governance Department by responding to all SMS initiatives and security alerts
- provide assistance to managers implementing risk reduction measures, action plans and post- security incident management
- supporting staff during investigations of incidents of physical or verbal abuse
- develop implement and monitor the effectiveness Trust's security strategy
- monitor review and report the results of security incidents and risk assessments to the Health and Safety Group
- develop or support the development of any required action plans which may be organisational or service specific that are devised following a security incident and risk assessments that have been reported or reviewed by the Health and Safety Group
- provide advice to managers and staff at all levels on security measures and dealing with violence

4.3 Moving and Handling Advisor

4.3.1 The Moving and Handling Advisor will support the Trust by identifying and providing appropriate manual handling training, advising managers on the purchase of equipment and supporting risk assessments. They will also maintain the Trust's Moving and Handling Policy.

4.4 Infection Prevention and Control Team

4.4.1 The Infection Prevention and Control Team has primary accountability for providing expert advice to staff, however all clinical staff are accountable for provision of high quality infection control measures within the Trust. The Director of Infection Prevention and Control is the Trust's lead for the delivery of the organisational strategy on Infection Control.

4.5 Occupational Health

4.5.1 The Trust's Occupational Health Department will work with the Health and Safety Manager and other internal stakeholders to pro-actively identify incident trends and continual reduction of risk to staff and others within the Trust.

4.5.2 They will be represented on the Health and Safety Group and other groups as required.

4.5.3 In order to monitor the effectiveness of the measures introduced to reduce risks to the health of employees, individual or group health surveillance may be undertaken. This would be co-ordinated by the Occupational Health Department.

4.6 **Senior Fire Officer**

4.6.1 The Senior Fire Officer will ensure the Trust's Fire Safety Policy is implemented and adheres to current best practice and legislation.

4.6.2 They will ensure up to date risk assessments are in place and provide competent advice to management and staff on fire safety issues.

5. **Safe Systems of Work**

5.1 Each Directorate management team will have standard operating procedures specific to that area. The relevant Manager is responsible for ensuring that safe systems of work are adhered to. They will be monitored by;

- Regular review of their effectiveness, through audit
- Undertaking and reviewing risk assessment whenever there is a significant change to equipment, process or staff involved in the activity, in order to eliminate or minimise any risk to the health and safety of employees or others

6. **Training**

6.1 Health and Safety training will be provided for every employee in accordance with the requirements of section 2 of the Health and Safety at work Act 1974 and Management of Health and Safety at Work Regulations 1999 (Reg 13.) The Trust will provide health and safety training at induction and through regular mandatory training updates delivered in accordance with the Trust's Mandatory Training Policy (Training Needs Analysis).

6.2 The type of training provided to individuals will reflect the requirements of the Training Needs Analysis and will be determined by the following factors;

- Nature of the work associated with an individual's role
- As identified by risk assessment
- Any special needs the employee requires to carry out the work in relation to the activity

7. **Incident Reporting**

7.1 The reporting of incidents allows the Trust to manage risks in a proactive and reactive method.

7.2 The Trust has a risk event reporting system (Datix is the database the Trust uses for recording all incidents, complaints, claims). Each area of the Trust has access to a web-based electronic incident forms and should report any event/ accident/ occurrence or near miss. Queries should be addressed to the Governance Department.

7.3 The Trust must report an event to the Health and Safety Executive if it meets the requirements of the Reporting of Injuries Diseases and Dangerous Occurrence Regulations (RIDDOR 2013). Such as:

- **'Fatality'**: All deaths to workers and non-workers must be reported if they arise from a work-related accident, including an act of physical violence to a worker. Suicides are not reportable, as the death does not result from a work-related accident.
- **'Specified Injuries'**: If there is an accident connected with work and an employee or a member of the public or self-employed person working on the premises sustains a specified injury, or a member of the public suffers an injury and is taken to hospital from the site of the accident or if they are in hospital suffered from a specified injury
 - fractures to any bones except fingers, thumbs and toes
 - amputation of an arm, hand, finger, thumb, leg, foot or toe
 - crush injuries leading to internal organ damage
 - serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs);
 - scalpings (separation of skin from the head) which require hospital treatment
 - dislocation of the shoulder, hip, knee or spine
 - permanent loss of sight or reduction of sight
 - amputation as a result of an incident
 - unconsciousness caused by head injury or asphyxia;
 - any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours
- **'An over-7-day' injury** is one which is not "Specified" but results in the injured person being away from work OR unable to do their full range of their normal duties for more than seven consecutive days
- **'Reportable Diseases'**: Employers people must report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work.
- **'Reportable Dangerous Occurrence'**: Dangerous occurrences are certain, death or serious injury incidents with the potential to cause harm. Not all such events require reporting.

7.4 All RIDDOR events must be reported by the Trust Health and Safety Manager or a member of the Estates Team and logged onto the Datix system.

7.5 All incidents should be investigated by the appropriate manager with any identified remedial action addressed. All RIDDOR events must be investigated by the Health and Safety Manager.

7.6 Serious events must be reported immediately and will be managed in accordance with the Incident Policy, Serious Incident Policy, the Complaints Policy or the Claims Policy.

7.7 Refer to each of these policies and the Learning from Experience Policy for full details of the organisation wide approach to investigation, analysis and learning from incidents.

8 Purchase of Equipment, Materials and Substances

8.1 Any item of equipment or any materials or substances which are purchased for use at work should only be purchased through NHS Procurement, in line with the latest procurement strategy and the Trust's Safe Use of Medical Devices Policy.

8.2 Any such purchases must follow the Trust's risk assessment procedure and where there is thought to be significant risk the assessment must be recorded,

9 Risk Assessments

9.1 Risk Assessments are to be carried out in accordance with the Trust's Risk Assessment Procedure, details can be found in the Risk Management Policy.

9.2 As appropriate risk assessment will be undertaken on the following:

- **Environmental** – A general assessments on tasks undertaken in an area
- **Moving and Handling** – Assessing tasks that involve any transporting or supporting of a load (including lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or bodily force
- **Fire** – An assessment of fire safety procedures, fire prevention measures, and fire precautions, plans, systems and equipment
- **Security** - Assessing security measures in place considering the risk of thief, both Trust and personal , violence and aggression and lone working
- **Stress** – An assessment to identify potential stress indicators (stressors) within a staff group
- **Control of Substances Hazardous to Health (COSHH)** – Assessing the risk when using, transporting and storing substances that come under the COSHH regulations such as ;Chemicals, Dust and Fumes and Biological Agents
- **Specific** – other bespoke assessments relating to tasks or an individual as required

9.3 Competent trained staff will undertake specific risk assessments for their area, and ensure they are available within the department for staff to view as appropriate.

9.4 Risks will only be assigned to the Risk Assurance Frameworks and/or the Trust Board Risk Assurance Framework when all actions and controls in place are agreed by the appropriate Senior Manager.

10 Workplace Inspection

10.1 Inspection of an area will be carried out by the following persons and in the following circumstances:

Daily informally by all employees and management going about their daily business

Quarterly a shared public area will be chosen at random for inspection. A formal, record is kept of these inspections

Annually when risk assessments are being undertaken

11 Health Surveillance

11.1 In order to monitor the effectiveness of the measures introduced to reduce risks to the health of employees, a programme of health surveillance will be undertaken which will be co-ordinated by the Occupational Health Department.

11.2 Examples of the circumstances which may be selected for a programme of health surveillance will include exposure to:

- respiratory irritants
- use of products likely to cause Asthma or Dermatitis
- excessive noise
- asbestos
- ionising Radiation
- vibration
- substances when COSHH assessment deems surveillance necessary
- stress
- musculoskeletal disorders

12 Arrangements for Emergencies and Imminent Danger

12.1 In order to ensure the safety of employees, patients, contractors and visitors and members of the public and to comply with the requirements of Regulation 8 of the Management of Health and Safety at Work Regulations, procedures will be devised which will be implemented in the event of emergency or imminent danger. This will be the responsibility of the Trust's Emergency Planning Officer (EPO).

12.2 The procedures which are to be followed will be available in every department or area of work.

12.3 Examples of emergency and imminent danger include:

- Major Accidents or illness to staff
- Gas leaks
- Natural disaster flood or water damage
- Fire
- Bomb threat
- Power failure
- Act of violence
- Theft and vandalism
- Spillages of toxic or flammable substances

12.4 Each department or work area will have a plan for the purposes of the safe evacuation of persons in the event of emergency or imminent danger.

13 Selection of Contractors

- 13.1 Every employer or self employed person, who expresses an interest in tendering for contracted-out work on behalf of line management at the Trust, will be subjected to an appraisal and selection procedure.
- 13.2 Such procedures will require them to submit the following:
- A properly prepared Health and Safety Policy
 - A systematic programme of risk assessment
 - Safe procedures of work
 - Confirmation of competence and training
- 13.3 All appointed contractors will adhere to the Trust's Control of Contractors Policy.

14 Vehicles and Ride on Equipment

- 14.1 Any vehicle or 'ride on' item of equipment which is used to transport material, or waste will undergo a strict maintenance programme.
- 14.2 Pre-shift maintenance checks will be carried out on each vehicle. Defects highlighted during such checks will cease the operation of that vehicle immediately.
- 14.3 Staff using such equipment will receive training in its use in order that it may be used safely. Staff may only use such equipment if they have been trained in its use.
- 14.4 Staff using Trust vehicles or equipment are not permitted to make any alterations or adaptations.

15 Policies/Procedures

- 15.1 Specific policies/procedures to be followed in individual areas of risk will be contained in the intranet Risk Management Trust's Policy/Procedures. They will be ratified by the Document Ratification Approval Group. When a matter is considered to require full membership approval it shall first be referred to the Trust Health and Safety Group.

16 Key Health and Safety Issues

- 16.1 All Staff should make themselves aware of the Trusts Risk Management Policy, which is available on the intranet. In addition each Directorate may have produced its own Health and Safety local procedures.
- 16.2 All current procedures must be adhered to, if staff are in any doubt to their actions or accountabilities, they should contact their line manager.
- 16.3 Day to day responsibilities are defined in the Risk Management Policy, there will be specific areas of risk in each workplace, for which certain controls will be identified. Staff should make themselves aware of these risks and report any changes immediately to their line manager.

17 Key Risk areas

17.1 Safe Plant and Equipment

- 17.1.1 All equipment within the Trust will be identified for specific purpose following an assessment process. This will include the maintenance and purchase arrangements in place in line with current Legislation and HSE Publication – The Provision and Use of Work Equipment Regulations 1998. If equipment is faulty, staff must report it to their line manager; generally non-medical equipment will be maintained through help desk on extension 4531. For medical equipment refer to the Medical Devices Policy.

17.2 Control of Substances Hazardous to Health (COSHH)

- 17.2.1 All hazardous substances will be assessed for their suitability and will be substituted by a safer alternative where reasonably practicable.
- 17.2.2 Pharmacy and Purchasing will have data sheets available in order to assist with the undertaking of a COSHH assessment, under the Control of Substances Hazardous to Health Regulations. If there is any doubt to the suitability of a substance staff should contact the Health and Safety Manager.
- 17.2.3 Staff should refer to the Trust's COSHH policy for more information.

17.3 Emergency Procedures, Fire and Evacuation

- 17.3.1 The Trust's Senior Fire Officer will ensure suitable Fire Risk Assessments are carried out, staff must make themselves aware of the arrangements for their work area, identifying escape routes, fire fighting equipment, alarms and evacuation procedures.
- 17.3.2 Fire equipment is checked every 12 months and all staff are required to attend mandatory fire training. Mandatory training updates are required in accordance with training needs analysis (Learning and Development Strategy).

17.4 Accidents, First Aid and Work Related Ill Health

- 17.4.1 All accidents, incidents, dangerous occurrences and near misses must be reported in line with the Trusts Incident Reporting procedure.
- 17.4.2 The aim of first aid is to reduce the effects of illness or injury experienced at work caused by the work itself or other factors. The level of first aid provision is determined

by an assessment of first aid needs and must be adequate and appropriate to the circumstances. This need not be formal or recorded assessment
The Trust will ensure that there are sufficient first aid personnel or qualified staff and facilities to:

- Give immediate assistance
- Summon help (ambulance or other professional assistance)

17.4.3 First aid cover is supplied by the Trust

As per HSE Guidance L74 –

Provided they can demonstrate current knowledge and skills in first aid, the training and experience of the following qualify them to administer first aid in the workplace without the need to hold a First Aid at Work, Emergency First Aid at Work or equivalent qualification:

- Doctors registered and licensed with the General Medical Council;
- Nurses registered with the Nursing and Midwifery Council;
- Paramedics registered with the Health and Care Professions Council

17.4.4 If a first aid needs assessment highlights the need, then a locally nominated first aider or appointed person must be identified within your work area. All staff should make themselves aware of the location of the first aid facility or first aider provisions.

17.4.5 Occupational Health Department will conduct health surveillance and investigate work related incidents of ill health or any issue raised through the risk assessment or ill health referrals process.

17.5 **Moving and Handling**

17.5.1 The Trust has a dedicated Moving, and Handling Advisor who is in place to develop and support the manual handling procedures within the Trust. The Trust will ensure current Policy and practice is developed in line with current legislation, the Manual Handling Operations Regulations 1992 and the Backcare publication The Guide to the Handling of People (6th edition). Managers should ensure staff attend training updates in accordance with Trust's training needs analysis (Mandatory Training Policy).

17.5.2 All moving and handling tasks should take into account current best practice in line with the Trust's Moving and Handling Policy.

There are various controls and guidance in place on the use of moving and handling equipment and staff must not use this equipment unless they have the appropriate training. It is important line managers are advised if you are pregnant or ill as this may affect your ability to assist in the moving and handling task.

17.6 **Display Screen Equipment**

17.6.1 The Display Screen Equipment Regulations 1992 (DSE) require employers to assess work stations are safe and comfortable for use. Staff defined as a display screen user, will be given advice on the layout and set up of their workstation.

17.6.2 The Trust DSE Policy and employee assessments are available on the intranet and must be used in addressing the risk to staff.

17.7 Pregnancy and Work

17.7.1 Pregnancy is a natural state, which must not be treated as ill health. All staff should be aware that through risk assessment some changes might need to be made to the controls within the working environment. The Trust's Maternity, Adoption and Paternity Policy contain a risk assessment tool.

17.7.2 A risk assessment form is available on the Intranet to assist line managers and their employees in establishing the controls required for assessing the risk to a pregnant employee or returning mother.

17.8 Lone workers

17.8.1 Where staff may be at risk from working either in isolation or away from the hospital a suitable risk assessment should be undertaken. The assessment should reflect upon the risks to the member of staff and the controls that need to be put in place to provide a safe system of work.

17.8.2 Further guidance can be obtained in the Lone Worker Policy.

17.9 Young Workers

17.9.1 The Trust will undertake its responsibilities towards any young worker (under the age of 18) in accordance with The Management of Health and Safety at Work Regulations 1999 (Regulation 19). The policy Manage the Safety of Young Workers under the Age of 18 gives full details on risk assessment and training required.

17.10 Slips, Trips and Falls

17.10.1 The Trust has a duty under the Health and Safety at Work Act 1974 Section 2 and Section 3 to ensure their employees and anyone else who could be affected by their work (such as visitors, members of the public, patients, contractors etc), are kept safe from harm and that their health is not affected. This means slips and trips risks must be controlled, the trust complies with this by –

- Task based risk assessments that highlight any slips, trips issues
- Visual inspections of shared areas , i.e corridors, ground and public areas
- Staff induction training which includes slips, trips awareness
- Staff mandatory health and safety training which includes slips, trips awareness
- As appropriate providing relevant staff PPE in the form of footwear and ensuring appropriate footwear is worn
- As far as reasonably practicable ,ensuring good lighting and sound flooring
- Maintenance of flooring and lighting both proactive and reactive via the 6000 helpdesk.

18 Monitoring & Auditing

18.1 This policy and the safety management procedures which stem from it will be monitored in order to confirm their effectiveness in ensuring the health, safety and welfare at work of employees and others who might be affected by the work activities at the Trust. Monitoring will take two forms Proactive and Reactive as follows;

18.2 Examples of proactive monitoring will include:

- Local work place inspections
- Spot checks, by specialist health and safety staff or link staff
- Testing of employee understanding. (eg. Questionnaires and surveys)
- Auditing of systems, equipment risk assessments and training programmes
- Completion of the audit requirements specified within each of the related policies with appropriate reporting and any required changes in practice identified and actioned within a specified timeframe and lessons will be shared.
- The annual report to the H&S Group will summarise the outcomes of this activity.
- Quarterly environmental audits

Examples of reactive monitoring include:

- Analysis of accident/near miss/ill health statistics
- Analysis of accident/near miss investigation reports
- Consideration of health and safety concerns from Safety Representatives
- Responses to concerns, improvements and prohibition notices issued by enforcing authorities (i.e. Fire Service, Health and Safety Executive)

18.3 A Health and safety report is provided to each meeting of the Health and Safety Group highlighting compliance with risk assessment, incidents and training compliance.

18.4 An annual report will be made to the Chief Executive on the performance of the health and safety management procedure and their effectiveness in meeting the standards set out in this safety policy document.

19 Communications & Implementation

19.1 The policy will be made available on the Trust's intranet & website.

19.2 The policy will be issued to senior operational managers for them to disseminate within their wards and departments.

19.3 The approved policy will be notified in the Trust's Staff Focus that is sent via e-mail to all staff.

20 References

Health and Safety at Work act 1974

NHSLA Risk Management Standard

HSE Management of Health and Safety at Work Regulations 1999

HSE Workplace (Health, Safety and Welfare) Regulations 1992

HSE Provision and Use of Work Equipment Regulations 1998.

HSE Manual Handling Operations 1992:

HSE Health and Safety (Display Screen Equipment) Regulations 1992

HSE Personal Protective Equipment Regulations 1992

HSE Control of Substances Hazardous to Health Regulations

HSE Managing for Health and Safety (HSG65)

HSE Reporting of Injuries, Diseases or Dangerous Occurrences Regulations 2013 (RIDDOR)

Backcare The Guide to the Handling of People (6th edition)

<http://www.hse.gov.uk/>

<http://meht-intranet/>