

Policy for the Control of Contractors

Department / Service:	Estates and Facilities
Originator:	Head of Health & Safety and Fire Safety
Accountable Director:	Director of Estates and Facilities
Approved by:	Health and Safety Committee
Date of approval:	10 th July 2025
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This is the most current document and should be used until a revised version is in place	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust
Target Departments	All
Target staff categories	All

Policy Overview:

This policy defines responsibilities for the duty of managing contractors working on Trusts premises and sets out the arrangements for minimising risk.

Worcestershire Acute Hospitals NHS Trust (WHAT) recognises that the use of contractors is a necessity and that they are employed throughout the Trust. A contractor is a person or firm that undertakes a contract to provide materials or labour to perform a service or do a job. Contractor work therefore encompasses any activity completed by a non-Trust employee at any of our sites (other than receiving medical care).

Work undertaken for the Trust by a contractor must be covered by a civil or commercial contract. The Trust expects that anyone instructing, managing or collaborating with contractors considers and minimises the risk associated with the work. Not only to the Trust but to all others that could be affected.

It is good practice for health and safety requirements to be incorporated into the contract, and it should be highlighted that health and safety responsibilities are defined in criminal law and cannot be delegated by a contract. The Health and Safety at Work Act etc. 1974 and its subordinate legislation imposes a duty on the Trust and the contractor to safeguard the health, safety and welfare of those in its employment and those not in its employment but, who may be affected by its activities.

This Policy identifies the role of the Responsible Manager. This role applies to anyone who instructs, manages and/or brings contractors onto the Trust's sites. This policy will outline the scope of this role and the responsibilities this role will have in managing contractors.

Key amendments to this Document:

Date	Amendment	By:
August 2013	New Guideline	
August 2015	Document extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC
05/12/2016	Document extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC
Nov 2017	Document extended whilst under review	TLG
March 2018	Document extended for 3 months as approved by TLG	TLG
June 2018	Document extended for 3 months as approved by TLG	TLG
23 rd January 2020	Document extended for 6 months whilst review takes place with new Director of Facilities and Estates	Ray Cochrane
August 2020	Document extended for 6 months during COVID period	QGC/Gold Meeting
February 2021	Document extended for 6 months as per Trust agreement 11.02.2021	Trust agreement
March 2022	Document extended for 3 months whilst review takes place with the new owner.	Julie Noble
August 2022 Issue 3.	Legal references updated; major rewrite, includes increased content on section, suitability and management and control of contracted work.	Julie Noble
June 2025. Issue 4	Major rewrite; introduced the role of the responsible Manager and references to new underpinning SOPs. Due to the changes this document will require a review in 12 months to ensure the changes are suitable and sufficient.	Julie Noble

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Supporting Document 1	Equality Impact Assessment
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1. Introduction

The aim of this policy is to establish a consistent Trust wide approach for the engagement, management and control of contractors and to ensure compliance with health and safety legislation. The Trust recognises its legal responsibilities regarding contractors on its premises and about its business to ensure the health, safety and welfare of its employees, patients and visitors. The Trust will only employ competent contractors (i.e. those included in the NHS list of assessed contractors or those whose competence can be assured by alternative means).

The Management of Health and Safety at Work Regulations 1999 are of particular importance in any Trust/contractor relationship. These Regulations set out requirements for a health and safety management system in all workplaces and the accompanying HSE guidance gives further detail relating to this. The Trust and contractors also have legal responsibilities under health and safety regulations dealing with specific hazards (e.g. the Control of Substances Hazardous to Health Regulations 2002, the Control of Lead at Work Regulations 2002 and the Control of Asbestos at Work Regulations 2012).

2. Scope of this document

This policy applies to all Responsible Managers within the Trust, those listed under the Trust responsibilities section contractors and sub-contractors.

3. Definitions

• Responsible Manager

Any person within the Trust who engages and/or instructs contractors to complete work of any type.

The Trust has a duty of care to all of those who use and work at the site including any persons other than their employees. The Responsible Manager is the Trust's interface with third parties coming onto their sites to complete work. They have a direct responsibility to ensure that works are managed and completed in a safe manner, relevant information is shared and clearly communicated, and that the requirements stipulated within the Trust's policies and procedures are met. (See Management of Contractor Activities SOP for further detail)

• Contractor

"Any person, firm, company or other legal entity entering into a contract with the Trust for the performance of services and or the supply of goods" and "any person, firm, company or other legal entity otherwise performing services and or supplying goods to or for the benefit of the Trust". Examples include-

- Company representatives;
- Staff from other Trusts;
- Consultants;
- External auditors and

- Construction or maintenance workers.

- **Contractor Risk Management**

The person within or on behalf of the Trust engaging any contractor is responsible for ensuring that risks associated with the works are adequately controlled in line with the mitigations. The measures needed to achieve this will depend on the nature and complexity of the work being done.

- **Competent person**

A Competent Person is a person with relevant knowledge, skills, qualifications, experience and/or membership of a relevant professional body.

- **Risk Assessments and Method Statement (RAMS)**

A document provided by the contractor which incorporates a detailed written sequence for carrying out identified tasks, which may include risk assessments to ensure that the work activities are done in a sequence to confirm safety.

All method statements will be reviewed by The Responsible Manager and approved prior to the task being undertaken.

- **Safe systems of Work**

A safe system of work is a formal procedure which results from a risk assessment and identifies a safe method of work to ensure that the hazards are eliminated or the remaining risks are minimised.

- **Permit to work**

Written permit to work systems are normally applied for activities where the risk to either the persons carrying out the work or others is high. Permits should only be issued by those identified as an appointed person within the Permit to Work Policy.

Permits to work should not be mistaken for a “safe system of work”; rather a safe system of work may require a permit to work system to be adopted as part of its overall systematic control of risk.

This process (including the competency requirements for those who are completing, managing and undertaking permit to work activities) is expanded upon within the Trust’s Management of Contractor Activities and the Trust Permit to Work Policy

Examples of permit to work activities

- Working above suspended ceilings or within services routes
- Isolation of services
- Adaptation of services
- Work within plant rooms
- Access to restricted or clinically vulnerable areas

- Excavations
- Any work which would affect the compartment lines or passive fire protection across the site

• Risk assessments

A risk assessment is a careful examination of what could cause harm to people and how you then weigh up whether enough precautions have been taken or more should be done. The statutory standard is that a risk assessment is “suitable and sufficient” for purpose i.e. they identify all foreseeable hazards and then implement appropriate control measures to eliminate or mitigate the risks. All work completed by a contractor (as defined by this policy) needs to be risk assessed and any mitigations agreed prior to commencing works.

This must be provided in advance of the works by the contractor to the Responsible Manager. The Responsible Manager will need to review and approve the risk assessment and method statement (RAMS) (prior to the contractor attends site).

The Management of Contractor Activities SOP identifies the competency requirements for reviewing RAMS.

Responsible managers must also ensure (where applicable) an Infection Prevention and Control (IPC) risk assessment has been completed, submitted and approved by the IPC team prior to any works taking place.

• Induction

Contractors must be inducted prior to carrying out activities upon the Trust’s sites. This is a legal requirement and communicates the Trusts policies and procedures which are applicable to the works that are being undertaken, and associated risks working on the Trusts premises prior to commencing any works.

The Responsible Manager for the work needs to make sure that all persons are inducted and information communicated to operatives is relevant and appropriate to the role and/or activities which are being undertaken. The induction as a minimum must cover: Fire safety procedures, no smoking, accident reporting, access control, infection control, site rules, behavioural expectations, welfare amenities.

Please refer to Management of Contractor Activities SOP for more details.

- **Construction (Design and management) Regulations 2015**

The Construction (Design and Management) Regulations identifies specific duties of all who are involved in completing construction-based activities. It identifies the requirements for those who complete construction-based activities at the Trust's sites. Where singular contractor works are being carried out, applying this policy and the Management of Contractor Activities SOP will fulfil requirements under this legislation.

Where more than one contractor or designer is engaged to deliver a project, a principal designer and principal contractor needs to be appointed in writing. The Trust's Responsible Manager for the work will need to fulfil the duties of Client. Further guidance with respect to this is provided within the Non Minor works and Capital Delivery Standard Operating Procedure implemented by the Trust.

- **Building Safety Act 2023**

The Building Safety Act (BSA 2023) identifies a new statutory framework which is universally applied across all buildings. It defines and articulates responsibilities for those who design, build, manage, operate and use buildings.

The secondary legislation which has been developed under the BSA 2023 includes the Building Regulations Amendments Regulations 2023. This piece of legislation identifies new roles and responsibilities for those who work on buildings or affect the occupants or life safety systems found within them.

It is key for any organisation (including the Trust) to develop and maintain the Golden Thread for any premises that we occupy. The Golden Thread can be described as the suite of information which enables the safe use, maintenance and adaptation of a building.

For any persons working on the Trust's site, it is paramount that any information relating to it is collated and shared with the Trust. The Responsible Manager needs to make sure that this is collated and stored electronically

4. Responsibilities and Duties

For general responsibilities refer to the Health and Safety Policy. The specific responsibilities in relation to this Policy are:

- **Chief Executive Officer**

The Chief Executive Officer is responsible for ensuring that the Trust meets its statutory obligations and that effective arrangements for the management of health and safety are put in place.

- **Director of Finance**

The Director of Finance is responsible for ensuring that the requirements of this policy are observed in all capital project work and other contract works managed by the Capital Projects Team.

• Director of Estates and Facilities

The Director of Estates and Facilities is responsible for ensuring that the requirements of this policy are observed and adhered to in all estates related work carried out by estates staff and external contractors.

• All Departmental Managers and Heads of Departments

Departmental Managers and Heads of Departments who originate contract specifications are responsible for ensuring that the necessary health and safety requirements are incorporated within the specification, ensuring that induction, sufficient information, instruction and training is provided. In addition, they are also responsible for ensuring the monitoring of the contract in line with organisational requirements. Managers who aren't familiar with managing contractors should familiarise themselves with the policy and associated SOPs. If further support is required, they should discuss with their line manager and if needed the H&S team.

• Responsible Manager

The Responsible Manager is the person requesting and/or instructing the work to be completed by Contractors. The activities which are identified below may be delegated to others (where appropriate and Agreed by all parties) however the responsibility for ensuring that they have been completed is retained by the Responsible Manager.

The responsibilities included within this role include as a minimum: -

- Having a clear understanding of the works being instructed and undertaken, and the Trust policies and SOPs as well as local processes which need to be followed.
- Ensuring that the scope and requirements of the work are clearly communicated to stakeholders within the Trust and that no other works are taking place in the same location which could affect the associated risk to operatives and/or others.
- Considering the effects that the work could have on life safety systems (such as the fire alarm, mechanical/electrical systems and the integrity of compartment lines).
- Collating information relating to the work in readiness to share with any contractor. This includes information regarding the risks and any operational stipulations/processes designed to protect patients and Trust employee whilst carrying out the work.
- Ensuring that any organization/contractor engaged is competent to complete the work and that this review has been documented prior to arranging the work to be done or progressing orders.
- Ensure the individuals completing the work, are those whose competencies have been assessed, and that they have been inducted prior to starting work.
- Engaging with procurement to confirm that the contractor (if engaged) is upon

the list of approved contractors working at the site.

- As a minimum, ensuring that a Risk Assessment and Method Statement (RAMS) has been provided for the work, and that it has been reviewed and accepted by the Responsible Manager. Any documentation should be specific for the task being completed (dependent upon the nature of the work the permit to work or CDM processes may need to be applied). It is required that documentation is agreed no later than 48 hours prior to the work being carried out.
- Ensuring that there is a Trust representative on site for the duration of the work contractors (including weekend and out of hours work).
- Completing spot checks of the work to verify that it is being undertaken as per the agreed RAMS and safely.
- Ensuring that the work is completed to the required standards of quality.
- Collating and sharing any handover information with the relevant department so that Trust records can be updated.

***NB** Please note, details relating to the spot checks and supervision required for works can be found within the Management of Contractor Activities Safe Operating Procedure and Non-Minor Works & Capital Delivery Safe Operating Procedure.

• I.T. Services Manager

The I.T. Services Manager will ensure that all contractors invited to site, to carry out works which involve IT services, are inducted and aware of the effects that the work could have upon compartment lines. IT Services will remain responsible for the control of the respective contractor and complete the role of Responsible Manager as defined above.

Please note, that the definition of contractor also encompasses service providers (such as Computacenter) working at the site.

• The Health & Safety team

The Health and Safety team will advise and assist on appropriate measures to meet legal and organisational requirements when required.

• The Contractor

All contractors will comply with all Trust policies and procedures, as well as communicating all relevant information. The Contractor has the responsibility of health and safety at operational level and will ensure subcontractors comply with Trust policies and procedures.

5. Management and Control of Contractors

5.1. Selection and appointment of contractors

If a new task or activity or a recurrent maintenance task is required, Responsible Managers must ascertain if they have the expertise or the capacity within their team to conduct the task. The parameters of the task must be fully considered. If there is limited or no expertise or no capacity to conduct the task, then consideration of an external contractor must be agreed.

Where possible contractors which are known, and an approved contractor should be assessed first for the task. If new contractors are required, then sources to identify new suitable contractor candidates are:

- Procurement Frameworks
- NHS Supply chain
- Recommendations following previous experience with the contractor
- Industry specific, creditable websites
- NHSE
- Recommendations from other NHS organisations
- Internal Trust recommendations from similar services

If a new contractor has been chosen, in the first instance the Safety Schemes in Procurement Portal (www.ssiportal.org.uk) should be used. This is an initial check of organisational competence for the task being completed and should be undertaken by the Responsible Manager

It is vital that the Trust Procurement team are included in to ensure contractors are Bonafide and are signed up to Trust terms and conditions. Responsible Managers must follow the new supplier's approval process in a timely manner. An assessment on whether a DBS check is required must be conducted, with HR support.

When assessing the competence of contractors, the following information should be used as an evaluation of their suitability:

- What is the Contractor's previous experience?
- Where are they based?
- Number of employees?
- Do they have a Quality Management System (QMS) (if so what)? E.g. ISO9001, 45001, 14001 etc, Industry / trade association memberships.
- What qualifications/accreditations do they have for the task?
- Do they document Risk Assessments and Method Statements for the task?
- Do they do task for similar industries?

- Any HSE accidents?
- Do they keep staff records? Training?
- Will they conduct all the task or subcontract?

No work is to be carried out without the Responsible Manager carrying out the competency checks in accordance with the policy

Issues can arise where work is sub-contracted out via the main contractor. The Responsible Manager is required to understand who is doing the work and whether information has been effectively communicated (in relation to how risks and tasks are managed) to those completing the work. As per the Trust's terms and conditions, no work is to be sub-contracted by any contractor without the Trusts knowledge and approval.

Please note, at our Worcester site, Equans are responsible for managing contractors on the Trust's behalf.

5.2 Assess the risks of the work

Prior to commencing contract work it's imperative that all information pertinent to the contracted task / works is supplied to the contractor by the Trust. For example: Relevant Trust Policies, plans, drawings, key documents, etc, which the contractor will need in advance to enable both parties to be able to agree a schedule of works.

Pre-Start Meetings will be required with the contractor and Responsible Manager to ensure work plans are fully considered, impacts understood, timeframes agreed and risks and controls effectively managed. The Trust may have risk assessments for some work activities of their own business which must be shared, along with any other Trust key documents which may be relevant to the contracted work (e.g. provide the contractor with the Trust Water Safety plan, information on asbestos, if relevant to the contracted work). Engagement with the IPC team may also be required.

The Trust must agree with the contractor how the work will be done and the precautions that will be taken. The extent of the Trusts responsibilities will be determined by the impact that the contractor's work could have on anyone likely to be affected. Relevant issues should include:

- what equipment should or should not be worked on/used;
- personal protective equipment to be used and who will provide it;
- working procedures, including any permits-to-work;
- the number of people needed to do the job;
- reporting of accidents and safekeeping of records and plans

A comprehensive method statement of all works must be conducted and completed by the contractor prior to works being agreed. To support this the contractor must provide a suitable and sufficient risk assessment that includes the risks of the work being conducted and the controls the contractor will apply to prevent harm to their staff and others. The Responsible Manager and contractor must assess and agree the Risk Assessment and Method Statement (RAMS) to ensure they are relevant to the task

and appropriate prior to agreement to proceed with works.

It is vital that these are reviewed by the Responsible Manager to ensure the parameters of the works are agreed and that any additional work noted, is not conducted without Trust agreement (if outside the original RAMS). If the RAMS do not reflect the task planned or does not list robust controls, then the contractor must be requested to improve the detail before approval to commence work can be agreed. Trust staff involved within this task must be competent to enable assessment and evaluation of the RAMS and challenge. If subcontractors are involved, they should also be part of the discussion and agreement. If there are any significant risks identified, then these must be further controlled by a Permit to work (e.g. hot works permit).

Both parties must consider the risks from each other's work that could affect the health and safety of the workforce or anyone else e.g. patient, visitor etc. Patient safety and the effect on clinical services must be highlighted to prevent any inadvertent impact. The method statements and risk assessments must consider all aspect of the works to be conducted e.g. utilisation of cranes, tools, equipment, waste disposal, need for access passes, parking etc to ensure all risks can be controlled.

Some contracted work will require contractors to be given access to areas where they can take more local control (e.g. works under the Construction (design and management) Regulations). Where a segregated work area is established, the Principal Contractor has primary responsibility for ensuring the safety of works carried out within their demise. This does not negate the Trusts responsibilities for ensuring works are being conducted safely, therefore the Trust must conduct spot checks (at a frequency which is commensurate with the risk of the activities) to ensure the works comply with the agreed and approved Construction Phase Plan (CPP's) and RAMS. The main contractor will be responsible for ensuring that the RAMS of their sub-contractors are suitable and sufficient, and that any effects on the hospital's operations resulting from completing the activity is communicated to the Responsible Manager prior to starting work.

The Responsible Manager is required to assure themselves that works are being carried out in a safe manner.

5.3 Provide information, instruction and training

The Trust, contractors and sub-contractors must provide their employees with information, instruction and training on anything which may affect their health and safety. All parties need to consider what information should be passed between them and agree appropriate ways to make sure this is done. There must be a clear exchange of information about the risks arising from their operations, including relevant safety rules and procedures, and procedures for dealing with emergencies. This exchange of information should include details of any risks that other parties could not reasonably be expected to know about. The information must be specific to the work.

Prior to commencement of work, the Responsible Manager must ensure all contractors undertake a Trust induction, which is commensurate to the nature of the activities being undertaken. Further detail is provided within the Management of Contractor

Activities SOP.

The induction record must be signed and the Responsible Manager must maintain records. If the contractor conducts repeat works within the year, then a further induction may not be required, however if any lapses in adhering to Trust induction elements (e.g. contractor found smoking on site) then the contractor must cease work and a refresher induction conducted. Trust inductions are valid for 1 year after which a new induction will be required.

5.4 Supervision and monitoring of contractor work

There must be appropriate arrangements put in place by the Responsible Manager to effectively manage and supervise the work of contractors. This includes ensuring signing in/out processes to control contractors for each day on site are adhered to and ensuring contractors only have access to the relevant areas of their work. All contractors must sign in and out with the Responsible Manager for any works which is being carried out.

The Trust, responsible managers, contractors and sub-contractors should monitor their health and safety performance. This means checking whether the risk assessment(s) are up to date and that control measures are effective. The level and frequency of monitoring depends on the risk associated with the activity.

Details relating to specific requirements supervision and monitoring are found within Management of Contractor Activities SOP.

5.5 Co-operation and co-ordination

In any responsible manager /contractor relationship, there must be co-operation and co-ordination between all the parties involved, to ensure the health and safety of all at the workplace and anyone else likely to be affected. The Trust Responsible Manager will set up liaison arrangements with all parties. This could take the form of regular meetings or briefings. Liaison is particularly important where variations of the work are proposed, the work involves multi-site visits or where more than one contractor or sub- contractor is engaged

5.6 Consulting the workforce

The responsible manager contractors and sub-contractors must consult their employees on health and safety matters. Where there are recognised trade unions, consultation should be through safety representatives appointed by the unions. Trade unions have an important role to play and can provide expertise to help in the area of health and safety. Where there is no recognised trade union, different arrangements will have to be made e.g. through representatives elected by their employees. However, the workforce is represented; they should be part of the liaison arrangements set up by the client and should be involved from the outset.

5.7 Statutory Notifications

Where required, the Contractor shall ensure that all the required statutory notices are raised. If the responsible manager considers that there has been an infringement of the law, or that Regulations have been disregarded, the Trust via the responsible

manager may exercise its right to require alleged offenders to leave the site and the Trust will not be responsible for any costs or delays, arising there from, including lost time resulting from a failure to comply with these conditions. The requirements of any statutory notices should be discussed and agreed prior to works commencing.

Works requiring statutory notices may include: -

- Works to the mains services
- Working with Asbestos containing materials
- Adaptation of connections to the existing roads
- Demolition
- Works which require an F10 form to be completed (as identified within the CDM Policy)

5.8 Statutory and Other Regulations

All Work undertaken shall be carried out in strict conformity with the relevant Statutory Acts, associated regulations, codes of practice and guidance notes. These include but are not restricted to:

- Health and Safety at Work Act 1974
- Environmental Protection Act 1990
- Radioactive Substances Act 1993
- Regulatory Reform (Fire Safety) Order 2005
- Telecommunications Act 1984
- Employees Liability (Compulsory Insurance) Act 2011
- Building Regulations 2010
- Construction (Design and Management) Regulations (CONDAM) 2015
- Lifting operations and Lifting Equipment Regulations (LOLER) 1998

The Contractor shall display notices and shall keep or examine all records required by statute relating to the work, plant, equipment, inspections, safe working or supervision etc. and shall satisfy the Responsible Person that such records are adequate. When required by the Responsible Person, the Contractor shall produce for examination such records as he is required to keep, or photocopies of other such records.

6 Implementation

6.2 Plan for implementation

This policy will be implemented by the Responsible Manager (see Section 4)

6.3 Dissemination

This Policy will be made available on the Trust Intranet. It will also be communicated to managers and staff-side representatives via the Trust Health and Safety

Committee and JNCC committee.

6.4 Training and awareness

The Trust will require all contractors to provide suitable evidence that their staff are adequately trained for the work that they are contracted to carry out.

Responsible Managers within the Trust will be required to read, understand and fulfil the requirements identified within this Policy.

7 Monitoring and compliance

Where monitoring has identified non-compliance, recommendations and action plans will be developed and changes implemented accordingly. Progress on these will be reported to the Responsible Manager and the Head of Health & Safety

To ensure the Control of Contractors policy is operating correctly and that safety is being maintained during any hazardous activity, the following checks will be carried out by the Responsible Manager:

- Random spot-checks on contractor's ID badges;
- Random spot-checks to ensure contractors have signed log sheet;
- Checks to ensure new contractors have received induction and copy of 'contractor's information' prior to starting work;
- Detailed investigation of any incidents relating to contractor's work and
- Checks are made that the contractor is working within the limits of the policy.

In addition the Management of Contractor Activities SOP includes a "spot check" check list which must be used when contractors are working on Trust sites.

Issues of Non-compliance and good practice should be reported to the Head of Health and Safety these will be reported to the Trusts Health and Safety Committee

Audits and Inspections may be undertaken by internal and external stakeholders. Action plans as a result of these visits must be implemented and monitored by the Health and Safety Manager.

8 Policy Review

The policy will be reviewed by the Health & Safety Committee and updated every three years or sooner if regulations or documentation are revised.

9 References

Health & Safety at Work Act 1974	
Management of Health and Safety regulations 1999 (amended)	
Construction (Design and Management) 2015	
Work at Height Regulations 2005 (amended)	
Health & Safety Policy	WAHT-CG-125
Work at Height Policy	WAHT-CG-126

Risk Assessment Policy	WAHT-CG-002
Fire Safety Policy	
Control of Substances Hazardous to Health	WHAT-CG-269
Security Policy	WAHT-CG-034

10. Background

10.1 Consultation

The following were consulted in the production of this version of the policy:

- Director of Estates & Facilities
- Deputy Director of Estates and Facilities- Operational Estates
- Deputy Director of Estates and Facilities- Strategic Estates
- Head of Health and Safety and Fire Safety
- Head of Capital Planning
- Head of Operational Estates
- Estates Managers
- Head of Procurement
- Members of the Health and Safety Committee

10.2 Approval process

The Health and Safety Committee will receive this policy for approval. Changes to this document will be recorded and monitored in accordance with the Policy for Policies.

10.3 Equality requirements

An equality assessment has been performed. There are no equality issues presented by this policy

10.4 Financial risk assessment

A financial risk assessment has been performed. Effecting change as a result of learning may have associated costs although these will be dealt with through individual business cases.



Supporting Document 1 - Equality Impact Assessment Tool Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form

Please read EIA guidelines when completing this form Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP		Herefordshire Council		Herefordshire CCG	
Worcestershire Acute Hospitals NHS Trust	✓	Worcestershire County Council		Worcestershire CCGs	
Worcestershire Health and Care NHS Trust		Wye Valley NHS Trust		Other (please state)	

Name of Lead for Activity	Julie Noble, H&S Manager
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Details of individuals completing this assessment	Name	Job title	e-mail contact
	Julie Noble	Head of H&S	Julie.noble13@nhs.net
	Eno Udoh	Deputy H&S Manager	eno.udoh@nhs.net
Date assessment Completed	25/06/25		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: Policy for the Control of Contractors			
What is the aim, purpose and/or intended outcomes of this Activity?	To describe the process and management for the selection and use of contractors			
Who will be affected by the development & implementation of this activity?	<input checked="" type="checkbox"/> Service User <input checked="" type="checkbox"/> Patient <input checked="" type="checkbox"/> Carers <input checked="" type="checkbox"/> Visitors	<input checked="" type="checkbox"/> Staff <input type="checkbox"/> Communities <input type="checkbox"/> Other _____		

Is this:	<input type="checkbox"/> √ Review of an existing activity <input type="checkbox"/> New activity <input type="checkbox"/> Planning to withdraw or reduce a service, activity or presence?
What information and evidence have you reviewed to help inform this assessment? (Please	A review of applicable Worcestershire Royal Acute Hospitals NHS Trust policies, HSE website and UK applicable regulations has been conducted.

name sources, eg demographic information for patients / services / staff groups affected, complaints etc.	
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	Key parties have been provided with this Policy for review / comment (e.g. H&S committee). The H&S manager has ensured this policy meets legal obligations.
Summary of relevant findings	No impact to others from this document; this is a continual improvement process.

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale.** Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age	√			
Disability	√			
Gender Reassignment	√			
Marriage & Civil Partnerships	√			
Pregnancy & Maternity	√			
Race including Traveling Communities	√			
Religion & Belief	√			
Sex	√			
Sexual Orientation	√			

Other Vulnerable and Disadvantaged Groups (e.g. carers; care leavers; homeless; Social/Economic deprivation, travelling communities etc.)	√			
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Equality Group	Potential <u>positive</u> impact	Potential <u>neutral</u> impact	Potential <u>negative</u> impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)	✓			

Section 4

What actions will you take to mitigate any potential negative impacts?	Risk identified	Actions required to reduce / eliminate negative impact	Who will lead on the action?	Timeframe
How will you monitor these actions?				
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)				

Section 5 - Please read and agree to the following Equality Statement

1. Equality Statement

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Signature of person completing EIA	Eno Udoh
Date signed	25/06/25
Comments:	
Signature of person the Leader Person for this activity	Julie Noble
Date signed	25/06/2025
Comments:	

Supporting Document 2 - Financial Risk Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	NO
2.	Does the implementation of this document require additional revenue	NO
3.	Does the implementation of this document require additional manpower	NO
4.	Does the implementation of this document release any manpower costs through a change in practice	NO
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	NO

If the response to any of the above is yes, please complete a business case which is signed by your Finance Manager and Directorate Manager for consideration by the Executive Team before progressing to the relevant committee for approval.