Trust Policy

Worcestershire Acute Hospitals NHS Trust

Health and Safety Policy

Department / Service:	Health & Safety	
Originator:	Julie Noble	Head of Health and Safety
Accountable Director:	Scott Dickinson	Director of Estates and Facilities
Approved by:	Health and Safety Committee / Executive Risk Management Committee	
Date of Approval:	11th October 2024	
Review Date: This is the most current document and should be used until a revised version is in place:	11th October 2027	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust	
Target Departments	All	
Target staff categories	All	

Key amendments to this Document:

Date	Amendment	By:
01/06/09	Biennial review with minor amendments	Paul Graham
01/06/11	Biennial review with changes to the format and minor amendments due to recent changes in the managerial structure	Paul Graham
01/08/13	Biennial review with minor changes	Paul Graham
14/08/15	Document extended for 12 months as per TMC paper approved on 22nd July 2015	TMC
December 2016	Further extension as per TMC paper approved on 22nd July 2015	TMC
November 2017	Document extended whilst document under review	TLG
March 2018	Document extended for 3 months as approved by TLG	TLG
Jan 20	Document extended for 12 months whilst in the process of appointing a new Health and Safety Manager.	Samantha Reid
Feb 21	Document extended as per Trust agreement 11.02.2021	
April 21	Full review with minor amendments. Quick reference and statement of intent added	Neil Hodgkiss H&S Manager
August 22	Minor word clarifications throughout; responsibilities added particularly to Managers and all employees; Section 5.2 extensively amended; 5.5, 5.6, Appendix 1 and 2 added as new.	Julie Noble
July 2024	Added audits and PAM to the check section of plan, do, check, act, job title changes updated throughout, change	Julie Noble

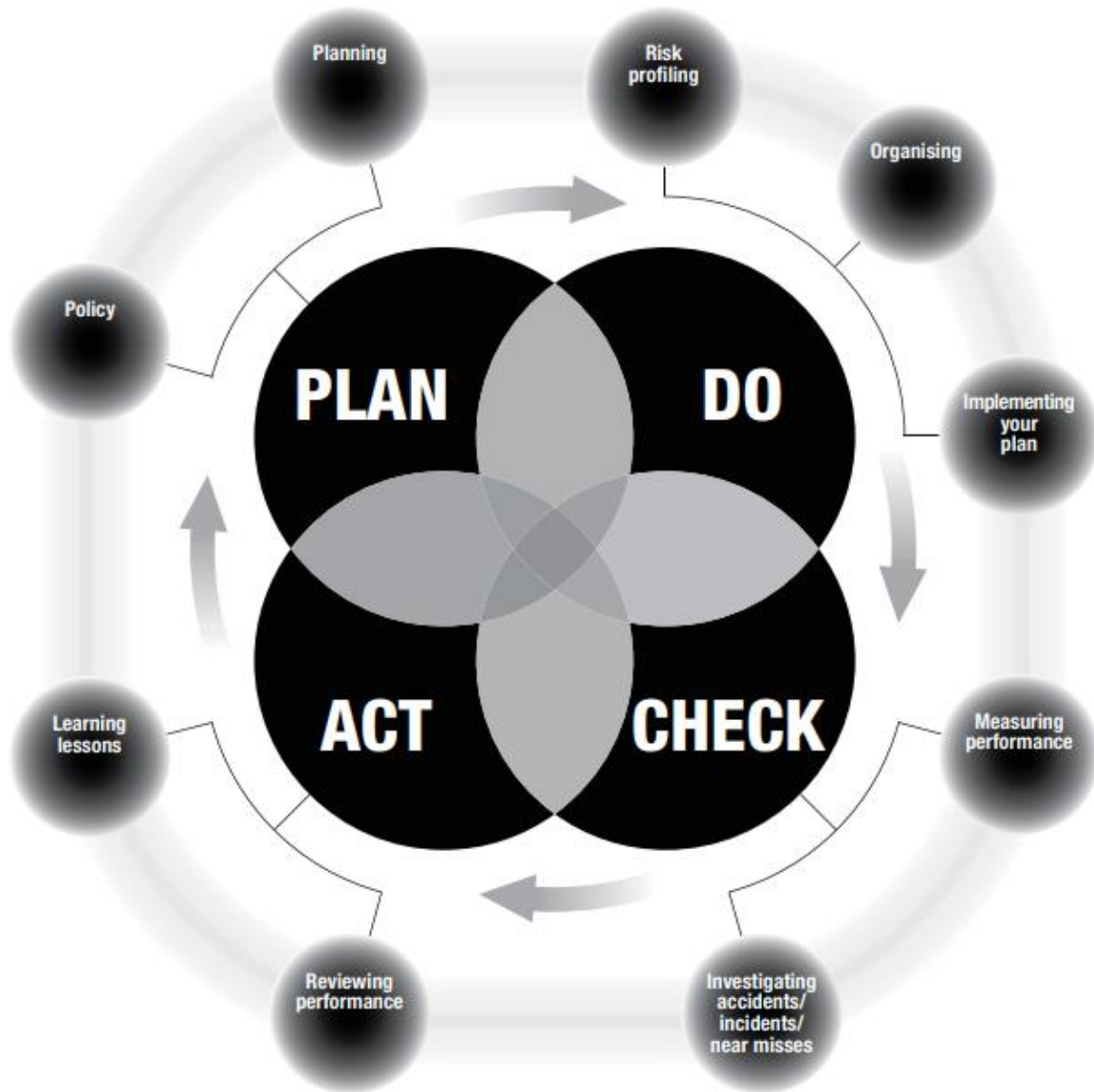|	of overseeing committee from TME to Executive Risk Management. Minor word changes.	

Contents page:

Supporting Document   Equality Impact Assessment Tool
Financial Risk Assessment

Quick Reference

In order to effectively manage Health and Safety, the Trust will follow the guidance and recommendations set out in HSG65 Managing for Health and Safety, produced by the Health and Safety Executive.

Plan, Do, Check, Act	The Trust Will:
Plan	• Strive to create an environment that is safe for staff, patients, visitor and contractors. • Ensure that our H&S policies meet current legal obligations and meet the needs of our staff and are disseminated to all • Ensure that throughout each divisional structure there are adequate arrangements for the pro-active management of Health and Safety
Do	• Assess the H&S risks, identify what could cause harm in the workplace, who it could harm and how, and establish what will be required to manage the risk. • Decide what the priorities are and identify the significant risks • Involve staff and ensure that matters of Health and Safety are communicated effectively. • Develop positive attitudes and behaviours towards Health and Safety amongst all Staff. • Implement preventative measures. • Provide the necessary tools and equipment for staff to undertake their roles in a safe and effective manner. • Provide appropriate training as required to ensure everyone is competent to carry out their work. • Supervise staff to make sure that arrangements are being followed
Check	• Monitor incidents, accident and near-miss trends to ensure that our control measures are robust and effective • Conduct H&S audits across wards and departments • Annually undertake a review of H&S performance and document within a formal report. • Use the NHS England Premises assurance model as a tool for identifying strengths and weaknesses. • Monitor Health and Safety performance and management across the organization through the Health and Safety committee
Act	• Learn from incidents, accidents and near-misses • Revisit any non-conformance • Take action on any lessons learned • Revisit plans, policies, documents and risk assessments to ensure they remain current

1. Introduction

Statement of Intent

Worcestershire Acute Hospitals NHS Trust and the Board of Directors are committed to ensuring the Health, Safety, Welfare & Wellbeing of its entire staff and shall provide such instructions, information, training and supervision as required for its purpose.

Operating in a pro-active manner, the Trust will commit to continual improvements in all aspects of Health and Safety by allocating sufficient resources, including staff, financial needs and equipment to enable all activities to be carried out in a safe and effective manner and in accordance with all applicable statutory legislation and codes of practice.

The Trust is committed to protecting and promoting the health, safety, welfare and wellbeing of all its employees, patients, visitors, contractors and members of the public who may be adversely affected in any way by Trust activities.

Through our management teams the Trust will endeavor to reduce risks as low as reasonably practicable by the introduction of appropriate preventive and protective measures, following the identification of work-related hazards and the assessment of risk related to them. Each individual Director, Deputy Director, Manager, Matron and Supervisor will take reasonable care of the health and safety of their direct staff and shall be accountable for all areas within their control.

In our vision to achieve the highest levels of Safety Performance and deliver the highest standards of patient care, we will look to embrace and share best practice from the wider healthcare community and pro-actively seek out innovative and dynamic initiatives that will support our policies and aims.

The Trust require staff at all levels to exercise a duty of care, to co-operate in establishing and maintaining safe working conditions and to avoid any actions which may be detrimental to the health and safety of themselves and others by their acts or omissions.

Collaboratively we will ensure that a positive Health, Safety & Wellbeing culture is sought and nurtured throughout the Trust and that the policies, procedures and guidelines that are in place to support this statement are effectively communicated and adhered to by all.

Glen Burley
Chief Executive

Signature:

Date: 05 November 2024

2. Purpose and Scope

This policy sets out the principles and arrangements established within Worcestershire Acute Hospitals NHS Trust to demonstrate its commitment to Health and Safety and all applicable legislation and codes of practice.
The policy applies to all members of staff throughout all work areas in which the Trust have control. It will also apply to all contractors whilst working on our sites.

3. Definitions

Hazard is something that has the potential to cause harm. For example this could be a substance, an item of equipment or a work procedure. It could even include a potentially aggressive patient.

Risk is the probability or chance that harm from a particular hazard will occur. The extent of the risk includes the number of people affected, the consequences for them and the impact across the organisation – the level of risk represents the consequences (severity) of harm and the likelihood of it occurring.

Accident is an unplanned event, other than a clinical procedure, that results in injury or ill health to people or damage/loss to property, plant, materials or the environment.

Near miss is any untoward, unplanned or unwanted event or circumstance that could have led to harm, damage or loss of service but was prevented identified and rectified before an accident occurred.

Responsibility and Duties

The Trust Board and Senior Managers fully accept their responsibility for health and safety in the workplace and will discharge this through their organisational responsibilities.

4.1 Chief Executive / Managing Director
The overall and final responsibility for health and safety in the Trust rests with the Chief Executive however the Managing Director has delegated responsibility to ensure that:

- The Board, Directors and Executive Team understands and accepts their responsibilities and accountabilities for the implementation and monitoring of the Health and Safety Policy
- The provisions of sufficient resources are available to fulfil the requirements of the Health and Safety Policy.
- Ensuring that all employees are fully aware of their statutory responsibilities and that these responsibilities are fulfilled.
- Ensuring that the Trust complies with all statutory health and safety requirements.
- Ensuring that the arrangements for health and safety and the Health and Safety Policy are fully implemented; this requires inclusion of health and safety within all managers performance reviews.
- An annual review of the safety provisions within the Trust is conducted with implementation of any recommendations arising from this.
- There is a 'named' director accountable for Health, Safety within the Trust.

4.2 Named Director – Accountable for Health and Safety
The Director of Estates and Facilities holds delegated responsibility for health and Safety, in particular for:

- Informing the Board on all relevant Health and Safety issues, including informing the Board to the requirements of this policy and any actual or potential breaches of Health and Safety Legislation
- Ensuring that there are effective systems in place for the management of Health and Safety across the divisional structures of the organization and that this is monitored through the Health and Safety Committee
- Chair the Health and Safety Committee and monitor the effectiveness of the Committee by ensuring that it meets its agreed terms of reference
- Ensuring reports on accident statistics, trends and remedial measures indicated are submitted to the Trust Board and appropriate sub-Committees in a timely fashion
- Ensuring sufficient resources and support are made available for the Trust Health and Safety Manager to allow the team to effectively manage Health and Safety on a day-to-day basis across the Trust.

4.3 Head of Health & Safety
The Head of Health & Safety holds delegated responsibility to act as the competent person for Health and Safety matters across the organization advising the Trust in respect of health and safety policy formulation and development. Additionally, in carrying out their duties they will: -

- Ensure the Trust is kept informed of any relevant Health and Safety regulatory or legislative changes.
- Monitor and review relevant codes of practice produced via the Health and Safety Executive and communicate any significant changes to the Board via the Director of Estates and Facilities.
- Attend meetings of the Trust H&S Committee and any other meetings as required to keep colleagues informed of accident/incident statistics, lessons learnt, changes in health and safety legislation or best practice and any other matters relevant to achieving the Trust's health and safety objectives.
- Develop, review and monitor the implementation of the Trust Health and Safety Policy and all supporting policies to ensure they reflect current legal obligations.
- Monitoring the effectiveness of the Health and Safety Policy and revise when necessary
- Receive all reports of injuries, diseases, dangerous occurrences, abusive behaviour and near miss incidents relating to staff, contractors and visitors and inform the Health and Safety Executive of all reportable events.
- In conjunction with the appropriate managers and/or advisory colleagues and staff-side representatives investigate accidents/incidents as necessary.
- Respond to, advise and make recommendations to managers, health and safety and other committees concerned with health and safety;
- To design and deliver or commission health and safety training for managers.
- Design and deliver health and safety training to staff at induction, risk management update sessions and on any other occasion as identified through training needs analyses.
- Co-operate with and assist other colleagues in implementing the Health and Safety Policy
- Liaise as necessary with specialist external staff whose work relates to health and safety, e.g. HSE Inspectors.

- Consult with the appropriate safety representatives and local managers and undertake an annual trust-wide health and safety audit / review.
- In conjunction with other advisory colleagues and managers undertake specialist risk assessments as required;
- Develop key performance indicators to assist in the health and safety management monitoring process.
- Ensure the role of local security management specialist (LSMS) is appointed to advise the trust on all matters relating to security. (Cross reference to the Trust Security Policy).
- Fulfil the role of Fire Safety Manager
- NB: The Deputy H&S Manager will provide support in fulfilling these duties and deputise for all duties in the absence of the Head of Health and Safety.

4.4 Health and Safety Officer
The Trust Health & Safety Officer will (but not limited to):

- Assist the Head of Health and Safety in fulfilling their duties to maintain an effective management system on a day to day basis.
- Provide Health and Safety training to members of staff when required.
- Assist in the production, review and distribution of relevant policies and procedures.
- Assist staff in the production of risk assessments (when required) e.g. divisional risk assessments. Carry out DSE assessment when required throughout the Trust
- Assist in the collection of Annual Workplace Risk Assessments.
- Assist in the investigation of accidents and near-misses (where required) and report to the HSE (when applicable)

4.5 Executive Directors and Clinical Directors
The Trusts Executive and Clinical Directors are responsible for ensuring:

- The implementation of the Health and Safety Policy, corporately and within their areas of control
- Effective delegation of safety responsibilities within their areas of responsibility
- effective support of their managers' decisions and recommendations in terms of the provision of appropriate resources for health and safety
- The promotion of a positive health and safety culture which enables all employees to fulfil their statutory duties.
- That staff have adequate experience and training to safely undertake their work
- That risk assessments, which identify significant risks to health and safety are undertaken and the results of those assessments communicated to employees before they are exposed to any risks.
- The purchase of appropriate equipment and facilities that are safely used and properly maintained.
- That all accidents are investigated and that the necessary reporting and recording procedures are implemented
- That arrangements are made for consultation with appointed safety representatives and all employees in the workplace.
- Detailed analysis of all accident statistics and the development of strategies for the reduction of injury, loss or damage to equipment and risk to persons
- Adherence of contractors to the prescribed health and safety standards is maintained in accordance with other Trust policies (e.g. Control of Contractors Policy).
- The development and implementation of any emergency procedures that may be relevant to their areas of responsibility.

4.6 Departmental/Ward Managers, Directorate Managers and Matrons

All managers, in addition to their duties as employees, must:

- Attend Health and Safety for Managers training.
- Ensure regular inspection of the workplace and equipment is undertaken and that steps are taken to eliminate or where not possible minimise any identified risks
- Undertake risk assessments as required and, where there is a significant risk to health and safety; communicate the results of those assessments to employees and others before they are exposed to any risks.
- Ensure workplace risk assessments for the working area are completed annually and submitted to the Health and Safety Officer.
- Ensure other "routine" risk assessments are completed pertinent to their staff (DSE assessment, new expected mother risk assessments, lone worker etc)
- Ensure that all staff are provided with such training and adequate supervision as is considered necessary for them to perform their work safely.
- Develop safe systems of work to reduce the risks of personal injury, ill health and/or damage to plant or equipment and monitor the performance of these systems.
- Encourage and support staff to report H&S incidents as per the Incident Reporting Policy
- Investigate and report on all accidents and incidents in a timely fashion and take appropriate measures to prevent recurrence.
- Ensure there are effective communication processes in place to alert staff to any changes that affect health and safety.
- Ensure that the provision of first aid in the workplace is commensurate with the level of risk associated with work activities.
- Refer staff with employment related health problems to the Occupational Health Department

4.7 Staff Responsibilities

All employees must:

- Take reasonable care of their own health and safety and that of others who may be affected by their acts or omissions.
- Undertake their tasks as instructed and in line with training received.
- Report to their managers any health and safety concerns, including any unsafe activities of outside contractors.
- Not misuse or interfere with any equipment provided to ensure safe working practice in the workplace.
- Report any accident, involving injury, ill health, damage to plant and equipment, or Potential injury, ill health, damage or loss (i.e. 'near miss' incidents) as per the Trust Incident Reporting Policy and to support staff's legal obligation to report incidents.

4.8 Trust Fire Safety Manager

The Head of H&S will fulfil this role and ensure there is an appointed Fire Safety Adviser who will be responsible for providing the Trust with expert advice on all aspects of fire safety including fire prevention, control and evacuation. They will be responsible for providing staff with fire safety training and will maintain appropriate training records. They will also periodically conduct fire safety audits, fire risk assessments and Dangerous Substances and Explosive Atmospheres (DSEAR) assessments on behalf of the Trust on all its sites.

4.9 Infection Control Team

The Infection Control Team will be responsible for providing the Trust with advice on all infection control issues. They will be responsible for providing staff with suitable training and for ensuring that adequate monitoring is provided to detect any infection control risks or problems. They will also be available to attend meetings in an advisory capacity.

4.10 Occupational Health

The Trust's Occupational Health Department are responsible for providing advice and support to managers and staff on all matters relating to occupational health. They will also provide the necessary support to enable individuals to resume work at the earliest opportunity in accordance with the Sickness Absence Health and Wellbeing Policy. This could include advice on equipment or changes to work practices.

4.11 Staff side Safety Representatives

Accredited Trade Union Health and Safety Representatives / Elected Representatives of Employee Safety work in partnership with management to promote:

- The health and safety interests of all staff at work.
- Positive health and safety practice,
- Investigating health and safety concerns and representing staff interests on health and safety committees.
- Influencing the development of a positive safety culture and a healthy working environment.
- Working jointly with the Trust to ensure compliance to relevant health and safety legislation
- Carrying out regular health and safety inspections

4.12 Health and Safety Committee

The Trust Health and Safety Committees primary objective is to promote co-operation between management and staff-side representatives in initiating, developing and carrying out measures, to ensure the health and safety at work of all employees. The Committee provides the Trust with a forum at which management can consult with staff-side about any health and safety issues, in good time, before the introduction of change, new equipment or new technology. The forum also allows staff-side representatives to communicate with managers, in order to raise health and safety issues that may be of concern and that cannot be resolved at local level. Staff side members acting as representatives are entitled and indeed encouraged to carry out their role and functions, as detailed in the *Safety Representatives and Safety Committees Regulations 1977* or elected representatives of employees' safety, as detailed in the *Health and Safety (Consultation with Employees) Regulations 1996.*

The Health & Safety team will ensure that a health and safety audit programme is developed and maintained. The audit programme will not detract from the Safety Representatives' right to inspect the workplace at more frequent intervals, in accordance with the provisions of the *Safety Representatives and Safety Committees Regulations 1977.*

The H&S Committee is accountable to Executive Risk Management; the Terms of Reference for the committee will be reviewed annually to ensure the committee is effective and demonstrates active participation, collaboration and engagement.

The responsibilities of an Accredited Trade Union Health and Safety Representative will cease when the Trade Union concerned notifies the Trust in writing that the appointment

has terminated or they have resigned from the Union or they have ceased to be employed.

5. Health and Safety Arrangements

The following section offers details of the health and safety management arrangements.

5.1 Supporting Policies

The Trust has a number of supporting policies that offer staff further information about relevant health and safety issues. These include:

- Incident Reporting
- Control of Infection
- Fire Safety
- Risk Assessment
- Control of Substances Hazardous to Health
- Manual Handling
- Display Screen Equipment
- Violence and Aggression
- Lone Working
- Exposure to Latex
- First Aid
- Security
- Extremes of Temperature in the Indoor Work Place
- Waste Management
- Working at Height
- Noise at Work
- Slips, trips & falls for Staff, Visitors & Contractors
- Control of Contractors

It is essential that staff familiarise themselves with the content of any relevant policies and any supporting procedures to ensure that they have a good understanding of all health and safety measures and comply with Policy requirements. H&S affects many other policies e.g. Procurement (ensuring new equipment has considered H&S risks, new and emergency technology solutions). Staff must note H&S needs to be considered to ensure a safe environment for all is maintained.

5.2 General Risk Assessments

The Trust Risk Assessment process as described by the Risk Management Handbook will be used to assist with the identification of   health and safety hazards, their associated risks and implementation of control measures. The H&S Team will develop a catalogue of generic risk assessments; these will be available via the H&S intranet (e.g. loading / unloading)

5.2.1. Types of H&S risk assessments and templates;

- Templates for completing individual risk assessments are accessible via the Risk Management Handbook (The Risk Assessment Record template is recommended for one off hazard/risk situations).
- For a risk assessment where variable hazards must be evaluated collectively (e.g. an activity that will involve different people, electrical hazards, cutting tools, chemicals, fire risk etc) then refer to Appendix 1 for H&S generic risk assessment template.
- The Workplace Health and Safety Risk Assessment Tool must be used on an annual basis by managers to screen their specific workplace risks in order to highlight any

significant risks. This is available from the H&S Team or H&S intranet page. Any risks that are deemed to be significant i.e. graded above 15 using the Risk Scoring Matrix will be recorded on Datix and escalated up through the Management system to ensure that the Trust Leadership Group and Trust Board are informed.

- Specific risk assessments must be carried out for the following health and safety issues:

  - Manual Handling – refer to the M&H Policy. HSE risk assessment tools (available via HSE.gov.uk) should also be used as relevant: RAPP tool (Risk assessment of pushing and pulling INDG478), MAC tool (Manual Handling Assessment Charts INDG383) or the ART tool (Assessment or repetitive tasks of the upper limbs INDG438). This is to aid compliance with the Manual Handling Operations Regulations 1992
  - Use of Display Screen Equipment – refer to the DSE Policy for the checklist (HSE risk assessment tool). This it to aid compliance with the Display Screen Equipment Regulations 1992
  - Personal Safety including Lone Working; refer to the Violence Prevention and Reduction and Management of Violence and Aggression Policy for the risk assessment template. For Lone workers; refer to the Lone Worker Policy and use template from Appendix 1 or the template in the Risk Management Handbook. This is to aid compliance with the Management of Health and Safety at Work Regulation 3.
  - Control of Substances Hazardous to Health – refer to the COSSH Policy for Notification of COSHH assessment forms and COSHH assessment template. This is to aid compliance against the COSHH regulations 2002.
  - New and Expectant Mothers – Refer to HR intranet pages and follow the New and Expectant Mothers Carrying Person Guidance and risk assessment. This is to comply with Management of Health and Safety at Work Regulations 3 and 16.
  - Young Persons (16-18). If the young person is conducting work experience, then follow the Work Experience Placement policy and complete a risk assessment. If the young worker is employed then prior to commencement a risk assessment must conducted (e.g. include hazards such as stress, workload, supervision). See HSE website / Young people at work for guidance. This is to comply with Management of Health and Safety at Work Regulations 3 and 19.

5.3 Accident and Near Miss Reporting

The Trust aims to reduce the number of accidents and incidents to a minimum. It will monitor all accidents, incidents and near misses and seek to implement the necessary control measures to prevent any recurrence.

The Trust has a reporting system for all accidents, incidents, near misses and dangerous occurrences, which will initially be investigated by the local manager. The H&S team are available to support Managers in the identification of H&S hazards and controls. All accidents/incidents will be graded using the risk-scoring matrix in terms of severity or impact. (Cross refer to the Incident Reporting Policy)

In the event of an accident or incident resulting in a serious injury or staff absence from work for more than 7 days then it must be reported to the Health & Safety Executive in compliance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. (Cross refer to the Incident Reporting Policy). RIDDOR provides a list of reportable incidents; the H&S team can provide direction on relevancy.

Incidents involving medicines or medical devices will be reported to the Medicines and Healthcare products Regulatory Agency (MHRA) respectively by the Medicines Safety Officer or Medical Devices Safety Officer. (Cross refer to the Safety Alerts Policy)

All reports of accidents and incidents will be recorded on the Datix Risk Management Database and retained indefinitely. (Cross refer to the Corporate Records Management Policy)

5.4 Emergency Procedures
When conducting risk assessments "normal" and "abnormal" situations must be evaluated. The Trust will ensure, via the risk assessment process, that all emergency situations for example, spillages of hazardous substances, fire and bomb incidents etc, are taken into consideration in terms of their risk impact. Any appropriate actions will be taken and/or contingency plans developed in consultation with the Health and Safety Committee and implemented in order to reduce the risks as much as possible. (Cross reference to local Joint Emergency Response Procedures).

5.5 Communication

Effective communication is one of the key components in ensuring the Health and Safety of all persons. The H&S Team will ensure there is an up to date Health and Safety intranet page which staff can access to gain information, links to H&S policies and procedures and relevant updates. Adhoc Health and Safety alert messages will be circulated if a health and safety concern is noted; this may be in the form of Trust wide screen savers, clinical whiteboard messages, or group emails to targeted areas.

5.6. Health and Safety Audits

The Health & Safety Team will carry out a program of Health and Safety Audits that covers all areas of the Trust using a risk based approach. The findings of these will be submitted to area management team. A template audit tool will be used to conduct the audits. (Appendix 2). Managers will be invited to support the H&S team with the audits to support agreement of remedial actions. An audit report documenting the findings will contain the necessary advice and recommendations to address any shortfalls or issues of concern.

5.7. H&S Inspections

The H&S team will conduct adhoc inspections of locations or activities to ensure Trust implementation of this policy is applied. From this if areas of concern are noted then a formal audit or improvement plan will be conducted.

Implementation arrangements

6.1 Plan for implementation
The Trust Board will be responsible for setting the strategic aims for health and safety matters within the Trust, and the Managing Director will ensure, through the Trust's line management arrangements, that those aims are translated into action plans for future implementation.

The Managing Director will delegate the responsibility to agree annual objectives related to health and safety management to the Director of Estates and Facilities and with

ensure all Executive Directors will appropriately cascade the relevant objectives throughout the area(s) of their responsibility.

Executive Directors will ensure that health and safety planning forms an integral part of their business planning process, in order to ensure that needs are identified, prioritised, and that appropriate resources are allocated.

6.2 Dissemination process
The Health and Safety 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.

6.3 Training and awareness
The Trust will ensure via its recruitment process and subsequent training programmes (both internal and external) that all members of staff have the appropriate level of competence to be able to safely carry out any task they may be required to undertake during their period of employment.

Senior Manager's must ensure that new members of staff attend the Trust's Corporate Induction and any local induction training sessions.

Local managers must ensure that all staff are competently trained in the safe use of any equipment that they may be tasked to use during the course of their employment. This will include any update training and any further training necessary as a result of any changes in the work place arising from the introduction of new procedures, introduction of new equipment etc.

Health and Safety training records for all staff will be held centrally by the Learning and Development Department. Electronic staff records should also include evidence of competence.

6. Monitoring and compliance
The Health and Safety Team will ensure that health and safety inspections are carried out throughout the Trust to support active monitoring and to assist in promoting a positive health and safety culture. Any significant findings will be escalated to the Director of Estate and Facilities for support / action and reported to the H&S committee. The involvement of health and safety representatives in this process will be positively encouraged by including staff-side audit reports as regular items on the agenda for the H&S Committee.

Individual objectives, which in many cases will include health and safety responsibilities, will be set and monitored through the Staff Development Review process.

Monitoring of injuries, ill health and other "loss events" will take place as a necessary to complement active monitoring. This monitoring process will involve both managers and safety representatives. The investigation of such accidents/losses, together with analysis of incidence, will be used as a tool to identify causation and reduce future incidence.

The Director of Estates and Facilities will, with support from the Head of Health & Safety, ensure that such re-active monitoring is undertaken on a Trust-wide basis. Audit Reports and Inspection Reports will be submitted to the appropriate Director/Senior Manager who will report in summary on the results to the Health and Safety Committee and where any high risk issues are identified to Executive Risk Management.

The Health & Safety Team will carry out a program of Health and Safety Audits and submit reports to the Health & Safety Committee. Significant findings will be shared to identify if there are wider H&S implications that need to be addressed.

On the basis of audit reports and assessments, the Trust Health and Safety Committee will make appropriate recommendations for policy/procedure review, through the Trust Management Board to the Board. Changes to this document will be recorded and monitored in accordance with the Policy for Policies.

7. Policy review

The Policy will be reviewed by the Trust Health and Safety Committee two years from the date of approval, unless any statutory or national guidance is introduced in the intervening period that requires revision of the document before the planned review.

8. References

Health and Safety at Work Act 1974	
Management of Health and Safety at Work Regulations 1999	
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013	
Health and Safety (First Aid) Regulations 1981	
Safety Representatives and Safety Committees Regulations 1977	
Health and Safety (Consultation with Employees) Regulations 1996	
Risk Management Strategy	WAHT-CG-007
Health & Safety Strategy (Objectives)	WAHT-CG-808
Risk Assessment Handbook	WAHT-CG-007a
Incident Reporting Policy	WAHT-CG-008
Root Cause Analysis Training Pack	
COSHH Policy	WAHT-CG-269
Display Screen Equipment Policy	WAHT-CG-085
Fire Safety Strategy and Policy	WAHT-CG-483
Violence Prevention Reduce and the Management of Violence and Aggression	WAHT-CG-006
Manual Handling Policy	WAHT-CG-026
First Aid Policy	WAHT-CG-268
Family Leave Policy (incorporating Expectant and New Mothers at Work)	
Security Policy	WAHT-CG-034
Lockdown Policy	
Management of Work Related Stress	
Records Management Policy	
Joint Emergency Response Policies/Procedures	
Guidelines for Reducing and Managing Patient Falls	
Procurement Strategy / Procurement Service Level Agreements	

9. Background

10.1 Equality Requirements

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

10.2 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.

10.3 Consultation Process
The following were consulted in the production of the original policy:

- Members of the Health and Safety Committee
- H&S Policy Working Group
- Joint Negotiating Consultative Committee
- Infection Control Team
- Occupational Health
- Human Resources
- Executive Team

10.4 Approval Process
The Health and safety committee will receive this policy for final approval.

Appendix 1

H&S Risk Assessment Template

This blank template is for use when conducting risk assessments with multiple health and safety hazards. For Annual Work place risk assessments refer to the XX Use the Trust Risk scoring matrix when evaluating the risk

Title of Risk Assessment:	Location:	RISK				RESIDUAL RISK		
SIGNIFICANT HAZARDS	CURRENT/BASIC RISK CONTROL MEASURES	Likelihood	Severity	Risk (L x S)	ADDITIONAL/NEW RISK CONTROL MEASURES	Likelihood	Severity	Risk (L x S)

Assessor:	Name:		Job title			Date:
Review History:	Details of change(s					

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Appendix 2 H&S Audit Template

Site:	Dept/Ward:
Department/Ward Manager:	Division:
Inspector:	Date of Inspection:

YES: 2pts   No: 0pt   N/A-2pts

Please check all the following (where not applicable enter N/A	All OK? Yes/No/NA	COMMENTS
WELFARE		
1. Do all staff have appropriate access to proper safe and hygienic facilities to make drinks, store and consume their food?		
2.Do staff have a place to take their rest breaks without unnecessary disturbance?		
3. Is ventilation in the area adequate?		
4.Is temperature adequate?		
5. Do staff have suitable facilities available for securely storing outside clothing and personal valuables during their shift?		
FIRE/PPE etc		
1. Are notices (Safety and Fire) in place and in good repair?		
2.Are fire alarm glass in place and unbroken.		
3. Check condition, placement and service dates of all fire extinguishers.		
4. Does the kitchen have a fire blanket?		

5. First aid kit and eye wash bottles (adequate stock and in date).		
6. Do staff know where the fire assembly point is?		
7.Are Personal Emergency Evacuation plans in place for staff who are unable to evacuate unaided?		
HOUSEKEEPING		
1. All passageways and stairways clear of obstructions.		
2. Fire exits free from obstruction and clearly marked.		
3. Are floors clean and in good repair?		
4. Check rubbish is being disposed of correctly.		
5. Check lighting is working and suitable for area.		
6. Check all areas are free from trip hazards, loose cables etc.		
7. Check condition of any steps provided and that service tag is legible and in date.		
MACHINERY AND EQUIPMENT		
1. Check any furniture is in good order and serviceable, remove if damaged.		
2. Check all other office equipment are in date with PAT		
3. Check all extension leads are in good repair		

4. Check any equipment safety or warning notices are in place.		
MATERIALS		
1. Check all materials are correctly and safely stored in a COSHH cupboard and adequately marked up.		
2. Check for any specific actions recommended by the data sheets.		
3. Check for any adverse Environmental issues (E.g. incorrect waste segregation).		
4.Does the department have appropriate storage for new and used medical gas cylinders?		
5.Has the risk been properly assessed?		
STRESS		
1.Is there a department stress management risk assessment		
2. Does the risk assessment identify and manage the associated risks?		
SECURITY MANAGEMENT/LONE WORKING		
1.Is there a departmental risk assessment on violence and aggression?		
2.Does the department have a risk assessment for security such as locking and securing department, access controls etc.		
3.Are staff aware of the correct procedure to follow when patients are reported to be missing?		
4. Does the department have robust process for safeguarding patient property?		
5.Are there staff at risk from lone working?		
DSE		
1. Have all DSE users have been identified?		
2. Have their workstations been assessed?		

3. Can evidence be produced to support that equipment, furniture and the working environment has been provided or adjusted in accordance with the assessments?		
4. Is there adequate leg room underneath work stations to prevent cramping?		
COMPETENCE		
1.Has the department a trained Health and Safety Link Person who has completed the one day H&S training and or manager who has completed the IOSH managing safely course?		
2.Is there a trained fire warden?		
3. Is there a trained COSHH assessor?		
4. is there a trained First Aider?		
5. Is there a manual handling link trainer/assessor (Patient Manual Handling)?		
INCIDENT REPORTING		
1.Do staff know how to report incidents?		
2. Are there outstanding datix incidents which have not been reviewed and closed		
DOCUMENTATION		
1.Do staff know how and where to find Trust Health and Safety Policies and other related SOPs?		
2.Is there a local Health and Safety folder? Do staff know how to find it?		
3. Has the department completed the generic Health and Safety workplace risk assessment and do staff know how to access them?		
4. Are there department specific risk assessments for high risk manual handling tasks?		

ACTION MATRIX

	Address Immediately
	Action within 7 days
	Action Complete
	Ongoing

PERFORMANCE SCORING MATRIX

80-100	G	Good
55-79	A	Requires Improvement
54-30	R	Poor
0-29	B	Very Poor

Summary Note:

Inspector Signature:	Date:
HS Department Signature / Date Checked:	

Supporting Document 1 - Equality Impact Assessment Tool Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form
Please read EIA guidelines when completing this form

<u>Section 1 - Name of Organisation</u> (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**

Details of individuals completing this assessment	**Name**	**Job title**	**e-mail contact**
	Julie Noble	**H&S Manager**	**Julie.noble13@nhs.net**
	Samantha Reid	**H&S Officer**	**Samantha.reid3@nhs.net**
Date assessment completed	**25ᵗʰ April 2024.**		

<u>Section 2</u>

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	**Title: Health and Safety Policy**
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?	❏√ Service User ❏√ Patient ❏√ Carers ❏√ Visitors ❏√ Staff ❏ Communities ❏ Other _____ ❏
Is this:	❏ √ Review of an existing activity ❏ New activity ❏ Planning to withdraw or reduce a service, activity or presence?
What information and evidence have you reviewed to help inform this assessment? (Please name sources, eg demographic information for patients / services / staff groups affected, complaints etc.	A review of applicable Worcestershire Royal Acute Hospitals NHS Trust policies, HSE website and UK applicable regulations has been conducted.

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 <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
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.)	√			
Health Inequalities (any preventable, unfair & unjust differences in health status	√			

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
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	

Date signed	25th September 2024
Comments:	
Signature of person the Leader Person for this activity	Julie Noble
Date signed	17/07/2024
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.