

Slips, Trips and Falls Policy for Staff, Visitors and Contractors

Department / Service:	Health & Safety
Originator:	Head of Health & Safety and Fire Safety
Accountable Director:	Director of Estates and Facilities
Approved by:	Health and Safety Committee JNCC
Date of Approval:	15 th May 2025
Review Date:	15 th May 2028
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 areas
Target staff categories	All

Purpose of this document:

The purpose of this policy is to provide information and guidance on the management of slip, trip and fall risks within Worcestershire Acute Hospitals NHS Trust. This policy supports the Health and Safety Policy and the Work at Height Policy by detailing particular arrangements for the management of factors leading to slips, trips and falls. Slips and trips resulting in falls are a common cause of injuries to staff, visitors and contractors working or visiting within the Trust. The risk of these types of accidents occurring can be effectively reduced through planning and proactive management together with good housekeeping.

Key amendments to this Document:

Date	Amendment	By:
Apr 13	Biennial review with minor changes made	H&S Manager
Jun 15	Document extended until the 1 st August	Rab McEwan
Aug 15	Document extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC
Oct 16	Further extension as per TMC paper approved on 22 nd July 2015	TMC
Aug 17	Biennial review with only minor changes	H&S Manager
Jan 20	Document extended for 12 months whilst in the process of appointing a new Health and Safety Manager.	Samantha Reid

February 2021	Document extended as per Trust agreement 11.02.2021.	Trust Agreement
March 2022	Policy review conducted; minor regulation inaccuracies corrected	Julie Noble
Dec 2024	Policy review, minor changes; change to training for falls is for those essential to role.	Eno Udoh

Contents:

1. Introduction
2. Scope of this document
3. Responsibility and Duties
4. Managing the risks of slips, trips & falls
5. Implementation
6. Training and awareness
7. Monitoring and compliance
8. Policy review
9. References
10. Consultation
11. Approval process

Plus Supporting Documents for;

Checklist for the Review and Approval of Key Document
Equality and Financial assessments

1. Introduction

Slips and trips resulting in falls are the most common causes of major injuries in all workplaces; the HSE reported in 2020/21 it was the biggest cause of workplace / Non-fatal injuries to employee's injuries.

The Trust has a responsibility for the health and safety of all its employees, visitors and others who may be affected by workplace hazards. The Management of Health and Safety at Work Regulations 1999 require the Trust to assess risks, including slip and trip risks, and where necessary take action to safeguard health and safety. The Workplace (Health, Safety and Welfare) Regulations 1992 refer specifically to the need to ensure that floor surfaces are suitable for purpose and kept free from hazard or obstruction. Particular attention should be paid to holes and uneven areas, snow and ice on external walkways, drainage systems where appropriate, arrangements for dealing with spillages and entrances to all buildings in the Trust.

2. Scope of this document

This policy is relevant for all staff and contractors working within the Worcestershire Acute Hospitals NHS Trust and individuals visiting the hospital sites.

3. Responsibility and Duties

The responsibilities and duties applying to all managers and staff are detailed in the Trust's **Health & Safety Policy**. Please access the Trust's Health & Safety page on the intranet site and refer to any of the supporting documents for details.

4. Managing the risks of slips, trips & falls

All identified slips, trips and falls hazards that could potentially result in significant risk shall be subject to the risk assessment process in accordance with the Management of Health and Safety at Work Regulations 1999 and in line with the Trust's **Risk Assessment Procedure**. Falls from heights are a particularly significant risk. The process for assessing risks associated with falls from heights is detailed in the Trust's **Working at Height Policy**. The control measures required will be considered as part of the risk assessment process. The Health and Safety Manager must be informed via Datix of any identified hazards and risks associated with falls from height.

Local Managers will

- **Assess** each situation in accordance with the Risk Assessment Policy i.e. identify what factors cause slips, trips and falls, and match practical control measures to these factors.
- **Organise** so that staff know what to do; establish local systems for inspection, maintenance, training and consultation with safety representatives. Evidence (local plans) will be required to demonstrate that these processes are in place.
- **Control** the risks by taking the measures identified from the risk assessment process.
- **Record** all incidents involving slips, trips and falls and ensure appropriate injuries are reported to the HSE as required by the Reporting of Injuries,

Diseases and Dangerous Occurrences Regulations 2013 (Refer to **Incident Reporting Policy**)

- **Monitor** achievements to ensure progress is being made e.g. from accident information, inspections, audits and reports from employees. Local managers will be expected to develop action plans to address any local risks but where this is not achievable details of the assessment and necessary action plan will be presented to the next meeting of the Trust's H&S Committees.
- **Review** the local plans at yearly intervals.

Please note that all common access areas i.e. pedestrian access routes and car park areas will be proactively monitored by the respective Estates and Facilities Teams so that any slip and trip hazards are identified and corrective action taken in a timely fashion.

5. Implementation

This policy will be included on the Trust's intranet site for electronic access purposes. The Notice board will be used to inform all staff of the publication of the document and managers will ensure implementation at a local level.

6. Training and awareness

Staff will be made aware of this policy and the implications of managing slips, trips and falls during induction. All staff who have been identified as requiring Falls training as part of the essential to role matrix will be required to complete the eLearning via ESR.

7. Monitoring and compliance

Section	Key Control	Evidence of compliance	Frequency	By whom	Reported to	Frequency
Page 2, Section 4	Slip & trip hazards have been risk assessed	H&S Audit to check local records of assessments and that staff have been informed	Annually	Head of H&S and Fire Safety Manager	H&S Committees	Annually
Page 2, Section 4	Environmental audits of all wards areas	Records of ward audits	Biannually	Matrons	TIPCC	Biannually
Page 2, Section 4	Local plan of action completed where there are outstanding risks	Records of action plans	As required	Local Manager	H&S Committees	Quarterly

8. Policy review

This policy will be reviewed by the Trust's Health and Safety Committees every two years.

9.

References and key related documents:

Health and Safety Policy

Risk Assessment Policy

Incident Reporting Policy

Working at Height Policy

Health and Safety at Work, etc Act 1974

Management of Health and Safety at Work Regulations 1999

Working at Height Regulations 2005

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

Slips & trips: Guidance for employers on identifying hazards and controlling risks HSG 155

Slips and trips in the health service. HSE HSIS2

Preventing slips and trips at work HSE INDG225

10. Consultation

This policy received full consultation by members of the Trust's Health and Safety Committee.

11. Approval process

This policy was approved by the Trust's JNCC.



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, Head of H&S and Fire Safety

Details of individuals completing this assessment

Name	Job title	e-mail contact
Eno Udoh	Deputy H&S Manager	eno.udoh2@nhs.net

Date assessment completed

22/02/2024

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: Slip Trip and Falls Policy for Staff, Visitors and Contractors			
What is the aim, purpose and/or intended outcomes of this Activity?	To describe the provision, implementation and prevention of Slips, trips or falls for the Trust to ensure legal compliance.			
Who will be affected by the development & implementation of this activity?	<input checked="" type="checkbox"/> Service User	<input checked="" type="checkbox"/> Staff		
	<input checked="" type="checkbox"/> Patient	<input type="checkbox"/> Communities		
	<input checked="" type="checkbox"/> Carers	<input type="checkbox"/> Other		
	<input checked="" type="checkbox"/> Visitors	<input type="checkbox"/>		

Trust Policy

Is this:	<input checked="" 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 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 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	√			

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
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 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

Trust Policy

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	22/02/2024
Comments:	
Signature of person the Leader Person for this activity	 Julie Noble
Date signed	22/02/2024
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	Possibly
2.	Does the implementation of this document require additional revenue	Possibly
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	Possibly

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 Director of Finance before progressing to the relevant committee for approval.