

Electrical Safety Policy

Department / Service:	Estates & Facilities
Originator:	Head of Estates & Technical Services
Accountable Director:	Director of Estates and Facilities
Approved by:	Health and Safety Committee
Date of approval:	10 th July 2025
Reviewed:	
Annual Review Due:	10 th July 2028
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust
Target Departments	Trust Senior Management, Estates, ICT, Technical Services, Nursing, PFI SPC, PFI hard services contractor, PFI Technical Services
Target staff categories	Managers, Technicians, Contractors

Policy Overview:

This Policy outlines how the Trust manages, maintains and operates its fixed, portable and semi-portable electrical systems and equipment including back-up arrangements such as Stand-By Generator Supplies (SBGS), Uninterruptible Power Supplies (UPS) and Isolated Power Supplies (IPS).

Key amendments to this document

Date	Amendment	Approved
04 June 2025	Reviewed (add HTM section on Skilled Persons) v3.0	RSC

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1. Introduction

Electricity is potentially highly hazardous, so it is vital that people in the proximity of electrical services, those maintaining them and those using them are kept safe through the adoption of the appropriate installation standards, correct maintenance and use of a safe system of work.

In addition, many life critical systems are dependent upon an electrical supply, Interruptions to electrical power supplies can seriously disrupt the delivery of healthcare services with serious consequences for patients, up to and including fatalities. It is therefore very important that any planned outages are carefully managed and agreed before work is authorised and the risks of unplanned outages are understood and managed in accordance with HTM and other best practice.

Health Technical Memorandums 06-01, 06-02, 06-03, provide Electrical safety guidance and a Safe System of Work for both Low and High voltage systems. The Health and Safety at Work etc Act 1974, Management of Health and Safety at Work Regulations 1999 and the Electricity at Work Regulations 1989 all place a duty on the Trust to publish, issue and implement an Electrical Safety Policy which outlines the governance and procedures required to achieve the objectives set out in these legislative documents.

The Trust accepts that safe management and operation of electrical systems requires a high level of professional competence and commitment, supported by adequate resources and technical expertise. To achieve this, the Trust will appoint an Authorising Engineer (AE), to provide guidance advice and support on the Trust's electrical systems who will appoint suitable and sufficient Authorised Persons (AP's) to manage the Trust's electrical systems. Trust AP's will appoint sufficient Competent Persons (CP's) to carry out works on the Trust's electrical systems.

The Trust will ensure that key personnel receive the appropriate electrical training for their particular roles and activities and is committed to the safe operation of all the electrical systems for which it has a responsibility, by implementing the requirements of the HTM06-01 Electrical Services Supply & Distribution, HTM 06-02 Electrical safety guidance for low voltage systems, HTM 06-03 Electrical safety guidance for high voltage systems and the IET Wiring Regulations (BS7671). Any variations to the guidelines to the above HTM's shall be approved in writing by the Authorising Engineer (AE) and documented as per HTM.

The Trust also regards electrical safety at work as being the responsibility of every employee and other persons within the sphere of the Trusts duty to manage the risks involved with using electrical appliances and continues to promote and develop a pro-active safety regime by providing safe workplace procedures, up-to-date drawings, rigorous maintenance routines, training and instruction for all Trust personnel and contractors involved with electrical systems and related equipment. These procedures will be regularly reviewed, to identify hazards and eliminate risks and to ensure compliance with current and future statutory legislation so far as is reasonably practicable.

The effectiveness of an electrical safety policy and procedures depends to a large extent on the full co-operation and active participation of all employees, to implement safe working

practices and to report any perceived risk of danger arising from the use of electrical systems and equipment.

2. Scope

This Policy is intended for use by all staff using or maintaining electrical systems in a Hospital under Trust control. A list of key personnel can be found in Appendix 2.

It applies to all fixed wiring systems, plant and semi-portable electrical and portable appliances which may be used or installed on site and fall under the responsibility of the Trust.

Incoming High Voltage (HV) supplies are the responsibility of the District Network Operator (DNO), so are not included in this policy; however, it is the Trusts responsibility to liaise with the DNO on any electrical supply matters.

Items specifically excluded from the scope of this document include:

- All IT hardware including IT equipment housed in IT frames and cabinets in Communication and Data rooms;
- Any Specialist electrical equipment (MRI, X ray equipment etc) that are hard wired into the buildings infrastructure.
- The responsibility for specialist medical equipment lies with Technical Services at the Alexandra (AHR) and Kidderminster (KTC) sites and with Siemens at the Worcestershire Royal Hospital (WRH) site, or the equipment manufacturer or Maintenance Company.

Electrical safety responsibility for the Trust Estate resides with the Estates Department. It is the Trust Estates policy that states that before any qualifying work on the HV/LV Electrical systems can commence; a permit-to-work form signed by an Authorised Person must be completed (where appropriate, as required by HTM 06-02 electrical safety handbook). This electrical safety policy will apply wherever any of Trust Estates employees are working and to all electrical equipment under the control of Trust Estates wherever it is located.

3. Definitions

Duty Holder	Chief Executive. Worcestershire Acute Hospitals NHS Trust
Designated Person	Person who is appointed by the Duty Holder with suitable and sufficient knowledge of Hospital Electrical Systems, who will make Trust senior management aware of any major risks presented by the hospital
High Voltage (HV)	High Voltage - Any voltage difference between conductors that is higher than 1000 VAC or 1500 V ripple-free DC, or any voltage difference between a conductor and Earth that is higher than 600 VAC or 900 V ripple-free DC

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Low Voltage (LV)	Low Voltage - Low voltage is, 'a voltage exceeding extra-low voltage, but not exceeding 1,000 V ac or 1,500 V dc between conductors, or 600 V ac or 900 V dc between conductors and earth
Authorising Engineer (AE) (Electrical)	Person who has completed an accepted Authorising Engineer course, is familiar with the site installation and the requirements of HTM 06 -01/02/03 and is appointed by the Designated Person to define the requirements of the site, appoint sufficient APs to manage the system and audit the site as required.
Authorised Person (AP)	Person who has completed an approved HV/LV AP course, is familiar with the site installation and has been appointed by the AE as an AP HV/LV
Competent Person (CP)	Person who is deemed competent by the AP, has relevant training and experience, is familiar with the site installation and has been appointed by the AP(HV/LV).
Written Scheme	Schedule of HV/LV equipment compiled by a suitably qualified person detailing when elements of the HV/LV system are inspected / examined / tested.
Safe System of Work (SSOW)	Safety rules as described in HTM06-01, 06-02 and 06-03 and any further rules approved by the AE (HV/LV) which define how work will be controlled and carried out on Site Electrical Systems to manage danger and ensure safety and continuity of the electrical systems
Permit to Work	Document issued by AP and accepted by CP, which clearly describes how danger is controlled and ensures system is made safe before any work on the electrical is started
Enforcing Authority	Health and Safety Executive
Method Statement	Details of how the work is to be done safely.

4. Responsibilities and Duties

Chief Executive (Managing Director in a Foundation Group Trust)

The Chief Executive (Managing Director) has the overall legal Duty for all matters relating to the management of Trust Electrical Systems. This Duty includes ensuring that Electrical Systems are managed through adoption of this Policy and that Procedures are developed, implemented and appropriately resourced to safeguard the interests of the Trust and ensure the safety of our patients, staff and visitors.

The Chief Executive (Managing Director) will ensure that financial resources are made available to support this Policy based upon an assessment of priorities.

The Responsible Person (RP)

The RP is responsible for ensuring that this policy is implemented across the Trust and by partner organisations.

For the purposes of the policy the Director of Estates and Facilities will be the “Responsible Person” (RP) and will oversee the implementation of this policy on behalf of the Duty Holder (Chief Executive/Managing Director) for the Trust.

Authorising Engineer (AE)

The AE will be suitably qualified and experienced in line with the requirements HTM06-01, 06-02 and 06-03 and will be appointed in writing, by the Trust Chief Executive or Nominated Deputy.

AE Duties

- Recommend to the Trust Director of Estates and Facilities and the Regional Operations Director of the PFI Service Provider those persons who, through individual assessment, are suitable for appointment as an Authorised Persons (HV/LV).
- Ensure that all Authorised Persons (HV/LV) have satisfactorily completed an appropriate training course;
- Ensure that all Authorised Persons (HV/LV) are initially assessed as to their fitness to be appointed and are re-assessed every three years following attendance of a suitable refresher or other training course prior to their re-assessment.
- Monitor the implementation of the Operational Policy and Procedures through annual compliance audit.
- Issue electrical safety notices to site APs
- Attend Electrical Safety group as required
- Investigate dangerous occurrences and incidents
- The Trust will appoint an AE for AHR and KTC sites
WRH PFI will have a separate AE appointed by WHSPC plc

Authorised Persons (AP)

APs (HV/LV) are suitably qualified experienced persons who will be appointed in writing by the AE, in accordance with the procedure outlined above.

A minimum of 2 operational APs (HV/LV) are required for EACH Hospital site plus 1 additional AP to provide cover during periods of leave and sickness, this can be provided via a Control, Operation and Management Agreement (COMA) arrangement.

The APs (HV/LV) will assume effective responsibility for the day-to-day management, maintenance and safety of the electrical systems on all sites.

Duties and responsibilities of the Authorised Person (HV/LV) are:

- Ensure that the Electrical systems are operated safely and efficiently in accordance with the statutory requirements and guidelines listed in HTM 06-01
- Be responsible for the Permit to Work System, including the issue of Permits to Competent Persons (HV/LV) for all qualifying work;
- Appoint workplace CPs to work on the Trusts electrical systems
- Be responsible for the supervision of the work carried out by Competent Persons under a Permit to work and for the standard of that work
- Ensure that the Trust has a schedule of equipment and Service Agreements and for all maintainable equipment
- Liaise closely with Designated Medical / Nursing Personnel, and others, who need to be informed of any interruption or testing of the electrical systems.
- Provide technical advice to those responsible for the purchase of any medical equipment which will be connected to the site electrical infrastructure, in order to avoid insufficient capacity or overloading of the site electrical infrastructure
- Organise such training of contractors' and staff as is required, for the efficient and safe operation of the electrical systems.

Competent Person (CP)

A person who possesses, as appropriate to the nature of the work to be undertaken, adequate education, training and practical skills, and who is able to prevent danger or, where appropriate, injury, and has been formally appointed in writing by an Authorised Person (LV), and who accepts a safety document for defined work.

Duties and responsibilities of the Competent Person (HV/LV) are:

- Carry out work on the electrical system in accordance with this Policy;
- Carry out repairs, alterations or extension work, as directed by an Authorised Person (HV/LV) in accordance with the Permit to Work System and HTM 06-02/03;
- Perform all necessary engineering tests appropriate to all work carried out and inform an Authorised Person (HV/LV) of all test results;

Skilled Person (SP)

A person who possesses, as appropriate to the electrical work to be undertaken, adequate education, training and practical skills, and who is able to prevent danger, or where appropriate, injury, and has been assessed to be competent by the Authorised Person (LV) for a **specific** electrical task and is aware of specific requirements from HTM06-02 guidance

with regard to the task but has not been formally appointed in writing as a Competent Person (LV).

Duties and responsibilities of the Skilled Person (SP) are:

- Carry out work on the electrical system in accordance with this Policy;
- Carry out specific electrical tasks as instructed by the Duty Authorised Person (LV) and at the discretion of the AP, in accordance with a safety document issued under HTM 06-02;
- Be appointed as a CP (LV) if requirements are extended to be performed on a regular basis necessitating the issue of multiple safety documents;

Accompanying Safety Person (ASP)

An Accompanying Safety Person is a person not directly involved in the work or test who has received training in emergency first-aid for electric shock and who has adequate knowledge, experience and the ability to avoid danger, keep watch, prevent interruption, apply first-aid and summon help. The person should be familiar with the system or installation being worked on or tested and should have been instructed on the action to be taken to safely rescue a person in the event of an accident

Duties and responsibilities of the Accompanying Safety Person (ASP) are:

- Be current and conversant with their duties regarding first-aid and electric shock;
- Summon help when required;
- Be familiar with the system or installation being worked on or tested;
- Ensure instructed on actions to be taken to safely rescue a person in the event of an accident;

Designated Medical / Nursing Personnel

The Chief Operating Officer (or nominated person) will be consulted on any matters affecting the safety of Electrical systems with the Authorised Person. The Designated Medical Personnel is the Senior Consultant with responsibility for the area affected.

The Designated Medical / Nursing Personnel will give permission for a planned interruption to the supply by signing the permission to disconnect form after discussion with all affected parties.

In the event of a planned interruption involving more than one department, including theatres e.g. for a major shutdown, the Theatre Matron / Directorate Manager, (or a nominated deputy) will be the Designated Medical Personnel

Chief Operating Officer (COO)

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The COO or their deputy has responsibility for Clinical Risk across the Trust. Will be consulted about operations that affect more than one area.

The COO or their deputy will identify the relevant nursing/medical personnel that need to be involved in any plans.

Site Co-ordinator

The site co-ordinator is the Trust Duty Manager.

Will co-ordinate clinical requirements across the site out of normal hours and instigate any necessary escalation.

Emergency Planning Preparedness and Response Manager (EPRR)

The hospital focal point Manager responsible for Business Continuity matters in the event of service disruptions that may affect the core hospital function and/or the patient/staff and visitor “journey” by liaising with key stakeholders and interfacing with senior trust management during any untoward event or incident and escalating as necessary. (see also para 5.2).

Training

AE – The AE will be an Incorporated / Chartered Engineer and will have completed / passed an Industry / Trust recognised HV / LV AP and AE course, this training will be renewed three yearly

AP – Will be an experienced engineer and will have completed / passed an Industry / Trust recognised HV / LV AP Course, this training will be renewed three yearly or on the recommendation of the AE.

CP – Will be appropriately experienced and qualified, will have preferably completed / passed an Industry / Trust recognised electrical CP course focussing on HTM 06-02, this training to be renewed every three years or on the recommendation of the AP (LV).

SP – Will be appropriately experienced and trade qualified, will have preferably completed / passed an Industry / Trust recognised electrical course focussing on HTM 06-02, this training is to be renewed every three years or on the recommendation of the AP (LV).

ASP – Will be appropriately experienced and trained in emergency first-aid for electric shock and have a working knowledge of HTM 06-02, training will be renewed three yearly or on the recommendation of the AP (LV).

Designated Medical / Nursing Personnel – Will be suitably qualified medical Personnel, who are aware of patient requirements and any attendant risks in the event of a loss of power and will understand the implications of any proposed power loss and will sign a permission to disconnect when appropriate. Having discussed the matter with the appropriate people

Electrical Safety Group (ESG)

The Electrical Safety Group is responsible for overseeing all policies relating to Electrical Systems which fall under the responsibility of Trust Estates. It shall include appropriate staff members from Estates / Technical Services, Health & Safety, **IT and Digital**, Clinical Governance / Risk Management and Nursing.

Other staff members will be co-opted as and when required. The Group will be chaired by the Deputy Director of Estates and Facilities or delegated representative.

The ESG will meet Quarterly and reports to the Trust Health & Safety and Non-Clinical Risk Group.

5. Policy Detail

5.1 Planning Work on Electrical Equipment

Work on electrical equipment must be planned both in advance and while the work progresses.

When planning work, the following factors will be considered:

- the work to be done;
- the hazards of the system or equipment to be worked on;
- Any disruption or risk from loss of supply
- the people doing the work and the level of supervision necessary;
- the precautions to be taken
- Safe systems of work to be employed.

5.2 Notification

Any work on electrical equipment that may have an effect on clinical or critical systems must be Communicated to and be agreed by the EPPR lead / COO / the persons / departments affected in advance of the work, in reasonable time. EPPR lead / COO will decide if an SBAR assessment needs to be carried out, Weekend planning meeting and ICT Change review board will also be informed and approval will be granted in writing to the AP managing the work before any work starts, by EPPR and Change Review Board.

5.3 Carrying out Electrical Work

ANY work on or near **live** conductors will **only** be permitted in very exceptional and well controlled circumstances and only when formally risk assessed and authorised by the Authorised Person through a live working certificate. In all other circumstances live working shall be strictly forbidden.

All work on Trust Electrical systems will be carried out in strict adherence to HTM 06-02 for Low Voltage Installations and HTM 06-03 for High Voltage Installations.

Before an electrical system is taken back into use the AP will have received the appropriate test certification and be satisfied that the system is safe to go back into service.

5.4 Electrical Testing

Fixed Electrical Testing and surveys will be carried out for all Trust Premises not less than once every five years in line with the Electricity at Work Regulations and BS7671:2008 (2011) Requirements for Electrical Installations IEE wiring regulations BS7671:2008.

Where no permission can be gained to isolate a critical supply for testing, the AP will carry out the live portion of the test, carry out visual inspection and if possible infrared testing to assure themselves that the circuit poses no immediate danger. The AP will then write to the Directorate Manager, The COO, The Director of Estates and Facilities and The Authorising Engineer and inform them that this critical electrical system is non-compliant.

5.5 Portable Appliances

Trust staff buying portable equipment for use within the Trust must ensure it is procured via Estates, IPROC or Trust Credit Card and is suitable for the use and environment intended, it must be capable of being cleaned and be provided with appropriate and clear instructions for its safe maintenance and use (e.g. Fans, Microwaves, Toasters, Extension Leads and Power Adapters etc).

Note: Under **No** circumstances are any disused or spare items of electrical equipment including but not limited to the above examples, to be brought on to our Trust sites from your home as their use may breach the substantive requirements of the Provision and Use of Work Equipment Regulations (PUWER).

If in doubt staff should consult the Estates Department when buying any non-medical equipment.

All equipment being purchased should conform to an appropriate respective British Standard and carry a BEAB Approved Mark which is a European Safety Mark used by leading electrical manufacturers to demonstrate conformity with the European Low Voltage Directive (LVD) safety legislation.

Where this is not possible and there is a need to buy equipment that has been manufactured outside of the UK, the purchaser must ensure the equipment is at least as safe as equipment constructed to the equivalent British Standard.

Where the equipment is energy rated then the most energy efficient model option should be purchased.

Trust users of portable electrical equipment are responsible for visually checking the equipment they use before connecting it to the electrical supply. Any damage that is noted should be reported to the Estates department and the affected equipment should not be used.

For the avoidance of doubt, this requirement also extends to and includes carrying out visual checks of all Work Equipment provided by the Trust IT Department. All IT/Digital equipment provided for dynamic working and/or use at home (e.g. Laptops, Monitors, Docking Stations, Printers, especially associated Power Blocks, Cables and Plugs etc) is to be inspected before and after use. All faulty IT equipment **MUST** be reported to the IT Tech Bar for further investigation before use.

Where relevant, portable appliances will be inspected or tested by a competent person, at regular intervals in line with current recommendations.

If inspection identifies an imminent risk of serious personal injury to the user or others, the competent person will prevent further use of the appliance.

Further guidance can be found in Estates guidance note for PAT testing

Note:

Use of personal electronic appliances **is** permitted. Staff and patients **may** use their own personal devices but this **must** be limited to communication devices (e.g. Portable Tablet computers and mobile phones **ONLY**). All personal Items, chargers and charging cables must be in good repair. If not, then persons will be requested to not use the devices whilst on Trust property.

5.6 Electrical Power Supplies

WRH – Most power at WRH is backed-up by stand-by generators

KTC and AHR have Essential Power (backed by Generator) and Non-Essential Power (not backed by Generator)

It is important that staff understand the difference between the two arrangements and in particular what to expect in the event of an unplanned power failure. Staff must have local plans in place to deal with any eventualities arising from loss of non-essential power.

- **Non-Essential Supplies - Unmarked sockets and switches;**
In the event of a power failure these will go off and remain off until the mains are restored – which could be several hours in a major crisis.
- **Essential Supplies - Sockets and switches identified by red switches at AHR / KTC;**
These supplies are maintained by a back-up generator. In the event of a power failure these supplies will also go off – but should be restored within a short period once the generator starts. It is important that any equipment connected to these supplies can accommodate this short break. Equipment that cannot tolerate even a short break must be protected by an “uninterruptible power supply”, (UPS), which has a no break back up battery.

There is a risk that the back-up supply will fail, and departmental plans should also consider the action they would take in this situation. For critical medical device applications where any power interruption would present an unacceptable risk to the patient, a risk assessment should be carried by the users of the equipment and consideration given to the use of a medical grade Uninterruptible Power Supply (UPS). The cost of purchase and subsequent maintenance will be charged to the requestor.

Estates monitor the incoming power supplies but should anyone experience a power failure please contact the helpdesk immediately. For AHR / KTC ring 0 internal or 01527 503030 external / out of hours and ask for Estates / Estates on call manager

out of hours. For WRH ring ext. 33333 option 5 (internal) / 01905 760349 external / out of hours and ask for Equans / Equans on Call Manager.

The Estates Staff will attend site as soon as possible and co-ordinate activities locally at site level. If the power is going to be off for a significant length of time, the Estates Manager and / or local staff will be notified in order to instigate any Disaster Recovery or Business Continuity plans. Once power is restored the Estates Manager and / or local staff will be notified.

Never attempt to use faulty or damaged equipment, do not try and repair it. Remove faulty equipment from service and report the problem via the helpdesk. Never use electrical equipment in damp surroundings or where flammable vapours may be present unless you know it is suitable for that purpose.

• Access to Electrical Switchrooms

The electrical HV Sub-Stations and LV Switch rooms and distribution boards are located throughout the estate facilities in locked rooms. Non-Trust Competent Persons will be allowed, on demonstration of competence, to gain access to switch rooms by signing out relevant keys and access permits where necessary from Estates department.

Estates personnel will also have their own key(s) to gain access to any rooms containing electrical equipment.

These keys are to be signed for and released to competent and trained personnel only.

• Signage

Appropriate identification and safety warnings is displayed on Plant Room Doors and Electrical Equipment in accordance with current legislation, HTMs and best practice.

• Records of routine maintenance will be retained for inspection for the following equipment

- Portable appliance testing
- Fixed wiring inspections for Final Circuits
- Generator testing
- Earthing
- Lightning Protection
- Emergency Lighting
- UPS testing and maintenance
- HV systems

• The following procedures are listed and maintained in the operational procedures manual.

- Certificate of appointment issued to a Competent Person (HV), or – for the contractor's Competent Person (HV) – a register of Competent Persons (HV) including details and dates of training, issue dates and review dates of certificates;

- Operational restriction received;
- Inspection report and details of any remedial work undertaken in connection with an operational restriction;
- Cancelled operational restriction;
- Demarcation agreement with other organisations;
- Demarcation agreement with contractors;
- Any operational agreements with a DNO;
- Original copy of every approved and completed safety programme, including any completed and subsequently not used;
- Details of protective equipment, test equipment and portable earthing equipment kept within the establishment, including specifications, operators or users' instructions, maintenance instructions and, where appropriate, calibration records;
- Copies of audits carried out in accordance with this guidance.

5.7 Consultation, Assurance and Approval Process

5.7.1 Consultation Process

The Electrical Safety Policy will be approved by the H&S committee following consultation with the, Directorate Managers, Matrons, Estates Managers, Risk Manager, Emergency Planning Officer, Health and Safety Manager and the Chief Operating Officer (COO).

5.7.2 Quality Assurance Process

Following consultation with stakeholders and relevant consultative committees, this policy will be reviewed by TME to ensure it meets the standards for the production of procedural documents.

5.7.3 Approval Process

This policy, and any subsequent policy revisions will require the approval of Electrical Safety Committee,

6.0 Review and Revision Arrangements

The Electrical Safety Policy should be reviewed every three years by the Electrical Safety Group; the nominated chairperson shall convene the review meeting and be responsible for writing and distributing the minutes of the meeting.

The ESG shall report review findings to the Trust.

7.0 Dissemination and Implementation

7.1 Dissemination

This Policy will be disseminated to all persons named in the policy and made available on the Trust Estates intranet and controlled hard copies held with Trust Estates.

8.0 Document Control including Archiving Arrangements

8.1 Register/Library of Policies

This Policy will be controlled via the Trust document control process and be accessed via the Trust Intranet, accessible via the Estates pages and through the portal's search facility.

8.2 Archiving Arrangements

On review of this policy, archived copies of previous versions will be automatically held on the version history section of each policy document on the portal. It is the responsibility of the Publisher(s) to ensure that version history is maintained on portal.

8.3 Process for Retrieving Archived Policies

To retrieve a former version of this policy from the Portal, the publisher of this policy, identified on the front sheet, should be contacted.

9 Monitoring Compliance with and the Effectiveness of Policies

This policy will be monitored for compliance with the current legislation and guidance by the appointed Authorising Engineer at least annually.

10 Trust Estates Associated Documentation

- Local Procedures

11 External References Legislation

- Health and Safety at Work etc Act 1974;
- Health and Safety (safety signs and signals) Regulations 1996;
- Management of Health and Safety at Work Regulations 1999;
- Control of Substances Hazardous to Health Regulations 2002;
- Electricity at Work Regulations 1989; and
- Construction (Design & Management) Regulations 2007.

British Standards

- BS 5266 Emergency Lighting;
- BS 6346:1997 Electric cables;
- BS 7430:1998 Code of practice for earthing;
- BS EN81: Safety rules for the construction and installation of lifts;
- BSEN 60947:1996-2003 Specification of LV switchgear;
- BS 7671 IET Regulations; and
- BS 5839-1 Design, Installation, commissioning of fire detection & fire alarm systems.

Department of Health

- HTM 00: Policies & Principles;
- HTM 06-01: Electrical services supply & distribution;
- HTM 06-02: Electrical safety handbook;
- HTM 06-03: Authorised Person's logbook;
- HTM 06-01 Electrical safety guidance for high voltage systems;

12 Appendices

- Appendix 1 – Designated Personnel
- Appendix 2 - Equality Impact Assessment Tool

Appendix 1 - Designated Personnel

Title	Name	Role	Tel. No.
Deputy Director of Estates	Ray Cochrane	Designated Person	Via Switch
Head of Estates & Technical Services	Richard Wise	Compliance Manager	
Estates Officers	Mark Hannah KTC Ian Wise KTC Luke Wyre AHR	Operational Manager	
*Authorising Engineer	Malcolm Partridge (LV/HV)	Trust Authorising Engineer	
*Deputy Authorising Engineer	Nick Lane (LV/HV)	Trust Deputy Authorising Engineer	
*Authorising Engineer	Chris Govey (LV/HV)	PFI Equans Authorising Engineer	
*Authorised Person(s)	Chris Harrison (LV/HV) Luke Wyre (LV/HV) Richard Wise (LV/HV)	Trust Authorised Person(s)	
PFI – WRH *Authorised Person(s)	Mitchell Davies (LV/HV des) Nathan Yeates (LV/HV) Kevin Jenkins (LV) Central Power (HV COMA): David Jarrett (HV) Matt Bray (HV) Mark Jarrett (HV) Michael Cosgrove (HV) Karl Batchlor (HV)	PFI Equans Authorised Person(s)	
*Competent Person(s)	Trust Electricians (LV) Equans Electricians (LV)	Competent Person(s)	
Authorising Engineer (Fire)	Leviathan	AE (Fire)	
Fire Safety Advisers	Zenni Austin Nick Fowkes	Trust FSA	
Head of Health & Safety and Fire Safety	Julie Noble	Health and Safety lead	

* Person(s) nominated under the Permit to Work System

Appendix 2 - 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	Ray Cochrane DD E&F
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Details of individuals completing this assessment			
	Name	Job title	e-mail contact
	Ray Cochrane	DD E&F	raycochrane@nhs.net

**Date
assessment
completed** **04/06/2025**

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: Electrical Safety Policy			
What is the aim, purpose and/or intended outcomes of this Activity?	Statutory compliance management of a safe system of work accessed only by personnel with specialist expertise			
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"/>	_____
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.	Reviewed relevant legislation: Electricity at Work Regulations / H&S at Work Regulations; Approved Codes of Practice BS7671 HTM 06-01, 02, 03			
Summary of engagement or consultation undertaken	Trust Authorising Engineers (LV/HV);			

(e.g. who and how have you engaged with, or why do you believe this is not required)	Electrical Safety Group; Health and Safety Committee;
Summary of relevant findings	This policy has no adverse impact.

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		✓		

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
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.)		✓		This system is used by all groups, but the control and safety of it is managed by designated experts as required by legislation and best practice
Health Inequalities (any preventable, unfair & unjust differences in		✓		This system is used by all groups, but the control and safety of it is managed by designated experts as required by legislation and best practice

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 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
	N/A	.		
	N/A			
	N/A			
How will you monitor these actions?	N/A			
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)	When policy is reviewed			

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

Electrical Safety Policy		
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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	Ray Cochrane
Date signed	04/06/2025
Comments:	None
Signature of Lead Person for this activity	Ray Cochrane
Date signed	04/06/2025
Comments:	None



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.