Trust Policy

NHS University Hospitals Plymouth NHS Trust

Health and Safety Policy

Issue Date	Review Date	Version
November 2020	**November 2025**	**8**

Purpose

The Trust has a statutory requirement to provide a safe environment for all staff, patients and others on its premises

Who should read this document?

All trust staff and employers / individuals working on Trust premises should be conversant with the contents of this Policy

Key Messages

Every person has a responsibility for their own health and safety and that of others.

Trust core values are to put patients first, take ownership, respect others, and to be positive. In promoting these values, and with visible and active leadership by senior managers, the Trust will develop and maintain a culture supportive of health and safety management. The aim is to motivate and empower people to work safely.

The Health and Safety team and Specialist Advisers will promote the sharing of good practice and learning from experience and will act as an advisory service to assist the Trust in meeting its responsibilities.

In line with legislation it is a Trust requirement to undertake risk assessments and to control identified risk so far as is reasonably practicable.

Core accountabilities

Owner	Health and Safety Team
Review	Health and Safety Committee
Ratification	Director of Corporate Business
Dissemination (Raising Awareness)	Health and Safety Committee
Compliance	Director of Corporate Business

Links to other policies and procedures

TRW.H&S.POL.1.8 Health & Safety Policy

Health and Safety is an integral part of all work activities and therefore should be applied to all Trust policies and procedures, with particular reference to the following :

All Health and Safety Policies and Procedures referred to on Trust Documents
Risk Management Framework
Incident Management Policy
Risk and Incident Policy
Root Cause Analysis (RCA) for Adverse Events Investigation SOP
Fire Safety and Arson Prevention Policy
Control of Substances Hazardous to Health (COSHH) Policy
Control of Substances Hazardous to Health (COSHH) Risk Assessment and SOP
Workplace Safe Environment Safety Audit [including Slips, Trips & Falls (Staff & Others)]
Preventing Slips Trips & Falls SOP
Prevention and Management of patient falls in hospital (adults) SOP
Prevention and Management of patient falls in hospital (children) SOP
Guidelines for the Safe Employment of Contractors
Moving and Handling People and Objects Policy
Bariatric Manual Handling SOP
Manual Handling Techniques
Prevention of Contamination Incidents SOP
Management of Contamination Incidents SOP
Lone Working Policy
Uniform and Dress Code Policy
Water Management Policy
Water Flushing SOP

Further specific health and safety guidance in addition to this policy can be obtained from the various documents and references written in support of this Policy which are located on Trust Documents, in the Health and Safety/COSHH folders held within each Department, and on the Trust's Health and Safety Staffnet page

Version History

1	March 2005	
2	April 2007	Policy reviewed and updated
3	April 2008	Policy Reviewed and approved by Health and Safety Committee
4	April 2009	Reviewed by Health & Safety Committee
5	June2009	Following final review & comment, final version sent to the Audit Committee for escalation as required
6	August 2012	Policy transferred to new Trust format, reviewed and updated
7	August 2015	Policy reviewed and updated
8	November 2020	Policy reviewed and updated

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

TRW.H&S.POL.1.8 Health & Safety Policy

An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.

Contents

TRW.H&S.POL.1.8 Health & Safety Policy

1   Introduction

General Statement

The Trust Board attaches the greatest priority and importance to the Health, Safety and Welfare of all who come onto its premises, whether they are staff, placements, patients, visitors, agency staff or contractors

The Trust recognises and accepts its responsibilities under the Health and Safety at Work etc Act 1974, Management of Health and Safety at Work Regulations 1999, and associated legislation more particularly referred to in the NHS Staff Council Workplace Health and Safety Standards. This is achieved by undertaking and regularly reviewing risk assessments to identify hazards and existing control measures, prioritising, planning and completing any corrective actions required to reduce risk to an acceptable level to meet and exceed the minimum legal requirement to provide a safe working environment and ensuring that all activities are conducted in a manner which promotes the health safety and welfare of all concerned. The risk management process is more specifically referred to within the Trust Risk Management Frame. As such the Trust is committed to providing adequate resources and control measures to maintain a safe patient environment, safe working conditions, safe plant, equipment and systems of work, and ensuring safe handling and use of substances to meet and exceed a minimum standard required by legislation and recognised good working practices. Responsibility for the management of health and safety will be implemented through the line management structure and will rank equally with all other management functions

The Trust recognises that the objectives of this policy can only be achieved through the competence, support and co-operation of all employees and others who provide or use its services. The Trust will provide and maintain where appropriate suitable safety devices, protective equipment and clothing, health surveillance and information instruction and supervision to safeguard staff. Achievement of this objective will deliver a safe environment for our staff patients and others

The Trust will actively consult with our workforce and nurture an open attitude to health and safety issues, encouraging staff to identify and report hazards and suggest innovative solutions so that we can all contribute to creating and maintaining a safe working environment

All grades of staff are expected to work in such a manner that complies with the Health and Safety at Work etc. Act 1974 and associated legislation, and ensure that their acts or omissions do not harm themselves or others including patients, visitors and contractors. Staff will take all care, so far as reasonably practicable, to maintain their own health and safety and that of others thereby actively contributing to our ongoing success. The successful implementation of this policy requires total commitment from all members of staff

Signed: ……………………………………………………

Ann James, Chief Executive

Signed: …………………………………………………….

TRW.H&S.POL.1.8 Health & Safety Policy

Richard Crompton, Chairman

Signed: ………………………………………………….

Paul Bradshaw, Staff-side Representative

Date: ………………………………………………..

2	Purpose

In accordance with the requirements of Section 2(3) of The Health and Safety at Work etc Act 1974, this document details Plymouth Hospitals NHS Trust's policy with respect to the health and safety of the public using our services and the health and safety at work of its employees. It details the key responsibilities and governance structures in place to provide assurance that the policy is being implemented and that the Trust systems and processes are safe

The Health and Safety General Statement outlines the Trust's objectives and commitment to Health and Safety and details to all staff their responsibilities

The Trust has a statutory requirement to comply with legislation and requirements and standards of regulatory bodies, namely (inter alia) the Health and Safety Executive, Care Quality Commission, Fire Service, Environmental Health Department, Environment Agency

A list of regulatory health and safety legislation is detailed below. (This list is not exhaustive):

Control of Asbestos Regulations 2006

Construction (Design and Management) Regulation 2015

Chemicals (Hazard Information and Packaging for Supply) Regulations 2002

Construction (Head Protection) Regulations 1989

Control of Lead at Work Regulations 2002

Control of Noise at Work Regulations 2005

Control of Substances Hazardous to Health Regulations 2002 (as amended 2005)

Confined Spaces Regulations 1997

Control of Vibration at Work Regulations 2005

Corporate Manslaughter and Corporate Homicide Act 2007

Dangerous Substances and Explosive Atmospheres Regulations 2002

Employer's Liability (Compulsory Insurance) Act 1969

TRW.H&S.POL.1.8 Health & Safety Policy

Environmental Protection Act 1990

Employment Protection (Consolidation) Act 1978

Electricity at Work Regulations 1989

Hazardous Waste Regulations 2005

Health and Safety (Display Screen Equipment) Regulations 1992

Health and Safety (First-Aid) Regulations 1981

Health and Safety at Work etc Act 1974

Health and Safety (Consultation with Employees) Regulations 1996

Health and Safety (Safety Signs and Signals) Regulations 1996

Health and Safety (Information for Employees) Regulations 1989

Ionising Radiation Regulations 1999

Lifting Operations and Lifting Equipment Regulations 1998

Health and Safety (Miscellaneous Amendments) Regulations 2002

Manual Handling Operations Regulations 1992

Management of Health and Safety at Work Regulations 1999

Personal Protective Equipment at Work Regulations 1992

Provision and Use of Work Equipment Regulations 1998

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

Regulatory Reform (Fire Safety) Order 2005

Supply of Machinery (Safety) Regulations 1992

Safety Representatives and Safety Committees Regulations 1977

Health and Safety (Consultation with Employees) Regulations 1996 (as amended).

Work at Height Regulations 2005

Workplace (Health, Safety and Welfare) Regulations 1992

3	Definitions

Hazard:

Something that has the potential to cause harm (loss)

Risk:

The likelihood of a given loss occurring in defined circumstances

Incident:

TRW.H&S.POL.1.8 Health & Safety Policy

An event or circumstance which could have resulted, or did result in, unnecessary or unintended harm, loss or damage to a patient, staff, visitors, members of the public or the Trust

Near Miss:

An unplanned event or chain of events in which injury, damage to plant / equipment or loss has been avoided by chance

Root Cause Analysis:

A systematic process of review, whereby the factors that contributed to an incident are identified, which looks beyond the individuals concerned and seeks to understand the underlying causes and environmental context in which an incident happened

Competent Person:

A competent person is someone who has sufficient training and experience or knowledge and other qualities that allow them to assist you properly. The level of competence required will depend on the complexity of the situation and the particular help you need.

4	Duties

Organisational Responsibilities

Responsibilities for health and safety lie with every employee. These responsibilities are proportioned to the authority held by individual employees

Chief Executive

The Chief Executive of University Hospitals Plymouth NHS Trust will have overall responsibility for ensuring that the provisions of the Health and Safety at Work etc. Act 1974, other regulatory health and safety legislation, and this Policy are adhered to

The responsibilities of the Chief Executive with regard to health and safety issues are to ensure that: -

• A safe working environment so far as reasonably practicable will be provided for all employees and others who are affected by the Trust's undertaking

• All persons under her/his control fully understand and comply with their legal obligations with regard to health and safety at work

• The effectiveness of the Health and Safety Policy is continually monitored and makes provision for amendments where necessary

In addition, the Chief Executive will ensure that:-

• The Trust promotes a positive health and safety culture, produces an environment that promotes staff commitment to health and safety, and emphasises that deviation from corporate safety goals at whatever level is not acceptable. Such a culture requires clear visible management commitment to safety from the most senior level in the organisation

• Resources are allocated to provide a safe working environment within the Trust. Informed decisions are made based on risk assessment which balances the cost of improving the operation against the potential reduction in risk. The Trust utilises Datix as the chosen tool for assessing and managing risk and incidents across the Organisation

- The frequency and outcomes of incidents/accidents are regularly monitored through investigations, performance indicators, audits and analyses, identifying trends and ensuring that appropriate actions are taken, and that any lessons learnt are disseminated across the Organisation

- There is a competent and adequate safety structure organisation in the Trust

Executive Directors

Executive Directors are responsible for the safety of their staff and the activities in their charge. They are expected to promote a high degree of health and safety awareness amongst all their personnel; this includes the following key responsibilities:-

- The objectives of the Health and Safety Policy are implemented, resulting in a safe working environment for all staff, patients, visitors and others

- All employees fully understand and comply with their legal obligations with regard to health and safety at work

- The effectiveness of the Health and Safety Policy and Procedures are continually monitored and significant results brought to the attention of the Chief Executive

- All new developments and modifications comply with Health and Safety legislation and Trust policies

- Promoting health and safety management as an integral management function

Corporate/Clinical Directors

All Corporate Directors have a responsibility to ensure that:-

- Adequate training is provided with regard to health and safety at work and safe systems of work within the areas under their control, in accordance with relevant statutory requirements, Department of Health codes of practice and Trust safety procedures

- They are aware of relevant health and safety legal requirements/good practice and that health and safety good practice is disseminated to all services/Directorates within their control

- An annual Directorate Health and Safety Action Plan is developed and implemented

- The objectives of the Health and Safety Policy are implemented by providing a safe hospital environment for all employees, patients, visitors and others within their areas

- Provision is made for the performance of suitable and sufficient risk assessments by competent persons

Director of Corporate Business

The Director of Corporate Business is the delegated Executive Director responsible for health and safety matters on behalf of the Chief Executive, who must ensure

TRW.H&S.POL.1.8 Health & Safety Policy

- A safe working environment without risk to health is maintained and provided for all employees and others who are affected by the Trust's undertakings, to include the implementation of all aspects of the Health and Safety Policy

- The Trust health and safety agenda is led in partnership with staff side/safety representatives through active agenda setting and chairing of the Health and Safety Committee

- Safe systems of work are provided across the Trust, in accordance with relevant statutory requirements, codes of practice and Trust, Department of Health and NHS Estates codes of practice/safety procedures

- Monitoring and auditing of compliance with health and safety statutory legislation is carried out and any remedial action implemented

- The effectiveness of the Health and Safety Policy and Procedures are continually monitored and amended as necessary and that the Health and Safety Policy is appropriately disseminated across the Trust

- That effective liaison is maintained with external regulatory agencies concerning health and safety matters including the reporting of RIDDORs to the Health and Safety Executive

- Root cause analyses are reviewed by the Health and Safety Committee and action plans for improvement are monitored to include a feedback mechanism across the Organisation for learning from poor practice and sharing good practice

- Information on accidents and incidents are reported at least bi-monthly to the Health and Safety Committee and quarterly to the Trust Board via the Human Resources and Organisation Development Committee

- Appropriate safety training is provided

Care Group, Service Line and Department Managers

The safety responsibilities of Directorate and Department Managers are to:

- Ensure that adequate communication systems exist within wards/departments under their control which allows for co-ordinated working systems and close co-operation between management and employees, (including those of other Directors and outside contractors)

- Provide safe systems of work within the areas under their control, in accordance with relevant statutory requirements, codes of practice and Trust and Department of Health codes of practice / safety procedures. These systems, procedures and risk assessments should be documented in every area within their span of control

- Ensure that staff have been made aware of the risks of working alone, that adequate control measures and local protocols are in place to ensure staff safety whilst on Trust premises, working on other sites or in the Community

- Ensure that staff are suitably trained with regard to health and safety at work within the departments under their control, and that suitably trained health and safety representatives, risk assessors, fire wardens, manual handling key workers and root cause analysis investigators are available across the service/directorate

- Ensure that a local induction is provided to any Contractors or other visitors working in the wards/departments under their control

- A system for monitoring the performance of their Directorate with regard to health and safety is in place, ensuring that appropriate follow up action is taken and recorded to address concerns

- Use the available advice from Health and Safety, Manual Handling, Fire, Security, Occupational Health and Wellbeing and other specialists who can advise on health and safety information and practices

- They keep informed of up to date health and safety legal requirements and good Practice

Matrons Service Line Leads and Heads of functions (or equivalent)

Matrons, Service Line Leads and Heads of functions (or equivalent) will Provide/ensure:-

- A safe environment and safe systems of work (in the form of Standard Operating Procedures) are in place in accordance with statutory requirements, codes of practice and Department of Health circulars

- Adequate and sufficient protective clothing and equipment is available where required to prevent danger to staff at no cost to the employees. They will continuously monitor the issue and condition of these items and provide all employees with adequate instruction with regard to the provision, location and use of protective clothing and equipment

- Workplace monitoring is in place to ensure that the environment is regularly audited as free from obstacles, and that appropriate equipment, procedures, plans, risk assessments and training is in place for the management of all health and safety issues including but not limited to, manual handling, slips trips and falls (including working at height), violence and aggression, and fire

- The Datix system is used appropriately for
  - the recording of all incidents and accidents and that all RIDDOR reportable accidents are immediately brought to the attention of the Health and Safety team
  - the recording of identified risks and associated actions

- All incidents and accidents are recorded, investigated and comprehensively reported where necessary using a root cause analysis process and appropriate remedial actions taken within the agreed timescale

- A system for monitoring health and safety responsibilities is in place, and that appropriate action is taken to address concerns

- A programme of training, with regard to health and safety at work, is in place resulting in an appropriate number of designated and trained staff, including but not limited to safety representatives, risk assessors, manual handling key workers and fire wardens, and with access to root cause analysis investigators.

Ward Managers/Line Managers

The health and safety responsibilities of Ward/Line Managers are to:

- Organise wards/departments so that safe care is delivered to the required standards with the minimum of risk to staff, patients, visitors and others, including the safe use of equipment and materials

- Investigate accidents/incidents to discover their cause and ensure that corrective actions have been taken to eliminate recurrences recording findings and actions on Datix

- Manage the safe use of all equipment within their area of control, (for example the pneumatic tube (POD) system, and macerators) by all personnel, ensuring that appropriate instruction and training has been given to all users

- Ensure they are aware of relevant health and safety legal requirements/good practice and that health and safety good practice is disseminated to all services/Directorates within their control

- Ensure that relevant health and safety regulations and other legal requirements are met in wards/departments, and are clearly documented as required, this includes up to date and documented health and safety risk assessments including fire, COSHH, manual handling, workplace, slips trips and falls, first aider requirements and other related issues

- Plan and maintain a tidy work area/ward/department

- Ensure that any noted defects in the workplace are appropriately reported and monitored, and progress followed up until their satisfactory resolution

- Liaise with Safety Representatives on all matters concerning safety, and consider any representations about health and safety from members of staff, taking appropriate action and when necessary obtaining advice from the Health and Safety and other Specialist Advisors as necessary acting promptly to implement any recommendations

- Work with the Health and Safety team, the Fire advisor and other Specialist and General Advisors acting promptly to implement any recommendations

- Ensure that they and their staff have up to date training in health and safety issues and that training records are kept

- Ensure provision of sufficient time to allow local Health and Safety Representatives to attend training, undertake nominated tasks and educate others on health and safety issues

- Have a Fire procedure which is in accordance with the requirements of the Trust Fire Policy

The Employee

All employees are reminded of their legal duty to take reasonable care of their own health and safety and that of other people who may be affected by their work under the Health and Safety at Work, etc. Act 1974. In order to achieve this employees have a duty to comply with this policy by:

- Working safely and efficiently to minimise risk by co-operating with the Trust's health and safety arrangements

- Using the protective equipment provided and appropriate safety devices and aid as necessary

- Reporting and recording of incidents/occurrence/near misses that have led or may lead to injury or damage

- Adhering to Trust policies, procedures and guidelines for maintaining and securing a safe environment. This includes ensuring that work areas are tidy and free from obstructions

- Participating in the investigation of accidents with the object of introducing measures to prevent a recurrence, informing the Trust of any shortcomings in the employer's protection arrangements

- Participating in any audits, surveys and monitoring undertaken with a view to confirming, maintaining or improving the safety of patient care and health and safety standards

- Reporting any damage, defect or loss to the environment or equipment for immediate resolution that could result in a health and safety or patient safety incident

- Participating in the risk assessment process

- Undertaking health and safety training, being aware of health and safety as it relates to the hospital environment and being responsible for identifying any additional health and safety training needs through the appraisal process.

Voluntary Workers and Others

The PHT Health and Safety Policy also applies to MOD staff, voluntary workers e.g., WRVS, students, placements, agency staff, honorary and any other persons on Trust premises at the Trust's invitation, who will have the same rights, protection and responsibilities under this policy as employees

Other employers or individuals

Other employers or individuals providing goods or services to the Trust shall be required to employ only competent persons and to comply with all relevant legislation, regulations, codes of practice and other appropriate guidance in relation to health and security matters. They will also be required to co-operate with the implementation of this policy and have a responsibility to carry out works and or provide services in a safe manner.

Special care should be taken to ensure that these matters are covered, although nothing in contract documents can free those persons engaging contractors, the contractors themselves, or Trust staff from their own liability under health and safety legislation

Statutory Training – Required by law or statute.

- Mandatory for (All Staff) – Corporate training mandated by the Trust for all employees based on the subjects set out in the National Core Training Skills Framework.

Which staff require this?	Frequency
All staff, including unpaid and voluntary staff	**3 years**

- Mandatory (Role Specific) – Training required to be completed as part of individual roles as defined by professional bodies and agreed with line managers.

- A risk assessor or a health & safety lead will be the competent person who has sufficient training, experience, or knowledge and other qualities that allow them to identify the hazards associated with a particular product or task. The level of competence required will depend on the complexity of, and the hazards associated with a particular situation. Advice on obtaining additional training can be sourced from the Learning and Organisational Development or the Health & Safety Team.

All areas require a Moving and Handling key worker to support, and embed safe practice in moving and handling, and act as a direct link to the Moving and Handling team .

Clinical Moving and Handling Key workers

Clinical moving and Handling key worker must be Band 3 and above. All Clinical Moving and Handling key workers complete an initial 4 day moving and Handling key worker course. This course includes theoretical and practical aspects of moving and handling, followed by a written and practical assessment. All moving and Handling key workers following completion of the course need to attend a full day yearly update to remain confident, and competent, in line with the Moving and handling policy.

Non –Clinical Moving and Handling Key workers

All Non- Clinical Moving and Handling key workers complete an initial 2 day moving and Handling key worker course. This course includes theoretical, and practical aspects of moving and handling, followed by a written and practical assessments. All moving and Handling key workers following completion of the course need to attend a half day yearly update to remain confident, and competent, in line with the Moving and handling policy .

Specialist Responsibilities

Health and Safety Advisor

The Health and Safety Advisor with the support of the Health and Safety Team will:

- Act in an advisory capacity throughout the Trust, providing advice to the Trust's Senior Managers and their staff to ensure that statutory obligations are met, and safe systems of work are implemented and operating successfully in accordance with Trust policies and procedures

- Assist managers in sourcing training providers in consultation with the Trusts Learning and Organisational Development Team, to facilitate information, instruction and training for employees as may be necessary to perform their work without risk to themselves or others

- Advise the Trust Safety Representatives in carrying out their duties

- Advise on, promote and co-ordinate all aspects of the Trust's Health and Safety Policy

- Seek and use the advice of appropriate safety advisory bodies

- Liaise with Government Inspectors and other enforcing authorities as applicable

- Facilitate safety audits and inspections and monitor Health and Safety arrangements throughout the Trust providing reports to the Health and Safety Committee at least every two months

- Promote health and safety within and between directorates and sites and co-ordinate at least bi-monthly a health and safety incidents performance dashboard report to the health and safety committee

- Review, amend and disseminate policies and procedures in accordance with Document Control requirements, or on the introduction of new legislation, whichever is the sooner

- Keep themselves informed of changes in the relevant statutory provisions being fully aware of regulations, codes of practice and advice issued by the authorities, and assess the implications of such changes for the Trust's Health and Safety Policy, arrangements and procedures

- Promote interest in and enthusiasm for health and safety throughout the Trust

- Report to the Health and Safety Executive all incidents that require reporting under the Reporting of Incidents Diseases and Dangerous Occurrences Regulations (RIDDOR)

Other Specialist Health, Safety and Risk Advisors

- Advice on specialist health and safety issues is available through the Trust Specialist Advisors. The Specialist Advisors provide advice for the whole of the Trust unless otherwise stated. The Trust Specialist Advisors cover the following specialities:-

- Infection Prevention and Control

- Radiation Protection

- Ionising Radiation

- Manual Handling

- Training – Medical Devices

- Decontamination, disinfection and sterilisation of surgical instruments and medical devices.

- Fire Safety

- Risk Management

- Clinical Technologies

- Human Resources

- Occupational Health and Well Being

- Ergonomics

- Site Services, Planning & Estates Department

- Local Security Management Specialist

- Facilities Management i.e. Hotel Services, Sustainability, Waste and External Environment

TRW.H&S.POL.1.8 Health & Safety Policy

- Police Liaison/Emergency Planning Advisor
- Pharmacy – Medical Gas Cylinders Management

Contact details can be obtained from the Health and Safety Team

General Health & Safety Advisor Responsibilities

Risk Assessors

A Risk Assessor (RA) is a competent person with relevant knowledge and experience who understands what might cause harm and whether the Trust is doing enough to prevent that harm

The Risk Assessor will be responsible for undertaking a careful examination of what could cause harm to people in the workplace using the HSE's brief guide to controlling risks in the workplace, so that an assessment may be made to assess whether enough precautions are in place, or whether more should be done to prevent harm. A risk assessment will be undertaken by the RA when any new equipment, substances, processes or members of staff are introduced to the workplace

Every Care Group will ensure that appropriate numbers of risk assessors are trained and in place who are available to conduct risk assessments or support other competent staff in the assessment of risk

The Risk Assessor will raise issues regarding local area health and safety with line management and will support Line managers on health and safety issues

Risk Assessors will act as the focal point on health and safety issues for local staff

In some cases where a highly specialist Risk Assessor is required and the appropriate competency or expertise is not available within the Trust an external Risk Assessor may be used through the Trust Procurement Procedure

COSHH Co-ordinators

The Department COSHH Co-ordinator shall:-

- Ensure that the COSHH folder contains up to date inventory, COSHH Risk Assessments and SOP and MSDS for each substance, including emergency procedures
- Support the nominated incident investigation personnel, act as co-ordinator during completion of the DATIX incident investigation report (RCA) for COSHH related incidents
- Review the Department's COSHH risk assessments after any DATIX incident
- Assist Managers in providing information, instruction and training to employees

Fire Wardens

Fire Wardens have the following responsibilities as defined within the Fire and Arson Prevention Policy and in accordance with Firecode:-

TRW.H&S.POL.1.8 Health & Safety Policy

- To know instinctively the right action to take if fire breaks out, or if smoke is detected
- To be familiar with the evacuation procedures and escape routes appropriate to their location at the time of day/night
- To act as focal point on fire safety issues for local staff
- To organise and assist in the fire safety regime within their workplace
- To raise issues regarding local area fire safety with line management (hazard spotting)
- To assist with co-ordination of the response to an incident in the immediate vicinity (safe evacuation)
- To be responsible for roll-call during an incident; (if appropriate)
- To be trained to tackle fire with first aid fire-fighting equipment where appropriate having regard to their safety and that of others
- To support Line Managers on any fire safety issues
- To support good general house-keeping so that it does not pose a fire risk e.g. storage of waste paper, blocking of exits
- To support the 'NO SMOKING' policy

Clinical Manual Handling Key Worker

- Act as a local point of reference, supporting and passing on basic knowledge and skills to colleagues
- Seek specialist advice, as required, regarding safe manual handling issues from the manual handling team
- Support the Local manager in reviewing local manual handling equipment ensuring mechanical aid LOLER checks are in date
- Attend key worker update course, annually to maintain competence. This includes validation of manual handling local key trainer folder.
- Assist the manager in the undertaking of manual handling risk assessments/audits as applicable
- Provide local manual handling training on mechanical aids and new equipment as appropriate, supported by the Manual Handling team
- Maintain a manual handling file that incudes local written documentation such as local manual handling competencies, specific 'in house' training and mechanical aid training

Non-Clinical Key Worker

- Assessors must be fully trained and up to date having attended a key worker update course annually to maintain competence.
- Assessors must have been assessed as competent to practice the indicated skill by the manual handling facilitator.
- Assess core skills of staff within their area & if necessary deliver training e.g. unsuccessful assessment.
- Each assessment must be fully completed, signed and dated by the individual and the assessor.
- This information must then be submitted by email to the workforce development mailbox plh-tr.WorkforceDevelopment@nhs.net where it will be recorded centrally on the Trust system.

- Ensure that the signed competence assessment paperwork is stored for evidence and maintained locally in line with all HR records and retained for 6 years after the individual leaves service. At which time a summary of the file must be kept until the individual 70 birthday, a paper copy can be scanned and retained.
- The core manual handling skills will be assessed yearly.
- If any of the performance criteria are failed on a task, the key worker must complete an action plan stating the intervention, by whom and completion date.
- Following intervention from the first assessment, a second assessment must be undertaken (where appropriate by a different assessor) as soon as possible.
- If any of the performance criteria on a task are failed twice, a third assessment may be undertaken by the manual handling team, and findings reported to the line manager. Any employees failing to achieve competency after three assessments, will be deemed unsuccessful and referred back to their manager for further action.
- Assist managers to ensure manual handling risk assessments are reviewed and up today with suitable action plans attached referring back to manual handling for expert advice where appropriate.

First Aiders/Appointed Persons

A First Aider is someone who has undertaken training and has a First Aid at Work (FAW) or Emergency First aid at Work (EFAW) qualification issued by an approved training organisation. With an EFAW qualification the first aider is able to provide emergency first aid to someone who is injured or becomes ill while at work

Following the completion of a risk assessment, a first aider may not necessarily be required if the work location is in close proximity to the Emergency Department.

The role of the Appointed Person includes looking after first aid equipment and facilities, and calling the emergency services when required. Recommended first aid content requirements can be sourced by following the HSE First aid at work - Your questions answered which is located on Staffnet

Appointed persons do not need first aid training, though emergency first aid courses may be sourced individually by Care Groups if this is a necessity as a result of their individual risk assessment process

5	Health & Safety Management

Trust core values are to:

- Put people first
- Take ownership
- Respect others
- Be positive
- Listen, learn, improve

In promoting these values, and with visible and active leadership by senior managers, the Trust will develop and maintain a culture supportive of health and safety management.

TRW.H&S.POL.1.8 Health & Safety Policy

The aim is to motivate and empower people to work safely by monitoring and learning from all relevant experience

Health and Safety Policy and Standard Operating Procedures

Health and Safety Policies and Standard Operating Procedures (SOPs) are held on Trust Documents. These Policies and Standard Operating Procedures are required to provide a framework for compliance with relevant external legislation, and to give assurance of the Trust's commitment to the health, safety and wellbeing of all staff, patients, visitors, and others

Adherence to safe working practices, including:-

- safe systems of work
- safe place of work
- safe equipment
- safe access and egress

for all staff, patients, visitors and others visiting the Trust's premises demonstrates the Trust's commitment to health and safety

SOPs also provide an excellent framework for managers and staff to undertake duties and tasks efficiently and effectively, which in turn provide excellent patient care

Each Policy or SOP will be reviewed at least every five years and in the event of any changes to knowledge, procedures or legislation

Risk assessments

The Trust recognises that Risk Management forms an integral part of its philosophy, practices and business plans. In meeting its key objectives and targets it is committed to taking all reasonable steps in the management of risk with the overall aim of delivering safety, quality and efficiency as outlined in the Trust's Integrated Business Plan and Risk Management Policy

The subject of Risk Management is dealt with in more detail in the Risk Management Policy, its ancillary policies and procedures. The Trust has a detailed procedure that covers the key components in relation to risk management and should be referred to when a risk assessment is completed

Safety Representatives

Safety Representatives are appointed by Trust Staffside (Joint Staff Negotiating Committee (JSNC)) to represent both Union and non-Union members of trust staff on matters relating to health and safety at work.

Safety Representatives' responsibilities can be found in the Safety Representatives and Safety Committees Regulations 1977 with further guidance available from the Trade Union "Brown Book". Contact the Health and Safety team or any Safety Representative for assistance.

Health and Safety Committee

The Trust has a duty to establish and maintain a group and to consult with union-appointed health and safety representatives (this Committee) with the stated intent of "promoting partnership working" between management and staff in instigating, developing and carrying out measures to ensure the health, safety and welfare at work of all Trust employees, contractors, visitors and others who use Trust facilities. The Committee will meet at least every two months and is accountable to the Human Resources and Organisational Development Committee.

The Committee will:-

- ensure that appropriate procedures are in place to maintain and improve staff health safety and welfare

- review performance against health and safety metrics making recommendations to support action to address issues arising

- oversee arrangements for reviewing and monitoring the delivery of the Trust's health and safety duties and obligations

- review the performance and effectiveness of the arrangements to report and act on incidents, events or issues involving or likely to cause harm to staff

- review and act on reports to or comments, advice, recommendations, enforcements or prohibitions from the Health and Safety Executive or other enforcing authorities

- review and comment on reports, audits, investigations, assessments and health and safety related reports

- review Health, Safety and Risk Training requirements

- review risks to providing staff health, safety and welfare and seek assurance that appropriate action is being taken to mitigate

- identify good practice and ensure that this is shared throughout the Trust

- provide assurance of compliance with this Policy and, where appropriate, escalate any issues arising to the Human Resources and Organisational Development Committee

6	Overall Responsibility for the Document

The Director of Corporate Business

7	Consultation and Ratification

The design and process of review and revision of this policy will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

TRW.H&S.POL.1.8 Health & Safety Policy

This document will be reviewed by the group or committee and ratified by the Director.

Non-significant amendments to this document may be made, under delegated authority from the Director, by the nominated owner. These must be ratified by the Director.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

8 Dissemination and Implementation

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the named Director or Corporate Business and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

9 Monitoring Compliance and Effectiveness

This policy and the safety management procedures which stem from it will be monitored in order to confirm their effectiveness in ensuring the health, safety and welfare at work of employees and others who might be affected by the work activities at the Trust

The Health and Safety Team with the support from other specialist health, safety and risk advisors will analyse workplace health and safety data using Datix. The specialist advisors will identify trends and work with managers to share good practice and initiate improvements. This information will also be used to assess compliance, effectiveness and performance in order that the Trust may benchmark the organisation's performance against other organisations in its sectors.

The Health and Safety team will facilitate Annual Safety Assessments ASA and share the findings with the Care Groups. The ASA will be brought to the attention of the Health & Safety Committee for review. The Annual Safety Assessments ASA should not preclude day to day health and safety management as part of the Care Group Manager's responsibilities

Monitoring outcomes and monthly reports (incorporating statistical data) provided by Specialist Advisors will be reported to the Health and Safety Committee who will hold meetings at least every two months. Actions to address any issues arising will be developed by the Specialist Advisors with implementation monitored by the Health and Safety Committee.

The minutes and reports of the committee will be sent to the Human Resources and Organisational Development Committee as assurance and to escalate any areas of concern.

On behalf of the Trust Board the Chief Executive will receive reports on Health, Safety and Welfare performance across the Trust at least annually or otherwise as required

Directorate Safety Audits and Inspections

- Local management should undertake a formal inspection of all health and safety issues, an environment Risk Audit/Assessment, COSHH and Ligature assessments for each Area, Ward or department within their control, at least every 12 months. Findings will formulate a prioritised action plan for Health and safety. This should be reviewed at least every 12 months
- Inspections must also be carried out following any significant changes to work procedures, equipment, location, new hazards, emergent risks or any new legislation affecting health and safety

These audits will provide Managers with a system of monitoring the standards within their Departments on a routine basis and will assist in the implementation of corrective measures

10	References and Associated Documentation

See links to other policies and procedures on page 1 of this Policy

Dissemination Plan and Review Checklist	Appendix 1

Dissemination Plan	
Document Title	Health and Safety Policy
Date Finalised	November 2020
Previous Documents	
Action to retrieve old copies	Remove from Trust Documents folder
Dissemination Plan	

Recipient(s)	When	How	Responsibility
All Trust staff	November 2020	IG StaffNet Page	Information Governance Team
	November 2020	Trust documents	Document Control

Review Checklist		
Title	Is the title clear and unambiguous?	Y
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Y
	Does the style & format comply?	Y
Rationale	Are reasons for development of the document stated?	Y
Development Process	Is the method described in brief?	Y
	Are people involved in the development identified?	Y
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Y
	Is there evidence of consultation with stakeholders and users?	Y
Content	Is the objective of the document clear?	Y
	Is the target population clear and unambiguous?	Y
	Are the intended outcomes described?	Y
	Are the statements clear and unambiguous?	Y
Evidence Base	Is the type of evidence to support the document identified explicitly?	Y
	Are key references cited and in full?	Y
	Are supporting documents referenced?	Y
Approval	Does the document identify which committee/group will review it?	Y
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Y
	Does the document identify which Executive Director will ratify it?	Y
Dissemination & Implementation	Is there an outline/plan to identify how this will be done?	Y
	Does the plan include the necessary training/support to ensure compliance?	Y
Document Control	Does the document identify where it will be held?	Y
	Have archiving arrangements for superseded documents been addressed?	Y
Monitoring Compliance & Effectiveness	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Y
	Is there a plan to review or audit compliance with the document?	Y
Review Date	Is the review date identified?	Y

	Is the frequency of review identified? If so is it acceptable?	Y
Overall Responsibility	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Y

TRW.H&S.POL.1.8 Health & Safety Policy

Equalities and Human Rights Impact Assessment	Appendix 2

Core Information	
Date	November 2020
Title	Health and Safety Policy
What are the aims, objectives & projected outcomes?	To comply with the statutory requirement to provide a safe environment for all staff patients and others on its premises

Scope of the assessment
Health and Safety Policy for Trustwide coverage

Collecting data	
Race	No
Religion	No
Disability	No
Sex	No
Gender Identity	No
Sexual Orientation	No
Age	No
Socio-Economic	No
Human Rights	No
What are the overall trends/patterns in the above data?	N/A
Specific issues and data gaps that may need to be addressed through consultation or further research	No data has been collected during this review

Involving and consulting stakeholders	
Internal involvement and consultation	Members of the Trust's Health and Safety Committee including JSNC representative, Security Management Specialist, Director of Corporate Business, Staff Health and Wellbeing and Trust Specialist Advisors
External involvement and consultation	HSE guidance

Impact Assessment	
Overall assessment and analysis of the evidence	This document provides a comprehensive policy which encourages, endorses and guides all persons to act or take measures in a way that promotes a safe and secure environment for all staff, patients, visitors, contractors and others

Action Plan

Action	Owner	Risks	Completion Date	Progress update

TRW.H&S.POL.1.8 Health & Safety Policy