

CONFIDENTIALITY MARKING

AGENDA ITEM NO:

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
FRIDAY 3 DECEMBER 2010**

Title:	HEALTH AND SAFETY POLICY
Responsible Director:	David Burbridge, Director Corporate Affairs
Contact:	David Burbridge

Purpose:	To seek the Board of Directors' approval for the Health and Safety Policy
Confidentiality Level & Reason:	n/a
Medium Term Plan Ref:	n/a
Key Issues Summary:	This policy sets out how the health, safety and welfare of all patients and everyone who works at, or visits, its hospitals or other places of work are to be safeguarded and managed.
Recommendations:	The Board of Directors is asked to consider and if thought fit, approve the Health and Safety Policy.

Signed:	Date:
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UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

BOARD OF DIRECTORS FRIDAY 3 DECEMBER 2010

HEALTH AND SAFETY POLICY

PRESENTED BY DIRECTOR OF CORPORATE AFFAIRS

1. Introduction

This policy sets out how the health, safety and welfare of all patients and everyone who works at, or visits, its hospitals or other places of work are to be safeguarded and managed with a view to reducing the number of incidents and illnesses to the lowest possible levels, thereby reducing human and financial losses, and improving patient care and service efficiency.

2. Review

All relevant stakeholders, including staff side and Executive Directors have been consulted and any concerns/comments have been incorporated into this document.

3. Notification and Implementation

This policy will be implemented by all levels of management in the Trust and will be available to all staff on the intranet.

To facilitate communication of the key duties under this policy, a leaflet will be designed, produced and disseminated by the Occupational Health and Safety Department.

4. Monitoring

The policy details a wide range of monitoring processes, such as inspections by, for example, the Health and Safety department, staff representatives, DOps, Fire Safety Advisor, and audits by the Health and Safety Audit Team.

The Health, Safety and Environment Committee (the Terms of Reference of which are set out in Appendix 4 of this policy) is responsible for considering and approving Health and Safety Procedures, advising the Director of Corporate Affairs on the implementation of this policy by means of regular reports, considering reports on health, safety and environmental issues and recommending actions where standards are not met.

5. Recommendation

The PRG reviewed this policy, considered it compliant with the Policy for the

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Development and Management of Controlled Documents and recommends that it is approved.

David Burbridge
Director of Corporate Affairs

Health and Safety Policy

CATEGORY:	Policy
CLASSIFICATION:	Health and Safety and Legal (Reserved Policy)
PURPOSE	Policy covering scope and responsibilities for Health and Safety in UHB NHS Foundation Trust.
Controlled Document Number:	193
Version Number:	4
Controlled Document Sponsor:	Director of Corporate Affairs
Controlled Document Lead:	Health and Safety Advisers
Approved By:	Board of Directors
On:	November 2010
Review Date:	October 2012
Distribution:	
<ul style="list-style-type: none"> • Essential Reading for: • Information for: 	<p>All Managers</p> <p>All Staff</p>

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1. Policy Statement

- 1.1 University Hospitals Birmingham NHS Foundation Trust's (Trust) policy is to plan for, and safeguard, the health, safety, and welfare of all patients and everyone who works at, or visits, its hospitals and other places of work and who is likely to be affected by its activities, in line with section 2(3) of the Health and Safety at Work etc. Act 1974.
- 1.2 The aim of this policy is to reduce the number of Health and Safety incidents which have a potential to be serious to an absolute minimum and progressively reduce work-related accidents and illnesses to the lowest levels, thereby reducing human and financial losses, improving the quality of patient care delivered, and improving the Trust's effectiveness. The Trust will ensure:
 - 1.2.1 Appropriate arrangements are in place for liaison with other employers that share and/or work on shared premises:
 - a) University of Birmingham;
 - b) Birmingham City University;
 - c) Royal Centre for Defence Medicine;
 - d) Balfour Beatty Workplace (BBW); and
 - e) Consort.
 - 1.2.2 It complies with statutory requirements; and
 - 1.2.3 It continues to develop a culture that recognises the importance of Health and Safety.
- 1.3 The Trust will do all it reasonably can to:
 - 1.3.1 Protect patients, visitors and staff from risks at work through effective risk assessment and implementation of appropriate preventive or protective measures;
 - 1.3.2 Ensure that Trust accommodation, equipment, facilities, materials, substances, transport and working practices are safe and without undue risk to health;
 - 1.3.3 Make patients, visitors and staff aware of potential hazards, safe working practices and arrangements for emergencies;
 - 1.3.4 Provide staff, and patients and visitors where appropriate, with personal protective equipment, together with information and guidance regarding its use;
 - 1.3.5 Help employees to meet their legal duty of care, by involving them, and encouraging their co-operation, in the management of their own health and safety, through appropriate information and training;
 - 1.3.6 Consult staff on matters affecting their health, safety, and welfare at work, and nurture a spirit of collaboration among them, their trades unions/professional bodies and Safety Representatives; and
 - 1.3.7 Provide support to managers to assist them to continuously improve and maintain a consistently high standard of health and safety management in their areas of responsibility.

2. Scope

- 2.1 This policy applies to all areas of the Trust and all individuals employed by the Trust including contractors, volunteers, students, locum and agency staff and staff employed on honorary contracts
- 2.2 It applies to all premises where the Trust provides services and to all Trust employees working within other organisations.

3. Framework

This policy sets out the broad framework for ensuring Health and Safety within the Trust. Detailed requirements and procedures are contained in several other policies, procedures and guidelines, the key ones of which are set out in Section 8: Associated Policy and Procedural Documentation. Trust-wide procedural documents shall be approved by the Trust Health, Safety & Environment Committee. Local procedural documents (i.e. documents applicable to specific departments or areas) shall be approved by the manager of the area/department concerned.

3.1 Definitions

In this policy:

- 3.1.1 Nominated Manager means the post holder identified by the Divisional Director of Operations or, for corporate departments, the relevant Executive Director, as having responsibility for carrying out the duties set out in Section 4 of this policy for a particular ward, department or service (details of Nominated Managers shall be notified to the Occupational Health and Safety Department). Unless notified otherwise, the Nominated Manager for a ward shall be the Senior Sister for that ward.
- 3.1.2 Risk Assessors/Link Workers means appropriately trained employees identified (and notified by email to the Health and Safety Department) by the relevant Nominated Manager, to assist the Nominated Manager with carrying out their duties;
- 3.1.3 Safety Representatives means employees appointed either by unions or professional bodies, or at the request of staff in the relevant area/department to represent the staff in consultation with management on any general or specific matters affecting their health, safety and welfare.
- 3.1.4 Health Assessment means an assessment of an individuals' capacity to undertake the physical and emotional demands of a specified job role. This includes identifying any 'reasonable adjustments' that may be required for individuals' with disabilities and/or any temporary restrictions that may be required pending further interventions/investigations.

3.2 Risk Assessments

- 3.2.1 Health and Safety risk assessments for all activities and areas of the Trust must be undertaken by management. Those assessments must be reviewed if the activity, equipment, substance or location changes; new assessments must be done if the risk changes as a result. All assessments must be reviewed by the Nominated Manager at least annually in any event.
- 3.2.2 Where risks are identified, appropriate measures must be put in place by management to reduce the risk to an acceptable level or eliminate the risk. All risk assessments must take into account staff abilities and disabilities. Such measures may include:
- a) Physical changes to environment or structures;
 - b) Changes to procedures and/or processes;
 - c) Supervision;
 - d) Provision of equipment;
 - e) Training.
- 3.2.3 Where the risk cannot be reduced to an acceptable level, the appropriate Director or Director of Operations must consider whether it is appropriate to continue the activity.

3.3 Plant & Equipment

- 3.3.1 The Trust shall ensure that all plant and equipment for which it is responsible that requires maintenance is identified, that the maintenance is done and that new or second-hand plant and equipment meets health and safety standards before purchase.
- 3.3.2 Inspections of Health and Safety equipment shall be undertaken in accordance with legislation and maintenance contracts. Records of maintenance must be kept on the unit where the equipment is located, at the Medical Engineering department or with Balfour Beatty Workplace (BBW).
- 3.3.3 Any problems with plant & equipment should be reported to Medical Engineering department, BBW or external contractor depending on who is contracted to undertake maintenance.

3.4 Safe Handling & Use of Substances (COSHH)

- 3.4.1 The risks from all substances hazardous to health under the Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH), in accordance with the COSHH Procedure, must be assessed using specialist advice where necessary.
- 3.4.2 Specimen COSHH assessments for substances in common use in Wards are available as worked examples to assist the Nominated Manager.
- 3.4.3 All new substances will be assessed before use.
- 3.4.4 Employees must receive specialist health surveillance for certain work. Jobs requiring health surveillance shall be identified and

assessed by local management, in conjunction with the Occupational Health & Safety department. Health surveillance will be arranged by the Occupational Health & Safety department.

- 3.4.5 Health surveillance records will be kept by the Occupational Health & Safety department, with Health Assessments for work placement being retained locally..

3.5 Estates & Common Areas

Where risks are identified in common areas (e.g. corridors, stairs, lifts, footpaths, roads) any information from risk assessments, incident reports and complaints shall be sent to the New Hospital Project Team - Estates Monitoring Office. They will liaise with BBW on reducing risks. The risks, if local, should also be entered onto local risk registers by the Nominated Manager.

3.6 First Aid

Provision for first-aid shall be made in accordance with the Trust's First Aid Policy.

3.7 Emergency Procedures

Every area of the Trust shall have emergency procedures in place for fire and other emergencies that may require evacuation. These shall be assessed, implemented and checked in accordance with the Trust's Fire Safety Policy.

3.8 Documentation

3.8.1 Health and Safety Records

All Health and Safety Records, including electronic Health & Safety folders, 'Manager's Health & Safety Workbook', training records, and inspection reports, shall be maintained in accordance with legislation and Trust procedures.

3.8.2 Risk Registers

Risk Registers for all wards, departments and services within the Trust shall be maintained in accordance with the Trust 'Procedure for the Development and Management of Risk Registers'.

3.9 Incidents – Reporting and Investigations

- 3.9.1 All incidents or any matter, such as a "near miss", that may be considered to represent a shortcoming in the protection arrangements for Health and Safety should be reported in accordance with the Trust's Incident Reporting system (detailed in the 'Policy for the Reporting and Management of Incidents including Serious Incidents Requiring Investigation'). The system supports the management of all risks in the Trust. Details of reported Health and Safety incidents will be passed to the Health & Safety team for monitoring.

- 3.9.2 External reporting to the appropriate enforcing authority of health and safety incidents, involving injuries, diseases and dangerous occurrences, shall be made by the Occupational Health and Safety Department. RRPPS are responsible for reporting radiation incidents.
- 3.9.3 Incidents shall be investigated by local managers in accordance with the Procedure for the Investigation of Incidents including Serious Untoward Incidents. Incidents resulting in serious harm/death shall be investigated by the Occupational Health and Safety Department in conjunction with local management.

3.10 Competence

All staff, students, persons on authorised attachment, agency staff and contractors must be competent to undertake any work in the Trust. To establish competence may involve checking credentials/training history and establishing levels of experience (checked by local management and/or Human Resources as appropriate). Only when appropriate competence levels are established should any person be allowed to work within the Trust.

3.10.1 Training

- a) All staff must receive appropriate Health and Safety training in accordance with the Trust's policy on Mandatory and Statutory Training;
- b) All employees must be given health and safety induction training when they start work;
- c) Job-specific training will be provided as part of local induction;
- d) Training needs for new equipment/systems of work should be identified as part of the risk assessment process. The provision of new training, information and supervision must be considered if risks change or new processes/equipment are introduced. If competency is eroded due to infrequent use of skills/knowledge refresher training must be provided;
- e) All training must be recorded on the Trust training records system (ESR);

3.10.2 Supervision

- a) As part of establishing competence there may have to be supervision of staff. For clinical staff this will be organised locally, through the Clinical Skills department. For non-clinical areas supervision should be organised by local management;
- b) Supervision of young workers has to be agreed with the Human Resources department in accordance with the 'Policy & Guidance on Young Persons & Work Experience Placements'.

3.10.3 Information

- a) The Occupational Health & Safety department produces posters, leaflets and guidance on Occupational Health and Safety. This information is available to all staff on the Trust Intranet;

- b) The Trust displays the official HSE Health and Safety Law poster 'What you need to know' within Trust Headquarters and in prominent common areas;
- c) Any information from professional bodies that have Health and Safety implications should be made available to affected staff and contractors.

3.11 Consultation

3.11.1 The Trust recognises the need for consultation and co-operation between executives of the Trust and employees in all Trust Health and Safety matters. This consultation may be undertaken directly with staff or through staff side representatives.

3.11.2 Safety Representatives

- a) The appointment of safety representatives, either by unions or professional bodies, or at the request of staff in the department is recognised by the Trust;
- b) Staff in each department/area may appoint a Safety Representative. The identity of, and any changes to, Safety Representatives should be notified by email to the Health and Safety Department and to the relevant Nominated Manager.
- c) The function of safety representatives is to:
 - i) Represent the staff in consultation with management on any general or specific matters affecting their health, safety and welfare;
 - ii) Carry out inspections of work places in accordance with the Trust 'Joint Inspections Policy';
 - iii) Bring to managers' attention unsafe or unhealthy conditions or working practices;
 - iv) Investigate incidents within the workplace and to examine the cause of those incidents and liaise with management on prevention; and
 - v) Investigate Health and Safety complaints made by any employee.
- d) Nominated Managers and Safety Representatives shall as far as possible resolve Health and Safety problems at a local level. If a resolution cannot be made locally it shall be taken to the appropriate Divisional Consultative Committee.

3.11.3 Divisional Consultative Committees (DCC)

The Trust has established divisional consultative committees that meet monthly. The aim of these committees is to act as a forum for consultation and co-operation between the Trust and employees in all matters including health, safety and welfare at work. If resolution cannot be made at the DCC it shall be taken to the Trust Health, Safety & Environment Committee.

3.11.4 Trust Health, Safety & Environment Committee

Details of this committee are set out in 'Monitoring' and Appendix 4. Part of its function is to act as a forum for senior management and senior safety representatives to consult on all aspects of Health and Safety. If resolution of a matter raised by safety representatives cannot be made at this committee it shall be taken to the Trust Partnership Team.

3.12 Occupational Health and Safety Department

3.12.1 In order to assist managers and employees of the Trust with their responsibilities under this policy the Trust has established an Occupational Health and Safety Department, the functions of which are to:

- a) Assist the Trust Health, Safety and Environment Committee and Specialist Advisory Groups;
- b) Promote a positive Health and Safety culture;
- c) Encourage the protection and promotion of employee health;
- d) Facilitate Health and Safety planning in the Trust to include setting objectives and agreeing priorities;
- e) Design and support Health and Safety Management systems for the Trust;
- f) Provide advice on Health and Safety matters, including risk assessment and implementing controls (see Framework - page 11 for Trust criteria for competent Health and Safety advice and assistance);
- g) Provide immunisations and health surveillance, including health screening and medical examination;
- h) Act as formal point of contact between the Trust and relevant enforcing authorities, in particular the Health and Safety Executive, Environmental Health Departments and any other relevant authority;
- i) Liaise with specialists in or outside the Trust as appropriate;
- j) Organise general Health and Safety training for the Trust;
- k) Receive accident and incident reports, investigate as appropriate, compile and analyse accident and incident data;
- l) Liaise with recognised trade unions and their appointed workplace representatives on issues relating to Health and Safety of their members;
- m) Publicise and promote Health and Safety information policies and guidance;
- n) Advise the Trust on Health and Safety legislation, standards and good practice;
- o) Distribute a leaflet for this policy; and
- p) Assist the Director of Corporate Affairs in reviewing Trust Health and Safety performance.

3.12.2 The Trust is committed to ensuring adequate resources are available for the functioning of this department.

3.13 Health and Safety Advice and Assistance

3.13.1 The Trust shall ensure that appropriate support and advice is available to managers and risk assessors from the Occupational Health and Safety Department.

3.13.2 The Trust will ensure that management and employees have access to competent advisers on areas of Health and Safety risks, including the following:

- a) General Health and Safety;
- b) Occupational Hygiene;
- c) Manual Handling;
- d) Radiation;
- e) Biological Risks;
- f) Engineering; and
- g) Construction.

3.13.3 Where appropriate, if advice is not available internally, external consultants should be contracted to provide that advice.

3.13.4 These advisors include, Trust Security Adviser, Fire Safety Adviser, Radiation Protection Adviser, Manual Handling Adviser, Ergonomist, Control of Infection Team, University Biological Safety Officer, Occupational Hygienist, Health and Safety Advisers and Occupational Health Advisers.

4. Duties

4.1 Board of Directors

Ultimately the Board of Directors has responsibility for Trust Policy.

4.2 Chief Executive

The Chief Executive has overall responsibility for all Health and Safety issues and compliance with statutory requirements and legislation. In line with the Trust philosophy, maximum delegation of responsibility will occur and managers will be accountable for the active management of Health and Safety within their designated areas.

4.3 Director of Corporate Affairs (DCA)

4.3.1 The Director of Corporate Affairs is the named director responsible for Health and Safety throughout the Trust, and, as such, the Board of Directors has assigned responsibility to the DCA for overseeing compliance throughout the Trust with this policy. The DCA will provide assurance to the Board of Directors on compliance with this

policy and will report any material failures of compliance or other concerns regarding Health and Safety to the Board of Directors.

4.3.2 The DCA is responsible for:

- a) Overseeing management arrangements for Health and Safety;
- b) Chairing the Trust Health, Safety and Environment Committee;
- c) Acting as the link between the Trust Health, Safety and Environment Committee, the Management Executive and Divisional Directors of Operations;
- d) Keeping the Chief Executive informed about Health and Safety priorities in the Trust; and
- e) Ensuring that the Trust's Health and Safety performance is adequately monitored and its systems reviewed as necessary.

4.4 Executive Directors

Executive Directors shall ensure that Health and Safety risks are actively managed within Divisions and their Corporate departments and that Trust Health and Safety policies and initiatives are implemented within those Divisions and departments. For their Corporate departments, Executive Directors shall ensure that:

- 4.4.1 Nominated Managers are identified for each department and service within their control; and
- 4.4.2 Health and Safety Inspections of departments are conducted (all wards/departments to be inspected over a 2 year rolling program);

4.5 Divisional Directors of Operations (DOps)

DOps shall ensure that:

- 4.5.1 Nominated Managers are identified for each ward, department and service within their Division;
- 4.5.2 Health and Safety risks arising out of clinical practices or clinical decisions are properly identified, assessed, recorded and controlled within their Division;
- 4.5.3 Suitable arrangements are in place to ensure compliance with this policy and associated procedures, including:
 - a) Maintenance of a chart detailing Health and Safety responsibilities and accountabilities for the Division;
 - b) Ensuring that any recommendations arising out of Health and Safety audits or inspections are implemented in accordance with the timescales required;
 - c) Ensuring adequate resources are made available for Health and Safety (see Appendix 3);
 - d) Using data from Divisional inspections, Divisional risk register and Divisional Consultative Committees to guide actions to prevent or reduce the risk of serious incidents; and

- e) Analysing and acting upon Divisional and Group Incident data.
- 4.5.4 The effectiveness of arrangements for Health and Safety matters within the Division are monitored;
- 4.5.5 Appropriate Health and Safety reports are submitted to the Trust Health, Safety and Environment Committee (report format and content to be agreed at the Committee);
- 4.5.6 Health and Safety Inspections of departments are personally conducted (all wards/departments to be inspected over a 2 year rolling program); and
- 4.5.7 They, or an appropriate Divisional representative, attend the Trust Health, Safety and Environment Committee.

4.6 Group Managers, Senior Nurses (Modern Matrons), Clinical Service Leads (CSL) and equivalents in Corporate Areas

- 4.6.1 The Trust is a large diverse organisation with variations in structure across Divisional and Corporate areas. The duties in this section apply to Group Managers, Senior Nurses, Clinical Service Leads and the equivalent officers in Corporate departments. Examples of Trust systems for managing Health and Safety are outlined in Appendix 2
- 4.6.2 Group Managers, Senior Nurses, Clinical Service Leads and the equivalent officers in Corporate departments shall:
 - 4.6.2.1 ensure suitable management and monitoring of arrangements so that this policy and its associated procedures are being adhered to;
 - 4.6.2.2 support their DOp's/Executives in identifying the nominated managers for departments, wards and services;
 - 4.6.2.3 Manage Health and Safety risks within their area of responsibility;
 - 4.6.2.4 Ensure line managers are competent to manage Health and Safety;
 - 4.6.2.5 Set objectives in Health and Safety within the appraisal process;
 - 4.6.2.6 Co-ordinate incident investigations within their area of responsibility; and
 - 4.6.2.7 Analyse and act upon Group/Corporate incident data.

4.7 All Managers

All managers are accountable to the Chief Executive for ensuring that this policy is properly applied in their area of control. In particular, they shall:

- 4.7.1 Implement Trust Health and Safety Policies, procedures and programmes;

- 4.7.2 Ensure adequate supervision of all staff and students is provided, commensurate with their skills and competency;
- 4.7.3 Ensure that staff receive appropriate training and information necessary for them to carry out their role safely and competently;
- 4.7.4 Keep detailed local training records for all staff; and
- 4.7.5 Ensure that all incidents that occur in their area are reported and investigated in accordance with the Trust's Incident Reporting policy;

4.8 Nominated Managers

Each Nominated Manager shall:

- 4.8.1 Ensure there are electronic Health & Safety folders/database or equivalent system covering their area and that the contents of the their system are accurate and up to date;
- 4.8.2 Ensure their area has a current Risk Register and that they can demonstrate progress on that register;
- 4.8.3 Ensure that there are appropriate emergency procedures in place for their area and that these procedures are known to staff and checked/rehearsed regularly in accordance with the Fire Safety Policy.
- 4.8.4 Ensure that risk assessments (e.g. General, COSHH, Slips and Trips, Working at Height, Manual Handling, Display Screen Equipment and Violence and Aggression) are carried out and reviewed at least annually and filed in electronic folders/Health & Safety Database or other approved electronic system;
- 4.8.5 Ensure there is adequate consultation with their staff and staff representatives;
- 4.8.6 Ensure adequate supervision of all staff and students is provided, commensurate with their skills and competency;
- 4.8.7 Ensure that staff receive appropriate training, supervision and information necessary for them to carry out their role safely and competently;
- 4.8.8 Monitor staff as appropriate to ensure procedures are being implemented;
- 4.8.9 Ensure that all external people coming into their department are properly instructed in Health and Safety matters;
- 4.8.10 Where practicable, within resources, implement control measures. Where departmental resources are insufficient to implement a solution, pass recommendations to senior management so that appropriate allocation of resources can be considered and prioritised (see Appendix 3);
- 4.8.11 Ensure that all incidents that occur in their area are reported and investigated in accordance with the Trust's Incident Reporting policy;
- 4.8.12 Undertake the Trust 'Managing Risks' training; and

- 4.8.13 Be involved in joint inspections of their area of responsibility (with staff side and/or senior managers).

4.9 Risk Assessors/Link Workers

- 4.9.1 Risk assessors/link workers may assist Nominated Managers with their duties, however they will not be held ultimately accountable for risks not under their direct control. Nominated Managers may delegate any Health and Safety tasks, but they cannot delegate accountability.
- 4.9.2 Risk assessors shall be given adequate training and resources to fulfil their delegated role.

4.10 Employees

All employees must comply with Trust Health and Safety policy and procedures. They must not undertake any actions that could compromise their health and safety or the health and safety of others. Employees have a duty to:

- 4.10.1 Use machinery, equipment, dangerous substances, transport or safety devices in accordance with any instruction and training provided by the employer;
- 4.10.2 Not interfere with or misuse anything provided in the interests of health, safety or welfare;
- 4.10.3 Report to their Nominated Manager and the Occupational Health & Safety Department any work situation which may be considered to represent a serious and immediate danger to Health and Safety;
- 4.10.4 Attend training sessions as required and put training into practice;
- 4.10.5 Attend health surveillance checks as required;
- 4.10.6 Report any incident or any matter that may be considered to represent a shortcoming in the protection arrangements for Health and Safety to their Line Manager and via the Trust incident reporting system;

4.11 Head of Occupational Health and Safety Department

The Head of Occupational Health and Safety Department shall ensure:

- 4.11.1 The Occupational Health and Safety Department carries out its duties in a proper and timely manner; and
- 4.11.2 The department is staffed by experienced persons who have appropriate qualifications and knowledge of Occupational Health and Safety issues arising from health service activities.
- 4.11.3 For Health and Safety advice that:
- a) Advisers have appropriate competence; qualifications and suitable level of experience in the profession;

- b) Advisers have the authority to stop work if it is likely to cause death or serious injury to staff, patients and visitors. This authority will only be exercised after consultation with the executive on call;
- 4.11.4 Advisers can liaise with other specialist advisers in the Trust to ensure co-operation in dealing with Health and Safety issues; and
- 4.11.5 Adequate resources are made available to enable the adviser to carry out his/her duties.

4.12 Expert Advisers

Expert Advisers will provide advice and support to all levels in the Trust including the following:

- 4.12.1 Interpreting the Law and highlighting any implications to the Trust;
- 4.12.2 Providing advice on their area of expertise, including risk assessment and control implementation;
- 4.12.3 Advising on the establishment and maintenance of standards; within policies, procedures, personal protective equipment (PPE), engineering controls and training.

5. Implementation

This policy shall be implemented by all levels of management in the Trust (see Duties). This policy will be available to all staff on the intranet. To facilitate communication of the key duties and arrangements of this policy a leaflet will be designed, produced and disseminated to the Trust by the Occupational Health and Safety Department.

5.1 Managers' Health & Safety Documentation

To support staff in fulfilling their Health and Safety responsibilities, the Trust has provided a consistent filing system for Health and Safety records, the Managers' Health and Safety Workbook. With the move to the QEHB all departments will need to transfer documentation in their workbook to electronic folders or equivalent electronic filing system (see 'Health & Safety Records Guidelines' on the intranet). Every Department in the Trust shall transfer health and safety documentation to and use electronic folders, or an equivalent approved electronic filing system, to replace the Workbook.

6. Monitoring

The policy standards and the Trust's monitoring arrangements to ensure policy compliance are detailed in Appendix 5.

6.1 Inspections

There are various types of inspection conducted across the disciplines, for example by the Health and Safety department, Staff Representatives, DOps,

Fire Safety Adviser and Infection Control. Inspections provide local, Group, Divisional and Trust monitoring information. DOps and Executive Directors shall ensure inspections are carried out on all their wards/departments over a 2 year rolling program as a minimum.

6.2 Audit

The Occupational Health & Safety department carries out general audit and Manual Handling audit.

The Head of Occupational Health and Safety Department will be responsible for maintaining Manual Handling and Health and Safety Audit teams. The Teams will audit the Trust regularly, with the objective of identifying both deficiencies and successes within the Trust and advising on appropriate prevention and control of any identified health and safety risks. The Health and Safety audit schedule will be approved by the Health, Safety and Environment Committee. Monitoring of audits will be carried out by the Audit Committee.

6.3 Specialist Advisory Groups

These are ad hoc groups set up, with Health, Safety and Environment Committee approval, to examine particular issues for the Trust. They will:

- 6.3.1 Develop Health, Safety and Welfare Policies and strategies for the Trust;
- 6.3.2 Advise the Trust Health, Safety and Environment Committee on resource issues;
- 6.3.3 Make recommendations on developing or changing safety procedures or systems; and
- 6.3.4 Consider accident report statistics and trends related to their area of study in order to recommend corrective action.

6.4 Health, Safety and Environment Committee

The Health, Safety and Environment Committee is responsible to the Director of Corporate Affairs, (DCA), for monitoring the management of risks to Health and Safety throughout the Trust and consider the appropriate action to be taken (see Appendix 4 for the Committee Terms of Reference). To ensure that the UHB Trust achieves the aims and objectives as specified in this Policy the committee shall:

- 6.4.1 Consider Health and Safety policies, including specific policies for identified risks, and make recommendations to the DCA;
- 6.4.2 Approve Trust-wide Health and safety procedures;
- 6.4.3 Advise the DCA on the implementation of policies by means of regular audits, reports and recommendations made by the Specialist Advisory Groups;
- 6.4.4 Recommend action as appropriate where standards are not being met;

- 6.4.5 Consider reports on health, safety and environmental issues, e.g. incident reports, DOps Reports and audit reports;
- 6.4.6 Facilitate policy, procedures and information development in accordance with Trust systems; and
- 6.4.7 Ensure Health and Safety performance is regularly monitored.

7. References

HMSO - reprinted 1989	Health and Safety at Work etc. Act 1974
HMSO - Statutory Instrument 1999 No. 3242	Management of Health and Safety at Work Regulations 1999
HSE Books - reprinted in 2003 (ISBN 0 7176 1276 7)	HSG65 Successful Health and Safety Management
Department of Health July 2004	Health and Social Care Standards and Planning Framework 2005/06-2007/08
www.hse.gov.uk	Health & Safety Executive Website

8. Associated Policy and Procedural Documentation

A list of all Trust Health and Safety related policies and procedures can be found on the Trust's intranet, under Health and Safety.

Key Policies

Fire Safety in Trust Premises Policy

First Aid Policy

Mandatory and Statutory Training Policy

Policy & Guidance on Young Persons & Work Experience Placements within the Trust

Prevention and Management of Incidents including Serious Untoward Incidents Policy

Prevention and Management of Stress at Work Policy

Radiation Safety Policy

Risk Management Policy

Violence and Aggression Policy

Waste Policy

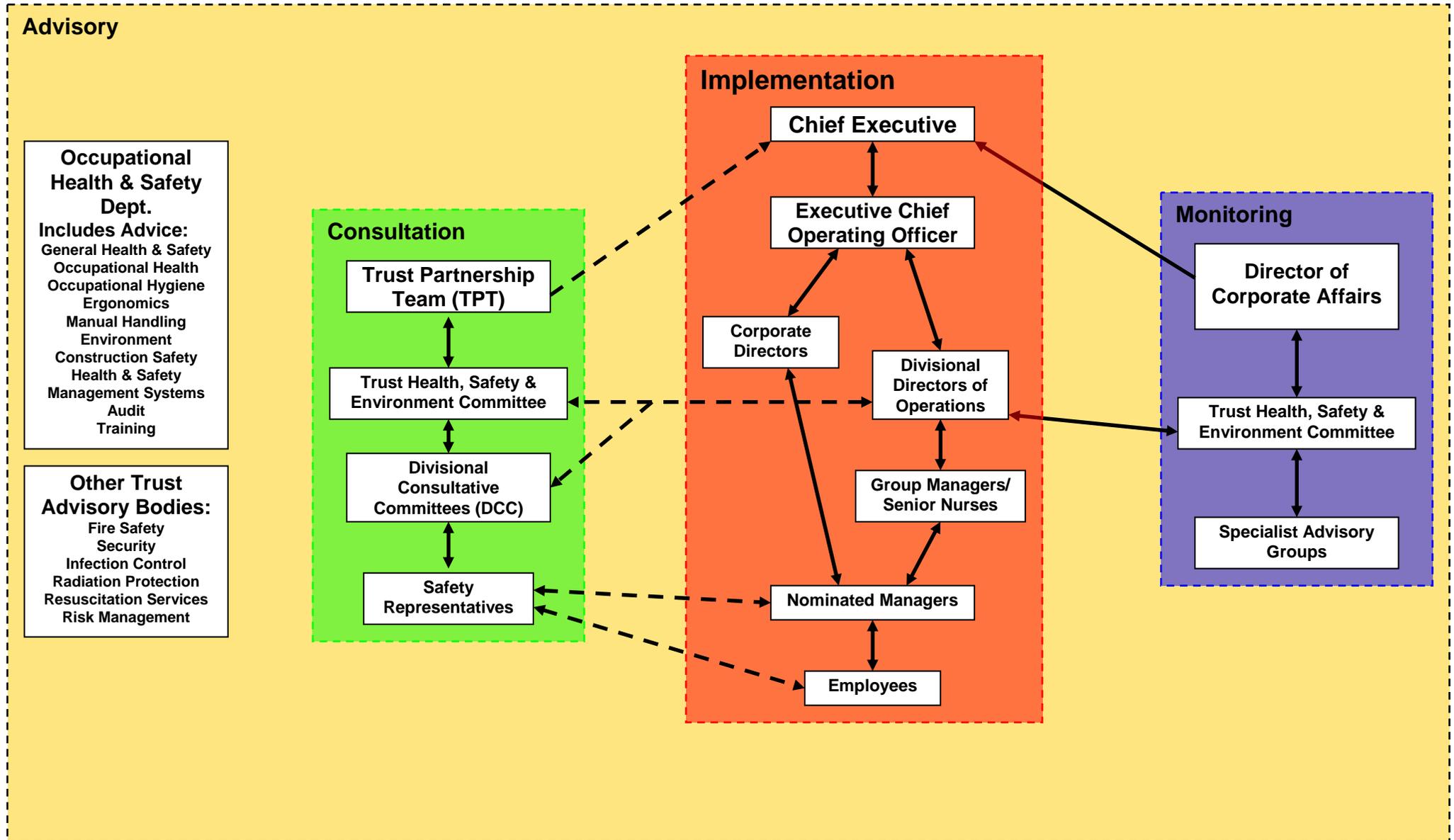
Key Procedures/Guidance

Asbestos Policy and Procedures

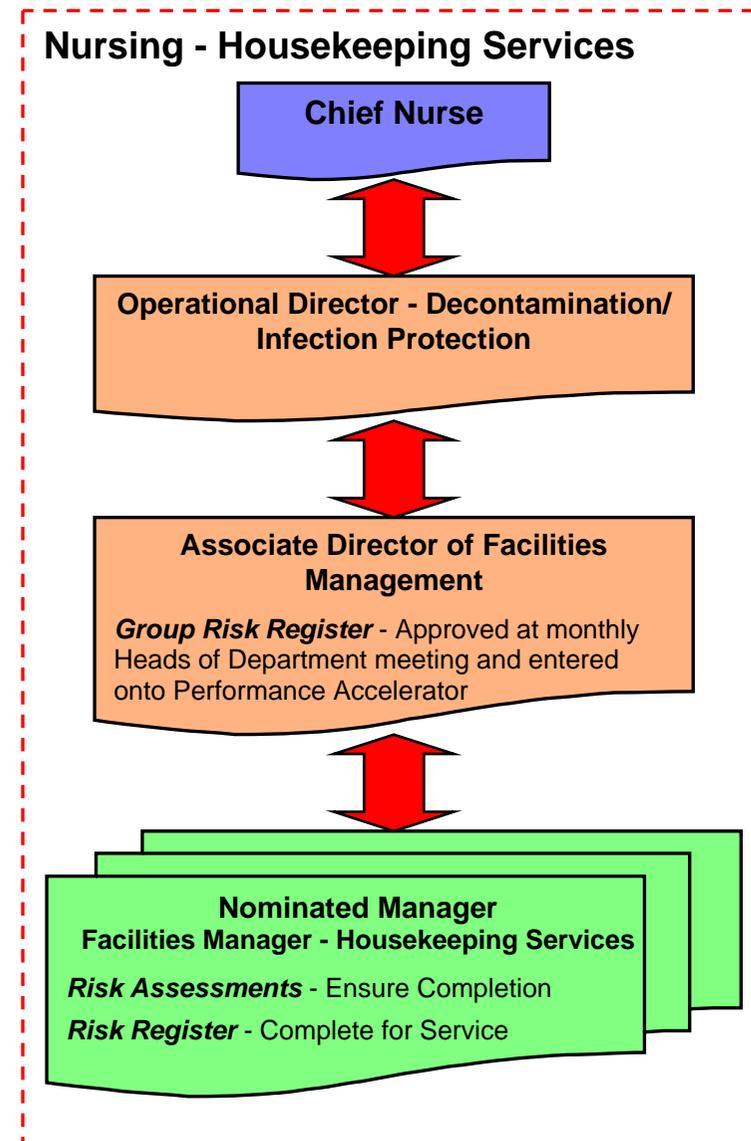
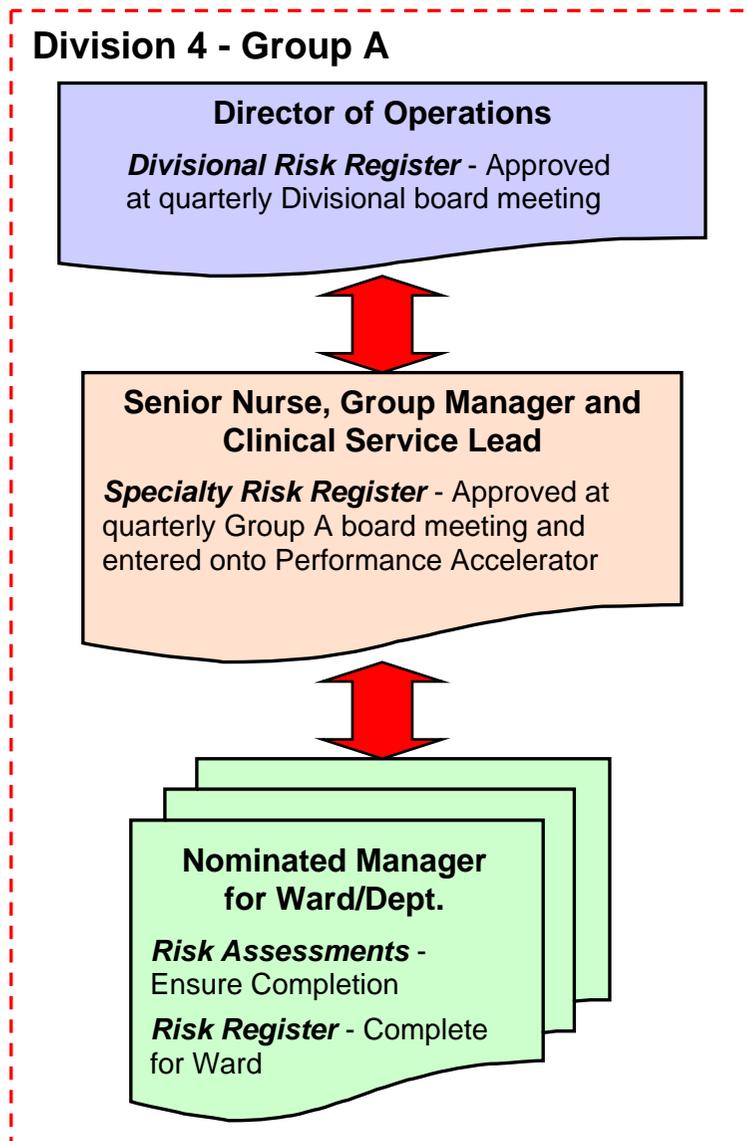
COSHH Procedure

Display Screen Equipment Procedure
Health & Safety Records Guidelines
Investigation of Incidents including Serious Untoward Incidents Procedure
Management of Serious Untoward Incidents Procedure
Management of Spillages Procedure
Manual Handling Procedure
Prevention and Management of Violence & Aggression at Work Procedures
Procedure for the Development and Management of Risk Registers
Slips, Trips and Falls Prevention Guidelines
Stress Prevention and Management at Work Procedures

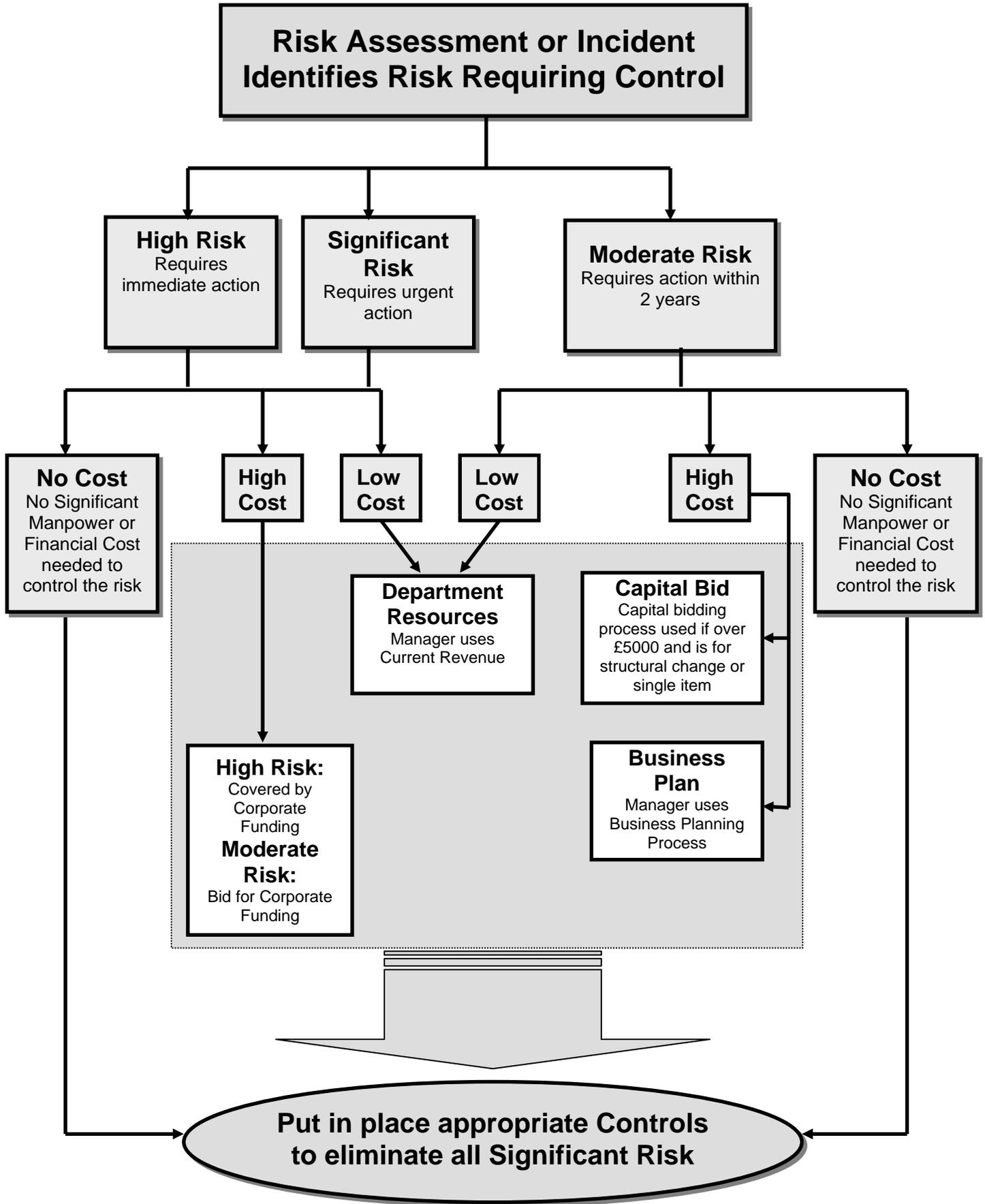
Appendix 1: Trust Organisation for Health and Safety



Appendix 2: Examples of Trust Systems for Managing Risks



Appendix 3: Resources Flow Diagram



Appendix 4: Terms of Reference

Health, Safety and Environment Committee

Reporting Arrangements

The Health, Safety and Environment Committee reports to the Chief Executive through the Director of Corporate Affairs.

Membership

Director of Corporate Affairs (Chair)
Divisional Directors of Operations
Head of Occupational Health and Safety
Director of Human Resources
Specialist Health and Safety Adviser(s)
Risk Manager
RCDM Representative
New Hospital Project Representative
Trust Security Management Specialist
Trust Fire Safety Manager
Staff Side Health and Safety Representatives
Ad hoc membership as required

Terms of Reference

- ◆ Advise the Chief Executive to enable the Trust to achieve the aims and objectives specified in the Trust Health and Safety Policy and Healthcare Standards.
- ◆ Make strategic decisions on the development of a Health and Safety culture within the Trust and to consider priorities and resourcing issues.
- ◆ Consider Health and Safety policies, including policies for identified risks and make recommendations to the Chief Executive.
- ◆ Approving Trust-wide H&S procedures
- ◆ Advise the Chief Executive on the implementation of policies, procedures and standards.
- ◆ Receive regular audits and reports.
- ◆ Receive and review recommendations made by the Specialist Advisory Groups.
- ◆ To monitor standards to ensure they are being met.
- ◆ Consider reports on health, safety and environmental issues.
- ◆ Encourage the protection and promotion of employee health.

Frequency of Meetings

Quarterly Meetings

Appendix 5: Policy Standards

Policy Standard	Evidence	Where held	Monitored By	Responsible for Action
Nominated managers will conduct risk assessments and review them at least annually	Completed risk assessment forms, blank forms available on Trust Intranet.	Electronic Health and Safety folders	H&S Audit Team Directors of Operations Inspections	Nominated managers
All health, safety and welfare risks identified by risk assessment or incidents will be managed.	Priority actions completed on Risk Registers at all levels in the Trust	Risk register held at departmental, specialty and divisional level. Risk registers also held at Clinical Governance Dept.	H&S Audit Team Clinical Governance Dept. Directors of Operations Inspections Divisional Consultative Committee (DCC)	All Managers in Trust
All Health, Safety and Welfare Incidents will be reported, recorded and followed up with identified actions completed	Datix incident database Quarterly incident report to Trust Health, Safety and Environment Committee Audit reports	Clinical Governance Occupational Health and Safety Dept.	Risk Management Adviser Occupational Health and Safety Advisers Senior Nurses (Modern Matrons)	Line managers
All nominated managers will undertake appropriate Health and Safety training. This includes the Managing Risks e-learning course (workshop day to be attended on completing the course).	Training attendance data	Electronic Staff Record Departmental training records.	Training Administration	Nominated managers
Directors of Operations and Executive Directors will carry	Completed inspection	Directors of	Directors of	Director of Operations

Policy Standard	Evidence	Where held	Monitored By	Responsible for Action
out a rolling program of inspections of their wards/departments.	checklist proformas (all wards/ departments over a 2 year rolling period)	Operations. Executive Directors	Operations Health, Safety and Environment Committee (Bi-yearly summary)	Executive Directors
Directors of Operations to maintain a chart detailing Health and Safety responsibilities and accountabilities for their Division	Divisional Health and Safety Chart	Directors of Operations	Health, Safety and Environment Committee	Director of Operations
Monitoring across the Trust to ensure Health, Safety and Welfare strategies are implemented successfully.	Divisional Directors of Operations Inspections checklist proformas Audit reports Ad hoc reports	Directors of Operations Occupational Health and Safety Dept.	Directors of Operations H&S Audit Team Occupational Health and Safety Dept. Specialist Advisers	Directors of Operations Occupational Health and Safety Dept. Specialist Advisers
The Trust Health and Safety audit team to conduct a rolling program of departmental audits. At least 30 wards/departments will be audited a year.	Audit reports	Occupational Health and Safety Dept.	Health, Safety and Environment Committee Audit Committee	H&S Audit Team
The Trust Health and Safety audit team to conduct a full systems audit every three years	Audit reports Health, Safety and Environment Committee minutes	Occupational Health and Safety Dept.	Head of Occupational Health and Safety Dept. Health, Safety and Environment Committee Audit Committee	H&S Audit Team
All employees to attend mandatory and job specific Health	Training attendance	Electronic Staff	Learning &	All employees

Policy Standard	Evidence	Where held	Monitored By	Responsible for Action
and Safety training	data Training data at departmental level	Record Departmental training records	Development Dept. Line Managers H&S Audit Team Directors of Operations Inspections	Line managers
Inclusion of Health and Safety performance data and future objectives in the annual Trust business plan and annual report.	Trust business plan Trust annual report	Trust Headquarters	Executive Directors	Director of Corporate Affairs
Trust Health, Safety and Environment Committee to meet quarterly.	Minutes of meetings	Occupational Health and Safety Dept.	Head of Occupational Health and Safety Dept.	Director of Corporate Affairs (Chair of meeting)
Divisional consultative committees have Health and Safety as a standing agenda item	Minutes of meetings	Directors of Operations	Directors of Operations	Directors of Operations
Annual report on Occupational Health and Safety to be submitted to the Trust Board.	Copies of Board reports	Occupational Health and Safety Dept.	Head of Occupational Health and Safety Dept.	Head of Occupational Health and Safety Dept.