Ashford and St. Peter's Hospitals NHS
NHS Foundation Trust

TRUST BOARD
16th December 2010

TITLE	**Health and Safety Policy**
EXECUTIVE SUMMARY	This policy is written to comply with section 2(3) of the Health and Safety at Work etc Act 1974 which requires employers to produce a written health and safety policy.
BOARD ASSURANCE (Risk) IMPLICATIONS	Failure to produce a written health and safety policy would render the Trust liable to prosecution.
STAKEHOLDER / PATIENT IMPACT AND VIEWS	Any stakeholder would expect the Trust to have produced a written health and safety policy and may demand to inspect it.
EQUALITY AND DIVERSITY ISSUES	None
LEGAL ISSUES	Potential for prosecution if the Trust fails in its duty to produce a written health and safety policy.
The Trust Board is asked to:	Ratify the policy
Submitted by:	Colin Matthew, Health, Safety and Security Advisor on behalf of Susan Osborne, Interim Chief Nurse
Date:	7 December 2010
Decision:	For Approving

Ashford and St. Peter's Hospitals NHS
NHS Foundation Trust

ASHFORD & ST PETER'S HOSPITALS NHS FOUNDATION TRUST

HEALTH & SAFETY POLICY

Amendments			
Date	Page(s)	Comments	Approved by
Oct 10	All	Full document review and updated Equality Impact Assessment Archiving details and previous issues and amendments are available from the Quality Department	Safety and Risk Committee

Compiled by: Colin Matthew, Health safety and Security Advisor
Approved by: Safety and Risk Committee
Date: December 2010

Date of Next Review: October 2012
Comments on this document to: Colin Matthew, Health, Safety and Security Advisor

ASHFORD & ST PETER'S HOSPITAL NHS FOUNDATION TRUST

HEALTH AND SAFETY POLICY

1.0 INTRODUCTION

The Health and Safety at Work etc. Act 1974 places duties on employers to ensure the health, safety and welfare at work of employees and of all those connected with the Trust's activities. In addition there is a statutory duty for employers to produce a statement of its policy on health and safety at work.

This document is the **Health and Safety Policy** of the Ashford and St. Peter's Hospitals NHS Foundation Trust and reflects the views of the Trust on all matters relating to health, safety and welfare.

The Policy consists of three sections:

1 Policy Statement
The Policy Statement of intent is the written declaration by the Chief Executive on behalf of the Trust's Board, as to the Trust's intentions with regard to the health, safety and welfare of Trust employees and others who may be affected by the Trust's operations.

2 General Responsibilities
This section deals with personal responsibility for health and safety and welfare at work. Everyone from the Chief Executive to each and every employee will have responsibilities in implementing this policy.

3 Practical Arrangements
This section deals with the policies/procedures which have been or will be introduced to make sure that the policy actually works. It includes procedures for the recognition of hazards, investigating accidents and arrangements for dealing with emergencies.

Everyone employed at the Trust has a legal duty to co-operate in matters of health and safety which includes complying with the requirements of this policy. It is therefore important that you acquaint yourself with this policy and the promotion of its implementation.

2.0 POLICY STATEMENT

HEALTH AND SAFETY POLICY STATEMENT

The Chief Executive is ultimately responsible under the Health and Safety at Work Act 1974 for Health and Safety matters within the Ashford and St. Peter's Hospitals NHS Foundation Trust.

The Policy is:

- To provide a healthy and safe environment in which to carry out the activities of the Trust.

- To ensure that all staff are aware of the Trust's and their own responsibilities under the Act.
- To establish proper procedures for all known hazardous or risky operations.
- To promote safety consciousness for all day to day working practices taking due regard of any risk to health that may occur.
- To ensure that any processes undertaken by the Trust do not adversely affect the public or the environment.

To assist in implementing the policy and to enable the responsibility under the Act to be achieved, the following roles specific to Health and Safety have been identified. Specialist information and guidance can be obtained by contacting the appropriate number:

Health and Safety	2227	Occupational Health	2404
Infection Control	2128	Fire Safety	2268
Manual Handling	3664	Security	
2227			

There is a Trust Health and Safety Committee comprising of members from management and staff together with specialist advisors. Each site has its own Health and Safety Forum consisting of management and staff representatives.

Health and Safety audits which are carried out at regular intervals monitor the effectiveness of controls and arrangements implemented by all managers in response to risk assessments initiated and carried out in their areas.

All employees have a duty placed upon them by the Health and Safety at Work etc. Act 1974 to ensure that their actions or failures to act do not place themselves or others at avoidable risk. It is in the interest of all, that anyone becoming aware of anything within their area of work which they may feel to be a Health and Safety hazard should report it to their manager, safety representative or a member of the Trust Health and Safety Committee.

Comprehensive details of safety arrangements in support of this statement are contained in the Trust's Health and Safety policy document and the individual departmental Health and Safety policies which are held and controlled by departmental managers.

Andrew Liles
Chief Executive **Revised**
December 2010

3.0 GENERAL RESPONSIBILITIES

In order to implement the above statement, everyone has certain health and safety duties and responsibilities.

3.1 The Trust Board

The Trust Board have a legal duty to ensure the health, safety and welfare at work of all who work at the Trust and those connected with its undertaking's. Although the legal duty remains theirs, they may delegate their duty to the Chief Executive. However, the Trust Board will ensure that the Chief Executive is provided with all the necessary resources and assistance that is needed in order for the legal duty to be performed and will, periodically, take measures to satisfy themselves that the performance of the legal duty, which has been delegated to the Chief Executive, is implemented.

3.2 Chief Executive

The Chief Executive will implement and ensure that the Health and Safety Policy is, periodically and as circumstances determine, revised and that such revisions are brought to the attention of every employee. He will ensure that the resources made available by the Trust Board are used in an efficient and cost effective manner, so as to ensure that maximum benefit is derived from them in the interests of health, safety and welfare at work of employees. In the execution of the duties placed upon him by Health and Safety legislation and this policy, the Chief Executive will delegate the performance of those duties to the Chief Nurse.

3.3 Chief Nurse

The Chief Nurse will have the overall executive responsibility for the Health, Safety and Welfare of the Trust. She will:

1) Ensure that the Health and Safety Policy is communicated to everyone who works at the Trust.
2) Ensure that the Health and Safety Policy is implemented by everyone who works at the Trust.
3) Report to the Chief Executive on the following matters;
   i) The effectiveness of the Health and Safety Policy in reducing workplace accidents and work related ill health.
   ii) Any deficiencies of the Health and Safety Policy in reducing workplace accidents and work related ill health and eradication of those deficiencies.

The Chief Nurse may delegate the performance of some of the duties placed upon her by Health and Safety legislation and this policy to managers, supervisors and others who are under her control.

3.4 Directors and Divisional General Managers

Directors and Divisional General Managers will be responsible to the Trust for health, safety and welfare on a day to day basis. Specifically they will report to the Chief Nurse on the following matters:

1) The effectiveness of the Health and Safety Policy in reducing workplace accidents and work related ill heath.
2) Any deficiencies of the Health and Safety Policy in reducing workplace accidents and work related ill health and the measures necessary to eradicate the deficiencies identified.

In addition the Directors and Divisional General Managers will have the authority to:

3) Order Health and Safety improvements.
4) Order the cessation of unsafe practices.
5) Order compliance with:
   a) The Health and Safety at Work etc. Act 1974.
   b) Health and Safety regulations.
   c) Any Health and Safety rules made by the Chief Executive acting on behalf of the Trust Board.

Furthermore, the Directors and Divisional General Managers will:

6) Ensure that reported defects and hazards are attended to promptly and where appropriate, make recommendations to the Chief Nurse.
7) Ensure that the procedures for the reporting and investigation of incidents are properly used and maintained.

8) Ensure that matters concerning health, safety and welfare are communicated effectively to employees working at the Trust.

9) Make recommendations to the Chief Nurse with regard to the provision of financial resources for Health, Safety and Welfare.

10) Nominate a deputy who shall perform the Health and Safety duties in their absence.

11) Make adequate financial provision for Health and Safety requirements including safety equipment and safety training.

3.5 Heads of Department/Service Managers

Each Head of Department/Service Manager will have the overall responsibility for Health, Safety and Welfare within their own department. Specifically they will:-

1) Ensure that the Trust/Departmental policy is implemented by everyone for whom they have managerial responsibility.
2) Ensure that the Trust/Departmental policy is communicated to everyone for whom they have managerial responsibility.
3) Ensure that supervisory staff understand and put into practice the duties placed upon them by current health and safety legislation and by the requirements of this policy including policies and procedures pertaining to their department.
4) Monitor the work place under their control to ensure that it remains safe and free from risk to the Health and Safety of employees.
5) Ensure that reported defects and hazards are attended to promptly.
6) Acquaint themselves with the safe procedures of work which may be in operation.
7) Acquaint themselves with current Health and Safety legislation in so far as it might apply within their own department.
8) Ensure that good Health and Safety is practised by employees under their control by setting a good example.
9) Ensure that all visitors and contractors are aware of relevant safety procedures.
10) Ensure that all work equipment is suitable for the purpose, used only for the purpose and in the condition for which it is intended and that such work equipment is maintained in good repair, efficient working order and free from defects.
11) Ensure that all employees under their control receive such information, instruction training and supervision so as to ensure that they remain free from risks to their health and safety.
12) Ensure that the procedures for the reporting and investigation of incidents are properly used and maintained.
13) Maintain safe access to and egress from the workplace under their control.
14) Co-ordinate the risk assessment process within their own department, by heading a risk assessment team which will consist of such people as are appropriate at the time for the purpose of carrying out risk assessments. Risk assessments are to be carried out in accordance with the Trust's Risk Assessment Policy.
15) Ensure that significant findings identified while conducting risk assessments are communicated to employees, in so far as the significant findings affect them.
16) Comply with Trust Wide Policies.

17) Ensure that health and safety concerns are included as an agenda item at every staff meeting.

18) Make known to the Chief Nurse any resources or requirements that cannot be met within the department's existing budget.

19) Ensure that annual internal audits are carried out in all areas under their control.

3.6 Line Managers/ Ward Sisters/Charge Nurses/ Supervisors

Managers will have overall responsibility for the Health, Safety and Welfare of those persons who report to or who are assigned to them. Specifically they will:

1) Organise work areas under their control in such a way so as to ensure that all work is undertaken safely and without risks to the health and safety of employees.

2) Acquaint themselves with the safe procedures of work which may be in operation.

3) Undertake regular and routine inspections of the workplace under their control.

4) Ensure that the procedures for reporting and the investigation of serious incidents are properly used.

5) Assist in the identification of safety training needs within their own work group. Ensure attendance of new staff at induction courses.

7) Investigate all incidents, accidents, concerns and near misses within their own Department and provide their Head of Department with a written report on the findings of such investigations, together with recommendations as to the measures necessary to prevent a reoccurrence.

8) Motivate staff under their control to behave in a safe manner by setting a good example.

9) Assist in the execution of risk assessments.

3.7 Quality Department

The Quality Department is responsible for the management of all Clinical Risk and the management of incident reporting. All completed incident forms must be sent directly to the Quality Department where they will be responsible for:

1. Collating and coding all incident forms.
2. Ensuring that all received incident forms relating to accidents are immediately sent to the Health, Safety and Security Advisor.
3. Ensuring that all incident forms are kept for a minimum of 3 years.
4. The dissemination of incident forms to those whose specialist knowledge will play an active role in the prevention of such incidents.
5. Ensuring that all incident forms are easily retrievable for the purpose of:
   i) Further investigation.
   ii) Statistical analyses.
   iii) Epidemiology studies.
   iv) Litigation claims.
   v) Measuring the effectiveness of the Health and Safety Policy.
   vi) Measuring any deficiency of the Health and Safety Policy.

3.8 Estates Department

The Estates Manager will have overall responsibility for ensuring that all buildings, premises, plant and equipment are maintained in a safe condition, good repair and in efficient working order. He will also devise and maintain procedures which are designed to ensure that reported defects are prioritised according to the risks to health and safety and attended to promptly. In addition they will:

1) Implement the requirements of the CDM Construction (Design and Management) Regulations 1998, and all other relevant legislation.
2) Ensure that all maintenance work (including that undertaken by contractors) is carried out strictly in accordance with a safe procedure of work.
3) Ensure that all contractors are aware of the safety procedures which are currently in force and that such procedures are adhered to.
4) Prior to the commencement of any extraordinary or new works, liaise with the Health Safety and Security Advisor.
5) Assist in the execution of risk assessments.

3.9 Health, Safety and Security Advisor

The Health Safety and Security Advisor is the designated competent person who provides health and safety assistance to the Trust Board and the Corporate Management Team.

The Health, Safety and Security Advisor has the authority to order the cessation of any process or activity which he considers to be unsafe or in breach of the Health and Safety at Work Act or any of the Health and Safety Regulations.

The Health, Safety and Security Advisor will:

1) Provide Health and Safety advice and assistance to all levels of staff.
2) Provide competent and professional advice and assistance with regard to formulation and revision of the safety policy.
3) Assist in the devising of health and safety procedural notes.
4) Keep Directors and Managers advised with regard to actual or anticipated changes in health and safety legislation and accepted best practices.
5) Undertake workplace inspections and provide reports to management on such inspections.
6) Co-ordinate and oversee a programme of Health and Safety risk assessments throughout the whole of the workplace on a departmental basis.
7) Undertake accident and dangerous occurrence investigations and provide management and, when required by law, the Health and Safety Executive, with reports of such incidents and dangerous occurrences.
8) In conjunction with the Occupational Health Department undertake investigations into cases of work related ill heath and provide management and, where required by law, the Health and Safety Executive, with reports on such cases.

9) Undertake health and safety audits in order to determine the effectiveness of the health and safety management procedures and where appropriate, make recommendations as to the measures necessary to rectify failings in the procedures.

10) Provide support and assistance to those who are required to implement the requirements of the safety policy and any of the safety management procedures.

11) Assist in the identification of health and safety training needs and, where appropriate, deliver or arrange to be delivered, such training as may be necessary for the health and safety of employees.

12) Submit reports of all incidents which are reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 to the enforcing authority.

3.10 Fire Safety Advisor

The Fire Safety Advisor is designated by the Trust as a specialist officer responsible for the implementation and administration of fire precautions/procedures/prevention. Managers within the Trust should consult the Fire Safety Advisor when necessary, or refer to him any matters relating to fire precautions/prevention. In addition his responsibilities are:

1) To assist the Trust in carrying out its fire precautions responsibilities.

2) To advise the Chief Executive and all other managers on fire precautions.

3) To recommend, where necessary, the order of priorities.

4) To survey and report on the standards of fire safety in the Trust premises.

5) To prepare staff training programmes and liaise with the Training Manager and departmental manager in the organisation of fire drills and training exercise.

3.11 Local Security Management Specialist (LSMS)

The LSMS is designated by the Trust as a specialist manager responsible for the implementation of all security matters including the prevention and detection of crime. Managers within the Trust should consult the LSMS when necessary, or refer to them any matters relating to security. In addition his responsibilities are:

1) To assist the Trust in carrying out its security responsibilities.

2) To advise the Chief Executive, the Security Management Director and all other managers on security, and act as an advisor of various committees including:- The Security Group.

3) To recommend, where necessary, the order of priorities.

4) To survey and report on the standards of security within Trust premises and to carry out security risk assessments.

5) To prepare staff training programmes and liaise with the Education and Training Manager and Departmental Managers in the organisation of training exercises. Including providing induction security lectures and Conflict Resolution training.

6) To investigate all cases of theft, and any other security related incidents.

3.12 Manual Handling Co-ordinator

The Manual Handling Co-ordinator is designated by the Trust as a specialist person responsible for ensuring that all risk emanating from manual handling activities is controlled to an acceptable level.

The Manual Handling Co-ordinator's responsibilities will include:

1) Implementation and the monitoring of the Trust Manual Handling Policy and Procedures.

2) Assessing and advising on the ergonomics of the working environment and specific manual handling tasks.

3) Developing and providing training in safe handling techniques.

4) Advising on areas of risk regarding manual handling operations.

5) Following up any accident/incident or near miss report involving manual handling.

6) Auditing the need for manual handling equipment.

7) Advising on the purchase of manual handling equipment.

3.13 Occupational Health Department

The responsibilities of the Occupational Health Department will be to provide health surveillance to particular staff exposed to occupational hazards in accordance with the Trust's Policy and current legislation. The department will also be responsible for Pre-employment Medical Screening for every prospective employee as part of the selection and recruitment procedure. Furthermore they will be responsible for:

i) Health education

ii) Rehabilitation and resettlement

iii) To assist and advise where a risk to health exists.

3.14 Health and Safety Committee

The Trust maintains a Health and Safety Committee. Its objectives are to be a proactive force in promoting the highest standards of health and safety. The Health and Safety Committee will meet as often as is necessary for the purposes of meeting the above objectives but, in any case, at least four times per year.

In pursuance of their objectives, the Health and Safety committee will perform the following functions:

1) To review the measures that may be in force for the management of health and safety at work.

2) To propose changes to the measures in the above for the purposes of improving their effectiveness.

3) To receive reports on matters of Health and Safety from:

   a) Management
   b) Health, Safety and Security Advisor
   c) Occupational Health
   d) Security
   e) Risk Management
   f) The Fire Safety Advisor
   g) Safety Representatives
   h) Infection Control
   i) Radiation Protection
   j) Health and Safety Executive (H.S.E.)
   k) Manual Handling Co-ordinator

In addition a Health and Safety Forum will meet four times a year, on each site, where health and safety matters can be freely discussed by all interested parties. It will consist of site safety representatives, advisors and additional members of the site management, as well as members of the Trust Health and Safety Committee.

3.15 Employees

In addition to the specific responsibilities set out above, every employee will:

1) Take reasonable care for their own safety.

2) Take reasonable care for the safety of anyone else who might be affected by their acts or omissions.

3) Work in accordance with the information, instructions and training given.

4) Report all hazards and defects to their manager or supervisor.

5) Report any unsafe acts, unsafe conditions or any deficiencies in the safety arrangements to their manager or supervisor.

Further more no employee shall:

6) Intentionally interfere with, or misuse anything that has been provided in the interests of health, safety and welfare at work.

7) Undertake any work for which authorisation and or training has not been given.

8) Bring to work any item of equipment (including electrical appliances) or any substance for which authority has not been given.

4.0 PRACTICAL ARRANGEMENTS

In order to implement the Trust's Health and Safety Policy Statement, Health and Safety management procedures will be implemented and maintained. These Health and Safety management procedures are set out in the following section.

4.1 Recruitment of Employees and Pre-Employment Medical Screening

Every prospective employee will, as part of the selection and recruitment procedure, be required to undergo pre-employment medical screening which will include the completion of a pre-employment medical questionnaire and, if appropriate, a medical examination prior to an offer of employment being made.

One purpose of such pre-employment medical screening is to identify anyone who, because of the nature of the employment being offered, may be exposed to an increased risk to their health and safety.

4.2 Agency Employees

All Agencies will be provided with information on the qualifications and skills required to carry out the work and any specific features of the job which relate to the employee's safety.

Heads of Departments must ensure that all temporary staff are made aware of the existing emergency procedures and the action to be taken should an emergency situation arise. Departmental Health and Safety training should cover topics similar to those included on the Trust induction course. Additional topics that could be dealt with include:

a) the work area.
b) work procedures.
c) personal protective equipment (PPE) — types available.
d) health surveillance.
e) site safety rules.

In order for temporary workers to conform to site procedures, site rules must be brought to their attention and in particular any safety rules relating to their department or work area.

4.3 Purchase of Equipment, Materials and Substances

Any item of equipment or any materials or substances which are purchased for use at the place of work will only be purchased through NHS Supplies.

Such purchases will specify the characteristics of anything purchased in terms of compliance with health and safety standards which may be defined in:

a) Any European Standard.

b) Any British Standard.

c) Any Industry Standard.

d) Any standard specified in any appendices to any Health and Safety Regulations made under the Health and Safety Work Act 1974.

4.4 Training and Dissemination

The policy will be disseminated through the Aspire bulletin and will be placed on the Trust intranet.

Health and Safety Training will be provided for every employee. The type of training provided will be decided by such factors as:

1) The nature of the work associated with each post.

2) The training needs identified by risk assessment.

3) Any special needs of the employee required to carry out the work specified by the post.

Health and Safety training should be provided in the following circumstances:

a) Upon induction as a new employee.

b) When new responsibilities are assigned.

c) When new equipment is introduced.

d) When procedures of work are changed.

e) After a prolonged absence from work.

f) After a case of work related ill health.

g) After an accident or near miss.

h) In the light of changes in health and safety legislation.

i) At such times as may be decided by management.

Records of health and safety training will be kept in respect of each and every employee to ensure that:

a) All training is recorded.

b) There is confirmation that each employee has received training by the placing of the manager's signature on the training record.

c) There is confirmation that the employee's understanding of and the ability to apply the training has been checked by the employee's manager or supervisor.

The understanding of, and practical application of health and safety training by employees, will be checked periodically by the employee's supervisor or manager and a record of such checks will be kept.

4.5 Induction Training

The Trust recognises the importance of induction training for all full and part time employees, trainees, volunteers, and those on work experience programmes. Also included are those on temporary contracts.

Induction training provided will address the following topics:

1) Emergency Procedures

   a) raising the alarm.
   b) alarm recognition.
   c) emergency telephone numbers.
   d) fire exits and assembly points.
   e) location of fire fighting equipment.
   f) first aid assistance.

2) Health and safety organisation

   a) issue of a personal copy of the Safety Policy Statement.
   b) explanation of the Safety Policy and personal responsibility.
   c) hazard reporting procedures.
   d) incident reporting procedures.

3) Job specific

   a) job related hazards.
   b) risk control measures.
   c) safe procedures of work.
   d) use of procedural notes (where applicable).

4.6 Hazard Identification

Hazards are defined as those things which potentially could be harmful, and their identification is the first step in accident and ill health prevention.

A procedure will be introduced to enable all hazards to be reported and recorded. Hazards will be identified as a result of:

a) Employees being vigilant during the course of their daily work.
b) Workplace inspections undertaken by managers and supervisor.
c) Workplace inspections undertaken by safety representatives.
d) Formal risk assessments.
e) Incident Reports.

Furthermore, the procedure for the identification of hazards will enable each hazard to be classified within one of the four categories Physical, Ergonomic, Biological or Chemical. In order to carry out the appropriate assessment, reference should be made to the regulations under the Health and Safety at Work Act 1974.

4.7 Risk Assessment

Risk assessments will be carried out in accordance with the Trust's Risk Assessment Policy. The method of risk assessment will be applied uniformly and consistently across the whole range of activities carried out at the Trust and the significant findings of such risk assessments will be recorded in the format laid out in the policy which will be standardised across all departments across the Trust.

4.8 Provision of Information to Employees

In accordance with the requirements of Regulation 8 of the Management of Health and Safety at Work Regulations 1992 every employee will be provided with comprehensive and relevant information on:

1. The risks to their health and safety identified by the assessment.

2. The preventative and protective measures which have been introduced and which should be used by them in order to reduce the risks to which they are exposed.

3. Safe Procedures of Work.
   No work will be undertaken or any tasks performed unless it is in accordance with a safe procedure of work. Such safe procedures of work will be derived from either:

4. Risk assessments.

5. Task specific instructions.

6. Health and safety guidance notes.

7. Manufacturers and suppliers instructions.

Where tasks pose a significant risk to health and safety they will not be undertaken unless a permit to work has been issued, such tasks may include:

8. Work on electrical equipment whether dead or live.

9. Work in a confined space.

10. Work at height (over 2 metres).

11. Hot Work.

4.9 Incident Reporting and Recording

1) All incidents, concerns, near misses and accidents will be reported immediately to the Supervisor, Manager or Head of Department whichever is the most appropriate in the circumstances, and a written report submitted using the Trust Incident Reporting form, copies of which are held by each Head of Department or their deputy.

2) Any incident, near miss or accident which involves an employee who is working away from the Trust or is on a training course, must be reported by that employee to the person responsible at the location where the incident occurred. In addition, a report must be submitted in accordance with (1) above when the employee returns to their normal place of work.

3) All incidents, near misses and accidents which involve patients, visitors or a member of the public will be reported in accordance with paragraph (1)

The Management have a statutory duty to report certain incidents to the enforcing authorities (Health and Safety Executive) and the co-operation of staff in complying with the procedures set out in this policy document is of paramount importance in assisting the Trust to meet its statutory duties.

4.10 First Aid Provision

The Trust will maintain a suitable number of qualified/appointed First Aiders in accordance with the Health and Safety (First Aid) Regulations 1981 in order that First Aid may be administered at any time when employees are at work.

The telephone number for First Aid and a list of qualified first aiders should be displayed in each department.

4.11 Health Surveillance

In order to monitor the effectiveness of the measures introduced to reduce risks to the health of employees, a programme of health surveillance will be undertaken which will be co-ordinated by the Occupational Health Department.

Examples of the circumstances which may be selected for a programme of health surveillance will include:

1) Exposure to respiratory irritants.

2) Cytotoxic drug handling.

3) Exposure to excessive noise.

4) Asbestos.

5) Ionising Radiation.

4.12 Selection of Contractors

Every employer or self employed person, who expresses an interest in tendering for contracted-out work on behalf of line management at the Trust, will be subjected to an appraisal and selection procedure.

Such procedures will require them to submit the following:

1) A properly prepared Health and Safety Policy.

2) A systematic programme of risk assessment.

3) Safe procedures of work.

4.13 Vehicles

Any vehicle or 'ride on' item of equipment which is used to transport material, or waste will undergo a strict maintenance programme. Pre-shift maintenance checks will be carried out on each vehicle. Defects highlighted during such checks will cease the operation of that vehicle immediately. Staff using such equipment will receive training in its use in order that it may be used safely.

4.14 Arrangements for Emergencies and Imminent Danger

In order to ensure the safety of employees, patients, visitors and members of the public and to comply with the requirements of Regulation 7 of the Management of Health and Safety at Work Regulations, procedures will be devised which will be implemented in the event of emergency or imminent danger.

Each department or work area will have a plan for the purposes of the safe evacuation of persons in the event of emergency or imminent danger.

4.15 Monitoring, Auditing and Review

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 Safety and Security Advisor will ensure that the policy is monitored annually and steps taken to address any issues of non compliance.

Such monitoring will be either active or reactive in nature.

Examples of active monitoring include:

a) Work place inspections.
b) Spot checks.
c) Testing of employee understanding.
d) Auditing.

Examples of reactive monitoring include:

a) Analysis of accident/near miss/ill health statistics.
b) Analysis of accident/near miss investigation reports.
c) Consideration of health and safety concerns from Safety Representatives.
d) Responses to concerns, improvements and prohibition notices issued by the Health and Safety Executive.

Any areas of non compliance will be brought to the attention of the Divisional General manager or Head of Department by the Health Safety and Security Advisor.

An annual report will be made to the Chief Nurse by the Health, Safety and Security Advisor on the performance of the Health and Safety management procedure and their effectiveness in meeting the standards set out in this safety policy document. The Chief Nurse will provide an annual report to the Trust Board.

4.16 Workplace Inspection

Inspection of the Department/Ward will be carried out by the following persons and in the following circumstances:

1) Daily	Informally by every employee going about their daily business.
2) Fortnightly	By each Line Manager
3) Regularly	By the Health, Safety and Security Advisor where a report shall be submitted to the respective Head of Department as required.
4) Annually	A departmental audit instigated by the Head of Department. The Audit may be executed by an audit team.

4.17 Policies/Procedures

Specific policies/procedures to be followed in individual areas of risk will be contained in the Risk Management Volume of the Trust's Policy/Procedures. They will be ratified by the Non Clinical Risk Management Committee. When a matter is considered to require full membership approval it shall first be referred to the Trust Health and Safety Committee.

4.18 Review of this Policy

This policy will be reviewed as circumstances dictate, and if such reviews determine that the policy should be revised, then such revisions will take place after due consultation with the Health and Safety Committee.

Any amendments will be ratified by the Safety and Risk Committee on behalf of the Trust.

All revisions to this policy document will be brought to the attention of every employee.

5. ARCHIVING ARRANGEMENTS

Responsibility for archiving trust-wide policies lies with the Quality Department where all paper copies will be stored, and electronic folders have been set up to hold master copies.

Requests for retrieval of documents can be made to the Quality Dept.

6. EQUALITY IMPACT ASSESSMENT

The Trust has a statutory duty to carry out an Equality Impact Assessment (EIA) and a copy is attached to this policy.

7. IMPLEMENTATION AND TRAINING

This policy and associated procedures will be available to all staff via the Intranet. Hard copies of this document should be kept locally for easy reference.

Managers are responsible for ensuring that their staff are aware of this policy and are kept informed of any changes or additions.

The contents of this policy will be included in mandatory training and induction.

8. REFERENCES AND BIBLIOGRAPHY

8.1 Bibliography

- Health and Safety at Work etc Act 1974
- Management of Health and Safety at Work Regulations 1999
- Personal Protective Equipment at Work Regulations 1992
- Workplace (Health, Safety and Welfare) Regulations 1992
- Manual Handling Operations Regulations 1992
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
- Control of Substances Hazardous to Health Regulations 2002
- Health and Safety (Display Screen Equipment) Regulations 1992
- The Health and Safety Information for Employees Regulations 1989

8.2 Additional Reading

- Health and Safety (First Aid) Regulations 1981
- Employers' Liability (Compulsory Insurance) Act 1969
- Provision and Use of Work Equipment Regulations 1998
- Noise at Work Regulations 1989
- Electricity at Work Regulations 1989
- Chemicals (Hazard Information and Packaging for Supply) Regulations 2002
- Construction (Design and Management) Regulations 1994
- Dangerous Substances and Explosive Atmospheres Regulations 2002
- Essentials of Health and Safety at Work (Third Edition) Guidance (HSE Books 1994 ISBN 0 7176 0716 X)
- Five Steps to Risk Assessment Leaflet INDG163(rev1)
- Workplace Health, Safety and Welfare: A Short Guide for Managers Leaflet INDG244 (HSE Books 1997 ISBN 0 7176 1328 3)

ASHFORD & ST. PETER'S HOSPITAL NHS FOUNDATION TRUST

Equality Impact Assessment Summary

Background • Description of the aims of the policy • Context in which the policy operates • Who was involved in the Equality Impact Assessment
This policy has been developed to comply with the requirements of the Health and Safety at Work etc Act 1974 to ensure that all staff are aware of their responsibilities under the Act.
Methodology • A brief account of how the likely effects of the policy was assessed (to include race and ethnic origin, disability, gender, culture, religion or belief, sexual orientation, age) • The data sources and any other information used • The consultation that was carried out (who, why and how?)
The policy is based on guidance provided by the Health and Safety Executive and is not likely to have any Equality or Diversity implications.
Key Findings • Describe the results of the assessment • Identify if there is adverse or a potentially adverse impacts for any equalities groups
The policy is based on current legislation and there are no potential impacts for any equality groups.
Conclusion • Provide a summary of the overall conclusions
The policy provides fair, consistent guidance on managing health and safety in the workplace.
Recommendations • State recommended changes to the proposed policy as a result of the impact assessment • Where it has not been possible to amend the policy, provide the detail of any actions that have been identified • Describe the plans for reviewing the assessment

No changes recommended.

Guidance on Equalities Groups

Race and Ethnic origin (includes gypsies and travellers) (consider communication, access to information on services and employment, and ease of access to services and employment)	**Religion or belief** (include dress, individual care needs, family relationships, dietary requirements and spiritual needs for consideration)
Disability (consider communication issues, access to employment and services, whether individual care needs are being met and whether the policy promotes the involvement of disabled people)	**Sexual orientation including lesbian, gay and bisexual people** (consider whether the policy/service promotes a culture of openness and takes account of individual needs
Gender (consider care needs and employment issues, identify and remove or justify terms which are gender specific)	**Age** (consider any barriers to accessing services or employment, identify and remove or justify terms which could be ageist, for example, using titles of senior or junior)
Culture (consider dietary requirements, family relationships and individual care needs)	**Social class** (consider ability to access services and information, for example, is information provided in plain English?)