
HEALTH AND SAFETY POLICY

Please be aware that this printed version of the Policy may NOT be the latest version. Staff are reminded that they should always refer to the Intranet for the latest version.

Purpose of Agreement	This document has been produced in accordance with the general requirement of Section 2 (3) of the Health & Safety at Work Act 1974. The policy has been compiled to provide guidance to Directors, Managers, Supervisors and Employees on the arrangements for managing health & safety throughout Solent NHS Trust provider services
Document Type	X Policy
Reference Number	Solent NHST/Policy/HS/01
Version	4.0
Name of Approving Committees/Groups	Assurance Committee
Operational Date	Sept 2018
Document Review Date	Sept 2021
Document Sponsor (Name & Job Title)	Associate Director of Finance
Document Manager (Name & Job Title)	Health & Safety Manager
Document developed in consultation with	H&S Sub Committee, Learning and Development, Occupation Health and Wellbeing, Operational Policy Steering Group & Assurance Committee
Intranet Location	Business Zone > Policies, SOPS and Clinical Guidelines
Website Location	FOI Publication Scheme
Keywords (for website/intranet uploading)	Health safety policy, welfare, health safety policy statement, chief executive officer, Health & Safety at Work Act 1974

Amendments Summary:

Amend No	Issued	Page	Subject	Action Date
1	Dave Keates		Technical amendment	4 March
2	Dave Keates	Various	Review and Minor Changes	20 May
3	Dave Keates	Various	Estates provider changes. New Chief Executive Officer "statement of intent"	April 2015
4	Dave Keates	Various	Review and Minor Changes	April 2018

Review Log:

Version Number	Review Date	Lead Name	Ratification Process	Notes
1	March 2011	Dave Keates	Operational Policy Steering Group & Assurance Committee	
2	March 2015	Dave Keates	Policy Steering Group & Assurance Committee	
3	April 2018	Dave Keates	Policy Steering Group & Assurance Committee	
4	April 2021	Dave Keates	Operational Policy Steering Group & Assurance Committee	

SUMMARY OF POLICY

This policy has been produced in accordance with the legal requirement of Section 2 (3) of the Health & Safety at Work Act 1974.

This policy identifies arrangements for managing the safety, health and welfare of staff, clients, patients, visitors and anyone else who can be affected by the Trusts work activities.

It contains details of roles and responsibilities for the management of health and safety throughout Solent NHS Trust and is supported by other more detailed policies which should be read in conjunction with it.

The policy has been compiled to provide guidance to all Solent employees and shows the arrangements for managing health, safety & welfare throughout the organisation.

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Health and Safety Policy

1. INTRODUCTION & PURPOSE

- 1.1 This document has been produced in accordance with the legal requirement of Section 2 (3) of the Health & Safety at Work Act 1974.
- 1.2 This policy which contains details of roles and responsibilities for the management of health and safety throughout the Trust is supported by other more detailed policies which should be read in conjunction with it.
- 1.3 The policy has been compiled to provide guidance to all Solent employees on the arrangements for managing health, safety & welfare throughout the organisation. Whilst comprehensive, the document is not exhaustive and as such all employees are required to take reasonable care of their own health and safety and that of others who may be affected by their acts or omissions, i.e. patients and visitors.
- 1.4 Where employees identify potential risks during their work or risks that are not covered by this document, they are to bring them to the attention of their line manager directly or via their Safety Representative and/or the health and safety sub-committee.

2. SCOPE AND DEFINITIONS

- 2.1 The main aspects covered are the health and safety management arrangements and applies to all bank, locum, permanent and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including associate hospital managers), Non-Executive Directors, governors and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust.
- 2.2 This policy extends to all sites, buildings and areas where Solent NHS Trust owes a duty of care and responsibility to employees, patients, visitors, contractors, or any other person affected by its undertaking. Areas of work and activities covered by this policy would for example include, but would not be limited to:
 - The provision of any form of medical treatment in inpatient settings
 - The provision of any form of medical treatment or service within the community setting or a person's home;
 - The building, demolition or alteration of any premises owned or occupied by the Trust.
 - Construction project by any organisation contracted to do so, as part of the Trusts undertaking.

3.0 PROCESS/REQUIREMENTS – (HEALTH, SAFETY & MANAGEMENT ARRANGEMENTS)

- 3.1 Solent NHS Trust health and safety arrangements are based on the Health and Safety Executive (HSE) guidance document HSG 65 'Managing for Health & Safety' (Plan, Do, Check, Act principle). The ultimate aim of the Trust's health and safety management system is to prevent injury and ill health to employees and others affected by its undertaking and

working environment. Planning is the key to achieving this aim through the identification, elimination and control of hazards and risks. However, given the range of activities undertaken by the Trust and the geographical locations covered, the detailing of all necessary precautions and procedures required for managing health & safety is beyond the scope of a single policy.

PLANNING HEALTH AND SAFETY MANAGEMENT SYSTEMS

- 3.2 Additional policies and procedures (as referenced on pg 15) compliment this policy to form part of the overall Safety Management System, incorporated in all Solent NHS Trust business activities, to address specific health and safety work-related issues and facilitate the needs of individual services and those of the Trust as a whole. Although specific policies are provided, their effective introduction, management, control and monitoring will be the responsibility of Directors and Managers and will reflect their areas of operation.
- 3.3 As the activities and venues of each Service Lines will vary, Directors and Managers are encouraged to develop management arrangements, risk control systems and workplace precautions that are proportionate to the needs, hazards and risks of their operational area.

IMPLEMENTING THE HEALTH AND SAFETY MANAGEMENT SYSTEM

- 3.4 To secure the continued effective operation of all the components of the health and safety management system it will need to be adequately inspected, maintained and monitored.
- 3.5 The type, frequency and depth of maintenance should reflect the extent and nature of the hazards and risks, with the resources allocated to the various risk control systems reflective of the hazard profile of the area.
- 3.6 To ensure the successful implementation of the Trust's Safety Management Systems it is important that Service Line Clinical Director /Operational Director and Managers:
- Take positive steps to address human factors and to encourage safe behaviour at all times
 - Recognise that the prevailing health and safety culture within their area of responsibility will be a major influence in shaping employees' safety related behaviour and the success of the Trust's Risk Management Framework

RISK ASSESSMENT

- 3.7 To meet the requirements of the Management of Health & Safety at Work Amendment Regulations it is Trust policy that risk assessments are undertaken for clinical and non-clinical activities that present foreseeable significant risk.
- 3.8 To avoid duplication and ensure the information gathered is used effectively, initial risk assessments are to be undertaken in accordance with the Solent NHS Trust Risk Management Strategy Policy. The risk assessments are to be held in departments and accessible for members of staff.

- 3.9 Managers at all levels, clinical or non-clinical are required to identify and assess risks to the health and safety of employees, patients, contractors, visitors and members of the general public and develop and maintain safe systems of work to eliminate or reduce these risks.

CONTROLLING HEALTH RISKS

- 3.10 Health and Safety law places a duty on the Trust to ensure the health as well as the safety of their employees. The principles for controlling health through risk assessment are the same as those for general safety. However, the nature of health risks can make the link between work activities and employee ill health less apparent than in the case of injury from an accident. Unlike safety risks which can lead to immediate injury, the results of daily exposure to health risks may not become apparent for months, years and in some cases, decades. An employee's health may therefore be irreversibly damaged before the risk is apparent.

- 3.11 It is therefore essential that Directors ensure appropriate strategies are in place within their area of operation that prevent, or adequately control risks that could include, but may not be limited to:

- skin contact with irritant substances, leading to any adverse reaction, i.e. anaphylactic shock, dermatitis etc.
- inhalation of respiratory sensitizers, triggering immune responses such as asthma;
- badly designed workstations requiring awkward body postures or repetitive movements, resulting in upper limb disorders, repetitive strain injury and other musculoskeletal conditions;
- noise levels which are too high, causing deafness and conditions such as tinnitus;
- vibration from hand-held tools leading to hand-arm vibration syndrome and circulatory problems;
- exposure to ionising and non-ionising radiation including ultraviolet in the sun's rays, causing burns, sickness and skin cancer;
- infections ranging from minor sickness to life-threatening conditions caused by inhaling or being contaminated by micro-biological organisms;
- stress causing mental and physical disorders;
- illnesses or conditions such as asthma and back pain that have both occupational and non-occupational causes where it may be difficult to establish a definite link with a work activity or exposure to particular agents or substances.

- 3.12 Where appropriate, advice should be sought from specialist or professional advisers such as the Trust Safety Manager, or Occupational Health and Wellbeing Department.

MONITORING AND REVIEWING

- 3.13 The management of health and safety will be monitored by Directors, and all Managers both clinical and non-clinical

COMMUNICATION & CONSULTATION

- 3.14 The Trust will ensure that suitable and relevant information regarding health, safety and welfare is disseminated to staff. The Trust Health and Safety Sub-Committee meetings will be held on a quarterly basis during which time employees are encouraged to discuss matters of concern regarding health and safety.

3.15 Additionally, statutory notices such as the "Health & Safety Law - What you need to Know" are to be displayed advising employees of:

- The address and contact details of the Trust's Health & Safety Manager;
- The names of employees elected to represent employees on matters of health & safety.
- Contact details for the Health and Safety Executive and the Employment Medical Advisory Service.

The Health and safety law poster contact details can be found at Appendix B

SPECIFIC ADVICE OR INFORMATION

3.16 This safety policy lays the foundations for the effective management of health, safety and welfare throughout Solent NHS Trust. Whilst comprehensive, more detailed policies have been produced to provide advice on specific topics and should be read in conjunction with it. It is however inevitable that from time to time situations will arise where a solution is not apparent from either personal knowledge, expertise or the information contained within these policies. In all such cases advice is to be sought from line managers, who will obtain the necessary advice or information.

4. ROLES and RESPONSIBILITIES

4.1 **CHIEF EXECUTIVE OFFICER (CEO)** has responsibility for Health and Safety throughout Solent NHS Trust and is responsible for managing health and safety and monitoring compliance with health and safety legislation, NHS directives and Trust policies. The CEO will:

- Review the health and safety Statement of Intent annually as compliant with Section 2 (3) of the health and safety at work act, and sign this statement showing endorsement of the commitment to health, safety and welfare.

The health and safety statement of Intent can be found at Appendix C

- Ensure arrangements are in place to enable the effective planning, organisation, control, monitoring and review of health and safety in every operational area of the Trust
- Appoint an Executive Lead (Director of Finance) to act on their behalf to ensure adequate structures are in place to ensure, so far as is reasonably practicable, the health, safety and welfare of staff, patients and others affected by the Trust's undertakings
- Ensure active channels of communications for consultation with employees by establishing and maintaining appropriate health and safety subcommittee, groups, forums, structures and receiving feedback
- Ensure that adequate resources are allocated to meet Solent NHS Trust's commitment to health, safety and welfare

4.2 **DIRECTOR and/ or ASSOCIATE DIRECTOR RESPONSIBLE FOR HEALTH & SAFETY (Chair of the Health and Safety Sub Committee).** It is vital that Solent NHS Trust keeps its health and safety management systems under review, in particular, the way in which its activities are managed or organised by senior management. In support of the Appointed Executive

Lead, the Director/Associate Director responsible for the management of health and safety shall:

- Establish a Trust Health and Safety Sub-Committee, the Terms of Reference for which are to be approved by Solent NHS Trust Board.
- The Director/Associate Director will be fully conversant and comply with the terms of reference of the health and safety sub committee
- Appoint a Health and Safety Manager to provide specialist advice on all health, safety and welfare matters relating to the Health and Safety at Work Act
- Be kept informed of changes in the relevant statutory provisions and assess the implications of such changes with regard to their area of responsibility for health and safety.

4.3 **MANAGERS BOTH CLINICAL and NON CLINICAL.** In support of the Director/Associate Director responsible for managing health & safety, Managers shall, within their area of responsibility ensure that day to day work activities under their control are carried out with full regard to good health and safety management and compliance with this policy. In particular within their area of responsibility shall ensure:

- Ensure arrangements are in place to enable the effective planning, organisation, control, monitoring and review of preventative and protective measures within their area of responsibility
- Managers and employees are made aware of their health and safety responsibilities as determined by this policy and respective job descriptions
- Monitor the safety performance of their area on a suitable basis (dependant on the risks)
- Make suitable and sufficient assessments of risks to the health and safety of employees and others, record the significant findings and ensure the adequacy of preventative and protective measures
- Develop an appropriate risk register in accordance with Solent NHS Trust Risk Management Framework the register is to be kept, maintained and made available on request.
- Promote and encourage consultation and communication on matters of health and safety. Ensure that employees are provided with such health surveillance as is appropriate with regard to risks to their health & safety
- Arrange for the assessment of employees' capabilities, in particular their specific training needs and ensure appropriate training is available to ensure they can perform their work without risk to themselves or others
- Ensure that all employees, especially part time or temporary staff receive comprehensible and relevant information on, any risks to their health & safety, protective and preventative measures, and emergency procedures
- Ensure that all staff under their remit use Solent's internal reporting system "skyguard" and record the details of any incidents, dangerous occurrences or cases of disease

4.4 **TRUST HEALTH & SAFETY MANAGER** is the competent person, accountable to the Chief Executive Officer through a functional management chain, who advises Solent NHS Trust in respect of health and safety policy formulation and development. Trust safety manager shall, as part of their duties:

- Review and amend policies and procedures on a regular basis or on the introduction of new legislation, whichever is the sooner;
- Monitor the safety performance of the Trust and its service providers, taking such steps as may be necessary to improve safety performance;
- Recommend improvements or remedial action to the Trust's Health and Safety Sub-Committee arising from reviews of Directorates, Service Providers or the findings of investigations into the cause of accidents or dangerous occurrences;
- Promote interest in and enthusiasm for health and safety throughout the Trust;
- Review the details of accidents, dangerous occurrences and cases of disease reported to the Health and Safety Executive.
- Keep themselves informed of changes in the relevant statutory provisions and assess the implications of such changes for the Trust's safety policies, arrangements and procedures;
- Assist managers in providing employees with adequate information, instruction and training as may be necessary to perform their work without risk to themselves or others;
- Advise and assist Staff in ad hoc requests for health and safety support
- Maintain the health and safety webpage on Solent NHS Trust staff intranet.
- Produce an Annual Health & Safety Report for the Board setting out the achievements and shortcomings of the previous 12 months and making recommendations to bring about future improvements
- Provide Health and Safety Reports to the Trust Board as required
- Act as the nominated 'competent person' for the Trust as required in Regulation 7 of the Management of Health and Safety at Work Regulations (as amended).

4.5 **EMPLOYEES** Whilst at work, have a responsibility for their own health and safety and that of others who may be affected by what they do or don't do. Employees shall, in support of their managers and colleagues:

- Use all work equipment, materials, personal protective equipment and clothing provided in accordance with the information, instructions and training received.
- Not **interfere** with any work processes and/or procedures or **misuse** any work equipment, materials, personal protective equipment or clothing provided.
- Co-operate with the Trust in discharging any relevant statutory obligations.
- Participate in health and safety reviews and reporting procedures.
- Inform their management without delay, of any work situation which they consider represents a serious or immediate danger to the health, safety or welfare of themselves or others.
- Inform their line management of any matter they reasonably consider represents a shortcoming in the health and safety arrangements, even when no immediate danger exists.
- Familiarise themselves with all the designated means of escape in case of fire and bring to the attention of Staff Side Safety Links and Trusts Fire Advisor any defective equipment which might result in a fire.
- Make themselves familiar with those work procedures in place for reasons of health and safety, which are relevant to their work. Those who visit other sites shall themselves familiar with the health and safety procedures and requirements of those locations and act responsibly.

- Attend mandatory and statutory training sessions and other training, as directed by their Line Manager. Employees must bring to the attention of their line manager any outstanding training requirements needed to ensure they can carry out their work activities in a safe and competent manner. A member of staff should carry out no work activity if they are not trained or competent to complete the task safely.

4.6 HEALTH & SAFETY SUB SUBCOMMITTEE the Trust acknowledges the importance of employee involvement in health and safety matters and the positive role played by Safety Representatives. The Trust has established a respective Health and Safety Sub Committee that will be chaired by a nominated Director and/or Associate Director, who on behalf of the Chief Officer has the authority to act upon the decisions reached by the Sub Committee.

4.6.1 The Committee will be responsible for overseeing the strategic and operational implementation of all health and safety related policies in operational areas and seeking assurance that the activities of Solent NHS Trust are managed in a manner where health and safety is of primary importance. In doing so the Committee will provide the Trust Board with assurance that robust health and safety management systems are in place

4.6.2 To collate the information necessary to assure the Board of Statutory Compliance, the Committee's functions shall include, but may not be limited to:

- Ensuring Solent NHS Trust is so far as is reasonable practicable compliant with relevant statutory obligations
- Acting as a central co-ordinating body for matters concerning the management of health and safety;
- Assessing the implication of new and proposed legislation and discussing/agreeing appropriate recommendations and disseminating them accordingly.
- Taking operational decisions on the management of health and safety within the professional frameworks approved by the Trust Board;
- Monitoring the effectiveness of the Trust Health and Safety Management systems by reviewing reports and action plans from relevant groups, etc.
- Monitoring statistics and data relating to 'Adverse Event reports' and agree appropriate actions to prevent re-occurrences of particular incidents.
- Providing and promoting a forum for the effective consultation and communication on matters of health, safety & welfare between management and employees.
- Acting as the forum for monitoring procedures for the prevention of incidents, injuries, occupational illnesses and ill health;
- Monitoring the requirements arising from health and safety audits/inspections conducted in-house or by outside authorities/agencies.
- Discussing any significant health and safety issues tabled that cannot be resolved through the normal management chain, with an aim of resolving tabled issues and/or providing advice and support
- Investigating any activity within its terms of reference, for which it is authorised to seek any information it requires from any employee. In doing so the Committee is authorised by the Solent NHS Trust Board to obtain outside legal or other independent professional advice and to secure the attendance of those with relevant experience and expertise.

- Supporting Health & Safety Representatives (union/non-union) in their role.
- Liaising with other organisations and ensure good communications on shared policies and awareness in shared premises.

The terms of reference for the health and safety subcommittee can be found at Appendix D

4.7 HEADS OF ESTATES PROJECTS AND HEAD OF ASSET MANAGEMENT In support of the Director responsible for managing health and safety, Heads of Estates Projects and Head of Asset Management shall, within their area of responsibility ensure that:

- Arrangements are in place to enable the effective planning, organisation, control, monitoring and review of preventative and protective measures within the Estates and Facilities service
- Monitor the performance of service provider's health and safety performance and take such steps as may be necessary to improve performance
- Keep up to date a risk register appropriate to their remit
- Attend and report on a quarterly basis to the health and safety Sub Committee on the Estates compliance in regards to buildings that Solent own and occupy

4.7.1 Contractors employed by the Trust All contractors and sub-contractors under the control of or employed directly or indirectly by the Trust must undertake their work in a safe manner. This work must be undertaken in accordance with statutory safety requirements and the Trust's policies and procedures. They must ensure that:

- They and other self-employed persons (engaged on Trust business) assess and document the risks of their work and undertakings and make provision to protect themselves and others in respect of their own work activities.
- They are competent and authorised to carry out the required work and they have the supporting documentation to evidence this through risk assessments, safety plans and/or method statements, permits to work, etc.
- All their employees (& sub-contractors) are appropriately informed, instructed and trained in health, safety and welfare related matters pertaining to their own and Trust work activities
- Reasonable steps are taken to ensure co-operation and communication between all contractors and Trust staff and other relevant persons
- They report significant accidents and incidents to the Trust when undertaking their work and incidents that fall within Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) which occur as a result of the contractor's undertakings
- They provide safe access to and from their workplace for their own staff and all others affected by their undertakings and put in place provisions to deal with a fire

4.8 Emergency Planning Resilience and Response (EPRR)

Solent NHS Trust is required to respond as a Category 1 Responder under the Civil Contingencies Act (CCA) 2004 in the event of a major incident. At this time the Trust is required to:

- Assess the risk of emergencies occurring and use this to inform contingency planning.
- Put in place emergency plans.

- Put in place business continuity management arrangements.
- Put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency.
- Share information with other local responders to enhance co-ordination.
- Co-operate with other local responders to enhance co-ordination and efficiency.

To ensure the Trust can fulfil its duties, the Incident Response Plan (IRP) has been prepared in line with requirements of the Health and Social Care Act 2012, the Department of Health's (DH) Emergency Preparedness, Resilience & Response (EPRR) Guidance as well as local and multiagency risk registers and wider health economy plans.

During an incident The Incident Commander will be responsible for the following actions:

- Clarify that operational arrangements are in place to maintain the safety of staff, patients and visitors.
- Ensure that information is collated to identify and prioritise vulnerable persons.
- Consider the welfare of response staff.
- Arrange suitable relief for response staff.
- Serve as a central Incident management point.

5. TRAINING

- 5.1 Training plays an essential part in the effective development of human resources, enhancing performance of the individual and improving the quality of patient care. A trained employee is able to work confidently, with the knowledge and understanding of what the work involves, why it is being carried out and how it should be done safely.
- 5.2 The Trust recognises that sound training is part of safe clinical and non - clinical working practice and encourages employees to undertake courses designed to improve their health, safety and welfare as well as that of others affected by what they do.
- 5.3 As skill needs are identified, appropriate training will be arranged and employees consulted accordingly. Where new systems of work or products are introduced that require specialist training, appropriate instruction and advice will also be provided to those employees involved.
- 5.4 Managers are to monitor the various activities under their control and ensure compliance with safe working procedures. Where monitoring identifies a need to provide additional training or instruction, managers are to contact the Learning and Development department and make the necessary arrangements.
- 5.5 As a general guide employees should be provided with appropriate training on: Joining the Trust, a department or when transferring between posts; Where identified risks are increased due to:
- A change in their task or responsibilities;
 - A change in equipment or technology;
 - A change in the system of work.
- 5.6 The induction has two key components:-
Corporate Induction Part A
 A full day programme accessed on the first day of employment, where new staff receives a welcome and introduction to the organisation. On this programme new staff will gain

information about the organisational strategy, objectives and values. Information will be given about quality and safety priorities, and carry out statutory training. They will also have an introduction to the online learning system and how to access the e-learning elements to complete their induction process.

Local Induction Part B

The local induction must be completed by the manager, alongside the new starter on the **first day** in their regular workplace. All new starters to the trust are enrolled onto the “**Online Local Induction**” course within E learning. This element is required by law, and is crucial to the orientation and safety of the new starter. This is a well-structured induction programme consisting of both corporate and local elements, which will ensure that a new starter receives all the essential information and guidance they need to enable them to start working as quickly and as safely as possible. Completion of this online local induction is a requirement for all new employees but also a valuable guide for manager’s or supervisor’s which highlights training needs, skills and possible safety risks. Completion of this induction will be recorded against the new starters training record and the relevant competencies will be awarded when submitted. The course can be found under ‘**Enrolments**’ on your new starter’s E learning user page. Simply hit the play button to begin the programme.

Induction is only achieved and recorded as such when both local and corporate elements are complete. This is reported in the Trust Workforce Report on a monthly basis.

5.6.1 The Corporate Induction is a full day programme which is designed to welcome new employees including Bank Staff into the Trust. Employees should attend the induction on their first day of work where possible or the nearest Corporate Induction date to their start date. This date is sent to new starters via Employment Services (HR) as above. The day’s programme includes:

- A welcome from a Senior Manager detailing the strategic direction and vision of Solent NHS Trust and key information. Identity Photograph and issue of Identity Cards & Smart Cards Employee Engagement and Values Quality Governance & Patient Safety Information on how to access the intranet, ESR and e-learning. IT Services Support Fraud and Local Security, Moving and Handling, Infection Control, Equality, Diversity and Human Rights, Basic Life Support Level 1

Induction: Part B – Local Induction

5.6.2 Starting on the first day in the workplace the Electronic Local Induction Form should be completed. The completion of the form will automatically update the new starters learning matrix. Each relevant section of the Local Induction Form must be completed.

Sections covering:

- About you, Administration, Roles and responsibilities, Values and Objectives, Health and Safety issues: (Fire Procedures, First Aid arrangements, Lone Working Personal Security, Conflict Resolution), Policies and Procedures, Staff Wellbeing, Education Training and Development, Further Information

It is the responsibility of the line manager to ensure that the new member of staff is adequately inducted before the individual commences duties.

5.7 Essential training updates are via e-learning, Training requiring a physical element is classroom based e.g. Patient Moving and Handling. Staff and their line managers are notified

electronically 3 months prior of their training expiry date. Upon notification the individuals training matrix will turn amber for that subject.

- 5.8 As with other aspects of health & safety, training records are an essential element of safety management and as such accurate records of all training undertaken shall be kept and maintained by Learning and Development.

6. EQUALITY IMPACT ASSESSMENT AND MENTAL CAPACITY

- 6.1 As part of the Trust's policy an equality impact assessment has been undertaken. The author is not aware of any evidence that different groups have different priorities in relation to the Implementation of this policy, or that any group will be affected disproportionately or any evidence or concern that this policy may discriminate against a particular population group.
- 6.2 The equality impact assessment concluded there will be no negative impact as a result of the introduction of this policy

The Equality Impact Assessment be found at Appendix A

7. SUCCESS CRITERIA / MONITORING EFFECTIVENESS

- 7.1 The policy will be monitored for effectiveness via the Health and Safety Sub Committee meeting with necessary reviews and audits identified below:
- The Health and Safety Manager will monitor statistics and data relating to 'Adverse Event reports' relating to health and safety causes groups reporting trends by service.
- 7.2 The policy will be assessed by the Policy Steering Group who will review the policy and any updates being presented to the Group to ensure that they conform to Trust procedures and format. This Group will determine subsequent ratifying groups that the policy should be presented to.

8 REVIEW

- 8.1 This policy will be reviewed on a Tri-annual basis, or where there has been a significant change in health and safety law, where the policy is believed to be no longer valid, or at the request of safety representatives or management.

9. REFERENCES AND LINKS TO OTHER DOCUMENTS

The Trust Health and Safety Management Systems incorporate Health and Safety, Fire and Environmental Legislation relevant to the organisation and its work activities, specifically the Health & Safety at Work etc. Act 1974 and subordinate legislation, regulations and guidance documents made under and/or associated with this Act, including:-

- Management of Health & Safety at Work Regulations (as amended)
- The Regulatory Reform (Fire Safety) Order RRFSO

- Workplace (Health, Safety and Welfare) Regulations (as amended)
- Manual Handling Operations Regulations (as amended)
- The health and safety (First Aid) Regulations (as amended)
- Provision and Use of Work equipment Regulations (as amended) PUWER
- Lifting Operations and Lifting Equipment Regulations (as amended)
- Personal Protective Equipment at Work Regulations (as amended)
- Legionnaires Disease – Control of Legionella Bacteria in Water Systems (as amended)
- Control of Asbestos Regulations (as amended)
- Managing and working with asbestos Approved Code of Practice (ACOP) L143 (Second Edition) (as amended)
- Health and Safety (Display Screen Equipment) Regulations (as amended)
- The Control of Substances Hazardous to Health Regulations (as amended) COSHH
- The Health and Safety (First Aid) Regulations (as amended)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (as amended) RIDDOR
- The Corporate Manslaughter and Corporate Homicide Act (as amended)
- Health & Safety (Consultation with Employees) Regulations (as amended)
Safety Representatives and Safety Committee Regulations (as amended)
- Influencing Behaviour and Reducing Errors (HS (G)
48) Environmental Protection Act 1990 (as amended) EPA
- Managing Risk, Adding Value - Health & Safety Executive ISBN 0-7176-1536-7
- Managing Contractors – Health & Safety Executive ISBN 978-0-7176-1196-6

And other related health and safety legislation/ guidance notes.

Related Trust Policies

- Risk Management Framework
- Fire Safety Policy
- Moving and Handling of Patient and Inanimate loads Policy
- Working with Display Screen Equipment Policy
- Control of Substances Hazardous to Health (COSHH) Policy
- Security Policy
- Sharps Safety Policy
- Lone Worker Policy
- Management of Medical Devices policy
- Slips, Trips and Falls (Patient) Policy
- Waste Management Policy
- All Occupational Health policies relating to Health and Safety
- All other Estates policies and procedures relating to Health and Safety

And other related health and safety Policies.

10. GLOSSARY

EPA	Environmental Protection Act 1990 (as amended)
RRFSO	Regulatory Reform (Fire Safety) Order
COSHH	Control of Substances Hazardous to Health
(HS (G))	Health and Safety Guidance Note
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrence
ACOP	Approved Code of Practice
SFAiRP	So Far As is Reasonably Practicable
PUWER	Provision and Use of Work Equipment Regulations
CEO	Chief Executive Officer

Reasonably Practicable: means that you have to take action to control the health and safety risks in your workplace except where the cost (in terms of time and effort as well as money) of doing so is "grossly disproportionate" to the reduction in the risk.

Competency: knowledge, skills, qualifications, training, experience or ability to undertake a particular job, the term 'competent person' also refers to the roles and responsibilities of those managing health & safety matters

Contractors: persons or agencies engaged by the Trust to provide a specific service. This includes bank staff, agency staff, staff employed by other Trusts, organisations and agencies occupying Trust premises

Hazard: a hazard is anything with the potential to cause harm e.g. chemicals, electricity, working at height, noise etc.

Risk: the likelihood that the hazard will actually cause harm, injury or damage; it also considers the consequences, extent and outcome of a hazardous event occurring

Suitable and Sufficient: that all significant hazards have been identified, the risks have been properly evaluated considering likelihood and severity of harm, measures necessary to achieve acceptable levels of risk have been identified, actions have been prioritised to reduce risks, the assessment will be valid for some time, actual conditions and events likely to occur have been considered during the assessment, everyone who may be harmed has been considered.

Appendix: A

Equality Impact Assessment

<u>Step 1 – Scoping; identify the policies aims</u>	Answer		
1. What are the main aims and objectives of the document?	To outline the Organisational arrangements for the effective planning, organisation, monitoring, control and review or health & safety		
2. Who will be affected by it?	All NHS Trust staff Independent Contractors		
3. What are the existing performance indicators/measures for this? What are the outcomes you want to achieve?	Risk Register, workplace inspection reports and incident reports, the information from which will assist in the effective management of health & safety		
4. What information do you already have on the equality impact of this document?	The previous policy and its impact assessment statement.		
5. Are there demographic changes or trends locally to be considered?	No		
6. What other information do you need?	None identified		
<u>Step 2 - Assessing the Impact; consider the data and research</u>	Yes	No	Answer (Evidence)
1. Could the document unlawfully discriminate against any group?		✓	The policy applies to all staff groups
2. Can any group benefit or be excluded?		✓	The policy applies to all staff groups
3. Can any group be denied fair & equal access to or treatment as a result of this document?		✓	The policy applies to all staff groups
4. Can this actively promote good relations with and between different groups?	✓		The policy applies to all staff groups
5. Have you carried out any consultation internally/externally with relevant individual groups?	✓		Policy steering group members consulted and wider groups represented. Please see routes of consultation and ratification process.
6. Have you used a variety of different methods of consultation/involvement	✓		Via e-mail and face to face meetings

<u>Mental Capacity Act implications</u>			
7. Will this document require a decision to be made by or about a service user? (Refer to the Mental Capacity Act document for further information)		✓	
<u>External considerations</u>			
8. What external factors have been considered in the development of this policy?			This policy has taken into consideration all Health and Safety Executive legislative management changes that have taken place
9. Are there any external implications in relation to this policy?			No
10. Which external groups may be affected positively or adversely as a consequence of this policy being implemented?			N/A

If there is no negative impact – end the Impact Assessment here.

Appendix B

Health and safety law “What you Need to Know” Poster contact details

If you employ anyone, you must display HSE's health and safety law poster. Or you can give your employees a leaflet called '[Health and safety law: What you need to know \[65KB\]](#)' 

The poster includes basic health and safety information and lets people know who is responsible for health and safety in your workplace. You must display the poster where your workers can easily read it, and it must be in a readable condition. You must also include some contact details, for example of your local enforcing authority.

Information to be placed on the Health and Safety Law “What you should know poster”



H&S representative is: David Keates

Health and Safety Manager
Estates and Facilities
Western Community Hospital SO16 4XE
Tel: 07867528151

Enforcing Authority

Health & Safety Executive
Priestley House, Priestley Road,
Basingstoke, RG24 9NW
Tel: 01256 404 4000

Employment Medical Advisory Service (EMAS)

Priestley House, Priestley Road,
Basingstoke,
RG24 9NW Tel: 01256 404000

Appendix C

HEALTH AND SAFETY POLICY STATEMENT OF INTENT

This health and safety policy statement of Intent identifies the commitment of Solent NHS Trust to provide and maintain a working environment and systems of work that are, so far as is reasonably practicable, safe for employees, patients, visitors and other persons affected by the Trust 's undertaking or omissions.

Health, safety and welfare is the responsibility of all Directors, Heads of Department, Managers, responsible persons both clinical/ non clinical and employees and is an integral important part of their duties. The Trust's commitment to health and safety therefore ranks equally with all other aims, objectives and activities.

The Health and Safety Policy defines responsibilities and identifies general and specific arrangements relating to the Trust's undertaking which extends to all premises, buildings, and working activities throughout the Trust.

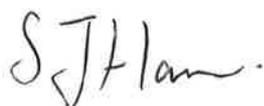
A copy of the health and safety policy is made available to all employees at induction and subsequent training; it is also available on the Trust intranet. Where employees do not have access to the intranet, line managers are to make such arrangements as may be necessary to ensure employees have access to this policy.

The Trust ensures that all employees are fully aware of their legal obligations to take reasonable care for their own health and safety and that of other persons who may be affected by their acts or omissions whilst at work. All employees are legally required to co-operate with their employer in regards to health and safety matters, not to misuse anything provided for safety so the Trust can fulfil its legal obligations.

To enable the effective implementation of the health and safety policy and the performance of all tasks safely and without risk to employees, patients or visitors, staff will be provided with suitable and sufficient information, instruction and training.

To encourage and promote effective consultation, communication and co-operation between management and employees, all departments shall develop appropriate systems by which the contributions and concerns of employees can be raised at departmental management meetings, and the Health and Safety Subcommittee.

This health and safety policy statement of intent shall be reviewed and amended annually, or as dictated by significant changes to legislation and/or Trust policies or adverse conditions, whichever is the sooner.



Sue Harriman
Chief Executive Officer
Solent NHS Trust
July 2018

Appendix D

HEALTH & SAFETY SUBCOMMITTEE Terms of Reference

1. Purpose

- 1.1 By virtue of the Safety Representatives and Safety Committee Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996, employers are required to consult with their employees on matters of health and safety. Because of its unionised status and the repeal of Crown Immunity in 1996, the organisation must, where requested to do so by safety representatives elected under the Safety Representatives and Safety Committee Regulations 1977, establish a Health and Safety Committee in accordance with the requirements of section 2(7) of the Health and Safety at Work Act 1974.
- 1.2 To comply with the latter and promote the proactive involvement of employees on matters of health, safety & welfare, Solent at request of the Chief Executive established a Health & Safety Subcommittee, (hereafter known as 'The Committee') who will provide assurance to the Board via the Assurance Committee in the form of minutes and reports where required.
- 1.3 The Chief Executive has delegated responsibility for Health, Safety & Welfare within Solent NHS Trust to the Chair of the Committee. The Committee shall be chaired by Director with lead responsibility, who on behalf of the Solent NHS Trust Chief Executive has the authority to act upon the decisions reached by the Committee.

2. Aims

- 2.1 The Committee will be responsible for overseeing the strategic and operational implementation of all health and safety related policies in operational areas and seeking assurance that the activities of Solent NHS Trust are managed in a manner where health and safety is of primary importance. In doing so the Committee will provide the Trust Board with assurance that robust health and safety management systems are in place throughout the organisation.

3. Responsibilities & Scope of Authority

To collate the information necessary to assure the Board of Statutory Compliance, the Committee's functions shall include, but may not be limited to:

- 3.1 Ensuring Solent NHS Trust is so far as is reasonable practicable compliant with relevant statutory obligations and act as a central co-ordinating body for matters concerning the management of health and safety;
- 3.2 Assessing the implication of new and proposed legislation and discussing/agreeing appropriate recommendations and disseminating them accordingly.
- 3.3 Taking operational decisions on the management of health and safety within the professional frameworks approved by the Trust Board;
- 3.4 Monitoring the effectiveness of the Trust Health and Safety Management systems by reviewing reports and action plans from relevant groups, etc.

- 3.5 Monitoring statistics and data relating to 'Adverse Event reports' and 'Fires & Fire Alarm Activation' and agree appropriate actions to prevent re-occurrences of particular incidents.
- 3.6 Providing and promoting a forum for the effective consultation and communication on matters of health, safety & welfare between management and employees.
- 3.7 Acting as the forum for monitoring procedures for the prevention of incidents, injuries, occupational illnesses and ill health;
- 3.8 Monitoring the requirements arising from health and safety audits/inspections conducted in-house or by outside authorities/agencies.
- 3.9 Discussing any significant health and safety issues tabled that cannot be resolved through the normal management chain, with an aim of resolving tabled issues and/or providing advice and support.
- 3.10 Investigating any activity within its terms of reference, for which it is authorised to seek any information it requires from any employee. In doing so the Committee is authorised by the Solent NHS Trust Board to obtain outside legal or other independent professional advice and to secure the attendance of those with relevant experience and expertise.

4. Membership

4.1 Members

- Associate Director of Estates with responsibility for Health & Safety (Chair)
- One representative from each of the clinical divisions with authority to take decisions
- Health and Safety Manager
- Fire Safety Advisor
- Security Advisor (LSMS)
- Health and Safety Representatives (Union or Non-Unionised)
- Chair of the Clinical Equipment Group (or representative)
- Chair of the Resuscitation Group (or representative)
- Infection Control Representative
- Heads of Estates Projects and Head of Asset Management
- Emergency Planning Representative

4.2 Co-opted Members

- Learning and development Representative
- Other specialist's representatives (as required)
- Human Resources Representative

- 4.3 Safety Representatives (Unionised/non-unionised) shall, so far as is reasonably practicable, have been employed by the organisation for a minimum of one year and have had two years' experience in similar employment.

5. Quorum

- 5.1 A quorum for the health & safety subcommittee will be at least 5 members, one of who is a staff side representative.

5.2 No business shall be transacted at the meeting unless two of the following are present;

- Director and/or Associate Director with responsibility for Health & Safety (Chair) or Designated deputy Chair
- Health and Safety Manager or deputy
- At least two representative from clinical divisions who can make decisions

Members of the Committee who cannot attend a meeting shall nominate a deputy to attend in their place, who is appropriately briefed and able to attend meetings on their behalf.

6. Administration and Format of Meetings

6.1 The Committee will meet on a quarterly basis in the following months April, July, October and January.

6.2 The Chair is responsible for arranging the Secretariat to the Committee and dissemination of The Committee's minutes.

6.3 Where appropriate the Committee will convene if an extraordinary meeting is called by the Chair. The agenda will be determined by the Chair who will arrange administration support.

7. Reporting

7.1 The committee will receive reports and updates from the subordinate groups as required, plus from special advisors, who are responsible for ensuring relevant information and decisions, are reported back to The Committee within required timescales.

7.2 The committee will identify opportunities for shared learning across the organisation and with interface providers and ensure that these are disseminated in a timely manner.

7.3 The committee will bring to the attention of the Assurance Committee matters which cannot be resolved either at the committee or through the Quality Improvement and Risk Group for items that are of a level of risk to the Trust, which needs to be escalated

7.4 A copy of the minutes will also be posted on the intranet for which Service/Department Managers shall ensure all employees have access to. The minutes are also to be kept available for requests made under the Freedom of Information Act

8. Review

8.1 These Terms of Reference shall be reviewed by the Committee on a Tri annual basis, where they are believed to be no longer valid or there is a significant change in the matter to which they relate, whichever is the sooner.

9. Arrangements for the Dissolution of the Health and Safety Subcommittee

9.1 The Committee may be dissolved and replaced by alternative Health and Safety Consultative arrangements in the event that changes in legislation or where the organisational structure affects the viable operation of the Committee. The arrangements for dissolution of the

Committee must be consulted through the unionised representatives and require the signature of the Chief Executive.