
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
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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
5	Dave Keates	Various	General review throughout with some Minor changes, terms of references reviewed and updated, change of H&S committee naming in consultation with Appointed Union Stewards, learning and development update	December 2020
6	Dave Keates	Page 9, 4.4 (13 th bullet)	Addition of bullet point regarding Health and Safety Managers roles and responsibilities	May 2021
7	Dave Keates	Page 7, item 4.1, 4.2 Page 10, item 4.7 Appendix 4	Changes in relation to the new chair of Health and Safety Group to roles and responsibilities section and in Appendix D. Titles updated too to reflect recent changes.	April 2022

Review Log:

Version Number	Review Date	Lead Name	Ratification Process	Notes
1	March 2011	Dave Keates	Operational Policy Steering Group & Assurance Committee	
3	March 2015	Dave Keates	Policy Steering Group & Assurance Committee	
4	April 2018	Dave Keates	Policy Steering Group & Assurance Committee	
5	December 2020	Dave Keates	Policy Steering Group & Clinical Executive Group	
6	May 2021	Dave Keates	Policy Steering Group Chair's action approved change to policy	Amendment as above
7	April 2022	Dave Keates	Policy Steering Group Chair's action approved change to policy	Amendment as above

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 and welfare 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 the staff side trade appointed union stewards and/or the health and safety group.

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, 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 **DEFINITIONS** can be found on page 15

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 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 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.

IMPLEMENTING THE HEALTH AND SAFETY MANAGEMENT SYSTEM

- 3.3 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, monitored in accordance within legislative requirements and will 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.
- 3.4 To ensure the successful implementation of the Trust's Safety Management Systems it is important that Service Line:
- Always take positive steps to address human factors and to encourage safe behaviour
 - 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

- 3.5 To meet the requirements of the Management of Health, Safety and Welfare at Work it is Trust policy that risk assessments are undertaken for clinical and non-clinical activities that present foreseeable significant risk.
- 3.6 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.
- 3.7 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

- 3.8 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.
- 3.9 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 agents or substances.

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

COMMUNICATION & CONSULTATION

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

3.12 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.

Refer to the Health and safety law poster contact details found at Appendix B

SPECIFIC ADVICE OR INFORMATION

3.13 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, NHS Technical Memorandums, Healthcare Building Notes 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.

Refer to the health and safety statement of Intent found at Appendix C and on the Solent NHS webpage

- 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 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 Trusts' undertakings or omissions
- Ensure active channels of communications for consultation with employees by establishing and maintaining appropriate health and safety group, additional 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 **Chief Nurse (Chair of the Health and Safety Group)** It is vital that Solent NHS Trust keeps its health and safety management systems under review, the way in which its activities are managed or organised by senior management. In support of the Chief Nurse responsible for the management of health and safety shall:

- Establish a Trust Health and Safety Group, 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 group
- 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 regarding their area of responsibility for health and safety.

4.3 **Managers (Facility Managers, Support Services Managers, Premises Managers and responsible persons 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. 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 regarding risks to their health & safety
- Arrange for the assessment of employees' capabilities, 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 "Ulysses" 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 Acting Deputy Chief Executive Officer through a functional management chain, who advises Solent NHS Trust in respect of health and safety policy formulation and development. Trust Health and 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;
- Support investigations into the cause of incidents 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 and Six-Monthly Biannual Health & Safety Report for the Board setting out the achievements and shortcomings of those reporting periods and making recommendations to bring about future

improvements

- Provide additional specific health and safety Reports to the Trust Board and/ or additional committee (s) / group (s) 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).
- Will keep up to date with health, safety, welfare and environmental legislative changes and review, report any impacts and actions to be taken

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 their acts or omissions. 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.
- Report all incidents or near misses using the Ulysses reporting system
- 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 GROUP** the Trust acknowledges the importance of employee involvement in health and safety matters and the positive role played by Safety Representatives both appointed trade Union Stewards and all Solent employees. The Trust has established a respective Health and Safety Group that will be chaired by a nominated Director and/or Associate Director, who on behalf of the Chief Executive Officer has the authority to act upon the decisions reached by the group.

4.6.1 The health and safety group will be responsible for overseeing the 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 important. In doing so the group 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 group's functions shall include, but may not be limited to:

- Ensuring Solent NHS Trust is so far as is reasonably practicable compliant with relevant statutory obligations and act 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 'Fires & Fire Alarm Activation' 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 a 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 Group 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.

Refer to the terms of reference for the health and safety group found at Appendix D

4.7 **ASSOCIATE DIRECTOR of ESTATES TRANSFORMATION, and HEAD OF ASSET MANAGEMENT**

In support of the Chief Nurse responsible for managing health and safety, 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 group on the Estates compliance regarding 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 because 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 any incidents

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 employee 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 Attendance on the Trust Induction Day and completion of the Local Induction process ensures that the Statutory subjects of Essential Training (health Safety and Welfare) are completed during the new starter's induction period. For more information please refer to the Induction and Essential Training Policy
- 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 A thorough and systematic assessment of this policy has been undertaken in accordance with the Trust's Policy on Equality and Human Rights.
- 6.2. The assessment found that the implementation of and compliance with this policy has no impact on any Trust employee on the grounds of protected characteristics.
(Refer to Appendix A: Equality impact assessment)

7. SUCCESS CRITERIA / MONITORING EFFECTIVENESS

- 7.1 The policy will be monitored for effectiveness via the Health and Safety group meeting with necessary reviews and completion of the action plan created
- 7.2.1 The Health and Safety Manager will monitor statistics and data relating to 'Adverse Event reports' relating to health and safety causes groups reporting trends
- 7.2.2 The Health and Safety Manager will produce an Annual and Bi Annual (6monthly) assurance report to the Board using a rag rating system on the compliance with the statutory requirements of health and safety legislation, external legislative changes, action taken to resolve issues raised through the health and safety group and on going action plans going forward in accordance with Section 4.2.6

8 REVIEW

- 8.1 This document may be reviewed at any time at the request of either staff side or management but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.

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 but not limited to: -

- Management of Health & Safety at Work Regulations (as amended)
- The Regulatory Reform (Fire Safety) Order RRFSSO
- 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
- Health & Safety (Consultation with Employees) Regulations (as amended)

Safety Representatives and Safety Committee Regulations (as amended)

- Influencing Behaviour and Reducing Errors (HSG 48)
- Environmental Protection Act 1990
 - 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
- Induction and Essential Training Policy
- Incident Reporting Policy
- Moving and Handling of Patient and Inanimate loads Policy
- Safe Use of Display Screen Equipment and Mobile Devices 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
- Medical Gas Policy
- All Occupational Health policies relating to Health and Safety
- All Estates policies and procedures relating to Health and Safety

And other related Health and Safety Policies.

10. GLOSSARY

EPA	Environmental Protection Act 1990
RRFSO	Regulatory Reform (Fire Safety) OrderS
SFAiRP	So Far As is Reasonably Practicable
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
PUWER	Provision and Use of Work Equipment Regulations
CEO	Chief Executive Officer
EPRR	Emergency Planning Resilience and Response

11 DEFINITIONS

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 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 Analysis and Equality Impact Assessment

Equality Analysis is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not;
- **foster good relations** between people who share a protected characteristic and people who do not.

Equality Impact Assessment (EIA) is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- **considering the current situation**
- **deciding the aims and intended outcomes of a function or policy**
- **considering what evidence there is to support the decision and identifying any gaps**
- **ensuring it is an informed decision**

Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims

Service Line / Department	All NHS Trust staff Independent Contractors	
Title of Change:		
What are you completing this EIA for? (Please select):	Please select	<i>(If other please specify here)</i>
What are the main aims / objectives of the changes	To outline the Organisational arrangements for the effective planning, organisation, monitoring, control and review of health & safety	

Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: <i>(e.g. adjustment to the policy)</i>
Sex			X	

Gender reassignment			X	
Disability			X	
Age			X	
Sexual Orientation			X	
Pregnancy and maternity			X	
Marriage and civil partnership			X	
Religion or belief			X	
Race			X	

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.

Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document development, did you consult with others, for example, external organisations, service users, carers or other voluntary sector groups?)	Yes	There has been regular consultation with occupational health and wellbeing team, head of risk and litigation, and the health and safety group members
Have you taken into consideration any regulations, professional standards?	Yes	Health and safety, fire and environmental executive regulative requirements

Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact / risk to the organisation if no action taken?	Low	Medium	High
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What action needs to be taken to reduce or eliminate the negative impact?	N/A no negative impact identified		
Who will be responsible for monitoring and regular review of the document / policy?	The Review of this policy and EIA will be conducted by the H&S manager and chair of the health and safety group		

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality Assessor:



Date:

01/02/2021

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: 0300 003 1747

Employment Medical Advisory Service (EMAS)

Priestley House, Priestley Road,
Basingstoke,
RG24 9NW Tel: 0300 003 1747

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. The health and safety policy is supported by other more detailed policies which will be read in conjunction with it

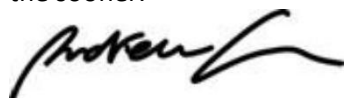
A copy of the health and safety policy is made available to all employees on the Trust intranet, where employees do not have access to the intranet, line managers are to make such arrangements as may be necessary to ensure employees have access to this policy.

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 or interfere with 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.



Andrew Strevens
Acting Chief Executive Officer
Solent NHS Trust
October 2020

Appendix D

Health & Safety Group 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 and welfare, Solent NHS Trust at request of the Chief Executive established a Health and Safety Group, (hereafter known as 'The Group') 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 and Welfare within Solent NHS Trust to the Chair of the Group. The Group 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 Group.

2. Aims

- 2.1 The Group 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 Group 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 Group's functions shall include, but may not be limited to:

- 3.1 Ensuring Solent NHS Trust is so far as is reasonably practicable compliant with relevant statutory obligations and acts 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 and Fire Alarm Activation and agreeing appropriate actions to prevent re-occurrence of particular incidents.

- 3.6 Providing and promoting a forum for effective consultation and communication on matters of health, safety and welfare 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 an employee. In doing so, The Group is authorised by 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

- Chief Nurse (Chair)
- Chief Financial Officer
- Associate Director of Estates & Facilities
- One representative from each of the clinical divisions with authority to take decisions
- Health and Safety Manager
- Fire Safety Advisor
- Security Advisor (ASMS)
- Health and Safety Representatives (Union or Non-Unionised)
- Chair of the Clinical Equipment Group (or representative)
- Chair of the Resuscitation Group (or representative)
- Head of Infection Prevention
- Occupational Health & Wellbeing Representative
- Associate Director of Estates Transformation
- Emergency Planning Representative

Co-opted Members

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

- 4.2 Safety Representatives (Union Appointed Steward)/or non-unionised " union member but not union appointed steward" 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 and Safety Group will be at least 5 members, one of who is a safety representative

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

- Chief Nurse (Chair) or Designated Deputy Chair, and/or Chief Financial Officer
- Health and Safety Manager or deputy
- Safety Representative
- At least two representatives from clinical divisions who can make decisions

Members of the Group 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 Group will meet on a quarterly basis. Where appropriate The Group will convene if an extraordinary meeting is called by the Chair. Agenda setting will be determined by the Chair and will arrange the secretariat cover.
- 6.2 The Chair is responsible for arranging the secretariat to The Group and dissemination of The Group's minutes.

7. Reporting

- 7.1 The Group 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 Group within required timescales.
- 7.2 The Group 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 Group will bring to the attention of the Assurance Committee matters which cannot be resolved either at The Group or through the Quality Improvement and Risk Group for items that are of a level of risk to the Trust, that 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 Group 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 Group

- 9.1 The Group may be dissolved and replaced by alternative Health and Safety Consultative arrangements if changes in legislation or where the organisational structure affects the viable operation of The Group. The arrangements for dissolution of The Group must be consulted through the unionised trade union appointed stewards and require the signature of the Chief Executive.

<http://intranet.solent.nhs.uk/DocumentCentre/Key%20Business%20Documents/Health%20and%20Safety%20Group%20TOR%20-%202021.pdf?Web=1>

Link to Trust intranet