# HEALTH AND SAFETY POLICY

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</table>
Table of Contents

1. Statement of Intent 3
2. Introduction 4
3. Scope 4
4. Definitions 4
5. Roles and Responsibilities 5
   5.1 Chief Executive and the Board of Directors 5
   5.2 Director Lead for Health and Safety 5
   5.3 Managers and Professional Leads 6
   5.4 All Employees 6
   5.5 Safety Representatives 7
   5.6 Workplace Health and Safety Monitors 7
   5.7 Fire, Health & Safety Manager 7
   5.8 Occupational Health Services 8
   5.9 Clinical Governance 8
   5.10 Security and Safety Committee 8
   5.11 Organisational Chart 9
6. Arrangements for Health and Safety 9
   6.1 Safe Access to Premises 9
   6.2 Accidents and Incidents 9
   6.3 Asbestos 10
   6.4 Auditing and Review 10
   6.5 Confined Spaces 10
   6.6 Consultation with the workforce 10
   6.7 Contractor Control 11
   6.8 Display Screen Equipment 11
   6.9 Electrical Safety 12
   6.10 Environmental Monitoring 12
   6.11 Fire Safety 12
   6.12 Hazardous Substances 12
   6.13 Health and Safety Training 12
   6.14 Health Surveillance 13
   6.15 Lasers 13
   6.16 Legionella 13
   6.17 Lone Working 14
   6.18 Machinery, Tools and Equipment 14
   6.19 Manual Handling 14
   6.20 New and Expectant Mothers 15
   6.21 Noise 15
   6.22 Permits to Work 15
   6.23 Personal Protective Equipment and Respiratory Protective Equipment 16
   6.24 Risk Assessment 16
   6.25 Slips, Trips and Falls 16
   6.26 Management of Work Related Stress 17
   6.27 Vibration 17
   6.28 Violence and Aggression 17
   6.29 Waste 18
   6.30 Welfare Facilities 18
   6.31 Working at Height 19
   6.32 Ionising Radiation 19
   6.33 Young Persons 19
7. Implementation, Monitoring and Evaluation 20
8. Applicability 20
9. Equality Impact Assessment 20

Annex A Equality Impact Assessment 21
1. HEALTH & SAFETY STATEMENT OF INTENT

Yeovil District Hospital NHS Foundation Trust is committed to ensuring the health, safety and welfare of its staff, patients, visitors and any other persons affected by our working practices. This will be achieved by having policies and management structures in place to identify and manage risks across the Trust and for all staff to take appropriate action to identify and eliminate the likelihood of accidents, injuries and losses to the organisation.

The Trust will take all measures required to meet its general duties under the Health and Safety at Work Act 1974 in the provision of:

- Providing safe means of entry to and exit from all work areas of the Trust.
- Ensuring all equipment is selected, used, inspected, maintained and disposed of safely and in accordance with current health, safety and environmental legislation.
- Providing and maintaining a safe and healthy working environment and conditions with adequate facilities for staff welfare at work.
- Ensuring arrangements are in place for safe handling, transporting and storage of articles and substances.
- Ensuring suitable and sufficient information, instruction, training and supervision is provided to enable all employees to identify hazards and to work safely without risk to themselves or others.

The Trust will take all measures to comply with Fire Safety legislation to ensure that all premises are safe for occupation. This will include managing arrangements to reduce the risk of fires occurring and to ensure emergency procedures are practiced.

The Trust will also strive for continual improvement in complying with environmental standards aimed at reducing the impact on the environment. This will be affected through targeting energy consumption and waste disposal procedures, where possible by: reducing waste through smart procurement, re-using materials and equipment and re-cycling waste.

The Trust will strive for continual improvement of health and safety standards and the development and enhancing of a positive safety culture that promotes personal safety and responsibility, respect for others, and respect for the workplace. Consultation with staff and management will take place through committees and the monitoring and review of arrangements will be conducted to identify best practice and highlight areas of weakness.

Sufficient financial resources will be provided to enable the Trust to comply with legislation where reasonably practicable. Improvements in Trust facilities and premises will be targeted for staff wellbeing linked to the provision of efficient clinical services.

This Statement is to be brought to the attention of all employees of the Trust and be displayed in workplaces.

Signed: Paul Mears

Date: 19/01/2016

CHIEF EXECUTIVE – Paul Mears (on behalf of Yeovil District Hospital NHS Foundation Trust)
HEALTH AND SAFETY POLICY

2. INTRODUCTION
Workplaces are as hazardous as they are made by the people who work in them and safety is everyone’s responsibility. This policy recognises that everyone has a role in the provision of a safe working environment for staff visitors and patients alike. In all workplaces the Trust has a responsibility for their Health and Safety as does each employee to themselves and others. High standards of awareness and responsibility will reduce the likelihood of accidents and fires resulting in injury, pain, losses and potential prosecution. Working in a secure and safe environment will improve the morale of staff and provide an environment for best practice in clinical treatment. This commitment is set out in the Chief Executives Statement of Intent.

3. SCOPE OF THIS DOCUMENT
This policy applies to all employees (including contractors, volunteers, students, locum and agency staff working on the premises) of the Trust and to all members of the public, patients and contractors whilst they are on sites managed by the Trust.

This policy outlines responsibilities and procedures for managing with health and safety and should be read in conjunction with the Risk Management Strategy, Incident Reporting Policy, Fire Safety Strategy and safety procedures set out under H&S regulations.

4. DEFINITIONS

- **Risk Assessment**: The process whereby hazards and risks are evaluated alongside controls designed to reduce the risk.

- **Reasonably Practicable**: The process of balancing time, cost and effort against the reduction in risk achieved.

- **Duty of Care**: The general duty placed on all members of society to take reasonable care of themselves and others

- **Acts or Omissions**: Wrongly doing or failure to do something which subsequently causes injury or loss to another person.

- **Statutory Instruments**: These are regulations made under the Health and Safety at Work Act which detail the requirements of duties of employers in relation to the requirements of the law.

- **Approved Codes of Practice** and **Health & Safety Guidance**: These are documents published by the Health and Safety Commission (HSC) and the Health and Safety Executive (HSE) that detail the best practice methods required to meet statutory requirement. Alternatively any equivalent standards such as Health and Technical Memorandums (HTMs) are used in a Health Service environment.

- **New or Expectant Mothers**: An employee who is pregnant; who has given birth within the previous six months, or who is breastfeeding.

- **Young Persons**: Any person who has not reached the age of eighteen.
• **Enforcing Authorities:** There are two enforcement authorities that have roles to play in enforcing Health and Safety legislation, they are:

  - **Health and Safety Executive (HSE):** The authority commissioned by the Health and Safety at Work Act 1974 for promoting safe workplaces are the main enforcing authority for industrial premises, including Hospitals.

  - **Local Authorities:** The local authority safety inspector that looks at commercial enterprises including kindergartens, kitchens and catering outlets.

5. **ROLES AND RESPONSIBILITIES**

5.1 **Chief Executive and the Board of Directors**

The Chief Executive has overall responsibility for Health and Safety across the Trust and through management arrangements ensures that sufficient arrangements and resources are allocated to manage safety throughout the Trust.

The Board of Directors have a joint responsibility to:

- Demonstrate commitment to Health and Safety leadership
- Ensuring that structures exist for the management of Health and Safety across management teams and engagement in the Safety and Security Committee
- Ensuring the risk management strategy supports the Health and Safety arrangements
- Ensuring that adequate financial, material and physical resources are identified to mitigate risks in their area of control

5.2 **Director Lead for Health and Safety**

The Chief Finance and Commercial Officer is the Director Lead responsible to the Trust Board on matters of Health and Safety. He delegates the management arrangements down to the Head of Estates and Facilities and the Fire, Health and Safety Manager, reporting through to the Audit Committee.

5.3 **Managers and Professional Leads**

Managers and professional leads have a key role in leading and co-ordinating Health and Safety matters. They are responsible for ensuring that their staff comply with the Health and Safety Policy and Procedures. Managers are responsible for:

- Nominating and supporting workplace Health & Safety Monitors to carry out monitoring and safety audits (Fire Wardens, COSHH Monitors and Safety Reps)
• Ensuring ward/department risk assessments are documented and that suitable controls are in place to manage identified risks that are communicated to all staff

• Ensuring emergency procedures are communicated to all staff under their responsibility for the local area

• Creating and encouraging a positive safety culture within departments, supporting the reporting of incidents and concerns over workplace safety

• Ensuring that all accidents, incidents and near misses are reported and investigated according to the Trust’s Incident Reporting policy and that appropriate action is taken to prevent a reoccurrence

• Ensuring that all staff receives appropriate training, information, instruction and supervision in line with Trust policies including local induction for new starters

• Ensuring that approved Personal Protective Equipment (PPE) is made available, used, maintained and replaced as necessary

• Ensuring that all visitors and contractors brought on site by or on behalf of them work safely and in line with Trust policies and procedures

• Ensuring all work equipment has pre use checks conducted against it and that all defective equipment is clearly identified, taken out of service if necessary and reported to the appropriate department for repair or disposal

5.4 All Employees

All Employees (incl. Volunteers) have a responsibility and a ‘Duty of Care’ to work safely, to prevent injury or harm to themselves, fellow staff and others who may be affected by their acts or omissions. All staff are required to comply with this policy and are to:

• Read and comply with all risk assessments findings and safe systems of work

• Report any incident, accident, untoward occurrence, near miss, security concern, confidentiality breach, or potential risk which has or may lead to injury or damage.

• Report any defect in machinery or equipment to their manager or supervisor

• Use equipment correctly, including the completion of pre use checks, and not interfere with safety mechanisms, guards or anything provided for the safety of staff and others

• Correctly wear, maintain and store any PPE provided them

• Undertake instruction or safety training as required by the Trust

5.5 Safety Representatives

Appointed Health and Safety Representatives have a role in the promotion and improvement of Health and Safety by:
• Understanding and promoting the Health and Safety Policy.

• Representing employees in consultation with the management via the Joint Consultative Negotiations Committee (JCNC) and Health and Safety Committee as appropriate.

• Making representation to management on specific Health and Safety related issues.

• Contributing to the Trust Health & Safety Joint Management and Staff workplace inspections.

• Investigating incidents/accidents/near misses, hazards and or identified potential risks, examining the cause and reporting to management via the Health and Safety Committee to avoid recurrence.

• Representing and supporting employees in dealings with the HSE or local authorities’ enforcement.

5.6  Workplace Health and Safety Monitors

Workplace health and safety monitors are to be nominated by their departmental managers to champion workplace safety and specifically to carry out the following:

• Identifying workplace and work activity hazards (non-clinical), evaluating risks and documenting risk assessments on behalf of their managers.

• Assisting with workplace inspections, identifying areas of concern and raising them to their Line Manager for action.

• Raising awareness on Health and Safety issues to peers and managers.

• Conducting training as necessary to raise staff awareness on safety issues.

5.7  Fire, Health & Safety Manager

The Fire, Health and Safety Manager and Advisor fulfils the role of lead competent person. Responsibilities include:

• Ensuring that management arrangements are in place to identify and manage Health & Safety risks and that internal audits are conducted to monitor and review policies and procedures.

• Providing support and advice to managers regarding legal compliance with their Health and Safety related responsibilities.

• Ensuring that nominated workplace Health and Safety monitors are supported with training and information to enable them to carry out their safety roles.

• Liaison with and acting upon information/reports received from the Health and Safety Executive and other enforcing agencies.
• Monitoring the reporting of incidents and accidents, including those required to be reported under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

• Preparation and submission of an annual report on fire, health and safety compliance and managing quarterly Health and Safety Meetings to promote and manage safety arrangements in the Trust

5.8 Occupational Health Services

Occupational Health has the role of promoting and maintaining the physical, mental and social well-being of all employees. The Trust contracts services to discharge the following responsibilities:

• Advising on health surveillance requirements for staff

• Facilitating access to a confidential counselling services

• Advising managers, employees and Human Resources on individual cases where a return to work arrangement is required to ensure the health, safety and well-being of a member of staff returning to work after a period of sickness or absence due to work related injury or ill health.

5.9 Clinical Governance

Clinical governance is the system through which the Trust continuously improves the quality of services and safeguards high standards of care and patient safety. Risk management is a fundamental part of clinical governance leadership and systems are established to manage risk at all levels throughout the organisation as identified in the risk management strategy.

The clinical governance department provides the overview of risk management across the Trust with the risk manager being the focal point for risk management and incident reporting.

5.10 Security and Safety Committee

The function of the Security and Safety Committee is to develop a strategic framework for the management of procedures across the Trust. The Committee is split into two parts with the Security arrangements under the Security Policy and procedures being managed in the 1st Part of the meeting with Fire, Health & Safety forming the 2nd part of the meeting to be held quarterly. The combined committee reports to the Audit Committee as well as the Quality Committee for assurance purposes.
6. ARRANGEMENTS FOR HEALTH AND SAFETY

6.1 Safe Access to Premises
The Trust acknowledges its duty to ensure safe access and egress from the site, including during emergency situations for staff, patients and visitors alike. It satisfies those duties through:

- Provision of suitable access and car parking facilities for staff and patients
- Disability access for staff, patients and visitors.
- Provision of maintenance and housekeeping and domestic teams to respond to situations that may affect access, e.g. gritting roads & paths or cleaning spillages.

6.2 Accidents and Incidents
The Trust acknowledges its duty to investigate accidents and incidents as well as report those that are so required in accordance with RIDDOR. It satisfies those duties by:

- Operating an open “no blame” culture
- Providing and encouraging access to reporting processes.
- Providing feedback to staff that have made reports or been involved in incidents
- Investigating incidents leading to remedial actions
- Identifying incident trends and utilising cross NHS statistical analysis
- Investigation of serious incidents and near misses
- Reviewing incidents and investigations at appropriate committees

Details of the reporting procedure can be found in the Incident Reporting Policy.
6.3 **Asbestos**

The Trust acknowledges its duty to manage asbestos in the workplace in accordance with the Control of Asbestos Regulations 2012 [http://www.hse.gov.uk/asbestos/regulations.htm](http://www.hse.gov.uk/asbestos/regulations.htm), and satisfies those duties by:

- Appointing a responsible person
- Holding and maintaining an asbestos register
- Following a written management plan of survey, inspection, repair and removal
- Employing competent contractors to undertake asbestos works, including analysis and sampling of asbestos in line with the asbestos management plan
- Following a permit system for work conducted on asbestos and building areas

Details of the Asbestos Management strategy can be found in the Asbestos Management Procedure manual held with Estates and Facilities.

6.4 **Auditing and Review**

The Trust acknowledges the need to both proactively and reactively monitor its safety management system reported back through the Health and Safety committee. It achieves this by:

- Carrying out department/ward self-audits and risk based management audits
- Reviewing trend analysis of audit data including incident and security data

6.5 **Confined Spaces**

The Trust acknowledges its duty to manage entry into confined spaces in accordance with the Confined Spaces Regulations 1997 [http://www.hse.gov.uk/confinedspace/](http://www.hse.gov.uk/confinedspace/) and satisfies those duties by:

- Workplace Risk Assessment identifying confined spaces
- Providing health surveillance and medicals for staff required as required to enter confined spaces and continuing surveillance
- Provision of training for staff in entry, exit and emergency procedures as required
- Provision and maintenance of communication equipment, gas monitors, intrinsically safe tooling, rescue equipment and PPE for confined space entry as required.
- Use of isolation and Permit to Work systems where necessary.

Follow guidance through the HSE website.

6.6 **Consultation with the Workforce**

The Trust acknowledges its duty to communicate effectively with its workforce under the Safety Representatives and Safety Committees Regulations 1996, The Health and Safety (Consultation with Employees) Regulations 1996 and the Information and Consultation with Employees Regulations 2008. It achieves this by:

- Having appointed Trades Union Safety representatives in post
- Facilitating a Health and Safety Committee and providing the minutes on request
- Utilising the weekly brief available to all Trust staff
• Utilising the postmaster information system on all Trust PC’s
• Provision of information on notice boards on all levels
• Local and national NHS and Government issued newsletters, magazines and flyers
• Access to a medical library

6.7 Contractor Control

The Trust acknowledges its duty to manage Contractors to ensure that the best value service is provided without compromising health and safety for staff, patients, visitors and the contractors themselves during any works on site. This is achieved by:

• Pre-qualification checks prior to employment
• Specific risk assessment and method statements provided prior to work starting
• Consultation with contractors to identify and overcome hazards and safety issues
• Health and Safety file produced for CDM projects managed in accordance with CDM regulations 2015
• Performance audit and review
• Site induction

The Estates Contractor control procedure sits with the Estates Management Team.

6.8 Display Screen Equipment (DSE)

The Trust acknowledges its duty to manage the use of DSE in the workplace in accordance with the Display Screen Equipment Regulations 2002 and satisfies those duties by;

• Provide instructions on setting up workstations and carrying out DSE self-assessments
• Provide collective or one to one training as required
• Provide specialist ergonomic assessment when need identified
• Provide specialist DSE equipment against ergonomic assessment
• Provide free eye tests with a local optician and a contribution towards frame costs

Details of the Trust’s DSE management system can be found on the intranet in the DSE Procedure including details of eye sight testing.

6.9 Electrical Safety

The Trust acknowledges its duty to manage electricity, electrical supplies and equipment in accordance with the Electricity at Work Regulations 1999. This is achieved by:

• The use of competent, qualified, trained and experienced contractors and maintenance personnel to conduct all work involving electricity.
• Annual inspection and testing of lightning protection systems
• 5 yearly fixed installation testing and inspection.
• Rolling programme of Portable Appliance Testing (PAT).
• Secured electrical plant and switchgear systems.
• Following a permit system for works assessed as high risk.
• Implementation and introduction of standard electrical safety methods such as Residual Current Detection (RCD), Low voltage or battery powered tools, extension cable control and replacement.

Details of the Trust's electrical management procedures are managed by the Estates Management Team.

6.10 Environmental Monitoring

The Trust acknowledges its duties contained within the COSHH Regulations 2002 [http://www.hse.gov.uk/coshh/] managed through environmental monitoring that controls in respect of exposure to hazardous substances are in place are working, and for new processes are measured to ensure that Exposure Limits are not exceeded. This is achieved by:

- Risk assessment of workplaces and environmental measurement
- Monitoring based on risk assessment or accident/incident data
- Occupational Health surveillance results against benchmark data

Details of the COSHH Procedure can be found under Health and safety / COSHH on YCloud.

6.11 Fire Safety

The Trust acknowledges its duty to manage fire risks in the workplace in accordance with the Regulatory Reform (Fire Safety) Order 2005 [https://www.gov.uk/workplace-fire-safety-your-responsibilities] details of which can be found in the Fire Safety Strategy.

6.12 Hazardous Substances

The Trust acknowledges its duty to control hazardous substances (including biological agents) in the workplace in accordance with the Control of Substances Hazardous to Health Regulations 2002 [http://www.hse.gov.uk/coshh/] and satisfies those duties by;

- Training local COSHH Assessors and targeted awareness training.
- Providing a database of COSHH Assessments and Material Safety Data Sheets.
- Provision of appropriate engineering controls such as LEV and secure storage, admin controls such as safe systems of work and correctly fitted, approved PPE.
- Provision of spill training and equipment in identified risk areas
- Providing occupational health surveillance identified by risk assessment.

Details of the Trust hazardous substances strategy can be found on the intranet in the Hazardous Substances Procedure.

6.13 Health & Safety Training

The Trust acknowledges its duty to provide training to all staff in the Health and Safety at Work etc. Act 1974 and Management of Health and Safety at Work Regulations 1999 by:

- Providing Induction training for all staff at a Trust level and local induction at a department level at the start of employment
• Delivering mandatory training for all staff at 2 yearly intervals
• Targeted training in areas such as:
  o Fire Wardens
  o Use of Fire Extinguishers
  o Use of Evacuation equipment
  o Manual Handling (equipment and skill based)
  o General Health and Safety awareness
  o General COSHH awareness
  o First Aiders (full and appointed person)

6.14 Health Surveillance

The Trust acknowledges its duty to provide occupational health support to its workforce that may be exposed to hazardous substances or activities and satisfies those duties by:

• Carrying out pre-employment medical questionnaires and examinations
• Annual surveillance against baseline data of identified staff for issues such as:
  o Noise exposure
  o Vibration exposure
  o Occupational disease
  o Respiratory sensitiser or irritant exposure
• Return to work medicals

Follow guidance through the HSE website: [http://www.hse.gov.uk/health-surveillance/](http://www.hse.gov.uk/health-surveillance/)

Full details of the Occupational Health services can be found on the intranet under [http://ycloud/teams/humanresources/occupationalhealth/SitePages/Home.aspx](http://ycloud/teams/humanresources/occupationalhealth/SitePages/Home.aspx)

6.15 Lasers

The Trust acknowledges its duty to manage the use of Lasers on its premises in accordance with the Management of Health and Safety at Work Regulations 1999 and satisfies those duties by:

• Appointing a Laser safety Advisor to the Trust
• Appointing local Laser safety Officers
• Writing and implementing Laser Safety Local Rules
• Providing appropriate PPE to personnel identified within the assessment
• Providing permanent and temporary warning signs as necessary
• Maintaining and calibrating all Laser equipment and its built in safety systems as required by the manufacturer
• Storing Laser equipment to prevent unlawful and unauthorised use

Guidance on laser safety can be found through the HSE website.

6.16 Legionella

The Trust acknowledges its duty to manage the release of Legionella Bacteria from its water systems in accordance with the Control of Substances Hazardous to Health Regulations 2002 and ACoP L8 [http://www.hse.gov.uk/legionnaires/](http://www.hse.gov.uk/legionnaires/) and satisfies those duties by;
• Appointing a Responsible person (Maintenance Manager)
• Holding and maintaining risk assessments (including drawings) of all water systems
• Maintaining water systems through dosing techniques, cleaning, flushing, lagging and removal of dead legs
• Employing competent contractors to undertake Legionella works on its behalf as required

Details of the Legionella Management strategy can be found in the Water Safety Policy managed through the Estates Management team.

6.17 Lone Working

The Trust acknowledges its duty to manage lone working in the Management of Health and Safety at Work Regulations 1999. It satisfies that duty by:

• Restricting lone working activities to the minimum number possible to achieve strategic aims of the Trust.
• Providing specific lone worker assessments when role cannot be avoided
• Providing a minimum of 2 choices of communication to lone workers
• Following a strict booking in/out and check call in system
• Management physical checks against a set timetable
• Use of CCTV images where coverage allows

Full details of the Trust lone worker strategy can be found on the intranet in the Lone Working Procedure.

Follow guidance through the HSE website: http://www.hse.gov.uk/toolbox/workers/lone.htm

6.18 Machinery, Tools and Equipment


• Training for staff in equipment servicing and maintenance as appropriate
• Risk assessment for the machine or process including statutory and local controls
• Planned preventative maintenance systems

6.19 Manual Handling (MH)

The Trust acknowledges its duty to manage manual handling in the workplace in accordance with the Manual Handling Operations Regulations 1998 http://www.hse.gov.uk/msd/manualhandling.htm and satisfies those duties by:

• Provision of load management and ergonomics awareness training to all staff
• Promoting back care
• Provision of specific targeted MH training on recognised techniques and aids to identified staff groups
- Provision of MH risk assessment on identified tasks to support staff training
- Continual assessment of trained staff to confirm retention of skill base
- Mandatory periodic training sessions held centrally and locally

Details of the Trust manual handling strategy for staff can be found on the intranet in the Manual Handling Policy.

6.20 **New and Expectant Mothers**

The Trust acknowledges its duty to manage the work load of new and expectant mothers in the Management of Health and Safety at Work Regulations 1999 and satisfies those duties through:

- Occupational Health assessment of capabilities if requested
- Local alteration of job specifics during pregnancy through management assessment
- Provision of time to rest in order to allow attendance at work to continue
- Provision of maternity leave in accordance with UK Legislation

Full details of the Trust strategy regarding new and expectant mothers can be found on the intranet in the Maternity Leave Procedure.

Follow guidance provided through the HSE Website [http://www.hse.gov.uk/mothers/](http://www.hse.gov.uk/mothers/)

6.21 **Noise**

The Trust acknowledges its duty to manage exposure to noise in the workplace in accordance with; The Control of Noise at Work Regulations 2005 [http://www.hse.gov.uk/noise/regulations.htm](http://www.hse.gov.uk/noise/regulations.htm); and satisfies those duties by;

- Providing noise assessments for identified processes and areas
- Maintaining machinery and equipment in accordance with schedules
- Identifying quieter machinery and equipment or engineered methods of reducing noise levels on existing equipment
- Providing hearing protection with correct levels of sound attenuation to all staff identified in the assessment process
- Providing mandatory and temporary warning signs as appropriate
- Providing occupational health support for personnel identified as exposed to regular high levels of noise exposure

Follow guidance provided through the HSE website.

6.22 **Permits to Work**

The Trust acknowledges its duty to introduce detailed working systems where a task or process is identified by risk assessment as needing specific admin controls to ensure the safety of staff conducting the task and personnel in the immediate area. These duties are satisfied by:

- Using permits that detail strict procedures to be followed for tasks that include;
  - Electrical work
  - Working at Height
Training management and staff in the correct use of the permit system.

- Monitoring of issued permits through Senior Mechanical Technical Officer and Maintenance manager
- Provision of suitable training, equipment and signage to follow the permit.

Full details on the Trust’s permit management system can be accessed through the Estates Management Team including management procedures for Electrical safety; Isolation of Services; Confined Spaces and Working with Asbestos procedures.

Follow guidance provided through the HSE website:
http://www.hse.gov.uk/comah/sragtech/techmeaspermit.htm

6.23 Personal Protective Equip (PPE) & Respiratory Protective Equipment (RPE)

The Trust acknowledges its duty to provide appropriate PPE to staff as identified by risk assessment in accordance with the Personal Protective Equipment Regulations 1992 http://www.hse.gov.uk/coshh/basics/ppe.htm, and where appropriate other specific legislation relating to PPE such as Noise, COSHH, Lead, Asbestos and Ionising Radiation and satisfies those duties by:

- Providing free of charge all PPE identified by risk assessment to relevant staff
- Providing training on the correct use, maintenance and storage of PPE
- Provision of fitting for certain types of PPE
- Audit and inspection of PPE at pre-determined levels in line with UK legislation where applicable.

Follow guidance through the HSE website.

6.24 Risk Assessment

The requirement for Risk Assessment is set out in Regulation 3 of the Management of Health and Safety at Work Regs 1999. There is a requirement for all managers and departments to carry out a department and / or specific risk assessments to identify Hazards and Risk with the aim of identifying and reducing the risk of harm to employees and others who may be exposed from work activity, or through access to premises.

The Trust Risk Management Strategy in accordance with the Health and Safety Executive guidance on Controlling Risks in the Workplace identifies responsibilities and includes details on the 5 Steps to Risk Assessment.

Risk Assessment information and forms can be found on YCloud under Clinical Governance /Risk Management.

6.25 Slips, Trips and Falls

The Trust acknowledges its duty to manage its floors, walkways and access routes in order to prevent Slips, Trips and Falls (STF) to staff, patients and visitors under the Workplace (Health, Safety and Welfare) Regulations 1999 and satisfies these duties by:
• Awareness training at induction
• Ward/ department risk assessment
• Planned cleaning regime
• Temporary and permanent repairs to identified poor surfaces
• Cleaning inspections
• Provision of non-slip footwear in identified areas

Details regarding the Trust’s management strategy to prevent STF regarding Patients can be found in the Prevention and Management of In-Patient Falls Policy. The management strategy for staff and visitors can be found on the intranet in the Slips, Trips and Falls Procedure. Details regarding falls from height are contained in serial 7.31 below.

6.26 Management of Work Related Stress

The Trust acknowledges its duty to manage workplace based stressors in the Management of Health and Safety at Work Regulations 1999 and satisfies these duties by:

• Conducting work related stress risk assessments
• Providing staff training including identifying and dealing with stress
• Occupational health support
• Alteration of workloads and flexible hours to assist staff where appropriate
• Counselling services available
• Staff wellbeing initiatives
• Following the Policy for the Management of Attendance arrangements.

Full details on the Trust’s Stress management procedure can be found under Human Resources Policy Manual.

6.27 Vibration

The Trust acknowledges its duty to manage exposure to vibration in the workplace in accordance with The Control of Vibration at Work Regs 2005 http://www.hse.gov.uk/vibration/hav/regulations.htm and satisfies those duties by:

• Carrying out risk assessment on workplaces and work processes and equipment
• Recording all recognised vibrating equipment and their levels of use
• Regular scheduled maintenance of vibrating equipment
• Collating bench test data for vibrating equipment and specific measured data for higher risk procedures
• Occupational health surveillance for personnel exposed to vibration
• Provision of appropriate training and PPE for personnel using vibrating equipment

Follow guidance through the HSE website.

6.28 Violence and Aggression

The Trust acknowledges its duty to protect staff from violence and aggression, including bullying, verbal abuse and harassment from other members of staff, patients and visitors. It achieves this by meeting the NHS Security Standards including:
- Providing awareness training for all staff at Induction and on Mandatory training
- Delivering Conflict Resolution Training (CRT) to front line staff identified on a needs basis
- Provision of a dedicated Local Security Management Specialist (LSMS) to support and advise on standards
- Carrying out security risk assessments
- CCTV coverage in public areas
- Using the Managing Violence and Aggression policy and implementing a warning system for offenders
- Staff code of conduct and discipline procedure
- Provision of security personnel on site
- Provision of pastoral support and counselling if requested

Details of the Trust’s strategy can be found in the Security and Managing Violence, Aggression and Abuse in the Workplace Policy

6.29 Waste

The Trust acknowledges its duty to manage the waste that it produces in accordance with the Environmental Protection Act 1990, its subordinate legislation and applicable NHS strategies. It satisfies this by:

- Providing facilities for segregated disposal of waste streams
- Providing facilities for recycling of materials at point of use
- Providing a waste removal service from point of use with dedicated staff
- Using competent, licensed waste removal contractors for the onwards disposal of all waste streams
- Cataloguing consignment and transfer notes as part of the cradle to grave evidence chain
- Conducting random duty of care phone calls and/or visits to final disposal sites to confirm system

Details of the Trust Waste Management strategy can be found through Estates procedures.

6.30 Welfare Facilities

The Trust acknowledges its duty to provide adequate welfare facilities to staff in the Workplace (Health, Safety and Welfare) Regulations 1992 and satisfies those duties by:

- Provision of occupational health support to all staff.
- Provision of local first aid or appointed person trained personnel.
- Provision of facilities to buy, heat and consume hot and cold drinks and food and supplies of free potable drinking water.
- Provision of segregated and lockable toilet, washing, showering and changing facilities.
- Provision of adequate storage for personal and issued clothing.
6.31 Working at Height (WAH)

The Trust acknowledges its duty to manage WAH in the workplace in accordance with the Working at Height Regulations 2005 [http://www.hse.gov.uk/work-at-height/the-law.htm](http://www.hse.gov.uk/work-at-height/the-law.htm) and satisfies those duties by:

- Providing suitable equipment and systems to access areas of height as identified by risk assessment.
- Ensuring that all permanently held access equipment is subject to maintenance and inspection by a competent person as required by current UK Legislation.
- Training staff to erect, use, inspect and dismantle permanently owned or hired access equipment (including MEWPs) as necessary.
- Employing competent contractors to erect and inspect scaffolding and other access equipment when required
- Use of WAH permits as required by risk assessment

Follow guidance through the HSE website

6.32 Ionising Radiations

The Trust acknowledges its duty to manage exposure to X-Rays and Ionising radiations in the workplace in accordance with the Ionising Radiation Regulations 1999 and satisfies those duties by:

- Appointing a Radiation Protection Adviser (RPA) for the Trust
- Appointing local Radiation Protection Supervisors (RPS)
- Writing and communicating local rules and risk assessments
- Demarking both permanent and temporary radiation controlled areas as necessary
- Provision of dosimeters and other PPE to all staff working within radiation generating areas
- Provision of interlocked doors, appropriate signage and light warning systems for radiographic areas
- Securing all radiation generating equipment when out of use to prevent unauthorised access or use
- Disposing of radioactive equipment in accordance with the HPA Radiological Division and Environment Agency guidance.

Refer to the Ionising Radiation Safety Policy managed by the Radiology Manager

6.33 Young Persons

The Trust acknowledges its duty to protect young persons in the Management of Health and Safety at Work Regulations 1999 and satisfies those duties by:

- Risk assessment of placement role
- Provision of competent supervision and mentoring
- Prevention of access to high risk areas and tasks

Details can be found on the intranet in the Young Persons Procedure and the Recruitment and Selection, Volunteer and Work Experience Policies.

Follow guidance through the HSE website: [http://www.hse.gov.uk/youngpeople/risks/](http://www.hse.gov.uk/youngpeople/risks/)
7. IMPLEMENTATION, MONITORING AND EVALUATION
The implementation of this policy and its associated procedures is monitored and evaluated by the Fire, Health and Safety Manager and Health and Safety Committee through the results of department twice yearly self-audits and planned management system audits.

The monitoring of associated procedures will be undertaken every one to three years dependant on the procedure. Further monitoring or review may be undertaken due to training needs analysis identifying an omission, changes in legislation, equipment, locations, process or personnel or in the event of a significant accident.

8. APPLICABILITY
This policy applies to all staff employed by the Trust, whether on a permanent or temporary basis.

9. EQUALITY IMPACT ASSESSMENT
This policy has been assessed and implemented in line with the policy on procedural documents and an equality impact has been carried out to ensure the policy is fair and does not discriminate any staff groups. A completed Equality Impact Assessment can be found at Annex A at the end of this policy.
Annex A – Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Name of Document: Health & Safety Policy

<table>
<thead>
<tr>
<th></th>
<th>Does the policy/guidance affect one group less or more favourably than another on the basis of:</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>Race</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Ethnic origins (including gypsies and travellers)</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Nationality</td>
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<td></td>
<td>Gender</td>
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<td></td>
<td>Culture</td>
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<td></td>
<td>Religion or belief</td>
<td>No</td>
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<tr>
<td></td>
<td>Sexual orientation including lesbian, gay and bisexual people</td>
<td>No</td>
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<tr>
<td></td>
<td>Age</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Disability</td>
<td>No</td>
</tr>
</tbody>
</table>

2. Is there any evidence that some groups are affected differently?

None

3. If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?

None Identified

4. Is the impact of the policy/guidance likely to be negative?

No

5. If so can the impact be avoided?

Not Applicable

6. What alternatives are there to achieving the policy/guidance without the impact?

Not Applicable

7. Can we reduce the impact by taking different action?

Not Applicable

For advice or if you have identified a potential discriminatory impact of this procedural document, please refer it to The Equality & Diversity Lead, Yeovil Academy, together with any suggestions as to the action required to avoid/reduce this impact.

Signed; Adrian Pickles (Fire, Health & Safety Manager)

Date: 21/12/2015