Policy:
DCEO 001 - Health and Safety

Executive Director Lead	Deputy Chief Executive
Policy Owner	Health Safety and Risk Adviser
Policy Author	Health Safety and Risk Adviser

Document Type	Policy
Document Version Number	6
Date of Ratification	25/06/2020
Ratified By	People Committee
Date of Issue	30/06/2020
Date for Review	30/06/2023

Summary of Policy

This policy is a statement of the Trusts intention to observe relevant health and safety legislation. It outlines the staff roles and responsibilities necessary to protect the health and safety of Trust staff, service users and others affected by its work activities.

Target audience	Applicable to all Trust staff

Keywords	Health, Safety, Welfare, Prevention of Injury, Prevention of ill Health

Storage
This is Version 6 and is stored and available through the SHSC Intranet/Internet.

This version supersedes the previous Version 5 May 2017.
Any copies of the previous policy held separately should be destroyed and replaced with this version.

Contents

Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
5	Review on expiry of policy	February 2017	Full review completed as per schedule
6	Review on expiry of policy	February 2020	Rewritten Policy has been shortened and responsibilities and accountabilities of staff made clearer
6	Review and change to content	May 2020	Text changes made following consultation with Staff Side e.g. 'Flowchart' deleted and duties owed to specific groups of employees made clearer and ultimate responsibility of Trust Board for staff safety made clear. The Trusts duty to report certain incidents under RIDDOR legislation was also made clear.

1. Introduction

Sheffield Health and Social Care NHS Foundation Trust recognises its responsibilities under the Health and Safety at Work Act 1974 and Regulations made under it to protect, so far as is reasonably practicable, the physical health safety and mental welfare of its employees, service users and others affected by its work activities.

To this end the Trust will, so far as is reasonably practicable;

- ensure that any relevant identified health and safety risks are eliminated, or reduced to an acceptable level, thus reducing accidents, incidents and cases of work related ill health.

- provide clear and adequate instructions, information, training and supervisory support to ensure that employees are competent to safely carry out their work.

- provide the necessary levels of investment in personnel, training, plant, equipment and materials to ensure that a high standard of health, safety and welfare is achieved and maintained, in working practices and in working conditions.

- ensure the safe storage and use of potentially hazardous substances

- consult with employees on the resolution of day-to-day health and safety matters.

- plan the implementation of emergency procedures - evacuation in case of fire or other significant incident.

- monitor, audit and regularly review this policy and measure safety performance to enable continual improvement.

2. Scope

This is a Trust-wide policy and is relevant to all members of SHSC staff, service users and visitors.

3. Purpose

The purpose of this Policy is to provide an unambiguous statement of health and safety policy applicable to Sheffield Health and Social Care NHS Foundation Trust (SHSC) in accordance with national legislation.

4. Definitions

Risk – a health and safety risk is the likelihood that a work task/situation will cause someone harm

Risk Assessment – the practice of examining what in your work could cause harm to someone, or could endanger their safety, so that you can consider the need to put in place additional precautions to prevent such harm.

5. Detail of The Policy

The broad overview of this policy is as described in the introduction.

6. Duties

6.1 The Trust Board

The Trust Board has ultimate responsibility for the implementation and effective management of good health and safety practice within the Trust.

It will ensure that suitable and sufficient governance arrangements are in place to manage health and safety related matters in a way which complies with applicable legislation and so prevents, as far as is reasonably practicable, injury, illness or financial loss.

This will include facilitating the development of partnership initiatives with stakeholders and other appropriate bodies in the provision of adequate health and safety for their employees and service users, where reasonably practicable.

6.2 Directors

Directors will ensure that this policy and associated procedures, protocols, guidance and management systems are fully understood, applied and resourced within their respective areas of responsibility and that these arrangements are monitored for continued effectiveness.

In particular, ensuring that the health, safety and welfare of staff is always considered at the planning stage of organisational changes within the Trust.

6.3 Managers

Operational Managers will implement suitable and sufficient health and safety processes/measures to identify relevant health and safety hazards, apply appropriate control measures and ensure that these processes are monitored to confirm their continued effectiveness in preventing harm or ill health, so reducing and controlling health and safety risks to the relevant groups of people within their area of managerial responsibility.

Typically, such arrangements involve the use of an integrated suite of complimentary documents written both centrally and locally and will include a 'H&S Policy', written 'Risk Assessments', 'Standard Operating Procedures' and various checklists.

6.4 Competent Advisors

The Trust will ensure that expert advice and support is provided by a 'Competent Person' to managers to enable them to fulfil their legal duties.

If necessary, Operational Managers can seek advice from the Trust's competent persons, e.g. Health Safety and Risk Advisor, Infection Control Nurse, Back Care Adviser, Occupational Health Advisors, Medical Devices Safety Officer or Estate Services Officers, on matters such as the safe maintenance of equipment, the management of ligature points, water systems, electrical systems, and asbestos.

Such liaison could help Operational Managers appropriately manage risks which affect the health or the safety of Trust employees or visitors, but whose control measures are beyond the manager's competence.

For example; using appropriate well-maintained plant and equipment operated by adequately trained staff, helps prevent accidents and reduces personal harm and financial costs.
So, the Facilities and Estates Department will ensure that infrastructure related plant, machinery and equipment is correctly specified and installed, then maintained in a safe working order.

Any safety issues with infrastructure related plant, machinery, equipment or the fabric of the building should be reported to: Estate Services Direct Link on telephone (27)18181.

Clinical staff will ensure that medical or therapeutic devices/equipment/apparatus used in "direct patient care activities" are used and maintained in safe working order.

Any safety issues with medical or therapeutic device/equipment/apparatus used in "direct patient care activities" should be reported to: the Medical Devices Safety Officer (MDSO) – if in post, or the 'Health Safety and Risk Adviser'.

6.5 Employees

All employees should;
- co-operate with managers on health and safety matters
- take reasonable care of their own and other persons health and safety
- work in accordance with information and training provided to them
- report all health and safety concerns to an appropriate person

7. Procedure

The following provides an overview of the general principles by which the Trust will ensure the health, safety and welfare of its staff, patients and visitors, as far as is reasonably practicable.

There are many Trust polices that provide more detailed guidance to assist with managing specific risks. These Policies should follow the principles of good Health and Safety management outlined in this Policy. Examples of such safety-related policies are listed at Section 13.

In addition, there may also be applicable Standard Operating Procedures and other types of guidance written and stored at workplace level.

For example; ensuring that near misses, accidents and incidents from within any discipline are reported and that the opportunity is taken to learn any lessons on how to prevent future occurrences will involve several documents of different types and from different origins.

7.1 Risk Assessments

The law requires the Trust to identify, assess and manage the significant health and safety risks posed to its staff and visitors, via the completion of written Risk Assessments.

The 'Risk Management, Policy and Procedure' and the 'Risk Management Handbook' provide guidance on this matter.

See relevant Safety Protocol for a template 'Health and Safety Risk Assessment'.

7.2 Safety for Specific Groups of People

As an employer, the Trust must assess and manage the risks to everyone's health and safety, including staff with disabilities, pregnant staff and children (aged 0-16) and young people (aged 16-18).

Disabled People
Staff who have a disability that may expose them to increased risk of injury or ill health should be covered by a written risk assessment which can identify reasonable adjustments to help them do their job safely.

Children and Young People
Children and young people in the workplace, e.g. on work experience, whose reduced levels of experience and awareness may expose them to increased risk of injury or ill health should be covered by a written risk assessment which can identify reasonable measures to help them to remain safe.

Pregnant staff
Staff who are pregnant should be covered by a written 'New and Expectant Mothers Risk Assessment' which can identify reasonable adjustments to help them do their job safely, as their pregnancy progresses. Once the employee returns to work, following Maternity Leave, a new risk assessment will be completed to ensure that the appropriate facilities are in place to protect the health and safety of the new / nursing mother.

Visitors
Visitors can be at increased risk of injury or ill health when visiting the Trust, because they may not be aware of the hazards to their health or their safety. Therefore, Trust staff inviting visitors to Trust premises must ensure visitors follow local, safety arrangements.

7.3 Health and Safety Inspections, Audits and Checklists

Health and safety inspections of a workplace can be used as means to identify the existence of potential workplace hazards, and therefore to verify the need for an Assessment, or to verify the completion of actions required by the Assessment to control the identified health or safety risks.

Health and safety audits of service provision can be used as a means to identify the existence and effectiveness of health and safety risk control measures.

Both the above document types can be recorded within a checklist format.

The Trust's generic Health and Safety 'Inspection Checklist' can be found on the Health and Safety pages of the Trusts intranet.

Other more specialist inspections or audits, which use different checklists will be carried out by either Trust Advisors or Trust appointed contractors.

7.4 Information, Instruction, Training

Staff will be provided with whatever information, instruction, training and supervision is necessary to ensure, so far as is reasonably practicable, their health and safety at work.

A copy of the poster **'Health and Safety Law: What you need to know'** which gives very basic information is displayed in an accessible area within every Trust premises.

More specific safety-related information is cascaded via the Health and Safety Group, email system, on the intranet, local notice boards and team meetings.

Basic Health and Safety Induction Training is given to staff new to the Trust and is refreshed every three years on a mandatory basis.

There is a programme of additional Health and Safety courses advertised on the Trust intranet.

The content of other safety related training for specific staff will be informed by the specific Risk Assessments applicable to the work of those staff.

7.5 Reporting of Incidents

All near misses, accidents and incidents must be reported as per the **Incident Management Policy and Procedure** and the opportunity taken to learn any lessons on how to prevent future occurrences of these events.

In addition, the Trust is required to report certain events to the Health and Safety Executive (HSE) under the 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations' (RIDDOR). Please see the above Policy for details.

8. Development, Consultation and Approval

The Trust recognises its legal duty to consult with employees on matters that affect their health and safety and is aware of the benefits of doing so. This entails not only giving information to employees, but also listening to and taking account of what they say before making any health and safety decisions.

The Trust will provide its employees, and/or their representatives, with the information necessary to allow them to participate fully and effectively in consultation, and carry out other representative functions.

The primary mechanism for consultation on health and safety issues is via elected members of recognised Trade Unions, or nominated representatives - attending the Health and Safety Group.

This Group, which includes Staff Side representatives and staff representatives from both clinical and non-clinical services, has considered this Policy at its May 2020 meeting.

The Equality Impact Assessment will be undertaken and stored separately in conjunction with Corporate Governance and the Head of Equality and Inclusion.

9. Audit, Monitoring and Review

Monitoring Compliance Template						
Minimum Requirement	Process for Monitoring	Responsible Individual/ group/committee	Frequency of Monitoring	Review of Results process (e.g. who does this?)	Responsible Individual/group/ committee for action plan development	Responsible Individual/group/ committee for action plan monitoring and implementation
Completion of Risk Assessments	Audit	Health Safety and Risk Adviser	Annual	Health and Safety Group	Health and Safety Group	People Committee
Number and type of incidents affecting SHSC staff, visitors or those affected by Trust activity	Review	Health and Safety Group	Quarterly	Health and Safety Group	Health and Safety Group	People Committee
Completion of mandatory H&S training by staff	Review	Health and Safety Group	Quarterly	People Committee	Health and Safety Group	People Committee

The policy review date is 30 June 2023

10. Implementation Plan

Action / Task	Responsible Person	Deadline	Progress update
Accountable for health and safety policies	Deputy Chief Executive	N/A	N/A
Upload new policy onto intranet and remove old version	Policy Governance once Policy has been ratified by the People Committee	July 2020	
Make staff aware of new policy and affected persons responsibilities. Introduce processes required to implement Policy.	Workplace managers	July 2020	

11. Dissemination, Storage and Archiving (Version Control)

Version	Date on website (intranet and internet)	Date of entry in Connect (all staff communication)	Any other promotion/ dissemination (include dates)
5.0	February 2017	March 2017	
6.0	July 2020	July 2020	Managers briefing as appropriate July 2020

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All versions of HR policies are stored on the HR Shared Drive by the policy author and the PA to the Director of Human Resources. Word copies of final versions of policies can be obtained from Policy Governance via the PA to the Director of Human Resource

12. Training and Other Resource Implications

There is a programme of additional Health and Safety courses advertised on the Trust intranet.

13. Links To Other Policies, Standards, References, Legislation (Associated Documents) And National Guidance

Health and Safety at Work Act 1974
Management of Health and Safety at Work Regulations 1992 (as amended)
Back Care and Manual Handling Policy
Central Alert System (CAS) Policy
Control of Substances Hazardous to Health (COSHH) Regulations 2002
Control of Substances Hazardous to Health (COSHH) Policy
Decontamination Policy
Display Screen Equipment Policy
Falls (Staff and Public) Policy
Fire Safety Policy
First Aid Policy
Health and Safety (First-Aid) Regulations 1981
Health and Safety (Display Screen Equipment) Regulations 1992
Incident Management Policy and Procedure
Infection Prevention and Control Policy
Latex Sensitisation Policy
Legionnaires' Disease. The control of Legionella bacteria in water systems
Ligature and Blind Spot Reduction Policy
Lone Worker Policy
Low Voltage Electrical Safety Policy
Management of Asbestos Policy
Management of Contractors Policy
Mandatory Training Policy
Medical Devices Policy
Provision and Use of Work Equipment Regulations 1998
Risk Management, Policy and Procedure
Security Policy
Slips Trips and Fall Policy
Stress Management at Work Policy
Water Quality Policy
Work Time Regulations Policy
The Working Time Regulations 1998

14. Contact Details

Job Title	Name	Phone	Email
Deputy Chief Executive	Clive Clarke	0114 27 16370	clive.clarke@shsc.nhs.uk
Health Safety and Risk Adviser	Charlie Stephenson	0114 27 16208	charlie.stephenson@shsc.nhs.uk

Appendix A

Equality Impact Assessment Process and Record for Written Policies

 (see Implementation Plan) / no changes made.

Stage 1 – **Relevance** - Is the policy potentially relevant to equality i.e. will this policy <u>potentially</u> impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

NO – No further action is required – please sign and date the following statement. **I confirm that this policy does not impact on staff, patients or the public.**	*I confirm that this policy does not impact on staff, patients or the public – in terms of any 'protected characteristics'.* Name/Date: C. Stephenson. 1/06/2020

YES, Go to **Stage 2**

Stage 2 Policy Screening and Drafting Policy - Public authorities are legally required to have 'due regard' to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain 'protected characteristics' and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don't know and note reasons). Please see the SHSC Guidance and Flow Chart.

Stage 3 – **Policy Revision** - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Age related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
Disability	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Ability related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		
Gender Reassignment	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Gender related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		
Pregnancy and Maternity	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. New or Expectant mother related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		

Race	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Race related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		
Religion or Belief	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Belief related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		
Sex	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Gender related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		
Sexual Orientation	It is not expected that implementation of this policy will be an issue within the realm of this characteristic		
Marriage or Civil Partnership	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Personal circumstance related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements reduce the likelihood of any harm so far as is reasonably practicable		

Please delete as appropriate: - Policy Amended / Action Identified
(see Implementation Plan) / no changes mad

Impact Assessment Completed by: Charlie Stephenson
Name /Date: 01/06/2020