

Health and Safety Policy

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1. Introduction

This Health and Safety Policy is a written statement of a general policy with respect to health and safety.

This statement is a fundamental requirement of section 2(3) of the Health and Safety at Work Act 1974 and Regulation 3 and 5 of the Management of Health and Safety at Work Regulations 1999.

The statement includes the current organisational arrangements for meeting the policy.

2. Purpose or aim

Showing clear commitment to managing health and safety risks is not only a legal requirement but it openly demonstrates the high regard we have for the health and safety of our staff while they are at work. Effective management of health and safety risks helps to:

- Prevent people from being injured or made ill by the work they do for us
- Maximise the well-being and productivity of our employees
- Prevent damage to our reputation as an employer and provider of health care services
- Avoid detrimental effects on our effectiveness and performance to deliver health care services
- Minimise the likelihood of prosecution and civil claim.

This policy is based on the following beliefs:

- Good occupational health and safety management is an essential part of the effective management of people at work
- Trust staff and service users have the right to a safe environment
- Taking action to prevent injury and ill health caused by work can release valuable resources to deliver better healthcare
- Improving the working lives of staff contributes to better clinical care through improved recruitment and retention
- Improving the working lives of staff improves employee morale and performance
- Legal requirements outline the minimum standards that need to be achieved
- Health and safety can be actively managed as with any other business function
- Accidents and ill health caused by work are not only a human cost, but also an economic cost to the organisation

3. Scope

This Policy applies to all premises, work and activities under the control of Avon and Wiltshire Mental Health Partnership NHS Trust (AWP).

4. Definitions

Glossary of terms used within this policy

PMVA	Prevention and management of violence and aggression
COSHH	Control of Substances Hazardous to Health (Regulations)
H&S	Health and safety

HSE Health and Safety Executive

ACoP Approved Code of Practice

5. Policy Statement

Avon and Wiltshire Mental Health Partnership NHS Trust recognises its responsibilities and duties under health and safety regulations and is committed to ensuring, so far as is reasonably practical, the health safety and welfare of its employees, patients, visitors and other persons who may be affected by its activities. Statutory duties will be met at all times and it is the Trust's intention to adopt best practice standards and ACoPs in the management of health and safety.

The Trust recognises the strategic and moral importance of health and safety as an integral part of its business performance. It also accepts that most accidents are avoidable, and is committed to:

- develop a positive health and safety culture throughout the organisation, encouraging participation at all levels;
- achieving continual improvement in the safe working conditions and personal security of its employees, service users, visitors and contractors via its risk assessment and related programmes;
- provide health and safety training as appropriate;
- communicate with employees on health and safety matters;
- comply with/exceed statutory requirements as appropriate;
- provide and maintain safe plant and equipment;
- ensure safe handling and use of substances;
- audit compliance with H&S procedures.

The Trust regards it as essential for staff at all levels, throughout the organisation, to adopt a positive approach to achieving and maintaining a safe environment. Each employee will be given such information, equipment, instruction and training as necessary to enable the safe performance of work activities.

Adequate facilities and arrangements will be maintained to enable employees and their representatives to raise issues of health and safety.

It is the duty of management to ensure that all processes and systems of work are designed to take account of health and safety and are properly supervised at all times.

Competent people will be appointed within the Trust to ensure the Trust meets its statutory duties including, where appropriate, specialists from outside the organisation.

Every employee must co-operate with management to enable all statutory duties to be complied with. The successful implementation of this policy requires total commitment from all levels of employee. Each individual has a legal obligation to take reasonable care for his or her own health and safety and for the safety of other people who may be affected by their acts or omissions.

This policy will be regularly monitored to ensure that the objectives are achieved. Data, including organisational performance in Health and Safety will be utilised for this purpose. The review will be conducted by the Health, Safety, Security and Fire Group.

Trust Health and Safety policies will be reviewed and if necessary, revised in the light of legislation or organisational changes.

6. Arrangements for Implementing this Policy

6.1 Specialist Policies

Specialist Policies will be developed as required by appropriate assigned individuals or groups. These will be introduced, communicated and maintained with the back-up support, resources and training provision required in each instance enabling managers and staff to comply with the requirements of the policy concerned. Policies will be kept up to date in line with current legislation and will take into account any significant changes that may affect health and safety. See the Trusts Intranet for a list of current relevant policies.

(See list of policies in Section 18 Links to Other Policies in this policy).

6.2 Health and Safety Advice

6.2.1 Competent Persons

AWP will appoint competent persons to assist in undertaking its health and safety duties within each area. This includes competent health and safety advice (see 6.2.3 and 6.2.4) and competent risk assessors (see 6.6)

It is the responsibility of each Locality Clinical Director to ensure competent persons are identified for each area. Staff undertaking safety risk assessments must be trained.

6.2.2 Occupational Health (OH)

The Trust's Occupational Health Providers will provide

- Pre-employment health assessment and screening
- Maintenance of occupational health records for all staff
- Staff immunisation for work related hazards
- Health assessments for returnees to work in order to establish fitness to work
- Health surveillance of staff

6.2.3 Head of Health and Safety

The Trust's Head of Health and Safety will:

- a) Provide advice to managers on risk assessment in accordance with the Management of Health and Safety at Work Regulations 1999
- b) Provide specialist advice on the COSHH Regulations; the Manual Handling Operations Regulations; Health and Safety (Display Screen Equipment) Regulations; First Aid; Ergonomic Assessment and any other appropriate regulations and directives
- c) Provide advice to the Learning and Development Department on the content and scope of Health and safety training
- d) Assist the Operational Directorates in providing training to persons in order for them to be competent in undertaking risk assessments and other health and safety management duties
- e) Monitor the level of compliance and adequacy of risk assessments and escalate non-compliances and performance concerns as described in Section 8 and Appendix 3 of this policy (see [Appendix 3 – Health and Safety Reporting Structure](#)). Also refer to Section 5.5 of the [Risk Management Policy - P136](#)
- f) Advise the Trust of its obligations due to Health and Safety legislation, directives and codes of practice, developing and monitoring policies and procedures, maintaining relevant records and investigating accidents
- g) Carry out regular training and safety audits and assist with risk assessments when requested.

- h) The Head of Health and Safety is appointed in accordance with the Management of Health and Safety at Work Regulations 1999 and will provide advice on aspects of Health, Safety and Welfare in the working environment. This will be done without detracting from the primary responsibilities of management at all levels, which is to ensure safe and healthy conditions of work. The Head of Health and Safety has been delegated authority on behalf of the Executive Management Team to issue internal compliance notices within the Trust.
- In situations requiring improvements where there has been a consistent failure to resolve an issue an Internal Improvement Notice may be issued. Examples of these can be found in [Appendix 1: Internal Improvement Notice](#) and [Appendix 2 – Internal Prohibition Notice](#) of this policy. An Internal Prohibition Notice may be issued requiring cessation of use/activity/work where there is an immediate or imminent risk of danger which warrants its use. These may be issued by the Head of Health and Safety and by the Health and Safety Advisors working within the corporate Health & Safety Department. Any such notices must be authorised by the On Call Director, Chief Executive or Acting Chief Executive within 1 working day of issue. This should then be authorised within a further working day by the Chief Executive or Acting Chief Executive if not already done so.
 - It is not anticipated that these compliance notices will need to be exercised apart from in very rare and exceptional circumstances but that safety will be managed through normal management accountabilities, co-operation and dialog. This authority should not be construed as diminishing management responsibility and accountability for the management of health and safety within the Trust by its officers, managers and other employees. All employees have a duty under this policy to act responsibly for the safety of themselves and others (see Section 7 of this policy) which includes taking appropriate action where a risk has been identified.
 - Teams / Individuals / Directorates receiving Internal Improvement Notices or Prohibition Notices are required to act upon them within the timescales set. There will be opportunity to reach agreement on reasonable actions and timescales set out within a notice.
 - It is a breach of this policy if an Internal Improvement Notice or Prohibition Notice is not complied with and this will be considered as a disciplinary offence.

6.2.4 Health and Safety Advisors

The Trust's Health and Safety Advisors will provide:

- Advice and assistance to managers on all matters of health and safety risk assessments
- Local advice on specialist health and safety issues
- Health and safety training
- Assistance to managers in investigating significant adverse incidents
- Support for hub health and safety groups

6.2.5 Counselling & Trauma Support

Telephone and face to face counselling services are available to all AWP staff via the 24 hour Employee Support Services helpline.

Following an untoward incident at work trauma support sessions provided by trained practitioners, who are predominantly AWP staff, are available to individual staff and teams and is accessed via the 24 hour Employee Support Service Helpline.

6.2.6 Local Security Management Specialist (LSMS)

An accredited Local Security Management Specialist will, on behalf of the Trust, be responsible for taking all necessary action as described in the Secretary of State Directions (2003) amended directions (2006). This role is fully defined in the [Security Policy](#)

6.2.7 Estates and Facilities Management

Estates and Facilities Management will provide the Trust and its employees with safe plant and premises, liaise and manage external contractors in conjunction with Trust services.

The primary functions are to:

- Ensure that appropriate maintenance programmes and schedules have been identified for all trust premises, plant and equipment
- Establish appropriate planned and reactive maintenance arrangements to maintain buildings and structures in a safe condition
- Establish effective reporting arrangements to ensure that defects relating to buildings and structures are reported and rectified
- Ensure that contractors are appointed and monitored with regard to health, safety and welfare
- Ensure that business plans have fully considered health, safety and welfare issues
- Ensure that the Board is aware of significant risks relating to buildings and structures which may affect the health, safety and welfare of people and that action is proposed to mitigate these risks

6.2.8 Fire Safety Advice

The Head of Health and Safety (with expert advice from external Fire Safety Advisors) acts as the Lead Manager for Fire and is responsible for advising the Trust of its obligations due to fire legislation, directives and codes of practice, developing and monitoring policies and procedures, maintaining relevant records and investigating incidents. Operational management is through Clinical Directors of each LDU.

Fire advice is provided via a service level agreement and monitored by the Director of Nursing and Quality.

6.3 Operational Safety Groups

6.3.1 Locality Safety/Governance Groups

Groups will be established by the Clinical Directors within each Locality Directorate, with membership comprising management, medical representation and support from the health & safety team. The members of the group will draw up the terms of reference. Meetings will be held at least quarterly and will provide an operational link into the Trusts Health, Safety, Security & Fire Group and the Hub Health and Safety Groups ([Appendix 3 – Health and Safety Reporting Structure](#)) for the organisational structure. The purpose of these groups is to review the implementation of health operational management and risks within operational teams.

6.3.2 Hub Health and Safety Groups

Under the Locality Safety/Governance Groups sit geographically localised Hub Health and Safety Groups representing inpatient and other services collectively based on operational proximity. The remit of these groups are to address collective site issues and monitor compliance working closely with PFI Contract Group and PLACE groups without duplicating effort. The members of these groups will adopt the Trust's Hub template terms of reference for core function. These groups will fulfil part of the Trust's duty and commitment to consultation with trade unions by ensuring such groups have Accredited Health and Safety Representatives and/or Workplace Representatives (where available) as standing members. Meetings will be held at least quarterly and will provide an operational link into the Trust's Health, Safety, Security & Fire Group and the Locality Safety/Risk groups (see Appendix 3 – Health and Safety Reporting Structure).

6.4 Health, Safety, Security & Fire Group

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This group reports to the Senior Management Team and to the Quality and Standards Committee. Dates and agendas for meetings will be published in advance so that other interested staff can participate. Terms of reference for the group will be drawn up which include membership, the promotion of health and safety, establishing and monitoring standards, policy review, communications and training. The group will take a trust-wide view of health and safety matters.

Trust arrangements for consultation on safety matters include:

- Hub Health and Safety Group meetings
- Trust Health, Safety, Security and Fire Group.

Consultation and representation may also be made during audits, assessments and reports made on health and safety matters, including those provided by external bodies.

See also [Involving Your Workforce in Health and Safety \(HSE\)](#)

6.5 Role of Accredited Health and Safety Representatives and Workplace Representatives

Accredited Health and Safety Representatives and Workplace Representatives have the following functions:

- representing employees in discussions with the employer on health, safety or welfare issues and in discussions with HSE or other enforcing authorities
- being consulted 'in good time' over a large range of health and safety issues
- being involved with risk assessment procedures
- attending safety committee meetings
- having access to relevant health and safety information including incident reports and trends
- inspecting the workplace
- investigating potential hazards
- investigating notifiable accidents, cases of diseases or ill health, and dangerous occurrences;
- investigating employees' complaints
- receiving information from health and safety inspectors
- being given paid time off their normal work to carry out their functions and undergo training
- having access to suitable facilities and assistance to carry out their functions

The Safety Representatives Regulations give Accredited Health and Safety Representatives the right to formally inspect every 3 months (or more frequently if agreed with management). Arrangements for three-monthly and other more frequent inspections will normally be agreed with their manager. As well as making an inspection every three months, you also have the right to inspect after any notifiable accident, dangerous occurrence or notifiable disease (RIDDOR reportable), where there is a substantial change in working conditions or if new information becomes available.

For the purpose of this policy, the Trust recognises that Workplace Representatives have the same right to inspect as Accredited Representatives.

Accredited Health and Safety Representatives are appointed by a Trade union. Workplace Representatives are not appointed by this route but are representatives chosen by a work team or area to represent them.

[See also JUC Health and Safety pages on OurSpace](#)

6.5.1 Liability of the Accredited Safety and the Workplace Representative

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Whilst acting as Accredited Health and Safety Representatives employees incur neither criminal nor civil liability for any act or omission by them in respect of the performance of their functions as Accredited Health and Safety Representatives under the Safety Representatives Regulations. Workplace representatives are not covered by these Regulations but are covered under the Employment Rights Act 1996 and should not suffer harm, for instance by being denied a promotion or being dismissed unfairly due to carrying out their duties.

However they may incur liability as employees under Section 7 of the Health and Safety at Work Act (which requires employees to take reasonable care for the health and safety of themselves and others and co-operate with the employer etc – this is no different than with any other employee of the Trust).

6.5.2 Time off Work

Accredited Health and Safety representatives are entitled in law to reasonable time off with pay (in normal working hours) in order to pursue their functions or to undertake such training in aspects of their functions as will equip them to perform their duties. The Trust extends this right to Workplace Representatives.

The Trust encourages Accredited Health and Safety Representatives to attend a 10 day course run by the trade unions. Attendance at relevant Trust training may also be useful. Reasonable time for duties should be agreed with the Accredited Health and Safety Representative's line manager and the quantity will depend on the size of the patch covered and the complexity of the risks to be addressed. Workplace Representatives are offered in house health and safety training.

The Trust's position is that Accredited Health and Safety Representatives are the preferred option for ensuring that consultation and co-operation on health and safety matters takes place. The Trust will actively support this important role.

6.5.3 Role in Undertaking Risk Assessments

It will be noted in the Section 6.6 on the role of the risk assessor that the Accredited Health and Safety Representative and Workplace Representative normally fulfils all the qualities required of a competent risk assessor. Whilst the Trust welcomes the participation of Accredited Health and Safety Representatives in the risk assessment process, the Trust implies no duty upon them to do so. It is however likely that most Accredited Health and Safety Representatives would wish to undertake risk assessments as part of their normal duties.

6.5.4 Becoming an Accredited Health and Safety Representative or a Workplace Representative

Persons wishing to become an Accredited Health and Safety Representative should be nominated by their Trade Union. All approaches should therefore be made to the union. The Trust is notified in writing by the union which is the point at which the role is legally recognised.

The Trust covers a range of work places and arrangements so in some parts of the Trust it is not unusual to have some parts of the service where employees are members of recognised trade unions and others where they are not.

It is unrealistic to consult everyone individually regarding election of Workplace Representatives but they should reflect the wishes of the team they represent. You may want to arrange for your staff to elect representatives of their choice.

See also [Involving Your Workforce in Health and Safety](#) and www.hse.gov.uk/involvement for more information on elections and the functions of Accredited Health and Safety Representatives elected by the workforce.

6.6 Role of Risk Assessors

There are statutory duties on the Trust to assess the risk to health in various areas. These are:

- The Management of Health and Safety at Work (Amendment) Regulations 1994,

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- The Control of Substances Hazardous to Health Regulations (as amended)
- The Health and Safety (Display Screen Equipment) Regulations 1992
- The Provision and Use of Work Equipment Regulations 1998
- The Personal Protective Equipment at Work Regulations 1992

These cover the main risks at work i.e. chemicals, lifting, equipment, VDUs and risk of violence and aggression.

The role of the risk assessor is to assist in the process by (on behalf of the manager):

- Identifying hazards
- Disregarding trivial or inconsequential risks
- Determining the likelihood of the harm arising
- Quantifying the severity of the consequences and the number of persons affected
- Take into account existing control measures
- Provide enough information for the Trust to determine an action plan setting priorities

This process works by co-operation with line managers and support from relevant specialists such as the Fire Assessors, the Health and Safety Advisor, the Clinical Nursing Specialists and the Back Care Advisor.

6.6.1 Competency

This statutory duty must be carried out by a competent person and it is the Trusts responsibility to ensure that those undertaking an assessment are competent. Competency does not require a particular level of qualification but may be defined as a combination of knowledge, skills, experience and personal qualities including the ability to recognise the extent and limitations of one's own competence.

From the above it can be seen that it is better to have skilled persons at the "sharp end" who do the job backed up with appropriate training and support than to have "experts" drafted in from consultancies.

6.6.2 Training

Adequate training for risk assessors will be provided by the Trust ([see specialist H&S training](#)). Practical support will also be given by any of the relevant specialists.

6.6.3 Liability

The Trust is responsible for undertaking risk assessments and that those carrying out assessments are competent to do so. Risk assessment remains the responsibility of the management team and is not delegated or diminished in any way.

However they may incur liability as employees under section 7 of the Health and Safety at Work Act (which requires employees to take reasonable care for the health and safety of themselves and others and co-operate with the employer etc. – this is no different than with any other employee of the Trust).

6.7 Vulnerable Persons

6.7.1 Young Persons

Young People must be protected from any risks to their Health and Safety which are a consequence of their lack of experience, absence of awareness of existing and potential risks, or immaturity. "Young Person" is "any person who has not attained the age of eighteen", but is over 16, (as defined in the Management of Health and Safety at Work Regulations 1999).

In addition to fully complying with the Act, the following will apply:

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a) All directorates/departments are prohibited from appointing young persons for work (or work experience) which:

- is beyond their physical or psychological capacity; or
- involves harmful exposure to agents which are toxic, carcinogenic, cause heritable genetic damage or harm to an unborn child, or which in any other way chronically affect human health; or
- involves a risk of accidents which it may reasonably be assumed cannot be recognised or avoided by young persons owing to their insufficient attention to safety or lack of experience or training: or
- presents a risk to health from extreme cold, heat, noise, or vibration,

b) The Trusts policy on Young Persons is that no one under the age of 18 years is permitted to work in inpatient or community teams (including roles as domestics) which may involve patient contact.

c) For those undertaking **work experience** the Trusts guidance is that

- no one under the age of 18 is permitted to undertake work experience in the high risk settings of PICUs and secure admission wards
- If young persons are having placements in other clinical areas they should be thoroughly risk assessed and a dynamic review made before each day to determine if the workplace is suitable or not at that time. This will also extend to dynamic risk assessment on individual case by case basis of service users being seen with the student. Factors relevant will be the impact of any new admissions, unsettled or aggressive behaviour or recent and anticipated disinhibited behaviours that would be unsuitable for a young person to be exposed to
- All work experience must be on the basis of continuous supervision with the students mentor at all times to ensure their health and safety
- For other work where the general prohibitions in section 6.7.1 (a) above do not apply and where the person is under the age of 18, each application must be considered individually with respective departmental managers and risk assessed. (refer to the [Risk Assessment Policy](#) and to section 6.7.1 (d) below). Young people should be given tasks that they are happy and competent to perform and then only with full supervision and complete induction into what precautions must be taken.

d) In carrying out the risk assessment, the following must be taken into account:

- The naivety and maturity of the young person, and limitations in their awareness of risks
- The fitting-out and layout of the workplace and workstation
- The nature, degree and duration of exposure to physical, biological, and chemical agents.
- Inappropriate or disinhibited behaviour from service users
- Risk of violence and aggression.
- Risk of self-harm, suicide risk and similar upsetting situations
- The form, range and use of work equipment and the way in which it is handled.
- The organisation of processes and activities.
- The extent of the Health and Safety training provided, or to be provided, to the young persons.
- Risks from agents, processes, methods, and materials involved in the nature of the work.

e) As a result of these risk assessments, the supervising person should ensure that suitable safe systems of work are in place and that the young person is appropriately **supervised at all times.**

f) The Trusts policy is that no one under the age of 16 years is permitted to undertake work experience **in any inpatient or community team** (including roles as domestics) which may involve patient contact.

6.7.2 New and Expectant Mothers

New and expectant mothers are covered under the [Policy for the Protection of the Health, Safety and Welfare of New and Expectant Mothers](#). The policy requires that a general assessment of the work is made to identify risks for the workforce generally and that a specific risk assessment is made when there is a new mother about to return to work or an expectant mother at work.

7. Roles and responsibilities

7.1 Executive Management

The Chief Executive has overall responsibility for the health, safety and welfare of all staff, service users, visitors and others within AWP and is responsible for monitoring and reviewing health and safety in the Trust. The Board will be informed of health and safety matters on a regular basis and ensure adequate resources are made available to provide and maintain the necessary standards of health and safety in the Trust.

Members of the Executive Management Team have full responsibility for the health, safety and welfare of all staff, visitors and others within the wards, offices etc. under their specific management and will support the Chief Executive in fulfilling their responsibility.

All Directors have a corporate responsibility to promote a responsible approach in health and safety in the Trust.

7.2 Responsibilities of the Chief Executive

The Chief Executive is ultimately responsible for adherence to health and safety legislation within the Trust, and is accountable for the establishment and achievement of health and safety policies within the Trust. The Trust Board is also responsible for establishing objectives, policy, priorities and the allocation of funds.

The Chief Executive will be supported in fulfilling this responsibility by other members of the Trust Executive Team.

7.3 Responsibilities of the Nursing and Quality Director

The Director of Nursing and Quality has responsibility for the co-ordination of health and safety policies, activities and governance within the Trust.

7.4 Responsibilities of the Medical Director

The Medical Director has responsibility for the co-ordination of health and safety policies applying to Medical Staff working in the Trust.

7.5 Responsibilities of the Director of Resources

The Director of Resources has the responsibility for the co-ordination of health and safety in respect of HR issues within the Trust.

7.6 Programme Director – Development

The Programme Director - Development has overall responsibility for training and takes responsibility for ensuring that the Learning & Development Department provides adequate training to ensure this policy is implemented and that the content of the training is regularly

reviewed to ensure staff are able to discharge their legal duties and duty of care in accordance with current standards and best practice.

7.7 Responsibilities of the Operations Director

The Operations Director takes responsibility for ensuring that this policy is implemented within teams. The Operations Director will ensure that Localities follow the policy and that all levels of management fulfil their responsibilities as described within this policy.

7.8 Responsibilities of Locality Clinical Directors

Locality Clinical Directors will bring this policy to the attention of all their staff, including new and temporary staff, and management team and ensure that it is observed at all times. Locality Clinical Directors will also require each team to:

- Ensure risk assessments are undertaken within their Directorate which identify the risks to health and the adequacy of the systems that manage these risks in a timely and safe manner (see also the [Risk Assessment Policy](#))
- Risk assessment findings must be recorded and should be entered on the service specific risk register. Action should be taken to rectify any risks in line with good risk management process.
- Ensure control measures and safe systems of work as necessary are developed and implemented in accordance with this policy
- Ensure that the process is monitored and adequate support is provided for line managers to ensure that their responsibilities are met.
- Ensure arrangements which implement this policy are devised and reviewed.
- Play a key leadership role in developing and sustaining a proactive culture including personal and professional responsibility for health and safety issues.

7.9 Responsibilities of Line/Ward Managers & Team Leaders

Trust managers are responsible as appropriate, for ensuring that all reasonable steps have been taken to ensure that employees, patients, contractors, visitors and any other person are without risk of injury or ill health whilst on the premises. The duty extends to persons working for the Trust on premises not owned or managed by the Trust.

The performance of Managers in relation to discharging their responsibilities for health and safety matters will form part of their annual performance review.

Management duties include the following:

- Ensuring that risk assessments are undertaken in their area of responsibility (as required in the [Risk Assessment Policy](#) – Section on Approach to risk assessment and other safety policies (see Section 17 of this policy)
- Appointing risk assessors as required by this policy and ensuring they are competent for the role
- Taking immediate and appropriate steps to investigate and rectify any risks to health and safety arising from the work activity
- Undertaking quarterly workplace inspections with, where available, the relevant Accredited Health and Safety Representative or workplace representative (see Section 9 of this policy)
- Ensuring that employees, contractors and visitors are aware of safety procedures as appropriate to their needs.
- Establishing that all equipment, plant and substances used are suitable for the task and kept in good working condition, including the regular maintenance and servicing of equipment.

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- Providing adequate training, information, instruction and supervision to ensure that work is conducted safely.
 - Promptly bringing to the notice of senior management or other appropriate individual, any health and safety issue which requires their attention.
 - Ensuring that all accidents and near misses in their area of responsibility are properly reported and recorded and that an investigation is carried out to determine the causal factors.
 - Maintaining safe access to and egress from the workplace within their area of responsibility.
 - Emergency procedures must be designed to give warning of imminent danger and allow personnel to move to a place of safety. The Manager of each department is responsible for ensuring that emergency procedures in their area of responsibility, are adequate and sufficient and that all employees (and to an appropriate extent visitors) within the area concerned, are informed of and fully conversant with relevant emergency procedures.
 - Attending relevant training to ensure that they themselves are fully conversant with their responsibilities under health and safety law and identify the needs of staff for health and safety training (within their areas of responsibility).
 - Consulting with appointed Accredited Health and Safety Representatives on all matters affecting staff health and safety at work, including changes to job design and equipment
- NB: Arrangements for liaison with contractors and others who are not directly employed by Avon and Wiltshire Mental Health Partnership NHS Trust, but who come on to the premises, are covered by specialist policies and responsibility for ensuring compliance rests with those managers so designated

7.10 Responsibilities of Individual Employees

The Health and Safety at Work Act 1974 states the following duties:

- Every employee has a duty of care for the health and safety of people at work and of other persons who may be affected by work activities.
- Employees must take care of themselves and others at work and co-operate with AWP in the implementation of health and safety systems.
- Employees must obey the directions of their employer in matters relating to health and safety or compliance with legal duty.
- Employees must not interfere with or misuse items provided in the interests of health and safety.
- To act in accordance with their professional codes of conduct.

7.11 Learning & Development Department

The Learning & Development Department will provide an adequate training resource to ensure that the Trust can comply with its policy. It will liaise with operational management to ensure that training needs are monitored and that provision reacts accordingly

8. Approach to Risk Management

The approach to risk management is detailed in section 7 of the [Risk Assessment Policy P054](#)

The Risk Strategy describes the risk escalation process for managing all risks.

Any risks identified as significant may require addition to the Directorate risk register (see Section 5.3 and 5.4 of the [Risk Management Strategy - P112](#)). and escalation to a relevant Director whilst actions are being implemented (see also the chart in [Appendix 5](#) of the Risk Assessment Policy P054)

Risks must be communicated to the organisation via the appropriate risk register (see Section 5.3 and 5.4 of the [Risk Management Strategy - P112](#)). The structure of the risk registers are described in Section 9.1 of the [Risk Management Policy - P136](#).

Risks will remain the responsibility of the local management team to actively manage and address and escalate as necessary to their Directorate risk register.

9. Quarterly Workplace Inspections and Workplace Representatives

One of the main functions of an Accredited Health and Safety Representative and Workplace Representative is to carry out inspections. This is a simple process but can be very important.

Inspections do more than just help identify potential hazards. They also show your members that you are taking your responsibilities as an Accredited Health and Safety Representative seriously.

The Safety Representatives Regulations give Accredited Health and Safety Representatives the right to formally inspect every 3 months (or more frequently if agreed with management). Arrangements for three-monthly and other more frequent inspections will normally be agreed with the manager.

The Trust requires managers to undertake inspections every 3 months although the Annual Self-Assessment counts as one of these quarterly inspections during October of each year. Inspections would therefore be carried out in January, April and July.

Formal inspections are no substitute for daily observation, but they provide a useful opportunity to carry out a full-scale examination of all or part of the workplace. An inspection is not just looking around the physical workplace but includes the inspection of documents required by health and safety legislation such as risk assessments and certificates concerning the testing of equipment. It is also an opportunity to talk to employees.

Not all the workplace need be inspected at one time but it can be divided up into separate inspections of different topics.

Following an inspection, Accredited Health and Safety Representatives and/ or Managers should complete an [Inspection Form](#), recording the date, time and details of an inspection. An example of an inspection form can be found on OurSpace. One copy of the completed form should be sent to the manager and one copy should be retained by the Accredited Health and Safety Representative for their own records and for reference during safety committee discussions.

However if a problem is identified that requires immediate action by the Trust, the form should not be the sole means of communicating risk, The manager of the area needs to be told without delay.

More information can be found on the [Trust's Quarterly Inspections Page](#).

10. Incident Reporting

Guidance to managers and staff on the procedure for reporting incidents is contained in the Trust's Adverse Incident Reporting Procedure (part of the [Incident Management Policy](#))

Details of accidents, including frequency, trends and preventative and remedial action are reviewed at each Safety forum, the Trust Health & Safety Group and Locality Safety/Risk groups.

11. Records required under this Policy

All Trust policies are available on the Trust Intranet and it is not necessary to maintain a full paper file unless access to IT is not readily available. Certain policies and procedures will need to be available in hard copy format such as Emergency Preparedness and Fire Plans.

Health and Safety Policy

Each department/ward is required to maintain safety files which are accessible to staff and Accredited Health and Safety Representatives and which contain:

- A copy of this policy.
- Procedures, safe systems of work and/or guidelines relevant to the department/team/ ward.
- Fire and Emergency procedures.
- Copies of relevant health and safety audit reports/inspections and the actions taken.
- Copies of Risk Assessments relevant to that department/team/ward
- Copies of Quarterly Inspections

In addition, training records should be maintained locally by each team to ensure that staff are complying with statutory and mandatory training

12. Monitoring or Audit

Implementation of this policy will follow a number of lines, and include:

- Monitoring of training uptake and any gaps
- Action plans to address any gaps in performance
- Audit and review of risk assessments
- Undertaking and reviewing the results of the Annual Health and Safety Self Assessment process
- Monitoring of adverse incident data including both physical and non-physical aggression
- Monitoring staff views and trends via Staff survey and Stress assessments
- Monitoring of risk assessment activity via scorecards.

An annual assurance report on health and safety will be provided to the Safety Management Group and assured by the Quality and Standards Committee with oversight by the Trust Board.

13. Training

Health and safety training falls into four categories:

- **Health and Safety Management:** For managers and staff representatives, together with other interested parties. Management training in health and safety is provided through the Health and Safety Essentials for Managers Courses (two separate days). Refer to the training matrix in the Learning and Development Policy for further information.
- **Induction:** For all staff joining the Trust or moving to a different location within the Trust. The Trust's Core Induction includes a section on health and safety, but the main emphasis for such issues is contained within the Induction Checklist, which is completed locally.
- **Specific Areas:** Including risk management, manual handling, breakaway, PMVA techniques, food safety, COSHH etc. Some of this training will be provided by Trust staff, other training will be 'brought in' as required.
- **Accredited Health and Safety Representatives:** Time off with pay will be given to accredited health and Accredited Health and Safety Representatives to ensure their knowledge and expertise is up-to-date.
- **Board Training:** including leadership, role and responsibilities for safety and statutory duties as a Director.

The Trust's overarching policy for training is the [Learning and Development Policy](#) and this should be read in conjunction with this policy. Attached, as appendices to that policy are the Trust's learning and development matrices. These matrices describe the minimum statutory, mandatory and required training for all staff groups in respect of health and safety.

Health and Safety Policy

The Learning and Development Policy also describes the Trust's arrangements for training, in particular how there are processes in place to ensure staff receive the training they require and how non-attendance is followed up. These arrangements are further supported by management supervision and appraisal processes.

The Trust lead for health and safety has agreed the training standard with the Learning and Development Team and training standards have been informed by statutory requirements, professional standards and national best practice.

The Trust lead for health and safety participates in a programme of continuous professional development to ensure they remain up to date and keep abreast of developments in this field.

14. Retention, Disposal and Archiving

Promulgated procedural documents are formal corporate records and shall be managed in accordance with the Trust's [Records Management Policy](#)

An audit trail of all previous versions of documents is required for auditing purposes and shall be automatically stored by the designated OurSpace libraries.

Master copies of documents will be archived in a purpose-built OurSpace archive. A register of archived documents will be retained in the OurSpace library. Copies of archived documents shall be available on request from the Corporate Secretariat.

15. Review

This policy should be reviewed annually.

16. Endorsed by

Dr Hayley Richards

Chief Executive

Avon and Wiltshire Mental Health Partnership NHS Trust

17. References

HSE (1974), Health and Safety at Work etc. Act 1974

HSE (1999), Management of Health and Safety at Work Regulations

HSE (1977), Safety Representatives and Safety Committees Regulations

Involving Your Workforce in Health and Safety [HSG 263](#)

Health and Safety (Consultation with Employees) Regulations 1996

Managing for Health and Safety (HSG 65) - HSE (2013)

18. Links to Other Policies

Click on these links to view other related policies.

P095.doc	Policy for the Recognition, Prevention and Management of Violence and Aggression
P045.doc	Health & Safety Policy for Lone Working
P109.doc	Tertiary Techniques Policy (PMVA)

Health and Safety Policy

Emergency Planning - Ourspace	Major Incident Plan
P096.doc	Fire Safety Policy
P048.doc	Manual Handling Policy
P123.doc	Management of Latex And Latex Allergy
P081.doc	Display Screen Equipment Policy
P054.doc	Risk Assessment Policy
P002.doc	Food Hygiene Policy & Pest Control
P055.doc	Policy on the Control of Substances Hazardous to Health
P124.doc	First Aid Provision - Policy and Assessment
P049.doc	Windows Safety Policy
P110.doc	Policy For The Protection Of The Health, Safety & Welfare Of New & Expectant Mothers
P050.doc	Staff Stress Management and Wellbeing Policy
P125.doc	Assessment of Environmental Ligatures in Inpatient Settings
P067.doc	Policy for Prevention & Management of Falls and Falls from a Height
P068.doc	Policy Guidelines and Procedures for Using Bedrails Safely and Effectively
P040.doc	Security Policy
P087.doc	Engagement and Observation Policy
P009.doc	Infection Control and Decontamination Strategy
P025.doc	Management of Communicable Diseases Policy
P028.doc	Management of Infection Policy
P042.doc	Management of Building Water Supply Systems Estates Policy
P031.doc	Management of Asbestos Estates Policy
P029.doc	Segregation, Handling and Disposal of Healthcare, Domestic and Hazardous Waste Policy
P112.doc	Risk Management and Assurance Strategy
P057.doc	Incident Management policy
P100.doc	Medical Equipment Policy
P018.doc	Managing Safety Alerts and Other Safety Communications Policy

Health and Safety Policy

P116.doc	Disciplinary Policy
P038.doc	Appraisal Policy

19. Appendix 1: Internal Improvement Notice

Internal Improvement Notice

Name of Unit

Address

Inspected by

(Name of Health & Safety Dept staff)

The above officer of AWP hereby gives you notice that they are of the opinion that

Description of the breach

Reasons for issue

You are hereby required to remedy the above breach by the date stated below

Date for Compliance

The measures in the schedule which are part of this notice shall be taken in order to comply with this notice

Issued by

Date

Authorised by

(Chief Executive or on call Director within 1 working day)

Continuation
Authorised by

(Chief Executive after further 1 working day)

Schedule

To comply with this notice you must:

You may take other action provided it is equally effective. You are advised to contact the Health & Safety Department to discuss any proposals to meet this Notice.

20. Appendix 2 – Internal Prohibition Notice

Internal Prohibition Notice

Name of Unit

Address

Inspected by

(Name of Health & Safety Dept staff)

The above officer of AWP hereby gives you notice that they are of the opinion that

Description of the breach

Reasons for issue

*You are directed that the above activities shall cease / areas shall not be used /equipment shall not be used * immediately from the time of issue of this notice until such a time that the required measures detailed in the schedule below are taken.*

The measures in the schedule shall be taken in order to comply with this notice.

Issued by

Date

Authorised by

(Chief Executive or on call Director within 1 working day)

Continuation
Authorised by

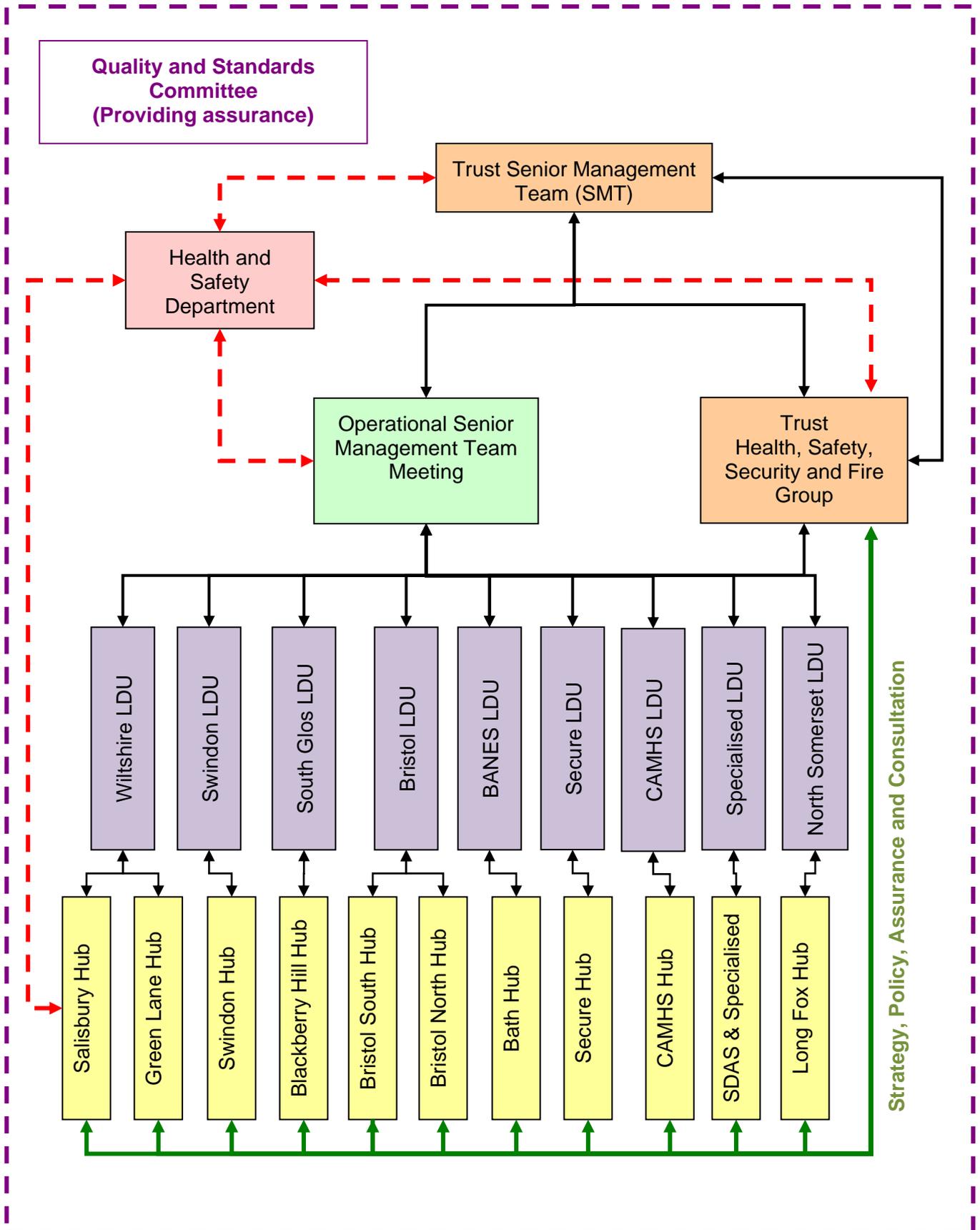
(Chief Executive after further 1 working day)

Schedule

To comply with this notice you must:

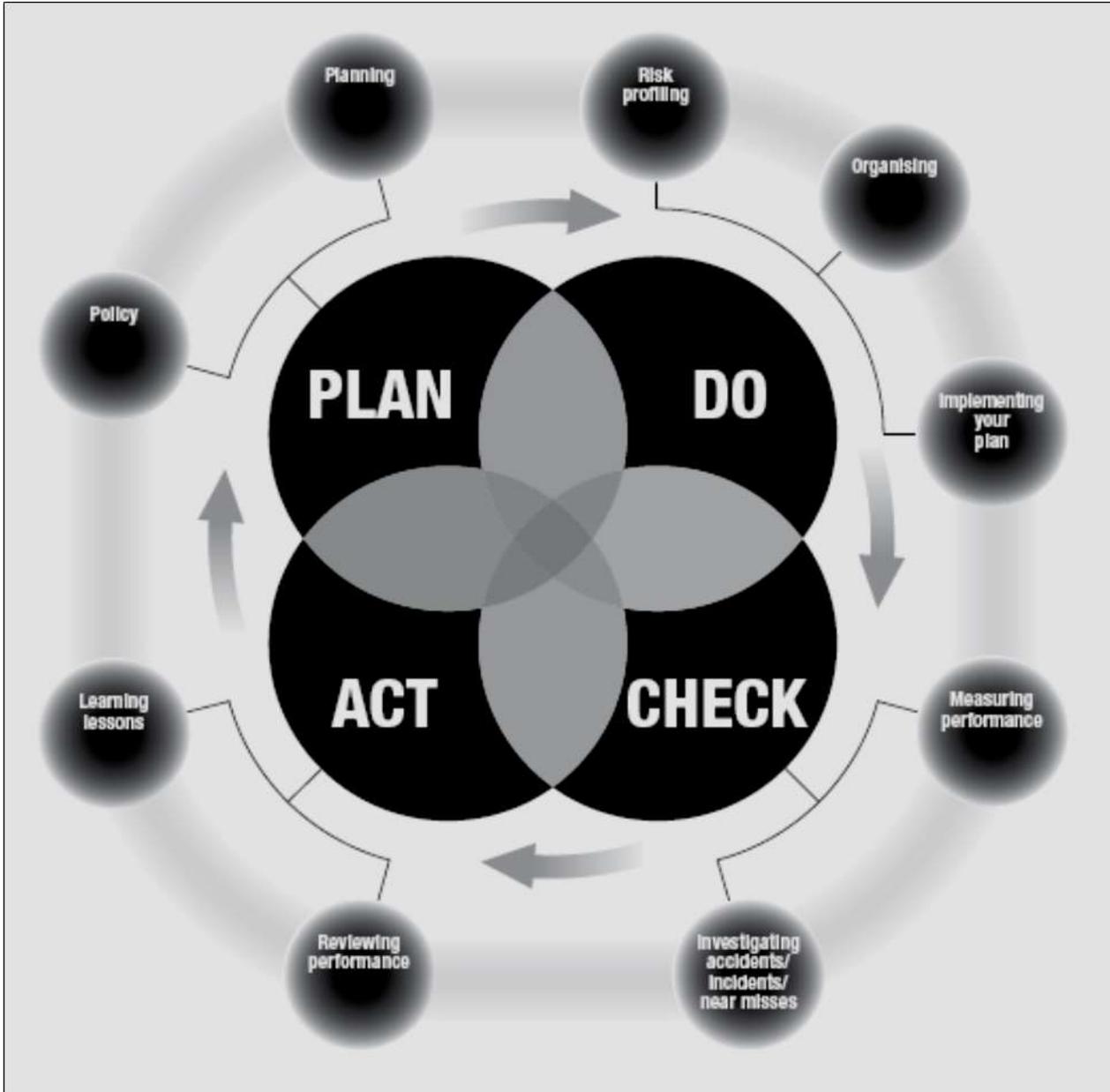
You may take other action provided it is equally effective. You are advised to contact the Health & Safety Department to discuss any proposals to meet this Notice.

21. Appendix 3 – Health and Safety Reporting Structure



22. Appendix 4 – Safety Management System

A successful risk management system comprises of a number of key elements. These are shown below. These elements are Plan, Do, Check and Act , These are described in more detail below.



Based on HSG 65 (HSE)

Plan

To implement the health and safety policy, the Trust needs to establish and maintain an effective health and safety management system that is proportionate to risk.

The Trust sets the direction for effective health and safety management with a policy that sets a clear direction which will help to ensure communication of health and safety duties and benefits throughout the organisation.

Subordinate Health and Safety policies are designed to meet legal requirements, prevent health and safety problems, and enable the Trust to respond quickly where difficulties arise or new risks are introduced.

Determining Policy

An important part of achieving effective health and safety outcomes is having a strategy and making clear plans.

The policy framework describes what the Trust is doing to manage health and safety, who is doing it, what they are doing and how.

Health and Safety policies set clear direction for the Trust to follow and should be shared throughout the workforce, so that everyone understands how health and safety will be managed.

Planning for implementation

- Planning is an essential part of health and safety policy. It is necessary to identify risk, ensure legal compliance and dealing with emergencies. It includes:
- designing, developing and implementing suitable and proportionate management arrangements, risk control systems and workplace precautions
- Operating and maintaining the system while also seeking improvement where needed
- Linking it to how to manage other aspects of the organisation
- In order to plan successfully, the Trust needs to monitor:
- Where the organisation is now, by considering accurate information about the current situation
- Where the Trust needs to be, using legal requirements and benchmarking to make comparisons
- What action is necessary to reach that point

Do

Delivery depends on an effective management system to ensure, so far as reasonably practicable the health and safety of employees and other people affected by the Trusts work activities. The Trust aims to protect people by having management systems and practices that ensure risks are dealt with sensibly, responsibly and proportionately.

Risk

In order to profile the Trusts health and safety risks, the Trust will:

- Assess the risks, identify what could cause harm in the workplace, who it could harm and how, and what you will do to manage the risk

- Decide what the priorities are and identify the biggest risks

Organising for health and safety

In particular the Trust aims to:

- Involve workers and communicate, so that everyone is clear on what is needed and can discuss issues - develop positive attitudes and behaviours
- Provide adequate resources, including competent advice where needed

Implementing the plan

In order that risks can be mitigated, the Trust will:

- Decide on the preventive and protective measures needed and put them in place
- Provide the right tools and equipment to do the job and keep them maintained
- Train and instruct, to ensure everyone is competent to carry out their work
- Supervise to make sure that arrangements are followed

Check

Monitoring and reporting are important parts of health and safety arrangements. Management systems allow the Trust to receive both specific (e.g. incident-led) and routine reports on the performance of health and safety policy. This comprises of:

Measuring performance

- Plans have been implemented - 'paperwork' on its own is not a good performance measure
- Assess how well the risks are being controlled and if the Trust is achieving its aims. In some circumstances formal audits may be useful

Investigating accidents and incidents

- Investigate the causes of accidents, incidents or near misses

Act

It is important that the Trust reviews its health and safety performance.

It allows the Trust to establish whether the essential health and safety principles - effective leadership and management, competence, worker consultation and involvement - have been embedded in the organisation. It tells the Trust whether your system is effective in managing risk and protecting people.

Review performance

- Learn from accidents and incidents, ill-health data, errors and relevant experience, including from other organisations
- Revisit plans, policy documents and risk assessments to see if they need updating

Take action on lessons learned

- Include audit and inspection reports

Version History				
Version	Date	Revision description	Editor	Status
1.0	05/06/2008	Approved by Board	Head of Health & Safety	Approved
1.1	27/05/2009	Approved by Board	Head of Health & Safety	Approved
1.2	04/05/2010	Amended and approved by the Quality and Healthcare Governance Committee	Head of Health & Safety	Approved
1.3	10/05/2011	Approved by the Quality and Healthcare Governance Committee	Head of Health & Safety	Approved
2.0	13/12/2011	Approved by the Quality and Healthcare Governance Committee	Head of Health & Safety	Approved
3.0	06/11/2012	Approved by the Quality and Safety Committee	Head of Health & Safety	Approved
4.0	04/09/2013	Approved by the Chief Executive	Head of Health & Safety	Approved
4.2	24/02/2014	Approved by the Health, Safety, Security and Fire Group	Head of Health & Safety	Draft
5.0	07/05/2014	Approved by Quality and Standards Committee	Head of Health & Safety	Approved
6.0	01/09/2015	Approved by Quality and Standards Committee	Head of Health & Safety	Approved
7.0	31/10/2016	Approved by the Director of Nursing and Quality	Head of Health and Safety	Approved
7.1	08/11/2020	Extended until end April 2020	Nursing Director	Approved