

HS001

HEALTH AND SAFETY Policy & Procedures

Berkshire Healthcare

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Designated Lead: Risk Services Team Manager

Berkshire Healthcare

For policy information: Policy Administration

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POLICY DEVELOPMENT

HS001 - HEALTH AND SAFETY POLICY

Summary: Version 8: Re-issued December 2018. Minor

amendments made.

Version 7: Re-issued October 2016. Minor amendments

made to titles.

Version 6: Issued August 2014. Significant changes to General Statement and removal of references to Berkshire Shared Services. Updating of roles and

responsibilities.

Version 5: Issued October 2012. Minor amendments and

additions following CQC review of the policy and

organisational change. Section on Training added and Incident Reporting Section updated to reflect recording on

the Trust Incident Reporting System.

Version 4: Issued June 2009. Minor amendments

made to the policy.

Version 3: Issued February 2007

Version 2: Issued October 2003

Version 3: Issued March 2001

Designated Lead: Risk Services Team Manager

Berkshire Healthcare

Policy Consultants: Health and Safety Advisors

Berkshire Healthcare

Endorsed by: Policy Scrutiny Group – 9th November 2018

This policy has been assessed for compliance with CQC Fundamental Standards

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1. STATEMENT OF GENERAL POLICY ON HEALTH AND SAFETY

- 1.1 The Board members of Berkshire Healthcare NHS Foundation Trust (hereinafter referred to as Berkshire Healthcare) recognise and accept their responsibilities and duties under the Health and Safety at Work etc. Act (1974) and other relevant statutory provisions. The Board is committed to the provision of safe and healthy working conditions for all employees of Berkshire Healthcare and to the safety of patients and all other persons entering Berkshire Healthcare premises. The Board regards health and safety as a core management function and will work to ensure the commitment of all members of staff to the full implementation of Berkshire Healthcare's health and safety policy.
- 1.2 The attention of all Berkshire Healthcare employees is drawn to their legal responsibility under Section 7 of the above Act to take reasonable care of themselves and all others who may be affected by their acts and/or omissions and to co-operate with their employer with regard to health & safety matters. All persons on Berkshire Healthcare premises have a duty under Section 8 of the above Act not to interfere with or to misuse anything provided by Berkshire Healthcare in the interests of health and safety. Regulation 14 of the Management of Health and Safety Regulations (1999) requires all employees to report without delay, to their employer any work situation that could give rise to serious and imminent danger to health and safety and also any noted shortcomings in the employer's protection arrangements for health and safety.
- 1.3 It is the Berkshire Healthcare's policy to comply with all relevant statutory and regulatory provisions and to take such additional measures as it considers necessary. To achieve this, Berkshire Healthcare will, as a minimum, operate to legal requirements and established standards of good practice and will, so far as is reasonably practicable:
 - Manage its activities in such a way as to ensure that the health, safety and welfare of all employees, patients, and any other persons on its premises are not put at risk.
 - Provide and maintain plant and systems of work that are safe and without risk to health
 - Make arrangements for ensuring safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances.
 - Provide the necessary information, instruction, training and supervision to ensure the health and safety of all employees, patients and any other persons affected by the Berkshire Healthcare's activities.
 - Provide and maintain a working environment that is safe, without risks to health and is adequate with regard to facilities and arrangements for the welfare at work of all employees.
 - Maintain any premises under the Berkshire Healthcare's control in a condition that is safe and without risk to health and provide and maintain means of safe access and egress.
 - Cooperate in safety matters with other employers with whom Berkshire Healthcare shares premises, and co-ordinate safety arrangements with such employers as required by the Management of Health and Safety at Work Regulations (1999).

- Ensure that risk assessments are carried out as required by the Management of Health and Safety at Work Regulations (1999), the Regulatory Reform (Fire Safety) Order 2005 and other regulations.
- Appoint competent persons to provide advice in accordance with the Management of Health and Safety at Work Regulations (1999). (The responsibilities of such persons are set out in the organisational section of this document).
- Seek specialist advice on health and safety matters as and when necessary.
- Investigate thoroughly all accidents and unusual occurrences affecting health and safety.
- Monitor compliance with safety measures by regular inspection, monitoring and auditing.
- Ensure that all services prepare local safety policies and codes of practice for their areas as necessary.
- Provide adequate resources and facilities to enable the requirements of this policy to be achieved.
- Review Berkshire Healthcare's Statement of General Policy on Health and Safety every two years or more frequently if justified.

2. PRINCIPLE LEGISLATION

- The Health and Safety at Work, etc., Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Workplace (Health, Safety and Welfare) Regulations 1992
- The Regulatory Reform (Fire Safety) Order 2005
- The Manual Handling Operations Regulations 1992 (as amended)
- The Health and Safety (Sharp Instruments in Healthcare) Regulations 2013
- The Control of Asbestos at Work Regulations 2012
- The Health and Safety (Display Screen Equipment) Regulations 1992 As amended 2002
- The Electricity at Work Regulations 1989
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- The Control of Substances Hazardous to Health Regulations 2002
- The Provision and Use of Work Equipment Regulations 1998
- The Construction (Design and Management) Regulations 2007
- The Health and Safety (First Aid) Regulations 2013

3. ORGANISATIONAL RESPONSIBILITIES

Responsibilities for health and safety lie with every employee, these responsibilities are proportional to the authority held by the individual.

3.1 Chief Executive

The Chief Executive is responsible for ensuring that Berkshire Healthcare complies with the requirements of:

- a) The Health and Safety at Work, etc., Act 1974 and all relevant statutory provisions
- b) All relevant fire safety legislation and
- c) This policy.

The Chief Executive shall ensure that this policy is reviewed every two years and in the light of any failure of the system and/or changes in statutory legislation.

3.2 Executive Directors

Executive Directors are responsible for the safety of their staff and the activities in their charge. They are expected to promote a high degree of health and safety awareness amongst all their personnel; this includes the following key responsibilities:

- a) Clarifying roles and responsibilities of their Directors with respect to health and safety;
- b) Setting corporate and personal objectives to improve health and safety standards;
- c) Planning and allocating resources to improve health and safety standards;
- d) Promoting health and safety management as an integral management function;
- e) Receiving reports from the Health and Safety Executive or other agencies' inspectors and ensuring action is taken:
- f) Ensuring there is a means to measure health and safety performance and adopting it;
- g) The Chief Operating Officer has the responsibility for the way health and safety is managed throughout the regional, clinical and non-clinical directorates;
- h) The Chief Operating Officer has the responsibility for the implementation of, and compliance with this policy;
- i) The Director of Finance is responsible for providing financial management advice in order to control health and safety risks.

3.3 Directors

Regional, Locality and Service Directors are responsible for health and safety within their area of management responsibility. These managers are expected to manage health and safety as part of their daily routine. The key functions are as follows:-

- a) To ensure that Berkshire Healthcare's health and safety policies and local rules are understood, complied with and practised.
- b) Ensure all incidents are recorded correctly and graded and where required an investigation is instigated and the necessary remedial action is taken.

- c) To ensure that risk assessments are conducted and comprehensive risk registers are produced for their areas of responsibility and that controls are put into place to reduce or eliminate the risk and where reasonably practicable provide funding for this.
- d) To identify the health and safety roles and responsibilities of their managers and supervisors under their control.
- e) Ensure that safe working methods are introduced, practiced and reviewed within the work place.
- f) Ensure that safety inspections are carried out on a regular basis in their areas of responsibility and where necessary provide assistance to ensure that recommendations are carried out.
- g) Are responsible for publicising and disseminating Berkshire Healthcare's Health and Safety Policy.
- h) Ensuring a two way flow of information regarding health and safety.
- i) Ensuring that managers and employees are provided with adequate health and safety training upon being recruited and receive ongoing training.
- j) Ensuring all Ward/Departments have developed relevant health and safety policies.

3.4 Managers in Charge/Ward Managers/Heads of Services/Team Leaders

These managers are responsible for their ward/departments staff health and safety as well as that of patients and visitors. The key functions are as follows:-

- a) Undertake operational risk assessments to identify and implement methods of elimination and control methods.
- b) Ensuring all incidents and near misses are reported and recorded promptly and that appropriate action is undertaken to prevent reoccurrence.
- c) Identifying and providing staff health and safety training needs appropriate to the job they undertake.
- d) Developing and reviewing safe working practices.
- e) Ensuring that defective equipment is withdrawn from service and that the correct method for reporting this equipment is implemented.
- f) Carrying out safety inspections as and when they are required and implementing control measures to reduce incidents.
- g) Ensuring that each employee within their responsibility is aware of the Health and Safety policy and the employees' responsibilities within.

3.5 Employees

Employees have a duty under the Health and Safety at Work Act 1974 to comply with the following:-

- a) To take reasonable care for the health and safety of themselves and other persons who may be affected by their acts or omissions;
- b) To co-operate with Berkshire Healthcare with regard to action that is necessary for Berkshire Healthcare to comply with the Health and Safety at Work Act 1974;
- c) To carry out their work activities in accordance with the training they have received:
- d) To inform their manager of any work situation where there is a serious and/or immediate danger to staff and to identify any shortcomings in the health and safety arrangements for protecting staff, patients, and visitors;
- e) Bring to the notice of managers any defective equipment, which may cause an incident;
- f) Must dress sensibly and safely for their working environment;

3.6 Specialist Functions and Responsibilities

3.6.1 Director of Estates and Facilities

The Associate Director of Facilities is responsible to the Chief Executive for matters relating to environmental and non-clinical health & safety.

3.6.2 Compliance and Risk Team

The aim of the team is to provide professional health and safety advice to Berkshire Healthcare, which includes:

- a) Acting as the Berkshire Healthcare's non-clinical risk management professional leads:
- b) Advising and assisting managers on health and safety matters in order to ensure compliance with current and proposed safety legislation;
- c) Supporting Berkshire Healthcare in incident investigation and analysis as required:
- d) Identifying and advising on appropriate safety training;
- e) Representing Berkshire Healthcare and liaising with outside agencies.
- f) Supporting Berkshire Healthcare on health and safety groups and committees.
- g) Advising on standards of statutory compliance for buildings and buildings maintenance i.e. fire safety, legionella, asbestos control and electrical safety etc.

3.6.3 Site Services Team

The Site Services Team will undertake to deliver the following:

- a) Provide statutory compliance for food hygiene and waste management:
- b) Fulfill the role of emergency response and fire wardens.

3.6.4 Infection Prevention & Control Team

The team provides a service across all Berkshire Healthcare localities. Its aims are to:

- a) Ensure that infection prevention and control is operationally embedded within the organisation through the work of the Infection Prevention & Control Working Groups.
- b) Identify and implement systems and practices that reduce the risk of infection to staff and others:
- c) Provide advice and support to staff on matters relating to safe practice.

3.6.5 Occupational Health

The aim of the Occupational Health Service is to ensure the provision of help to promote and maintain high standards of health for all persons working in Berkshire Healthcare. Specific areas of support are:

- Occupational Health surveillance following risk assessment by the local manager
- Vaccination and immunisation as appropriate for the occupational or work activities
- Assessment of health and capability for regular night workers
- Eyesight screening for VDU users
- Self-referrals
- Health promotion programmes to include:
 - 1. Smoking cessation
 - 2. Alcohol and substance misuse
 - 3. Stress management and advice

4. ORGANISATION FOR JOINT CONSULTATION

4.1 Consultation

Berkshire Healthcare fully accepts its responsibilities under the Health and Safety at Work etc. Act 1974 and recognises that these cannot be fully discharged without cooperation of employees at all levels. Therefore Berkshire Healthcare will endorse the requirements of the Safety Representatives and Safety Committees Regulations 1997. Berkshire Healthcare will consult with duly appointed safety representatives in good time on matters concerning the introduction of measures that will affect the health and safety of employees represented by the safety representative.

There are a number of committees and working groups that consider health and safety issues within Berkshire Healthcare.

4.2 Executive Non Clinical Risk Management Committee

The aim of the Committee is to oversee arrangements for risk management in that the Committee provides assurance to Berkshire Healthcare's Trust Board that appropriate systems, procedures and processes are in place. The Committee will make recommendations for continuous and sustained improvement in organisational practice in order to improve the quality and environment of care provided to clients and staff

The Committee's overall objective is as follows: -

To develop, implement and monitor the management of non-clinical risks and act as a focus on such risks. This Committee will ensure the communication of strategy is directed to all managers for each of the locality directorates. The Committee will ensure that the Health, Safety and Environment Group are informed of any actions required.

4.3 The Health, Safety and Environment Group

The aim of the Group is to provide a platform for communication between localities and business groups and the Non Clinical Risk Management Committee. Its objective is to ensure that operational risks are being managed and controlled appropriately, that local health and safety groups are operating effectively and issues of significance are brought to the attention of those groups as appropriate.

Principle tasks are:

- a) Communicate and explain the principles of the risk strategy relating to health and safety risks:
- b) Identify, develop and monitor systems ensuring risk assessments and control measures are being implemented, monitored and reviewed;
- c) Analysis of information and reports from Berkshire Healthcare's incident reporting system and other sources, both within and outside of Berkshire Healthcare, identifying necessary action to be taken;
- d) To assist in the formulation, dissemination and monitoring of Berkshire Healthcare's non-clinical risk policies and procedures;
- e) Receiving reports on the introduction of, or changes to health and safety legislation and ensuring that Berkshire Healthcare responds in such a way as to become compliant with any new responsibilities.

4.3.1 Mental Health Inpatient Health and Safety Group

The aim of the Group is to facilitate health and safety management in a mental health inpatient setting, taking into consideration the particular challenges that come with this environment. The Group will aim to:

- a) Oversee the implementation of Berkshire Healthcare's health and safety policies and the development of local arrangements to ensure appropriate safe working procedures are in place;
- b) Ensure that a system of risk assessment is in place;
- c) Ensure that routine health & safety inspections are undertaken at appropriate intervals, and audits are undertaken on an annual basis;
- d) Examine local trends in incident and accident reporting and risk assessment etc. so that reports can be made on unsafe conditions or practices along with recommendations for remedial action;
- e) Examine Health & Safety Representative and Co-ordinator reports and safety audits to identify weaknesses and recommend remedial action;

- f) Monitor the adequacy of health and safety communication and promotion in the workplace:
- g) Ensure that systems are in place for the development, introduction and monitoring of safety rules and safe systems of work. Ensure the effectiveness of relevant instruction and training.

4.3.2 Locality Groups

Each Locality will ensure that health and safety is a standing agenda item on locality group meetings.

5. ORGANISATIONAL ARRANGEMENTS

5.1 Risk Assessments

5.1.1 Managers in Charge/Ward Managers/Heads of Departments/Team Leaders

These managers are required to:

- a) Identify the hazards in their areas of responsibility;
- b) Prioritise risk assessments (i.e. address the most significant hazards first);
- c) Complete risk assessments using the risk matrix in ORG006 Risk Management Strategy;
- d) Identify means to eliminate the risk and where this is not possible identify means to reduce the risk:
- e) Ensure that all staff are aware of the outcomes of risk assessments;
- f) Review all risk assessments on an annual basis or where an incident occurs or new technology has been identified;
- g) Ensure copies of the risk assessments are stored locally;
- h) Compile the risk register for their service;
- i) Highlight on the risk register where they have identified that they do not have the resources to eliminate or to control a risk adequately;
- j) Ensure their service risk register is reviewed by the locality management team so that the locality risk register can be populated.

5.2 Health & Safety Inspections

Managers in Charge/Ward Managers/Heads of Departments and Team Leaders are responsible for undertaking a health and safety inspection for their service area at least annually, or more frequently in the light of changing circumstances. Joint inspection with Safety Representatives is to be encouraged. Any recommended remedial action arising from an inspection should be graded and prioritised.

5.3 Performance Monitoring

Berkshire Healthcare's Learning and Development, Governance and Compliance and Risk Services will collaborate to produce a short annual report, which shall be presented to the Trust Board highlighting the following:

- Health & Safety strategies
- Attendance rate for statutory/mandatory training e.g. induction, fire, manual handling, security
- Fire safety management performance and fire incidents
- RIDDOR incident rates
- Violence and Aggression incident rates

5.4 Local Policies and Procedures

Managers in Charge/Ward Managers/Heads of Departments/Team Leaders are required to ensure that, where appropriate, all services have local health and safety policies/procedures, which indicates the specific:

- · Responsibilities for Health and Safety;
- Hazards present;
- · Arrangements for risk assessments;
- Safety precautions and controls in place.

5.5 Incident Reporting

Incidents within the context of this policy mean accidents that did or could have caused harm, deliberate acts, near misses and any other untoward event that may have a detrimental effect to the health and safety of staff, patients, contractors, visitors or members of the public., Berkshire Healthcare requires that all incidents are accurately reported, in line with Berkshire Healthcare's Reporting Procedure using the Incident Reporting Management System. All staff should read Berkshire Healthcare's Adverse Events/Near Misses and Serious Incidents Requiring Investigation Policy ORG007 and Risk Assessment/Management in Mental Health CCR003.

5.6 Incident Investigation

Managers in Charge/Ward Managers/Heads of Departments and Team Leaders must investigate all safety incidents. The investigation should be allocated time in relation to the severity of the incident i.e. the greater the severity the greater the time allocated to the investigation.

5.7 Incident Grading

Investigators are to ensure that all incidents are graded using Berkshire Healthcare's risk grading matrix, and that this is conducted in line with information in the Adverse Events/Serious Untoward Incidents Policy - ORG007.

5.8 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)

These regulations require Berkshire Healthcare to report certain injuries, dangerous occurrences and diseases to the Health and Safety Executive. In the case of an incident as defined under RIDDOR the incident must be fully investigated and the investigating manager is responsible for reporting these incidents upwards to the

Health and Safety Executive. Guidance and support for managers can be obtained from the Compliance and Risk Team.

5.9 Staff Working away from the Berkshire Healthcare's Sites

Staff who work away from the Berkshire Healthcare sites i.e. community staff, may be particularly exposed to risk. Managers responsible for these staff must ensure that suitable arrangements are in place for their safety. This should include the introduction of systems for staff security, lone working, emergency communication etc. where risk assessment identifies the need.

5.10 Violence to Staff

Any form of violence by one member of staff upon another should be reported immediately and dealt with as a police or disciplinary matter as appropriate

Whilst mindful that staff working with people with mental health problems and learning difficulties can be exposed to challenging situations, Berkshire Healthcare will not tolerate acts of intentional violence against staff from patients, relatives, carers or members of the public. All physical and non-physical assaults should be reported in line with Berkshire Healthcare's reporting procedures.

5.11 Temporary Staff

The Health and Safety at Work Act 1974 requires employers to ensure, so far as is reasonably practicable, a safe system of work for his/her employees. The definition for Berkshire Healthcare includes agency, locum and temporary staff using the premises as a place of work. Managers must provide staff in these categories with information on site and departmental health and safety procedures through local induction.

5.12 Employment of Contractors

Berkshire Healthcare will ensure that, so far as is reasonably practicable, only competent and safety-conscious contractors carry out work on its behalf. In addition, the contractor must comply with any statutory legislation applicable to the work and ensure that all local safety rules are adhered to.

5.13 Consultation with Employees

Berkshire Healthcare will comply with the Safety Representatives and Safety Committee's Regulations.

- The Trade Union safety representatives who attend the East and West Health and Safety Forums and Berkshire Healthcare's Joint Staff Consultative Committee (JSCC) are part of the decision-making process with regards to health and safety.
- All staff will be informed about health and safety issues via in-house communications.
- Trade Union safety representatives will be informed about health and safety issues as required under the Safety Representatives and Safety Committees Regulations.

5.14 Control of Substances Hazardous to Health (COSHH)

Managers in Charge/Ward Managers/Heads of Departments and Team Leaders are responsible for COSHH assessments for hazardous substances they have in their

areas of responsibility, in line with the COSHH procedures. They should ensure that all staff receive suitable and sufficient information, instruction, training and supervision in the safe use, handling and storage of these substances. Managers should provide suitable and sufficient personal protective equipment for their staff where the risks from substances hazardous to health cannot be controlled by other means.

5.15 Sharps

Managers should ensure that all staff are aware of the Berkshire Healthcare's Sharps Policy HS008b/ICC005 and use and dispose of sharps in a safe manner to prevent injury to themselves or others.

5.16 Multiple Occupancy

Where more than one Trust has occupancy of a site the following should be adhered to:

- The landlord is responsible for the buildings and fabric whilst the users of the buildings have responsibility for their staff's health and safety issues.
- Details of these arrangements will be set out in a Memorandum of Occupancy, signed by each party.

6. TRAINING

The Health and Safety at Work etc Act 1974 requires an employer to provide whatever information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of staff. All staff are to attend appropriate training in accordance with the Statutory, Mandatory and Essential Training Framework on the Trust intranet.

7. MONITORING AND REVIEW

7.1 Monitoring Process

The effectiveness of this policy shall be monitored by Berkshire Healthcare's, Health, Safety and Environment Group:

Monitoring process may be varied and may include:

- Audit
- Risk assessment
- Systematic inspections (Example Work Place Checklist)
- Incident and accident statistics
- Sickness and ill health statistics
- Risk registers

This policy will be reviewed every two years or in the light of any changes to relevant health and safety legislation.

8. ASSOCIATED TRUST POLICIES

- ORG007 Adverse Events/Near Misses and Serious Incidents Requiring Investigation
- ORG006 Risk Management Process & Strategy
- HS005 First Aid

- HS006 Fire Safety
- HS038 Control of Substances Hazardous to Health (COSHH)
- HS016 Waste Management
- HS021 Fire Safety, Prevention & Compliance
- HS025 Manual Handling
- HS022 Prevention & Control of Legionella, Safe Hot Water and Surface Temperatures
- HS019 Asbestos
- ICC003 Personal Protective Equipment (PPE's) Standard Precaution and Use
- ORG069 Dealing Positively with Workplace and Personal Stress
- ICC005/HS008 Management of Sharps, Inoculation and Needle stick Injury
- CCR003 Risk Assessment/Management in Mental Health & Learning Disability Service
- HS029 Lone Worker (Incorporating Lone Worker Devices)
- CCR038 Prevention and Management of Violence and Aggression (PMVA)
- ORG 082 Adverse Weather Condition and Severe Travel Disruption
- HS001 Health & Safety Policy

9. SUPPORTING REFERENCES

- Health & Safety at Work etc. Act 1974
- Management of Health & Safety at Work Regulations 1999
- The Safety Representatives and Safety Committees Regulations 1997 and The Health and Safety (Consultation with Employees) Regulations 1996
- Care Quality Commission Essential Standards
- NHS Litigation Authority Risk Management Standards
- Managing for Excellence in the NHS (October 2002) ref no 29495
- NHS Code of Conduct for NHS managers (October 2002) ref no 29490
- Successful Health & Safety Management HSE HSG 65
- Workplace Health and Safety Standards, The NHS Staffs Council 2013
- Directors Responsibilities for Health and Safety HSE INDG343
- Organisations own Risk Management Strategy
- Leading Health and Safety at Work (Corporate Manslaughter)
- http://www.hse.gov.uk/pubns/indg417.htm

Further information may also be found at:-

- 1. http://www.hse.gov.uk/
- 2. http://www.hse.gov.uk/healthservices/index.htm
- 3. http://www.npsa.nhs.uk/
- 4. http://www.cfsms.nhs.uk/links.html
- 5. https://www.gov.uk/government/publications/managing-healthcare-fire-safety

COMMENTS / FEEDBACK (This form can be photocopied as needed)

HS001 - HEALTH AND SAFETY POLICY

Name	Date			
Address				
Return comments for consideration three months prior to review date to designated policy lead or the Governance Administration Manager, 2 nd Floor, Fitzwilliam House, Skimped Hill Lane, Bracknell, RG12 1BQ. Tel: 01344 415623				
Page:				
Paragraph:				
Page:				
Paragraph:				
Page:				
Paragraph:				
General comments:				



Equality Analysis – Template

'Helping you deliver person-centered care and fair employment'

- 1. Title of policy/ programme/ service being analysed HS001 Health & Safety Policy
- 2. Please state the aims and objectives of this work and what steps have been taken ensure that the Trust has paid <u>due regard</u> to the need to eliminate discrimination, advance equal opportunities and foster good relations between people with protected characteristics. The policy is required to comply with the Health and Safety at Work etc. Act 1974. As such it is designed to apply to anyone who may be affected by the Trust's undertaking.
- 3. Who is likely to be affected? e.g. staff, patients, service users All those who may be affected by the Trust's undertaking.
- 4. What evidence do you have of any potential adverse impact on groups with protected characteristics?

 No evidence of potential adverse impact.

 Include any supporting evidence e.g. research, data or feedback from engagement activities

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4.1 Disability	Consider building access, communication requirements,
People who are learning disabled,	making reasonable adjustments for individuals etc
physically disabled, people with	
mental illness, sensory loss and long	No evidence of potential adverse impact.
term chronic conditions such as	'
diabetes, HIV)	
4.2 Sex	Consider gender preference in key worker, single sex
Men and Women	accommodation etc
	No evidence of potential adverse impact.
4.3 Race	Consider cultural traditions, food requirements,
People of different ethnic	communication styles, language needs etc
backgrounds, including Roma	
Gypsies and Travelers	No evidence of potential adverse impact.
4.4 Age	Consider access to services or employment based on
This applies to people over the age of	need/merit not age, effective communication strategies etc
18 years. This can include	
safeguarding, consent and child	No evidence of potential adverse impact.
welfare	
4.5 Trans	Consider privacy of data, harassment, access to unisex
People who have undergone gender	toilets & bathing areas etc
reassignment (sex change) and those	
who identify as trans	No evidence of potential adverse impact.
4.6 Sexual orientation	Consider whether the service acknowledges same sex
This will include lesbian, gay and bi-	partners as next of kin, harassment, inclusive language etc
sexual people as well as heterosexual	
people.	No evidence of potential adverse impact.
4.7 Religion or belief	Consider holiday scheduling, appointment timing, dietary
Includes religions, beliefs or no	considerations, prayer space etc
religion or belief	
	No evidence of potential adverse impact.

4.8 Marriage and Civil Partnership Refers to legally recognised	Consider whether civil partners are included in benefit and leave policies etc
partnerships (employment policies only)	No evidence of potential adverse impact.
4.9 Pregnancy and maternity Refers to the pregnancy period and	Consider impact on working arrangements, part-time working, infant caring responsibilities etc
the first year after birth	No evidence of potential adverse impact.
4.10 Carers This relates to general caring responsibilities for someone of any	Consider impact on part-time working, shift-patterns, options for flexi working etc
age.	No evidence of potential adverse impact.
4.11 Other disadvantaged groups This relates to groups experiencing health inequalities such as people living in deprived areas, new	Consider ease of access, location of service, historic take-up of service etc
migrants, people who are homeless, ex-offenders, people with HIV.	No evidence of potential adverse impact.

5 Action planning for improvement

- 5.1 Please outline what mitigating actions have been considered to eliminate any adverse impact?
- 5.2 If no mitigating action can be taken, please give reasons.
- 5.3 Please state if there are any opportunities to advance equality of opportunity

An Equality Action Plan template is appended to assist in meeting the requirements of the general duty.

Sign off

Name of person who carried out this analysis: Risk Services Team Manager

Date analysis completed: October 2018

Date analysis was approved by responsible Director: Ratified by the Safety, Experience and Clinical Effectiveness Group on 4th December 2018