

Policy Statement and Policy for the Management of Health and Safety – HS01 (Version 6.1)

TRUST-WIDE NON-CLINICAL POLICY DOCUMENT

Document detail	
Policy Number	HS01
Version	2025 Version 6.1
Approved by	Quality and Safety Committee
Effective from	03/2025
Date of last review	01/2025
Date of next review	01/2028
Lead Director	Chief Strategy Officer
Responsible Lead	Health, Safety and Fire Manager
Superseded documents	Policy Statement for the Management of Health and Safety, Version 6
Document summary	The policy includes a statement signed by the Chief Executive outlining the commitment of the Trust to Health and Safety which is a legal requirement. The policy outlines the roles and responsibilities of Board, Committees, Groups and individuals that ensure that the commitments outlined in the opening statement are met.

Document History		
Version number	Comments	Approved by
1	New Policy	Quality and Governance Committee
2	Policy Review – May 2013 Unified policy systems across the Trust.	Quality and Governance Committee
3	Policy Review - September 2015 New Chief Executive Signature	Quality and Governance Committee
4	Policy Review – April 2019 Change of format, Organisation name change, and reference to Health Safety Wellbeing group changed to Health Safety Security and Resilience.	Quality and Safety Committee.
5	Policy review April 2022 Change and update of legislation dates for clarity. Monitoring processes to reflect quarterly meeting structure.	Quality and Safety Committee
5.1	Updated date of signature for policy statement	Minor amendment approved by Chair's action
6	Policy Review Jan 2025. Update of signature for policy statement; minor job title changes; merging of 6.9 and 6.11 to reflect combination of roles; addition of linked policies	Quality and Safety Committee

POLICY ON A PAGE

- Health and Safety legislation requires organisations that employ 5 or more persons are to have in place a written statement of intent in relation to Health and Safety. Whilst everybody has a duty under the Health and Safety at Work Act 1974, the policy outlines the responsibilities for groups and individuals.
- The policy provides the framework for the management of health, safety and wellbeing within the Trust. The policy will support managers and employees in ensuring that matters relating to health safety and wellbeing are communicated and coordinated effectively.
- The Policy outlines the roles and responsibilities of groups and individuals with regard to the management of health and safety.
- The policy makes reference to the incident reporting procedures in place requiring staff to ensure, that all Health and Safety related incidents are reported on Datix within 1 working day of the incident or 1 working day following the identification of an incident.
- Staff training needs analyses have been completed, which include various health and safety elements which are relevant to the individual roles performed within the organisation. These include, Fire Safety, Manual Handling and Infection Control.
- An equality impact assessment has been completed with regards to the effects of the policy on race, sex, disability, age, sexual orientation, or religious belief. No detriment was identified.
- Proactive monitoring of health, safety and security policies is achieved according to the risk strategy and risk assessment policy.

SUPPORTING STATEMENTS

This document should be read in conjunction with the following statements:

SAFEGUARDING IS EVERYBODY'S BUSINESS

All Wirral Community Health and Care NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and adults, including:

- being alert to the possibility of child/adult abuse and neglect through their observation of abuse, or by professional judgment made as a result of information gathered about the child/adult;
- knowing how to deal with a disclosure or allegation of child/adult abuse;
- undertaking training as appropriate for their role and keeping themselves updated;
- being aware of and following the local policies and procedures they need to follow if they have a child/adult concern';
- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors or the Trust's safeguarding team*;
- participating in multi-agency working to safeguard the child or adult (if appropriate to your role; ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Wirral Community NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;
- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session.

EQUALITY AND HUMAN RIGHTS

Wirral Community Health and Care NHS Foundation Trust recognise that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the protected characteristics of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy/maternity and marriage/civil partnership.

The Trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major employer. The Trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Wirral Community NHS Foundation Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes

Wirral Community NHS Foundation Trust is committed to carrying out its functions and service delivery in line with a Human Rights based approach and the FREDA principles of **F**airness, **R**espect, **E**quality **D**ignity and **A**utonomy.

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APPENDIX 1 – POLICY MONITORING

APPENDIX 2 – EQUALITY IMPACT ASSESSMENT

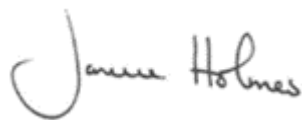
1. POLICY STATEMENT

Policy Statement

Wirral Community Health and Care NHS Foundation Trust is committed to providing, maintaining and continuously improving a working environment which supports the health, safety and well-being of those who could be affected by its activities and undertakings.

We will:

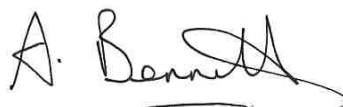
- Promote commitment and recognition of the health, safety and wellbeing agenda
- Recognise that everyone has a responsibility towards the success of our health and safety management system and will comply with legal responsibilities
- Identify and manage risks in a proportionate manner
- Communicate in a manner founded upon open and mutual trust
- Ensure that health, safety and wellbeing is fully integrated into the way we work
- In alignment with PSIRF (Patient Safety Incident Reporting Framework), promote a positive culture of incident and prevented incident (near miss) reporting and learn from these to reduce work related accidents and ill health
- Ensure that adequate resources are available to achieve the necessary compliance with Regulations and standards
- Put safety, wellbeing and engagement at the heart of the business
- Publish Health and Safety related policies on StaffZone ensuring that they are accessible to all staff



Signed
Chief Executive

Date 20 March 2025

Signed
Chief Strategy Officer



Date 20 March 2025

2. PURPOSE AND RATIONALE

2.1 Introduction

Organisations have a legal duty to have in place a health and safety policy statement and organisational arrangements to ensure that, so far as is reasonably practicable, health and safety is effectively managed throughout the business. The policy statement and organisational arrangements for Wirral Community Health and Care NHS Foundation Trust are set out within this document.

2.2 Legal Responsibilities

There is a legal requirement for organisations to ensure that, so far as is reasonably practicable, the health, safety and welfare of those employed by it as well as those not employed but who could be affected by it are protected from foreseeable risk and harm. For the Trust this group will include: service users, carers, visitors, volunteers, contractors and members of the public etc.

Organisations must have in place a policy statement and organisational arrangements for the management of health, safety and welfare.

The main pieces of legislation which create these requirements include:

- Health and Safety at Work etc Act 1974
- The Workplace (Health, Safety and Welfare) Regulations 1992
- The Provision and use of Work Equipment Regulations 1998
- Management of Health and Safety at Work Regulations 1999
- The Regulatory Reform (Fire Safety Order) 2005
- The Control of Asbestos Regulations 2012

3. OUTCOME FOCUSED AIMS AND OBJECTIVES

The policy provides the framework for the management of health, safety and wellbeing within the Trust. The policy will support managers and employees in ensuring that matters relating to health safety and wellbeing are communicated and coordinated effectively.

Health and safety responsibilities and competencies will be made clear at all stages and levels of the organisation i.e., at recruitment, via corporate and local induction programs and as part of any personal, service and business development plans.

Reporting processes are identified to ensure that staff and others have the ability to report and raise concerns relating to the health and safety and wellbeing of all employees and nonemployees e.g., temporary staff, contractors, members of the public and patients who may be affected by the Trust's provision of healthcare services.

4. SCOPE

This policy is a Trust wide document and is applicable to all employees as well as those seconded and sub-contracted staff at all levels of the organisation.

5. DEFINITIONS (Glossary of Terms)

Term	Definition
H&S	Health and Safety
HSWA	Health and Safety at Work etc Act 1974
HSSR Group	Health Safety Security and Resilience Group
HSE	Health Safety Executive
PTW's	Permits to Work
SLAs	Service Level Agreements

6. RESPONSIBILITIES, ACCOUNTABILITIES AND DUTIES

6.1 Trust Board

The Board will:

- Review all health, safety and wellbeing concerns that have been escalated from the Health, Safety Security and Resilience Group via the Quality and Safety Committee

6.2 Quality and Safety Committee

The Committee will:

- Receive assurance that Wirral Community Health and Care NHS Foundation Trust meets its statutory and regulatory obligations in relation to health and safety performance via Divisional/Service Specific Governance Groups and the Health, Safety, Security and Resilience group
- Review concerns escalated to them, action those relevant to the Committee's terms of reference and refer, as appropriate, to the Board
- Encourage and review incident reporting within the Trust.

6.3 Health, Safety Security and Resilience Group

The Health, Safety, Security and Resilience Group will:

- Monitor the Trust's Health, Safety and Wellbeing Strategies, action plans and performance

- Review changes in health and safety legislation to determine the impact on the Trust
- Resolve concerns relating to health, safety and wellbeing of staff and escalate those which cannot be resolved to the Quality and Safety Committee
- Link with the People and Culture Committee to ensure training schedules are delivered which maintain competencies and reduce risk to staff and others
- Ensure that consideration is given to the health and safety implications and in particular the need for risk assessment whenever new systems, equipment or procedures are introduced
- Develop and review health, safety and wellbeing policies and share these for wider consultation before approval by the Group and endorsement by the Quality and Safety Committee
- Receive assurance of the Trust's response to reports from external agencies, including the Health and Safety Executive.
- Escalation of risks to the Quality and Safety Committee in line with GP45 The Policy for Risk Identification and Management
- Ensure that the Disability Network Group have sight of Health and Safety reports and are liaised with regarding specific risks that may affect a disability.

6.4 Local Operational Performance Group/Local SAFE Group

The Group will:

- Discuss, agree and monitor action plans for Health and safety/security risks belonging to services
- Ensure significant risks are recorded using the service risk register
- Escalate Health and safety/security risk issues which score 12 or above using the Trust risk matrix to the Quality, Patient Experience and Risk Group.
- Review Health and safety/security incidents, and claims which occur in the service
- Discuss audit findings and implementation of action plans

6.5 Chief Executive

The Chief Executive has overall accountability for the management of health, safety and wellbeing within Wirral Community Health and Care NHS Foundation Trust. The Trust's Health, Safety and Wellbeing Policy Statement is approved and signed by the Chief Executive

6.6 Chief Strategy Officer

The Chief Strategy Officer has Board level responsibility for health, safety and wellbeing and acts on behalf of the Chief Executive and has the following responsibilities:

- Counter-signing the Trust's Health, Safety and Wellbeing Policy Statement
- Ensuring health and safety policies and procedures are developed to reflect the organisation's activities and level of risk.
- Ensuring that suitable and sufficient resources are allocated to deal with safety and security matters in a timely manner.

- Setting health, safety and wellbeing objectives based on legislation and controls assurance standards and monitoring performance against these objectives
- Ensuring competent advice is available for health and safety and risk matters
- Actively promoting health, safety and wellbeing within the Trust
- Overseeing the organisation of the Health Safety Security Resilience Group to ensure effective communication and consultation.

6.7 Service Directors /Heads of Service/Service Leads / Line Managers have responsibility for the following:

- Counter-signing the Trust's Health, Safety and Wellbeing Policy Statement and communicating this within their areas of responsibility.
- Implementing health and safety policies, procedures and ensuring safe systems of work are adopted and adhered to
- Monitoring compliance with health and safety policies
- Ensuring suitable and sufficient risk assessments are completed for their service and staff are made aware of the risks identified and the measures to be followed to eliminate, reduce or control those risks.
- Reviewing risk assessments periodically to ensure that they are suitable, sufficient and relevant.
- Maintaining, so far as is reasonably practicable, a safe environment for employees, contractors, service users and visitors including members of the public
- Ensuring that they and their staff receive relevant health and safety training including, as appropriate:
 - Corporate and local induction
 - Essential Learning
 - Fire Safety training
 - Manual Handling training
 - Conflict Resolution training
 - Training specific to roles and responsibilities
- Participating in safety inspections and acting on the findings. of such
- Conducting a thorough investigation of all accidents, incidents and prevented incidents (near misses) within their service and implementing remedial actions to prevent recurrence
- Requesting, where necessary, assistance from health and safety representatives, the Health-Safety and Fire Manager, or Local Security Management Specialist/Emergency Preparedness Resilience and Response Lead as appropriate
- Monitoring staff competencies and taking action as necessary to ensure these are met and maintained
- Co-operating with safety representatives to allow them to carry out their duties e.g., investigating the cause of accidents, incidents and undertaking workplace inspections etc.
- Liaising with the Head of Estates to ensure service needs are assessed during any workplace alterations or new build projects
- Establishing priorities according to risk and including these within their business plan
- Ensuring service / team meetings include communication on Health Safety and Wellbeing issues, policy updates, training, risk bulletins, lessons learned

bulletins, incidents etc. and evidence of staff attendance at such meetings is available.

6.8 All Employees are responsible for taking care of their own health, safety and wellbeing as well as the health and safety of others, this includes:

- Undertaking training identified by training needs analysis or required according to the individual's role and responsibilities
- Maintaining the necessary competencies to work safely
- Raising with their line manager any concerns they have regarding health, safety and wellbeing
- Undertaking, recording and reviewing risk assessments which are required by their role and working environment
- Co-operating with the Trust by adhering to policies, procedures, risk control measures and safe systems of work
- Refraining from interfering with, misusing or removing any item provided for health and safety reasons
- Using any safety equipment and personal protective equipment according to training and instruction received
- Reporting hazards, incidents, accidents and prevented incidents (near misses) according to Trust policy
- Co-operating with management and safety representatives on health and safety issues and in the investigation of accidents and incidents including root cause analysis

6.9 The Health Safety & Fire Manager will have the following specific responsibilities:

- Providing support and liaising with managers to ensure risk is identified, assessments completed and risks appropriately managed
- Advising managers so they may fulfil their health and safety responsibilities
- Advising on the development and implementation of safe systems of work
- Liaising with external bodies including the Health and Safety Executive (HSE) and local authorities
- In conjunction with the Quality and Governance Service, recording and collating accident statistics, presenting them in an appropriate format to the Health Safety Security and Resilience Group and via the Quality and Safety Committee to the Board
- Liaising with workplace safety representatives, both union elected and non-union elected, on the reporting of accidents and incidents
- Working in conjunction with the Quality and Governance Service to ensure health and safety training needs are identified and delivered including health and safety, risk management, manual handling and fire safety training
- Liaising as required with the Head of Estates to ensure that the day-to-day management of premises and any refurbishment or building projects are managed appropriately
- Keeping the Trust updated on changes in health and safety legislation
- Liaising with the Local Security Management Specialist/Emergency Preparedness Resilience and Response Lead in relation to staff safety
- To advise the Trust's Buildings Manager on technical fire matters and for monitoring the state of the fire precautions within trust premises

- Advising and assisting in the interpretation and application of Fire codes, fire safety legislation and other official guidance relevant to healthcare premises
- Undertaking fire risk assessments for Trust premises and carrying out annual inspections to identify areas of concern and non-compliance
- Preparing an annual report on the current state of fire safety in all premises and the completion of the “Certificate of Fire code compliance”
- Liaising with the local authority Building Control and the Fire Service as necessary
- Delivering fire safety training according to the Trust’s training needs analysis
- Liaising with Fire Wardens/Evacuation Marshalls in preparing and participating in fire evacuation drills
- Advising managers / heads of service/ service leads on the development of local fire procedures
- Reviewing and making recommendations on fire incidents, investigating fires occurring and ensuring that fire reports are completed as required
- Providing advice on health and safety issues associated with the Trust’s buildings and engineering, including the management of asbestos and Legionella
- Suggesting building / engineering solutions to specific health and safety problems

6.10 The Head of Estates will have the responsibility for ensuring:

- Support and advice is provided for managers regarding remedial building works relating to health and safety
- Service level agreements (SLAs) are in place for the Trust’s buildings and their engineering installations, including:
 - day to day repair and maintenance
 - planned preventative maintenance (PPMs)
 - statutory inspections
- Contractors appointed are competent and have undergone the necessary approval process
- Risk assessments and method statements are supplied by contractors for remedial or refurbishment works
- Contractors are issued with any necessary authorisation or permits to work (PTWs)
- Records of statutory inspection e.g. for lifting equipment, pressure systems or gas installations are available
- The Health, Safety and Fire Manager and relevant managers are consulted so that safety is designed into renovation and new build projects and that the general principles of prevention are considered.

6.11 Safety Representatives are appointed by recognised Trade Unions who report their nomination to the Head of Human Resources. Representatives have responsibilities for:

- Keeping themselves aware of legal requirements, policies and procedures
- Keeping themselves up to date with any changes to legislation
- Attending the HSSR Group
- Encouraging co-operation between the Trust and its employees

- Identifying hazards and investigating incidents and complaints
- Undertaking safety inspections and audits in line with agreed guidelines
- Representing employees in consultation with HSE inspectors

6.12 The Occupational Health Service under an agreed and approved service level agreement (SLA) has responsibility for the following:

- Undertaking new employee assessments as determined by current procedure
- Liaising with and supporting managers and HR in relation to staff health at work, including Management Referral process and provision of reports and recommendations
- Undertaking health screening / surveillance as agreed in accordance with Department of health guidance / current legislation
- Providing agreed occupational health reports for the Health Safety Security and Resilience Group
- Undertaking specific occupational health risk assessments as agreed / requested.

7. PROCESS

7.1 Incident reporting

Any staff member involved in or who has witnessed any health and safety related incident or near miss that involves patients, staff or others should report the incident via Datix using the DIF1 Form that can be accessed via the StaffZone. The form should be completed within one working day of the incident or the date the incident becomes identified. The Trust Incident Reporting Policy (GP08) fully outlines the process.

7.2 Policy Management

Health and safety policies are developed by the Health, Safety and Fire Manager, in consultation with the Health, Safety, Security and Resilience Group where the subject of the policy requires it.

Ratification of policies is achieved via the Health, Safety Security and Resilience Group and final approval gained at board level via the Quality and Safety Committee.

Action plans drawn up will be monitored by the Health, Safety, Security and Resilience Group to ensure that responsibility has been allocated and actions delivered.

Reactive monitoring is achieved via the analysis of accidents, incidents and prevented incidents (near misses) and their investigation to determine root causes and the effective remedial action to prevent recurrence.

7.3 Co-operation and Coordination

Where the Trust shares premises, undertakes joint ventures or commissions services, systems will be put in place to ensure that health and safety risks are determined and managed appropriately. All parties will be made aware of the responsibility they have to co-operate in the implementation of control measures

8. CONSULTATION

This policy has been reviewed by the Health, Safety, Security and Resilience Group prior to submission to Quality and Safety Committee.

9. TRAINING AND SUPPORT

A training needs analysis is undertaken which includes health and safety requirements, manual handling training, fire training and first aid training. Training programs are developed and implemented to ensure compliance with the necessary codes of practice and core skills framework and that Staff are developed and retain the necessary competencies to fulfil their roles effectively and safely.

10 MONITORING

Monitoring compliance of this Policy and associated action plans will be subject of a continual monitoring process and reported to the Health Safety Security Resilience Group on a quarterly basis. as outlined with in Appendix 1.

In addition to the continual monitoring process an Annual Health and Safety report will be prepared by the Health, Safety and Fire Manager and submitted to board providing health and safety data and assurance that the Trust is compliant with relevant legislation

11 EQUALITY AND HUMAN RIGHTS ANALYSIS

As part of its development, this Policy and its impact on equality have been reviewed as described above. The purpose of the assessment is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. Please see Appendix 2.

12 LINKS TO OTHER POLICIES

This policy underpins the following health and safety policies.

- HS06 Lone Worker
- HS07 Control of Substances Hazardous to Health
- HS10 Fire Safety
- HS12 First Aid
- HS15 Management of Violence and Aggression
- HS16 Control of Contractors
- HS17 Display Screen Equipment
- HS18 Local Security Management
- HS19 Occupational Road Risk
- HS22 Control of Legionella
- HS23 Smoke Free
- HS24 Management of Asbestos
- HS25 Slips, Trips and Falls
- HS26 Non-People Moving and Handling
- HS27 Management of Healthcare Waste

HS28 Ventilation and Air Filtration Policy
GP53 Mobility Scooter Policy.

The following policies also support Health and Safety management across the organisation

GP5 Risk Management Strategy
GP45 Policy for Risk Identification and Management
GP8 Incident Reporting Policy

Appendix 1 – Policy Monitoring

Minimum requirement to be monitored	Process for monitoring (e.g. audit)	Responsible individual / group/ committee	Frequency of monitoring	Evidence	Responsible individual for development of action plan	Responsible committee for monitoring of action plan and Implementation
Duties	Policy Review	Health Safety Security and Resilience Group	Quarterly	Minutes	Health Safety Security and Resilience Group	Quality and Safety Committee
Number of RIDDOR incidents reported to the HSE	Trend analysis of reported incidents regarding RIDDOR	Health Safety Security and Resilience Group	Quarterly	Minutes/ Incident Trend Reports and Action Plans	Health Safety Security and Resilience Group	Quality and Safety Committee
Number of incidents relating to slips, trips and falls of staff	Trend analysis of reported incidents regarding slips, trips and falls	Health Safety Security and Resilience Group	Quarterly	Minutes/ Incident Trend Reports and Action Plans	Health Safety Security and Resilience Group	Quality and Safety Committee
Number of incidents relating to violence and aggression towards staff	Trend analysis of reported incidents regarding violence and aggression	Health Safety Security and Resilience Group	Quarterly	Minutes/ Incident Trend Reports and Action Plans	Health Safety Security and Resilience Group	Quality and Safety Committee

Appendix 2 - Equality Impact Assessment

Who may be affected?

Patients [x]

Staff [x]

Public [x]

Partner agencies [X]

Is there potential for an adverse impact against the protected groups below?

Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion and Belief, Sex (gender), Sexual Orientation or the Human Rights articles?

Yes []

No [x]

Please see comments below

On what basis was this decision made? (Please complete for both 'yes' and 'no'). The policy acknowledges that some
The EPRR Policy does not differentiate between individuals. Any impact on individuals is applicable to all.

For example, you may wish to consider or refer to the some of the following:

- National Guideline / Report (DH / NICE / NSPA / HSE / other)
- Engagement feedback
- Previous Equality Impact screening
- Trust Committee / Multi Agency meeting

If 'No' equality relevance, sign off document below and submit this page when submitting your policy document for approval. If 'Yes' Please complete pages 2-3.

With regard to the general duty of the Equality Act 2010, the above function is deemed to have no equality relevance.

Equality relevance decision by: Philip Taylor

Title:- Health, Safety and Fire Manager

Date: 27 December 2024