



Western Health  
and Social Care Trust

## **HEALTH AND SAFETY POLICY**

Revised November 2012

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# HEALTH & SAFETY POLICY

## 1.0 Health & Safety Policy Statement

The Western Health and Social Care Trust (WH&SCT) considers that the Health, Safety and Welfare of its staff, patients, clients and any other persons affected by its activities to be a managerial priority. The Trust recognises that personal health and safety at work is fundamental to job satisfaction and performance, and therefore the application of sound risk management principles to our everyday work is essential in a quality organisation delivering a quality service. All members of staff have an important role to play in safeguarding their own Health & Safety and that of Service Users and other Stakeholders in order to comply with its obligations as laid down by the Health and Safety at Work (NI) Order 1978 and all other relevant legislation.

The Trust is determined to create a health and safety culture, which motivates and involves all staff in the organisation, and aims to reduce risk.

The Western Health and Social Care Trust acknowledges the following:

- It has a collective role in providing health and safety leadership throughout the organisation
- Recognises that health and safety issues are integral to effective management, and form part of health and service improvement planning, performance management and daily operation of the Trust.
- Ensures as far as is reasonably practicable, that the place of work, the working environment and work equipment is maintained so that it is safe and without risk to health.
- Encourages a high concern for safety among all employees through joint consultation.
- Expects particular attention to be paid to the provision of effective information, instruction, training, supervision and communication at all levels of the organisation.

The Trust is committed to:

- Promoting and developing health and safety as a management priority throughout the organisation;
- Monitoring health and safety compliance;
- Reviewing organisational structures to ensure they meet the Trust's objectives;
- Consulting with staff to maintain high standards of health and safety;
- Targeting available resources to meet prioritised health and safety requirements;
- Taking account of the needs of individuals with physical / cognitive / sensory / mental health needs in relation to workplace health and safety.

Staff have a vital role to play in protecting themselves, patients, clients, colleagues and members of the public from workplace hazards. The Trust will also work proactively to improve the health of staff by continued development and promotion of policies which encourage a healthy workplace and lifestyle.

This statement is an expression of the Trust's commitment to the management of health and safety matters. Staff should also ensure that they familiarise themselves with any departmental health and safety policies or other health and safety related policies.

This Health & Safety Policy will be reviewed every three years, or more often if legislation or other circumstances dictate, and amended accordingly.

**Dated** \_\_\_\_\_

\_\_\_\_\_  
**Elaine Way**  
**Chief Executive**  
**Western Health & Social Care Trust**

## **2.0 Health and Safety Organisational Arrangements and Responsibilities**

### **2.1 Management Roles**

The **Chief Executive** is accountable for ensuring that the arrangements for health and safety matters are effective in providing a safe and healthy working environment.

The responsibility for such arrangements has been delegated to the Medical Director. As with all health and safety issues, this responsibility cascades down through each Director through the line management structure to all Directorates. The Medical Director, assisted by the Trust Health & Safety Working Group, will ensure that appropriate organisational arrangements are in place throughout the Trust to support Directorates.

The **Head of Clinical Quality & Safety** provides senior management support to the Medical Director and will on his/her behalf lead the development of the policy, and is responsible for ensuring that there are robust systems in place for the management of corporate risks, including Health & Safety. The Head of Clinical Quality and Safety is supported by the **Corporate Risk Manager** and the **Health & Safety Officer**.

Each **Director** within the Trust is responsible for health and safety within their Directorate and must address the Directorate's specific health and safety concerns. He/she must also make adequate arrangements to ensure compliance with Health & Safety legislation. Physical areas within the Trust, which do not fall within a particular Directorate (i.e. common areas), will be the responsibility of the Assistant Director of Facilities Management as an Estates responsibility. Directors should encourage feedback from all levels of staff within the Directorate.

Each **Assistant Director** must ensure that there are detailed health and safety arrangements within their areas of control and ensure risk assessments are conducted and safe working methods employed. All health and safety information must be relevant, accessible and written in a clear unambiguous format. Proposed changes in work practices, including the introduction of new equipment must be fully risk assessed.

Each **Manager** must ensure that work is conducted on a day-to-day basis in accordance with the health and safety arrangements and rules for their area. Hazards identified by individual members of staff must be reported to the manager to ensure appropriate action is taken.

Each **Employee** must ensure that they conduct their work in accordance with the health and safety arrangements and rules and ensure that they take steps to protect themselves and others who may be affected by their acts or omissions at work.

Relevant clauses will be included in job descriptions, which outline the responsibilities of individual roles for health and safety matters. Performance on

health and safety matters is considered to be a vital component in overall performance assessments of Directors, Managers, Supervisors and individual staff and this is reflected in Health and Safety being one of the Core Dimensions of the KSF outline for every post within the Trust covered by Agenda for Change.

### **3.0 Health & Safety Structure and Advisors**

#### **3.1 Risk Management Department**

The Risk Management Department is responsible for the dissemination of information on good practice regarding health and safety. Staff within the Risk Management Department will also assist in the undertaking of inspections/audits/risk assessments, monitoring of incident trends and provision of training and health & safety advice to managers.

The Risk Management Structure is included at Appendix 1.

#### **3.2 Specialist Advisers**

Specialist advisers will provide advice to senior management within the Trust on those issues for which they have particular expertise e.g.

Head of Clinical Quality and Safety  
Corporate Risk Manager  
Health & Safety Officer  
Asbestos Advisor  
Infection Control Doctor/Infection Control Nurse  
Manual Handling Co-ordinators  
Radiation Protection Advisor / Radiation Protection Supervisor  
Water Safety (Legionella, Pseudomonas, etc.) - Responsible Person/s  
Clinical Waste - 'Authorised Officer'  
Fire Safety Officers  
Decontamination Engineer  
Medical Engineering Manager  
Departmental Equipment Controllers (DEC)  
Health Promotion Department  
Occupational Health Department  
Support Services Manager (Security, Zero Tolerance, Food Safety and Cleaning)  
Environmental Management  
Electrical Systems Authorised Persons  
Resuscitation Team  
Pharmacy Team  
Management of Aggression and Therapeutic Holds Training Team

The above list is not exhaustive. Please contact the Risk Management Department for up-to-date contact details.

### 3.3 Employee Responsibility

Trust staff must be aware of their responsibilities under health and safety legislation. Each employee should be aware that their failure to follow recommendations may contribute to negligence and could result in disciplinary action being taken.

Staff must:-

- take reasonable care for their own health and safety;
- consider the safety of other persons who may be affected by their acts or omissions;
- work in accordance with information and training provided;
- refrain from intentionally misusing or recklessly interfering with anything that has been provided for health and safety reasons;
- report any hazardous defects in plant and equipment, or shortcomings in the existing safety arrangements, to a responsible person without delay;
- ensure that faulty equipment is taken out of use immediately and reported to their Line Manager and/or Estates as appropriate;
- report all incidents in line with the Trust's Incident Reporting Policy, no matter how trivial, and co-operate fully in subsequent investigations;
- not undertake any task for which authorisation and/or training has not been given.

### 3.4 Trade Union Safety Representatives

The Trust believes that Trade Union Safety Representatives have an important role to play in relation to health and safety at work but fully accepts that their role does not absolve the management of the organisation from its responsibilities.

Trade Union Safety Representatives are accorded the rights granted within relevant legislation and Codes of Practice. Every effort will be made by the Trust to involve Trade Union Safety Representatives and work in partnership with them through the sharing of appropriate information and discussing appropriate issues with them.

## 4.0 Committees/Groups with Health & Safety Responsibilities

### 4.1 Trust Health and Safety Working Group

To comply with statutory responsibilities within the Management of Health and Safety at Work Regulations (NI) 2000 and The Safety Representatives and Safety Committees Regulations (NI) 1979, the Trust has a Health and Safety Working Group, which acts as a focal point for promoting, implementing and monitoring Health and Safety arrangements throughout the Trust. The Group includes representation from recognised Trade Unions and Professional Associations. (See Appendix. 2 detailing Terms of Reference and membership of the Working Group.) The Working Group will report to the **Risk Management Sub-Committee** who are a sub-group of the **Governance Committee**, and will provide them with regular

information regarding Health and Safety matters, provide assurance on compliance against health & safety standards and make recommendations for improving health and safety in the Trust.

## **5.0 General Health and Safety Arrangements**

### **5.1 Training**

Health and safety related training is seen as an integral part of the training of staff at all levels of the organisation to enable them to understand and fulfill their roles. Such training will be included within Corporate and departmental induction and other appropriate training programmes, in addition to training to address specific issues such as new work arrangements, new equipment or new legislation. Managers are responsible for identifying staff training needs and must ensure that staff are released to attend health & safety training, and up-date training, appropriate to their role.

### **5.2 Communication**

Inadequate communication is one of the highest potential risk factors in the Trust. Lack of information can lead to low staff morale and subsequent under-performance of staff. It can lead to misunderstanding between service personnel, a failure to pass on vital patient information or the incorrect information being cascaded to staff.

The Trust is committed to ensuring that information is disseminated throughout the Trust, with the 'Trust Communication' e-mail system and newsletters being utilised to provide organisational information to the Directorates and Departments. A copy of this policy will be issued via a Trust Communication and all Department/Facility Managers will be expected to make staff aware of the Policy and make it easily accessible.

A copy of the policy must also be brought to the attention of all new staff through the staff induction process and will be available on the Trust's intranet.

### **5.3 Incident Reporting**

All incidents must be reported through line managers in accordance with the Trust Incident Reporting Policy and Procedures <http://whsct/IntranetNew/Documents/Incident%20Policy%20as%20at%201%20June%202012.pdf>. Incidents must be promptly investigated by managers to identify the cause and any remedial action required.

Notification of all incidents must be made on the appropriate form (i.e. A3 incident report book or on-line reporting where this has been implemented) and submitted to the Risk Management Department in accordance with deadlines set out in the Incident Reporting Policy.

The Risk Management Team will undertake the reporting of incidents to the Health & Safety Executive, Northern Ireland (HSENI) under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), on receipt of a relevant incident form.

#### **5.4 Risk Assessments**

Health & Safety Risk Assessment is considered to be the foundation for good health and safety arrangements. Therefore they must be conducted within all Departments within the Trust. Details of the hazards identified and the control measures implemented as a result must be included in the relevant departmental policies and procedures. Completed written risk assessment forms should be reviewed by Managers at least annually, or sooner where there is a change in working practice or legislation, to ensure compliance with the Management of Health & Safety at Work Regulations (2000).

Guidance on Risk Assessment and Risk Assessment forms can be accessed through the Risk Management Department.

### **6.0 Key Health & Safety Arrangements**

Key health and safety arrangements based on legislation and guidance include:-

#### **6.1 Use of Personal Protective Equipment (PPE)**

Every effort should be made to ensure that safe working practices are put in place that will avoid the need to use PPE. However, where the use of PPE is required, the Trust will be responsible for the provision of protective clothing, footwear or equipment as required in accordance with the arrangements identified within the Personal Protective Equipment at Work Regulations 1992. Where the required protective clothing, footwear or other equipment has been identified and supplied, failure by staff to use it may result in disciplinary action being taken.

#### **6.2 Work Equipment**

All work equipment in use within the Trust will be managed in accordance with the Provision and Use of Work Equipment Regulations 1998, the main requirements of which are:

- electrical equipment must be portable appliance tested (PAT Tested) by a competent trades person before use. See HSE web-link for guidance on portable electric equipment. [www.hse.gov.uk/pubns/indg236.pdf](http://www.hse.gov.uk/pubns/indg236.pdf)
- suitability for purpose for which it is used or provided;
- having regard for the conditions in which it is to be used;
- that it is used only for the purpose, and under the conditions, for which it is suitable;
- it is maintained in an efficient state, in efficient working order and in good repair;
- maintenance logs kept up- to- date where appropriate;

- where there is specific risk, priority checks must be given to safety and operating efficiency and performance.
- adequate health and safety information, training and supervision is provided;
- proper guards and other protective measures are in place in respect of dangers associated with the equipment.
- Operating manuals should be made readily available to staff who will use equipment.

### **6.3 First Aid**

Any member of staff who works within an Acute Hospital site and has an accident at work should be referred to the Accident and Emergency Department, Urgent Care and Treatment Centre, or Occupational Health Department, depending on the nature of their injury

For other staff in Community facilities, Managers must maintain suitable numbers of trained First Aid personnel to deal with minor accidents and emergencies in the workplace. These personnel will have sufficient training in accordance with statutory requirements. Identities of First Aiders will be displayed throughout the workplace. Each Manager will ensure that an appropriately stocked First Aid kit is available on the premises.

For further advice regarding First Aid, please refer to the Trust's First Aid Policy.

### **6.4 New & Expectant Mothers at Work HSE Guidance**

Employees are required to notify their manager once pregnancy is confirmed so that the manager can undertake a risk assessment in accordance with the Management of Health and Safety at Work Regulations (NI) 2000. The Trust's General Risk Assessment form is suitable for this purpose.

The Health and Safety Executive (HSE) has information relating to New & Expectant Mothers on the following websites:-

<http://www.hse.gov.uk/mothers/index.htm?eban=rss-mothers>.

<http://www.riskassessments.biz/guides/Booklets/pregnancy.pdf>

### **6.5 Display Screen Equipment (DSE)**

Under the Health & Safety (Display Screen Equipment) Regulations 1992 all employers have a duty to ensure that a suitable and sufficient risk assessment has been carried out of employees' work stations by managers including the software in use and the surrounding environment.

Where it is clear that use of DSE is more or less continuous on most days, the individuals concerned should be regarded as users or operators. Where use is less continuous or frequent, other factors connected with the job must be assessed. It will generally be appropriate to classify the person concerned as a user or operator if they:

- (a) normally use DSE for continuous or near-continuous spells of an hour or more at a time; and
- (b) use DSE in this way more or less daily; and
- (c) have to transfer information quickly to or from the DSE;

This will also apply if a person needs to apply high levels of attention and concentration; or are highly dependent on DSE or have little choice about using it; or need special training or skills to use the DSE.

An e-learning package has been developed to provide staff with guidance on use of Display Screen Equipment. Managers must ensure that DSE users complete the e-learning course.

## 6.6 Dangerous Substances

All dangerous substances, (including body fluids), that staff may come in contact with should be assessed under the requirements of the Control of Substances Hazardous to Health Regulations (Northern Ireland) 2003 (as amended by the Control of Substances Hazardous to Health (Amendment) Regulations (Northern Ireland) 2003 and 2005 "COSHH(NI)"). Staff should refer to the Trust's **COSHH Policy and Latex Policy** for guidance on how to perform a risk assessment.

<http://whsct/IntranetNew/Documents/Latex%20Policy.pdf>

<http://whsct/IntranetNew/Documents/Control%20of%20Substances%20Hazardous%20to%20Health%20Policy.pdf>

## 6.7 Driving at Work

Trust employees who use their vehicles for Trust Business, have a duty to ensure that their vehicles are roadworthy. Employees must hold a valid and appropriate driving licence, appropriate insurance cover (which covers them whilst on Trust Business), taxation and M.O.T. certificate.

To ensure compliance with the Health and Safety at Work (NI) Order 1978 and the Management of Health and Safety at Work Regulations 1999, it is necessary to undertake a risk assessment of work-related driving activity. Line Managers are responsible for carrying out such Risk Assessments.

Further advice is available within the Trusts document 'Guide to Travel & Associated Expenses' and Health & Safety Executive Guidance document "Driving at Work, Managing work-related road safety".

<http://www.hse.gov.uk/pubns/indg382.pdf>

If a Manager has a concern regarding an employee's ability to carry out work-related driving, they should make the appropriate referral to the Occupational Health Department.

## 6.8 Violence to Staff

The Trust supports and has implemented the regional **Zero Tolerance Policy** on all physical and/or abusive incidents involving staff. The Trust recognises that

violence at work is a potential risk for a large number of staff within the service. Local departmental safety arrangements must include details of risk assessment for the protection arrangements for staff, procedures for the recording of all incidents, the relevant training of staff etc. in order to minimise the risk to staff as far as reasonably practicable. Further information is available in the Trust Zero Tolerance and Security Policy.

<http://whsct/IntranetNew/Documents/Zero%20Tolerance%20and%20Security%20Policy%20Final%20Version.pdf>

## 6.9 Stress at Work

While recognising that some work circumstances within Health and Social Care are unavoidably and inherently stressful, the Trust accepts responsibility to ensure that staff are, as far as is reasonably practicable, protected from, and supported in dealing with stressful situations. The Trust wishes to adopt a positive approach to stress reduction and mental health promotion, recognising that work as a whole has a beneficial impact on mental health, giving structure and purpose, opportunities to meet people and a means of increasing one's self worth and of being valued by others. The Trust is developing guidance on the management of stress, to be supported by staff training, and this will be communicated to staff once available and posted on the intranet.

## 6.10 Manual/Load Handling

Manual/Load handling forms a part of many jobs within the Trust. The Trust wishes to reduce to a minimum the risk of injury to staff undertaking **manual/load handling** operations. All employees involved in manual/load handling activity must be conversant with The Trust's Manual Handling Policy

<http://whsct/IntranetNew/Documents/Manual%20Handling%20Policy.pdf>

and receive suitable training in accordance with the Policy. An e-learning package has been developed and Managers must ensure staff complete this prior to undertaking practical training. Staff will be required to complete the e-learning programme **no longer than six months prior to receiving their practical training**. It is the responsibility of line managers to ensure that the e-learning programme has been completed by their members of staff **before** attending practical training.

Please [click here](#) for further information on the new Manual Handling Theory E-learning Programme. Please [click here](#) for the Revised Manual Handling Training Provided by the Trust Manual Handling Advisers.

A hard copy version is available for staff who do not have access to computers.

## 6.11 Needlestick/Sharp Incidents

Employees should familiarize themselves with the Regional Infection Prevention & Control Guidelines ([www.infectioncontrolmanual.co.uk](http://www.infectioncontrolmanual.co.uk)), Standard precautions section which includes 'Sharps Safety'. Staff who experience a needle stick / sharps and contamination injury must attend the Occupational Health Department or if out of hours, the A&E Department and then ensure there is a self referral at the earliest opportunity to the Occupational Health Department.

If you or your Team do not have computer access, contact the infection control team for a hard copy of the regional manual and additional Trust guidelines and policies.

All needle stick / sharp incidents must be reported via the Trust's Incident Reporting Arrangements. Please refer to the Trust's Incident Reporting Policy: <http://whsct/IntranetNew/Documents/Incident%20Policy%20as%20at%201%20June%202012.pdf>

## **6.12 Infection Prevention & Control**

All staff are reminded of their own health and safety responsibilities with regards Infection Prevention & Control: -

- Hand hygiene is essential before and after every patient contact, staff must use the '7-step technique' and '5 Moments for Hand Hygiene' as described in the Regional Infection Prevention and Control Guidelines. Hyperlinks as follows [www.infectioncontrolmanual.co.uk](http://www.infectioncontrolmanual.co.uk) - ( Basic Principles - Hand Hygiene – Technique ) and [http://www.who.int/gpsc/tools/Five\\_moments/en/](http://www.who.int/gpsc/tools/Five_moments/en/).
- Standard infection control precautions apply including use of appropriate personal protective equipment (PPE), for contact with all blood or body fluids, and as per the Regional Infection Prevention & Control Manual available on the Trust intranet for other infectious conditions;
- Sharps must be handled safely and disposed of immediately after use;
- Breaches in cleaning standards must be reported to the Support Services Supervisor immediately. Persistent problems must be reported via the clinical incident system. Vigilance is required in communal areas such as visitors' toilets, stairs, reception etc – these areas are everyone's responsibility and problems must be reported to Support Services as soon as possible to allow action to be taken;
- Patient care equipment must be decontaminated after each use; a decontamination certificate must be completed and attached to all equipment leaving a ward / clinical department for use or repair elsewhere. Items of patient equipment which remain in the clinical environment must have dated and signed 'trigger' tape attached to indicate when the equipment was last cleaned.

The Trust's Infection Prevention and Control Committee will provide assurance to the Risk Management Sub-Committee on infection prevention and control issues.

## **6.13 Water Safety**

The Trust's Water Safety Group, is chaired by the Head of Infection, Prevention and Control. This Group has responsibility to ensure all staff are aware of CMO Guidance regarding water safety within the Trust.

## **6.14 Fire Safety**

The Trust recognises its responsibilities for the safety of patients, clients, staff and visitors in relation to fire precautions (Trust Fire Safety Policy).

<http://whsct/IntranetNew/Documents/FIRE%20POLICY%20June%202011.pdf>

The Fire Safety Working Group will provide assurance to the Risk Management Sub-Committee on fire safety issues.

All staff must:

- attend regular fire training
- be aware of roles and responsibilities detailed in Trust's Fire Safety Manual
- be proactive to prevent fire day-to-day
- know what action to take in event of a fire incident (Fire Procedure)

Nominated Officers (Fire) must be aware of additional role/responsibilities and attend additional training every 2 years.

## **6.15 Radiation Protection**

The Trust recognises its responsibilities for the safety of patients, clients, staff and visitors in relation to radiation protection. Please refer to the Policy for the Safe Use of Ionising and Non-Ionising Electromagnetic Radiation.

[http://whsct/IntranetNew/Documents/The%20Safe%20Use%20Of%20Ionising%20%20and%20Non-Ionising%20Electromagnetic%20Radiation%20Policy%20\\_2\\_.pdf](http://whsct/IntranetNew/Documents/The%20Safe%20Use%20Of%20Ionising%20%20and%20Non-Ionising%20Electromagnetic%20Radiation%20Policy%20_2_.pdf)

The Radiation Protection Working Group and the Non-Ionising Radiation Sub-Group will provide assurance to the Risk Management Sub-Committee on radiation protection issues.

## **6.16 Investing in Your Health Group**

The Trust has established an Investing in Your Health Group which is chaired by the Medical Director and is focused on the health and wellbeing of all staff within the Trust. This is a Strategic Management Group to oversee the development, implementation, monitoring and evaluation of the Investing in Your Health strategic action plan. The Head of Clinical Quality & Safety is a member of this Group and provides regular updates to the Health & Safety Working Group.

## **6.17 Other Estate Issues**

The Trust recognises its responsibilities to eliminate or minimise the risks to patients, clients and staff in a number of specialist areas. These include:

Management of High Voltage and Low Voltage Electrical Systems  
Management of Medical Gas Pipeline Systems  
Management of the Environment and Sustainability  
Management of Water System  
Management of Asbestos

Management of Disinfection and Sterilisation  
Management of Ventilation Systems

The Trust will meet its Health and Safety and other statutory obligations by following the appropriate Health Technical Memoranda and other Best Practice guidance.

#### **6.18 Contractors and Agency Staff**

All contractors and agency staff coming onto Trust premises will be under the control of a designated manager who will ensure adherence to the Trust's Health & Safety Policy and safe working practices. The relevant manager will be designated at the time of assigning the contract or placing the order for services.

All contractors working for the Trust are subject to a formal approval process, which involves health and safety issues. Health and safety responsibilities must be clearly defined and agreed prior to Contractors starting work. Contractors must sign in at the main office in Estates on arrival and sign out when leaving.

#### **6.19 Occupation of Premises with employees from other organisations**

Where Trust employees share the workplace with employees of another organisation the Trust must co-operate with the other employers to ensure compliance with health and safety legislation.

### **7.0 Audit, Monitoring & Review**

Monitoring of health and safety will be through the Trust's Health & Safety Working Group, of which members will undertake Health & Safety inspections with the assistance of the relevant Department/Ward Manager. Other inspections may be carried out by external agencies such as the Health & Safety Executive for Northern Ireland, Local Authority Environmental Health Officers, Regulation & Quality Improvement Authority (RQIA). The Risk Management Department will also monitor risks through the following:-

- Planned and Ad-hoc health and safety inspections and risk assessments
- Leadership walkrounds
- Obtaining assurance that annual risk assessment reviews are undertaken;
- The study of trends originating from incident reports, ensuring that relevant investigation and actions have been carried out;
- Training.
- Self-assessment against the Health & Safety Controls Assurance Standard

### **8.0 Review of Health & Safety Policy**

The Western Health & Social Care Trust will review this Policy every three years or more often if legislation dictates and will amend its arrangements with regard to health & safety in view of new Legislation, Regulation, Approved Codes of Practice or on the advice of the Health & Safety Executive for Northern Ireland.

## 7.0 References

Health & Safety at Work Order (NI) 1978  
Management of Health & Safety at Work Regulations (NI) 2000  
Safety Representatives and Safety Committees Regulations 1996  
Reporting of Injuries Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)  
Personal Protective Equipment at Work Regulations 2002  
Provision and Use of Work Equipment Regulations 1998  
Display Screen Equipment Regulations (NI) 1992  
Workplace (Health, Safety and Welfare) Regulations 1992  
Control of Substance Hazardous to Health Regulations (Northern Ireland) 2003  
COSHH (NI)  
Manual Handling Operations Regulations (NI) 1992  
Noise at Work Regulations 1989  
Health and Safety (First Aid) Regulations 1981  
Electricity at Work Regulations (NI) 1991  
Pressure Systems / Safety Regulations 2000  
WHSCT Zero Tolerance and Security Policy 2009  
WHSCT Medical Devices and Decontamination Guidelines 2009  
WHSCT Fire Safety Policy 2012  
WHSCT Incident Reporting and Procedures Policy 2012  
[www.infectioncontrolmanual.co.ni](http://www.infectioncontrolmanual.co.ni)

### **Other Useful Links for Health & Safety Guidance**

[www.hseni.gov.uk](http://www.hseni.gov.uk) (Health and Safety Executive for Northern Ireland)  
[www.hse.gov.uk](http://www.hse.gov.uk) (Health and Safety Executive)

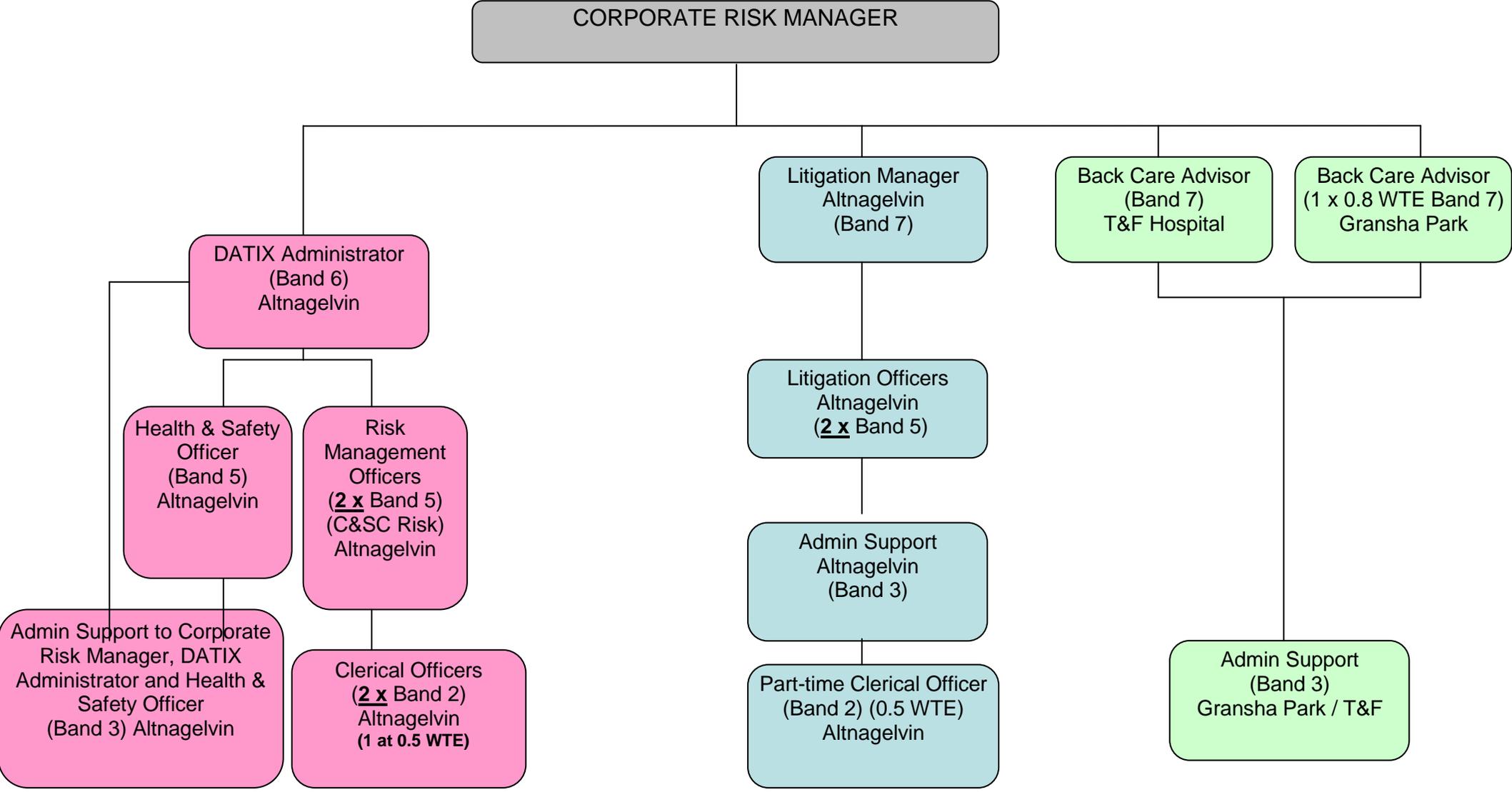
## **8.0 EQUALITY AND HUMAN RIGHTS STATEMENT**

The Western Health and Social Care Trust's equality and human rights statutory obligations have been considered during the development of this policy

Signed \_\_\_\_\_ (Chairman)

Date: \_\_\_\_\_

# Risk Management Department Structure



**WESTERN HEALTH & SOCIAL CARE TRUST**

**HEALTH & SAFETY WORKING GROUP**

**TERMS OF REFERENCE**

**1. INTRODUCTION**

The Western Health & Social Care Trust (WH&SCT) is required to comply with relevant health & safety legislation, relating to the health and safety its employees, as well as other stakeholders using its premises or affected by its activities. It is also required to apply the Governance, Risk Management and Health & Safety Management Controls Assurance Standards set by the Department of Health, Social Services and Public Safety.

WH&SCT also recognises that an individual's ability to perform their duties effectively can be affected by a number of factors – either internal or external to the employee's place of work. The Trust is therefore committed to working towards developing an environment where optimum health, safety and welfare for its employees can be achieved through putting in place arrangements and opportunities that value both physical and mental health.

The work of the Health & Safety Working Group will assist the WH&SCT to meet its legal requirements in respect of the health and safety of its employees and other stakeholders.

**2. NAME OF GROUP**

The Group shall be known as the Western Health & Social Care Trust Health & Safety Working Group.

**3. CHAIRPERSON AND MEMBERSHIP**

The Working Group will be chaired by the Head of Clinical Quality and Safety with a member of Staff Side acting as Vice-Chair. The Corporate Risk Manager will chair meetings in the absence of the Head of Clinical Quality and Safety. Agenda items for each meeting will be agreed between the Chair and Vice-Chair.

Membership of the Committee will consist of Trade Union and Management representation. The Working Group will also receive input and advice from ex-officio members with specialist knowledge or skills.

(See Appendix to this document for Group Membership)

In addition to the above members of staff, the Chair of the Working Group may invite other Trust staff with specialist knowledge or skills to a meeting in order to deal with a specific Agenda item, if this is appropriate.

#### **4. QUORUM**

A quorum will be achieved if:-

The Chair and Vice-Chair or their representatives are in attendance (in the absence of the Chair, the Corporate Risk Manager must be in attendance)

**Plus**

At least two other Trade Union and two Management representatives

#### **5. FREQUENCY OF MEETINGS**

Meetings will be held on a quarterly basis. However, this will be subject to review each year.

#### **6. ROLE AND ACTIVITIES OF COMMITTEE**

The Health and Safety Working Group's role will be to:-

- provide a forum for consultation and co-operation with employees and Trade Unions on work-related health and safety issues
- promote a positive health and safety culture, physical and emotional wellbeing, and mental health of staff.
- Identify initiatives that will contribute to improved health and wellbeing of staff and the achievement of a satisfactory work-life balance.
- as far as is reasonably practicable, take steps to protect the safety of staff and other stakeholders using WH&SCT premises, or affected by its activities,
- keep under review the measures taken by WH&SCT to ensure health and safety at work

In order to achieve the above, the Working Group will undertake or assist with the following activities-

- identifying, controlling and monitoring causes of ill-health, including assisting with risk/health assessment and development of programmes and implementation of corrective action to improve the physical, emotional and mental health of its employees
- identifying, controlling and monitoring causes of work-related incidents, including study of accident/notifiable disease statistics and trends, and assisting with risk assessment and development of safe systems of work
- developing an effective partnership between Health and Safety management, Occupational Health, Health Promotion Services, Estate Services, Infection Control and Human Resources.
- consideration of reports, or discussion of issues, which safety representatives or members of the Working Group may wish the Group to consider
- assist with health and safety inspections of WH&SCT premises
- the examination of safety audit reports
- analysis of reports from enforcing authority inspectors and, as appropriate, interfacing with enforcing authorities

- identifying health and safety training needs, and assisting with the development and appraisal of appropriate training
- promoting and publicising the range of staff support services available to employees
- providing a supportive environment for those who are experiencing difficulties or are returning to work following work-related ill-health
- monitoring the adequacy of safety and health communication in the workplace
- raising any serious health and safety issues to the attention of the Medical Director with overall responsibility for health and safety, Senior Management Team, Risk Management Sub-Committee or Integrated Governance Committee as appropriate.
- Identify Health & Safety aspects of proposed changes to the workplace and the implementation of new Health & Safety legislation and regulations
- Contribute to the annual Health & Safety report
- Participate and promote Health & Safety events eg European Week of Health & Safety
- Promote education and awareness of health & safety related issues through provision of articles in Trust communications and newsletters, and on the Trust's intranet.

Whilst the Working Group will undertake the above activities, it will remain the WH&SCT's responsibility to take executive action and to have adequate health and safety arrangements in place, as required by the WH&SCT's Health & Safety Policy.

## **7. RECORD OF MEETINGS**

The Minutes of the Working Group shall be formally recorded by the Band 5 Risk Management Officer (Health & Safety) and made available to each Working Group member as soon as possible after each meeting.

Responsibility for any action required shall be clearly defined.

The Minutes of each meeting shall be formally approved at the next meeting of the Group. Once approved the Minutes will then be posted on the WH&SCT's intranet and circulated to the Chair of Risk Management Sub-Committee (Medical Director). Any key risks highlighted will be discussed by the Risk Management Sub-Committee and referred to the Integrated Governance Committee as required.

## **8. ACCOUNTABILITY OF THE WORKING GROUP**

The Working Group shall report to and be accountable to the Board of WH&SCT through the Risk Management Sub-Committee.

## **9. REVIEW OF TERMS OF REFERENCE**

Every three years and if necessary, more frequently, the Terms of Reference will be reviewed to ensure that they continue to reflect obligations and requirements in respect of governance, risk management and health and safety legislation.

## **Appendix to Health & Safety Working Group Terms of Reference**

### **Management Representation**

Mrs Therese Brown, (Chairperson) Head of Clinical Quality & Safety  
Mrs Sara O'Connor, Corporate Risk Manager  
Mrs Judy Houlahan, Divisional Lead Nurse Primary Care & Older People  
\*Ms Cherry Lynn, Divisional Nurse, Surgical & Critical Care (to alternate), Acute Directorate  
\*Ms Maeve Brown, Divisional Nurse, Emergency Care & Medicine (to alternate), Acute Directorate  
Ms Mary McKenna, Head of Acute and Community Paediatrics, Women and Children  
Ms Lois McKean, Business Services Officer, Adult Mental Health and Disability Services  
Maureen Kelly, Head of Support Services

### **Trade Union Representation**

Mr Martain Fiddis, (Co-Chair) RCN  
Mr Paul McElwee (RCN)  
Mr Philip McCaffrey, UNISON  
Mr Michael O'Kane, NIPSA  
Ms Helen Kelly, UNISON  
Mr Eamonn McLaughlin, UNISON

### **Ex-officio Members**

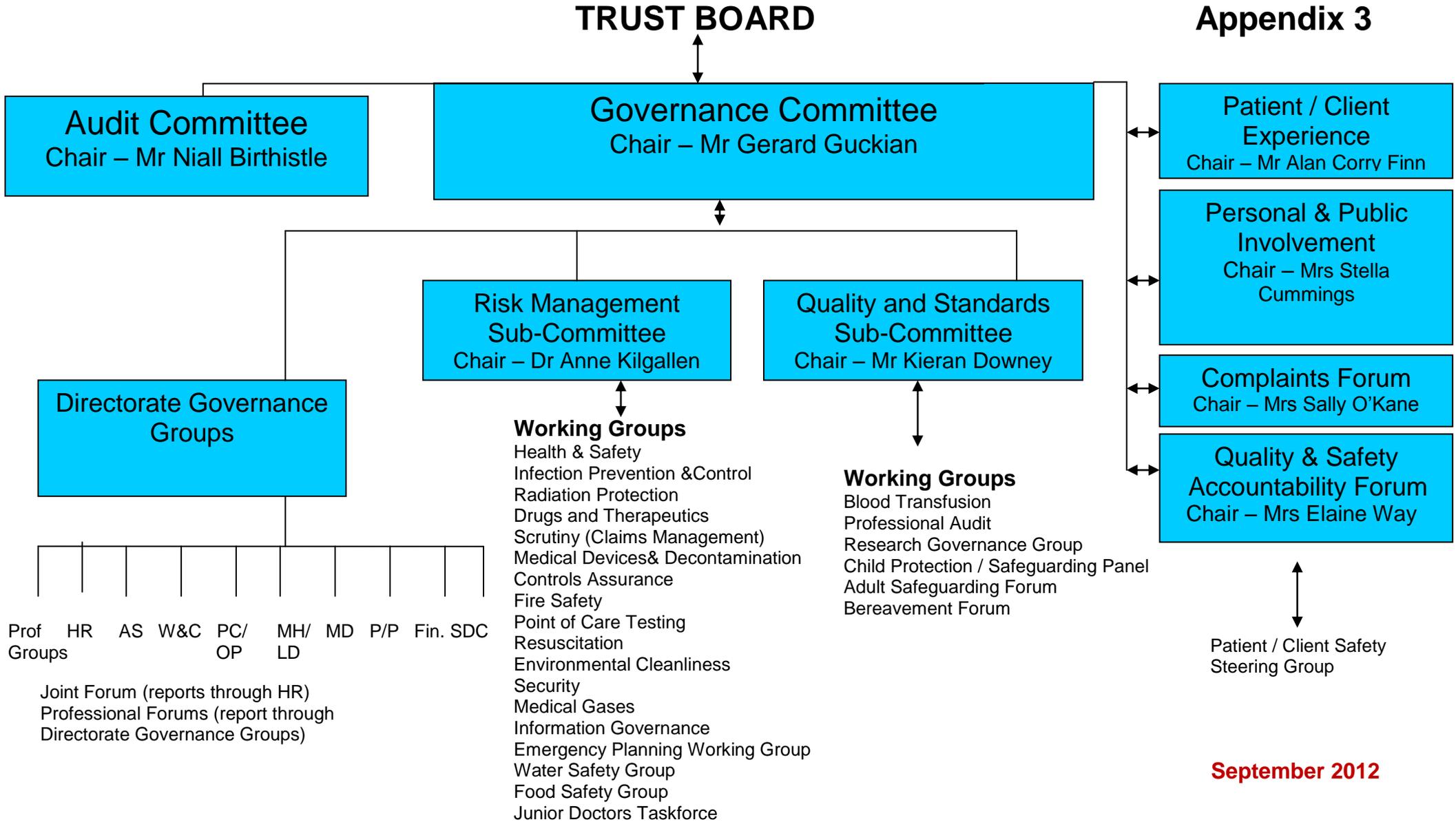
Ms Breige Harkin, Clinical Advisor  
Mr Brian McBride, Pharmacy Department  
Mr Sean Gibson, Estate Services  
Ms Tracey McIvor, Medical Imaging  
Dr Burges, Occupational Health Physician  
Ms Clare Robertson, Infection Control Nurse  
Mrs Pauline Laverty, Manual Handling Adviser (Northern Sector)  
Ms Ruth White, Manual Handling Adviser (Southern Sector)

### **In attendance for minutes**

Health & Safety Officer

# Governance – Western Health & Social Care Trust

## Appendix 3



September 2012

