

The NHS Confederation

Charity number 1090329

Company number 04358614

Health & Safety Policy

Owner of policy	Commercial Director
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Version Control Table

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Version 1	March 2022	Superseded
Version 2	January 2024	Updated to new policy template Removed COVID 19 January 2024

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Introduction

Purpose of this policy

The purpose of the policy is to detail the management of health and safety of the workforce at the NHS Confederation.

Legislation:

Health and Safety at Work Act 1974

Health and Safety (**Display Screen Equipment**) Regulations 1992 (amended 2002)

The Management of Health and Safety at Work Regulations 1999

The workplace (**Health, Safety and Welfare**) Regulations 1992

The Health and Safety (**First-Aid**) Regulations 1981

The Regulatory Reform (**Fire Safety**) Order 2005

Control of Substances Hazardous to Health Regulations (COSHH)

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

In the sections listed below, Landlord Health and Safety policies of the individual office sites may be applicable. In certain scenarios Landlord policies will override this policy.

- First aid
- Fire Safety
- Proactive Monitoring
- Reactive Monitoring
- Management of Risk

Scope

This policy applies to everyone working at or with the NHS Confederation¹. It applies to:

- all staff, including chief executives, directors, senior managers, employees (whether permanent, fixed term, or temporary), seconded staff, homeworkers, agency workers and volunteers
- consultants and contractors
- trustees and committee members.

Any employing or contracting manager must ensure that all temporary staff, consultants, or contractors are aware of this policy.

¹ Collectively referred to as workers in this policy

By the NHS Confederation we mean the NHS Confederation charity, any subsidiary companies and any hosted networked organisation.

The NHS Confederation has designated the *Commercial Director*, as the individual who is responsible for ensuring that the NHS Confederation implements this policy.

[[This policy should be read in conjunction with the organisation's Lone Working Policy, Agile Working Policy, [Pregnancy and Parenthood Policy](#), [Safeguarding](#).]

Policy statement

NHS Confederation recognises that complying with The Health and Safety at Work Act 1974 is a legal requirement. We will act proactively to minimise workplace risks and all activities will be carried out with the highest regard for the health, safety and welfare of our staff, contractors and visitors.

We seek not just to comply with relevant legislation, but to provide a health and safety framework that is continually improving and genuinely supportive of our business objectives. To ensure that we meet all our health and safety obligations the company will:

- Allocate sufficient resources to meet our health and safety objectives
- Consult with our employees, business partners and clients on matters affecting health and safety
- Provide information, instruction and supervision for employees
- Ensure all employees are competent to do their tasks, and give them adequate training
- Maintain safe and healthy working conditions
- Provide and maintain work equipment
- Ensure safe handling and use of substances
- Prevent accidents and cases of work-related ill-health
- Have access to competent health and safety advice
- Provide adequate control of health and safety risks arising from our work activities
- Implement emergency procedures particularly for fire, bomb and terrorist attack
- Review this policy as necessary at regular intervals

Board of Trustees Commitment

The Board of Trustees is committed to ensuring that this policy is implemented at all levels within the NHS Confederation.

Responsibilities

The Board of Trustees and the Group Executive

The Trustees and Group Executive have overall responsibility for Health and Safety for all employees, workers, volunteers and trustees and for ensuring mechanisms are in place for the overall implementation, monitoring and revision of the policy.

The Trustees and Group Executive have a responsibility to ensure that all employees can implement the aims and objectives of the policy and that certain arrangements exist for the provision of safety systems and procedures.

The Policy Owners

The **Facilities & Venue Operations Manager** is responsible for reviewing and updating the policy, ensuring we are working in line with current legislation.

The **Commercial Director** is responsible for reviewing all policy and procedure updates.

Line managers

It is the responsibility of line managers to ensure:

- The safety and health of their employees and others who may be affected by the acts and omissions of their employees e.g. contractors and visitors
- The safety and health of their external visitors and delegates when meeting within office environment
- Ensuring that their teams comply with the Health and Safety Policy
- Ensuring that their teams are made aware of changes and updates to the organisations health and safety policies, risk assessments and office environments.
- Ensuring that their teams complete any mandatory training
- It is recognised that new staff will be appointed, and the structure of the company may change over the course of the year. It is the responsibility of management to ensure that new staff are informed of their responsibilities and any other relevant health and safety duties as appropriate
- The Health and Safety Policy is brought to the attention of all new members of staff in their inductions and reiterated to staff under their supervision through team meetings and 1:1s;

Employees

All staff have a responsibility to:

- Read and comply with the Health and Safety Policy
- Not interfere with anything provided to safeguard the health and safety of themselves or others
- Avoid situations with significant risk, as far as is possible and take care of their own and other people's safety;
- Attend any relevant training at the request of their line manager;
- Take reasonable care of their own health and safety and the health and safety of others
- Complete Office Management induction
- Report all safety concerns to Office Management
- Report all near misses and accidents to Office Management

The Office Management Team

The OM Team are responsible for the following:

- Ensuring that appropriate training, once identified, is arranged at the request of the line manager;
- Ensuring that Health and Safety Policy and any necessary procedures are covered in the OM Induction for new members of staff.

Guidance notes

Management of Risk

It is key to our overall policy for the organisation to proactively manage risk. We have a clear and specific legal duty to carry out a suitable and sufficient assessment of all significant risks and to mitigate those risks to the lowest reasonably practicable level.

Risk Assessment Procedure

All significant risks must be assessed, and a written record made. Specific requirements are as follows:

The **Facilities & Venue Operations Manager**, is responsible for ensuring that the following risk assessments are conducted, appropriately reviewed and updated.

- General office risk assessments (Leeds and London)

- Fire risk assessment (Leeds and London)
- Other relevant risk assessments related to office health & safety

Wales, Northern Ireland and European offices have own risk management procedure in line with regulations

The **Head of HR and Head of Governance and Compliance** are responsible for ensuring that the following policies and assessments are in place, appropriately reviewed and updated.

- DSE assessments
- New and expectant mothers
- Lone working
- Safeguarding
- Other relevant risk assessments related to employee wellbeing

The assessment owner is responsible for reviewing process as follows

- following an accident or incident, serious near miss.
- following any changes to the process or operation
- following changes to applicable legislation
- at least annually

The **Commercial Director/Director of people** are responsible for ensuring that all risk assessments and processes are reviewed.

Employee Health

Display Screen Equipment

The NHS Confederation has a legal requirement under the Health and Safety (**Display Screen Equipment**) Regulations to assess and control risk to display screen equipment (DSE).

The NHS Confederations DSE assessment is based on Health & Safety Executive guidance.

Employees are required to carry out their own DSE assessments and must consider their individual flexible working arrangements including home and office working.

DSE assessments are completed

- When an employee joins the organisation
- If an employee's circumstances change
- Annually, managed via the online HR system (Cascade)

The **Head of HR** is responsible for the implementation of this process, line managers have a duty of care to their staff and employees have a duty of care to themselves to ensure the assessment is completed and regularly reviewed.

Reference and referrals to Occupational Health may be necessary as part of DSE process.

New and Expectant Mothers

Under The Management of Health and Safety at Work Regulations 1999, The NHS Confederation follows regulations to protect the Health and Safety of new and expectant mothers. [Pregnancy and Parenthood Policy]

A personal risk assessment must be completed by the individual staff member and their line manager, this document should be reviewed regularly throughout pregnancy to ensure needs are met and special arrangements can be made if necessary.

Personal Emergency Evacuation Plans (PEEP) will be completed upon request by the individual staff member.

Welfare facilities

The NHS Confederation will provide adequate welfare facilities for employees, in compliance with the workplace (Health, Safety and Welfare) Regulations 1992. Welfare facilities includes toilets, wash hand basins, rest facilities

Employee Wellbeing & Mental Health

First Aid

Under The Health and Safety (First-Aid) Regulations 1981 the NHS Confederation will provide adequate and appropriate equipment, facilities and trained staff to ensure employees receive immediate attention if they are injured or taken ill at work.

The **Facilities & Venue Operations Manager**, is responsible for the first aid process including

- Maintaining an adequate provision of trained first aiders
 - *Any member of staff wishing to undertake emergency first aid at work training will be supported by the NHS Confederation*
- Ensuring offices have a trained member of staff onsite during core business hours.
- Ensuring adequate and appropriate equipment is available at office sites.
- Ensuring first aid information including; first aiders, location of equipment, facilities are available to staff via intranet pages (*The Oracle*)

All recorded accidents, incidents and near misses will be reported within the quarterly Finance and Operations report. Fatalities, serious accidents, incidents and serious near-missed will be reported to the Group Executive and Board of Trustees

Wales, Northern Ireland and European offices have own first aid procedures in line with regulations

Fire Safety

Under the The Regulatory Reform (Fire Safety) Order 2005 The NHS Confederation will take general fire precautions as will ensure, as far as is reasonably practicable, the safety of our employees.

The **Facilities & Venue Operations Manager**, is responsible for the following areas;

- Ensuring a Fire Risk Assessment is completed by a competent individual for each office
- Completing actions arising from Fire Risk Assessment within the provided timescales.
- Maintaining testing logs of all Fire safety equipment within leased areas
- Maintaining an adequate provision of trained first aiders
- *Any member of staff wishing to undertake emergency first aid at work training will be supported by the NHS Confederation*
- Ensuring offices have trained fire marshals onsite during core business hours.
- From April 2024: Providing annual mandatory fire training to all staff via the Online Learning Portal
- Introduction of a standalone Fire policy from April 2024 to ensure emergency evacuation plans are in place for all office location and in collaboration with Landlords and other occupying tenants
- Reviewing
- Ensuring all fire safety and safe evacuation information is available to staff via intranet pages (*The Oracle*)

Reviews to fire policies, procedures and assessment will take place

- following an accident, incident or near miss
- following any changes to the process or operation
- following changes to applicable legislation

All Policies, Assessments and Procedures relating to fire safety will be signed off by the **Commercial Director**.

Landlords and Building Management teams of the occupied premises are responsible for the maintenance of all fire detection and alarm equipment,

including weekly testing of the fire alarm system, weekly, 6-monthly, and annual emergency lighting testing, 6-monthly evacuation drills and annual testing of the firefighting equipment. The Facilities & Venue Operations Manager is responsible for recording any maintenance logs provided by Landlords and Building Management teams.

Defects which present serious and imminent danger are to be brought to the attention of the Facilities Manager for immediate action.

Wales, Northern Ireland and European offices have own fire safety procedures in line with regulations

Housekeeping and Maintenance

The NHS Confederation will provide regular maintenance of the building (except where this is the landlord's responsibility). This will include regular cleaning of floors, kitchen areas and meeting rooms.

All staff have a duty of care to themselves and to others within the working environment, therefore all staff should ensure office spaces are kept clean and tidy. We all have a duty of care to ensure evacuation routes, walkways and exits are kept clear and free from blockage.

Waste Disposal is handled by external contractors

Electrical Equipment

Fixed electrical installations & Electrical Maintenance

All electrical work will be carried out by competent persons. Where possible Electrical contractors will be registered by NICEIC (National Inspection Council for Electrical Installation Contracting)

Portable Appliance Testing

When using portable electrical equipment, all staff have a duty of care to check their equipment is suitable and safe to use, all staff should;

- Check for signs of hazards and danger, such as inspecting plugs and cables for loose connections or faults and stop work if necessary.
- Keep the use of extension leads to the minimum.
- Ensure appliances are switched off and unplugged before cleaning or adjustment.
- Faulty equipment should be removed from use immediately

The NHS Confederation will, where necessary, provide adequate training on how to use the equipment safely.

Regular PAT testing of portable electrical equipment will take place at office locations at regular intervals. Staff are required to bring the appliances they require testing to the offices.

Under no circumstances must any non-PAT tested electrical equipment be brought to work by employees.

Communication

Good communication is central to a positive health and safety culture.

Policy Distribution

All staff will be made aware of this policy via staff intranet site: The Oracle

Board and Group Executive

The Board of Trustees and The Group Executive are accountable for; Escalating serious accidents, issues, or near misses to relevant parties and communicating all policy changes following fatality, serious accidents, incidents, or near misses.

Proactive Monitoring

The aim of proactive monitoring is to deal with health and safety issues before accidents occur. Such activities include audits and safety inspections

Internal Audit and Inspections

Internal health and safety audits are undertaken by the **Facilities & Venue Operations Manager**, these audits should be completed to effectively manage risk, identify areas for improvement. Offices should be audited;

- Every quarter by the onsite responsible person.
- Part of the Office Risk Assessment & Fire Risk Assessment review
- Following a full or part office refurbishments
- Following a change in premises

On completion of audits, any reportable findings should be added to the health and safety section within the quarterly Finance & Operations report.

External Audit and Inspections

Health and safety audits completed by an external organisation will be done every few years.

Monthly Building and Equipment Inspection

Landlord responsibility.

Reactive Monitoring – Dealing with Accidents

Reactive monitoring involves accident reporting and investigation and is the management of health and safety failure. It is an essential part of the overall process so that lessons can be learned to avoid the failure being repeated.

Accident Handling

Every situation that presents itself will be different. In general, the following principles will apply:

- Make the situation safe to prevent further injury or damage
- Help stabilise injured person(s) (*following the advice of a professional*)
- Where necessary preserve the scene to enable investigation.

Accident Reporting

All accidents must be logged in the accident book.

The following are to be brought to the immediate attention of a senior member of staff.

- Any accident or incident likely to lead to legal action against the company or individual employees
- Any accident or incident directly involving an employee of the Organisation
- Any accident where an outside agency e.g. Police Service or enforcement agency has become involved (see below).

In the UK, the Police Service are always to be called in the event of a fatal accident.

Accident Investigation

All accidents, however small, are to be investigated. Depending on the accident it will be up to **Facilities & Venue Operations Manager/HR/Senior staff member** to determine the scale of the investigation required relative to the severity (or unrealised potential severity) of the accident, signed off by the **Commercial Director**. The aims of accident investigation are as follows:

- Identify reasons for substandard performance
- Identify underlying failures in health and safety management systems

- Learn from events and make necessary changes
- Prevent recurrences
- Satisfy legal reporting requirements.

Following a serious accident, the outcomes and necessary changes to policy and procedure are to be included in the health and safety section within the Finance and Operations report.

Reporting of Injuries, Diseases and Dangerous Occurrences

RIDDOR is the law that requires employers, and other people in charge of work premises, to report and keep records of:

- Work-related accidents which cause deaths
- Work-related accidents which cause certain serious injuries (reportable injuries)
- Diagnosed cases of certain industrial diseases; and
- Certain 'dangerous occurrences' (incidents with the potential to cause harm)

Full list of reportable incidents is found [here](#).

Please see [RIDDOR guidance on the Health and Safety Executive](#) in the event of an incident which needs to be reported under RIDDOR.

Control of Substances Hazardous to Health

The Control of Substances Hazardous to Health Regulations (COSHH) are applicable within our working environment. The NHS confederations policy is to avoid risks by using alternative methods or substituting for a safer substance where possible.

Where it is not possible to avoid such risks, the following will apply:

- A COSHH data sheet will be provided for any substances that require one by the relevant supplier.
- Appropriate storage of all substances, ensuring they are locked away and properly labelled.
- Attention must be paid to the possibility of exposure to hazardous substances in an emergency such as a fire, all risks should be detailed within Fire Risk Assessment and Risk Assessment.
- Where employees are directly involved in handling such substances a COSHH assessment must be carried out. COSHH assessments must be countersigned by the relevant Head of Department.

Equality Impact Assessment - Policies

The following guidance and checklist provide a framework for Equality Impact Assessments (EIA). It should be used when carrying out equality impact assessments (EIA) in relation to any new or revised policy. The checklist will help in considering the impact of the policy in relation to equality and diversity (E&D).

The Checklist is to be used for any new or revised policy, not just those that have high relevance in relation to equality and diversity issues. Completion of the Checklist does not need to be a time-consuming or difficult process but should raise some important questions as you carry out the process.

Name of policy being assessed	Health and Safety Policy
Policy Owner	Commercial Director
EIA completed by	Natalie Pitts
Date Completed	27.02.2024
Summary of purpose of the policy	The aim of this policy is ensure we have the correct procedures and plans in place for compliance with Health and Safety Law and Legislation .
Who are the main stakeholders and what involvement and consultation have they had in the policy development. Include staff groups, trade unions and board committees as applicable.	The policy is shared with the JNC, F&OC for review and approval. Policy to be approved by Board of Trustees
Who is affected by the policy	This policy applies to everyone employed by or seconded to the NHS Confederation including consultants and contractors. It also applies to volunteers such as unpaid work experience, interns and trustees.
What are the arrangements for monitoring and reviewing the actual impact of the policy	The impact of the policy will be reviewed under the organisations on going review of risk.

Please indicate against each of the following protected characteristics, what the impact of the policy would be and actions that will be / have been taken to mitigate any negative or adverse impact identified.

(Where the policy is found to have either a positive or negative impact on a particular group it will need to be reviewed or justified within the permits of the law.)

Protected Characteristics	Impact Y/N	Action(s) you will take to mitigate or remove the negative or adverse impact if identified?	Action Owner
Age <i>Consider impact on young people, older people etc.</i>	N		
Disability <i>Consider people with physical disabilities, hidden disabilities and neurodiversity.</i>	N		
Gender Reassignment <i>Consider people undergoing or have undergone gender reassignment</i>	N		
Pregnancy and Maternity <i>Consider those who are pregnant and those on pregnancy and parenthood leave. Consider those wishing to take parenthood leave</i>	N		
Race / Ethnicity <i>Consider potential impact on people from different ethnic groups and nationalities.</i>	N		
Religion or Belief <i>Consider people with different religious, faith and non-beliefs</i>	N		
Gender <i>Consider all genders.</i>	N		
Sexual Orientation	N		

<p>Consider LGBTQ+ people.</p> <p>Marriage and Civil Partnership <i>Consider marriage and civil partnership in respect of the due regard to the need to eliminate unlawful discrimination in employment.</i></p>	<p>N</p>		
<p>Does the policy promote fairness and equal opportunities? Provide details.</p>	<p>Yes. The policy is applicable to all staff equally and fairly. Reasonable adjustments should be identified and tested (as necessary) to ensure all staff are able to work safely.</p>		
<p>Manager Signature:</p>	<p>HR Review Signature:</p>		
<p>Date:</p>	<p>Date:</p>		