

Title: Health and Safety Strategy 2008/09

Purpose:

To provide the framework for effective health and safety management within the Trust

Document application:

Trust-wide

Responsibilities for implementation:

Board of Directors
Divisional Directors and Managers
Heads of Department
All Staff

Original date of issue: May 2004

Date of revisions: April 2007, July 2008

Next review date: July 2009

Owner (author):

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Consultation process:

Health and Safety Committee

References:

'A Safer Place to Work' National Audit Office April 2003
NHS Litigation Authority Risk Management Standards
Health and Safety at Work Act 1974
Corporate Manslaughter and Corporate Homicide Act 2007

Associated policies/documents:

Trust's Risk Management Strategy
Health and Safety policy
Shared workplace policy

Intranet category for location:

Key words/phrases (no more than six):

Health and Safety, strategy

Approved by: Risk Committee

Date:

August 2008

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1. **Introduction**

Christie Hospital NHS Foundation Trust is a complex organisation incorporating North West Medical Physics. The trust has a duty to ensure, where practicable, the health, safety and welfare of its employees. It also has a duty of care to patients and members of the public. The trust has large material resources which must be protected.

The trust does have a major advantage in that amongst its employees there is a large resource of experience, education and ability. The main approach of this strategy will be to direct this large human resource towards managing health and safety effectively.

2. **Legislative Framework**

The trust is responsible for fulfilling its legal obligations. Breaches of legislation could, in the extreme, lead to imprisonment for individuals and unlimited fines for the corporate body therefore it is vital that the trust takes clear and positive steps to manage health and safety. The Health and Safety at Work Act provides the legislative framework for all health and safety activity, with numerous related regulations that must be taken into account to ensure we can fulfil our duty of care to staff, patients, visitors and other people on our site. The Corporate Manslaughter and Corporate Homicide Act 2007 states that an organization is guilty of the offence if the way in which its activities are managed and organized causes a death and amounts to a gross breach of a relevant duty of care to the deceased.

3. **Organisational Responsibilities**

The Chief Executive has overall responsibility for health and safety. The Director of Nursing and Governance is the executive lead for health and safety risk management throughout the trust and reports regularly to the Board of Directors. Directors can be personally liable when health and safety law is breached. Members of the Board have collective and individual responsibility for health and safety. Risk management is the planned and systematic identification and control of risk. Its purpose is to reduce the overall impact of risk to the trust and its patients.

The Health and Safety Committee reports to the Risk Committee, a sub-committee of the Board. (*see Appendix 1 for committee structure*). Each clinical and corporate division will be represented on the committee in addition to specialist advisers and staff side representatives.

Advice on health and safety risk management is provided by the trust's Health and Safety Adviser, who will be a member of a recognised professional body e.g. Institute of Occupational Safety and Health.

Directors, divisional managers and department/ward managers are responsible for co-ordinating health and safety activities in their departments and will determine the necessary management structure and arrangements. The Corporate Manslaughter and Corporate Homicide Act does not apply to individual directors or senior managers. However individuals can be prosecuted for gross negligence manslaughter under existing health and safety law. It is the role of departmental/ward managers to implement the trust health and safety policy and to ensure that safe systems of work, control measures and staff and volunteer training are sufficient and effective. The manager will inspect premises, undertake risk assessments, report accidents, take remedial action and assist in auditing health and safety and risk management arrangements.

4. **Policy and Arrangements**

4.1 **Policy** - If managers are to manage effectively then their responsibilities must be clearly defined within their job description. The trust health and safety policy statement should clearly define the management structure and safety arrangements.

- 4.2 Arrangements - To prevent duplication and ensure uniformity there should be a trust policy for each health and safety related issue. This policy should be adopted by managers and form the basis of safe systems of work, departmental procedures etc. The trust policy may be prepared by the Risk and Health and Safety Manager in conjunction with the Health and Safety Committee or by a department or specialist adviser if more appropriate. All health and safety policies will be ratified by the Risk Committee.

Other employers on site must adhere to the trust's health and safety policy, tailoring it to their own needs as required.

If there is a particular concern then a manager may propose an alternative to trust policy but this would have to be agreed with the Health and Safety Committee which would ensure that minimum standards are met.

- 4.2.1 Radiation Protection - The Trust will have specific policies covering its uses of ionising and non-ionising radiation and the efficacy of these will be monitored by the Radiation Protection Committee which reports to the Clinical and Research Governance Committee. The trust will ensure that appropriate suitably qualified expert advisers are appointed (currently North Western Medical Physics is appointed as Radiation Protection Adviser, Laser Protection Adviser and Magnetic Resonance Adviser) and that Radiation, Laser and Magnetic Resonance Protection Supervisors are appointed for all areas of work to provide day to day supervision. Adequate radiation risk assessments and local rules will be in place and regularly reviewed.

- 4.2.2 Genetic Modification - The Genetic Modification Safety Committee (GMSC) meets quarterly to ensure that all work with Genetically Modified Organisms (GMOs) carried out in the hospital is within the standard of safety laid down by the Health and Safety Executive. The membership of this committee is scientist based but is advised by other disciplines as well as an external, independent scientist.

A senior nurse within the Research and Development department has taken on the responsibilities equivalent to those of a Biological Safety Officer. There is only a small amount of Class 1 GMOs in clinical trials work in the Christie at the moment. Guidelines are in place for the protection of all personnel working with and in close proximity of the GMOs.

- 4.2.3 Manual Handling - The trust operates a minimal manual handling policy. In order to achieve this the trust advocates:

- ◆ Avoidance of all unnecessary handling
- ◆ Ongoing training and education for all staff – see training needs analysis within the manual handling policy
- ◆ Design of equipment and workplace to make them more user friendly

Avoidance of injury and minimisation of risk are central to any minimal manual handling policy.

5. Training

When evaluating the risk control arrangements of organizations, the enforcing authorities such as the Health and Safety Executive are increasingly seeking evidence that risks are well managed. The management of risk should be accepted as an important part of every manager's role. If managers can direct staff, monitor budgets, allocate resources etc. there should be no reason why they cannot assess and control risk given the appropriate training, advice and support.

The aim of this strategy is to implement management of risk by encouraging ownership of the issues and the provision of appropriate training. It is essential that training records are maintained and updated as required.

5.1 Management Training - The trust provides training for managers and supervisory staff in the form of the IOSH 'Healthcare Managing Safely' course. This is held on site over four days by an external provider. The course is certificated and covers health and safety legislation, specific health and safety issues, responsibilities, implementation of risk assessment and review.

5.2 Direct Training - Where there is an identified need for topic driven training e.g. Electricity at Work and Working at Height then appropriate training programmes will be prepared or outsourced. Managers would then have the responsibility for identifying candidates and ensuring attendance.

5.3 Induction Training - Health and Safety is included in induction training for all new staff and is included in the mandatory training programme for all staff. Fire training will be given to all staff each year. (see Induction and Mandatory Training policy for training needs analysis).

6. Accidents and ill health

Each manager will retain responsibility for recording, reporting and investigation of accidents and work-related ill health. All reports must be made in writing on the trust's integrated Incident Report Form. A web-based incident reporting system will be rolled out during 2008/09. The secretary to the Health and Safety Committee will collate data for analysis. Serious accidents, dangerous occurrences and work-related ill health will be reported by the risk management team to the Health and Safety Executive in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).

7. Audit and Inspection

A detailed inspection of all departments is carried out on a rolling basis by a team, comprising the trust's Risk and Health and Safety Manager, the Manual Handling Adviser, local managers and a staff-side representative. Recognising that safety representatives have a right to inspect premises, area Trade Union/Staff Representatives will be invited to take part in the inspection process. This does not obviate their right to carry out their own inspections.

Self-inspection checklists will be completed every quarter for health and safety and monthly for fire safety, in addition to the daily fire checks for escape routes. Managers will identify all hazards and concerns, develop appropriate action plans and monitor progress. An audit of these checklists will be carried out annually. Serious failures to take corrective action will be reported to the Health and Safety Committee and discussed in detail.

Other audits e.g. of training and completion of risk assessments will be undertaken as required following agreement at the Health and Safety Committee. The findings will be reported through a formal reporting process to ensure adequate monitoring is undertaken.

8. Health and Safety Risk Management Staff

The trust's Risk and Health and Safety Manager can provide advice on general health and safety issues and offers training in health and safety at work and risk assessment. The Manual Handling Adviser provides training and specialist advice. It is recognised that there are staff within the trust who have specialist knowledge and expertise on the control of certain hazards e.g. radiation protection, infection control.

There will be a close relationship with the Occupational Health Department to work on controlling hazards in the workplace and to reduce the incidence of work-related ill health, including

reportable diseases. There will also be close co-operation with the Estates and Capital Departments over control of external contractors and on design issues.

9. Resources

Sufficient resources should be allocated to meet the requirements of the trust's health and safety policy statement. Costs will normally be covered by individual departmental budgets or through the process of submitting a health and safety improvement bid.

10. Internal Assurance

Work on the Health and Safety Strategy will be monitored by the Health and Safety Committee and its parent group, the Risk Committee. The internal audit team will undertake specific audits, as detailed in its annual audit plan.

11. External Assurance

The trust will comply with the requirements identified by external assessors, e.g. Standards for Better Health and the NHS Litigation Authority's risk management standards. The trust has achieved Level 3 of the risk management standards and has an action plan in place to ensure retention of this highest level of compliance.

12. Trust Health and Safety Objectives 2008/2009

Recommendations from the National Audit Office's publication 'A Safer Place to Work – Improving the Management of Health and Safety Risks to Staff in NHS Trusts' have been considered in determining the trust's health and safety objectives.

In 2001 the Government launched a 10-year strategy, 'Revitalising Health and Safety', to improve health and safety at work. It aims to reduce the incident rates of accidents, causes of work-related ill health and number of working days lost by:

- helping people at work protect themselves and their organisation
- making work a better place to be
- helping employers decide how to make work safer and healthier.

The Health and Safety Executive is proactively working with organisations to achieve its objectives. For the health sector the main causes of sickness absence and ill health relate to musculoskeletal disorders, stress, violence and slips and trips.

The trust will continue to build on its existing health and safety framework by working towards the following:

- continue to monitor trends and incidences of workplace accidents and provide a quarterly report to the Health and Safety Committee
- determine health and safety performance indicators for the balanced scorecards
- work towards a reduction of reported incidents relating to the five key issues highlighted within the NAO's report – moving and handling, needlestick injuries, slips, trips and falls, exposure to substances hazardous to health and work-related stress
- monitor the cost of work-related ill-health retirement, legal fees and compensation claims from workplace accidents and provide an annual report to the Board of Directors.
- introduce a programme of regular review of existing policies and produce new policies as required to address changes in legislation or guidance
- increase general awareness of health and safety through the mandatory training programme and a dedicated site on the intranet to ensure staff are well informed
- provide additional training sessions as required e.g. office safety, hazardous substances
- capture information on the extent and reasons for work-related illness and accidents
- continue to investigate reported incidents relating to manual handling and forward written reports to managers in a timely manner in an effort to reduce injury and avoid litigation

- monitor compliance of health and safety requirements by contractors and staff of other employers on the Christie Hospital site
- develop other channels for delivery of training e.g. virtual learning environment, workbooks
- develop the centralised training database to identify non-attendees and follow up as required
- in staff surveys, include questions about health and safety management issues and constraints to reporting
- ensure exit interviews identify cases where staff leave due to concerns about health and safety issues and identify required action
- radiation protection – continue to control staff and public dose by the application of the ALARP (as low as reasonably practicable) principle, in particular to work towards all staff receiving doses less than the investigation levels set for their areas of work
- retention of Level 3 accreditation for NHSLA risk management standards
- continued compliance with Standards for Better Health

13. Action planning

Action plans will be agreed to work towards achieving the objectives outlined in paragraph 11 and in response to external assessments/inspections where some action is required. The Health and Safety Committee will regularly review progress against required action as detailed within a formal action plan. The Risk Committee will monitor the progress of action plans and ensure targets are achieved.

14. Review

The health and safety strategy will be reviewed annually by the Risk Committee.

APPENDIX 1

HEALTH AND SAFETY STRATEGY

COMMITTEE STRUCTURE

