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Health & Safety Policy

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1 Introduction

The Trust recognises that The Health and Safety at Work etc. Act 1974 places a duty of care upon both employer and employee to identify and control risk.

Our Journey to Change sets out why we do what we do, the kind of organisation we want to become and the way we will get there by living our values, all of the time. To achieve this, the Trust has committed to three goals. This policy supports all three goals of Our Journey to Change.

1.1 Strategic goal 1: To co-create a great experience for patients, carers and families.

Implementing this policy provides assurance to patients, families and staff that complying with Health and Safety Legislation as part of an overall safety management system provides a safe and therapeutic environment that protects all stakeholders.

1.2 Strategic goal 2: To co-create a great experience for our colleagues

Maintaining good health and safety has both immediate and long-term benefits for staff promoting safety at work, a sense of wellbeing and involvement. Effective management of health and safety promotes staff involvement, management engagement, communication at all levels leading to a positive safety culture which ensures that risks are minimised.

Health and safety ensures that all colleagues understand their role within a successful safety culture. When staff understand their roles and their duties, they can be confident that the actions that they take are consistent and defendable.

1.3 Strategic goal 3: To be a great partner

The Trust has a robust health and safety system in place which enables us to support outstanding care and service delivery with our partners.

1.4 Trust values and behaviours

The Trust has a successful health and safety management system embedded across all areas which enables us to evidence how we live the Trust values. The Policy reflects lessons learnt and the Trust's inherent responsibility to continually improve the service to reassure staff and service users that we are striving to provide a safe place to receive and deliver care.





2 Why we need this policy

This Policy helps the Trust comply with The Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999.

2.1 Purpose

The purpose of this policy is to:

- Support the core business of the Trust through a robust and accountable health and safety framework.
- Provide assurance to the Trust and to individuals that all health and safety related incidents are dealt with competently.
- Prevent adverse incidents across the Trust.

2.2 Objectives

The objective of this policy is to provide a health and safety management system that:

- Always complies with the Health and Safety at Work etc. Act 1974, the Management of Health and Safety at Work Regulations 1999 and all other relevant statutory provisions.
- Manages health and safety effectively to improve the quality of working conditions for staff.
- Provides a safe environment for all stakeholders.
- Identifies all significant hazards arising from Trust activities.
- Assesses all resultant risk to the health, safety and welfare of our staff, patients, and other persons affected by our business.
- Develops appropriate preventative and protective measures.
- Ensures there is an effective health and safety management programme in place using the Plan-Do- Check-Act framework.
- Ensures all staff and visitors Trust premises are given adequate, information, instruction, training and supervision to inform and educate them of the risks and precautionary measures to avoid risk.
- Encourages the involvement and participation of staff in all aspects of health and safety.
- Ensures that adequate arrangements will be maintained to consult with employees, trade union representatives and the relevant internal and external safety agencies, encouraging a joint approach.
- Provides employees with health surveillance where appropriate.
- Monitors and applies appropriate control over the health and safety performance of contractors.
- Integrates the management of health and safety across all management frameworks.
- Establishes, and implements, appropriate emergency procedures and contingency plans to be followed in the event of situations of serious or imminent danger.





3 Scope

3.1 Who this policy applies to

This policy applies to:

- Permanent and fixed term contract staff.
- Bank and locum staff.
- Seconded staff.
- Students.
- Apprentices.
- Volunteers.
- Non-Executive Directors.
- Governors.
- Those undertaking research work within the Trust.
- External contractors.
- · Agency workers.
- External contractors, (including Private Finance Initiative (PFI))
- Any other workers assigned to the Trust.

3.2 What this policy applies to

The policy extends to all sites, buildings and areas where TEWV owes a duty of care and responsibility to employees, patients, visitors, contractors (including Private Finance Initiative (PFI)), or any other person affected by its undertaking.

Areas of work activities covered by this policy would for example include, but not be limited to:

- The provision of any form of medical treatment in inpatient settings.
- The provision of any form of medical treatment in services with community settings or a person's home.
- The building, demolition or alteration of any premises owned or occupied by the Trust.
- Employees working from home as agreed through line management.

3.3 Roles and responsibilities

Roles and responsibilities for all health and safety procedures will be defined within job descriptions as necessary:

Role	Responsibility	
Chief Executive (Accountable Officer)	 Ensures this policy is implemented, resourced, monitored, and reviewed. 	
Chairman and Non- Executive Directors	Ensure the Senior Leadership Group and other senior officers fulfil their respective directorate responsibilities for this policy.	





Director of Finance	Has Executive board level responsibility for health and safety.	
Director of Estates, Facilities and Capital	 Has Director responsibility for health and safety. Ensures suitably qualified and competent practitioners are appointed into the role of Head of Health, Safety and Security to lead, develop, and monitor the Trust's compliance with current Health and Safety legislation, associated legislation and in accordance with NHS governance criteria. Ensures the Trust Health and Safety Policy is implemented. Ensures cost-effective health and safety policies and procedures are developed and implemented to address specific hazards and management systems to maintain control and monitor practice and performance. Has Board level responsibility for raising awareness of and advising on Corporate Manslaughter legislation amongst the Trust's Managers and Directors. 	
Medical Director	Has Board level responsibility for raising awareness of and advising on Corporate Manslaughter legislation amongst the Trust's Managers and Directors.	
Executive Directors	 Implement the Trust Health and Safety Policy within their area of responsibility. Raise awareness of the implications of Corporate Manslaughter legislation. Ensure health and safety responsibilities are assigned to managers and supervisors within their directorate structure. Establish measures for planning and setting priorities and objectives to address specific hazards to health or safety in line with Trust policies, objectives, risk profile and their directorate risk assessments. Monitor health and safety performance through Directorate team meetings to ensure Associate Directors, Heads of Service, heads of department and supervisors implement health and safety management arrangements, procedures, and codes of practice. Allocate resources to health and safety improvement activities within the business planning of their area of responsibility. Ensure arrangements are in place to identify hazards to health and safety, and address areas of risk to meet statutory requirements or best practice. Ensure preventative and protective measures to reduce risk are developed and implemented within their area of responsibility. 	
Service Directors, Associate Directors and Heads of Service	Ensure that:All staff undertake mandatory training.	



	 Cost-effective action plans are created to implement preventive or protective measures that reduce risk or meet statutory requirements. Action plans are implemented. Systems to report record and investigate incidents and nearmisses are implemented.
Modern Matrons, Site Managers, Estates Officers, Head of Hotel Services Managers, Heads of Department	 Ensure that: Trust risk assessment methods and processes are undertaken and are regularly reviewed within their areas of responsibility. Co-operate with other employers/organizations where there are shared premises to ensure effective arrangements. Risk assessments are completed and shared with team members and ensure that they are reviewed and updated on a regular basis. Action plans are developed to implement preventative and protective measures identified from risk assessment. Action plans are implemented. Trust incident reporting procedures are implemented and take the lead for reviewing and bringing to the attention of the Health and Safety Team to ensure that these are reported as required under the Reporting of Incidents, Diseases and Dangerous Occurrences Regulations (RIDDOR) within the required time frame. Health and safety is taken into account during service developments and when purchasing equipment, materials and substances. Progress is monitored in meeting health, safety and security objectives and developing future actions. Actions contained in hazard notices are implemented and
Ward/Unit Managers, Team Lead, Charge Nurses, Department Heads	 recorded. Will ensure: They are familiar with Trust health and safety policy and supporting procedures and protocols. Complete and maintain risk assessments for their areas. Ensure staff within their teams actively participate in risk assessments. Document risk assessments and preventative measures for all identified significant hazards within their directorate or area of responsibility and that these assessments are communicated to staff and visitors. Ensuring where identified/necessary the appropriate Personal Protective Equipment (PPE) is made available to all staff and provide training in its use. Contribute to the development of procedures for the management of health and safety at local level.



All incidents and near-misses are reported as per Trust procedures.
An incident investigation is carried out at local level and that

lessons are learnt, and action is taken.

- The timely reporting to the Health & Safety Team and assist in the investigation of all RIDDOR incidents.
- Staff within their area of responsibility adopt Trust and local health and safety practices.
- Good levels of housekeeping are maintained at all times.
- Health and safety issues raised by staff are considered, acted upon, or referred through line management as appropriate.
- Problems or constraints with implementing Trust health and safety policy are reported to their line manager as soon as possible.
- Emergency procedures and other security arrangements are brought to the attention of all staff and visitors as appropriate.
- Health and safety issues within shared/multioccupancy/disciplinary teams and premises are addressed and that the relevant Trust policies and procedures are adhered to.
- There is adequate consultation and co-operation on health and safety matters.

All employees

- Take reasonable care of the health and safety of themselves and others who might be affected by any actions or omissions.
- Co-operate with Trust managers on health and safety matters.
- Familiarise themselves with Trust policy, procedures, protocols and guidance or preventative and protective measures relating to health and safety that have been brought to their attention and the department risk assessments.
- Act in accordance with any information, instruction or training that has been provided or given to them.
- Make full and proper use of all Personal Protective Equipment (PPE) and safety equipment that has been provided to them whilst at work in accordance with any training or instructions received.
- Report any hazards or defects in the equipment, arrangements or procedures and systems of work regarding health and safety to their immediate line managers as soon as possible.
- Report any incident occurring to them or brought to their attention by informing their immediate line manager and completing the Trust incident report form.





Head of Health, Safety and Security	Provide professional advice and guidance to the Trust on matters relating to health and safety.		
	 Produce and deliver the Trust Health and Safety Framework and work plans. 		
	 Liaise with and assist senior managers and others within the Trust to discharge their responsibilities in relation to this policy. 		
	 Provide assistance to the Trust in implementing the risk assessment programme and developing and implementing remedial action. 		
	 Keep the Trust aware of changes or updates to statutory requirements or guidance that impact upon the Trust. 		
	 Assist the Trust to develop and review policy, procedures, protocols, and safe working practices to meet statutory requirements and minimise risk. 		
	 Ensure the timely reporting of reportable RIDDOR incidents to the Health & Safety Executive (HSE). 		
	 Undertake/arrange for specific risk assessments where a professional level of expertise is required, e.g., hazardous substances, manual handling operations, display screen equipment. 		
Head of Estates and Head of Capital Projects and	 Establishes and maintains procedures for managing and controlling contractors. 		
Development	 Implements arrangements for the statutory inspection, examination and maintenance of lifting equipment, pressure vessels, electrical and gas systems and portable electrical appliances, asbestos, and Legionella in accordance with relevant statutory requirements. 		
	 Ensures the provision of fire safety advice and guidance and compliance with fire safety regulations and The Regulatory Reform (Fire Safety) Order 2005. 		
	 Coordinates the Trust's responsibilities for the Construction (Design and Management) Regulations 2015. 		
Director of Human Resources	 Occupational health services and health surveillance is provided as per statutory requirements and guidance. Staff wellbeing is managed in line with the Trust Sickness Management Procedure. 		
	 Education and training is provided and recorded to meet statutory and job-specific health and safety requirements as advised by the health and safety service in accordance with the Health and Safety at Work etc. Act 1974, the National Patient Safety Agency Standards, and the Department of Health's Core Standards for Better Healthcare. 		
Occupational Health	Contribute to the promotion, protection and maintenance of the health, safety, and welfare of people at work.		



	 Advise on the rehabilitation and placement in suitable work of those temporarily or permanently incapacitated by illness or injury. Advise on the provision of safe and healthy conditions by informed assessment of the physical and psychological aspects of the working environment.
	 Educate in the attainment and preservation of good health. Highlight work-related health issues to the Trust via Individual Managers, HR Link Representative and /or Health & Wellbeing Group.
	Identify any trends of work-related health issues and assist in identifying causes and remedial action.
	Liaise with local line management over specific cases of employee ill health.
Senior Back Care Advisor	 Provide professional best practice advice and guidance to the Trust in relation to the manual handling of people/back care by maintaining links with external professional bodies and Back Care Organisations.
	 Identify, coordinate, or deliver manual handling of people training programmes for all relevant Trust employees.
	 Provide professional advice to Trust staff in relation to minimising patient handling of people risks within their areas of responsibility.
	 Provide assessments and advice for Trust staff with complex/person specific handling situations when professional expertise is required.
	 Provide advice to managers and Trust staff in the procurement of appropriate patient handling equipment.
	 Implement and report on audits in relation to clinical practice, risk assessments and handling of people training within the Trust.
	Report on patient handling incidents involving patients and staff recorded via the Trust incident reporting system.
Health and Safety Staff Side Representatives	Raise with the local management or via the Joint Consultative Committee (JCC) concerns about possible risks and dangerous events in the workplace that may affect the employees they represent.
	 Raise with local management general matters affecting the health and safety of the employees they represent.
	 Represent the employees who elected them in consultation with health and safety inspectors where required.
	 Assist with investigating possible dangers at work, the causes of accidents and general complaints by employees on health and safety and welfare issues and take these matters up with the employer in conjunction with the health and safety team.
	Where required, carry out inspections of the workplace particularly following accidents, diseases, or other events.





	 Promote safe working practice and advise employees on health and safety standards and procedures. Attend the Health, Safety, Security and Fire Group representing the JCC when nominated.
Infection Prevention Control Team (IPC)	Review and follow up on reported accidental inoculation incidents.



3.4 Governance structure







3.5 Compliance

Legislation	Policy	Procedure
Health & Safety at Work etc. Act (1974)	$\overline{\mathbf{Q}}$	
Criminal Justice and Immigration Act 2008		$\overline{\mathbf{Q}}$
Coronavirus Act 2020	$\overline{\mathbf{A}}$	
Health & Safety (Display Screen Equipment) Regulations (1992)		$\overline{\mathbf{V}}$
Manual Handling Operations Regulations (1992)		$\overline{\mathbf{V}}$
Confined spaces Regulations 1997		$\overline{\mathbf{V}}$
Control of Substances Hazardous to Health (2002)		$\overline{\mathbf{V}}$
Health & Safety (First Aid) Regulations 1981		$\overline{\mathbf{V}}$
Personal Protective Equipment at Work Regulations 2022		☑-
Secretary of State Directions Managing Security in NHS		\square
Working at Height Regulations 2005, amended 2007		\square
Control of Asbestos Regulations 2012	$\overline{\mathbf{Q}}$	
The Control of Legionella Bacteria in Water Systems	$\overline{\mathbf{Q}}$	
Control of Noise at Work Regulations 2005		$\overline{\mathbf{V}}$
Control of Vibration at Work Regulations 2005		$\overline{\mathbf{V}}$
Electricity at Work Regulations 1989	$\overline{\mathbf{Q}}$	
The Regulatory Reform (Fire Safety) Order 2005		
(HTM-03-01) Specialised Ventilation for Healthcare Buildings – Estates Only		
(HTM 07-01) Management and Disposal of Healthcare Waste	v	
Testing of emergency response	Ø	





Ratified date:20 July 2022 Last amended: 20 July 2022

4 Policy

The Trust's health and safety arrangements are based on the Health and Safety Executive (HSE) guidance document HSG65 Managing for Health & Safety (Plan, Do, Check, Act principles).

4.1 Health and Safety Management System

The aim of the Trust's health and safety management system is to prevent injury and ill health to employees and others by the effective management of risk.

A legal register has been produced and will be maintained.

The Trust will set objectives and targets in terms of health and safety performance. Progress against these plans will be monitored and reported to the appropriate assurance groups.

4.2 Communication with stakeholders

Consultation and communication will follow the formal and informal communication systems in place throughout the Trust. In addition to this there will be representation from the Joint Consultative Committee (JCC) at the Health, Safety, Security and Fire Group.

4.3 Emergency and Business Continuity

The Trust has Major Incident, Emergency Planning and Business Continuity Procedures in place.

4.4 Health and Safety Governance/Assurance Framework

The output of the Health and Safety Management System will be presented to QuAC following the governance structure within this policy.

4.5 How the Health and Safety Management System will be monitored

The Health and Safety Team will monitor performance in the following ways:

- Pro-actively carrying out audits.
- Reactively investigating adverse incidents.



5 Definitions

Term	Definition
RIDDOR	Reporting of Injuries, Diseases & Dangerous Occurrences Regulations
PPE	Personal Protective Equipment
HSE	Health & Safety Executive
JCC	Joint Consultative Committee
EFM DMT	Estates & Facilities Management, Directorate Management Team
QuAC	Quality and Assurance Committee
KPI	Key Performance Indicators

6 Related documents

Relevant policies and procedures are available on the Trust intranet, examples are documented below:

- Asbestos management policy
- Assisted bathing and showering scalds prevention procedure
- Cleanliness procedure
- Control of contractors procedure
- COSHH procedure
- Criminal incident reporting procedure
- Display screen equipment procedure
- Electrical safety policy
- Energy and water management policy
- Environmental management policy
- Fire safety policy
- Fire safety protocol
- First aid at work procedure
- Key management procedure
- Lone working procedure
- Manual handling of objects procedure
- New and expectant mothers/people procedure
- Noise and vibration procedure
- Personal protective equipment procedure





- Risk assessment procedure
- Security procedure
- Staff attack alarm systems protocol
- Suicide prevention survey procedure
- Ventilation policy
- Waste management policy
- Water management policy
- Working at height procedure

7 How this policy will be implemented

- This policy will be published on the Trust's intranet and external website
- Line managers will disseminate this policy to all Trust employees through a line management briefing.

Implementation Action Plan					
Activity	Expected outcome	Timescale	Responsibility	Means of verification/ measurement	
Awareness sessions for all staff on the Health & Safety Toolkit	Raise staff awareness of the Toolkit	Training sessions to be continuously provided.	Health & Safety Team	Audit of risk assessments to be undertaken.	

7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
Managers – all staff groups	Face to Face e-learning Microsoft Teams Mandatory	Varies	On induction and 3 yearly update Also As an when identified





8 How the implementation of this policy will be monitored

	able Standard/Key rmance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	To ensure risk assessments have been undertaken by all teams, audits will be carried out utilising standard audit templates via an internetbased audit platform.	Annual audit programme, undertaken by members of the Health and Safety Team as directed by the Head of Health, Safety and Security.	Health, Safety, Security & Fire Group
2	Quarterly assurance report to QuAC is produced on a standard Trust wide format template.	Quarterly meeting. A report produced by the Head of Health, Safety and Security.	Quality Assurance Committee





9 References

Health and Safety at Work etc. Act 1974 etc.

Management of Health and Safety at Work Regulations 1999

Health and Safety Guidance Series - HSG 65

Occupational Health and Safety Assessment Series 18001

Corporate Manslaughter and Corporate Homicide Act 2007

Equality Act 2010

Estates and Facilities Management Framework – Incorporating Health, Safety and Security Framework

Learning and Development Policy

Emergency Planning and Business Continuity Policy

Health and Safety (Display Screen Equipment) Regulations 1992 as amended by the Health and Safety (miscellaneous amendments) Regulations 2002

INDG36 (rev4) (HSE) Working with display screen equipment (DSE) A Brief Guide

L26 Work with Display Screen Equipment (Health and Safety (Display Screen Equipment) Regulations 1992 as amended by the Health and Safety (miscellaneous amendments) Regulations 2002) Guidance on Regulations

Workplace (Health, Safety and Welfare) Regulations 1992 (the Workplace Regulations)

Pregnant Workers Directive 92/85/EEC

Trust Maternity Adoption and Paternity Procedure

Trust Maternity and Adoption Leave Information Pack

Control of Substances Hazardous to Health (COSHH) Regulations 2002

Guidance on Labelling and Packaging in accordance with Regulation (EC) No 1272/2008

INDG373 - New & Expectant Mothers Who Work, published 2013

Trust Incident Reporting Procedure

The Electricity at Work Regulations 1989 (second edition 2007)

The Provision and Use of Work Equipment Regulations 1998

British Standard BS7671:2008 Requirements for Electrical Installations

Code of Practice for In-Service Inspection and Testing of Electrical Equipment

HSE Guidelines for Maintaining Portable and Transportable Electrical Equipment

Health Technical Memorandums

Technical Memorandums 06-02 - Electrical Safety Code for Low Voltage Systems Health Incident Reporting and Serious Incident Review Policy





10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval:	20 July 2022		
Next review date:	20 July 2025		
This document replaces:	HS-0001-v10		
This document was approved	Name of committee/group	Date	
by:	EFM DMT	09 June 2022	
This document was ratified	Name of committee/group	Date	
by:	Management Group	20 July 2022	
An equality analysis was completed on this document on:	06 May 2022		
Document type	Public		
FOI Clause (Private documents only)	Not applicable		

Change record

Version	Date	Amendment details	Status
7.0	05 Nov 2013	Rewritten within scope of policy project	Withdrawn
7.1	07 May 2014	Responsibilities of Back Care Advisor added to section 4	Withdrawn
8.0	10.Nov 2016	Removed the work 'working' from the title of the approval group	Withdrawn
9.0	11 Jan 2017	Full review and updated with current legislative requirements	Withdrawn
9.0	24 Dec 2019	Review date extended from 11 January 2020 to 11 July 2020	Withdrawn
9.0	18 June 2020	Review date extended from 11 July 2020 to 11 January 2021	Withdrawn
9.0	Oct 2021	Review date extended to 11 July 2021	Withdrawn
10.0	14 April 2021	Full review and updated with current legislative requirement	Withdrawn





10.1	20 July 2022	Full review with minor changes.	Ratified
		Policy reviewed in line with the new Trust template and align with Journey to Change.	
		Wording amended throughout the Policy to aid clarity.	



Appendix 1 - Equality Analysis Screening Form

Please note: The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Section 1	Scope	
Name of service area/directorate/department	Health & Safety, EFM	
Title	Health and Safety Policy	
Туре	Policy	
Geographical area covered	Trust wide	
Aims and objectives	 The objectives of this policy are to: Comply at all times with the Health and Safety at Work etc. Act 1974 etc., the Management of Health and Safety at Work Regulations 1999 and all other relevant statutory provisions; Manage health and safety effectively to improve the quality of patient care, visitors and working conditions of staff and others. 	
Start date of Equality Analysis Screening	04 January 2022	
End date of Equality Analysis Screening	06 May 2022	

Section 2	Impacts	
Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	All staff, patients, contractors and visitors and the general community.	
Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups?	 Race (including Gypsy and Traveller) NO Disability (includes physical, learning, mental health, sensory and medical disabilities) NO 	
9	Sex (Men, women and gender neutral etc.) NO	



	 Gender reassignment (Transgender and gender identity) NO Sexual Orientation (Lesbian, Gay, Bisexual and Heterosexual etc.) NO Age (includes, young people, older people – people of all ages) NO Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO Pregnancy and Maternity (includes pregnancy, women who are breastfeeding and women on maternity leave) NO Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO Veterans (includes serving armed forces personnel, reservists, veterans and their families NO
Describe any negative impacts	There will be times when health and safety has to take priority and this may have an impact on a person's protected characteristics. TEWV would however always try and mitigate as much as possible any negative impact whilst ensuring health and safety legislation is followed.
Describe any positive impacts	Policy is in place to reduce risk to all staff.

Section 3	Research and involvement	
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Yes – see references for details	
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes/No*	
If you answered Yes above, describe the engagement and involvement that has taken place	*Consultation has taken place through the Health, Safety, Security & Fire Group as well as Trust wide process.	

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If you answered No above, describe future	
plans that you may have to engage and involve	
people from different groups	

Section 4	Training needs
As part of this equality analysis have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

Check the information you have provided and ensure additional evidence can be provided if asked

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Appendix 2 – Approval checklist

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	Legislation requirement
3.	Development Process		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
6.	Training		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	Yes	
7.	Implementation and monitoring		
	Does the document identify how it will be implemented and monitored?	Yes	
8.	Equality analysis		



	Title of document being reviewed:	Yes/No/ Not applicable	Comments
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	Approved by E&D 20 May 2022
9.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
10.	Publication		
	Has the policy been reviewed for harm?	Yes	
	Does the document identify whether it is private or public?	Yes	
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	

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