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Control of Contractors Health and Safety Procedure

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Document type: Procedure

Overarching policy: [Health and Safety Policy](#)

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1 Introduction

The Trust has a legal and moral obligation to manage risk. Following this Control of Contractors Procedure will establish consistent Trust-wide standards for the employment, management, supervision and control of contractors working on behalf of the Trust.

This procedure links to Our Journey To Change as outlined within the Health and Safety Policy.

2 Purpose

This procedure is to ensure that the activities of contractors who are engaged by the Trust are effectively managed to reduce the risk of harm to themselves, to others and to the environment. This procedure provides guidance to all Trust staff who are involved in the appointment of contractors.

Following this procedure will help the Trust to comply with its legal obligations:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Construction (design and management) Regulations CDM 2015

3 Who this procedure applies to

This procedure applies to all:

- Bank, locum, permanent, fixed term contract employees (including apprentices) who hold a contract of employment or are engaged with the Trust
- Seconded staff (including students).
- Volunteers.
- Non-Executive Directors and Governors.
- Those undertaking research work within TEWV Trust.
- External contractors (including Private Finance Initiative (PFI)), agency workers, including those within the Gig economy.
- Limb workers.
- Those on honorary contracts.
- Those on work experience and other workers who are assigned to TEWV Trust.

4 Related documents

This procedure describes what you need to do to implement duties under the Trust Health and Safety Policy.

This procedure also refers to:

- ✓ [Risk Assessment Procedure](#)
- ✓ [Health and Safety Policy](#)
- ✓ [Temporary Agency and Self-employed Workers Procedure](#)
- ✓ [Asbestos Management Policy](#)
- ✓ Estates Contractor Site Rules Document
- ✓ [Supporting Young People into Roles Within the Trust Procedure](#)
- ✓ [Work Experience/Student Placement in TEWV \(including under 18's\) Framework and Guidance](#)
- ✓ [Volunteer \(General\) Procedure](#)
- ✓ Medical Bank – Activating Patchwork Applications – Doctors not employed by TEWV Standard Processes

5 Procedure

Any proposal to use a contractor may have an impact on compliance with statutory health and safety duties. All staff are required to follow this procedure and staff who appoint contractors should be familiar with their level of authority and competence to appoint contractors (for example, Estates contractors, IT contractors, Facilities contractors, Bank Staff, Agency Staff, or anyone that the Trust engages to carry out work including Volunteers).

The Trust recognises that when staff engage contractors to work on Trust premises, they have obligations to plan, monitor and control contractors work for the safety of everyone who could be affected by their activities.

In any client/contractor relationship, both parties have duties under health and safety law. Similarly, if the contractor employs sub-contractors to carry out some, or all of the work, all parties will have health and safety responsibilities. Contractors are responsible for ensuring compliance with health and safety matters within their working area.

Some of the duties associated with the management of contractors overlap with those of other policies and procedures. This procedure must be read in conjunction with other relevant Trust policies.

5.1 TEWV Responsibilities

All staff who appoint contractors have a responsibility to ensure that contractors are managed in accordance with this procedure.

See the definitions within [Section 9](#) for examples of contractors that the Trust engage.



Clinical staff and volunteers are engaged under the terms referenced within this Procedure

Please refer to the following procedures and standard processes outlined below:

- [Temporary Agency and Self-employed Workers Procedure](#)
- [Volunteer \(General\) Procedure](#)
- Medical Bank – Activating Patchwork Applications – Doctors not employed by TEWV Standard Processes

5.1.1 Chief Executive

The Chief Executive has:

- Overall responsibility for health and safety which includes ensuring that legal duties are met, and adequate resources are made available for the Trust to meet its obligations for managing contractors. Whilst the responsibility for managing contractors is delegated to other officers in the Trust the accountability remains with the Chief Executive.

5.1.2 Directors, Deputy Care Group Directors and Service Managers

Directors, Deputy Care Group Directors and Service Managers are:

- Responsible for ensuring that this procedure is implemented in areas under their control and for providing advice and support to staff who appoint contractors.

5.1.3 Managers

Managers need to:

- Ensure all contractors under their control are managed in accordance with this procedure.
- Provide training, advice and guidance on the management of contractors.
- Manage work under their control where contractors have been appointed.
- Ensure that an evaluation of the proposed contractors work is carried out.

5.1.4 Responsible Persons

Responsible Persons who engage contractors need to:

- Assess the potential hazards and determine any precautions that may need to be taken and to ensure that safe systems of work are employed.
- Any Trust assessments documenting risks that may be experienced by the contractor must be shared with them.
- Ensure the contractor provides a suitable and sufficient risk assessments and method statements where applicable.
- Carry out documented observations to ensure contractors are following the appropriate risk assessment and method statements.
- Ensure contractors have specific and general training, qualifications and certificates to undertake the type of work being carried out.
- Ensure that they understand that contractors are their responsibility for the duration of the contract period.
- Consider [Appendix 1 Five Practical Steps to Safe Working](#).
- Ensure that the contractor has adequate arrangements for the control and supervision of under 18's. Refer to the [Supporting Young People into Roles Within the Trust Procedure](#) and the [Work Experience/Student Placement in TEWV \(including under 18's\) Framework and Guidance](#).

5.1.5 Under 18s



In general terms those under 18 will not be allowed into certain environments which include the Forensic units, 136 areas, Adult Mental Health wards and Psychiatric Intensive Care Units.

Under 18s will be directly supervised whenever they are in a clinical environment. Community visits to any home or location will be individually assessed and always accompanied.

Please note we do not employ or host anyone under the age of 16.

5.2 Pre-Appointment Requirements

The following documents must be obtained prior to appointing a contractor:

- Liability Insurance (in date).
- Membership of reputable trade bodies or approved contractor schemes e.g. CHAS, SafeContractor etc.
- Training certificates for type of work being undertaken (IPAF, PASMA, Confined spaces, Positive and Safe etc.).
- Health and Safety Policy and Practices.
- Track record of experience in similar contracts.

- Legally required registrations.
- Recent health and safety performance (number of accidents, RIDDORs etc).
- Selection procedures for sub-contractors.
- Example safety method statements and risk assessments for similar work.
- Supervision arrangements.
- Arrangements for consulting their workforce.
- References from previous clients.
- DBS check process in place where appropriate.

5.3 Pre-Start Requirements

The following must be provided by the contractor prior to them starting work:

- Agreed work times.
- Number of operatives on site.
- Areas of work/fencing off/restricted access etc.
- Specific risk assessments for the work being undertaken on site.
- Method statements.
- Notifications of any isolations required.
- COSHH assessments.

The following must be provided by the Trust prior to the contractor starting work:

- Parking arrangements.
- Any required Permits to Work.
- Isolations to be carried out to facilitate work.
- Location of hidden services such as water mains/electrical cabling/gas pipes etc.
- Trust contractor Identification card issued.
- Trust contractor induction to be undertaken and recorded (valid for 12 months).
- Asbestos registers to made available and contractors to sign to say they have seen them.
- Any restrictions on the time or location in which the work is done.
- Information about other people who could be present on the premises or could be at risk in the vicinity.
- Restrictions which will apply to the storage of goods, materials, skips, site huts and storage containers.
- Rules regarding the storage and collection of waste.
- Site non-smoking policy.
- Rules about work on the electrical installation and the use of electrical equipment.
- Requirements for work on the gas system.

- General rules about the need to maintain escape routes and access to fire equipment plus any specific rules in relation to the project.
- Rules requiring the use of personal protective equipment when required as a result of the hazards of the work
- For any design or specification work already undertaken, any information about risks which could not be eliminated at the design stage.
- Hazards within the premises such as:
 - Asbestos.
 - Violence and Aggression.
 - Fragile roofs.
 - Overhead or underground services.
 - Confined spaces.
 - Reversing vehicles at loading bays etc.
 - Machinery.
 - Hazardous substances.

Please note that this list is not exhaustive.

- Restrictions on the introduction of certain high hazard equipment or processes except where agreed in advance and subject to a permit to work, e.g. radioactive sources, cartridge tools, hot work, lifting equipment.
- Restrictions and rules about the use of hazardous substances or generation of noise.
- Rules about work at height including roof work, scaffolds, mobile elevating work platforms and suspended access equipment when applicable.
- Any restrictions on the use of our facilities e.g. toilets, washing facilities, restaurants etc.
- Requirements for supervision and quality assurance.
- Restrictions or rules on the use of sub-contractors.
- The need for contractors to provide their own first aid arrangements/the availability of our first aid facilities and personnel.
- Any specific qualifications required for particular parts of the job.
- Security clearance arrangements.
- Requirements to report all accidents and incidents to the Client representative.
- The contact details of our representative responsible for coordinating the work who can be contacted for further information.

5.4 On-Site Requirements

- Contractors must sign in at the relevant department before commencing work and sign out at the end of the working day. Where there are remote sites this can be achieved by phone call to the person responsible for the contractor.

- The person responsible for the contractor or their deputy, must ensure they are happy with the quality of work at the end of the contracted work before allowing the contractor to leave, this includes.
 - Site cleanliness.
 - All tools are accounted for and signed off.
 - Work area is left in a safe condition.
 - All permits to work have been signed off and retained.
 - Trust contractor identification cards have been handed in.
- It is the responsibility of the contractor responsible officer to ensure the above is carried out and that they are satisfied that the contractor has a full understanding of site rules, restrictions and safety whilst on site. Any incidents, accidents or near misses must be reported to the contractor responsible person at the earliest opportunity but before the contractor leaves site for the day.
- The contractor responsible person is responsible for their contractor at all times whilst they are on site.
- Permits to Work must be managed and completed by the appropriate person/authorising person for the work. All, Permit to Work documents must be retained centrally.
- Consult individual site protocols where appropriate.
- The contractor responsible person must ensure that the contractor is reminded of Trust Values and confidentiality at all times.

5.5 Health and Safety Documented Audits and Monitoring of Contractors Activities

All work by contractors should be audited and monitored periodically by the Responsible Person or their deputy and documented accordingly to:

- Review progress.
- Check quality of workmanship.
- Check that the workers on site are those expected and who have signed in.
- Identify any problems or unanticipated risks at an early stage.
- Check that work is restricted to the areas anticipated and not creating additional risks by spreading beyond the agreed area or involving unauthorised work.
- Check that method statements are being followed, that the contractors are complying with site rules and that they are generally working in a safe manner. (The degree of monitoring depends on the type of work involved for example, regular contract work activities such as window cleaning may be checked a few times per year, whereas building alterations might be checked more regularly). Where monitoring detects poor standards, this should be addressed with the contracting company concerned

by the Responsible Person or their deputy and, if necessary, monitoring frequency is then increased. Where appropriate, work should be stopped whilst a solution is found.

5.6 Closing Meeting: Health and Safety Performance

The Responsible Person and the Contractors representative should review the output of the health and safety audits and monitoring that has taken place during the work period.

5.7 Closing Meeting: Work Undertaken

The Responsible Person and the Contractors representative should review the output of work completed during the work period.

6 Construction (Design and Management) Regulations 2015 (CDM)

The Trust recognises its responsibilities under the Construction (Design and Management) Regulations 2015 (CDM) for:

- Notifying the HSE of a project if it is one which is expected to last longer than 30 working days and have more than 20 workers working simultaneously at any point, or, exceed 500 person days.
- Assembling the project team, including checking the competence of all appointees.
- Issuing a client brief outlining the purpose, aims and expectations for the work.
- Ensuring there are suitable management arrangements for the project including the provision of welfare facilities for use by contractors/staff and the drawing up of a construction phase plan before work starts.
- Ensuring that arrangements for the management of health and safety are maintained and reviewed throughout the project.
- Allowing sufficient time and resources for all stages of the project.
- Providing pre-construction information as soon as is practicable to designers and contractors.
- For projects involving more than one contractor:
 - Appointing a principal designer (PD) and principal contractor (PC) as soon as is practicable, and in any case before the construction phase begins. (If they fail to appoint a principal designer and principal contractor the client must fulfil the duties of those roles themselves.)
 - Taking reasonable steps to ensure that the PD and PC comply with their duties.
 - Ensuring the principal designer prepares a health and safety file.
 - Keeping the health and safety file up to date and available for inspection at a later date and passing it to a new owner if the interest in the structure is disposed of.

7 Incident and RIDDOR Reporting

Incidents must be reported to in line with the Trusts [Incident Recording and Response Policy](#).

8 Health, Safety and Security Team

The Health, Safety and Security Team (which also includes a Local Security Management Specialist) provides advice and support to all staff and managers around the management of risk.

The contact for the team is: tewv.hss@nhs.net

9 Definitions

Term	Definition
Contractor	<p>HSE Definition:</p> <ul style="list-style-type: none"> “A contractor is anyone you get in to work for you who is not an employee.” HSG 159 Managing Contractors a Guide for Employers <p>Contractors for the Trust can include:</p> <ul style="list-style-type: none"> Estates contractors Facilities contractors I.T. contractors Medical Engineering contractors Capital contractors Clinical contractors including <ul style="list-style-type: none"> Equipment / system reps Clinical agency staff Clinical contracted staff Locums Doctors Any other external person brought in by a ward or other department.

10 How this procedure will be implemented

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

10.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
None required.			

11 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance 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	Compliance with the legal requirements outlined within the Management of Health and Safety at Work Regulations 1999. <i>NB. There are 14 questions listed in the audit template that are assessed for compliance.</i>	<p>Frequency: Annual rolling audit programme.</p> <p>Method: Risk Assessment audits will be undertaken for a sample of all teams utilising a standard audit template via an internet-based audit platform. Results are collated and discussed at Health, Safety, Security and Fire Group (HSSF GROUP) with a report to be submitted to the appropriate committee.</p> <p>Responsible: Undertaken by members of the Health and Safety Team as directed by the Head of Health, Safety and Security.</p>	Implementation and monitoring are directed by the Executive Risk Group and devolved to the HSSF Group.

12 References

- ✓ Health & Safety at Work Act 1974
- ✓ Management of Health and Safety at Work Regulations 1999 (MHSWR)
- ✓ Construction (Design and Management) Regulations 2015 (CDM)
- ✓ Managing for Health and Safety HSG65
- ✓ HSE website: Consulting employees whose first language is not English (hse.gov.uk)
- ✓ HSE website: Young people at work (hse.gov.uk)
- ✓ HSE website: Diversity in the workplace - New to the job (hse.gov.uk)
- ✓ HSE website: HSG159 – Managing Contractors
- ✓ Barbour EHS Limited: Health and Safety Arrangements for the Control of Contractors
- ✓ HSE website: INDG386 – Using Contractors A Brief Guide (rev 1)
- ✓ [NHS England » Agency rules: list of approved framework agreements for all staff](#)

13 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval	14 July 2025
Next review date	14 July 2028
This document replaces	Control of Contractors Procedure CORP-0049-v3.1
This document was approved by	Health, Safety, Security and Fire Group
This document was approved	14 July 2025
This document was ratified by	EFM DMT
This document was ratified	10 July 2025
An equality analysis was completed on this policy on	23 April 2025
Document type	Public
FOI Clause (Private documents only)	n/a

Change Record

Version	Date	Amendment details	Status
v1	14 July 2025	New document created to replace CORP-0049-v3.1 which is to be withdrawn as covered Estates only. Reviewed and updated as a Trustwide Procedure.	Approved

Appendix 1 – Five Practical Steps for Safe Working

This appendix includes a five-step approach on how to manage contractors and ensure safe working.

No matter how small the job, or how fast it needs to be completed, health and safety doesn't start when the contractor arrives on site. Health and Safety needs to be thought about as soon as you know a job needs to be done.

Step 1: Planning

- Define the job.
- Identify hazards.
- Assess risks.
- Eliminate and reduce the risks.
- Specify health and safety conditions.
- Discuss with contractor (if selected).

Step 2: Choosing a Contractor

- What safety and technical competence is needed?
- Ask questions.
- Get evidence.
- Go through information about the job and the site, including site rules.
- Ask for a safety method statement.
- Decide whether sub-contracting is acceptable. If so, how will health and safety be ensured?

Step 3: Contractors Working on Site

- All contractors sign in and out.
- Name a site contact.
- Reinforce health and safety information and site rules.
- Check the job and allow work to begin.

Step 4: Keeping a Check

- Assess the degree of the contact needed.
- How is the job going:
 - As planned?
 - Is the contractor working safely as agreed?
 - Any incidents?
 - Any changes in personnel?
 - Are any special arrangements required?

Step 5: Reviewing the Work

- Review the job and contractor.
 - How effective was your planning?
 - How did the contractor perform?
 - How did the job go?
- Record the lessons.

Appendix 2 - 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	Control of Contractors Health and Safety Procedure
Type	Procedure
Geographical area covered	Trust wide
Aims and objectives	<p>The objectives of this procedure are to:</p> <ul style="list-style-type: none"> • 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, • 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	03 March 2025
End date of Equality Analysis Screening	23 April 2025

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?	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men, women and gender neutral etc.) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO

	<ul style="list-style-type: none"> • 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 • Armed Forces (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	Procedure is in place to reduce risk to all staff, patients, visitors, contractors etc.

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.)	Health & Safety at Work etc. Act 1974 Management of Health and Safety at Work Regulations 1999 (MHSWR) Construction (Design and Management) Regulations 2015 (CDM)
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	Programme of visits and audits have been undertaken where concerns have been discussed and documented. These have been considered while reviewing the procedure.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	

Section 4	Training needs
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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

Appendix 3 – 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	
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		

	Title of document being reviewed:	Yes / No / Not applicable	Comments
	Does the document identify how it will be implemented and monitored?	Yes	
8.	Equality analysis		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	24 April 2025
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	Public .
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	