



Health and Safety Policy

April 2021

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1. General Policy Statement

NHS Greater Glasgow and Clyde (NHS GGC) exists to provide healthcare services of the highest quality, to the people of Greater Glasgow and Clyde. We recognise that we cannot provide these services unless we ensure, so far as is as reasonably practicable, that we reduce the risks to the health and safety of staff, patients, volunteers, students and others affected by our work activities. This is a primary objective of NHS GGC, and we prioritise it equally alongside other business and operating objectives.

The minimum acceptable standards of health and safety are those contained in legislation. It is our obligation to meet these standards and strive for continual improvement.

The ultimate accountability for compliance with health and safety legislation lies with the Chief Executive. Managers and supervisors are directly responsible for the prevention of incidents, injuries and occupational illness, as well as damage or loss of NHS GGC property and the environment, within their area of responsibility.

Health and Safety and other specialist Advisors are appointed as competent persons under the current Management of Health and Safety at Work Regulations and other subject specific legislation e.g. Fire, radiation. They are responsible for advising managers and staff about their legal obligations and to provide advice and support to enable managers to manage health and safety in their area of responsibility.

This policy statement is supplemented by specific policies, procedures and guidelines giving detailed arrangements for health, safety, welfare and related issues. Advisors and managers are responsible for bringing these policies, procedures and guidelines to the attention of staff and others.

All persons working within NHS GGC are responsible for making safety at work a priority to protect themselves, their colleagues, patients, visitors and the interests of NHS GGC.

NHS GGC is required to co-operate and co-ordinate health and safety arrangements where more than one organisation or group share or visit premises. NHS GGC will ensure that detailed arrangements are in place with local councils regarding the health and safety of staff within Health and Social Care Partnerships.

The Chief Executive has overall Accountability for health and safety in NHS GGC. The Chief Executive has delegated to the Director of Human Resources and Organisational Development the particular responsibility to oversee the implementation of this policy throughout NHS GGC. The implementation of this Policy will be reviewed as part of the Health and Safety Management System.

NHS GGC will also work with a range of Partner organisations such as Police Scotland, the Scottish Prison Service and educational institutions such as Universities and Colleges, to ensure that where appropriate, joint health and safety management arrangements will be agreed.

Signed  Date: 26/08/2021 Signed:  Date: 26/08/2021

Jane Grant, Chief Executive

Dorothy McErlean, Employee Director

2. Policy Objectives

- 2.1 To define the health and safety organisational arrangements, including Health and Safety Committee structure and Partnership arrangements
- 2.2 To develop a positive health and safety culture which secures the full participation of all members of the organisation and ensures clear responsibilities for health and safety
- 2.3 To produce a 3 year Health and Safety Strategy which will detail priorities for the organisation and from which an Annual Action Plan will be produced
- 2.4 To implement measures which will systematically identify and control risk. This is recognised as the only effective approach to the control of work-related injury and ill health
- 2.5 Commit management and staff at all levels to promote health and safety and set personal examples in safe behaviour
- 2.6 To ensure all persons working within NHS GGC are responsible for making safety a priority at work to protect themselves, their colleagues, patients, visitors and the interests of NHS GGC
- 2.7 Provide and maintain safe systems of work and healthy working conditions in compliance with all relevant statutory requirements
- 2.8 To provide where appropriate personal protective equipment (PPE) and clothing in accordance with the NHSGGC PPE Policy and legislation
- 2.9 To have in place effective systems of communication to ensure the dissemination of information on health and safety matters
- 2.10 Ensure the highest levels of consultation in accordance with the principles of Partnership working
- 2.11 To provide resources, by way of facilities, information, training (induction and refresher), instruction and supervision to meet the above objectives
- 2.12 To co-operate and co-ordinate with other employers/ agencies where they share premises or workplaces
- 2.13 To ensure a comprehensive health and safety management system is in place across all levels of the organisation, incorporating the collection of incident and ill-health data to improve learning opportunities and overall performance
- 2.14 To commit the organisation to implementing and abiding by relevant health and safety legislation which is regarded as a minimum standard of compliance. This will include working with the Enforcing Authorities to ensure compliance (Health & Safety Executive, Environmental Health Officers, Fire Service, Scottish Environmental Protection Agency)
- 2.15 To ensure a formal link to NHS GGC Clinical Governance structures and arrangements and NHS Quality Improvement Scotland, which sets Risk Management standards for the NHSiS
- 2.16 To ensure compliance with the Staff Governance Standards

2.17 To have in place effective structures, policies and procedures, to ensure that the organisation meets its legal obligations with regard to the Ionising Radiation Regulations and the Ionising Radiation Medical Exposure Regulations

3. Organisation (see Appendix A)

3.1 The Chief Executive has overall accountability for all Health and Safety matters

3.2 The Director of Human Resources and Organisational Development, who has delegated responsibility from the Chief Executive, is responsible for ensuring the Health and Safety Policy implementation is monitored throughout the organisation

3.3 Health and Social Care Partnership (HSCP) Chief Officers are responsible for ensuring the Health and Safety Policy is implemented throughout their areas. They are also responsible for the development, introduction and implementation of local Health and Safety Policies as appropriate

3.4 Corporate Directors are responsible for ensuring the Health and Safety Policy is implemented throughout their areas

3.5 The Chief Operating Officer within Acute Services is responsible for ensuring the Health and Safety Policy is implemented throughout Acute Services. Acute Services Directors will be responsible for the development, introduction and implementation of local Health and Safety Plans

3.6 Responsibility for health and safety will be through the line management structure in HSCPs, Acute Services and Corporate Directorates

3.7 Line Managers are responsible for ensuring that the Health and Safety Policy is implemented throughout their areas of responsibility

3.8 Employees are responsible for their own health and safety and for others such as colleagues, contractors, visitors, patients etc. who may be affected by their actions. Employees have a legal duty where they must co-operate with their employer in measures provided to ensure safety, and report shortfalls in health and safety to their manager or supervisor, in accordance with statutory responsibilities (Health and Safety at Work etc Act 1974 Section 7)

4. Responsibilities

4.1 Chief Executive / Director of Human Resource and Organisational Development

1) The Chief Executive has overall accountability and responsibility for ensuring that an organisational structure and arrangements exist to ensure the health, safety and welfare of staff employed within NHS GGC and all persons (patients, visitors, contractors, volunteers) liable to be affected by the activities carried out within NHS GGC premises. This will include responsibility for:

a) The staff employed within NHS GGC

b) The work processes, activities and systems performed within NHS GGC

- c) The specific accommodation within which NHS GGC activities are carried out
- d) The property in the form of equipment, supplies, furnishings etc. which is used in the performance of these activities

In practice the Chief Executive will discharge this responsibility by delegation to Chief Officers, Chief Operating Officer and Directors, then through their line management structures

- 2) The Chief Executive shall arrange to monitor regularly the arrangements for health and safety through reports from the Director of HROD who has delegated responsibility
- 3) It is the responsibility of the Chief Executive to ensure that sufficient resources are available to ensure so far as is reasonably practicable, the aims and objectives of this and supporting policies and Standard Operating Procedures are met
- 4) The Director of Human Resources and Organisational Development is responsible for ensuring that the Staff Governance Committee of the NHS Board is satisfied that the organisation is meeting its obligations under the Staff Governance Standard to provide an improved and safe working environment for staff. Specifically, the Director of Human Resources and Organisational Development will:
 - a) ensure the specialist occupational health and Health and Safety resource is managed and deployed to support the organisation and its managers in ensuring that NHS premises are fit for purpose, and that the personal safety of patients and staff is paramount in service design and operation
 - b) jointly convene with staff side co-chair, the Health and Safety Forum, to agree the Health and Safety Policy and and the three year Health and Safety Strategy and annual Health and Safety Action Plan
 - c) ensure that national occupational health and health and safety strategies are implemented through local policies and plans
 - d) ensure that the mandatory reporting and statistics required under the Staff Governance Standard are presented to the Staff Governance Committee on a regular basis, in order that progress against the Standard can be monitored

4.2 Chief Operating Officer (COO) & HSCP Chief Officers

- 1) Ensuring that suitable and sufficient risk assessments of the health and safety risks to staff and others not employed (Patients, visitors, contractors, volunteers) by the Acute Services Division or Partnerships working on NHS GGC premises are made, in order that appropriate control measures may be put in place
- 2) The assessments should be reviewed and the appropriate and significant findings recorded including any group of employees identified as being especially at risk

- 3) Ensuring the provision of appropriate health surveillance for staff identified as being necessary by the risk assessments
- 4) Ensuring that NHS GGC Safety Policies are being applied and that local rules and procedures are prepared to comply with them
- 5) Ensuring through the organisation and arrangements developed, that so far as is reasonably practicable:
 - a) safe systems of work, safe procedures and safe processes are devised, implemented, monitored and maintained
 - b) by good selection and training, all staff are provided with the necessary information, instruction and supervision to enable them to carry out their duties safely. This should include comprehensive and relevant information on health and safety risks identified by any risk assessment and the protective and preventative measures in place. Any training/ assessment must be repeated when appropriate to take into account any new or changed risks to the employees concerned and take place during working hours
 - c) the provision to any person they employ on a fixed term contract or secondment, or through an employment agency, information on any special skills required for safe working and any health surveillance required, before work starts
 - d) plant and equipment provided for use is maintained to a standard which is safe and without risks to health and/or safety when used, and is cleaned and maintained
 - e) accommodation is provided and maintained in a manner which constitutes a safe and healthy environment
 - f) arrangements exist to ensure that the transport of personnel and the transport, handling, use and storage of articles and substances is carried out in a manner which is without risk to health or safety
 - g) effective procedures are set up to be followed in the event of serious and imminent danger to persons working in NHS GGC premises and other locations, for example, community settings, including the nomination of competent persons to implement any evacuation procedures and restrict access to danger areas
- 6) Ensuring that where NHS GGC shares a workplace with another employer or employers, there is mutual co-operation to enable statutory duties to be complied with and all reasonable steps are taken to inform other employers of risks arising out of the NHS GGC undertakings. Where appropriate a written agreement should be prepared
- 7) Ensuring the provision to any self employed persons or employees of other employers working on NHS GGC premises, of comprehensive information concerning any risks from the undertaking, including procedures to be followed in the event of serious or imminent danger

- 8) Ensuring that all staff are fully aware of their delegated health and safety duties, usually via the Job Description and that these responsibilities are documented and given to the individuals concerned, and ensuring, by effective monitoring, that the duties of any subordinate officer are being carried out and corrective action is taken if they are not
- 9) Ensuring that safety procedures and lines of accountability are monitored and reviewed on a regular basis
- 10) Ensure that all incidents are reported and recorded in accordance with the 'Incident Reporting Policy' (using Datix) and the appropriate follow-up action taken
- 11) Ensuring that health and safety representatives are consulted in good time in respect of the employees they represent concerning:
 - a) The introduction of any measure within NHS GGC, which may substantially affect health and safety
 - b) Any health and safety information that NHS GGC is required to provide to employees
 - c) Planning and organisation of any health and safety training the organisation is required to provide
 - d) The health and safety consequences of the introduction of new technologies into the workplace
- 12) Establishing a Health and Safety Committee under the appropriate legislation and ensure regular meetings of the Committee are held
- 13) Carrying out the duties detailed for senior managers/heads of department in relation to staff responsible to the postholder

4.3 Other Directors

- 1) Director of Finance
 - a) To ensure that advice is available to the Chief Executive/ Director of Human Resources and Organisational Development in relation to the financial implications of identified and quantified health and safety requirements
 - b) To carry out the duties detailed for senior managers/department heads in relation to staff responsible to the postholder
- 2) Medical Director
 - a) To ensure the availability of advice on medical matters (by appointment of appropriately qualified staff) and arrangements for the dissemination of information and advice of a medical nature, are in place
 - b) To ensure that arrangements are made to enable NHS GGC to comply with statutory regulations and codes of practice which particularly affect clinical staff such as the Ionising Radiations Regulations, Ionising Radiation Medical Exposure Regulations, Codes of Practice for the Prevention of Infection in

Clinical Laboratories and reports of the Advisory Committee on Dangerous Pathogens

- c) To carry out duties for senior managers / department heads in relation to staff responsible to the postholder
- 3) Director of Nursing
 - a) To ensure that appropriate advice is available on nursing matters
 - b) To ensure that arrangements are made for the implementation, monitoring and revision of nursing procedures and safe systems of work (as indicated by the results of risk assessment) to ensure that the NHS GGC Health and Safety policies are complied with
 - c) To carry out the duties detailed for senior managers/department heads in relation to staff responsible to the postholder

4) Director of Estates and Facilities

To provide advice to the Directors as appropriate, on the requirement for particular health and safety provisions for the Estates and Facilities function throughout NHS GGC.

- a) To ensure that the Chief Executive is made aware of statutory requirements and codes of practice which particularly affect the working environment and supporting structures and services to clinical services, e.g. Management of Health and Safety Regulations, Control of Hazardous Substances Regulations (including Legionella arrangements), Electricity at Work Regulations
- b) To ensure that adequate procedures are in place to ensure compliance with the Construction (Design and Management) Regulations where appropriate
- c) To ensure that adequate procedures exist so that contractors personnel are made aware of the NHS GGC's health and safety requirements and that these are complied with
- d) To manage the disposal of all waste (healthcare, domestic etc) throughout NHS GGC and ensure that the policy and practical procedures are amended to take account of changing legal requirements and best practice
- e) To carry out the duties detailed for senior managers/heads of department in relation to staff responsible to the postholder
- f) To ensure that purchasing procedures, contracts etc. take account of health and safety issues and of any statutory and NHS GGC requirements in that respect

4.4 Senior Managers and Heads of Department

- 1) Ensuring the Policy is implemented and that staff to whom specific responsibilities are delegated, are fully aware of and discharge these Health and Safety

responsibilities. Where they do not have the authority to deal with such matters they are brought to the attention of more senior management

- 2) Appropriate action is taken on matters concerning Health and Safety, which are brought to their attention
- 3) Ensuring that all employees have either read or been given a copy of this policy and made aware of local policies and procedures. All policies and procedures should be easily accessible and are properly implemented and enforced by management
- 4) Preparing and updating appropriate health and safety procedures for their department, liaising as appropriate with managers of similar departments in other locations of NHS GGC to ensure functional consistency of practice, and ensuring that all staff for whom they are responsible receive and understand the departmental health and safety procedures. This should be undertaken seeking advice from Health and Safety specialists where appropriate
- 5) Ensuring that appropriate first aid facilities are available and that employees are aware of first aid arrangements
- 6) Developing and implementing safe working practices and systems by risk assessment, training, supervision and provision of information within the department, particularly in the case of young or inexperienced workers, to ensure maximum safety for all personnel involved
- 7) Identifying the level of knowledge required for all staff under their control and providing the necessary training where this is possible. Training needs which cannot be met should be reported to the next higher authority, and training records should be clearly documented. This should be undertaken seeking advice from Health and Safety specialists where appropriate
 - In particular ensuring that all staff complete the 9 agreed Core Statutory / Mandatory Training modules and where appropriate the additional Role specific mandatory modules.
- 8) Undertaking hazard spotting exercises, leading to risk assessment, audit and compliance monitoring, and safety inspections to ensure that machinery and equipment is maintained in a safe condition, that safety devices are fitted, maintained and operated, and that safety rules and procedures are observed, and safety equipment utilised
- 9) Reporting of all incidents and near misses in accordance with procedures (using Datix), and the carrying out of appropriate follow-up action
- 10) Providing Trade Union and employee appointed Health and Safety representatives with facilities to carry out their prescribed functions in accordance with the Safety Representatives and Safety Committee Regulations and the Health and Safety (Consultation with Employees) Regulations
- 11) Liaison with safety representatives for the department on all matters concerning safety

- 12) Keeping up-to-date with developments in their field of work and responding to change as necessary
- 13) Responding to specific safety technical information notified
- 14) Ensuring that any visitors to the department are segregated from hazards, or are advised of any hazards they may encounter, so far as is reasonably practicable. Where departmental activities take place outwith the department, to ensure similar care is taken
- 15) Ensuring the department is kept tidy, with safe access and egress, and safe storage, use and disposal of materials
- 16) Ensuring that new equipment is inspected by a competent person and staff trained in its use, before it is brought into operation
- 17) Ensuring that fire procedures are brought to the attention of all their staff and that staff attend training, in accordance with the Fire Safety Policy
- 18) Maintaining appropriate safety records, eg. risk assessments, training records, incident report forms
- 19) Making proposals to the relevant Directors for improvements to safety policies and contributing towards the preparation of safety polices, where appropriate
- 20) Co-operating and consulting with the Estates Department to ensure that all statutory examinations are carried out at the appropriate time and records maintained of such examinations
- 21) Seeking specialist advice when necessary by bringing matters to the attention of the appropriate Director and/or Specialist Adviser

4.5 Employees / Contractors and others

Every employee, contractor or self-employed person working on NHS GGC premises or elsewhere on its behalf has a legal duty to take all reasonable care of their own health and safety as well as that of others, eg patients, who may be affected by their acts or omissions. Students, volunteers and placements will be treated as employees for the purposes of this Policy. NHS GGC requires its employees to:

- 1) Take all reasonable care of their own health and safety and that of others who may be affected by their acts or omissions.
- 2) Co-operate with any provision made towards achieving the Health and Safety Policy objectives and complying with statutory duties.
- 3) Notify immediately to their manager/supervisor all health and safety hazards that they identify. (Note: Where an employee believes it is inappropriate for any reason to raise a legitimate concern with their manager they may wish to raise it with the Designated Member within the Code of Conduct – Whistleblowing Procedure)
- 4) Make full and proper use of any control measure, personal protective equipment or other facility provided to eliminate or reduce risk to health and safety

- 5) Report all incidents or near misses to the appropriate manager/supervisor timeously, in accordance with local reporting procedures
- 6) Use all machinery, equipment, dangerous substances, transport equipment, means of production or safety devices in accordance with any relevant training and instructions
- 7) Make themselves familiar with all relevant Health and Safety Policies and local procedures
- 8) Report any defect in plant or equipment, or shortcomings in the existing safety arrangements to their supervisor or manager without delay
- 9) Be aware that if they feel that a job or activity is inherently unsafe, they should report to their supervisor before attempting to undertake the job or activity
- 10) Not undertake any task for which authorisation and training has not been given
- 11) Attend health and safety training when requested to do so
- 12) Employees are encouraged to improve standards of health and safety and constructive suggestions made by them will be welcomed. Such suggestions should be passed to the appropriate line manager and safety representative

4.6 Occupational Health / Health and Safety, Moving and Handling and Conflict Management Practitioners

- 1) To develop and prepare health and safety policies and procedures on behalf of the Chief Executive to aid compliance with current legislation
- 2) To advise the Chief Executive and local management on all health and safety issues including notifying appropriate managers of any changes to current legislation
- 3) To monitor the implementation of health and safety policies and procedures on behalf of the Chief Executive
- 4) To offer practical support and guidance to Managers and delegated staff, on risk assessment, and to devise and implement initiatives in response to identified risks
- 5) To investigate potential hazards within NHS GGC and to recommend action for their elimination to local management; to assist in ensuring that NHS GGC's premises are a safe environment for patients, employees and visitors
- 6) To be responsible for the provision of health and safety related training e.g. moving and handling, Aggression Reduction COSHH, risk assessment
- 7) To act in an ex-officio capacity at local health and safety committee meetings within each sector, advising the committee on its remit and activities; and assisting Managers in promoting the effectiveness of the committee
- 8) To collect and disseminate organisation wide statistics and other data on health and safety matters, to assist with the control of risk, and to highlight areas of concern either locally or for the organisation

- 9) To liaise with and respond to correspondence from the Health and Safety Executive
- 10) To prepare regular reports on health and safety performance for the Director of HROD, COO, Chief Operating Officers and other Directors
- 11) To undertake incident and Riddor (Reporting Incidents, Diseases and Dangerous Occurrence Regulations) investigations. Where appropriate joint investigations will be undertaken with Clinical Risk advisors, other specialist advisors and local management, to ensure ownership by Local management

4.7 Other Specialist Advisors

Specialist Advisers, for example, Infection Prevention and Control and Radiation Protection, have been appointed to comply with the general requirements of Regulation 7 of the Management of Health and Safety at Work Regulations 1999.

- 1) Provide a proactive source of competent advice within their particular specialism and experience
- 2) Prepare and issue appropriate Policies and Guidelines within their sphere of expertise on which managers require advice
- 3) Be available to meet with and consult with department heads, Health and Safety Committees and staff appointed safety representatives
- 4) Have the right to attend Health and Safety Committee meetings and to propose agenda items where relevant
- 5) Assist management and staff to interpret national Occupational Health and Safety standards
- 6) Advise on local procedures, training and risk assessments
- 7) To make available appropriate training to meet Health and Safety requirements
- 8) Give guidance on the preparation and amendment of Department policies and of NHS GGC procedures

4.8 Fire Safety Officers

- 1) To assist the Director of Estates and Facilities to develop and prepare Fire Policies and Procedures, on behalf of the Chief Executive, to ensure compliance with current legislation and mandatory requirements of Firecode
- 2) Advise the Director of Estates and Facilities and local management on fire safety issues including notifying appropriate managers of any changes to current legislation
- 3) To provide both general and specific fire training, and an advisory service, for all staff relevant to specific areas of work. This should include use of fire fighting equipment and evacuation techniques
- 4) To carry out an ongoing review of fire risk assessments of all premises and prepare reports, prioritising findings with recommendations for action

- 5) To ensure close liaison and co-operation with local Fire and Rescue Service and external agencies in fire related matters
- 6) To investigate all fire related incidents and prepare reports with recommendations for action

4.9 Contractors

NHS GGC requires all contractors to:

- 1) Comply with **all** health, safety and environmental legislation
- 2) Ensure that their employees or sub-contractors meet their statutory responsibilities
- 3) Ensure that their employees or sub-contractors comply with local rules as identified by NHS GGC's managerial or supervisory staff
- 4) To comply with any instructions from NHS GGC Health and Safety Practitioners or other authorised officer, as it relates to any matter of serious or imminent danger
- 5) Liaise directly with the person(s) responsible for monitoring the health and safety performance of the Contractor while on site. This will be identified through The Estates and Facilities Directorate or Department of Health Information and Technology or the appropriate Directorate commissioning the works.
- 6) To comply with NHS GGC's Health and Safety Policy and Procedures
- 7) To provide NHS GGC or host Department appropriate documentation i.e. company Health and Safety Policy and where appropriate Risk Assessments

5 Arrangements

5.1 Health and Safety Policies

The Health and Safety Policy will be reviewed every 3 years. Each HSCP and the Acute Division will establish arrangements (systems and procedures) for carrying out policy objectives. These arrangements will include adoption of policies and procedures issued by the organisation on specific issues e.g. Moving and Handling, Waste Management, Management of Aggression, COSHH, Risk Assessment, Radiation Safety etc. These Policies will be produced centrally by the organisation.

5.1 Health and Safety Management System

NHS GGC will ensure a Health and Safety Management System is in place across the organisation. The system will follow HSE guidance and will comprise the following components: policy, organisation, planning and implementation, performance measurement and a review of performance. The system will be regularly reviewed and reports submitted to the Health and Safety Forum and will form part of the Health and Safety Action Plan for the organisation. Training for managers and staff will form part

of the management system. An integral part of the NHS GGC system is use of the Health and Safety Management Manual for Managers.

5.2 Partnership Working

NHS GGC is committed to the principles of partnership working and the Area Partnership Forum is the main vehicle to take this forward. Staff-side representatives will be allocated seats on the Health and Safety Forum and every endeavour will be made to ensure attendance of Staff-side representatives.

5.3 Health and Social Care Partnerships

Health and Social Care Partnerships within the Greater Glasgow and Clyde area, involve both NHS Healthcare staff and staff from Local Authorities. Both groups of staff may be working on premises controlled by either NHS GGC or the Local Authority. Consequently, mutual co-operation is required between both employers to ensure that all statutory provisions are complied with. Where appropriate, joint Policies or 'safe working procedures' will be devised. HSCP Chief Officers will be responsible for ensuring that this Health and Safety Policy is implemented throughout their area of responsibility. Integration Joint Boards are required by statute and are in place for each HSCP. IJBs have responsibilities for ensuring that the appropriate health and safety governance arrangements are in place.

5.4 Contractors

NHS GGC will work with a range of contractors during the course of providing healthcare services. Some contractors may be employed for one-off contracts and may be on site less than one day, whereas some contractors may work alongside permanent healthcare staff on a long-term contractual basis. NHS GGC will require all contractors to comply with all relevant health, safety and environmental legislation and comply with all local rules and Policies whilst working on any NHS GGC site or on behalf of NHS GGC. A specific Policy on the control of contractors will be available and must be adhered to.

5.5 Health and Safety Committees

The Director of Human Resources and Organisational Development will co-chair the Health and Safety Forum, with a staff-side colleague, which will oversee organisation-wide health and safety issues. Each HSCP, Acute Services Division and Corporate Directorate will have its own arrangements in place to ensure health and safety is discussed with employees, appropriate dialogue is entered into and that appropriate action is taken as a result of those discussions.

5.6 Radiation Safety

Local arrangements for Radiation Safety will be agreed through the Board Radiation Safety Committee in accordance with the organisations Radiation Safety Policy. The Associate Medical Director for Diagnostics will chair the Board Radiation Safety

Committee and have delegated responsibility from the Chief Executive for ensuring that the Radiation Safety Policy is implemented throughout the organisation. NHS GGC has appointed Radiation Protection Advisors and Supervisors to advise and act upon all matters of radiation safety.

5.8 Health and Safety Advice

The Health and Safety Service will provide advice on health and safety matters. The Practitioners will provide advice and support on all health and safety matters, and will serve as a source of 'competent advice' as required by the Management of Health and Safety Regulations. Other specialist Advisers such as radiation safety and infection control will also be available within the organisation.

All managers and employees are encouraged to contact the Health and Safety Service for advice on any issues. If a manager or employee is unsure about a particular hazard or risk, and feel they cannot take any action at present, the Service should be contacted for advice.

The Head of Health and Safety and Health and Safety Service Managers have access to both the Chief Executive and the Director of Human Resources and Organisational Development regarding Health and Safety issues. These post-holders and Lead Practitioners, have delegated authority, by the Chief Executive, to stop any work which has an immediate serious risk to employees, patients, visitors, contractors, or members of the public, or which result in Enforcement Action (e.g. Prohibition / Improvement Notice) from any of the Enforcing Authorities. (reference: Management Regulations – Procedures for serious and imminent danger)

5.9 Key Performance Indicators

Each year the organisation will agree a number of key performance indicators to improve health and safety performance. These will be detailed in the health and safety strategy document for the organisation. A list of key occupational health and safety issues which have been identified are as follows:

- Mental health issues with links to the Staff Health Strategy
- Management of patient falls (links to clinical risk)
- Violence and Aggression
- Stress at Work
- Environment (incl Waste Management and Transport)
- Fire Safety
- Security
- Skin health
- Needlestick Injury and Blood Borne Virus Exposure
- Manual Handling and Ergonomics
- Musculo Skeletal injury
- Training for employees
- Hazardous Substances (COSHH)
- Incident Reporting
- Smoke-free Policy
- Face fit testing for staff

This list is not ranked and is not exhaustive. KPIs will be reviewed and updated annually. The current KPIs can be found in the Health and Safety Action Plan which is approved by the Health and Safety Forum annually.

5.10 Communication

NHS GGC will ensure that a mechanism for communicating all information regarding health and safety is established throughout the organisation. This will take the form of both written and verbal communication including the use of I.T.

5.11 Health and Safety Plan

Progress towards achievement with both the Annual and the 3 year Health & Safety Strategy/Action Plan will be directly dependent on the level of resourcing. Areas of risk that are not addressed during the year will be highlighted to the Director of Human Resources and Organisational Development, and Health and Safety Forum as necessary.

5.12 Resources

NHS GG&C will allocate resources to support the implementation of the policy, on an annual basis. This allocation will be agreed on the basis of requirements within the Health and Safety Action Plan and will be discussed and allocated on an annual basis by the NHS GGC Board.

5.13 Health and Safety of Residents / Patients / Visitors etc

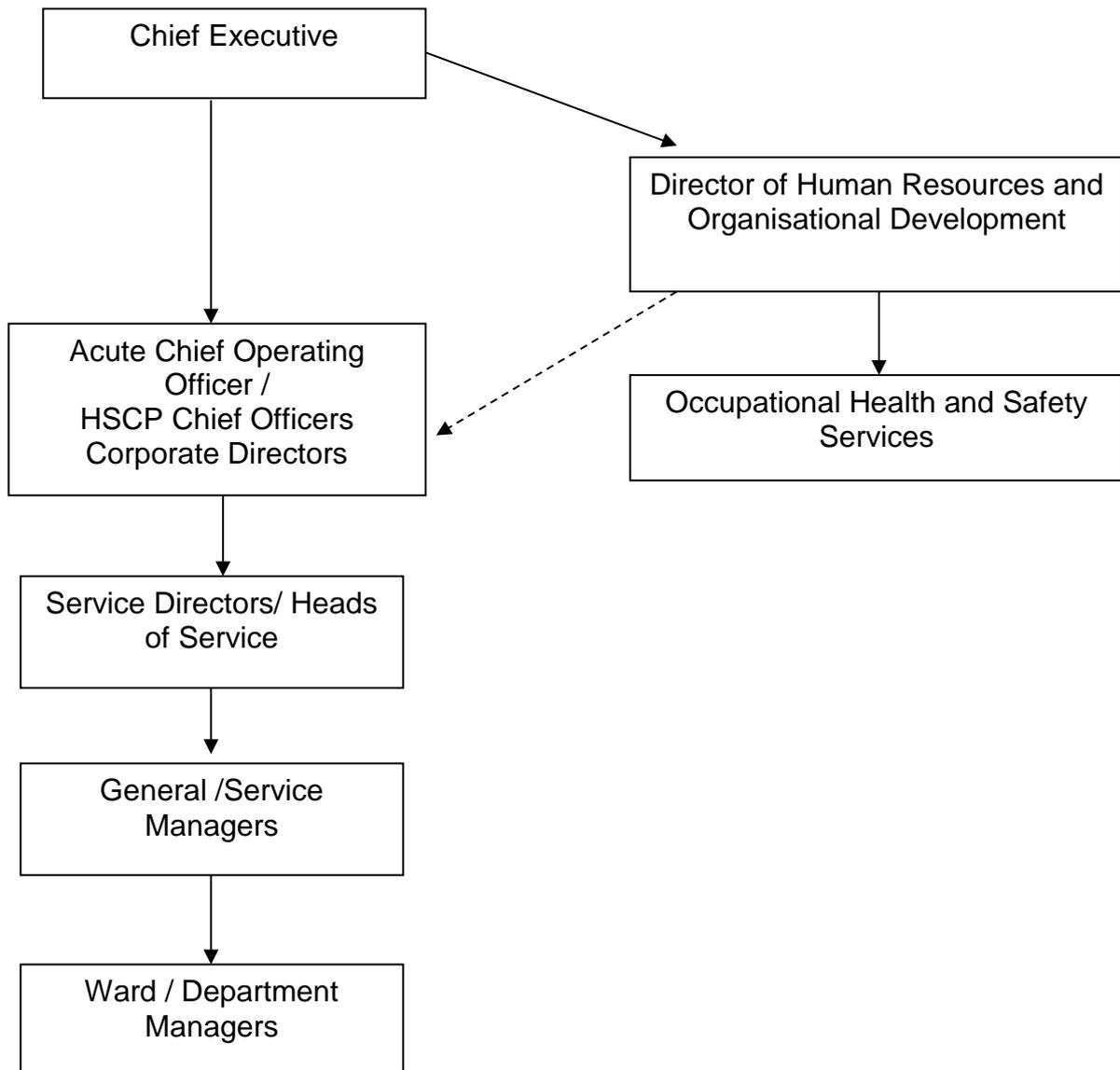
NHS GGC will continue to have an obligation to ensure the health and safety of patients/residents, visitors and other persons who enter their premises (including all buildings and estate).

5.14 Monitoring

The implementation of this policy will be monitored on an annual basis by the Health and Safety Service and reported to the Health and Safety Forum.

An annual programme of health and safety audits will be undertaken by the Health and Safety Service, in conjunction with local ward/departmental staff. This will include patient and non-patient areas, and an annual report on performance will be prepared and submitted to each appropriate Director. The outcome of the annual report will form the basis for the following year's Health and Safety Action Plan. Local inspections will be undertaken by managers as part of the Health and Safety Management Manual for Managers.

Organisational Structure for Health and Safety – Management Accountability



Corporate Accountability 2019

