### NHS

#### **Imperial College Healthcare**

**NHS Trust** 

Trust-Wide Policy			
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### Health & Safety Policy

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#### 1. Introduction

- 1.1 The Trust regards effective health and safety risk management as an integral day-to-day part of its activities. It is committed to carrying out its work in a way that ensures the safety and health of its staff, patients, service users and any others who might be affected by its undertaking.
- 1.2 This document describes the arrangements in place to ensure the Trust complies with its obligations under the Health and Safety at Work etc. Act 1974 and the Act's relevant statutory provisions.
- 1.3 This document's content, arrangements and application complies with the requirements of the European General Data Protection Act (GDPA).
- 1.4 This policy applies to all those who perform work for, or on behalf of, the Trust.

#### 2. Purpose & Scope

2.1

The Trust's statement of general policy is to:

- provide adequate control of the health and safety risks arising from our work activities;
- consult with its employees on matters affecting their health and safety;
- provide and maintain safe plant and equipment;
- ensure safe handling and use of substances;
- provide adequate information, instruction and supervision for employees;
- ensure all employees are competent to do their tasks, and to give them adequate training;
- prevent accidents and cases of work-related ill health;
- maintain safe and healthy working conditions; and
- review and revise this policy, as necessary, at regular intervals.
- 2.2 The Trust will ensure suitable and sufficient resources are available to meet the requirements of this policy

#### 3. Duties

3.1.

Chief Executive: The Chief Executive:

- has overall responsibility for ensuring the Trust observes its health and safety obligations;
- will ensure the Executive Directors observe their health and safety responsibilities; and
- will appoint an Executive / Board level Director to lead on health and safety (the Accountable Director).
- 3.2 **Accountable Director:** The Accountable director for health and safety is the Director of People & Organisation Development. The accountable director:
  - is responsible for ensuring suitable and effective arrangements are in place for managing, monitoring and reviewing the Trust's health and safety management arrangements, and for reporting the findings from these processes to the Trust appropriate trust committees with responsibility for overseeing health and safety;
  - will keep the Trust committees up to date on the Trust's health and safety performance; and
  - will ensure the Trust's health and safety management arrangements

reflect best practice.

#### 3.3 **Directors (Executive and Divisional):** will:

- assist the Chief Executive in meeting their obligations;
- ensure suitable and effective health and safety management arrangements exist within their Division/ directorate; and
- will appoint a senior manager or equivalent to act as the Divisional Health and Safety Lead.

#### 3.4 Ward Managers, Team Leaders, Service Managers: will:

- assist their directors in meeting their health and safety responsibilities;
- ensure any risks arising within their areas are assessed and, subsequently, adequately controlled;
- ensure quarterly workplace inspections are carried out and any unsafe conditions found are either removed or adequately controlled;
- ensure all accidents or incidents in which their staff (whether employees or contractors) are involved are reported in accordance with Trust policy;
- ensure any accidents, incidents, 'near misses' and complaints are investigated, taking appropriate and timely action to ensure any unsafe conditions found either are removed or do not become a subsequent cause of injury;
- ensure their staff are aware of and able to utilise the arrangements in place which protect their health and safety;
- cooperate with any others who are not under their control but who share the same workplace or service to ensure any health and safety risks in that workplace or service are adequately controlled;
- monitor and review periodically the health and safety performance of their service(s); and
- consult, as appropriate, with Trade Union-Appointed Safety Representatives and employees on health and safety issues.

#### 3.5 **Divisional Health and Safety Lead:** will:

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- assist their Directors meet their health & safety obligations; and
- ensure suitable and effective health and safety management arrangements exist within their Division.
- **Departmental Safety Coordinators:** may be appointed by managers to assist them in meeting their health, safety and welfare responsibilities. Their duties and responsibilities are likely to include the following:
  - understand and apply the Trust's Health and Safety Policy and any associated Trust or departmental guidelines and procedures;
  - liaise with the manager, Health and Safety Service and other key health & safety individuals;
  - maintain and review at regular intervals all local health and safety policies, procedures and local rules and advise the manager when changes are necessary;
  - monitor work equipment, working practices and procedures, the local environment (and items in that local environment) to ensure they are safe;
  - assist the manager in the preparation and review of risk assessments;
  - distribute health and safety information and draw to the attention of staff and workers particular areas of relevance to work procedures;

- carry out local safety inspections and maintain records;
- monitor the selection, use, maintenance and replacement of personal protective equipment (PPE);
- refer promptly to the manager and the Health and Safety Service any health and safety problems which cannot be resolved locally on a timescale appropriate to the risk;
- ensure that staff and workers within their areas are familiar with accident procedures, fire precautions and first aid arrangements;
- ensure that persons in charge of projects/activities are made fully aware of their responsibility for the health, safety and welfare of all staff and workers working for them and report to the managers any apparent shortfalls;
- act as display screen equipment / workstation and manual handling assessors; and
- act as fire wardens.

#### All Staff (Including Temporary, Agency and Volunteers) will:

- take reasonable care for the health and safety of themselves and of others who may be affected by their acts or omissions at work;
- not intentionally or recklessly interfere with or misuse anything provided in the interests of health, safety or welfare;
- as directed either by their manager or any others who may have partial or total control of their workplace, co-operate and comply with all relevant health and safety policies and procedures and risk control measures;
- wear the appropriate safety equipment and use appropriate safety devices where applicable;
- report to their manager all hazards which they believe the manager is unaware of; and
- report immediately to their manager any accidents, incidents or dangerous occurrences in which they are involved, regardless of whether persons are injured or not.
- 3.8 **Contractors:** All contractors who work for the Trust will carry out their work in accordance with the requirements of this policy and any specific Trust health and safety-related contractor management policies e.g. Trust Control of Contractors policy.
- 3.9 **Health and Safety Service:** this service is responsible for providing the Trust with advice and assistance on the measures it needs to take to comply with its statutory health and safety obligations. It is the Trust's 'competent person', as required by Regulation 7 of the Management of Health and Safety at Work Regulations 1999. In particular, the service will:
  - advise the Chief Executive, Directors and others on the measures that need to be taken for the Trust's health and safety management arrangements to be effective at controlling risks;
  - participate in and/ or lead on, as appropriate, the investigation of Serious Incidents, fatalities, serious accidents and incidents arising from health and safety failures;
  - devise and use appropriate indicators for measuring and monitoring the performance and effectiveness of the Trust's health and safety management arrangements;
  - provide specialist health and safety compliance advice and assist with the

3.7

implementation of any specialist risk controls;

- report, as requested, to the Chief Executive, Accountable Director, Directors and others on the Trust's health and safety performance;
- liaise with the Trust's Divisional Health and Safety Leads (e.g. by setting up and managing a periodic Health and Safety Network meeting) to ensure a consistent approach is taken across the Trust to the management of health and safety;
- liaise with the Trust's Occupational Health Service and any others who are part of the Trust's health and safety management arrangements;
- monitor the management and resolution of health and safety entries on the Trust's risk register;
- draft and maintain the Trust's Health and Safety Policy (and any other supporting Trust-wide health and safety documents);
- be responsible for the development, introduction, co-ordination and monitoring of the health and safety-related policies and procedures that have been designed to create and maintain a safe and healthy working environment and to meet Trust objectives;
- monitor Trust interaction with and, as appropriate, liaise with the health and safety law enforcement authorities, as necessary; and
- devise and lead on health and safety campaigns which are designed to reduce the incidence levels of the major causes of staff accidents, incidents and work-related ill-health and non-clinical health and safety incidents involving service users and others e.g. slips trips and falls.
- 3.10 **Occupational Health Service:** This service is responsible for advising and assisting the Trust on occupational health and wellbeing matters. In particular, the service will:
  - ensure the Trust has robust management arrangements in place to rehabilitate employees who are suffering from work-related illnesses;
  - report, as directed, to the Chief Executive, ExCo, Directors and others on the Trust's occupational health performance;
  - lead on and/ or participate, as necessary, in the investigation of Serious Incidents, fatalities, accidents and incidents arising potentially from health and safety failures;
  - manage the health surveillance of the Trust's employees, as required by certain legislation e.g. the Control of Asbestos at Work Regulations concerning asbestos; and
  - work with the Health and Safety Service, for example, to produce health and safety policies and to devise and run campaigns to reduce the levels of health and safety accidents and incidents involving staff, service users and others.
- 3.11 **Trades Unions/ Staff Side:** Trade unions can appoint/ elect safety representatives who, on notifying the appropriate HR Manager, will have certain rights with regard to representing clearly defined employee groups. These rights include reasonable amounts of time off to investigate accidents, to inspect workplaces, attend health and safety committee meetings and for their training.
- 3.11.1 Additionally, Union-Appointed Safety Representatives have the right to receive information, and to be consulted about proposed new equipment,

technology, alterations in working arrangements and systems, the production and implementation of guidance notes, and the results of risk assessments.

- 3.11.2 The Trust recognises and accepts Staff side organisations have an important role in a joint approach to the management of health and safety. A positive working relationship between Health and Safety Representatives, Trust managers and competent persons is seen as a most effective way of achieving acceptable health and safety standards.
- 3.11.3 The Trust will comply with the requirements set out under the Health and Safety (Safety Representatives and Safety Committees) Regulations 1977 and the Employment Rights Act 1996. The Trust will actively engage staff-side organisations in consultation on health and safety matters.
- 3.11.4 Employees who are not members of a recognised trades union may also elect and appoint someone as a Safety Representative. Those Safety Representatives, for any employees who are not members of a recognised trades union, may also become members of the Trust or any Divisional or Departmental health and safety committees.
- 3.12 **Other key services and roles associated with health and safety:** In addition to the above, there are key services and individuals associated with health, safety and wellbeing in the Trust. Those include the:
  - (i) Fire Safety service (Site Management);
  - (ii) Local Security Management Specialist (Estates & Facilities);
  - (iii) Infection Prevention and Control (Medical Director's Office);
  - (iv) Back Care and Manual Handling Adviser (Health and Safety);
  - (v) Radiation Protection Adviser (Women's, Children's and Clinical Support); and
  - (vi) Head of Clinical Engineering (Estates & Facilities).
- 3.13 **Trust Health and Safety Committee:** A number of committees and groups provide the Trust with assurance on health and safety matters; a diagram showing those committees and groups can be found on the Trust intranet health and safety webpages. The Trust Health and Safety Committee (HSC) is responsible for monitoring the Trust's health and safety performance and ensuring that a consistent, coordinated approach to health and safety management is taken across the Trust. This Committee is the main forum for facilitating consultation on Trust- wide health and safety matters between the Trust and its employees. The HSC will be chaired by the Accountable Director for health and safety (see **Appendix 1** for the HSC terms of reference).
- 3.14 **Divisional Health and Safety Committees:** Each Division (and the corporate divisions collectively) will set up and maintain a health and safety committee to discuss matters affecting the health and safety of both their employees and others who may be affected by the Division's activities. (Alternatively, a Division may choose to place 'health and safety' as a standing item on the agenda of an existing Division governance group e.g. the Divisional Quality and Safety Committee.) These committees will be chaired by a senior manager who will report to the Trust Health and Safety Committee on the Division's/ corporate function's health and safety performance and any

unresolved issues. These groups will meet at least once every 3 months.

- 3.15 **Local Health and Safety meetings:** Each ward, service or team must provide opportunities for the routine communication and consultation between the Trust and employees on health and safety matters. This could take the form of team meetings, staff briefings or health and safety meetings.
- 3.15.1 Unresolved health and safety concerns and those of site, divisional or Trust importance should be escalated to the relevant service manager.
- 3.16 **Cooperation with shared sites and services:** The Trust has a number of sites that are shared with other NHS and non-healthcare employers e.g. Imperial College London. On such shared sites, the Trust will ensure its staff cooperate with these organisations in matters of health and safety and notify the other organisations in a timely manner of any activities which may affect the health and safety of their staff.

#### 4. The Process

#### 4.1 Risk Assessment

- 4.1.1 Risk assessment is key to effective and sensible health and safety risk management. The findings from risk assessment(s) must be used to identify, prioritise and control risks at all levels in the Trust. A range of different specific risk assessment tools are available to managers and staff.
- 4.1.2 Managers will ensure significant hazards in the workplaces and work activities under their control have been suitably risk assessed and, consequently, that risks are adequately controlled.
- 4.1.3 Where necessary, for the purposes of achieving effective control over health and safety risks, managers will liaise with any others who have joint control over the workplaces and work activities of their staff.
- 4.1.4 Departmental Safety Coordinators will assist managers in carrying out suitable and sufficient risk assessments.
- 4.1.5 The risk assessment procedures, scoring matrix and associated documentation can be found on the intranet, under the health and safety webpages.
- 4.1.6 As necessary, in accordance with the Trust Risk Management Policy, unresolved significant health and safety concerns must be entered on the Trust's Risk Register
- 4.1.7 For certain high risk activities, services, wards or departments may need to perform a local health and safety risk assessment in order to develop their own procedures and risk control measures e.g. the Estates & Facilities Service in relation to work on or near live electrical equipment. These local procedures must be consistent with the Trust's Health and Safety Policy and any associated procedures.
- 4.1.8 As part of the health and safety management arrangements in the Trust, all risk assessments must be recorded on a Trust approved database. The present

Trust-wide system that must be used is AssessNET. Details and links to this system can be found on the Trust Intranet site. Certain Trust business units may use their own risk assessment system, as long as this is, at least, equally effective as AssessNET and the Trust Health and Safety service is aware of its use.

#### 4.2 Accident/ Incident Reporting and Investigation

- 4.2.1 Accident/ Incident investigations provide an opportunity for the reactive assessment of effective control of health and safety risks. Also, they provide an opportunity for learning and the development of new risk controls.
- 4.2.2 All accidents/ incidents must be recorded, reported and investigated in accordance with the Trust's Incident Reporting Policy.
- 4.2.3 Managers must ensure their staff are aware of and follow the Trust's incident reporting procedures.
- 4.2.4 Managers will review all reported incidents (including accidents) which occur in their service area (or ward) and investigate certain incidents further e.g. those incidents which either are serious or are frequent. The main purpose of the investigation is to identify and implement suitable measures which reduce the likelihood of a similar accident occurring.
- 4.2.5 Managers will review periodically (e.g. every quarter) all reported incidents (including accidents) in their service area (or ward) to identify any trends e.g. the frequent occurrence of the same type of accident (such as a slip, trip and fall) or increasing numbers of accidents overall, etc. Suitable action should be taken where the review reveals a worsening health and safety performance e.g. a review of risk assessments
- 4.2.6 All incidents reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) will be subject to an investigation, the level of which will be commensurate with the severity of the incident.
- 4.2.7 The Health and Safety Service will report to the Health & Safety Executive any incidents that are notifiable under RIDDOR.

#### 4.3 Quarterly Workplace Health and Safety Inspection/ Review

- 4.3.1 A workplace safety inspection/ review is an effective way of identifying faults, hazards and unsafe working practices before they result in harm.
- 4.3.2 On a quarterly basis, ward and service managers will carry out a workplace inspection/ review of the premises under their control using the 'Health and Safety Workplace Inspection' form (which can be found on the Trust Intranet health and safety webpages).
- 4.3.3 The person carrying out the inspection may be accompanied by a Health and Safety Representative, as this will foster an inclusive and cooperative health and safety culture.

- 4.3.4 If any unsafe conditions are found, the manager responsible for that particular area of the workplace or service must take effective action to remove those unsafe conditions from the workplace.
- 4.3.5 Where staff work in premises which are neither under their control nor owned or managed by the trust, and the workplace inspection identifies any matters requiring attention, the inspection findings must be shared as necessary with those who control the premises. If necessary, to ensure timely action is taken, those matters may be escalated using the agreed partnership/ joint venture management arrangements.
- 4.3.6 All health and safety workplace inspections must be recorded on the appropriate Trust database, AssessNET. Details and links to this system can be found on the Trust Intranet.

#### 4.4 Health and Safety Audits

- 4.4.1 Periodically, the Health and Safety Service will audit and inspect either a selection of services across the Trust or a health and safety topic (e.g. 'slips, trips and falls') to determine the level of compliance with the Trust's health and safety policy and the degree to which risks are being adequately controlled.
- 4.4.2 The audit or inspections findings will be reported to the ward, team or line manager and, if serious Division or Trust-wide matters have been found, the relevant health and safety committee(s).
- 4.4.3 The Trust's Internal Audit service may also audit the Trust's health and safety management arrangements. The audit findings, and any actions required to be completed, will be cascaded to the relevant staff for action and reported at the appropriate Trust Committees.

#### 4.5 Training

- 4.5.1 Health and safety information and training will be provided for all staff as part of their induction and, subsequently, as part of the Trust's statutory and mandatory training arrangements.
- 4.5.2 Any other specific or specialist health and safety training necessary for the staff in each workplace will be identified through the risk assessment process and staff appraisals Also, staff must receive a local (i.e. secondary) health and safety induction once they are in their specific workplace, during which they must be told about, and trained to manage effectively, any significant health and safety risks specific to their local workplace.
- 4.5.3 Refresher training will be provided to staff at intervals specified by the Trust statutory and mandatory training arrangements.
- 4.5.4 Details of the health and safety training appropriate for each staff group can be found in the Trust statutory and mandatory training needs analysis.

#### 4.6 Communicating Health and Safety Information

4.6.1 The Trust uses a variety of methods to ensure the contents of this policy and suitable and sufficient health and safety information is disseminated to all

staff, these are:

- Intranet where staff can find health and safety-related policies, procedures and documentation and minutes from Health and Safety Committees; and
- Health and safety law posters and 'Local Contact' notices: where staff will find details of key Trust health and safety information e.g. first aiders, fire marshals.

#### 5. Implementation and Dissemination

- 5.1 The requirements of this policy will be implemented by Directors and their appointed delegates.
- 5.2 This policy will be published on the Intranet for access by all staff.

#### 6. References

- Health & Safety Executive (see <u>www.hse.gov.uk</u>)
- Health and Safety at Work etc. Act, 1974 (see www.legislation.gov.uk)
- Successful Health and Safety Management 2013, HS(G)65, Health and Safety Executive (see www.hse.gov.uk/pubns/books/hsg65.htm)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) (see www.legislation.gov.uk)

#### 7. Monitoring Arrangements

Lead	Policy Objective	Method	Frequency	Responsible Committee / Group
Accountable Director for H&S	Trust Health and Safety Committee (HSC) meets, at least, bi-monthly	Committee meeting agenda and minutes	Bi-monthly	EMB
Divisional Directors	Divisions and Corporate Functions Health and Safety Committees occur (or 'health and safety' is a standing agenda item at a regular Divisional/ Corporate Functions meeting), meeting at least quarterly	Committee meeting agenda and minutes	Quarterly	HSC
Accountable Director for H&S	Director made accountable for Health and Safety and that person chairs the Health and Safety Committee	Chair of the Trust H&S Committee	Annual	HSC
Divisional Directors	Risk assessments exist for Division/ Corporate Function high-risk activities	Sampling by the Health and Safety Service	Annually	HSC
Divisional Directors	Accidents and incidents are reported in accordance with Trust policy	Sampling by the Health and Safety Service	Annually	HSC

bopy and printing of saving locally is not advised.				
Divisional Directors	Workplace inspections/ reviews are carried out, at least quarterly	Sampling by the Health and Safety Service	Quarterly	HSC
Associate Director of Health, Safety and Working Environment	Health and Safety audits are carried out periodically (at least 1 in a year)	HSC receives report on audit findings	Annually	HSC
Divisional Directors	Health and safety mandatory training requirements are complied with	HSC receives report on compliance levels	Quarterly	HSC

#### 8. Definitions & Abbreviations

#### 8.1 **Definitions**

8.1.1 **Risk Assessment:** A risk assessment is simply a careful examination of what, in the course of the Trust's work, could cause harm to people, so that the Trust can weigh up whether it has taken enough precautions or should do more to prevent harm.

#### 8.2 Abbreviations

- 8.2.1 H&S Health and Safety
- 8.2.2 HSC Trust Health and Safety Committee
- 8.2.3 ICHNT Imperial College Healthcare NHS Trust

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9. Supporting Information			
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Induction Policy and Procedure; Core Skills Polic			
	Manual Handling Policy and Procedure; Control of		
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	Display Screen Equipment Policy.		

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Appendix 1

#### Trust Health and Safety Committee Terms of Reference

#### Definitions

'the Trust' refers to Imperial College Healthcare NHS Trust
'the Board' refers to the Trust board.
'the Committee' refers to the Trust Health and Safety Committee (THSC).
'H&S' refers to the health and safety.
'the Policy' refers to the Trust's Health and Safety Policy.

#### Role

The role of the Trust Health and Safety Committee (THSC) is to provide assurance to the Trust regarding all health and safety matters arising from the Trust's undertaking. It is the strategic level consultative, advisory and decision-making body for health and safety affecting, primarily, employees, patients, third party partners, contractors, visitors and members of the public. It is responsible for consulting on, monitoring, managing and reviewing the adequacy and effectiveness of the Trust's H&S management arrangements. This includes reviewing the effectiveness of risk controls, and monitoring compliance and performance.

#### 1 Membership

- 1.1 The composition of the committee shall be approved by the Chief People Officer.
- 1.2 The Committee will be chaired by the Chief People Officer. In the absence of the appointed Chair, the committee will be chaired by the Associate Director of Occupational Health and Safety. In the absence of the chair and their appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.
- 1.3 The Committee membership will comprise the following:
  - Chief People Officer (Chair).
  - Associate Director of Occupational Health and Safety (Deputy Chair).
  - Senior Representative\* from Medicine and Integrated Care.
  - Senior Representative\* from Women's, Children's and Clinical Support.
  - Senior Representative\* from Surgery, Cancer and Cardiovascular.
  - Senior Representative\* from North West London Pathology.
  - Senior Representative\* from Private Patients.
  - Senior Representative\* for the Corporate Divisions collectively i.e. P&OD, Finance, ICT, Communications, Medical Director and Nursing Director.
  - Senior Representative\* from Estates and Facilities.
  - Up to 3 Trades Union appointed safety representatives
  - Up to 3 non-union employee safety representatives
  - One Health and Safety Manager (or the Back Care Adviser)

#### \*The 'Senior Representative' shall be empowered to make decisions on behalf of their division

- 1.4 Members are expected to attend each meeting of the Committee. In the event a member is unable to attend, that member should arrange for a deputy to attend.
- 1.5 The Committee may require other Trust officers and other individuals to attend all or any part of its meetings.

At the discretion of the Chair, others may be invited to attend the meeting from time to time.

#### 2 Secretary

2.1 The executive assistant to the Chief People Officer will provide secretariat support to the Committee.

#### 3 Quorum

- 3.1 A quorum requires the presence of:
  - the Chair (or Deputy Chair).
  - at least one representative from either Medicine, Surgery, Cancer & Cardiovascular or Women & Children's clinical divisions and
  - a Health and Safety Manager.

#### 4 Frequency of meetings, format and attendance requirements

- 4.1 The Committee will meet every 2 months, on dates set for the year by the Chair.
- 4.2 Committee members must attend a minimum of 75% of meetings.
- 4.3 The Chair must chair at least 75% of the meetings
- 4.4 The Secretary of the Committee will maintain a register of attendance.

#### **5 Notice of meetings**

5.1 Unless otherwise agreed, notice of each meeting confirming the agenda, venue, time and date shall be forwarded to each member of the Committee and any other person required to attend, no later than two working days before the date of the meeting. Supporting papers shall be sent to members and to other attendees as appropriate, at the same time.

#### 6 Minutes of meetings

- 6.1 The Secretary shall minute the proceedings of all meetings of the Committee, including recording the names of those present and in attendance.
- 6.2 Minutes and actions of the Committee meetings should be circulated promptly to all members.

#### 7 Duties

- 7.1 The Committee plays a key role in ensuring employees, contractors and other stakeholders are adequately consulted and communicated with on matters relating to their H&S at work. The Committee should carry out the following duties:
  - a) Reporting or escalating any relevant matters to the Executive Committee.
  - b) To keep under review the measures necessary to ensure the health and safety at work of employees, patients and others and to make recommendations to Executive Committee for such action as is believed necessary.
  - c) Identifying and monitor the management of H&S risk across the Trust.
  - d) To ensure that all reasonable steps are taken to promote sound policy and practice to ensure the health, safety and welfare of employees, contractors, patients, visitors, members of the public and other stakeholders.
  - e) To maintain a watching brief on H&S legislation, key risks, occupational and health arrangements and monitor the implementation of the Policy.

- f) To receive management information and reports on health and safetyrelated accidents, incidents, near misses and notifiable diseases, and to consider any proposed risk reduction strategies as appropriate.
- g) Ensure the necessary management structure, resources, finances and skills are in place to implement the Policy.
- h) To review findings of enforcing authority/third party audits and inspections (e.g. HSE, CQC, Fire Authority) and ensure suitable action has been taken to address any matters arising.
- To promote co-operation and communication between the Trust and its employees, contractors and other stakeholders in matters relating to H&S at work.
- j) To assist in the development of appropriate guidance and safe working practices, and promote a positive H&S culture.
- k) To promote health and safety communications, publicity, training and development in support of the Policy.
- I) Receive and review reports from sub-committees, e.g. Trust Radiation Safety Committee.
- m) To review membership and operation of the Committee from time to time.

#### 8 Reporting responsibilities

8.1 The Committee shall deliver regular reports, updates, management information and recommendations to the Executive Committee, Quality Committee and Trust Board.

#### 9 Authority

- 9.1 The Committee is a senior H&S management forum for the Trust and is authorised by the Trust to investigate any activity within its terms of reference.
- 9.2 The Committee is authorised to:
  - Seek any information it requires from any employee of the Trust in order to perform its duties.
  - Obtain outside legal or other professional advice on any matter within its terms of reference via the Trust Board Secretary.
  - Call any employee to be questioned at a meeting of the Committee as and when required.

#### 10 Monitoring and Review:

- 10.1 The Chief People Officer will monitor the effectiveness of, and appropriateness of, the terms of reference of the Committee.
- 10.2 The Secretary will assess agenda items to ensure they comply with the Committee's responsibilities.
- 10.3 The Secretary will monitor the frequency of the Committee meetings and the attendance records to ensure minimum attendance figures are complied with.