TRUST BOARD - 25 April 2012

Health and Safety Strategy 2012-13

<table>
<thead>
<tr>
<th>PURPOSE:</th>
<th>To present to the Board the Trust Health and Safety Strategy 2012-13</th>
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<tbody>
<tr>
<td>PREVIOUSLY CONSIDERED BY:</td>
<td>Health and Safety Committee, reviewed by Health and Safety Executive, Network Rail RAQC April 2012</td>
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<table>
<thead>
<tr>
<th>IMPLICATIONS:</th>
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<td>Objective(s) to which issue relates:</td>
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<tr>
<td>Risk Issues:</td>
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<td>Financial:</td>
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<td>HR:</td>
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<td>Healthcare/ National Policy:</td>
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<td>Legal Issues:</td>
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<td>Equality Issues:</td>
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RECOMMENDATIONS
The Board is asked to approve the strategy

DIRECTOR: Director of Nursing and Patient Experience
PRESENTED BY: Director of Nursing and Patient Experience
AUTHOR: Safety & Security Team Manager
DATE: 12 April 2012
Maintaining a safe and secure environment for patients, the public and staff
The Trust places great importance on the health and safety of its patients, visitors and staff. Alongside our duty of care to protect people from injury, accident and ill health, we have legal and statutory obligations under the Health and Safety at Work Act 1974 and other legislative requirements.

Health and safety is central to everything we do and by working together we can ensure that the Trust provides health care services that are safe and secure for patients, public and our workforce. We will achieve this aim by:

- Understanding improvements needed if things go wrong.
- Our policies, safe systems of work and rules are easier to remember if they are presented clearly and can be understood.

Working with others
- Our partners, stakeholders and contractors have a critical role in making our services safe and secure.
- Sharing experiences and information allow us to learn from each other.

Developing a safety culture
- Health and safety is sometimes seen as getting in the way, however working safely improves productivity.
- Planning ahead will lead to fewer accidents and incidents.
- Robust risk assessments will inform safe care delivery.

Publishing clear policies and procedures
- Patients, visitors and staff need to understand what they should do to stay safe.
- Our policies, safe systems of work and rules are easier to remember if they are presented clearly and can be understood.

Trusting our instincts
- If something doesn’t feel safe, it probably isn’t. Stop and report it.
- If you see others doing something that seems risky, stop them and escalate appropriately.

This health and safety strategy will enable the Trust to fulfil its legal and statutory obligations, whilst providing high-quality, safe healthcare that fulfils the Trust values of:

- Putting our patients first
- Striving for excellence and continuous improvement
- Valuing everybody
- Being open and honest
- Working as a team

All staff are expected to contribute to the maintenance and promotion of a safe and secure working environment. The responsibilities of managers and individual members of staff are explained with the health and safety policy and the accompanying policies and procedures contained within the Red Files and available on the Knowledge Centre.
Introduction

The Trust has a vision to become one of the best performing organisations in the NHS, in order to achieve this vision it recognises that a strong health and safety culture is key to its success.

The aim of the strategy is to set out the actions required and to measure improvements in health and safety practice and performance over the next 12 months.

In formulating the strategy the Trust has considered the wider healthcare economy and has identified key actions that will reduce risks to ensure they are as low as is reasonably practicable.

The Trust provides services to some 600,000 people, with increased demand expected as the population grows over the next decade. Key facts about the local community include:

- 25% of residents are under 18
- 20% aged over 60, many of whom live alone

The local health profile identifies that obesity, smoking and alcohol-related issues may impact upon the services provided by the Trust and the staff delivering those services.

This strategy supports health and safety management of all its hospital sites - including service changes introduced over the next two years through the Trust’s *Our Changing Hospitals* programme.

Successful delivery of the Trust’s strategic objectives - as set out in its annual plan - requires motivated and productive staff. Good health and safety management helps to reduce sickness absence, improve health and well-being and make the healthcare environment safe and secure.

The strategy also seeks to explore and utilise innovative solutions to manage health and safety risks and synergies with other departments to improve continuously the management of health and safety across the Trust.

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Lister hospital
Phased transformation
2010 to 2014

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Phase 4
Theatres & Endoscopy
- Dec 2013

Phase 3
Car park
- Sept 2011

Phase 2
Maternity Services
- Oct 2011

Phase 1
Surgicentre
- Sept 2011

Phase 4
New Ward Block
- Dec 2013

Phase 4
Emergency Department
- Oct 2013

Phase 4
Ward 11a – Oct 2011
Ward 7a – May 2012
Critical Care – Nov 2012
Ward 10a – July 2014

Phase 4
Chemotherapy
- Dec 2012
Underpinning legal requirements

In order to make sure the Trust provides a safe and secure environment for patients, public and staff, the following regulations underpin our approach to safety management:

- The Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- Workplace (Health, Safety and Welfare) Regulations 1992
- Control of substances Hazardous to Health Regulations 2002 (COSHH)
- Electricity at Work Regulations 1989
- Health and Safety (Consultation with Employees) Regulations 1996
- Health and Safety (Display Screen Equipment) Regulations 1992
- Health and Safety (Safety signs and signals) Regulations 1996
- Noise at work Regulations 1989
- Personal Protective Equipment at work Regulations 1992
- Provision and Use of Work Equipment Regulations 1998
- Reporting of Injuries and Dangerous Occurrences Regulations 1995
- Compliance with Care Quality Commission Standards (Outcomes 7, 10, 11, 13 & 14)
- Compliance with NHS Litigation Authority standards
- Compliance with Secretary of State Directions

Health and safety reporting mechanisms

The Trust’s health and safety reporting mechanism is determined and overseen by the health and safety committee which has representation from all areas of the Trust.

The committee guides the development of the strategy before recommending approval by the Risk and Quality Committee (RAQC), a sub-committee of the Trust Board of Directors.

The reporting structures can be seen in Figure One.

Key measures of performance have been identified and these are reviewed at the Health and Safety Committee, RAQC and the Trust Board. Items for exception reporting will also be escalated to RAQC and where necessary the Trust Board.

The health and safety management systems are audited bi-annually by the Trust internal auditors and the audit report and action plan is overseen by the Audit Committee and delivery is overseen by the Health and Safety Committee.
Effective safety planning requires a detailed understanding of key risk areas, along with the activities and circumstances involved. Planning allows resources and effort to be focused where they will have the greatest impact. Risk can be considered as risk from, or risk to. For the purposes of this strategy, all risks are considered in terms of risk to our: Patients, Public and Staff

### Strategic aims and objectives

**Strategic aim 1: improve patient safety**

#### Key risks
- Slips trips and falls
- Clinical risks
- Exposure to hazardous substances
- Water quality
- Security
- Fire

#### As a Trust, we will
- Identify hazards, assess and manage risks
- Record all hazards, incidents and near misses
- Review all incidents to identify trends
- Record significant hazards onto the Trust’s risk register for further action
- Investigate all RIDDOR incidents to patients and learn from them
- Conduct safety awareness campaigns
- Provide training to staff to manage hazards and emergency evacuations
- Act as a role model for the development of a health and safety culture
- Comply with national standards and guidance

#### Measuring performance
- We will monitor the:
  - Number and type of patient incidents (via patient safety committee)
  - Number of public liability claims
  - Number of RIDDOR incidents (patients)
  - Number of patient falls (via patient safety committee)
  - Number of serious incidents (via patient safety committee)
  - Number of patient versus patient assaults

#### Key milestones during next 12 months:
- Develop (electronic) incident reporting to improve data analysis
- Develop models to determine levels of safety risk existing currently
  - Reduce number of incidents relating to patient slips and trips
- Increase security staff deployment and continue partnership working with neighbourhood
Strategic aims and objectives

Strategic aim 2: improve the safety of the public (visitors)

Key risks
- Slips trips and falls
- Security (physical and verbal assault)
- Moving vehicles (separation of vehicles and pedestrians)
- Fire
- Medical gases

As a Trust, we will
- Identify hazards, assess and manage risks
- Record all hazards, incidents and near misses
- Review all incidents to identify trends
- Record significant hazards onto the Trust’s risk register for further action
- Investigate all RIDDOR incidents to visitors and learn from them
- Conduct safety awareness campaigns
- Provide training to staff to manage hazards and emergency evacuations
- Act as a role model for the development of a health and safety culture
- Maintain high standards of housekeeping and maintenance
- Provide information and guidance on hazards and safety procedures
- Comply with national standards and guidance

Measuring performance
- We will monitor:
  - The number and type of incidents to visitors
  - The number of RIDDOR incidents to visitors
  - The number of public liability claims

Key milestones
- Reduce number of incidents of physical and verbal abuse to the public
- Reduce number of incidents relating to visitor slips and trips
- Increase security staff deployment and continue partnership working with neighbourhood policing teams
- Reduce number of public liability claims arising from health and safety incidents
Strategic aims and objectives

Strategic aim 3: improve the health & safety of staff (including contractors)

Key risks
- Slips, trips and falls
- Musculoskeletal injuries
- Exposure to dangerous substances (including injuries from sharps)
- Fire
- Contact dermatitis and latex allergies
- Work-related stress
- Physical and verbal abuse
- Work-related upper limb disorders (display screen equipment related injuries)
- Working from height
- Lone working
- Occupational driving/workplace transport

As a Trust, we will
- Ensure that all staff are trained in safe systems of work
- Provide appropriate information, instruction, training and supervision
- Work to secure convictions and appropriate sentences for those who assault staff
- Monitor corrective actions identified from audits and investigations
- Consult with staff groups and Trades Union representatives
- Review contractors policies, risk assessments and method statements prior to commencement of work
- Develop and promote initiatives for the health and wellbeing of staff.

We will monitor the:
- Number of employer liability claims
- Number of incidents resulting from:
  - Stress, Sharps and Musculoskeletal injuries
  - physical assault of staff
  - RIDDOR incidents to staff and contractors
  - cases of contact dermatitis/latex allergy
  - compliance with mandatory training requirements

Key milestones
Reduce number of incidents of physical assault to staff
- Reduce number of incidents involving contractors working on Trust premises
- Reduce amount of sickness absence from work due to workplace injury or ill health
- Increase staff engagement and proactive discussions on health and safety.
- Improve the awareness of health and safety policies reducing the risk of non-compliance, which could lead to an incident, complaint or claim
- Improve the health surveillance of the Trust staff
Achieve Staying Healthy at Work Accreditation
### Key performance indicators

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<tr>
<th>2012/13</th>
<th>RAG Threshold</th>
<th>2011/12 Actual</th>
<th>Months April 2012–March 2013</th>
<th>YTD</th>
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<tr>
<td><strong>Staff (including contractors) indicators</strong></td>
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<td>RIDDOR incidents</td>
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<td>H&amp;S public liability claims</td>
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<td>Falls</td>
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<td>Physical assault</td>
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<td><strong>Public &amp; visitor indicators</strong></td>
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<tr>
<td>RIDDOR incidents</td>
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<td>H&amp;S public liability claims</td>
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<td><strong>Patient indicators</strong></td>
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<tr>
<td>RIDDOR incidents</td>
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<td>Employer liability claims</td>
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<td>Sharps incidents</td>
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<td>Workplace stress</td>
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<td>Contact dermatitis/latex</td>
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<td>Musculoskeletal injuries</td>
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<td>Physical assault</td>
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<td>Mandatory training compliance</td>
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<td>Significant workplace fires</td>
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This document covers a 12 month period, and the strategy will be evaluated and reviewed in 2013.

The strategy will be evaluated through an agreed audit programme, which will include staff awareness and knowledge. This will be overseen by the Health and Safety Committee.

The overall aim of this health and safety strategy is to improve the health and safety culture within the organisation and to develop a proactive approach to health and safety.

### Annual Audit Programme 2012—13

<table>
<thead>
<tr>
<th>AUDIT TITLE</th>
<th>MONTH</th>
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<tbody>
<tr>
<td>RISK ASSESSMENTS</td>
<td>JUNE</td>
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<tr>
<td>STAFF KNOWLEDGE &amp; SAFETY AWARENESS</td>
<td>JULY</td>
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<td>OCCUPATIONAL HEALTH SKIN SURVEILLANCE</td>
<td>SEPTEMBER</td>
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<td>MANDATORY TRAINING COMPLIANCE</td>
<td>NOVEMBER</td>
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<tr>
<td>SHARPS</td>
<td>JANUARY</td>
</tr>
<tr>
<td>CONTRACTORS SAFETY MANAGEMENT SYSTEMS</td>
<td>MARCH</td>
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