

Annex B – 2016/17 Health and Safety Plan

HEALTH AND SAFETY PLAN April 2016 to March 2017

INTRODUCTION

1. Since the formation of the CCGs, health and safety matters have been managed locally. This paper draws together the various activities into a structured plan, linked to the CCGs' organisational objectives.
2. The plan has been agreed by the CWHHE Health and Safety Committee, which in turn recommends it to the Governing Body for approval.
3. Progress reports against delivery will be presented to the Health and Safety Committee twice a year, a mid-year report and an annual report. The annual report will also be presented to the governing bodies.

RECOMMENDATION

4. The Governing Body's approval of the plan is recommended.

**CENTRAL LONDON, WEST LONDON, HAMMERSMITH AND FULHAM, HOUNSLOW
AND EALING CCGs**

**HEALTH AND SAFETY PLAN
April 2016 to March 2017**

Introduction

1. This paper sets out the health and safety plan for the five CCGs in the CWHHE collaborative. It covers the period from April 2016 to March 2017

Objectives

2. The CCGs have a corporate objective which is to 'empower staff to deliver our statutory and organisational duties'.
3. In order to deliver this, there are three specific health and safety objectives, to:
 - a. develop a positive health and safety culture across the organisation, involving and engaging our workforce at all times;
 - b. comply with statutory requirements and strive to exceed these where appropriate; and
 - c. prevent injury and ill-health and to continually improve health and safety performance.
4. Each objective has a number of work streams as set out below.

Health and Safety objectives with key work streams:

<p>1. To develop a positive health and safety culture across the company, involving and engaging our workforce at all times.</p> <p>a) To promote health and safety to ensure all staff understand their Health and Safety responsibilities</p> <p>b) To ensure staff complies with Mandatory training requirements including specialist training for those senior staff that need it.</p> <p>c) To ensure there are mechanisms to capture and act upon staff feedback on health and safety matters</p>	<p>2. To comply with statutory requirements and strive to exceed these where appropriate</p> <p>a) To ensure that health and safety policies are reviewed and updated. To put in place a programme to audit compliance with health and safety policies</p> <p>b) To ensure CCGs have an appropriate fire strategy and policies in place and that these are tested.</p> <p>c) To ensure an annual report is made to governing bodies, with regular updates to the health and safety committee.</p> <p>d) To put in place a regime for annual maintenance checks, including those carried out by landlords, e.g. asbestos, legionella, PAT testing.</p> <p>e) Ensure all necessary Risk Assessments are conducted.</p>	<p>3. To prevent injury and ill health and to continually improve health and safety performance.</p> <p>a) To strengthen incident reporting processes and report on near misses.</p> <p>b) To ensure health and safety risks are identified, assessed, investigated and that mitigating actions are put in place and followed through</p> <p>c) To ensure all employees have a DSE assessment.</p> <p>d) Review sickness and absence trends and ensure mechanisms and processes and in place to support staff, particularly work related issues.</p>
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Work Streams

5. A detailed plan has been developed and is set out below. This has been developed based on the risk register, issues log and reported incidents. Dates for actions will be agreed in conjunction with specific leads, the buildings user group at 15 Marylebone Road, and leads at Hounslow and Ealing CCGs' main offices.

Governance and Monitoring Progress

6. The Facilities Manager is responsible for health and safety matters across the five CCGs. The Director of Compliance is accountable for ensuring we discharge our organisational health and safety responsibilities. Progress against the detailed plan will be monitored at the Buildings User Group.
7. Progress will be reported to the Health and Safety Committee via a number of sources, including:
 - a. minutes from local group meetings;
 - b. progress against the health and safety objectives;
 - c. health and safety risks;
 - d. health and safety incidents;
 - e. health and safety training compliance;
 - f. staff well-being data from HR reports and surveys; and
 - g. specific reports on an exception basis.

Health and Safety Statement

8. An initial action is to promote awareness of health and safety. A simple statement is included at Appendix 2 and which, if this plan is approved by the Governing Body, will be published and circulated to all staff.

Next Steps

9. Should the Governing Body approve the plan, the CWHHE Health and Safety Committee will:
 - a. with the Buildings User Group, refine the detailed plan (eg agreeing adding target dates and responsibility leads);
 - b. publish and disseminate the health and safety statement (and this plan) for all staff; and
 - c. report progress to the Governing Body, via the CWHHE Health and Safety Committee and Senior Management Team.

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Objectives	Work stream	Commentary	Action	Responsibility	Action Date	Status/ Outcome
1. To develop a positive health and safety culture across the company.	Promote Health and Safety. Ensure all staff understands their responsibilities under Health and Safety.	Managers need to ensure staff understand their responsibility and their requirements under the Health and Safety at work Act	Governance and Compliance team to circulated to staff via the Directors the Health and Safety Statement. This should also be available in all staff induction packs. Comms department to add to inSite and communicate to all. Health and Safety needs to be promoted/discussed in staff meetings. Health and Safety should be a standing item on all staff meeting agendas H&S needs to form part of all employees' objectives.	All/ HR Department Comms department Compliance and Governance Team. All managers		
	Health and Safety Mandatory training for staff and Senior staff.	Staff groups need to Complete all Health and Safety Mandatory training and any other they are required to undertake and ensure it is completed Senior staff has significant health and safety responsibilities. These must be discharged effectively to maintain and improve safety standards and control risk and liabilities to an acceptable level.	1. HR has an approved database for ensuring a systematic approach to health and safety training for all staff that is implemented and monitored. Ensure regular reminders and compliance reports are cascaded to staff. Seek/design a Health and Safety manager's course and ensure all senior managers are trained.	HR Department HR Health and Safety advisor and senior staff		
	Customer Service Feedback	Customer satisfaction is an important part of the service delivered by the CCGs	Include Health and Safety and building safety issues in the BUG (Building User Group) meeting.	BUG Lead		

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Objectives	Work stream	Commentary	Action	Responsibility	Action Date	Status/ Outcome
2. To Comply with Statutory requirements and strive to exceed these where appropriate.	System of Review for Health and Safety Policy and guidance to be put in place.	Systematic review of Health and Safety Policy and guidance	1. All policies and guidance to be reviewed and updated in 2016 and to be given review dates. 2. Put in place a programme to audit compliance with H&S policy.	Compliance and Governance Team Compliance and Governance Team		
	Ensure all sites have an appropriate Fire Strategy and policy in place and that it is regularly tested.	All sites need to document and review the fire safety arrangements. Ensure regular drills and sufficient Fire Wardens are in place	1. Ensure a fire policy is reviewed and updated regularly with review dates going forward. 2. Provide Reports on feedback from fire drills. 3. Review Fire Warden complements and ensure staffs undertake mandatory fire training.	Compliance and Governance Team Facilities Managers Facilities Managers		
	Annual Health and Safety Report and quarterly reporting Maintenance inspections including Landlord inspections.	Compliance and Governance to submit an annual report to the Chairs/Directors collated by the facilities team. Facilities Department to ensure annual maintenance checks are conducted in time to eliminate risks. The Landlord is responsible for conducting risk assessments and other inspections for the building. I.e. asbestos, legionella, pest control.	1. Build on and develop the annual and quarterly reports to ensure high risk areas are highlighted. 2. The facilities team to monitor review and manage annual building inspections. I.e. PAT testing, Pest Control, Fire Extinguisher test etc. 3. To ensure the Landlord assessments are conducted within timescales and that actions/risks that are highlighted are addressed. 4. To eliminate the risks. A 'Landlord risk register' needs to be collated and managed	Compliance and Governance Team Facilities Teams Health and Safety representative Landlord Facilities managers		

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Objectives	Work stream	Commentary	Action	Responsibility	Action Date	Status/ Outcome
3. To prevent injury and ill-health and to continually improve health and safety performance.	Risk Assessments	All necessary Risk Assessments (RA) to be conducted; staff and building in order to identify potential hazards and analyse what could happen if a hazard occurs	<p>1 Seek assurance from the Landlord/NHSPS/Local Authority that all statutory risk assessments have been conducted.</p> <p>2 Identify and ensure all necessary building RA are conducted within organisations demise.</p> <p>3 Managers to identify what RA are required within their teams and with individual members of staff.and ensure these are conducted.</p>	<p>Facilities</p> <p>Facilities.</p> <p>All managers/ employers</p>		
	Strengthen the incident reporting process.	Compliance and Governance to introduce a uniformed reporting system.	<p>1. The Compliance and Governance team to ensure incidents are captured and disseminated to the correct persons to investigate and address.</p> <p>2. All building and H&S incidents to be recorded on the appropriate log in the shared folder to log (for patterns) and for action. Record near misses and loss and injury.</p> <p>a. Ensure Mitigating actions are put in place and followed through with a review.</p> <p>b. To strengthen the incident reporting process.</p>	<p>Compliance and Governance Team</p> <p>Compliance, Governance and Facilities Teams</p> <p>Facilities Teams</p> <p>Facilities Teams</p>		
	Collate and Review Risk Assessments and ensure actions are addressed and recommendations around approach on	<p>Risks need to be identified, analysed, controlled, reviewed and monitored.</p> <p>These assessments are also required so that the CCG's comply with statutory</p> <p>NHSPS/Provider conducts Fire</p>	<p>1. Introduction of a consistent tool for the assessment of risk.</p> <p>a. Ensure investigations are conducted and that Mitigating actions are put in place and followed through.</p> <p>2. NHSPS/Provider conducts these assessments and provides: a. Facilities team with a final report with</p>	<p>Health and Safety advisor/ representative/ Governance</p> <p>NHSPS/Provider</p>		

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Objectives	Work stream	Commentary	Action	Responsibility	Action Date	Status/ Outcome
	how to escalate actions	and General Risk Assessment and provides a report and action plan of issues/risk found.	an action plan of risks to address. Facilities team to manage the risks and raise issues to appropriate senior managers to address. Copies of the report and action plan to be disseminated to all Directors. Resolution of risks relating to electrical systems at Marylebone Road.	Health and Safety representative Facilities Teams NHSPS/Provider		
	Display Screen Equipment (DSE) assessments undertaken by all employees.	DSE assessments need to be undertaken and outcomes to be reported centrally. Engagement with employees helps managers to manage the potential health problems associated with DSE in a practical way to help spot the risks.	1 all managers to ensure all staff conduct a DSE self-assessment. 2 Address actions and set review dates. 3. Ensure eye test information is provided to staff. 3 A register is to be kept by each team collating all staff DSE details including actions and review dates. Facilities team is available to advice.	All managers/ employees All managers All managers/ HR All managers		
	Manage absence and sickness. Using trends to ensure correct support is provided.	Absence trends need to be identified; analysed and correct supporting mechanisms need to be put in place to ensure the health of staff within the workplace.	1 All managers to follow the managing absence policy and ensure all sickness is recorded onto the correct systems. 2 Managers to put systems in place to support staff back to work. 3 Supporting absence data to be provided and analysed for trends, assurance and ultimately to ensure that decision-making is evidence-based and successful implementation is measurable.	All managers All managers HR/All managers		

Appendix 2 – Chief Officer's Health and Safety Statement

As Chief Officer, I am responsible for ensuring the health, safety and wellbeing of all those who work, in whatever capacity, for us and for those who visit us. It is a responsibility that I take seriously and am committed to deliver against.

After all, CWHHE's purpose is to create a safe and healthy society and that includes us all in the CCGs, as a working community. A key component of achieving this is ensuring that robust policies, practices and procedures are in place to enable us to manage health and safety, in its broad sense, effectively. I am firm in my belief that a safe and healthy workforce and working environment makes a huge contribution to the delivering of our strategic objectives.

Whilst ultimate responsibility lies with me, everyone has their part to play – whether Directors, managers, administrators, clinicians or occasional visitors. These responsibilities are set out clearly in our Health and Safety policy ([Health & Safety Policy](#)).

To ensure that the policy is implemented to best effect, a Health and Safety Action plan has been developed. Progress against this will be managed via Building User Group (BUG) meetings, the Health and Safety Committee with regular reports to the SMT and Governing Bodies.

This statement, therefore, sets out formally my and the Governing Bodies' acceptance of the duties and responsibilities imposed by the Health and Safety at Works etc. Act 1974 and all supporting legislation to provide a safe and healthy working environment. We will make every effort to ensure such an environment is created and maintained and that no one is placed under unreasonable risk.

As Accountable Officer, I have directed that:

- a) health and safety policies are to be developed and, as often as may be necessary, revised to set a clear direction for the CWHHE CCGs to follow;
- b) effective health and safety management structures are to be integrated within existing management structures to ensure the effective delivery of the H&S policy and relevant components thereof;
- c) ownership of health and safety by all members of staff is established and developed, ensuring that adequate arrangements are made to support managers at all levels within CWHHE to achieve safe systems of work;
- d) management will engage with those, or appropriate representatives thereof, within the ambit of our health and safety policy in the promotion, development and achievement of safe and healthy conditions. As far as possible, the aim is to exceed the minimum statutory health and safety requirements;
- e) health and safety, Fire and Manual Handling Training will be provided to staff;
- f) regular monitoring and audits against the policy and its component parts will be undertaken and reported on; and
- g) regular monitoring mechanisms will be put in place to provide assurance that the CWHHE applies lessons from all its relevant experience. Central to this is everyone's compliance with the requirement for all incidents and near misses to be reported and investigated.

In support of the above I have also directed that all persons in CWHHE be provided with:

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- I. appropriate arrangements for and guidance relating to implement fully the published policies;
- II. appropriate training to ensure competence and compliance in meeting our designated responsibilities and functions and;
- III. competent health and safety advice and support.

Signed

Clare Parker, CWHHE Chief Officer.

Dated: