

## Health and Safety Policy

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Division and Specialty: Corporate, Estates & Facilities

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Title of Person Responsible for Review of Document: Deputy Director Estates &  
Facilities

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Distributed Via: LCHS Public Website and ULTH SharePoint

## Version Control Sheet

Version	Section / Paragraph / Appendix	Version / Description of Amendments	Date	Author / Amended by
V1.0	New Document	Replaces: LCHS: Corporate Health and Safety Policy (P_HS_02) ULTH: Health and Safety Policy (P-05 (Formerly ULH-EST&FAC-H&S-HSP))	September 2025	Philippa Fitzmaurice (Senior Health & Safety Manager)

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## Policy Document Statement

### Background Statement

This Health & Safety Policy describes the system and processes used by United Lincolnshire Hospitals NHS Trust (ULHT) and Lincolnshire Community Health Services (LCHS), hereafter referred to as Lincolnshire Community and Hospitals NHS Group (LCHG – The Group), in its approach to the responsibility of providing a safe and secure environment for patients, the public and staff and others who may be affected by our operations and undertakings across the organisations. This policy is written in accordance with the law and establishes the Trust's standards, to ensure a safe working environment through the implementation of a robust health & safety culture across the Group.

### Key Words

Health and Safety legislation, safe systems of work, safe working environment.

### Responsibilities

Group Chief Executive, Group Chief Clinical Governance Officer, Group Chief Officers, Non-Executive Directors, Deputy Director of Estates & Facilities, Head of Compliance Estates & Facilities, Clinical and Corporate Divisional Leads, Group Board Committees and All Staff

### Training

Health & Safety Team, All Staff.

### Dissemination

This document will be shared with staff by means of internal team meetings, at Health & Safety Committee meetings, Corporate Policies, Communications and ultimately by LCHS Public Website and ULTH SharePoint.

### Resource Implication

Training compliance and audits (as highlighted in the Monitoring Compliance Section) are included to ensure that this policy is adhered to.

### Consultation

This policy does require internal consultation with senior members of staff within Estates and Facilities, and approval by the Group Finance & Performance Committee and by the Group Board.

### Monitoring

There are four minimum requirements to be monitored, of which these are discussed in full within the Monitoring Compliance Section.

### Equality Statement

As part of our on-going commitment to promoting equality, valuing diversity and protecting human rights, Lincolnshire Community and Hospitals NHS

Group is committed to eliminating discrimination against any individual (individual means employees, patients, services users and carers) on the grounds of gender, gender reassignment, disability, age, race, ethnicity, sexual orientation, socio-economic status, language, religion or beliefs, marriage or civil partnerships, pregnancy and maternity, appearance, nationality or culture.

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## 1. Introduction

This document outlines the health and safety management system of the Group's objective. The Group is committed in ensuring the health, safety of all service users and staff, as well as those who may be affected by its operations and undertakings.

The Health and Safety Policy is written in accordance with the law and establishes the Trust's standards, to ensure a safe working environment through the implementation of a robust health & safety culture.

This document is an integral part of the Organisation's culture, of its values and its guiding principles. In achieving this aim, the Group will comply with all the relevant legislation and guidance, and where feasible, will aim to achieve compliance with recognised best practices. The policy is a key component of the Group's internal controls and governance framework as part of a continuous process aimed at helping the organisations within the Group and individuals to reduce the incidence and impact of the health and safety risks they face.

## 2. Purpose

The purpose of this document is to outline the health and safety management system of the Group, providing the relevant information, in accordance with the United Kingdom legislation for the Management of Health & Safety at Work to achieve compliance with the law and feasible benchmarking practices. It also aims to support a culture which encourages continuous improvement and development, considered decision making and a focus on proactive rather than reactive health and safety management to ensure a safe working environment.

## 3. Context

This document is written in accordance with section 2 (3) of the Health & Safety at Work etc. Act 1974 and establishes the Group standards, to ensure a safe working environment through the implementation of a robust health & safety culture.

## 4. Objectives

The overarching aim of the policy is to assure that the Group is providing high quality care in a safe environment, that is complying with national standards, regulatory requirements, and legislation, and that it is meeting its strategic objectives and promoting its values.

Therefore, the key objectives are:

- 4.1. To support and maintain continued compliance with national standards, regulatory requirements and general duties of Health and Safety Legislation.

- 4.2. To clearly define expectations, roles, and responsibilities of all staff to assess risks to the health & safety of employees, and others who may be affected by the work activities.
- 4.3. To provide safe systems of work, creating an environment across the Group which is as safe as is reasonably practicable.
- 4.4. To foster a culture of openness and willingness to report incidents, accidents and near misses and undertake accident/incident investigation.
- 4.5. To provide appropriate role-based training and support in the principles and practices of health and safety management subject to ongoing review.

## 5. Scope

- 5.1. This policy, and all its associated documents applies to all areas and employees, across the Group, including contractors and agency staff, and all other individuals legally entitled to be on our premises. It is the duty of every employee and employer to take reasonable care of themselves and others in order to maintain appropriate health & safety standards.
- 5.2. The Group recognises the importance of the involvement of all employees on health & safety matters and specific requirements of this policy will be achieved through consultation and communication within those groups and individuals that have specific responsibilities about the Health and Safety Policy.

## 6. Compliance

- 6.1. This policy complies with the legislation, standards, guidelines, codes of conduct, and any other relevant document listed in the Referenced Documents' section.
- 6.2. This policy enables the Trust Board to expect those tasked with managing aspects of Health & Safety to:
  - Diligently discharge their Health & Safety legal responsibilities as befits their position.
  - Have in place a clearly defined management structure for the delivery, control, and monitoring of Health & Safety measures.
  - Have in place a programme for the assessment and review of Health & Safety risks.
  - Develop and implement appropriate protocols, procedures, action plans and control measures to mitigate Health & Safety risks, comply with relevant legislation and, where practicable, codes of practice, Health Technical Memorandums, and guidance.

- Develop and implement a programme of appropriate Health & Safety training for all relevant staff.
- Develop and implement monitoring and reporting mechanisms appropriate to the management of Health & Safety.

## 7. Consultation

In accordance with the Health & Safety (Consultation with Employees) Regulations (1996), Safety Representatives, and Safety Committee Regulations 1977, the following mechanisms will be established for consultation and co-operation between Management and Staff Side.

- 7.1. Safety Representatives are nominated by recognised Trade Unions and are recognised by the Trust so that they may be as effective as possible in any tasks they may be involved.
- 7.2. The tasks may include:
  - Supporting Senior Management and / or Team Leaders with the day-to-day management of the health & safety programme in accordance with the legal requirements and Trust's Policies and Procedures.
  - Investigating Hazards, Dangerous Occurrences and Accidents occurring in the workplace.
  - Making representation on matters affecting the health & safety of employees.
  - Undertaking work inspections as deemed necessary.
  - Participating in Health & Safety Annual Audits in partnership with the Line Managers, Team Leaders, and the Health & Safety Team.
  - Consulting with the Health & Safety Executive.
  - Where a department has no accredited Trade Union Health & Safety Representative, a member of staff with an interest in health & safety may represent staff - if supported by a majority of staff in General Consultation. However, this person may not sit on the Health & Safety Committee. When the discussion requires it, the member of staff may be invited to join the Health & Safety Committee to discuss a particular issue. This person will not have the right to vote, as it serves as a witness/advisor on the topic to be discussed.

## 8. Responsibilities

This section details those groups and individuals within the Group that have specific responsibilities about the Health & Safety Policy.

- 8.1. The **Group Chief Executive** as the Accountable Officer is responsible for ensuring an effective system of internal control is maintained to support the achievement of the Group's strategic objectives. This includes:
- Promote continuous improvement through a systematic approach of all hygiene, health & safety standards, which includes setting objectives, systems, and programmes in partnership with the Executive Managers and all relevant stakeholders.
  - Ensure that legal and policy objectives are met by ensuring that suitable and sufficient resources (financial, personnel, equipment, material and other) are available.
  - The Group Chief Executive delegates operational responsibility for health and safety management to Executive Directors, Trust Board members in leading in the communication of health & safety duties throughout the Group.
- 8.2. The **Group Chief Estates & Facilities Officer** as the executive lead for health and safety management is responsible for:
- Establishing and maintaining effective systems for health and safety management across the Group.
  - Providing evidence that health & safety is a key item on the Board agenda. As a "Board Champion" the Group Chief Estates & Facilities Officer will work closely with other relevant Stakeholders to review the implementation of this Policy, as well as reporting on the any issues and/or relevant addition reports regarding health & safety matters to Finance & Performance Committee.
- 8.3. The **Head of Compliance Estates & Facilities is responsible for:**
- Developing, managing, and maintaining Health and Safety Management system for the Group and through the Senior Health & Safety Manager provide support and advice at all levels, on health & safety.
  - Working with the Health & Safety Team, overseeing, and supporting a team of specialists with a diverse range of professional skills and knowledge on health & safety matters. Where specialist solutions are required to resolve Health & Safety issues, the Senior Health & Safety Manager would not necessarily be expected to have the level of skill required but would know the limits of their capabilities and, when necessary, seek specialist advice from an Authorising Health & Safety Specialist. (External).
- 8.4. The **Health and Safety Team is responsible for:**
- Supporting the Divisional and Corporate Teams by providing specialist advice to ensure compliance with health and safety requirements and best practices.

- Implementing Health and Safety Audit to ensure adequate and effective implementation of health & safety legislation, regulations, and standards.
- Provide relevant support in Accident, Incident and Near Miss investigations, analysing health and safety trends, and participating in specialist risk related groups pertinent to the health and safety topic.
- Provide relevant health and safety education and training.
- Assist in the development and/ or review of policies, procedures and protocols that ensure compliance with all health and safety standards.

8.5. **Clinical and Corporate Divisional Leads** are responsible for:

- Ensuring that effective health and safety management systems are in place to manage and monitor health and safety performance within their areas of accountability, demonstrating appropriate escalation as required through relevant Corporate and Divisional Health and Safety and Governance Meetings.
- Establishing responsibilities, commit to, and achieve health & safety targets and objectives, as detailed by business and strategic plans to support the management of their service.
- Demonstrating commitment to continually improve health & safety performance and ensure accurate reporting and recording of all health & safety concerns, e.g. risks, incidents, near misses.
- Monitoring employees and appointed contractors, acting (even disciplinary if justifiable) whenever necessary, to ensure that duties/responsibilities are undertaken in accordance with all health & safety standards.
- Determining shortcomings in training of all employees, self-employed and contractors, to ensure competence to perform their responsibilities/tasks safely.
- Establishing specific and appropriately trained Health & Safety Action Teams supported by a robust structure in the health and safety management of their service.
- Ensure that the premises are prepared for regular inspections, as well as unannounced inspections, of health & safety standards. Communicating health & safety relevant information throughout all departments and services.

8.6. **Every Member of Staff** is responsible for:

- Taking reasonable care of the health & safety of themselves and of others who may be affected by their actions or omissions at work, in

accordance with the Health & Safety at Work etc. Act 1974 and associated legislation.

- Maintaining an awareness of health and safety and have an equal level of responsibility for ensuring health & safety standards within their service in line with this policy.
- The identification and management of health and safety risks that they identify in the course of their duties, as far as is possible.
- Bring to the attention of their line manager any health and safety risks that are beyond their ability or authority to manage.

- 8.7. The **Group Board Committees**, Finance & Performance Committee, People Committee, Transformation and Integration Committee and the Quality Committee, are established as governance committees of the Group Board. The committees' primary role with respect of health and safety management is to seek assurance on behalf of the Group Board that internal control and health and safety management systems are sufficiently robust to ensure the delivery of the Group's strategic objectives. Where there are significant concerns or gaps in assurance or control, the committees escalate these to the Group Board.
- 8.8. The **Group Health & Safety Committee** should support the Group Board and accountable officer by reviewing the comprehensiveness and reliability of assurances on health and safety. The Committee will review the adequacy of the Group's internal control systems for health and safety management and, ensuring that these are effective and comply with safety standards. The responsibilities established in the Constitution and Terms of Reference.
- 8.9. **Specialist Safety Groups** are responsible for providing strategic and operational direction and safety management within the estate of the Group. These groups are a sub-group of the Health & Safety Committee and will provide assurance that the health and safety risks are being appropriately identified, addressed, and managed.
- 8.9.1. **Health & Safety Locality Groups** are responsible for providing and receiving information from Clinical and Corporate Divisional Leads on site performance against compliance with regulations, policies, and procedures, as well as highlighting areas of concern.

## 9. Definitions

Please refer to Appendix A.

## 10. Associated Documentation

- 10.1. This policy defines the essential principles of health and safety management that are applicable throughout the Group. However, the need for more detailed technical and operational instructions, procedures or processes may arise.
- 10.2. Several specialist areas have their own policy and procedural requirements which should be applied in ways that are consistent with this policy. Specialist Staff should be consulted to provide expert advice in consultation processes within their area of responsibility. They will promote the interests of the Group in ensuring that statutory and regulatory requirements are expressed in relevant procedural documents. This includes the following areas for example:
  - Estates & Facilities Compliance
  - Fire Safety
  - Security
  - Risk Management
  - Infection Prevention & Control
  - Emergency Preparedness, Resilience and Response
  - Business Continuity
  - Occupational Health
  - Financial Management
  - Supply Chain Management
  - Workforce Planning
  - Diversity & Inclusivity
- 10.3. All the aforementioned documents must be accessible to all staff, reviewed on a regular basis and approved by the Group Corporate Policies procedural process prior to publishing.
- 10.4. Exceptions to the aforementioned will be situations such as:
  - Operational and/or Legal changes, as well as Enforcement Action, which render the current version of the Policy obsolete.
  - Accidents, Incidents and Near Misses which justify review and changes to health & safety management system.

## 11. References and Other Documentation

1. Health and Safety at Work etc. Act 1974

2. Health and Safety Executive (2013) Workplace health, safety and welfare. Workplace (Health, Safety and Welfare) Regulations 1992.
3. The Management of Health and Safety at Work Regulations 1999
4. The Health and Safety (Consultation with Employees) Regulations 1996
5. Health and Safety Executive (2013) Managing for health and safety (HSG65)
6. Health and Safety Executive (2013) Reporting accidents and incidents at work
7. Health and Safety Executive and Institute of Directors (2013) Leading health and safety at work: actions for directors, board members, business owners and organisations of all sizes.

## 12. Implementation, Monitoring and Compliance

### Training and Support

- 12.1. This policy will be published on the Corporate Policies section of the Groups intranets, where it will be accessible to all staff.
- 12.2. The effective implementation of this policy will facilitate the delivery of a quality service, alongside employee training and support to provide awareness of the measures needed to prevent, control, and contain health and safety risks.
- 12.3. Training sessions in health and safety are provided regularly and by a comprehensive, role-based training needs analysis, as part of the Health and Safety training plan. Additional training, guidance and support may be provided on request. The Health and Safety Team maintain records, via ESR, of actual and expected completion of health and safety training and address and rectify inadequate attendance.
- 12.4. A range of guidance documents and training materials are also published on the Health and Safety intranet pages to support the implementation of this policy.

### Financial Implications

- 12.5. The Group uses a CPD accredited services for training verification, which carries an annual license. Software for Health, and Safety Auditing to host the audit/ risk assessment and investigation packages. This software which carries a three yearly licence and support cost, and the CPD license is included within the Health and Safety budget.

### Monitoring Compliance

Minimum requirement to be monitored –	Process for monitoring	Responsible individuals/	Frequency of monitoring/	Responsible individuals/ group/ committee for review
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<b>monitoring against standards set out in policy</b>	<b>e.g. audit</b>	<b>group/ committee</b>	<b>audit/ reporting</b>	<b>of results and determining actions required</b>
Review of health and safety risks and compliance with HTM Standards	Review Audit Reports	Specialist safety groups	Monthly	Lead assurances/ Health & Safety Committee
Evaluation of the effectiveness of health and safety management standards.	Reports	Health & Safety Committee	Quarterly	Lead assurance committees / Group Board
Reporting of minimum requirements / process for communication	Audit	Site based forums/ specialist safety groups  Health & Safety Committee	Annual	Lead assurance committees / Group Board
Statutory Duties in taking all practicable measures to create a safe and healthy work environment.  This duty extends to individual employees and other workers	Audit  Incident reporting	Clinical and Corporate Divisional Leads  Every Member of Staff	Escalation as required through relevant Corporate and Divisional Governance Meetings	Lead assurance committees / Group Board

## Review of Document

July 2028

## Appendix A – Definition of Terms

<b>HSE</b>	Health & Safety Executive	Departmental Public Body responsible for encouragement, regulation and enforcement of Health & Safety, Health Risks and Welfare in the Workplace
<b>RIDDOR</b>	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013	Statutory Instrument of Parliament. Employers, self-employed and those in control of premises are required to report serious accident, accidents who cause absence for over 7 days, or suspicion of diseases and dangerous occurrences which may result in serious harm or death.
<b>Control(s)</b>	Health and safety controls	Existing strategies and processes currently in place such as systems, policies, procedures, standard business processes and practices to manage the likelihood or impact of a risk. Controls are intended to minimise the likelihood or severity of a risk. An effective control will always reduce the probability of a risk occurring. If this is not the case, then the control is ineffective and needs to be reconsidered.
<b>Audit</b>	Health and Safety Audit arrangements are detailed in appropriate documents of a technical and operational nature.	Audits will be implemented annually as a performance measurement tool of the health & safety management system identified within this policy.
<b>Datix Risk Management System</b>	The software application that hosts LCHG risk registers.	Software used by the Group to report and investigate incidents; manage risks; and undertake Mortality reviews.
<b>ULTH</b>	United Lincolnshire Teaching Hospitals	
<b>The Group - LCHG</b>	Lincolnshire Community and Hospitals NHS Group	

## Appendix B – Equality and Health Inequality Impact Assessment Tool

This tool has been developed by the Equality, Diversity and Inclusion Leads for use in the NHS Provider organisations in Lincolnshire. The tool is designed to ensure due regard is demonstrated to the Equality Act 2010, the Public Sector Equality Duty and potential health inequalities are also identified and addressed (as outlined in the Health and Social Care Act). Please complete all sections below. Instructions are in **bold** Email for all correspondence: email to [lhnt.edifirst@nhs.net](mailto:lhnt.edifirst@nhs.net)

### Service or Workforce Activity Details

Description of activity	Group Health and Safety Policy
Type of change	Start new
Form completed by	Philippa Fitzmaurice, Senior Health & Safety Manager
Date decision discussed & agreed	July 2025
Who is this likely to affect?	<p>Service users x      Staff x      Wider Community x</p> <p><i>If you have ticked one or more of the above, please detail in section B1, in what manner you believe they will be affected.</i></p>

### Equality Impact Assessment

Complete the following to show equality impact assessment considerations of the decision making to ensure equity of access and to eliminate harm or discrimination for any of the protected characteristics: [age](#), [disability](#), [gender reassignment](#), [marriage and civil partnership](#), [pregnancy and maternity](#), [race](#), [religion or belief](#), [sex](#), [sexual orientation](#). Further, please consider other population groups which are at risk of health inequality and can include, but not be limited to, people who are; living in poverty / deprivation, geographically isolated (e.g. rural), carers, armed forces, migrants, homeless, asylum seekers/refugees, surviving abuse, in stigmatised occupations (e.g. sex workers), use substances etc.

Please ensure you consider the connections (intersectionality) between the protected characteristics and population groups at risk of health inequality (e.g. it is recognised that older men from a BAME background, with one or more comorbidities and living in deprivation are more at risk of a poorer outcome if they contract CV-19).

How does this activity / decision impact on protected or vulnerable groups? (e.g. their ability to	The principles and standards described in this policy should be used throughout the Group to identify and manage the Health & Safety of all staff, patients and visitors, as well as those who may be affected by its
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access services / employment and understand any changes?) Please ensure you capture expected positive and negative impacts.	operations and undertakings. Consistent application of this Policy will support every employee to take reasonable care of themselves and others in order to maintain appropriate health & safety standards. Conversely, if this Policy is not applied consistently then it is likely such risks will not be identified and addressed appropriately and as a result members of protected or vulnerable groups may be adversely affected
What data has been/ do you need to consider as part of this assessment? What is this showing/ telling you?	There is no specific data that is relevant to the application of this Policy in the context of equality and health inequality. The Policy describes internal business processes that should be applied when making decisions in any part of the organisation and as such does not differentiate between those who are members of protected groups, or vulnerable, and those who are not.

### Risks and Mitigations

What actions can be taken to reduce / mitigate any negative impacts? (If none, please state.)	There are no negative impacts identified in relation to the application of this Policy. This document is to be made available to relevant Trust employees at all times. Managers must ensure that staff have read and are aware of the content of this policy.
What data / information do you have to monitor the impact of the decision?	Regulation 3(1) of the Management of Health and Safety at Work Regulations 1999 requires employers to make suitable and sufficient assessment of the risks to the health and safety of their employees whilst at work. Data that is relevant to each particular risk is used when conducting a risk assessment and when measuring the impact of risk reduction plans.

### Decision/Accountable Persons

Endorsement to proceed?	Yes
Any further actions required?	No
Name & job title accountable decision makers	Mike Parkhill, Group Chief Estates and Facilities Officer
Date of decision	July 2025
Date for review	July 2028

## Purpose of the Equality and Health Inequality Assessment tool

- The NHS in Lincolnshire has a legal duties under the Equality Act 2010, Public Sector Equality Duty 2011 and the Health and Social Care Act 2012 to demonstrate due regard in all decision making, for example, when making changes to services or workforce practices, to ensure access to services and workforce opportunities are equitable and to avoid harm and eliminate discrimination for each of the protected characteristics and other groups at risk of inequality.
- Within the guidance toolkit there are also some examples of decisions this tool has been used on in other organisations and the impacts they have identified.

## Checklist

- Is the purpose of the policy change/decision clearly set out?
- Have those affected by the policy/decision been involved?
- Have potential positive and negative impacts been identified?
- Are there plans to alleviate any negative impact?
- Are there plans to monitor the actual impact of the proposal?

This form is based on a template produced by Cambridge University Hospitals NHS Trust and used with their kind permission. Draft NHS Lincolnshire EDI System 2.1

## Signature Sheet

Names of people consulted about this policy:

Name	Job title	Department
Mike Parkhill	Group Chief Estates and Facilities Officer.	Estates and Facilities
Chris Davies	Deputy Director of Estates and Facilities	Estates and Facilities
Vince Tennison	Head of Compliance Estates and Facilities	Estates and Facilities
Stuart Whitehead	Head of Estates	Estates and Facilities
Staff Side Representatives	Staff Side Representatives	Staff Side Representatives
Various representatives as listed in the minutes of 16 July 2025	Health & Safety Committee Members	Various

Author(s) confirm that they have collected all the signatures, as listed above, email Corporate Governance at [ulth.corporate.policies@nhs.net](mailto:ulth.corporate.policies@nhs.net) (ULTH) / [lhnt.policies@nhs.net](mailto:lhnt.policies@nhs.net) (LCHS)

**YES**

Names of committees which have approved the policy	Approved on
Health and Safety Committee	16 July 2025