Workplace health environmental audit

Introduction

Work carried out by the Health Development Agency (HDA) on behalf of the Department of Health\(^1\) as part of the Health at Work in Primary Care project identified a good physical environment as one of the key contributors to workplace health.

A workplace health environmental audit identifies and evaluates hazards, plans to remove or reduce them and puts those plans into action.

The HDA report showed that carrying out a workplace health environmental audit had a positive impact on achieving a good working environment through:

- providing information
- providing a baseline for interventions and for upgrading facilities and the environment
- contributing to improving the standards of care and the environment in which it is delivered
- highlighting the differences between perception and reality in practice
- assisting with bids for resources
- promoting higher standards of care
- improving effectiveness
- improving efficiency
- improving education
- creating pride in achieving change.

Minimum standards

The Workplace Health, Safety and Welfare Regulations 1993 set out minimum standards for workplaces and stipulate that they must be suitable for all employees. This has been updated in the case of access and disabled staff and patients by the introduction of the Disability Discrimination Act 1995. The 1993 regulations outline duties of organisations in respect of:

\(^1\) Workplace health environmental audit report: A guide to tools appropriate for primary care facilities (2002), HDA
• maintenance
• ventilation
• temperature
• lighting
• cleanliness
• space
• workstations
• floors
• walls
• windows
• doors
• toilets
• washing
• water
• clothing
• rest rooms.

**Employee responsibilities**

There is a legal responsibility on employers to provide suitable and safe working environments. For all employers in the NHS, whether a trust or GP practice, there is a legal requirement to comply with:

• Health and Safety at Work etc Act 1974
• Management of Health and Safety at Work Regulations 1993
• Display Screen Equipment Regulations 1993
• Manual Handling Operations Regulations 1993
• Personal Protective Equipment at Work Regulations 1993
• Provision and Use of Work Equipment Regulations 1993
• Workplace Health Safety and Welfare Regulations 1993
• Fire Safety (HSC1999/191)
• Disability Discrimination Act 1995 (aspects on Access to premises)

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2 *The Health and Safety Six-Pack (updated Sep 2000), Unison*
Control of Substances Hazardous to Health Regulations

Environmental Protection Act 1990.

Both the Department of Health and the Health and Safety Executive recommend using the audit approach as a means of ensuring compliance with regulatory requirements.

Getting started

While audits do take some time to complete and may indicate the need for some financial investment, the process is straightforward, does not require large amounts of specialist knowledge and provides stages to be followed and documented.

Audits, when properly carried out, also ensure that NHS organisations are meeting their legal obligations and following good practice. Some organisations may decide to buy in the services of a consultant to carry out their audit, while others will rely on the in-house expertise of their health and safety or estates advisers.

Organisations buying in services will want to ensure that the service provider is sufficiently qualified and experienced to provide a comprehensive service, and will need to agree to a clear brief of what is expected.

In-house staff who are familiar with the buildings and how the staff using them work on a daily basis, can often provide a comprehensive and understanding audit. An added benefit of self-audit is that it acts as a learning tool for those carrying it out.

Structure

There are many audit tools available on the market and online. The majority incorporate a cycle that was described by the Health at Work in Primary Care publication as a sequence of six steps:

- observing the practice
- setting up support structures, objectives and standards
- gathering information
- comparing performance with the standard
- implementing change
- monitoring the effects of change.

Objective setting and ‘follow through’

The fundamental objective for a workplace health environmental audit is to prevent foreseeable workplace hazards, or to control them where that is not
possible. This is done in a systematic way by identifying and evaluating the hazards, planning how best to remove or reduce them and then putting the plan into action. All stages of the process should be recorded fully, with the records kept for future reference and for perusal by the local health and safety inspectorate should they request it.

The important part of this process from a legal and litigation perspective is putting the plan into action – the ‘follow through’.

In certain circumstances, the use of a self-audit can cause problems of interpretation between the organisation and the health and safety inspectorate.\(^3\) Invariably these problems will be in cases where an employer has identified a problem via audit and then failed to act upon it.

If an injury subsequently occurs, the paper trail will show that the employer knew of the risk but failed to do anything about it. The local advice may have been that the risk was small enough to delay implementing action to rectify it, but it is important that they can show why a risk was considered to be too small to be dealt with immediately. All decisions of this sort are, to some extent, subjective so it is particularly important that organisations have strategies in place to follow through on identified risks and be prepared to take immediate action if a serious risk is identified.

A risk management plan showing all risks that have been identified, categorised by importance and showing when they will be re-assessed or dealt with, will prove very useful in any conversation with the local Health and Safety Executive (HSE) inspector.

Access

An access audit is a measure of how well an environment and method of service delivery meets the needs of its users. It identifies barriers to access and provides a basis for developing an access plan, to make adjustments.\(^4\)

Access audits should be carried out on a regular basis, referring back to previous audits and, hopefully, an original access plan. The Centre for Accessible Environments (CAE) recommends the development of ongoing access plans and regular monitoring of use and problems. It has published a guide to undertaking this\(^5\), which incorporates advice endorsed by the Royal Institute of British Architects, the Royal Institution of Chartered Surveyors, the Access Association and others.

Service providers have been under a legal obligation since 2004 to make reasonable adjustments to the physical features of premises to overcome barriers to access for people with a disability.

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\(^3\) McDaniel, J.L. (2000), 'Auditing OSHA: proposed self auditing policy' in Occupational Health and Safety USA 69(3): 80-81

\(^4\) Factsheet 2: Access Audits. Centre of Accessible Environments (CAE)

\(^5\) Access Audits: a guide and checklists for appraising the accessibility of public buildings (1999), Centre for Accessible Environments (CAE)
Physical features include:

- anything on the premises arising from a building’s design or construction, or from an approach to, exit from or access to a building
- fixtures, fittings, furnishings, furniture equipment or materials
- any other physical element or quality of land in the premises

**Sustainable development**

All government departments and non-departmental public bodies should consider how they contribute to environmental protection and sustainable development.

NHS Estates, in line with central government and the Department for Trade and Industry, has five sustainable development target areas:

- energy conservation
- waste reduction
- healthy transport
- water conservation
- procurement/contracts.

NHS developed NHS Environmental Assessment Tool (NEAT) software, available for use across a range of differently-sized NHS organisations.

NEAT is an Excel-based programme that is designed to help raise awareness of the impact NHS facilities and services has on the environment, and to estimate the level of environmental impact taking place. It is a self-assessment tool that allows staff to carry out the assessment without needing to call in a specialist, making it quick to carry out, at a relatively low cost. It provides a holistic approach to environmental assessments, dealing both with new builds and refurbishments, and existing sites. This tool can be used to set and monitor targets for improvements in environmental performance.

The following publications are available to assist NHS organisations in meeting sustainable development targets:

- *Sustainable development in the NHS* (2002), NHS Estates

**More information**

The Health and Safety Executive
www.hse.gov.uk

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HSE publications  
www.hsebooks.co.uk

The Royal Society for the Prevention of Accidents (RoSPA)  
www.rospa.co.uk

The Environment Agency  
www.environment-agency.gov.uk

The Centre for Accessible Environments  
www.cae.org.uk

The United States Occupational Health and Safety Administration provide a range of useful tools online, which can be used for assessments in the UK provided that account is taken of the differences in US and UK health and safety legislation. See www.osha.gov/oshprogs

The Building Research Establishment provides guidance and training  
www.bre.co.uk

The British Safety Council provides general information on health and safety issues www.britishsafetycouncil.co.uk

The names of consultants who will carry out assessments can be obtained from the Chartered Institute of Environmental Health (CIEH)  
www.cieh.org