

Workplace health and safety standards webinar.

16th March 2023

12:00pm - 1:30pm





Speakers



Kim Sunley

Staff side chair of HSWG and Health, Safety and Wellbeing National Officer at the Royal College of Nursing



Jenny Michael

Management side chair of HSWG and Health, Safety & Wellbeing Manager Portsmouth Hospitals University NHS Trust



Martin McMahon

HM Inspector of Health and Safety at the Health and Safety Executive



Stewart Crowe

Assistant Director of Health and Safety at Liverpool University Hospital NHS Foundation Trust



Agenda

Item	Time
Chair's welcome Kim Sunley, Staff Side Chair of NHS Staff Council Health, Safety and Wellbeing Group	12:00
Findings from the HSE inspections of NHS Trusts/Boards (2018-2022) on the management of risk from musculoskeletal disorders and violence and aggression Martin McMahon, HM Inspector of Health and Safety	12:10
How we are implementing the NHS Workplace Health and Safety Standards to improve the management of risk Stewart Crowe, Assistant Director of Health and Safety at Liverpool University Hospital NHS Foundation Trust	12:35
Questions & answers	13:00
Chair's reflections Jenny Michael, Management Side Chair of the NHS Staff Council Health, Safety and Wellbeing Group	13:20
Close	13:30





NHS Staff Council





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Management of risk from Musculoskeletal Disorders and Violence and Aggression

Findings from HSE Inspections 2018-2022

Martin McMahon HM Inspector of Health and Safety
Health and Social Care Services Unit





 60 NHS Trusts and Boards inspected between 2018-22 on management of MSDs and V&A risk

- Aligned with HSE Health and Work priorities
 - Work related Stress (WRS) and MSDs most reported causes of occupational ill health in GB
 - Workplace V&A a stressor and contributor to WRS
- Thorough management review based on 'Plan, Do, Check, Act' principles
 - Pre visit documentation review
 - numerous levels of engagement through Board to Frontline
 - feedback directly to senior management / Directors

MSDs and V&A NHS Inspections Enforcement summary



Material Breach Rate				
	MSDs	V&A		
2018-19	10 (50%)	11(55%)		
2019-20	11 (55%)	14 (70%)		
2021-22	7(35%)	11 (55%)		
TOTAL	28 (47%)	36 (60%		

Includes:

- 9 INs in 2018-19 (5 for MSDs, 4 for V&A, across 2 organisations)
- 17 INs in 2019-20 (9 for MSDs and 8 for V&A, across 10 organisations)
- 9 INs in 2021-22 (6 for MSDs and 3 for V&A, across 4 organisations)
- 38 organisations had enforcement taken 26 for both MSDs and V&A
- Caution not to place too much weight on enforcement level trends as a small numerical change on small sample can have significant % impact
- Can be said that MSDs and V&A remain significant issues within healthcare

Analysis



- Inspections identified a range of issues that can be categorised into four broad areas
 - Risk assessment
 - Training
 - Roles and Responsibilities
 - Monitoring and Review
- In general whilst policies and procedures in place ('Plan, Do'), less evidence these are monitored and reviewed to ensure they are still effective ('Check', 'Act')
- Leadership crucial

Positives



- 22 (37%) out of 60 visits had no formal enforcement action taken
 - Even where action was taken there was still compliance with other duties
- Although caution with a low sample, there was a drop in formal enforcement between campaigns in 2019-20 and 2021-22
 - 55% to 35% for MSDs
 - 70% to 55% for V&A
- Some innovative practice observed
 - Designing out manual handling risk when developing new hospital facility
 - Innovative IT solutions for tracking course attendance and equipment maintenance
 - Effective environmental measures to descale risk of violence (soothing décor in dementia wards, clear signage, screen with updated waiting times in A&E)

Proposed next steps



Communicating findings to sector

Sample interventions

 Look out for HSE health and social care services ebulletin for more detail – subscribe at <u>HSE: Latest news on health</u> and safety at work



Management of risk from Musculoskeletal Disorders and Violence and Aggression

HSE Inspections 2018-2022

Martin McMahon HM Inspector of Health and Safety
Health and Social Care Services Unit
THANK YOU!

Liverpool University Hospital





Liverpool University Hospital

How we are implementing the NHS Workplace Health and Safety Standards to improve the management of risk

Stewart Crowe BSc (Hons) MBA CFIOSH Ass. Director of Health and Safety Liverpool University Hospital NHS Foundation Trust













THE NHS STAFF COUNCIL

WORKING IN PARTNERSHIP

HEALTH, SAFETY AND WELLBEING PARTNERSHIP GROUP

Workplace health and safety standards



Updated 2022



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NHS Standards content

Workplace health and safety standards

K. Hazardous substances

Standard	Employers have effective arrangements in plac Hazardous substances include both chemical al patients, and others. Examples include: Exposure to blood borne viruses, such as HI Exposure to wet work, causing skin disease Handling of chemicals such as formaldehyde Handling of cleaning and maintenance proc Exposure to infectious diseases such as SAR		
Rationale			
Legal Reference	Reference Health and Safety at Work Etc Act Control of Substances Hazardous t Management of Health and Safety Personal Protective Equipment at RIDDOR - Reporting of Injuries, Disea		
Criteria	Evidence	Lega	
The organisation has current policies and procedures for the control of chemical and biological hazards.	Policies and procedures	Manag	
Where employees are likely to be exposed to substances hazardous to health, suitable and sufficient risk assessments have been completed.	Risk register Risk management policy COSHH assessments	Contr Manag	
The organisation has taken steps to prevent or adequately control exposure to substances hazardous to health using risk hierarchies.	COSHH assessments Policies and procedures	Contro	

Workplace health and safety standard

Criteria	Evidence
The organisation has safe systems of work and	COSHH asse
procedures to ensure that control measures	Inspection i
are properly used or applied.	Maintenand
The procedures should include:	
 visual checks and observations at appropriate intervals 	
 ensuring that where more than one item of PPE is being worn, the different items are compatible with each other 	
 supervising employees to ensure that the defined methods of work are being followed 	
 prompt remedial action where necessary. 	
The organisation has an effective Respiratory Protection Equipment (RPE) Programme which	COSHH asse
ensures safe RPE is provided and used properly when required. It should include the following:	RPE assessm
 Clear oversight of and definition of duties within the programme 	
 Suitable and sufficient risk assessment process that justifies use of RPE 	
Correct RPE selection and use	
 Effective cleaning, maintenance, and storage of RPE 	
Monitoring and review of programme to ensure it remains effective	

Workplace health and safety standards

	The organisation has an effective fit testing programme to ensure tight fitting respirators selected are suitable for the wearer.	COSHH assessments RPE assessments	Control of Substances Hazardous to Health Regulations 2002, Regulation 7
•	This should include: Clear responsibility within organisation for fit testing programme oversight, monitoring and review Sufficient resources provided to carry out fit testing (e.g., accommodation, equipment, materials, personnel) Competency of those providing fit testing Fit testing Record keeping compliant with requirements of INDG479 Effective RPE storage arrangements	Fit testing records Fit2Fit accreditation of fit testers (NB Fit2Fit accreditation is not mandatory but is recognized by HSE as way to demonstrate competency)	
	Where appropriate, the organisation has systems in place to ensure control measures are maintained, tested, and examined. Control measures should be observed regularly to check that they are being followed. They should be reviewed periodically to ensure that they remain appropriate.		Control of Substances Hazardous to Health Regulations 2002, Regulation 9 Personal Protective Equipment at Work Regulations 1992, Regulation 7



Why - safety culture: Looking after our people to look after our patients













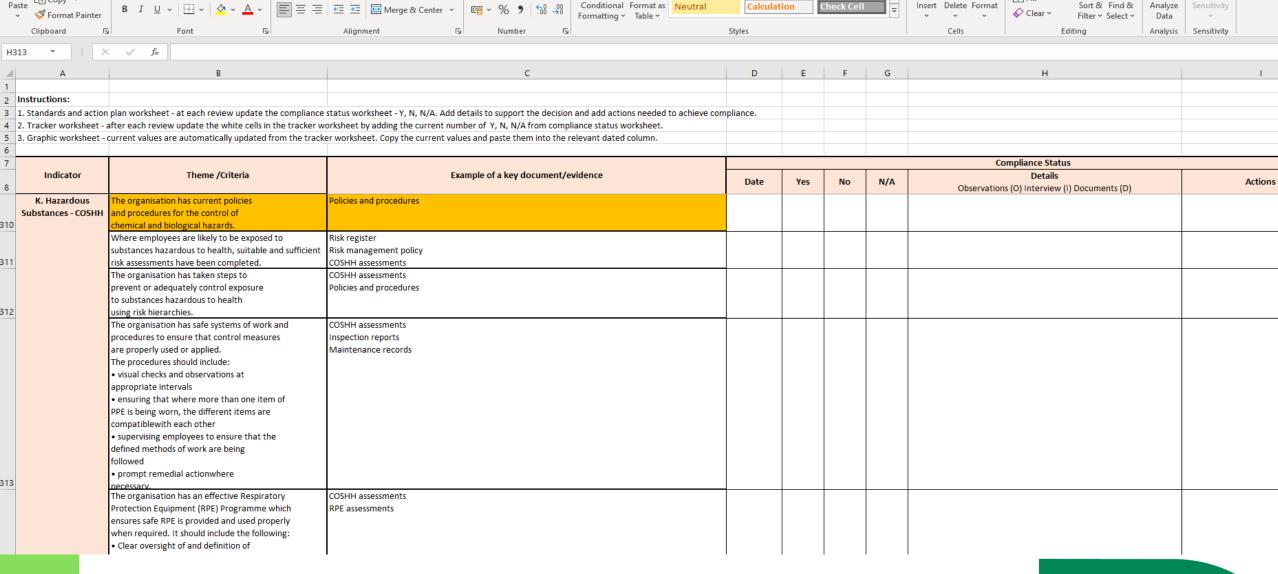




Getting started!

- Adopting the NHS Workplace Health and Safety Standards
- Audit process
 - Scoping
 - Planning
 - Review and testing
 - Findings and recommendations
 - Concluding the audit







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Analyze

A	1 - :	× ✓ f _x	f _x						
		A	В	С	D	E	F	G	н
	E1. Musculoskeletal								
	disorders/Manua	l Handling							
77			Musculoskeletal Disorders/Manual Handling	10	6	4	0	10	60%
78			Sub Total	10	6	4	0	10	60%
	F1. Electric Profili	ing Beds							
80			Electric Profiling beds	4	3	1	0	4	75%
81			Sub Total	4	3	1	0	4	75%
	G1. Violence &								
	aggression/challe	enging behaviour							
82									
83			Violence & aggression/challenging behaviour	11	5	6	0	11	45%
84			Sub Total	11	5	6	0	11	45%
	H1. Lone Working	3							
86			Lone Working	7	5	2	0	7	71%
87			Sub Total	7	5	2	0	7	71%
88	I1. Work Related	Stress							
89			Work Related Stress	10	6	4	0	10	60%
90			10	6	4	0	10	60%	
	92 Bullying & Harrassment								
92			8	3	5	0	8	38%	
93			Sub Total	8	3	5	0	8	38%
94	K. Hazardous Mat								
95			COSHH	13	6	7	0	13	46%
96			Management of Sharps	10	4	6	0	10	40%
97			Sub Total	23	10	13	0	23	43%
98	L. Work Equipme	nt		_	_	_	_	_	
99			Provision & use of work & lifting equipment	7	5	2	0	7	71%
100			Display screen equipment	10	7	2	0	9	70%
101	no The Martin	_	Sub Total	17	12	4	0	16	71%
	M. The Workplace	e			_				7506
103			8	6	2	0	8	75%	
104			Asbestos Containing Materials (ACMs)	9	8	1	0	9	89%
105	·		6	4	2	0	6	67%	
106			6	3	3	0	6	50%	
107	-			9	7	2	0	9	78%
108			Noise & vibration	6	2	4	0	6	33%
109			Contractors & subcontractors	7	3	4	0	7	43%
110			Sub Total	51	33	18	0	51	65%
	Inst	tructions Action	Plan Tracker Graphic +						

Ready % Accessibility: Investigate

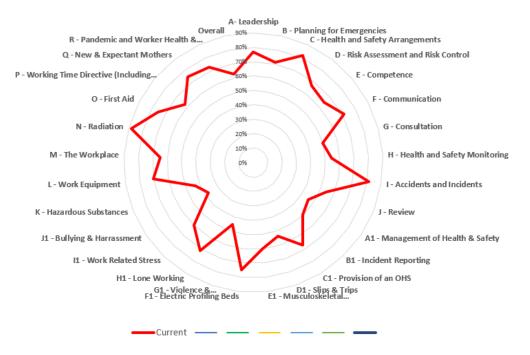


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Indicator	Current				
A- Leadership	77%				
B - Planning for Emergencies	71%		 	 	
C - Health and Safety Arrangements	82%		 	 	
D - Risk Assessment and Risk Control	67%	•	 	 	
E - Competence	65%	•	 	 	
F - Communication	71%		 	 	
G - Consultation	50%			 	
H - Health and Safety Monitoring	55%		 	 	
I - Accidents and Incidents	81%		 	 	
J - Review	55%				
A1 - Management of Health & Safety	46%				
B1 - Incident Reporting	50%			 	
C1 - Provision of an OHS	67%				
D1 - Slips & Trips	54%				
E1 - Musculoskeletal					
Disorders/Manual Handling	60%				
F1 - Electric Profiling Beds	75%				
G1 - Violence &					
Aggression/Challenging Behaviour	45%				
H1 - Lone Working	71%				
I1 - Work Related Stress	60%				
J1 - Bullying & Harrassment	38%				
K - Hazardous Substances	43%				
L - Work Equipment	71%				
M - The Workplace	65%				
N - Radiation	88%				
O - First Aid	75%				
P - Working Time Directive					
(Including Night Workers)	63%				
Q - New & Expectant Mothers	75%				
R - Pandemic and Worker Health &					
Safety	73%				
Overall	63%				

Health, Safety & Wellbeing Group

% Compliance by Indicator







The audit identified the following standards could not be adequately evidenced in order for the auditor to deem the particular NHS WPHSS standard was achieved.

PHASE	INDICATOR		THEME				
Act	K: Categories	ategories K29 Occupational Health					
		Question					
	NHS WPHSS 29.03.01	consultant in oc	ealth Services which are not I cupational medicine should h o receive advice from one in t	ave in place			
		Risk Treatmen	t				
	1561	Ensure remedia completed.	I actions when set are review	ed to ensure they are			
		Ву	e-Mail	Date			
		Rik	rik@montgomeryandc	oupers.co.uk 30/11/202			
Act	K: Categories		K30 Slips and Trips				
		Question					
	NHS WPHSS 30.03.08	There is regular policy and proce	monitoring of compliance witedures.	h the slips and trips			
		Risk Treatmen	t				
	1394	Annual and six weekly area monitoring dataset needs to be updated to include more specific questions around slips, trips and falls.					
		Ву	e-Mail	Date			
		Ann White	rik@montgomervandc	oupers.co.uk 01/12/202			

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The NHS Workplace Health Health and Safety Standard

Audit: Aintree Univers

Accident & Emerger

Executive Summary

A 'profile' summary of the assurance level achieved during the audit folk graphical representation of where the audit identified gaps in existing sta along with recommendations follow within the main report.

	Indicator	Theme	Target	Basi
Plan	A: Leadership	A1 Health and Safety Policy	High	
		A2 Management Commitment and Engagement	High	
		A3 Risk Profile	High	
		A4 Objective Setting	High	
	B: Planning for Emergencies	B5 Emergency/Incident Management	External	
		B6 Procedures for Immediate Response	High	
		B7 Procedures for Recovery	High	
Do	C: Health and Safety Arrangements	C8 Institutional Arrangements	High	
		C9 Local Arrangements	High	
	D: Risk Assessment and Risk Control	D10 Hazard and Risk Register	High	
		D11 Arrangements for Risk Assessment	High	
		D12 Application of Risk Assessment Arrangements	High	
		D13 Implementation of Controls	High	
	E: Competence	E14 Health and Safety Training	High	
		E15 Health and Safety Competency	High	
	F: Communication	F16 Institutional Communication	High	
		F17 Local Communication	High	
	G: Consultation	G18 Institutional Consultation	High	
		G19 Local Consultation	High	
Check	H: Health and Safety Monitoring	H20 Inspection/Audit	High	
		H21 Action Tracking	High	
		H22 Statutory Checks (equipment)	High	
		H23 Data Collection and Analysis	High	
	I: Accidents and Incidents	I24 Accident and Incident Arrangements	High	
	indend	I25 Compliance with Arrangements	High	
		I26 Conduct of Investigations	High	
Act	J: Review	J27 Review	External	
		J28 Improvement Planning	High	
	K: Categories	K29 Occupational Health	High	
		K30 Slips and Trips	High	
		K31 Musculoskeletal	High	
		Disorders/Manual Handling K32 Electric Profiling Beds	High	
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Introduction

This management standard referred to as the NHS Workplace Health & Safe WPHSS) has been developed for use across the Liverpool University Hospitals (LUHFT) by the Health & Safety Team. It is based on the Health and Safety Exe Successful Health and Safety Management (HSG 65) and aligned to BS ISO 45001: Health and Safety Management Systems. It incorporates all aspects of the Wor Safety Standards as developed by the Health, Safety and Wellbeing in Healthcare (HSWPG).

This standard provides a framework to develop a Trust wide Health and Safety Ma and a flexible approach to measuring the level of assurance across hospitals, functions based on a variety of risk profiles that exists across the Trust. It p requirements and provides guidance to help individual functions to comply with 'goa and provides practical pointers and signposting for meeting appropriate standar workforce health and safety.

Audit Purpose

The purpose of a health and safety audit (an audit being defined as 'a systemati review of evidence') is to provide assurance to the Senior Leadership that health adequately managed.

At its heart, the NHS WPHSS standard provides a description of how health a managed, it maps to the third edition of HSG65 (the HSE's guidance on mar safety) and Workplace health and safety standards developed by The NHS Staff (Partnership, Health Safety and Wellbeing Partnership Group.

Many of the standards and criteria presented within this standard represent specifi requirements, while others provide guidance on how organisations can comply with setting' legislation. Whilst some of the criteria in the standards may not always be required by the legal references, by following them you will normally be doing enor the law. You are free to take other action to meet these legal requirements.

The standard is divided into modules called 'Indicators' each of which maps to H Check, Act'. The Plan, Do, Check, Act approach aims to achieve a balance bet and behavioural aspects of management. It also treats health and safety manager part of good management generally, rather than as a stand-alone system.

Briefly

- · Plan: say what you want to happen
- . Do: make sure there are systems in place to provide the tools and equipme
- . Check: make sure the work is being done safely
- . Act and learn: listen to problems and successes and make improvement

Each Indicator is divided into themes. In collaboration with the Health and Safe each Hospital, Division Department or Function which is subject to the audi Indicators to use. Whilst you can, it is not necessary to select all indicators for ev adopt whichever Indicators you feel represents the most value to your institution

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	NHS WPHSS 40.02.02	Substantial	The organisation should perform a suitable and sufficie assessments of all workstations which are: used for th purpose by "users" - provided by them and used for the purpose by "operators". An assessment should be revi	eir eir ewed	,
	NHS WPHSS 40.02.03	Substantial	All workstations should meet the requirements laid dow the schedule to the Regulations.	m in 🗸	,
	NHS WPHSS 40.02.04	Substantial	Organisations should plan the activities of "users" so the they are able to take frequent breaks or changes in act		,
	NHS WPHSS 40.02.05	Substantial	If appropriate, "users" have access to (at their employe expense), an eye and eyesight test by a competent per and at regular intervals thereafter.		,
	NHS WPHSS 40.02.06	Substantial	The organisation should provide "operators" and "users adequate health and safety training in the use of any workstation where they are required to work.	s" with	,
	NHS WPHSS 40.02.07	Substantial	The organisation should provide 'operators' and 'users adequate information to ensure their safety whilst using workstations.		,
	NHS WPHSS 40.03.01	High	The organisation consults and involves staff and safety representatives at all stages of risk assessment plannir implementation.		,
	NHS WPHSS 40.03.02	High	There is regular monitoring of compliance with the DSE policies and procedures. K41 Workplace - Legionella	~	,
	NHS WPHSS 41.01.01	Basic	Workplace - Legionella	✓	,
	NHS WPHSS 41.02.01	Substantial	The organisation has policies and procedures in place managing the risk from legionella.	for 🗸	,
	NHS WPHSS 41.02.02	Substantial	A competent person who leads on managing the risk fr Legionella is identified and receives adequate training.	om 🗸	,
	NHS WPHSS 41.02.03	Substantial	Suitable and sufficient assessments are in place to ass the risk of bacterial growth.	ess 🗸	,
	NHS WPHSS 41.02.04	Substantial	Reasonably practicable control measures for reducing bacterial growth are implemented for all cooling towers and cold-water systems or any other equipment which pose a risk.		•
	NHS WPHSS 41.02.05	Substantial	Maintenance of systems, services and equipment is in to ensure that the controls measures remain effective, actions or remedial work identified to reduce the risk is carried out in a timely manner.	Any 🔻	
	NHS WPHSS 41.02.06	Substantial	Records of the assessment and precautionary measure treatments are kept.	es and 🗸	,
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Looking after our people to look after our patients



Staff Culture of Safety



Patient Safety



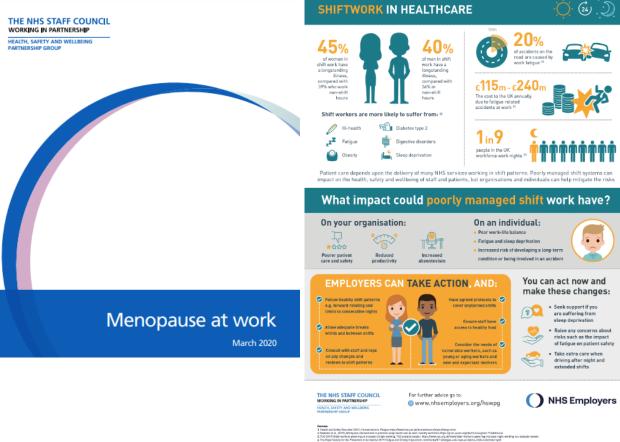


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Questions?









21 November 2022

The health, safety and wellbeing group's (HSWG) resources can be found on the NHS Employers website.





Thank you.



