

NHS Tees Valley Clinical Commissioning Group

Health and Safety Strategy 2020/23

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1. Introduction

- 1.1 The CCGs work together with our population, staff and stakeholders to deliver better health. This Strategy reflects the Governing Body's commitment to improving health, safety and wellbeing for the benefit of employees, students, contractors, visitors and members of the general public.
- 1.2 We will, so far as is reasonably practicable, establish procedures and systems necessary to implement this strategy and to ensure compliance with legal and statutory obligations under the Health and Safety at Work Act etc 1974 and the requirements of Health Service Guidelines 65 (HSG65) – 'Successful Health and Safety Management Standard'.
- 1.3 The wellbeing of staff is influenced by the environment in which they work and the health and welfare facilities available to them. The CCGs will take a structured approach to ensuring that we provide our staff with an environment conducive to good health and provide the opportunity to improve their own health and wellbeing.
- 1.4 The adoption and embedding within the organisation of the strategy and associated processes will also ensure that the reputation of the CCGs as an employer is maintained, which can positively influence its business success.
- 1.5 It is acknowledged that not all health and safety risks can be eliminated. Ultimately it is for the organisation to decide which risks it is prepared to accept based on the knowledge that an effective risk assessment has been carried out and the risk has been reduced to an acceptable level as a consequence of effective controls.

2. Context of the Health, Safety and Wellbeing Strategy

2.1 National context

- 2.1.1 **Health and Safety Legislation** – The Health & Safety at Work etc Act 1974 supported by subordinate legislation (outlined at section 7) sets out the legal health and safety responsibilities. The CCGs are responsible for ensuring that staff and others who are affected by our activities are free from risk so far as is reasonably practicable. Effective health and safety is built upon the concept of practical and sensible health and safety practice.

The Health and Safety Executive HSG65 '*Successful health and safety management standard*' outlines the key elements of successful health and safety management:

- Effective health, safety and wellbeing policies setting a clear direction;
- An effective management structure and arrangements to deliver the policy;
- A planned and systematic approach to implementing the policy through an effective management system;
- Performance is managed against agreed standards to reveal when and where improvement is needed, and
- Learning from all relevant experiences and applying lessons learned.

2.1.2 **Wellbeing** The NHS Constitution places wellbeing at the heart of its staff pledges requiring NHS employers to 'provide support and opportunities to all staff to maintain their health and wellbeing'.

2.1.3 A review of NHS health and wellbeing was undertaken in 2009 (Dr Steve Boorman) which gathered a wealth of evidence on the state of staff health and wellbeing in the NHS. The key issues identified by Boorman for employers to address were: staff absence due to musculoskeletal and mental health issues; review of occupational health provision and associated staffing provision to ensure that occupational health teams are able to focus on preventative activity to support staff in healthy life choices as well as providing a gateway to early treatment of health problems.

2.1.4 The 2012 Circular '*Health Promoting Health Service: Action in Hospital Settings*' (CEL01/2012) was a policy driver reinforcing the need to promote actions to improve health. Although this Circular was aimed at hospital setting contacts with patients, it can also provide an impetus for the CCGs to apply the general principles to staff. It recommends that specific promotion of healthy living actions are carried out, covering: smoking, alcohol, breastfeeding, food and health and health at work. The promotion of these areas amongst staff also helps the CCGs to tackle health inequalities that may exist within its staff base. Health inequalities can manifest themselves through long term chronic conditions such as heart and respiratory diseases, diabetes, cancers and depression. These share some similar preventable causes that are linked to lifestyle behaviours and choices such as: smoking, unhealthy nutrition, physical inactivity, alcohol consumption and stress.

2.1.5 In May 2018, NHS Employers released an NHS Health & Wellbeing Framework to help NHS organisations plan and implement their own approach for improving staff health and wellbeing. The framework is designed to be used in a flexible way to meet the needs of individual organisations. Much of the content of the Framework is in line with the North East Better Health at Work programme being followed by the CCGs.

3. General Approach to Health, Safety and Wellbeing: Principles, Aims and Objectives

3.1 Principles

3.1.1 The CCGs approach to the way in which health and safety is managed is to have robust processes in place for health and safety. These will provide a tool for the systematic and effective management of health and safety and inform and guide managers and staff as to the way in which all health and safety matters are to be managed.

3.1.2 To ensure adherence with this strategy, policies and procedures are in place to ensure compliance with all Health and Safety Regulations and there are close links between the CCGs and the Commissioning Support Unit's Health and Safety team who currently provide the Health and Safety function for the CCGs.

3.1.3 Since its inception, the CCGs have established a good track record on staff health, safety and wellbeing. It is important, however, that we build upon that success and continue to work with our staff, health and safety professionals, HR staff and others to embed a culture where we work collaboratively to improve staff health, safety and wellbeing and ensure we have clear targets for further improvement.

The CCGs are committed to promoting health and wellbeing to staff through the provision of a good working environment. In addition, this will be developed further by taking part in, for example, the North East Better Health at Work assessment process.

3.2 Aims

- a. Developing the culture, values and behaviours that reflect the type of organisation that we all want to work in – an open, fair and just culture, focused on learning not blame and with clear underpinning values and behaviour;
- b. Improving staff health, safety and wellbeing in order to reduce work-related ill health and injuries;
- c. Improving our systems, arrangements and approach to good health and safety management in line with statutory requirements and good practice;
- d. Improving how we successfully engage with staff on health, safety and wellbeing.

Appendix 1 provides further information on how we will achieve these aims.

3.3 Objectives

Objective 1 – work with staff, the Health & Safety team and NHS Property Services to provide a continuously improving and safe working environment.

Objective 2 – we will provide strategic leadership for health, safety and wellbeing to ensure that this is fully integrated into daily activity.

Objective 3 – to review our policies and processes to support the delivery of the CCGs duties. These reviews will be informed by legislation and learning from incidents, accidents, audits and spot checks.

Objective 4 – we will work with staff to encourage the improvement of physical and mental wellbeing.

4. Responsibility for Implementation of the Health and Safety Strategy

The Governing Body, senior managers and line managers all have a responsibility for the health, safety and wellbeing of employees whilst at work.

- 4.1 The Governing Body has overall responsibility for health and safety management. It has a duty to assure itself that the organisation has properly identified the requirements for health and safety and that it has processes and controls in place to mitigate any health and safety risks and the impact they have on the organisation and its stakeholders.

This duty is discharged as follows:

- Ensuring there is a robust structure in place for the effective management of health and safety throughout the CCGs.
- Approves and reviews the Health and Safety Strategy.
- Receives regular reports from the Executive Committee which identifies significant risks and mitigating actions following review of the annual work plan and other documentation
- Demonstrates leadership, active involvement and support in health and safety management.

4.2 Executive Committee

The Governing Body has delegated responsibility to the Executive Committee to keep the health and safety, fire and security matters under regular review. Members of the Executive Committee will ensure that all health and safety issues are coordinated, managed, monitored and reviewed to ensure compliance with all relevant legislation.

4.3 Management Structure

All staff have the primary responsibility for their own health, safety and wellbeing. As an employer, however, the CCGs has a clear obligation to ensure that there are arrangements in place to promote high levels of health, safety and wellbeing in the workplace. Key members of the management team have responsibility for the effective implementation of this Strategy and the systems that support it as follows:

4.3.1 Accountable Officer

The Accountable Officer, has the overall responsibility for;

- ensuring the implementation of an effective Health Safety and Wellbeing Strategy, supporting the work undertaken under the health and safety agenda as set out in the Health, Safety and Wellbeing Strategy.
- Continually promoting health and safety, demonstrating leadership, commitment and support.
- Ensuring an appropriate committee structure is in place
- Planning for adequate staffing, finances and other resources, to ensure the effective management of health and safety within the CCGs.
- Meeting all the statutory requirements and ensuring positive performance towards the achievement of the CCGs' health and safety objectives
- Ensuring all senior leads are appointed with managerial responsibility for health and safety
- Overall accountability for procedural documents across the organisation lies with the Chief Officer who has overall responsibility for establishing and maintaining an effective document management system, for meeting all statutory requirements and adhering to guidance issued in respect of procedural documents.

4.3.2 Director lead role

The Director of Strategic Development (Transition) is the delegated Governing Body lead. They will provide strategic leadership for all health and safety matters and will provide senior level support and guidance and will ensure that health and safety report, adequately reflecting the health and safety management issues within the CCGs are prepared for the Management Executive including:

- notifying the organisation of any health and safety risks
- ensuring that appropriate risk registers are maintained and actively managed and include health, safety and security risks as appropriate
- ensuring that the organisation and staff comply with all organisational policies and procedures
- leading the management of health and safety by following the health and safety strategy and associated action plans
- ensuring all staff fulfil their responsibility regarding health and safety as set out within the relevant regulations and approved codes of practices
- ensuring that all activities undertaken are consistent with the safe operation of the CCGs
- Ensuring that all liability is covered by adequate insurance through the CCGs' insurance arrangements.
- Ensuring sufficient resources are made available to enable the CCGs to fulfil their legal and statutory obligations in relation to health and safety.

4.3.3 CCGs Head of Corporate Services

The Head of Corporate Services reports to the Director of Strategic Development (Transition) and will take the role as organisational lead for health and safety and is responsible for:

- ensuring audits are undertaken relating to health and safety to provide assurance regarding compliance with health and safety legislation
- ensuring health and safety systems are in place and regularly reviewed in order to meet the requirements of the Strategy and audit results.
- ensuring the Health and Safety Work Plan is reviewed, updated and reported to the Executive Committee.
- scrutinising the controls and assurances in place
- coordinating and collation of regular reports regarding health and safety.
- scheduling health and safety matters on the Governing Body or Executive Committee agendas as appropriate.

- overseeing the management of health and safety as identified by the Executive Committee, ensuring action plans are put in place, regularly monitored and implemented involvement in the project group co-ordinating the health and wellbeing activities in the CCGs.

4.3.4 **CSU Governance Manager**

Overall responsibility for the Health and Safety Strategy lies with the North of England Commissioning Support Unit Health and Safety Lead who has delegated responsibility for managing the development and implementation of Health and Safety procedural documents.

4.3.5 **All line managers**

All line managers have a responsibility to incorporate health and safety management within all aspects of their work and are responsible for ensuring the implementation of this Strategy by:

- demonstrating personal involvement and support for the promotion of health and safety
- ensuring staff under their management are aware of their responsibilities in relation to this strategy
- where appropriate, setting personal objectives for health and safety and monitoring their achievement;
- ensuring that Job Descriptions reflect employees' responsibilities relating to health and safety;
- ensuring risks relating to health and safety are identified, managed and mitigating actions are implemented in functions for which they are accountable.

4.3.6 **All Staff**

All staff working within The CCGs, including temporary/agency staff, have a responsibility to:

- be aware of their responsibilities around health and safety in line with this Strategy;
- have a duty under legislation to take reasonable care of their own safety and the safety of others who may be affected by the CCGs' business and to comply with appropriate policies, procedures and guidelines;
- identify and report health and safety risks to their line manager in line with this Strategy;
- ensure incidents, are reported using the appropriate procedures and systems

- undertake statutory, mandatory and other appropriate training as determined by the CCGs and their line manager.

4.3.7 Contractors, Commissioning Support Unit and Agency Staff

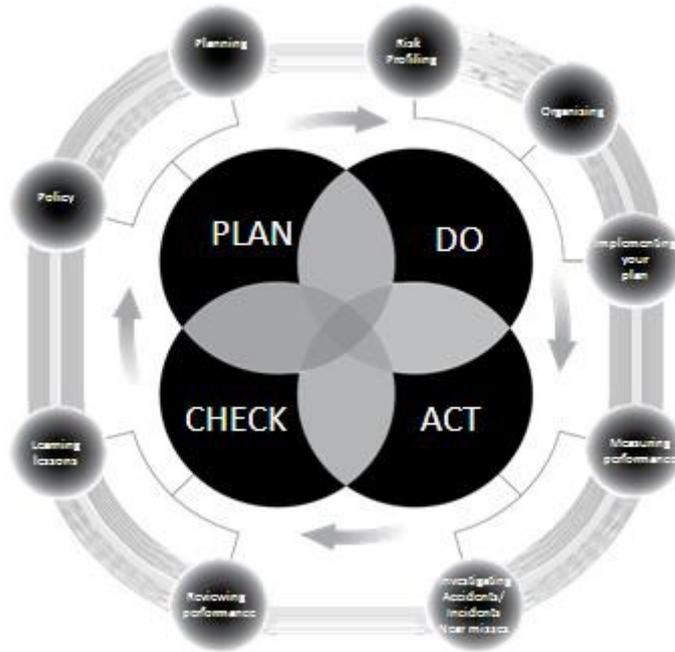
Managers must ensure that where they are employing or contracting staff those staff are aware of, and adhere to, all relevant policies, procedures and guidance of The CCGs.

4.3.8 CSU Staff

Whilst working on behalf of the CCGS, CSU staff will be expected to comply with all policies, procedures and expected standards of behaviour within the CCGs, however they will continue to be governed by all policies and procedures of their employing organisation.

5. Approach to Health and Safety Management

- 5.1 The CCGs will follow the approved Health and Safety Executive (HSE) guidance for management of Health and Safety known as HSG65.
- 5.2 HSG65 provides guidance for management, health and safety professionals and employee representatives to improve health and safety in their workplaces as it focuses on effective health and safety policies, organising for health and safety, planning and implementation, measuring performance and auditing and reviewing performance.
- 5.3 The diagram below describes the essential requirements of successful health and safety management (HSG65)



5.4 Plan

5.4.1 The CCGs will ensure that Health and Safety Policies, HR Policies and Standard Operating Procedures are in place to support the delivery of the Strategy. These will ensure there is clarity on the aims, objectives, general approach and arrangements for managing health and safety ensuring the CCGs operates in a safe manner whilst discharging its day to day duties.

5.4.2 Annual action plans will be developed to ensure a systematic approach is taken to implement the strategy and health and safety duties required by the CCGs. These will also respond to the annual health and safety audits.

A programme of wellbeing events/promotion activities will be in place for staff.

5.5 Do

5.5.1 The CCGs will maintain an effective management structure and arrangements for executing its health and safety obligations across the organisation as well as its commitment to the wellbeing of staff. The policies and procedures will empower and encourage staff to work safely within their place of work without apportioning blame.

In order to do this effectively and in a sustainable way, the 'four C' system will be adopted:

Control – systems and methods in place across the organisation in relation to governance structure, including Committee reporting.

Co-operation - between individuals through staff meetings and health and safety spot checks. Close working and co-operation between the CCGs and the CSU health and safety team.

Communication – Ensuring there is clear two way communication throughout the organisation and with the Commissioning Support Unit. Team meetings will be used to ensure effective communication on all aspects of health, safety and wellbeing and to ensure learning is shared. There are also clear reporting lines for the identification of risks at the earliest opportunity.

Competence – All staff are required to undertake statutory and mandatory training at regular intervals. A system of spot checks will ensure that the CCGS is operating at high levels of good practise at an operational level in line with all the appropriate controls. Annual Health & Safety Audits will also be carried out and action plans implemented to address any areas requiring improvement.

5.6 Check and Act

- 5.6.1 Objectives and key performance indicators will be set and used for measuring achievement across the organisation in relation to health and safety and will be given the same attention as other organisational standards with an emphasis on senior management responsibility. This work will be monitored by the Executive Committee.
- 5.6.2 Active monitoring will take place through Health and Safety Audits, workplace inspections, training compliance, health and safety spot checks in order to understand the effectiveness of controls and highlight and monitor areas requiring further improvement.

Key performance indicators will be developed to ensure that a baseline measure is in place and actions are in place to ensure continued development. This will be monitored by the Executive Committee. Evidence of performance against the health, safety and wellbeing indicators will come from a number of evidence sources including:

- Health and Safety Enforcement Notices
- Health and Safety offences
- RIDDOR reporting
- Incident data
- Accident data
- Health and safety audits

- Claims
- Complaints
- Staff survey
- Health and safety spot checks
- Corrective measures and action plans will be implemented to address issues arising from this monitoring.

6. Health and Safety Incident Reporting

- 6.1 The CCGs promotes a culture of openness and learning where staff are encouraged to be open about raising problems. As part of this approach, staff comply with Incident Reporting Policies that ensure that all incidents are reported and the lessons learned are appropriately shared across the organisation and, where appropriate, more widely within the NHS locally and nationally.
- 6.2 Incidents will be recorded & analysed using the SIRMS (Safeguarding Incident Reporting Management System) and the impact of an incident will be graded according to the matrix together with the likelihood of occurrence or recurrence.

7. Legal Requirements

- 7.1 To ensure the CCGs provides a safe and secure environment for patients, public, staff and contractors the following regulations underpin the 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
 - Health and Safety (Display Screen Equipment) Regulations 1992
 - Health and Safety (Consultations with Employees) Regulations 1996
 - Manual Handling Operations Regulations 1992
 - Health and Safety (Safety signs and signals) regulations 1996
 - Control of substances Hazardous to Health (COSHH) Regulations 2002
 - Electricity at Work Regulations 1989
 - Noise at Work Regulations 1989
 - Personal Protective Equipment at work Regulations 1998
 - Provision and Use of Work Equipment Regulations 1998
 - Reporting of Injuries and Dangerous Occurrences Regulations 1995
 - Regulatory Reform Order (Fire Safety) 2005
 - HSG65 – Successful Health and Safety Management Standard

8. The CCGs equality statement

- 8.1 The CCGs are committed to promoting human rights and providing equality of opportunity; not only in our employment practices, but also in the way we commission or provide services. The organisation also values and respects the diversity of our employees and the communities we serve. In applying this strategy, the organisation will have due regard for the need to:
- Promote human rights
 - Eliminate unlawful discrimination
 - Promote equality of opportunity
 - Provide for good relations between people of diverse groups
- 8.2 This Strategy aims to be accessible to everyone regardless of age, disability (physical, mental or learning), gender (including transgender), race, sexual orientation, religion/belief or any other factor which may result in unfair treatment or inequalities in health or employment.
- 8.3 Throughout the development of this Strategy, The CCGs have sought to promote equality, human rights and tackling health inequalities by considering the impacts and implications when writing and reviewing the Strategy. The impact of this strategy is subject to an on-going process of review through the Equality Impact Assessment.

9. Equality Analysis

- 9.1 In accordance with our equality duties an Equality Analysis has been carried out on this Strategy. There is no evidence to suggest that the strategy would have an adverse impact in relation to race, disability, gender, age, sexual orientation, religion and belief or infringe individuals' human rights. (Please see appendix 2).

All employees should be treated fairly and with respect.

10. Implementation

- 10.1 The Strategy will be circulated to all individuals identified with specific responsibilities and will be communicated to all staff by the most appropriate means. All line managers are required to share the contents of this Strategy with their staff.
- 10.2 For health and safety management to be effective within the organisation, this strategy will become a living document and a natural "part of everyday working practice"

11. Training Implications

- 11.1 The sponsoring director will ensure that the necessary training or education needs and methods required to implement the Strategy are identified and resourced or built into the delivery planning process.
- 11.2 Training and education are key to the successful implementation of this Strategy and embedding a culture of a safe working environment in the organisation. Staff will have the opportunity to develop more detailed knowledge and appreciation of the role of Health and Safety through:
- Policy/strategy manuals
 - Induction
 - Line manager
 - Specific training courses

12. Monitoring, Review and Archiving

12.1 Monitoring

The Governing Body will agree with the Head of Governance a method for monitoring the dissemination and implementation of this strategy. Monitoring information will be recorded in the strategy and policy database.

12.2 Review

12.2.1 The Governing Body will ensure that this strategy document is reviewed in accordance with the timescale specified at the time of approval.

12.2.2 Staff who become aware of any change which may affect a strategy should advise their line manager as soon as possible. The governing body will then consider the need to review the strategy, policy or procedure outside of the agreed timescale for revision.

12.2.3 For ease of reference for reviewers or approval bodies, changes should be noted in the 'document history' table on the front page of this document.

NB: If the review consists of a change to an appendix or procedure document, approval may be given by the sponsor director and a revised document may be issued. Review to the main body of the Strategy / policy must always follow the original approval process.

12.3 Archiving

The Governing Body will ensure that archived copies of superseded Strategy/policy documents are retained in accordance with Records Management: Code of Practice for Health and Social Care 2016.

Implementing the Aims and Objectives

A more detailed implementation plan will be developed for each year of the Strategy.

AIM	OBJECTIVE	ACTIONS
<p>Developing the culture, values and behaviours that reflect the type of organisation that we all want to work in – an open and just culture, focused on learning not blame and with clear underpinning values and behaviour</p>	<p>We will provide strategic leadership for health, safety and wellbeing to ensure that this is fully integrated into daily activity.</p>	<ul style="list-style-type: none"> a. ensure that health and safety management is embedded as an integral part of the management approach to the achievement of our objectives. b. provide top-down commitment to health and safety, in order to progress the effective health and safety working arrangements as the daily norm. c. the management of health and safety is seen as a collective and individual responsibility, managed through the agreed Committee structures. d. A supportive and ‘fair blame’ culture and approach is maintained and staff are encouraged to report health and safety problems and incidents with a view to individuals and the organisation learning lessons to prevent recurrence. e. appropriate training and development is provided to all staff in the application of this Strategy and the approach to health and safety. f. To continue working towards structured programmes of health, safety and wellbeing improvement.

AIM	OBJECTIVE	ACTIONS
<p>Improving staff health, safety and wellbeing in order to reduce work-related ill health and injuries</p>	<p>We will work with staff, the health and safety team and NHS Property Services, to provide a continuously improving and safe working environment.</p>	<p>a. continued communication and consultation with the CSU, NHSPS and other organisations to proactively manage health and safety issues, including ensuring there is safe egress and access.</p> <p>b. ensure there is a safe working environment without risks to health, including ensuring that plant and equipment are safe and there are safe arrangements for the use, handing, storage and transport of articles, materials and substances.</p> <p>c. ensure a preventative approach to musculo-skeletal injuries through DSE assessments, provision of mandatory training and advice on posture.</p> <p>d. ensure continued provision of Occupational Health services, including regular health checks.</p> <p>e. provide opportunities to engage in activities promoting good health and wellbeing (eg. eye checks relating to DSE assessments, healthy eating, sporting activities, mental health, mindfulness, health promotion on key risk factors and conditions – musculoskeletal, smoking, alcohol, cancer, obesity, heart disease etc).</p>

AIM	OBJECTIVE	ACTIONS
<p>Improving our systems, arrangements and approach to good health and safety management in line with statutory requirements and good practice.</p>	<p>We will review our policies and processes to support the delivery of the CCGS's duties. These reviews will be informed by legislation and learning from incidents, accidents, audits and spot checks.</p>	<ul style="list-style-type: none"> a. provide support to managers and staff in achieving levels of competency and health and safety knowledge. b. ensure that staff undertake mandatory health & safety training. c. involve staff in learning from accidents and incidents. d. review policies and procedures in light of legislation, lessons learned and good practice examples. e. workplace risks will be assessed to ensure safe systems of work are in place. f. Key performance indicators relating to health and safety will be agreed and monitored. g. Health & Safety Audits will be undertaken annually and actions monitored. h. a programme of spot- checks will continue to ensure that appropriate health & safety measures (including back care) are in place. i. ensure that health & safety management is a cohesive element of the internal control systems and that there is accurate levels of reporting to the Governance & Risk Committee are in place.

AIM	OBJECTIVE	ACTIONS
<p>Improving how we successfully engage with staff on health, safety and wellbeing.</p>	<p>We will work with staff to encourage the improvement of physical and mental wellbeing.</p>	<ul style="list-style-type: none"> a. proactive use of team meetings to share concerns and learning. b. continue to respond to the results of staff survey. c. continued engagement in organised health and wellbeing activities; ensuring the benefits of these are communicated appropriately. d. build upon the outcomes of the Health Needs Assessment undertaken with staff in order to target activities and priority areas as identified by our staff.. e. Building upon this approach, we will continue to include the Commissioning Support Unit staff that are 'embedded' into the CCGS in our health and wellbeing activities. f. We will broaden our approach to good health and wellbeing to help our staff encourage their families and friends to do the same. g. As part of our approach to sharing knowledge and promoting good health, we will work with partners to promote good health and wellbeing in the wider community. h. As part of our work around health and wellbeing we will proactively progress the Better Health at Work Award.

Appendix 2



Partners in improving local health



North of England
Commissioning Support



Step 1

As a public body organisation we need to ensure that all our strategies, policies, services and functions, both current and proposed have given proper consideration to equality and diversity, do not aid barriers to access or generate discrimination against any protected groups under the Equality Act 2010 (Age, Disability, Gender Reassignment, Pregnancy and Maternity, Race, Religion/Belief, Sex, Sexual Orientation, Marriage and Civil Partnership, Carers and Health Inequalities).

A screening process can help judge relevance and provides a record of both the process and decisions made.

This screening determines relevance for all new and revised strategies, policies, projects, service reviews and functions.

Completed at the earliest opportunity it will help to determine:

- The relevance of proposals and decisions to equality, diversity, cohesion and integration.
- Whether or not equality and diversity is being/has already been considered for due regard to the Equality Act 2010 and the Public Sector Equality Duty (PSED).
- Whether or not it is necessary to carry out a full Equality Impact Assessment.

Name(s) and role(s) of person completing this assessment:

Name: Lee Crowe
Role: Governance Manager, H&S, Fire, Security

Title of the service/project or policy:

Health and Safety Strategy

Is this a:

Strategy / Policy

Service Review

Project

If other, please specify:

What are the aim(s) and objectives of the service, project or policy:

The aim of the Strategy is to ensure the CCGS considers Health and Safety along

Who will the project/service /policy / decision impact?

Consider the actual and potential impacts:

- Staff
- service users/patients
- other public sector organisations
- voluntary / community groups / trade unions
- others, please specify:

with its other business objectives and to ensure that the CCGs follows the details stipulated within H&S Regulations.

Questions	Yes	No
Could there be an existing or potential impact on any of the protected characteristic groups?		X
Has there been or likely to be any staff/patient/public concerns?		X
Could this piece of work affect how our services, commissioning or procurement activities are organised, provided, located and by whom?		X
Could this piece of work affect the workforce or employment practices?		X
Does the piece of work involve or have an impact on: <ul style="list-style-type: none"> • Eliminating unlawful discrimination, victimisation and harassment • Advancing equality of opportunity • Fostering good relations 		X

If you have answered no to the above and conclude that there will not be a detrimental impact on any equality group caused by the proposed policy/project/service change, please state how you have reached that conclusion below:

The procedure is a review of an existing Strategy. There is no fundamental change to the content therefore the previous EIA which concluded 'no impact' remains appropriate.

If you have answered yes to any of the above, please now complete the 'STEP 2 Equality Impact Assessment' document.

Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening

Name	Job title	Date
Lee Crowe	Governance Manager	October 2019

Publishing

This screening document will act as evidence that due regard to the Equality Act 2010 and the Public Sector Equality Duty (PSED) has been given.

If you are not completing 'STEP 2 - Equality Analysis' this screening document will need to be approved and published alongside your documentation.

A copy of all screening documentation should be sent to: **NECSU.Equality@nhs.net** for audit purposes.