



POLICY DOCUMENT

# Health and Safety Policy

2017 – (Version 5.3)  
CS>SMC>G&R>Board

## Policy Review Schedule

Date first Approved by NIMDTA Board: December 2008

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Policy Owner: Governance, IT & Facilities Manager

### Amendment Overview

Version	Date	Pages	Comments	Actioned
2003 - 1.0	July 2003		Ratified by Senior Management	
2008 - 2.0 (draft)	28 January 2008		Revised for re-consideration by Health and Safety Committee	Margot Roberts
2008 - 2.1	12 May 2008		Approved by Senior Management	
2008 – 2.2(draft)	June 2008		Further revisions made following audit	Margot Roberts
2008 – 2.3(draft)	11 November 2008		Reviewed by Health and Safety Committee and revisions made, taking account of the risk assessment by WYG	Health and Safety Committee
2008 – 2.3	4 December 2008		Ratified by the NIMDTA Board	
2008 – 2.3	February 2008		Issued to staff	
2010 – 3.0	August 2010		Reviewed and Revised	Mark McCarey
2010 – 3.0	September 2010		Ratified by the NIMDTA Board	
2010 – 3.0	October 2010		Issued to staff	
2012 – 4.0	November 2012	30	Executive Summary & questions added. Amended to reflect appointment of KG to CE/PGD. Section on Accountability clarified. Change from Accident Book to Incident reporting noted. Inappropriate KPIs removed. <b>Approved</b> by NIMDTA Board	Mark McCarey
2012 – 4.1	13/08/2013	34	Role of NIMDTA to be included at beginning of each policy and corporate document. Footer updated to include new NIMDTA mission statement Appendix 5 updated with current Terms of Reference for H&S Committee Updated to reflect change of communication with staff from CETIS to Sharepoint Intranet	Linda Craig

Version	Date	Pages	Comments	Actioned
2015 – 5.0	24/02/2015	34	Periodic refresh before submission to HSC/G&R/Board. Presented to G&R Committee for approval. <b>Approved</b>	Mark McCarey
2015 – 5.1	26/02/2015		Presented to NIMDTA Board for approval. <b>Approved</b>	
2017 - 5.2	13/01/2017	22	Periodic refresh before submission to G&R/Board.	Mark McCarey
2017 – 5.3	25/01/2017	21	Updated following G&R, in preparation for Board approval. <b>Approved</b>	Gillian Kerr

## Contents

Policy Review Schedule.....	2
Role of the Northern Ireland Medical and Dental Training Agency.....	5
Executive Summary.....	6
Questions that you should be able to answer after reading this policy.....	6
Policy Influences .....	7
Policy Impact.....	7
This Policy to be read in conjunction with:.....	<b>Error! Bookmark not defined.</b>
1. Introduction .....	8
2. Statement of Intent.....	8
2.1 Employer .....	8
2.2 Employee .....	9
3. Accountability .....	10
4. Communication of the Health and Safety Policy .....	12
5. Monitoring and Review.....	12
Appendix 1 – Guidance for Health and Safety.....	14
Appendix 2 – In the event of an Accident.....	16
Appendix 3 – In the event of a Fire.....	17
Appendix 4 - Display Screen Equipment .....	19

## **Role of the Northern Ireland Medical and Dental Training Agency**

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is an Arm's Length Body sponsored by the Department of Health (DoH) to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA seeks to serve the government, public and patients of Northern Ireland by providing specialist advice, listening to local needs and having the agility to respond to regional requirements.

NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training throughout Northern Ireland. Its role is to attract and appoint individuals of the highest calibre to recognised training posts and programmes to ensure the provision of a highly competent medical and dental workforce with the essential skills to meet the changing needs of the population and health and social care in Northern Ireland.

NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and specialty training programmes and rigorously assesses their performance through annual review and appraisal. NIMDTA manages the quality of postgraduate medical and dental education in HSC Trusts and in general medical and dental practices through learning and development agreements, the receipt of reports, regular meetings, trainee surveys and inspection visits. It works in close partnership with local education providers to ensure that the training and supervision of trainees support the delivery of high quality safe patient care.

NIMDTA recognises and trains clinical and educational supervisors and selects, appoints, trains and develops educational leaders for foundation, core and specialty medical and dental training programmes throughout NI.

NIMDTA is accountable to the General Medical Council (GMC) for ensuring that the standards set by the GMC for medical training, educational structures and processes are achieved. The Postgraduate Medical Dean, as the 'Responsible Officer' for doctors in training, has a statutory role in making recommendations to the GMC to support the revalidation of trainees. Revalidation is the process by which the GMC confirms that doctors are up to date and fit to practice. NIMDTA also works to the standards in the COPDEND framework for the quality development of postgraduate Dental training in the UK.

NIMDTA enhances the standard and safety of patient care through the organisation and delivery of relevant and valued career development for general medical and dental practitioners and dental care professionals. It also supports the career development of general medical practitioners and the requirements for revalidation through the management and delivery of GP appraisal.

NIMDTA aims to use the resources provided to it efficiently, effectively and innovatively. NIMDTA's approach to training is that trainees, trainers and educators should put patients first, should strive for excellence and should be strongly supported in their roles.

## **Executive Summary**

This document sets the context for how NIMDTA seeks to discharge its duties as an employer in relation to Health & Safety Legislation. It also identifies the responsibilities that employees have under this legislation. It clearly identifies the roles and responsibilities of staff, and committees. It also provides practical guidance for use in situations that may arise during the course of business, such as accidents and emergencies.

This is a key document in the governance of NIMDTA, and all staff should have a knowledge of it that is proportional to their area of work.

## **Questions that you should be able to answer after reading this policy**

- What are the duties of an employer in relation to Health & Safety?
- What are the duties of an employee in relation to Health & Safety?
- What is a RIDDOR incident?
- Who should a RIDDOR incident be reported to?

## **Policy Influences**

This policy has been influenced by the following:

- Health and Safety at Work Order (NI) 1978
- Control of Substances Hazardous to Health Regulations (NI) 2003
- Health and Safety (Consultation with Employees) Regulations (NI) 1996
- Health and Safety (Display Screen Equipment) Regulations (NI) 1992
- Electricity at Work Regulations (NI) 1991
- Employer's Liability (Defective Equipment and Compulsory Insurance) (NI) Order 1972
- The Management of Health and Safety at Work Regulations (NI) 1999
- The Manual Handling Operations Regulations (NI) 1992
- Lifting Operations and Lifting Equipment Regulations (NI) 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997

## **Policy Impact**

Changes to this policy may have an impact or an influence on the following:

- NIMDTA Assurance Framework
- NIMDTA Business Continuity Plan
- NIMDTA Fire Safety Policy
- NIMDTA Manual Handling Policy
- NIMDTA Reporting and Management of Incidents Policy
- NIMDTA Security Policies
- NIMDTA Waste Management Policy
- NIMDTA Contract Management Policy

## **1. Introduction**

The aims of this Health and Safety Policy are;

- to demonstrate NIMDTA's commitment to Health and Safety at work;
- to ensure compliance with Health and Safety legislation;
- to adopt best practice in health and safety management;
- to ensure systems are in place for the identification and delivery of health and safety training needs;
- to manage health and safety by the process of risk assessment and put in place appropriate measures to reduce the risk to an acceptable level;
- to provide employees with the information, instruction and training they need to work safely and efficiently and to develop safety awareness among employees;
- to make employees aware of their individual responsibility to take all reasonable care for the safety of themselves and others and co-operate with management in matters of health and safety;
- to minimise the incidence and severity of accidents, injuries and work related ill health;
- to ensure the welfare of employees and visitors and to provide and maintain a safe and healthy working environment.

## **2. Statement of Intent**

The Northern Ireland Medical and Dental Training Agency recognises and accepts its legal responsibilities for Health and Safety. It is the policy of NIMDTA to provide and maintain a safe environment for all visitors, as well as healthy working conditions, equipment and safe systems of work for all our employees, and to provide adequate information, training and supervision as needed for this purpose. NIMDTA is committed to the adoption of best practice in health and safety management and to continual improvement in standards of health and safety.

Under the Health and Safety at Work NI Order (1978) there are statutory responsibilities for both employees and employers:

### **2.1 Employer**

Article 4 (1) of the order dictates that 'It shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees.'

## **2.2 Employee**

Article (8) 'It shall be the duty of every employee while at work 'to take reasonable care for the health and safety of himself and of other persons who may be affected by his acts or omissions at work'.

***This statement of intent is signed by the Chief Executive. The policy will be reviewed in the light of any change in health and safety legislation.***

Signed: .....

Date: .....

**Prof K Gardiner**

**Chief Executive**

### **3. Accountability**

#### **The Role of the NIMDTA Board**

The NIMDTA Board through the Chief Executive is responsible for ensuring the implementation of NIMDTA's Health and Safety policy. NIMDTA shall endeavour to work towards the following objectives:

- Compliance with relevant health and safety legislation;
- Provide for the setting and achievement of health and safety objectives and targets for the organisation;
- Ensure that staff receive appropriate information, instruction and training;
- Make the Health and Safety policy widely accessible through staff induction, inclusion on the Sharepoint Intranet, and display on the staff notice board; and
- Facilitate communication with all stakeholders regarding NIMDTA's Health and Safety policy and associated objectives, targets and performance against these.

#### **The Role of the Senior Management Committee**

The Senior Management Committee is a sub-committee of the Board and fulfils the strategic role in the co-ordination of health and safety with responsibility for ensuring that appropriate controls are implemented throughout NIMDTA. The Chief Executive chairs the Senior Management Committee.

#### **The Role of the Business Support Committee**

The Business Support Committee is a sub-committee of the Senior Management Committee. It supports the Senior Management Committee in the delivery of its strategic role in relation to Health & Safety through the consideration of operational issues that arise, in line with its Terms of Reference.

#### **The Role of the Chief Executive**

The Chief Executive has ultimate responsibility and accountability for health and safety and will ensure that, through effective policies and procedures, NIMDTA is compliant with all legal and statutory responsibilities and directives issued by DoH.

## **The Role of the Governance, IT & Facilities Manager**

The Governance, IT & Facilities Manager is the appointed Executive Director with special responsibility for health and safety arrangements. The Governance, IT & Facilities Manager will ensure that risk assessments are undertaken and action is taken to minimise the risks identified. The Governance, IT & Facilities Manager is responsible for fulfilling the Agencies obligations in relation to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1997 (RIDDOR).

RIDDOR incidents include accidents that result in:

- the death of an employee;
- a major injury such as a fracture, dislocation, or loss of sight;
- any injury that results in an employee being off work for over three days;
- a reportable disease such as poisoning, or infections sustained at work;
- a reportable dangerous occurrence or near miss, such as the malfunctioning of safety equipment;
- a reportable gas incident.
- staff are familiar with the content of this policy and are trained to carry out the duties associated with health and safety management
- guidance is issued to staff with regard to NIMDTA's health and safety arrangements
- incident reporting and investigation procedures are carried out where appropriate
- domestic services staff are aware of NIMDTA's Health and Safety requirements
- relevant information is shared with the Health and Safety Committee
- an up-to-date library of health and safety legislation is maintained
- health and safety training is provided for staff

## **The Role of Team Leaders**

All Team Leaders shall ensure that:

- staff and others that work within their department are aware of, and understand NIMDTA's health and safety policy and procedures; and
- Personal protection and basic hygiene precautions are adhered to.

### **The Role of all Staff Members**

Each member of staff has a personal responsibility for ensuring adherence to health and safety procedures. Staff should:

- be familiar with the policies and procedures relating to health and safety;
- report any breach of health and safety regulations to their line manager and take corrective action where possible;
- assist with completion of the adverse incident report form in accordance with NIMDTA's procedure for recording and reporting incidents; and
- ensure that personal protection and basic hygiene precautions are adhered to.

Any employee who wilfully disregards NIMDTA's Health and Safety Policy will be subject to disciplinary procedure.

### **4. Communication of the Health and Safety Policy**

All new employees will be inducted on health and safety matters in accordance with NIMDTA procedures.

The policy is available on the staff intranet and periodic training will be provided for all staff.

Health and safety updates will be communicated to staff via email and posted on the staff notice board.

Health and safety reference materials are available in the Corporate Services Department and the Governance, IT & Facilities Manager is available for help and guidance on health and safety issues.

Team Leaders are tasked with passing on relevant information to their staff and act on any feedback that may arise from this communication.

### **5. Monitoring and Review**

The Governance, IT & Facilities Manager will make an annual report to the Board and will ensure that health and safety matters are considered at appropriate Board meetings held

throughout the year. This report shall be based around key performance indicators in relation to health and safety, these are attached as Appendix 6.

The Business Support Committee will be responsible for dealing with all health and safety issues and will play a significant role in monitoring and reviewing all aspects of the system. The Business Support Committee will be responsible for ensuring that systems are in place for the identification and delivery of health and safety training needs and will ensure that the health and safety of staff is subject to regular review.

Health and Safety Risk assessments will be conducted every six months by the Corporate Governance Manager and Corporate Services Executive Officer. A report will be produced at the end of the inspection and Team Leaders and staff will be expected to action the points raised.

The Governance, IT & Facilities Manager will report findings of the risk assessment and the resulting action plans to the NIMDTA Board.

Any health and safety risks will be recorded in NIMDTA's Business Support Risk Register. If necessary such risks can be escalated to the Corporate Risk Register.

This policy will be subject to review every year and will be revised in line with changes to legislation or Departmental policy.

***This policy should be read in conjunction those listed under Policies Impacted and Policy Influences***

## Appendix 1 – Guidance for Health and Safety

### General Safety Rules

- do not run;
- do not leave cables trailing on the floor;
- do not attempt to interfere with or repair any equipment unless you are authorised and competent to do so;
- report all defects, damage or dangerous conditions or system of work;
- dispose of rubbish and refuse promptly and in accordance with approved practice;
- use appropriate step ladders to gain access to heights;
- do not move any load liable to cause injury;
- do not obstruct fire exits or gangways;
- observe all signs;
- on leaving work ensure it is left in a tidy and clean state and ensure that materials are stored away appropriately;
- follow approved procedures, instruction and training at all times;
- do not interfere with any device or sign provided in the interest of Health and Safety.

### Housekeeping and Premises

- **cleanliness:** the offices of NIMDTA will be kept clean and waste will be disposed of on a daily basis.
- **safe stacking & storage:** all goods, which are delivered to NIMDTA, will be taken to storage immediately.
- **clear gangways:** all exits have been marked by a lighted sign and will be clear kept free from clutter and obstruction.
- **electrical equipment:** Portable Appliance Testing will take place every two years.
- **dangerous substances:** all cleaning materials are located in the kitchen and are labelled and will be used according to instruction.

## **Accidents**

All accidents, even those considered as minor, must be reported to the Corporate Governance Manager and recorded. For the purposes of reporting all accidents are classed as incidents. The Corporate Governance Manager is responsible for investigating accidents. Monthly reports in relation to accidents and incidents will be forwarded by the Corporate Governance Manager to the Senior Management Team, Governance & Risk Committee, and NIMDTA Board.

## **Fire**

In the event of a fire staff must adhere to NIMDTA's fire safety procedures (see Appendix 3)

## **Display Screen Equipment**

The risks associated with display screen equipment work are identified in Appendix 4.

## **Appendix 2 – In the event of an Accident**

**Comment [MMcC1]:** We should probably add an appendix that sets out the location of the defibrillator, and some guidance, details of first responders etc.

All accidents must be reported to the Corporate Governance Manager who is responsible for recording and investigating accidents.

In the event of an accident, basic first aid may be given in an emergency if a trained first aider is on site.

A first aid box is also located in Reception. The Corporate Governance Executive Officer is the appointed person responsible for the upkeep of the box. There is no mandatory list of items that should be included in a first aid box, but for a workplace with no special risks the following should be available:

- a basic advice leaflet on first aid
- 20 individual wrapped sterile adhesive dressings, appropriate to the type of wound.
- 2 sterile eye pads
- 4 individually wrapped triangular bandages
- 6 safety pins
- 6 medium sized individually wrapped sterile un-medicated wound dressings - approximately 12 cm x 12 cm
- 2 large sterile individually wrapped un-medicated wound dressings - approximately 18 cm x 18 cm
- 1 pair of disposable gloves

NB: Tablets and medication will not be kept in the first aid box.

## **Appendix 3 – In the event of a Fire**

In the event of a fire it is imperative that all staff know how to respond promptly and effectively to a fire situation.

On discovering a fire the following action should be taken:

- raise the alarm (nearest breakglass point). Evacuate the immediate danger area and continue evacuation as required under the direction of the Fire Safety Officer and the nominated deputies. Fight the fire only if it is safe to do so using the appliances provided
- on hearing the fire alarm staff should leave their desk immediately and proceed to the nearest exit route. Staff should not take any of their personal possessions and should assemble in the lower car park. Continue evacuation of the premises as required under the direction of the Fire Safety Officer and the nominated deputies
- The Fire Safety Officer must ensure that any disabled member of staff or visitor to the premises is assisted in evacuating the premises

### **Escape Routes**

The 2 Escape routes (at main entrance door and back door beside hospital training open plan section) are well sign-posted and will be kept clear at all times.

### **Fire Fighting Equipment**

The following fire fighting equipment is located on the premises:

- Back wall at hospital training open plan section
  - CO2 and water extinguishers
  - Break glass
- Opposite Dental Training Co-Ordinator's Office
  - CO2 and water extinguishers
  - Break glass
- Kitchen
  - Fire Blanket

- Opposite store room
  - CO2 and water extinguishers
  - Break glass
- Entrance porch
  - CO2 and water extinguishers
  - Break glass
- Outside disabled toilet
  - CO2 and water extinguishers
  - Break glass

#### **Action required at a Fire Drill**

***The effectiveness of emergency procedures for dealing with a fire incident must be tested by means of practical fire drills. A fire drill will be carried out at least once a year.***

On hearing the fire alarm staff should leave their desk immediately and proceed to the nearest exit route. Staff should not take any of their personal possessions and should assemble in the lower car park.

## **Appendix 4 - Display Screen Equipment**

H & S (Display screen equipment) 1992 regulation came into force on 1 January 1993.

Possible risks, which have been associated with display screen equipment work include;

### **Upper body**

A range of conditions of the arm, hand and shoulder areas due to prolonged static posture are rare but can happen if the work-station is not suited to the requirements of the user.

Postural problems may be overcome by simple adjustments to the workstation such as repositioning equipment or adjusting the chair.

### **Eyesight**

Medical evidence shows that using display screen equipment is not associated with damage to eyes or eyesight; nor does it make existing defects worse. But some workers may experience temporary visual fatigue, leading to a range of symptoms such as impaired visual performance, red or sore eyes and headaches, or the adoption of awkward posture, which can cause further discomfort to limbs. These may be caused by:

- staying in the same position and concentrating for a long time;
- poor positioning of the display screen equipment;
- poor legibility of the screen or source documents;
- poor lighting, including glare and reflections;
- a flickering image on the screen

Visual problems may be overcome by repositioning the equipment, moving the screen and keeping the screen clean and free from dust.

Whenever possible, jobs at display screens should be designed to consist of a mix of screen-based and non-screen-based work to prevent fatigue and to vary visual and mental demands. Where the job unavoidably contains long spells of intensive display screen work

these should be broken up by periods of non-intensive, non-display screen work. Where this cannot be accommodated deliberate breaks or pauses must be introduced.

Breaks must allow users to vary their posture. Exercise routines, which include blinking, stretching and focusing eyes on distant objects.

Breaks should be taken before the onset of fatigue, not in order to recuperate and when performance is at a maximum, before productivity reduces. The timing of the break is more important than its length.

Breaks or changes of activity should be **included** in working time. **Short, frequent breaks** are more satisfactory than occasional, longer breaks: eg, a 5 -10 minute break after 50 - 60 minutes continuous screen and or keyboard work is likely to be better than a 15 minute break every 2 hours.

If possible breaks should be **taken away** from the screen.

Informal breaks, that is time spent not viewing the screen, appear from study evidence to be more effective in relieving visual fatigue than formal rest breaks.

### **Corrective appliances**

NIMDTA will ensure that all employees are provided at his/her request with an appropriate eye test. The provision of eye and eyesight tests must be at the expense of the employer. Vision screening should be provided as soon as is practicable after a request has been received.

The eye test is to decide whether the user has any defect of sight, which requires correction when working with a display screen. The Optometrist will need to make a report to the employer, copied to the employee, stating clearly whether or not a corrective appliance is needed for display screen work.

**Special corrective appliances** (ie spectacles) must be provided by the employer if the vision test illustrates that they are necessary to correct vision defects at a viewing distance used specifically for display screen work. An employers' liability for costs is restricted to payment of the cost of a basic appliance. If users wish to choose more costly appliances the employer is not obliged to pay for these. Employers may either provide a basic appliance, or

may opt to contribute a portion of the total cost of a luxury appliance equal to the cost of the basic appliance. NIMDTA will pay up to £47 towards this cost.

**Normal corrective appliances** are spectacles used for any other purpose not associated with display screen equipment, and therefore are not the responsibility of the employer, therefore are to be purchased at the users own expense. Research has shown that only 10% of employees will need special corrective appliances for display screen work.