

NHS 24 - 003 Risk Assessments and Auditing

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NHS 24 003 Risk Assessment and Auditing V5	Area Health and Safety Committee				
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Policy Statement

The Management of Health and Safety at Work Regulations require every employer to "make a suitable and sufficient assessment of the risks to the health and safety of their employees, to which they are exposed at work". The assessment must also cover any risks posed to people not in their employment.

Formal Risk Assessments will therefore be undertaken in order to identify all significant hazards, evaluate the associated risks and determine whether those risks are being adequately controlled or if additional control measures are required. These Risk Assessments will be recorded and kept.

Purpose

To define responsibility for the completion and reviewing of Risk Assessments and periodic audits within NHS 24

Scope

All Departments and Directorates

Formal Risk Assessment:

A formal risk assessment is a careful process of examination of what can cause harm to people from work activities. It will determine whether sufficient precautions are in place to prevent harm or if more are required. The aim is simply to ensure so far as is reasonably practicable that no one is injured or becomes ill.

- Risk Assessments of all operations performed should be carried out to identify risks to the health and safety of staff from work activities and other persons who may be affected by their work. Generic assessments can be produced but each site must adapt these as necessary to local conditions
- The Risk Assessments should be carried out by a competent person who should take the following steps:
 - 1. The hazards which relate to each operation must be identified.
 - 2. The likelihood and severity of the risk in relation to each hazard must be evaluated using the Risk Assessment chart (See Appendix 1).
 - 3. Where reasonably practicable, any hazards identified should be removed. If removing the hazard is not reasonably practicable, suitable measures must be taken to adequately control the risk.

4. The identified controls should be split into two sections i.e. minimum standards (management controls) and safe systems of work (staff controls).

The Health & Safety Consultant should be contacted to arrange for Risk Assessments to be undertaken.

All Risk Assessments and COSHH Assessments are available on the NHS 24 Intranet and upon request from the H&S Consultant.

COSHH Risk Assessments are also held on RIVO (Computer system used by Scottish Ambulance Service) and will be reviewed annually unless specified.

All Risk Assessments are graded using the NHS Scotland Risk Assessment matrix produced by NHS QIS – reference; AS/NZS 4360:2004 February 2008 'Making it work'. See appendix 1.

A blank Risk Assessment template is available in Appendix 2

Risk Assessment Sign Off:

What	Who	When
Full Risk Assessment	Senior Manager for	Once reviewed and
including all control	relevant Business Unit	accountability accepted
measures implemented		
Full Risk Assessment	Senior Manager for	Once reviewed and
including Control	relevant Business Unit	accountability accepted
Measures not		
implemented but risk		
accepted by the		
business unit		
Full Risk Assessment	Senior Manager for	Once reviewed
including all control	relevant Business Unit -	
measures implemented	a rationale for	
and not implemented	acceptance of risk must	
but accepted by the	be provided	
Business Unit		
Full Risk Assessment	Author of Risk	Once completed and
	Assessment	signed off by all relevant
		persons.

Auditing

This is an internal process whereby a systematic approach is used to critically examine performance against agreed minimum standards

NHS 24 have appointed competent people to carry out Health and Safety audits. The audits are carried out at regular intervals (minimum 6 monthly) an example of the Health and Safety Inspection form is available as appendix 3, and the Management Audit as Appendix 4

The systematic use of audits enables NHS 24 to:

- Assess legal, and policy compliance
- Identify areas of concern
- Provide levels of assurance
- Remedy poor standards
- Measure change
- Measure performance

Within NHS24 sites are categorised as follows:

- Main Site
- Local Site
- Remote Site

Although it is impractical and unnecessary to carry out monthly workplace inspections at all sites, a certain level of checks and balances must be maintained.

Main sites are:

- Aberdeen
- Norseman
- Cardonald / NHQ
- Clyde

These main sites have responsibility for managing all local and remote sites with regard to Health and safety matters.

Main sites will be inspected by the local health and safety lead and staff side representation using the Health and Safety inspection Form (see appendix 3) every 2 months. In addition to this the main sites will be subject to an annual Health and Safety inspection conducted by the Health and Safety Consultant, Local lead and staff side representation (if requested/available).

Copies of all inspection and audit reports will be made available to staff upon request. All actions raised from these inspections will be added to the local health and safety plan for appropriate management and action.

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Copies of all audits and inspections and associated action plans can be provided to the local health and safety committees and the Area Health and Safety Committee.

Local Sites are defined as:

Those sites with generally more than four members of staff and which have their own IT servers

Currently these sites are:

- Tayside
- Lanarkshire
- Ayrshire
- Dumfries and Galloway
- Highland

Local sites will be inspected by the local health and safety lead (or nominated deputy) and staff side representation using the Health and Safety inspection Form on a three monthly basis.

Copies of all inspection and audit reports will be made available to staff upon request. All actions raised from these inspections will be added to the local health and safety plan for appropriate management and action.

Copies of all audits and inspections and associated action plans can be provided to the local health and safety committees.

Remote sites are defined as:

Those sites with four or less staff, and sites which do not have their own IT servers.

Currently these sites are:

- Fife
- Orkney
- Shetland
- Western Isles

Remote sites will be inspected by the local health and safety lead (or nominated deputy) and staff side representation using the Health and Safety inspection Form on a six monthly basis. The remote island sites are inspected by the Scottish Ambulance Service Health and Safety Auditor as per the contract, using the Health and Safety Inspection form on a six monthly basis.

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Copies of all inspection and audit reports will be made available to staff upon request. All actions raised from these inspections will be added to the local health and safety plan for appropriate management and action.

Copies of all audits and inspections and associated action plans can be provided to the local health and safety committees.

New Sites - Pre occupation

The following items should be completed prior to work commencing in any new site:

1. Health and Safety Inspection form (New Site Inspection Form = Appendix 4)

This document should be completed with the host organisation to identify any areas of potential non conformance so that these can be managed or eliminated prior to occupation of the site.

This should be completed by the lead for health and safety and any non conformances discussed with the health and safety consultant as soon as possible.

2. Fire Safety

Ask the host to provide a copy of the formal fire risk assessment for the relevant areas of the building. This will ensure that a fire risk assessment exists.

This fire risk assessment should be reviewed with the host to identify if the NHS24 activities will have any significant impact on the validity of the risk assessment. The risk assessment will identify fire alarm and control systems in place.

This should be completed by the lead for health and safety and any non conformances discussed with the Fire Safety Advisor as soon as possible.

3. Lone Working

If lone working is anticipated on this site then a formal lone working risk assessment should be completed.

This should be completed by the lead for health and safety and any non conformances discussed with the health and safety consultant as soon as possible.

4. Accidents, incidents, ill health and abusive calls.

The local lead for health and safety should review the processes in place at the new site and satisfy themselves that all NHS24 staff know how to report an incident and know what to do if an incident occurs.

All incidents and or accidents must be reported using the NHS24 accident/ incident report form. All completed forms must be submitted to the relevant lead for health and safety as quickly as possible

5. Mandatory Health and Safety Training

All NHS24 staff must complete their mandatory health and safety training (H&S awareness, fire safety, DSE) within normal NHS24 timeframes

The team leader must ensure that staff working in remote and local sites have access to these training programmes and the time to complete them.

6. Welfare Facilities

The health and safety checklist will identify what facilities are available and whether they are suitable.

7. Identification of Hazards and Risks

All hazards and risks identified by NHS24 staff working in remote and local sites must be addressed as if they were at one of the main centres.

The team leader must ensure that staff working in remote and local sites have access to the necessary systems to report concerns

Responsibilities:

The Director of Workforce (Responsible for H&S) shall ensure:

- ➤ That suitable and sufficient generic Risk Assessments are in place for NHS 24 activities.
- ➤ That Risk Assessments are reviewed every 2 years or when significant change has been identified
- ➤ That a suitable and sufficient audit process is in place to measure legal and policy compliance.
- > That all NHS 24 locations are appropriately audited and have in place suitable and sufficient Risk Assessments.

The Health and Safety Consultant is:

Available to all managers and staff to facilitate the development of Risk Assessment and assist in the auditing processes across NHS 24. In addition to this the Health and Safety Consultant will develop generic Risk Assessments for the majority of standard NHS 24 risks and or tasks, these assessments will be published on the NHS 24 Intranet.

Department heads (Including General Managers) shall ensure that all location Risk Assessments are agreed in partnership through local Health and Safety meetings. In addition they shall ensure that all

- Corrective actions
- Systems of work

Arising from risk assessments and or audits are complied with

Where Departments or sites identify novel or unusual risks or hazards in their workplace (e.g.: Young Persons, Persons with specific needs, Noise and Vibration etc) they should seek guidance from the Health and Safety Consultant on the appropriate means of assessing and controlling these risks

All managers must ensure that Risk Assessments and auditing are carried out in partnership with our staff. Staff side representation is essential to ensure a full understanding of the hazards and risks associated with their work. Without their input, hazards and the associated risks are likely to be missed

The Table below outlines the primary responsibilities for the completion of Risk Assessments and audits:

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Assessment / Audit Document	Locations	Completed By	Person Responsible for implementation
Standard Risk Assessment [This Risk Assessment template should be used for the assessment of most situations except where specific Risk Assessment templates are available – see below]	All	H&S Consultant	Dept Mgr G. Mgr
Fire Risk Assessment	All Locations	NHS 24 Fire Advisor	Dept Mgr G. Mgr
Manual Handling (General) Risk Assessment [These should cover specific individuals or location specific assessments on manual handling risks]	All Locations	H&S Consultant/SST Manager	Dept Mgr G. Mgr
Young Persons Risk Assessment [NHS 24 considers any employee below the age of 18 to be a young person, specific regulations and requirements are required for young persons. Guidance MUST be sought from the Health and Safety Consultant prior to employing anyone below the age of 18]	All Sites All Apprentice Schemes	H&S Consultant upon request from relevant manager	Dept Mgr/ G. Mgr
New and Expectant Mothers Risk Assessment [This assessment should be completed for all new and expectant mothers.]	All Individuals	Direct line Manager (Support from SST if reqd)	Dept Mgr G. Mgr
People With Specific Needs Risk Assessment [eg: disabled, learning difficulties, etc Guidance MUST be sought from the Health and Safety Consultant prior to completing this assessment.]	All Individuals	Direct line Manager (Support from SST if reqd)	Dept Mgr/ G. Mgr

Assessment / Audit Document	Locations	Completed By	Person Responsible for implementation
Working at Height Risk Assessment [Working at Height is defined as working at any level (above ground or adjacent to a pit/ excavation) from which a fall might lead to injury. Prior to completing this assessment the NHS 24 policy and procedure document MUST be read]	All Sites	H&S Consultant when specific request made	Dept Mgr/ G. Mgr
Generic Stress Risk Assessment [An NHS 24 Generic Risk Assessment for workplace stress is available on the NHS 24 Intranet	All	H&S Consultant	Dept Mgr/ G. Mgr
Person Specific – Individual Stress Risk Assessment [A generic template is available to help managers assess the risk of workplace stress to staff who require an individual assessment, guidance should be sought from the Health and Safety Consultant/HR prior to completing the assessment]	All Location	Direct line Manager (Support from HR if reqd)	Dept Mgr/ G. Mgr
Display Screen (DSE) Assessments [These assessments should be completed for all workstations,] Refer to DSE policy and NHS 24 Intranet for advice	All Locations	Line Manager/SST for first line review if issues identified follow OH process on NH 24 Intranet	Dept Mgr/ G. Mgr
Noise and Vibration Assessments [These assessments can only be carried out by specially trained and persons using appropriately calibrated equipment.	All Locations [Inform Health and Safety Consultant if noise levels thought to be high]	SST Initially – if Problems identified this would be outsourced to competent person.	Dept Mgr/ G. Mgr

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Assessment / Audit Document	Locations	Completed By	Person Responsible for implementation
Workplace Inspection [This audit tool should be carried out at all NHS 24 locations	All Locations	SST Manager/Staffside	Dept Mgr/ G. Mgr
COSHH Assessments	All Locations	H&S Consultant	Dept Mgr/ G. Mgr

NOTE:

All risk assessments must be reviewed every 2 years or when circumstances change that may affect the outcome of the Risk Assessment. The Area Health and Safety committee should ensure this occurs.

^{1.} In all cases guidance and support is available in the first instance from Health and Safety Consultant

Appendix 1& 2 – Risk Ratings & Blank Risk Assessment Template:

Risk ratings are calculated using the two charts below.

The Severity score relates to the most likely outcome of an individual being exposed to the hazard. E.g. resulting in an injury.

The Likelihood score relates to the individual being exposed to the hazard and being injured. E.g. Opportunity of occurrence.

Multiplying the Severity by the Likelihood equals the RISK RATING.

The **Pre-assessment score** is calculated considering the person to be fully fit and active and without special needs or requirements but is untrained and unqualified in this specific area being assessed.

The Post –assessment score is any remaining risk after all control measures have been implemented.

The lower risk rating scores are only relevant once all the control measures are in place and actioned.

Severity	Definition - Injury		Likelihood	Definition
1 Negligible	Minor injury not requiring first aid	1	Rare	Can't believe this event would happen – will only happen in exceptional circumstances.
2 Minor	Minor injury or illness, first aid treatment required	2	Unlikely	Not expected to happen, but definite potential exists – unlikely to occur
Moderate	RIDDOR over 7 day's injury and dangerous occurrences. Agency reportable e.g. Police (Violent and aggressive acts). Significant injury requiring medical treatment and/or counselling	3	Possible	May occur occasionally , has happened before on occasions, reasonable chance or occurring
4 Major	RIDDOR – major injuries, or long term incapacity/disability (e.g. loss of limb), requiring medical treatment and/or counselling	4	Likely	Strong possibility that this could occur – likely to occur
5 Extreme	RIDDOR – death or major permanent incapacity	5	Almost Certain	This is expected to occur frequently/ in most circumstances – more likely to occur than not.

Risk Ratings – 20 to 25 = Very High risk, 10 to 19 = High risk, 4 to 9 = Medium risk, 1 to 3 = Low risk

Risk Matrix - NHS Scotland Risk Assessment matrix produced by NHS QIS - reference; AS/NZS 4360:2004 February 2008 'Making it work'

		Impact/Consequences						
Likelihood	Negligible	Minor	Moderate	Major	Extreme			
Almost Certain	5	10	15	20	25			
Likely	4	8	12	16	20			
Possible	3	6	9	12	15			
Unlikely	2	4	6	8	10			
Rare	1	2	3	4	5			

Business Unit:	Department::	RISK ASSESSMENT		
Equipment/Operation/Environment Assessed:		Staff at Risk:	Assessor:	Assessment Ref:
Application Requested:		Others at Risk:	Date assessment carried out::	
Description & Purpose of Process /Product:				

HAZARDS & CONSEQUENCES	Pre	assese- score		Control Measures Required:	Post- ass	essment	score	Remarks
(Equipment, Operational, Environment) Sev Likely Risk Rating Can			Risk Rating	Can the hazard be eliminated altogether? Can the hazard be replaced with something less hazardous? Can the hazard be separated from those it may harm? Can the work be reorganised to reduce the risk? Can personal protective equipment be used?		Likely	Risk Rating	

RISK RATINGS:

Risk ratings are calculated using the two charts below.

The Severity score relates to the most likely outcome of an individual being exposed to the hazard. E.g. Resulting in an injury.

The Likelihood score relates to the individual being exposed to the hazard and being injured. E.g. Opportunity of occurrence.

Multiplying the Severity by the Likelihood equals the RISK RATING.

The **Pre-assessment score** is calculated considering the person to be fully fit and active and without special needs or requirements but is untrained and unqualified in this specific area being assessed.

The Post –assessment score is any remaining risk after all control measures have been implemented.

The lower risk rating scores are only relevant once all the control measures are in place and actioned.

	Severity Definition		I	Likelihood	Definition
1	Negligible	Minor injury not requiring first aid	1	Rare	Can't believe this event would happen — will only happen in exceptional circumstances.
2	Minor	Minor injury or illness, first aid treatment required	2	Unlikely	Not expected to happen, but definite potential exists – unlikely to occur
3	Moderate	RIDDOR over 7 day's injury and dangerous occurrences. Agency reportable e.g. Police (Violent and aggressive acts). Significant injury requiring medical treatment and/or counselling	3	Possible	May occur occasionally, has happened before on occasions, reasonable chance or occurring
4	Major	RIDDOR – major injuries, or long term incapacity/disability (e.g. loss of limb), requiring medical treatment and/or counselling	4	Likely	Strong possibility that this could occur – likely to occur
5	Extreme	RIDDOR – death or major permanent incapacity	5	Almost Certain	This is expected to occur frequently/ in most circumstances – more likely to occur than not.

Likelihood scores are based upon a single user, the anticipated or actual frequency of operation and likelihood of occurrence.

Risk Ratings – 20 to 25 = Very High risk, 10 to 19 = High risk, 4 to 9 = Medium risk, 1 to 3 = Low risk.

Business Unit:	Department::	MINIMUM STANDARDS ((Management C	ontrols)
Equipment/Operation/Environment Assessed:		Staff at Risk:	Assessor:	Assessment Ref:
Application Requested:		Others at Risk:	Date assessment ca	rried out::
Description & Purpose of Process /Product::				

A risk assessment has been carried out on the subject above. These minimum standards form part of the control measures that MUST be implemented to reduce those risks to acceptable levels.

Failure to implement these standards may lead to personal injuries and, as they are based on legislation and/or best practice, may lead to prosecution.

Hazard	Responsibility	Minimum Standard	Status Implemented/ Date Outstanding
		•	
		•	
		•	
	The lower risk ratio	g scores are only relevant when the control measures are in place	e and actioned.

Hazard	Responsibility	Additional control measures proposed but NOT implemented at this time and the reasons for decision			Residual risk rating		Signed by management	Date
		Control: -		Sev	Likely	Risk		
		Rationale: -						
		Control: -		Sev	Likely	Risk		
		Rationale: -						

Business Unit:	Department::	SAFE SYSTEMS OF WORK (Staff Controls)		
Equipment/Operation/Environment Assessed:	Staff at Risk:	Assessor:	Assessment Ref:	
Application Requested:	Others at Risk:	Date assessment carried out::		
Description & Purpose of Process /Product:				
1.	2.			

This safe system of work must be followed at all times. A copy of the full risk assessment is available on request.

ALWAYS:	NEVER:
	REMEMBER:-

Business Unit:			t:	APPROVAL & REVIEW		ı
Equipment/Operation/Environment Assessed:		Staff at Ris	k:	Assessor: Assessn		Assessment Ref:
Application Requested:			Risk:	Date assessment carried out::		
Description & Purpose of Process /Product:						
	Appointment &/or Role	Name		Signature	Date	
This Risk assessment has been approved	H&S Consultant.					
by the following persons	Responsible Senior manager on behalf of the NHS 24.	the				
	Staff side Representative					
All Assessments must be made	e available to the staff at ris	sk and be	available for inspection durin	g Audits and by I	Enforcing	Authorities
Highest Rating without control: Highest Rating with control:			This assessment will be review any significant changes to the Business Unit.			
Summary:						
Assessment Review Due to: - e.g.						

Appendix 3 – Health and Safety Inspection Form

This inspection form should be used at all main centres and NHQ on a monthly basis. In addition to this all local centres should be inspected every 3 months and all remote sites every 6 months.

For all questions where No is the answer explanatory text is required in the comments section

Location being inspected:	Inspection Conducted by:	
Date of Inspection:	Time of Inspection	

Electrical Issues	
Question	
All electrical equipment is within PAT test date	Yes / No / N/A
When is the next test due?	
All fixed electrical installations have been examined by	Yes / No / N/A
a competent engineer within the last 5 years	
When is the next test due?	
There are no obvious faults	Yes / No / N/A
There have been no reports (incident or otherwise) of	Yes / No / N/A
electrical faults	
There are no visibly damaged cables or plugs	Yes / No / N/A
Comments	
i.	

Fire Precautions				
Question				
Has a fire risk assessment been carried out?	Yes / No / N/A			
Is there a suitable system for raising the alarm in the	Yes / No / N/A			
event of a fire?				
The fire alarm system has been tested in the last 7 days	Yes / No / N/A			
There is a clearly defined evacuation procedure	Yes / No / N/A			
All evacuation routes are clear and unobstructed	Yes / No / N/A			
All fire fighting equipment (extinguishers, sprinklers etc)	Yes / No / N/A			
have been serviced in the last 12 months				
All fire doors are kept closed (or held open using	Yes / No / N/A			
suitable release devices)				

A fire evacuation drill (planned or unplanned) has been conducted in the last 6 months	Yes / No / N/A
What was the date of the last evacuation	
PEEP plans are in place for all staff who need them	Yes / No / N/A
All fire call points are unobstructed and undamaged	Yes / No / N/A
Comments	
i.	

First Aid Arrangements	
Question	
There is first aid box (it is well stocked)	Yes / No / N/A
The contents of the first aid box are all in date	Yes / No / N/A
There is a trained first aider or designated person	Yes / No / N/A
There are first aid signs in place	Yes / No / N/A
Accident report forms are readily available	Yes / No / N/A
Comments	
i.	

Slip Trip Fall Issues				
Question				
All corridors and walkways are free from obstruction	Yes / No / N/A			
All cables are well managed and do not represent a	Yes / No / N/A			
hazard				
All fluid spillages are tidied up swiftly	Yes / No / N/A			
Slippery floor signs are available if needed	Yes / No / N/A			
All floor coverings are maintained so as to prevent slips	Yes / No / N/A			
trips and falls				
All external grit bins are full	Yes / No / N/A			
There is a process in place to manage snow falls to	Yes / No / N/A			
clear walkways and car parks				
All external and internal lighting is working	Yes / No / N/A			
All stairways have suitable hand rails	Yes / No / N/A			
All stairways are unobstructed	Yes / No / N/A			
All stairs are in good condition with no broken or worn	Yes / No / N/A			
treads				

There are no slip trip hazards near the top of stairs	Yes / No / N/A
All external walkways are free from potholes and other	Yes / No / N/A
trip hazards	
Comments	
i.	

Washing and Hygiene Facilities					
Question					
Hot and cold running water is provided	Yes / No / N/A				
Drinking water is available (and labelled)	Yes / No / N/A				
Soap and towels are available at all wash stations	Yes / No / N/A				
Toilets and wash areas are clean and tidy with no	Yes / No / N/A				
obvious damage or faults (Eg toilet seats, washbasins,					
taps, flooring, doors etc)					
There are sufficient welfare facilities for the number of	Yes / No / N/A				
staff on site					
Disposal facilities are in place for sanitary waste	Yes / No / N/A				
Comments					
i.					

Risk Assessment	
Question	
There are DSE assessments for all users	Yes / No / N/A
There are sufficient manual handling risk assessments	Yes / No / N/A
All new and expectant mothers have a valid risk assessment	Yes / No / N/A
Where lone working is identified a risk assessment has been completed	Yes / No / N/A
There is a "Generic" risk assessment document covering all identified risks	Yes / No / N/A
The Generic risk assessment has been reviewed locally with regard to this site	Yes / No / N/A
All work conducted above floor level is covered by a work at height risk assessment (steps, ladders, loft spaces etc)	Yes / No / N/A
Comments i.	

General Workplace and Environment					
Question					
All heating and ventilation systems are maintained and working	Yes / No / N/A				
There is a good standard of housekeeping	Yes / No / N/A				
All doors can be secured	Yes / No / N/A				
All external doors are secured at night	Yes / No / N/A				
There is 24 hours security cover	Yes / No / N/A				
Are all windows secure	Yes / No / N/A				
All windows can be safely opened without causing a hazard to others	Yes / No / N/A				
There are suitable rest and eating facilities	Yes / No / N/A				
Rest and eating facilities are maintained in a clean state	Yes / No / N/A				
There is sufficient working space for all staff	Yes / No / N/A				
All workstations are in good condition	Yes / No / N/A				
Noise readings have been taken within the last month	Yes / No / N/A				
What were the latest noise readings?					
All work equipment is well maintained	Yes / No / N/A				
All storage areas are clean and tidy	Yes / No / N/A				
Items are not stored on top of cupboards/ filing cabinets	Yes / No / N/A				
All staff know how to access health and safety policies and procedures (ask at least 2)	Yes / No / N/A				
Suitable waste containers are available and these are not overflowing	Yes / No / N/A				
Ladders / steps where provided are in good condition and regularly inspected	Yes / No / N/A				
Vehicle movements do not represent a hazard to persons	Yes / No / N/A				
Comments i.					

Miscellaneous	
Question	
There is a statutory H&S notice displayed within the building	Yes / No / N/A
Staff know how to report an incident	Yes / No / N/A
All internal lights are working	Yes / No / N/A
Where necessary blinds have been provided to manage glare	Yes / No / N/A
Staff who drive for work have had their driving licences checked	Yes / No / N/A
All first aid equipment is within use by dates	Yes / No / N/A
All passenger carrying lifts have received a statutory examination within the last 6 months	Yes / No / N/A
If the showers are not used daily, the cleaning programme includes running the shower weekly for 5 minutes (to avoid the risk of legionella)	Yes / No / N/A
Records of shower run through to prevent Legionella are kept	Yes / No / N/A
Shower heads and hoses (where fitted) are descaled and cleaned at least quarterly	Yes / No / N/A
Comments i.	

Partnership representative comments				
Name of Partnership Representative:				
Comments				
i.				



Appendix 4 - Management Audit

HEALTH AND SAFETY MANAGEMENT AUDIT QUESTIONNAIRE (SELF ASSESSMENT) 2019

KEY TO SCORES:

- Score 1 Cannot provide any evidence of any system, process or policy/procedure in place
- Score 2 System, process or policy/procedure is in place but could be improved
- Score 3 System, process or policy/procedure is in place and can be evidenced as effective

 Does the organisation have a health and safety policy statement that is clear and unambiguous? Does it address health, safety and welfare? Has the head of the organisation signed the policy? Is there a commitment to review the policy and keep it up to date? Has the policy been reviewed within the specified time frame? Is there evidence that health and safety responsibilities are delegated to appropriate levels in the organisation? Has a senior member of the management team been designated to lead on health and safety? 		Criteria	Score	Comments/Evidence
welfare? 1	1.	and safety policy statement that is	1 🗆 2 🗆 3 🗆	
signed the policy? 4. Is there a commitment to review the policy and keep it up to date? 5. Has the policy been reviewed within the specified time frame? 6. Is there evidence that health and safety responsibilities are delegated to appropriate levels in the organisation? 7. Has a senior member of the management team been designated 1 2 3 3 4 5 5 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6	2.		1 🗆 2 🗀 3 🗆	
policy and keep it up to date? 5. Has the policy been reviewed within the specified time frame? 6. Is there evidence that health and safety responsibilities are delegated to appropriate levels in the organisation? 7. Has a senior member of the management team been designated 1	3.		1 🗆 2 🗆 3 🗆	
the specified time frame? 6. Is there evidence that health and safety responsibilities are delegated to appropriate levels in the organisation? 7. Has a senior member of the management team been designated 1	4.		1 🗆 2 🗆 3 🗆	
safety responsibilities are delegated to appropriate levels in the organisation? 7. Has a senior member of the management team been designated 1 2 3	5.		1 🗆 2 🗆 3 🗆	
management team been designated 1 \(2 3 \)	6.	safety responsibilities are delegated to appropriate levels in the	1 🗆 2 🗔 3	
to lead of fleatiff and safety?	7.		1 🗆 2 🗔 3	

	Criteria	Score	Comments/Evidence
8.	Is there a clear organisational structure that is capable of discharging the health and safety responsibilities of the organisation?	1 🗌 2 🗍 3	
9.	Is there a process for setting health and safety objectives for managers that link to organisational strategies, plans and programmes?	1 🗌 2 🗍 3	
10.	Is there evidence that those local management health and safety objectives are monitored?	1 🗆 2 🗆 3 🗆	

Is there a quality control system for health and safety documentation?	1 🗌 2 🔲 3 🗌	
Are all the health and safety documents easily accessible to every employee?	1 🗌 2 🗌 3 🗌	
Is there evidence that compliance with health and safety procedures is monitored?	1 🗆 2 🗆 3 🗆	
Is there evidence that employees are consulted on key health and safety issues and their views (where appropriate) are taken into account?	1 🗆 2 🗆 3 🗆	
Is there evidence that following consultation the views of employees are taken into account when making decisions?	1 🗆 2 🗆 3 🗆	
	Score	Comments/Evidence
Is there a formal process that enables employees to raise health and safety issues with senior management?	1 🗆 2 🗆 3 🗆	
Are there criteria setting out how and within what timeframe management will respond to issues raised?	1 🗆 2 🗆 3 🗆	
Is there evidence that health and safety co-operation is extended to and expected from partnerships, cotenants and contractors?	1 🗆 2 🗆 3 🗆	
Is there a process to communicate health and safety information to employees?	1 🗆 2 🗆 3 🗆	
Is there evidence that the health and safety policy is communicated to employees and others?	1 🗆 2 🗆 3 🗆	
Criteria	Score	Comments/Evidence
Is there evidence that changes in health and safety information are identified and communicated to employees?	1 🗌 2 🗍 3	
Is health and safety information available in other formats, e.g. large type, audio versions and other	1 🗌 2 🗎 3	
	health and safety documentation? Are all the health and safety documents easily accessible to every employee? Is there evidence that compliance with health and safety procedures is monitored? Is there evidence that employees are consulted on key health and safety issues and their views (where appropriate) are taken into account? Is there evidence that following consultation the views of employees are taken into account when making decisions? Criteria Is there a formal process that enables employees to raise health and safety issues with senior management? Are there criteria setting out how and within what timeframe management will respond to issues raised? Is there evidence that health and safety co-operation is extended to and expected from partnerships, cotenants and contractors? Is there a process to communicate health and safety information to employees? Is there evidence that the health and safety policy is communicated to employees and others? Criteria Is there evidence that changes in health and safety information are identified and communicated to employees? Is there evidence that changes in health and safety information are identified and communicated to employees? Is there approached to the matter and safety information are identified and communicated to employees? Is there ovidence that changes in health and safety information are identified and communicated to employees? Is there ovidence that changes in health and safety information are identified and communicated to employees? Is there ovidence that changes in health and safety information are identified and communicated to employees? Is there ovidence that changes in health and safety information are identified and communicated to employees?	health and safety documentation? Are all the health and safety documents easily accessible to every employee? Is there evidence that compliance with health and safety procedures is monitored? Is there evidence that employees are consulted on key health and safety issues and their views (where appropriate) are taken into account? Is there evidence that following consultation the views of employees are taken into account when making decisions? Criteria Score Is there a formal process that enables employees to raise health and safety issues with senior management? Are there criteria setting out how and within what timeframe management will respond to issues raised? Is there evidence that health and safety co-operation is extended to and expected from partnerships, cotenants and contractors? Is there a process to communicate health and safety information to employees? Is there evidence that the health and safety policy is communicated to employees and others? Criteria Score Is there evidence that changes in health and safety information are identified and communicated to employees? Is health and safety information are identified and communicated to employees? Is health and safety information are identified and safety information are identified and communicated to employees? Is health and safety information are identified and safety information are identified and safety information are identified and communicated to employees?

Score

Criteria

Comments/Evidence

23.	Are there criteria setting out when and how managers are expected to formally discuss health and safety matters with their employees?	1 🗌 2 🗌 3	
24.	Are health and safety competencies identified and built into job profiles?	1 🗌 2 🔲 3 🗌	
25.	Is there evidence that health and safety training needs are being identified and met?	1 🗌 2 🗌 3 🗌	
26.	Is there evidence that health and safety training outcomes are evaluated?	1 🗆 2 🗆 3 🗆	
27.	Is there evidence that the requirements for "information, instruction and training" are being met?	1 🗆 2 🗀 3 🗆	
	Criteria	Score	Comments/Evidence
28.	Are records of individual training/competency held?	1 🗆 2 🗆 3 🗆	
00	Are there systems in place to		
29.	identify hazards and assess risk in the organisation?	1 🗆 2 🗆 3 🗆	
30.	identify hazards and assess risk in	1	
	identify hazards and assess risk in the organisation? Is there evidence that hazards are identified and risk assessed		
30.	identify hazards and assess risk in the organisation? Is there evidence that hazards are identified and risk assessed throughout the organisation? Is there evidence that the risk assessment process feeds into control measures and safe systems	1 🗆 2 🗆 3 🗆	
30.	identify hazards and assess risk in the organisation? Is there evidence that hazards are identified and risk assessed throughout the organisation? Is there evidence that the risk assessment process feeds into control measures and safe systems of work? Are there systems in place to monitor the effectiveness of the	1	Comments/Evidence
30.	identify hazards and assess risk in the organisation? Is there evidence that hazards are identified and risk assessed throughout the organisation? Is there evidence that the risk assessment process feeds into control measures and safe systems of work? Are there systems in place to monitor the effectiveness of the controls?	1	Comments/Evidence
30. 31. 32.	identify hazards and assess risk in the organisation? Is there evidence that hazards are identified and risk assessed throughout the organisation? Is there evidence that the risk assessment process feeds into control measures and safe systems of work? Are there systems in place to monitor the effectiveness of the controls? Criteria Does the organisation have key performance indicators (KPIs) for	1	Comments/Evidence
30. 31. 32.	identify hazards and assess risk in the organisation? Is there evidence that hazards are identified and risk assessed throughout the organisation? Is there evidence that the risk assessment process feeds into control measures and safe systems of work? Are there systems in place to monitor the effectiveness of the controls? Criteria Does the organisation have key performance indicators (KPIs) for health and safety performance? Is there evidence that KPIs are used to improve health and safety	1	Comments/Evidence

	organisations health and safety performance?		
37.	Does the audit include a plan of continuous improvement?	1 🗌 2 🔲 3 🗌	
38.	Is there evidence that senior managers review the health and safety performance of the organisation?	1 🗌 2 🗍 3 🗍	
	Criteria	Score	Comments/Evidence
39.	Is there evidence that the review feeds into future plans and strategies?	1 🗆 2 🗀 3 🗆	
40.	Is there evidence that a review of an individual's performance includes consideration of their health and safety performance?	1 🗆 2 🗀 3 🗆	
41.	Are there arrangements for reviewing the adequacy of the health and safety organisational structure?	1 🗆 2 🗆 3 🗆	
42.	Has the organisation access to professional and competent health and safety advice?	1 🗆 2 🗆 3 🗆	
43.	Does the organisation engage with trade union representatives?	1 🗆 2 🗆 3 🗆	
44.	Is there a functioning health and safety committee?	1 🗆 2 🗆 3 🗆	
45.	Does the committee meet on a planned and regular basis, have terms of reference and are minutes available?	1 🗆 2 🗀 3 🗆	
	Criteria	Score	
46.	Are all accidents and incidents recorded and stored in a central location?	1 🗌 2 🔲 3	
47.	Is there a named person/function responsible for leading on accident investigations?	1 🗆 2 🗆 3 🗆	
48.	Is there a named person/function responsible for identifying trends and recommending actions?	1 🗌 2 🗎 3	
49.	Are Directors aware of their responsibilities for health and safety?	1 🗌 2 🗎 3	
50.	Is health and safety discussed at Director/Strategic level?	1 🗆 2 🗆 3 🗆	

New questions added in 2015 Audit. Criteria Score Comments/Evidence Greater than 90% of staff have a 51. training record demonstrating completion of Fire safety training in 1 🗌 2 🗌 3 🗌 last 12 months Greater than 90% of staff have a 52. training record demonstrating completion of DSE training in the 1 🗌 2 🔲 3 🗌 last 2 years Greater than 90% of staff have completed the health and safety awareness training in the last 2 1 2 3 3 vears New Questions added in 2016 Audit Criteria Score Comments/Evidence 1 2 3 54 Registered or working through Gold 55 Evidence of campaigns 1 2 3 New Questions added in 2018 Audit Criteria **Comments/Evidence** Score Greater than 50% of staff have a 54. More completers than registered training record demonstrating drivers completion of Driver Awareness 1 🗌 2 🔲 3 🖂 training in last 12 months Greater than 50% of staff have a 55. 25% of managers completed training record demonstrating completion of Stress Management 1 🗌 2 🖾 3 🗌 Awareness in the last 2 years Total Available: **Actual Score:** Person completing the assessment Job title Date completed 2016 2017 2018 2019 **Percentage Score**

Areas for improvement

2015 Audit Action Plan

No	Area	Action required	Person/function responsible	Complete?



Appendix 5 – New Site Inspection Form

HEALTH AND SAFETY AUDIT CHECKLIST FOR NEW NHS 24 SITES

This checklist must be completed by NHS24 prior to the service going live.

Date of Inspection			Location		
Time of Day					
Persons completing inspection					
Is site currently in use by NHS 24?					
Is site currently laid out as expected	d for NHS 24 use?				
What are the approximate dimensions of the space available:	Width:	Length		Height	Total volume (m3)
How many staff are expected to use the space? (If lone working complete Lone Worker Risk Assessment)			Is this lega space 11m	lly compliant (min 3 per)?	
Is the proposed workspace suitable	?				
Comments:					

Sketch of area:



TOPIC	REQUIREMENTS	Yes/No N/A	DEFICIENCIES OR ADDITIONAL INFORMATION	SYSTEMS IN PLACE OR ACTIONS REQUIRED
1. Electrical	 Regular PAT testing of shared equipment? Date last completed Fixed electrical installations, including circuits examined every 5 years? Any obvious faults? 			
2. Fire Precaution s	 Has a fire risk assessment been completed? Is there a suitable system for raising the alarm in the event of a fire? Are there clearly defined, evacuation procedure and routes? Are fire extinguishers regularly maintained? Are fire doors kept closed or fitted with suitable release devices? What is the date of last fire evacuation drill? 			
3. First Aid	Is there a first aid box available?Is there designated			

TOPIC	REQUIREMENTS	Yes/No N/A	DEFICIENCIES OR ADDITIONAL INFORMATION	SYSTEMS IN PLACE OR ACTIONS REQUIRED
	responsible person? • Are the remote staff aware of how to report an accident or incident – including an abusive call?			
4. Slipping and Tripping Hazards	 Are obstructions kept to a minimum where possible - such as equipment or trailing cables, open drawers? Are spilled liquids quickly dealt with and wet floor signs used? 			
5. Lighting	 Is there adequate lighting in all areas? Are window blinds required? 			
6. Washing and Toilet Facilities	 Hot and cold water provided? Are soap and towels/drying facilities provided? Is drinking water provided and clearly labelled? Are toilets clean, sufficient in number and in a reasonable condition? 			

TOPIC	REQUIREMENTS	Yes/No N/A	DEFICIENCIES OR ADDITIONAL INFORMATION	SYSTEMS IN PLACE OR ACTIONS REQUIRED
7. Heating and ventilation	 Is an adequate temperature maintained? Is this checked? Is there suitable ventilation? 			
8. General Workplace and Environme nt	 Is there a good standard of housekeeping and cleanliness? Are there suitable handrails on any stairs? Are doors secure - especially at night? Is there 24 hour security cover? Are there suitable rest and eating facilities, and are they kept in reasonable condition? Is the workstation furniture in reasonable condition? Is the standard of decoration suitable? Are the noise levels within regulation requirements? Have water bottles and sealed cups been provided? 			
9.	Are all necessary			

TOPIC	REQUIREMENTS	Yes/No N/A	DEFICIENCIES OR ADDITIONAL INFORMATION	SYSTEMS IN PLACE OR ACTIONS REQUIRED
Statutory Examinations e.g. Lifts	examinations and tests carried out?			
10. Site specific issues	 Are there any identified issues specific to the remote site? Have the remote site staff reported any hazards or made any complaints? 			
11. Statutory Training & Informatio n	 Have the remote staff completed the required e learning modules? Has a DSE Questionnaire been completed? Is there a notice board displaying all the relevant information required? Have the remote site staff been made aware of the H&S Policies and Procedures available on the Intranet? 			

Action Planning

Action Item	Description	By Whom	By When	Complete?
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				