CONTROL OF CONTRACTORS

POLICY AND GUIDANCE

Version: 2
Date issued: April 2015
Review date: March 2018
Aug 2018 SMT agreed extension to Nov 2018
Applies to: Organisation wide

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Rewritten post acquisition to provide a uniform approach and guidance to the control of Contractors.

**Document Summary:** This policy sets out the role of individuals with responsibilities for appointing contractors to carry out works on any Trust premises and sets out the arrangement for minimising risk.

- **Approving body:** Regulation Governance Group  
  **Date:** February 2015

- **Equality Impact Assessment:** Impact Part 1  
  **Date:** December 2014

- **Ratification Body:** Senior Management Team  
  **Date:** April 2015

- **Date of issue:** April 2015

- **Review date:** March 2018  
  Aug 2018 SMT agreed extension to Nov 2018

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1. **INTRODUCTION**

1.1 This policy sets out the role of individuals with responsibilities for appointing contractors to carry out works on any Trust premises and sets out the arrangement for minimising risk.

1.2 The Trust recognises that the use of contractors is a necessity and that they are employed throughout the Trust. The term ‘contractor’ does not exclusively refer to maintenance or building workers.

1.3 The Health and Safety at Work Act etc. 1974 and its subordinate legislation imposes a duty on the Trust and the contractor to safeguard the health, safety and welfare of those in its employment and those not in its employment but who may be affected by its activities.

2. **PURPOSE AND RATIONALE**

2.1 The aim of this policy is to establish a consistent Trust wide system for the engagement, management and control of contractors and to ensure compliance with health and safety legislation.

2.2 The Trust recognises its legal responsibilities regarding contractors on its premises and about its business to ensure the health, safety and welfare of its employees, patients and visitors.

2.3 The Trust shall only employ competent contractors and they will adopt and work to this policy.

2.4 The Trust is committed to ensuring adequate and timely co-operation between the Trust and Contractor.

2.5 It will be the responsibility of each site lead to ensure contractors report to the appropriate department after being booked in.

2.6 Both the Trust and the Contractors will comply with required statutory regulations, as follows:

- Health and Safety at Work Act 1974
- Construction Design and Management 1994
- Management of Health and Safety at Works Regs 2002
- Use of contractors – A joint responsibility HSE 200

3. **DUTIES AND RESPONSIBILITIES - CONTRACTS**

3.1 **Contractor**

- A contractor is an organisation or individual that undertakes outsourced work on behalf of the Trust. This typically will include, but is not limited to, the maintenance or improvements to site, infrastructure (inclusive of IT), plant, medical equipment, major and minor building works and demolitions. Examples include:
  - Company representative
  - Other Trust staff
  - Agency staff
  - Consultants
- External auditors
- NHS Professionals
- Construction or maintenance workers

3.2 **Supervising Officer**

- A supervising officer of the Trust is an employee who has commissioned a contractor to carry out a specific piece of work. His instruction to carry out this work may be via a telephone call, letter, or an order. It is the role of the supervising officer to ensure that prior to work commencing the necessary risk assessments and method statements have been approved on behalf of the Trust.

3.3 **Authorised Person (AP)**

- An authorised person is an individual who has received specific training and competency in a specific subject area, for example, piped medical gases, electrical systems. Only designated AP may issue Permits to Works.

3.4 **Competent Person (CP)**

- A competent person is an individual who has received specific training and competency in a specific subject area, for example piped medical gases, electrical systems. Only a CP can work on these systems.

3.5 **Method Statement**

- A document provided by the contractor which incorporates a detailed written sequence for carrying out identified tasks, which may include risk assessments to ensure that the work activities are done in a sequence to confirm safety.

- Where method statements are required they shall be reviewed by the Trust competent person and approved prior to the task being undertaken.

3.6 **Safe Systems of Work**

- A safe system of work is a formal procedure which results from a risk assessment which identified a safe method of work to ensure that the hazards are eliminated or the remaining risks are minimised.

3.7 **Permit to Work**

- Written permit to work systems are normally reserved for occasions when the potential risk is high and where, at the same time, the precautions needed are complicated so requiring written reinforcement. Permits should only be issued by a competent and qualified person. All permits should be time constrained.

- Permits to work should not be mistaken for a “safe system of work”, rather a safe system of work may require a permit to work system to be adopted as part of its overall systematic control of risk.
3.8 **Risk Assessments**
- A risk assessment is a careful examination of what could cause harm to people and how. You then weigh up whether enough precautions have been taken or more should be done.
- The statutory standard that a risk assessment is “suitable and sufficient” for purpose, that is, they identify all foreseeable hazards and then implement appropriate control measures to eliminate or mitigate the risks.

3.9 **Induction**
- An induction to contractors is a legal requirement to introduce contractors to the Trust policies and procedures and associated risks working on the Trust policy.

4. **DUTIES AND RESPONSIBILITIES – TRUST MANAGEMENT**

4.1 For general responsibilities refer to the Health and Safety Policy. The specific responsibilities in relation to this policy are as follows:

4.2 **The Chief Executive**
- The Chief Executive has overall responsibility for the appointment, control and use of contractors used on Trust sites.

4.3 **Director of Governance and Corporate Development**
- On behalf of the Chief Executive, the Director of Governance and Corporate Development is responsible for ensuring that the Trust meets its statutory obligations and effective arrangements for the management of health and safety are in place.

4.4 **Head of Estates**
- The Head of Estates is responsible for ensuring that the requirements of this policy are observed and adhered to in all estates related work carried out by estates staff and external contractors.

4.5 **All Departmental Managers and Heads of Departments**
- Departmental Managers and Heads of Departments who originate contract specifications are responsible for ensuring that the necessary health and safety requirements are incorporated within the specification, ensuring that induction, sufficient information, instruction and training is provided.
- They will ensure that any contractors reporting to the Reception to sign in, will be issued with the contractors information as per the ‘further information’ section of this policy and notify the Estates Department of their presence on site.
- They are also responsible for ensuring the monitoring of the contract in line with organisational requirements.
4.6 **Procurement Manager**

- The Procurement Manager will ensure that all contractors invited onto site to carry out works or services, via orders sent from individual wards and departments are issued with the contractor information.

4.7 **Head of Health and Safety**

- The Head of Health and Safety/Risk will advise and assist on appropriate measures to meet legal and organisational requirements when required.

4.8 **All Employees**

- All employees are accountable to their line manager, to assist with making the Trust a safe and healthy place in which to work by ensuring:
  - Adherence to measures set out in the Trust Health and Safety and associated policies, guidance and other documents which describe measures put in place to prevent accidents and ill health to themselves and others
  - They report hazards and incidents appropriately
  - Trust employees and volunteers must report unsafe practices and conditions to their line manager and or the health and safety department, who must notify the person responsible for the contract
  - Work orders or instructions issued for services from a contractor shall only be given by the Trust’s identified person

4.9 **The Contractor**

- All contractors will comply with the requirements set out in this policy. They must ensure that suitable and sufficient site specific risk assessments are carried out. No work shall be carried out that requires a permit to work until permission is granted from an Authorised Person.
- Contractors must report untoward occurrences and incidents using the Trust’s incident reporting system.

5. **DEFINITIONS**

All terms used in this document are clearly explained throughout.

6. **POLICY MONITORING**

6.1 Where monitoring has identified deficiencies, recommendations and action plans will be developed and changes implemented accordingly. Progress on these will be reported to the Estates Manager.

6.2 To ensure the Control of Contractors Policy is operating correctly and that safety is being maintained during any hazardous activity, the system is monitored on a periodic basis.

6.3 Checks will be carried out by:
- Random spot checks on contractors’ ID badges
- Random spot checks to ensure contractors have signed log sheet
- Checks to ensure new contractors have received induction and copy of ‘contractors information’ prior to starting work
- Detailed investigation of any incidents relating to contractors work
- Checks are made that the contractor is working within the limits of the policy

6.4 The policy will be reviewed and updated every two years or sooner if regulations or documentation are revised.

6.5 Issues of non-compliance and good practice should be reported to the Health and Safety Department; these will be reported to the Trust Health and Safety Committee.

6.6 Audits and inspections may be undertaken by internal and external stakeholders.

6.7 Action plans as a result of these visits must be implemented and monitored by the Health and Safety Department.

7. HEALTH AND SAFETY GUIDANCE NOTE – CONTRACTORS INFORMATION

7.1 Introduction

- A hospital site has its own unique set of hazards and requirements that a contractor may not have been exposed to before. It needs to be recognised that hospital users include the sick, the frail and people with temporary or permanent impairments.
- Hospital users may also be under stress or have anxieties about being on the grounds but all hospital users have the expectation that a hospital should be a safe place and not one with the potential of causing them greater harm.
- Failure to adhere to site rules may, in the worst case scenario, be fatal to a patient, site visitor, member of Trust staff or you. Further information on any matter can be obtained from the Trust’s appointed person(s).

7.2 Access Control and Identification Badges

- The person responsible for the contractor will be responsible for organising access control and identification requirements.
- It is the contractor’s duty to wear appropriate forms of identification on site, i.e. Visitor Badge.

7.3 Asbestos

- Trust buildings may contain asbestos. The Asbestos Register for the Trust is held by the Estates Department and must be consulted prior to any construction, refurbishment or maintenance work which could potentially result in the disturbance of asbestos containing material. A copy is also available on site.
• Where planned work may result in the disturbance of asbestos containing materials the requirements stipulated in the Control of Asbestos Regulations 2006 and in the Trust Asbestos Policy must be implemented.

• On believing that you have discovered asbestos containing material, work must stop immediately, access must be restricted to the ‘contaminated area’ and it must be immediately brought to the attention of the Trust’s Estates Manager.

• Asbestos removal is controlled by a permit to work system. For further information regarding the application for and issuing of permits, please contact the Estates Department.

7.4 Car Parking

• Patients and visitors have the priority for accessing car parking spaces. The provision for car parking will be assessed on a case by case basis. Further information and arrangements can be obtained on each respective site.

7.5 Communication

• Prior to commencing your undertaking parties must agree a communication structure and notify all those who may be affected.

7.6 Confined Spaces

• Working on confined spaces is controlled by a permit to work system. For further information regarding the application for and issuing of permits, please contact the Estates Department.

7.7 Contact Names and Telephone Numbers

• The Trust appointed person and Contractor are responsible for disseminating the relevant contact names and numbers associated with the contract to the relevant persons. It is advisable that ‘out of hours’ and ‘emergency’ numbers are included.

7.8 Contractor’s Site

• Where an area can be clearly defined as a contractor’s site, the contractor shall implement site access control. This enclosure will then be deemed as the contractor’s site throughout the contract period. Safety regulations within that site shall then be primarily the responsibility of the contractor.

7.9 Control of Substances Hazardous

• The contractor must consider how these products may affect the hospitals population and a risk assessment completed, which must be available for inspection.

7.10 Criminal Records Bureau Checks

• The requirement for the contractor’s employees to be CRB checked will be stipulated in the contract.
7.11 **Data Protection**
- All contractors employed by the Trust must not keep or disclose any information regarding patients or staff. Where this occurs, the contractor will be instructed to leave site. The Data Protection Act 1984 renders an individual liable for prosecution in the event of unauthorized information disclosure.

7.12 **Dress Code and Protective Clothing**
- It is the responsibility of the contractor to provide and maintain appropriate protective clothing.
- General dress of a contractor should be appropriate to the surrounds of a hospital; clean clothing must be worn in the catering facilities.

7.13 **Dust and Fume Control**
- Dust producing equipment is to be controlled at source with local exhaust or dust suppression tools. All work areas are to be sealed as far as is reasonably practicable against dust outbreak to other areas. Working areas must be cleaned as required by means that does not promote dust transfer.
- For dust producing tasks in active service areas an infection control risk assessment must be completed, which must be approved by the Infection Control Department prior to work commencing.
- Dust produced through work activities can cause false fire alarm activations. The covering of heat and smoke detectors is controlled by the Estates Department. All covers are to be removed at the end of the working day.

7.14 **Electrical Safety (Low and High Voltage and Live Work)**
- This work is controlled by a permit to work system. For further information regarding the application for and issuing of permits please contact the Estate Department.

7.15 **Equipment and Tools**
- The contractor will ensure that all work equipment is suitable and statutorily compliant. Equipment must not be left where a possibility exists of causing a hazard to staff, patients and visitors.
- All portable electrical equipment shall possess a current test certificate. Voltage requirements should not exceed 110 volts unless protected by a suitable residual circuit breaker.
- The removal of guards (unless permission is given), using makeshift tools, leaving plant and or equipment in a dangerous state and gaining unauthorised access is prohibited.
- The transport of equipment and materials must be conducted in a safe manner along agreed transport routes.
- Unless in exceptional circumstances and in written agreement with the Trust’s appointed person, the contractor will be prohibited from using plant and equipment belonging to the Trust.
7.16 **Excavations**
- Excavations must be guarded and signed accordingly and with external lighting during the hours of darkness.
- This work is controlled by a permit to work system. For further information regarding the application for and issuing of permits, please contact the Estates Department.

7.17 **Fit for Work**
- All contractors are responsible for ensuring their staff and people working for them are ‘medically fit to work’. This means they have had appropriate occupational health checks by a competent practitioner who has certified that they are fit to do a specified job or type of work.

7.18 **Fire Safety and Management**
- All contractors are to ensure all staff are familiar with the fire risk control and emergency procedures for the premises.
- All contractors are to ensure that all the necessary ‘permits’ have been obtained from the Estates Department and detection heads likely to be affected by the work are isolated.
- Any work involving the breaching of fire compartments is to be reinstated as quickly as possible.
- Flammable liquids and materials, if required, must be used and stored in accordance with statutory and Trust requirements. The Trust Fire Advisor must be notified prior to bringing these products on site.
- Gas cylinders are not to be kept in buildings or on roofs over night. These should be removed from any internal site and stored securely in an agreed location.
- Fire fighting equipment to be provided.
- The Trust’s appointed person will inform the contractor of planned fire alarm tests.
- Provided emergency equipment must not be removed or obstructed.
- On hearing the fire alarm (not a test) the following procedure should be followed:
  - Leave the building by the nearest available fire exit
  - Assemble in the designated area
  - Do not use the lifts
  - Do not return for personal belongings and tools
  - Do not return to the building for any reason until authorized to do so
- On discovering a fire the following procedure should be followed:
  - Break the glass of the nearest fire alarm point or
  - Inform switchboard/reception of location and the extent of the fire
- Tackle the fire with the equipment provided, only if it is safe to do so and only if you have been trained in the use of fire fighting equipment
- Leave the building by the nearest available fire exit
- Do not return for personal belongings and tools
- Do not return to the building for any reason until authorized to do so
- Do not use the lift
- Assemble in the designated area

7.19 **First Aid and Accident or Incident Reporting**

- The contractor is responsible for compliance for their staff to the Health and Safety (first aid) Regulations, including where required the provision of an appointed first aider and a suitably stocked first aid box.
- The contractor is responsible for reporting RIDDORs involving their staff or undertaking to the Health and Safety Executive and also to the Trust via the Trust’s appointed person, who should complete an internal incident form.

7.20 **Gas Installations Including Medical Gas Installations**

- These should not be commissioned without the Trust’s appointed person’s approval.
- Work, including commission on any gas installation, is controlled by a permit to work system. For further information regarding the application for and issuing of permits, please contact the Estates Department.

7.21 **Hot Work**

- The term ‘hot work’ covers all contractual maintenance/repair/refurbishment and or contractual work involving the use of oxyacetylene or cutting equipment, welding, blow lamp or any other flame producing equipment, or any work with a significant risk of activating the fire detection systems.
- This work is controlled by a permit to work system. For further information regarding the application for and issuing of permits, please contact the Estates Department.

7.22 **Health Screening**

- The contractor is responsible for health screening to ensure its employees are both fit for work and work is not likely to cause them harm. They have a duty to ensure that statutory health surveillance takes place when required and take appropriate action to protect the health and safety of its workforce. They should monitor the effectiveness of any controls they put in place to protect the health and safety needs of an individual. Health and safety arrangements should take full account of an individual's health, safety and disability needs.
7.23 **Infection Prevention and Control**

- When working in patient areas, the contractor must report to the Head of Department to get instruction on the relevant infection prevention and control procedures.
- For contractors undertaking work in active service areas, the contractor must comply with infection prevention and control advice.
- Hand decontamination utilising soap and water or alcohol hand gel (on visibly clean hands) is a pre-requisite when accessing and aggressing active service areas.

7.24 **Mental Health**

- The contractor shall ensure that a copy of this notice is prominently displayed on the site and that the attention of those employed on the site, including sub-contractors, is drawn to its conditions.
- Mentally ill patients are resident at or visit the hospital out-patients. Ill-treatment of patients and any improper sexual relationship with patients constitutes an offence within the provisions of the Act. Any such occurrence involving a member of the contractor’s sub-contractors’ staff is to be reported immediately to the management of the hospital and to the Police and the offender may be suspended from duty. Contractor’s or sub-contractors’ staff are not allowed to give to patients intoxicating liquor, any medicine or drugs, any knives, tools or such sharp instruments, matches or other articles with which a patient could injure himself or herself or anyone else. No member of the contractor’s or sub-contractors’ staff shall take charge in a private or personal capacity of money or property belonging to a patient or shall sell to, buy from or borrow from a patient. (See Appendix B)

7.25 **Mobile Communication Equipment**

- Where a contractor has an isolated site there should not be a problem with mobile communication equipment.
- There are certain areas of the hospital where the use of mobile communication devices is prohibited on the grounds that their signals may interfere with medical devices.
  - With one metre of any patient who is connected to medical equipment including patients in uncontrolled areas and those being transferred
  - Within one metre of analysis equipment such as blood analysers
  - Where signage prohibits the use
- It is requested that when used contractors have consideration for others. In patient areas a mobile phone should be used in accordance with local signage or as advised by staff locally.
- The use of cameras is forbidden without prior agreement with the Trust’s appointed persona
- PLEASE NOTE: Walkie Talkies have a much greater potential for interference with medical equipment. If a contractor uses these they
MUST NOT be used within three metres of medical equipment and are prohibited from the wards or departments stipulated above.

7.26 Noise
- The contractor must ensure that all possible measures to reduce noise and vibration caused by their undertaking has been minimised and, when necessary, informing local staff that may be affected in advance.

7.27 Nurse Call System
- No work is to be undertaken on the nurse call system without prior approval of the Department Manager/Head of Department/Matron.

7.28 Patient Interaction
- If contractors are required to interact with patients, it is expected they will do so in a respectful and courteous manner. Contractors should not have sexual relationships with patients who are in care or receiving treatment and are reminded that sexual behaviours with vulnerable patients, including those who are mentally ill or mentally handicapped, contravenes the Mental Health Act, and carries a liability of prosecution.
- Ill-treatment of patients, either verbally or physically, is considered a serious offence, with a probable outcome of the contractor’s member of staff being removed immediately from the Trust.

7.29 Risk Assessments
- Risk assessments are required to be documented for activities that pose a significant risk to the health, safety and welfare of people, property or plant. All stakeholders must be informed of the risks and associated controls.

7.30 Scaffolding and Roof Access Equipment
- Scaffolds, ladders and other access equipment must be in sound condition and of good construction, adequate for the purpose, properly maintained and in accordance with statutory safety standards and any relevant codes of practice.
- The use of a ladder in an active service area must involve a member of the contractor’s staff remaining at the base of the ladder to prohibit unauthorized use and access.
- It is the responsibility of the contractor to obtain handover certificates from the scaffolder, to subsequently inspect the equipment and sign the log book, which can be held by the contractor.
- All scaffolding and towers must be maintained in a safe condition. Unattended ladders and ropes must be secured out of the reach of children and other unauthorized persons. At the end of the working day, any hoist motor must be immobilised with the platform at ground level.
7.31 **Security**
- The contractor is responsible for the security of their ‘site’ and possessions. Further advice can be obtained from the Trust’s appointed person.

7.32 **Services**
- The Estates Department require sufficient notice and approval to isolate or secure mechanical and electrical services, if not in the contractor’s site. This would normally be ten working days for extensive work and at least five days otherwise, or as indicated in the project plan, via the pre-contract meeting.

7.33 **Skips**
- If using skips, the contractor must provide evidence to the Trust’s Estates Manager that the skip company is licensed to accept hazardous waste and who may ‘spot check’ documentation.
- Skips used on site must be enclosed lockable types.
- Suitable positions will be designated.

7.34 **Smoking, Drugs and Alcohol**
- Smoking and the consumption of alcohol are prohibited on Trust property.
- Anyone found in possession or under the influence of alcohol or illegal drugs whilst on site will be instructed to leave. This matter will be reported via the Trust incident forms.

7.35 **Sub-Contractors**
- The primary or main contractor is responsible for the management of sub-contractors and compliance to Trust rules.

7.36 **Trust Respect Behaviours**
- Contractors, like Trust staff, are required to follow the Trust Respect Behaviours at all times. These have been agreed and are as follows:
  - Treat others as you would like to be treated
  - Listen to and support others and make time to do so
  - Seek, acknowledge and value others’ experience and contribution
  - Acknowledge other’s beliefs
  - Be courteous and considerate to all
  - Treat others fairly and equally
  - Be honest and trustworthy and act with integrity
  - Encourage others to treat all staff with respect
  - Challenge the behaviour of staff who do not sow respect to others

7.37 **Waste Management**
- Contractors must ensure waste is managed for statutory compliance.
• Contractors should be aware that if the cost of the project is greater than £300,000 then a site waste management plan must be created and managed by the contractor.

• If required, an emergency contingency plan will need to be formulated to minimise the impact and detriment of environmental incidents.

• Trust waste receptacles are not to be used without prior consent from the Trust’s Estate Manager.

• The use of clinical bins is prohibited and receptacles marked or labelled for clinical waste should not be removed or incorrectly used.

• No debris is to be burnt on site.

• All access and egress routes must be kept clear with waste not being allowed to accumulate.

• Waste must be stored safely and securely.

• Particular attention must be paid to hazardous waste which must be disposed of according to current legislation. Hazardous waste includes:
  - All electrical waste
  - Asbestos
  - Mercury products
  - All paint (water and solvent based)
  - All aerosols
  - All gas canisters
  - Fluorescent tubes
  - Sodium lamps
  - Plasterboard
  - Oils and oil filters
  - Solvents
  - Materials contaminated with solvents and or oils
  - All batteries
  - Laser toner and inkjet cartridges

  Please note this is not an exhaustive list

7.38 Working at Heights

• Roof work and work which poses a significant risk of falling from a height is controlled by ‘a permit to work’. Further information can be obtained from the Trust’s appointed person.

8. HEALTH AND SAFETY GUIDANCE NOTE – INFECTION PREVENTION AND CONTROL FOR BUILDING CONTRACTORS

8.1 Introduction

• The Estates Department recognises the importance of infection prevention and control in reducing risk to staff, patients and others as a result of its activities. The risk of infection arises from work being
carried out in a healthcare environment but also due to works carried out on building services or in hazardous locations. It is therefore important that contractors are aware of and read the Infection Prevention and Control leaflet – Information for Contractors, Appendix A.

- The Estates Department therefore ensures that adequate arrangements are in place to eliminate or, where this is not possible, to minimise the risk of infections.
- This safety guidance note is intended to ensure compliance with the Trust’s Infection Prevention and Control Policy for Estates Department activities.
- All Estates activities are assessed in respect of the infection prevention control impact with the Infection Prevention and Control Team involved at an early stage. The guidance within Health Building Note 00-09: Infection control in the built environment is implemented where possible.
- This building note covers all activities under the control of the Estates Department, whether carried out by directly employed staff or by contractors.

8.2 Competent Advice
- The Infection Prevention and Control Team is the principal source of competent advice for infection prevention and control information and assurance with regards compliance.
- Estates Department Managers and Supervisors are competent to initiate the infection prevention and control risk assessment and provide advice on the implementation of this guidance note.
- When working in other departments, the advice of the local managers is sought in respect of infection prevention and control matters.
- The Trust contracted Staff Occupational Health service is responsible for the provision of confidential advice on health issues. If these issues relate to infection, then the Infection Prevention and Control Team can provide any additional competent advice.
- The Health and Safety Executive and NHS Estates provide further guidance in a number of publications.

8.3 Responsibilities
- Risk assessments are completed for all activities with infection prevention and control issues identified and managed appropriately.
- Safe systems of work are implemented to reduce risk.
- All Estates staff to be made aware of the Control of Contractors Policy and appropriately trained in its implementation.
- Where assessed as necessary, Estates staff receive the appropriate immunisations to reduce the risk from infection.
• Appropriate advice on Infection Prevention and Control issues is given to contractors and others carrying out work for the Estates Department.

• Where an infection risk is identified the Infection Prevention and Control Team must be involved.

• All infection related incidents are properly investigated and recorded.

• Staff involved in infection related incidents are appropriately supported.

### 8.4 Risk Assessment

• All risk assessments for Estates activities or locations must include an assessment of the risk of infection. Where a significant risk of infection is indicated, appropriate control measures must be implemented before work is carried out.

### 8.5 General Risk Assessment

• A significant risk of infection can arise from:
  - Working within clinical areas
  - Work on building services or equipment connected with clinical areas, such as ventilation and waste/drainage systems, medical vacuum systems, sterilisers
  - Work on general building services, such as waste and drainage systems, ventilation and water systems
  - Work in grounds and gardens; discarded sharps, clinical waste, animal and waterborne diseases

• The risk of infection can be to:
  - Estates staff and contractors carrying out work
  - Other Trust staff and visitors
  - Patients from direct or cross infection, especially when immuno-compromised

• A range of infections and routes are possible, depending on the location and type of work.

### 8.6 General Risk Control Measures

• The following risk control measures are implemented:
  - Hand washing:
    * ‘social’ hand washing, that is using liquid soap and water should be carried out by all staff (and contractors) frequently during the working day so that the hands are generally maintained in a clean condition
    * Hand washing should be carried out when moving between clinical areas, workshops, mess rooms etc.
    * Some clinical areas require enhanced hand washing regimes before and after work is carried out
  - The use of gloves and barrier creams to reduce soiling of hands
  - Covering of all skin abrasions or wounds while at work
- Maintaining all work equipment and clothing in a clean condition, especially when moving between clinical areas.

8.7 Specific Risk Assessments

- Building works:
  - A risk assessment form, drawn up and agreed between the Estates Department and the Infection Prevention and Control Team, is used to provide an initial assessment of risk and define appropriate control measures. This form is designed to reduce risk to patients.
  - The Estates Manager or Supervisor controlling the work must ensure that this form is completed and the appropriate action taken.
  - Completed forms should be retained by the Estates Manager as part of the activity risk assessment and work instructions.

- Foul drains:
  - The Estates Department has drawn up procedures covering all work on foul drains, bedpan washers, WC pans, urinals, sink and bath wastes, kitchen drains and waste disposal units and also any other item which may have come into contact with foul waste or sewage.
  - It is designed to protect all staff and patients from the risk of being exposed to sewage.
  - Following the procedures will result in the task being undertaken in a professional manner without undue risk.
  - If the correct equipment is provided and used correctly, these procedures will not result in unjustified delays or poor service.

- Dealing with clinical sharps:
  - The Trust has a Needlestick and Contamination Injury Policy, accessible via the Public Website
  - Specific guidance, equipment and training are given to Estates staff and contractors who may be exposed to clinical sharps in the course of their duties.
  - If an individual sustains a needlestick injury, or any other penetrating (and possibly contaminated) puncture wound, Trust procedure must be adhered to.
  - Such injuries must be reported to the Department Manager/Head of Department/Matron.

- Incident reporting:
  - All incidents must be reported in accordance with the Trust Incident Reporting Policy.
### 8.8 Building Work Infection Prevention and Control Risk Assessment

- The following table should be completed:

**Table 1: Building work infection control risk assessment**

<table>
<thead>
<tr>
<th>Construction Activity</th>
<th>Infection Prevention and Control Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor work (examples only)</td>
<td>Low risk</td>
</tr>
<tr>
<td>- painting</td>
<td></td>
</tr>
<tr>
<td>- cabling that involves minimal drilling</td>
<td></td>
</tr>
<tr>
<td>- fitting of fixtures and fittings, e.g. shelves, that involves minimal drilling</td>
<td></td>
</tr>
<tr>
<td>- repairs to existing fixtures and fittings, e.g. blinds/door locks</td>
<td></td>
</tr>
<tr>
<td>- removal of one ceiling tile for inspection</td>
<td></td>
</tr>
<tr>
<td>- inspection and non-invasive activities</td>
<td></td>
</tr>
<tr>
<td>- electrical trim work</td>
<td></td>
</tr>
<tr>
<td>- minor plumbing</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Intermediate work (examples only)</th>
<th>Medium risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>- removal of more than one ceiling tile other than for inspection, e.g. plumbing</td>
<td>High risk (work either in or adjacent to)</td>
</tr>
<tr>
<td>- cabling that involves extensive drilling or chasing of walls</td>
<td></td>
</tr>
<tr>
<td>- cutting or drilling of walls with dust creation</td>
<td></td>
</tr>
<tr>
<td>- plumbing activities that break into existing services</td>
<td></td>
</tr>
<tr>
<td>- sanding of walls for painting or wall covering</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Major work (examples only)</th>
<th>High risk (work either in or adjacent to)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- demolition of fixed building components</td>
<td></td>
</tr>
<tr>
<td>- removal of floor coverings, ceiling tiles and casework for wall construction</td>
<td></td>
</tr>
<tr>
<td>- major cabling activities</td>
<td></td>
</tr>
<tr>
<td>- minor duct work of electrical work above ceilings</td>
<td></td>
</tr>
<tr>
<td>- major refurbishment of existing area</td>
<td></td>
</tr>
<tr>
<td>- new building</td>
<td></td>
</tr>
</tbody>
</table>

- Please determine the type of construction activity and the risk of the area in which work will be taking place and tick one relevant box in the table below:
Table 2: Construction activity type and the risk of the area

<table>
<thead>
<tr>
<th>Risk</th>
<th>Minor</th>
<th>Intermediate</th>
<th>Major</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>1</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Medium</td>
<td>2</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>High</td>
<td>3</td>
<td>6</td>
<td>9</td>
</tr>
</tbody>
</table>

- Having ticked the box, please see next table for precautions relevant to number adjacent to ticket box:

Table 3: Precautions relevant to numbering in Table 2

<table>
<thead>
<tr>
<th>Number</th>
<th>Precautions</th>
</tr>
</thead>
</table>
| 1      | - clean area on completion of work  
        - inform Hotel Services to enable clean post work |
| 2      | - perform work when no patients present or no clinical activity taking place  
        - if work has to be performed with patients present, move them away from work area  
        - carry out work by methods to reduce dust creation  
        - remove building waste in sealed containers  
        - clean area on completion  
        - inform Hotel Services to enable post work clean |
| 3      | - inform Infection Prevention and Control Team at beginning of planning process  
        - inform Hotel Services in advance of work commencing |
| 4      | Same precautions as in 1 |
| 5      | - perform work when no patients present or no clinical activity taking place  
        - if work has to be performed with patients present, move them away from work area  
        - erect barriers (screen off area) where possible if activities carried out with patients present  
        - carry out work by methods to reduce dust creation  
        - remove building waste in sealed containers  
        - clean area on completion  
        - remove barriers only when initial builders clean complete  
        - inform Hotel Services to enable post work clean |
| 6      | Same precautions as in 3 |
| 7      | Same precautions as in 1 |
| 8      | Same precautions as in 3 |
| 9      | Same precautions as in 3 |

- Except for numbers 1, 4 and 7, please send copy of assessment to Infection Prevention and Control Team, as following table:
Table 4: Send to the Infection Prevention and Control

<table>
<thead>
<tr>
<th>Project leaders name/contact details</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Area of work:</td>
<td>--</td>
</tr>
<tr>
<td>Brief description of work:</td>
<td>--</td>
</tr>
<tr>
<td>Assessment performed by: (if different from project leader)</td>
<td></td>
</tr>
<tr>
<td>Date of assessment:</td>
<td>--</td>
</tr>
<tr>
<td>Estimated dates/duration of work:</td>
<td>--</td>
</tr>
<tr>
<td>Infection Prevention Control Nurses phoned (name/date)</td>
<td>--</td>
</tr>
<tr>
<td>Copy to Infection Prevention and Control Nurses (email/hard copy)</td>
<td>--</td>
</tr>
</tbody>
</table>

9 TRAINING REQUIREMENTS

9.1 An induction to contractors to introduce contractors to the Trust policies and procedures and associated risks working on the Trust policy will be provided as described in 3.9 and 4.5.

9.2 In some circumstances the Infection Prevention and Control Team will give specific training to the contractors after a risk assessment of the work to be carried out and in advance of work commencing.

10. MONITORING COMPLIANCE AND EFFECTIVENESS

10.1 Reported Incidents relating to Contractors will be monitored each quarter by the Health, Safety, Security and Estates Management Group. Areas of concern will be escalated to the Regulation Governance Group.

11. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS

11.1 References

- Health and Safety at Work Act 1974
- Construction Design and Management 1994
- Management of Health and Safety at Works Regs 2002
- Use of contractors – A joint responsibility HSE 200
11.2 Cross reference to other procedural documents
Hand Hygiene Policy
Infection, Prevention and Control Policy
Risk Management Policy and Procedure
Untoward Event Reporting Policy and procedure
All current policies and procedures are accessible in the policy section of the public website (on the home page, click on ‘Policies and Procedures’). Trust Guidance is accessible to staff on the Trust Intranet.

12. APPENDICES
12.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

Appendix A  Infection Prevention and Control – Information for Contractors Leaflet
Appendix B  Site Rules - Information for Contractors Leaflet
**APPENDIX A**

**Infection Prevention and Control – Information for Contractors Leaflet**

<table>
<thead>
<tr>
<th>Don’t:</th>
<th>The NHS environment is a safe environment as long as the correct procedures are follows:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Don’t isolate any equipment/power unless discussions have taken place</td>
<td></td>
</tr>
<tr>
<td>- Don’t block fire escape routes/exist doors at any time</td>
<td></td>
</tr>
<tr>
<td>- Don’t use mobile phones in ward areas</td>
<td></td>
</tr>
<tr>
<td>- Don’t smoke on any Trust premises</td>
<td></td>
</tr>
</tbody>
</table>

**When you finish:**

- You must ensure you leave the site in a clean/safe condition
- You must secure all tools/ladders etc. in approved manner

**Before you start:**

- Have you signed in at Reception and obtained a security pass? (This must be worn at all times)
- Have you reported to the individual responsible for the planned work?

**Remember you may be asked the following by a member of staff:**

- Who are you?
- Who are you working for?
- What work are you doing?
- Can I see your security pass?

**Be prepared to answer these questions. NHS Staff are encouraged to be vigilant and challenge people**

**Before you start ….for your safety:**

- You must be aware of the Trust’s Control of Contractors Policy
- You must fully understand the risks of the area you are working in
- You must be aware of the site fire evacuation procedures and assembly points
- You must ensure you have checked the Asbestos register for the area you are working in and be aware of what you should do should you suspect you have discovered Asbestos
- You need to ensure that a “permit to work” is not required for the work being planned. If unsure **ASK**
- You need to ensure a method statement has been prepared and available should it be asked for
- You need to ensure you are aware of the relevant infection control procedures.

**Do’s:**

- Always conduct yourself in a responsible manner that will reflect favourably on you and your company
- Remember where you are working, respect the privacy of individuals
- Ensure suitable clothing and the necessary personal protective equipment (PPE) is worn
- Ensure the correct use of signs/barriers to denote “work in progress” and any hazards
- Ensure you report to staff before entering restricted areas
- Ensure the necessary permits are completed before starting work
- Ensure that you wash/*gel your hands (*gel can only be used on visibly clean hands)

**Remember if in doubt – ASK**
Introduction

The inpatient environment is safe to work in, providing infection prevention and control requirements are understood and followed.

Any breaches of infection control should be reported to the Matron/Manager of the area you are working in, and further advice can be sought from the Somerset Partnership NHS Foundation Trust Health Infection Prevention and Control Team.

Hand Hygiene

Good hand hygiene is the most important way of stopping bugs associated with infection spreading to you or to others.

It is important for your health and safety that hands are regularly cleansed when working in a hospital.

Hospitals can be associated with infection that can be spread to others if the basic infection control rules are not followed at all times.

- Hands must be washed with soap and hot running water if they are visibly dirty before entering a patient area or when using the canteen facilities/public facilities;
- Alcohol gel is provided in dispensers within all Community Services inpatient areas, and staff can direct you to these facilities within the Mental Health Directorate. This product can be used if hands are visibly clean. The alcohol gel is safe to use, it must be rubbed all over your hands. Do not apply to damaged skin.
- Always clean your hands before going for a break, after handling hospital equipment, working in contaminated areas and after using the toilet.
- Make sure that all surfaces of the hands are cleaned. Special attention must be given to cleaning the fingers and thumbs.

General Health

If you develop a vomiting and/or diarrhoea illness please report to your immediate Supervisor. The Trust policy is that staff who have this type of illness do not come to work. This is because it can spread rapidly to others and potentially cause major outbreaks of infection. As a general rule staff working in hospitals/inpatient units are not allowed to return to work until they have no signs of the illness for 48 hours. Further advice on what to do in these situations can be obtained by contractors from the Project Lead, or via the Infection Prevention and Control Department on 01278 432132.
MRSA and other infections that are reported in the media are not readily spread to healthy people. They are linked with spread to hospital patients who are sick and more vulnerable to any type of infection.

**Dealing with Needles and Contaminated Sharps**

If in the unlikely situation you come into contact with needles and sharp instruments that could have been used in patient care, **do not touch them**. Immediately seek advice on how to manage this situation from your supervisor.

If a needle or sharp medical instrument damages your skin please take the following actions;

- Do not suck the wound;
- Try to make the wound bleed;
- Wash the wound under running water;
- Report the incident;
- Go to the nearest Minor Injuries unit who will decide what further action to take.

**Dealing with Blood and Body Fluids**

Dealing with blood and body fluids requires special training.

Every effort will be made to stop you coming into contact with these body fluids. If there is a risk that this contact could occur, for example working on drains, the Somerset Partnership Facilities team will provide advance training on how to manage this. Do not proceed to work in such a risk area without information.

The Health and Safety rules of your company must be followed at all times. If a specialist assessment is needed this will be carried out in advance of the works carried out in conjunction with the Somerset Partnership Estates and Facilities Department.

In some circumstances the Infection Prevention and Control Team will give specific training to the contractors after a risk assessment of the work to be carried out and in advance of work commencing.

**The Somerset Partnership NHS Foundation Trust Infection Prevention and Control Team may be contacted on: 01278 432132**
SITE RULES FOR CONTRACTORS
The Somerset Partnership NHS Foundation Trust manages a variety of services from Psychiatric Inpatient Units dealing with various mental disorders for Children, Adults and Older Persons; to Out-patient Units, Drop in Day Centres and Drug and Alcohol advice Centres.

Many staff dress in casual clothing and sometimes it is difficult to tell staff from service users (patients) though staff should have a name badge. It is also hard to tell if a Service User is at risk of harming themselves or others. It is vitally important that we maintain a safe environment – therefore any Locked doors MUST remain locked.

These Guide lines are in order to help maintain:
- YOUR SAFETY
- The SAFETY OF SERVICE USERS (Patients)
- the SAFETY OF STAFF
- Provide a SAFE ENVIRONMENT

In order to achieve this WE NEED YOUR HELP to work with the Staff. There must be: a) co-operation and co-ordination between both Staff and yourselves to ensure the Health and Safety of all at the workplace b) a need to exchange ‘clear’ information about any risks arising from the works being undertaken c) any exchange of information should include details of any risks that ‘OTHER’ parties could not have reasonably been expected to how about.

For further information please contact either
the Estates Officer
Facilities Management Team
or
the Health & Safety Officer
Corporate Governance Team
both based at
Somerset Partnership NHS Foundation Trust
2nd Floor, Mallard Court
Express Park
Bristol Road
Bridgwater
Somerset
TA6 4RN

Tel: 01278 432000

This leaflet is available in alternative languages and formats
© Somerset Partnership NHS Foundation Trust
October 2008
Website: www.sompar.nhs.uk

Health & Safety Site Rules for Contractors

Both Staff and Contractors must talk to one another about Risk and Health & Safety Issues
To help us maintain a safe environment for our clients, staff and yourselves, please read and conform to the following guidelines:-

1. Please report to the reception or Nurses Station and sign the visitor’s book on your arrival and exiting the building. The Staff/Person in Charge will direct you to the repair area and alert you of any risks you should be aware of.

2. DO NOT LEAVE ANY TOOLS, MATERIALS OR CHEMICALS unattended for even a second. Please keep tools and hardware within arms reach at all times. This includes scissors, knives, razors, glass, etc and equally rope, string and cord, all of which are removed from Service Users when they are admitted for their own safety and the safety of others.

3. In the event that any of your tools, materials, etc are mislaid or taken, please inform the ‘Person in charge’ IMMEDIATELY.

4. Should there be any reason that you think it is unsafe to perform a task, please inform the Person in charge.

5. Do not enter a client/patient bedroom without a staff escort, unless otherwise informed.

6. In the event of an Accident, Incident or Injury please inform the Staff, they will need to complete an ‘untoward’ event form.

7. Occasionally the Staff may ask you to wear a Personal Alarm. They will show you how to use this if you need assistance.

8. To maintain your safety and ease of working, if possible, lock yourself in the room where you are working or work in pairs where possible. If you would like a Staff escort for any reason, please ask.

9. Please do not bring any medication, drugs or alcohol onto the Unit. If you have personal medication please leave it locked in your car/van or with the Person in charge whilst you are working within the Unit.

10. Please do not give or receive any gifts including money, cigarettes and/or lighters/matches.

11. In the case of the FIRE ALARM being activated, please secure the work area and leave via nearest Fire Exit. Make your way to the FIRE ASSEMBLY POINT - usually near the Main Entrance Car Park. IF IN DOUBT - ASK.

12. Upon finishing, please return all keys to either reception staff or Person in charge prior to leaving.

13. Please complete the WORKS INSTRUCTION BOOK on completion of all jobs, for your own and our records.

14. CONFIDENTIALITY. Under no circumstances are you to inform anyone outside of the Trust’s Units about who is receiving treatment and any information that you may hear.

15. The Trust operates a NON-SMOKING policy. Please refrain from smoking anywhere within the Trust’s buildings and grounds including the car park.

If you have any concerns for your safety, please raise this with a member of staff.

Together we can maintain the high standards of the Trust with the least disruption to our Service Users (patients).

Please do not hesitate to ask any member of staff if you have any questions or concerns. Should you observe something that upsets you, please talk to the Person in charge who will, where possible, offer an explanation.

We appreciate your cooperation and understanding of these guidelines.
Information regarding the security measures on the Broadway health park site.
The staff have to maintain a high level of security across the site due to the strict rules laid down for low secure services. This will make accessing the wards more difficult and may make the job you have been requested to do take longer but are necessary to maintain the safety for all.

Contrators will not be issued with a full set of keys inside the building at any time. However some accommodations can be made, They are

- Gardening services may be issued with a master key only as this will not in itself give access to the unit and they will not be on the ward.
- Contractor working upstairs in coms room or plant room should be let in as asked to report to a secretary to be let out. If they are up and down they could have if available swip card.
- Somerset gas could have key only when reading and testing meter.

If you are not sure ask nurse in charge or manager

Should a job be in a specific room a contractor could be issued with the key for that room. Signed for in reception and security of leaving car keys as deposit. To stress the point if a master key is lost on site the whole ward goes into lock down no patient is allowed leave until the key is found by if necessary a unit wide search.