

Policy for the Control of Contractors

Department / Service:	Estates	
Originator:	Paul Graham	Health & Safety Manager
Accountable Director:	James Longmore	Director of Assets & ICT
Approved by:	Workforce & Organisational Development Committee	
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	This is the most current document and should be used until a revised version is in place	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust	
Target Departments	All	
Target staff categories	All	

Policy Overview:

This policy defines responsibilities for the duty of managing contractors working on Trusts premises and sets out the arrangements for minimising risk. Worcestershire Hospitals NHS Trust recognises that the use of contractors is a necessity and that they are employed throughout the Trust. Work undertaken for the Trust by a contractor must be covered by a civil or commercial contract. It is good practice for health and safety requirements to be incorporated into the contract, and it should be highlighted that health and safety responsibilities are defined in criminal law and can not be delegated by a contract. 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.

Key amendments to this Document:

Date	Amendment	By:
August 2013	New Guideline	
August 2015	Document extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC

05/12/2016	Document extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC
Nov 2017	Document extended whilst under review	TLG
March 2018	Document extended for 3 months as approved by TLG	TLG
June 2018	Document extended for 3 months as approved by TLG	TLG
23 rd January 2020	Document extended for 6 months whilst review takes place with new Director of Facilities and Estates	Ray Cochrane
August 2020	Document extended for 6 months during COVID period	QGC/Gold Meeting

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1. Introduction

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. 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. The Trust will only employ competent contractors (i.e. included in the NHS list of assessed contractors) and is committed to ensuring adequate and timely cooperation between the Trust and Contractor. The Management of Health and Safety at Work Regulations 1999 are of particular importance in any Trust/contractor relationship. These Regulations set out requirements for a health and safety management system in all work places and the accompanying Approved Code of Practice gives advice on compliance. The Trust and contractors also have legal responsibilities under health and safety regulations dealing with specific hazards (e.g. the Control of Substances Hazardous to Health Regulations 1999, the Control of Lead at Work Regulations 1998 and the Control of Asbestos at Work Regulations 1987).

2. Scope of this document

This policy applies to all contractors and sub-contractors.

3. Definitions

3.1 Contractor

“Any person, firm, company or other legal entity entering into a contract with the Trust for the performance of services and or the supply of goods” and “any person, firm, company or other legal entity otherwise performing services and or supplying goods to or for the benefit of the Trust”. Examples include-

- Company representatives;
- Staff from other Trusts;
- Consultants;
- External auditors and
- Construction or maintenance workers.

3.2 Contractor Risk Management

The person engaging any contractor is responsible for ensuring that risks associated with the works are adequately controlled. The measures needed to achieve this will depend on the nature and complexity of the work being done.

3.3 Competent person

A competent person is a person with relevant knowledge, skills, qualifications, experience and/or membership of a relevant professional body.

3.4 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 Trusts competent person and approved prior to the task being undertaken.

3.5 Safe systems of Work

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

3.6 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.

3.7 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 is that a risk assessment is “suitable and sufficient” for purpose i.e. they identify all foreseeable hazards and then implement appropriate control measures to eliminate or mitigate the risks.

3.8 Induction

An induction to contractors is a legal requirement to introduce contractors to the Trusts policies and procedures, and associated risks working on the Trusts premises.

4. Responsibility and Duties

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

4.1 Chief Operating Officer

The Chief Operating Officer is responsible for ensuring that the Trust meets its statutory obligations and that effective arrangements for the management of health and safety are put in place.

4.2 Director of Finance

The Director of Finance is responsible for ensuring that the requirements of this policy are observed in all capital project work and other contract works managed by the Capital Projects Team.

4.3 Director of Assets & ICT

The Director of Assets & ICT 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.

4.4 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. In addition they are also responsible for ensuring the monitoring of the contract in line with organisational requirements.

4.5 I.T. Services Manager

The I.T. Services Manager will ensure that all contractors invited to site, to carry out works which involve IT services, are inducted and issued with a copy of the Visiting Contractors Safety Guidelines. They must also notify the Estates Department of their presence on site however IT Services will remain responsible for the control of the respective contractor.

4.6 Health & Safety Manager

The Health and Safety Manager will advise and assist on appropriate measures to meet legal and organisational requirements when required.

4.7 The Contractor

All contractors will comply to all Trust policies and procedures, as well as communicating all relevant information. The Contractor has the responsibility of health and safety at operational level, and will ensure subcontractors comply with Trust policies and procedures.

5. Control of Contractors

5.1 Assess the risks of the work

A risk assessment must be done and both the client and contractor should be party to it (Refer to the Risk Assessment Policy for guidance). The Trust should already have a risk assessment for the work activities of their own business. The contractor must assess the risks for the contracted work and then both parties must get together to consider those risks from each other's work that could affect the health and safety of the workforce or anyone else i.e. patient, visitor etc. The Trust and the contractor need to agree the risk assessment for the contracted work and the preventative and protective steps that will apply when the work is in progress. If subcontractors are involved, they should also be part of the discussion and agreement.

5.2 Provide information, instruction and training

The Trust, the contractors and sub-contractors must provide their employees with information, instruction and training on anything which may affect their health and safety. All parties need to consider what information should be passed between them and agree appropriate ways to make sure this is done. They need to exchange clear information about the risks arising from their operations, including relevant safety rules and procedures, and procedures for dealing with emergencies. This exchange of information should include details of any risks that other parties could not reasonably be expected to know about. The information must be specific to the work. The instruction and training provided by the Trust, the contractor and the subcontractor needs to take account of the risks from their own and each other's work.

5.3 Co-operation and co-ordination

In any Trust/contractor relationship, there must be co-operation and co-ordination between all the parties involved, to ensure the health and safety of all at the workplace

and anyone else likely to be affected. The Trust will set up liaison arrangements with all parties. This could take the form of regular meetings or briefings. Liaison is particularly important where variations of the work are proposed, the work involves multi-site visits or where more than one contractor or sub-contractor is engaged

5.4 Consulting the workforce

The Trust, contractors and sub-contractors must consult their employees on health and safety matters. Where there are recognised trade unions, consultation should be through safety representatives appointed by the unions. Trade unions have an important role to play and can provide expertise to help in the area of health and safety. Where there is no recognised trade union, different arrangements will have to be made e.g. through representatives elected by their employees. However the workforce is represented; they should be part of the liaison arrangements set up by the client and should be involved from the outset.

5.5 Management and supervision (*Refer to the Trusts Visiting Contractors Safety Guidelines*)

The Trust will decide what they need to do to effectively manage and supervise the work of contractors. The more impact the contractor's work could have on the health and safety of anyone likely to be affected, the greater the management and supervisory responsibilities of the Trust. The Trust will also have greater management and supervisory responsibilities where they know more about the health and safety implications of the contracted work than the contractor. In all circumstances, the Trust needs sufficient knowledge and expertise to manage and supervise the contracted work. It is essential that the nature of the controls exercised by the Trust is agreed before work starts. An important part of this is the arrangements for the selection and control of any sub-contractors. The Trust may need to agree with the contractor how the work will be done and the precautions that will be taken. Again, the extent of the Trusts responsibilities will be determined by the impact that the contractor's work could have on anyone likely to be affected. Relevant issues should include:

- what equipment should or should not be worked on/used;
- personal protective equipment to be used and who will provide it;
- working procedures, including any permits-to-work;
- the number of people needed to do the job;
- reporting of accidents and safekeeping of records and plans

The Trust, the contractors and sub-contractors should monitor their health and safety performance. This means checking whether the risk assessment is up to date and that control measures are working. The level of monitoring depends on the risks - the greater the risks, the greater the monitoring. The Trust should make periodic checks on the contractor's performance to see if the work is being done as agreed. Contractors and sub-contractors should carry out day-to-day checks to see that what should be done is being done. Some work-related accidents, diseases and dangerous occurrences have to be reported to the enforcing authorities. It is good practice to investigate all injuries, cases of work-related ill health and 'near misses' to find out what went wrong and why they were not prevented. The Trust, the contractors and subcontractors should share the lessons learnt from monitoring and investigations with each other and with the entire workforce. Where health and safety requirements are not being met, the first step is for the Trust and the contractor to find out why and put matters right. If health and safety performance is not brought up to requirements, the Trust will stop the contractor working on the job until requirements can be met. Both the Trust and the contractor

should review the work after completion to see if performance could be improved in future.

5.6 Statutory Notifications

Where required, the Contractor shall ensure that all the required statutory notices are raised. If the Trust considers that there has been an infringement of the law, or that Regulations have been disregarded, the Trust may exercise its right to require alleged offenders to leave the site and the Trust will not be responsible for any costs or delays, arising there from, including lost time resulting from a failure to comply with these conditions.

5.7 Statutory And Other Regulations

All Work undertaken shall be carried out in strict conformity with the relevant Statutory Acts, associated regulations, codes of practice and guidance notes. These include but are not restricted to:

- Health and Safety at Work Act 1974
- Environmental Protection Act 1990
- Radioactive Substances Act 1993
- Regulatory Reform (Fire Safety) Order 2006
- Telecommunications Act 1984
- Employees Liability (Compulsory Insurance) Act 1969
- Building Regulations 1991
- Construction (Design and Management) Regulations (CONDAM) 1994
- Lifting operations and Lifting Equipment Regulations (LOLER) 1998

The Contractor shall display notices and shall keep or examine all records required by statute relating to the work, plant, equipment, inspections, safe working or supervision etc. and shall satisfy the Responsible Person that such records are adequate. When required by the Responsible Person, the Contractor shall produce for examination such records as he is required to keep, or photocopies of other such records.

6. Implementation

6.1 Plan for implementation

This policy will be implemented by the Responsible Manager (see Section 4) or the local managers in their respective areas of responsibility.

6.2 Dissemination

This Policy will be made available on the Trust Intranet. A Managers Brief will be distributed to all managers for them to in turn inform their staff of the relevant sections of the policy. It will also be communicated to managers and staff-side representatives via the Trust Health and Safety Committee.

6.3 Training and awareness

The Trust will require all contractors to provide suitable evidence that their staff are adequately trained for the work that they are contracted to carry out. Relevant staff within the Trust will be made aware of this policy as part of their local induction process.

7. Monitoring and compliance

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

To ensure the Control of Contractors policy is operating correctly and that safety is being maintained during any hazardous activity, the following checks will be carried out by the Responsible Manager:

- 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 'contractor's information' prior to starting work;
- Detailed investigation of any incidents relating to contractors work and
- Checks are made that the contractor is working within the limits of the policy.

Issues of Non compliance and good practice should be reported to the Health and Safety Manager; these will be reported to the Trusts Health and Safety Committee

Audits and Inspections may be undertaken by internal and external stakeholders. Action plans as a result of these visits must be implemented and monitored by the Health and Safety Manager.

8. Policy Review

The policy will be reviewed by the Health & Safety Committee and updated every two years or sooner if regulations or documentation are revised.

9. References

Health & Safety at Work Act 1974	
Management of Health & Safety Regulations 1999 (amended)	
Construction, Design Management Regulations 2007	
Work at Height Regulations 2005 (amended)	
Health & Safety Policy	WAHT-CG-125
Work at Height Policy	WAHT-CG-126
Risk Assessment Policy	WAHT-CG-002
Fire Safety	
Control of Substances Hazardous to Health	WAHT-CG-269
Security Policy	WAHT-CG-034
Visiting Contractors Safety Guidelines	

10. Background

10.1 Consultation

The following were consulted in the production of this version of the policy:

- Director of Estates & Facilities
- Director of Asset Management and ICT
- Estates Managers
- Head of Procurement
- Members of the Health and Safety Committee
- Joint Negotiating Consultative Committee

10.2 Approval process

The Workforce & Organisational Development Committee will receive this policy for approval. Changes to this document will be recorded and monitored in accordance with the Policy for Policies.

10.3 Equality requirements

An equality assessment has been performed. There are no equality issues presented by this policy

10.4 Financial risk assessment

A financial risk assessment has been performed. Effecting change as a result of learning may have associated costs although these will be dealt with through individual business cases.

Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this key document, please refer it to Assistant Manager of Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Assistant Manager of Human Resources.

Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	Nil

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval