

Work at Height Policy

Department / Service:	Health & Safety	
Originator:	Paul Graham	Health & Safety Manager
Accountable Director:	Chief Operating Officer	
Approved by:	Trust Leadership Group (TLG)	
Date of Approval:	30 th January 2018	
Review Date:	15 th January 2021	
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	

Purpose of this document:

The statutory requirements for working at height are detailed in the Work at Height Regulations 2005. The regulations apply to all work at height situations where there is a risk of a fall liable to cause personal injury. The Trust will wherever reasonably practicable avoid the need to work at height. Where such work is unavoidable the Trust will ensure that the appropriate planning, equipment, people and training are used in order to reduce the likelihood and consequences of a fall. This policy sets out the requirements for safe work at height.

Key amendments to this Document:

Date	Amendment	By:
15/06/07	Document approved by Workforce & organisational development committee	
01/06/09	Biennial review with minor changes	Paul Graham
01/06/11	Biennial review with only minor changes to the layout	Paul Graham
01/06/13	Biennial review with only minor changes	Paul Graham
07/04/16	Document approved as per TMC paper approved on 22 nd July 2015	TMC
May 2017	Biennial review with minor changes	Paul Graham
Jan 20	Document extended for 12 months whilst in the process of appointing a new Health and Safety Manager.	Samantha Reid

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1. Introduction

Worcestershire Acute Hospitals NHS Trust will do all that is reasonably practicable to prevent anyone falling from a height whilst they are at work. The Trust will avoid the need to work at height however where such work is unavoidable it will be carried out in accordance with the Work at Height Regulations 2005.

2. Scope of the Policy

This policy applies to all staff in all work areas across the Trust. It will also apply to all contractors whilst working on site.

3. Definitions

Work at height involves people being in a position from which they could fall and injure themselves.

A place is 'at height' if a person could be injured falling from it, even if it is at or below ground level.

'Work' includes moving around at a place of work (except by a staircase in a permanent workplace) but not travel to or from a place of work.

4. Responsibility and Duties

4.1 Management Duties

The manager responsible for either a particular work area or work activity must ensure that:

- All work at height is properly planned and organised in accordance with the Schedules to the Regulations;
- All work at height takes account of weather conditions that could endanger health and safety;
- Those involved in work at height are trained and competent;
- The place where work at height is done is safe;
- Equipment for work at height is appropriately inspected;
- The risks from fragile surfaces are properly controlled; and
- The risks from falling objects are properly controlled.

4.2 Staff Duties

Staff must ensure that:

- They properly use any equipment provided for working safely at height.
- They follow any training and instructions.
- A Datix Incident Report is completed whenever an accident or near miss incident occurs involving work at height.

5. Policy Detail

5.1 Risk Assessment

The key to preventing injury from work at height is to carry out a risk assessment as per the Trust's Risk Assessment Policy. This simple process will allow you to consider the following:

- Can you avoid the need to work at height in the first place?
 - *For example the use of long handled tools or other equipment can sometimes be used to safely carry out a task from ground level.*
- Can you prevent a fall?
 - *For example using an existing place of work or piece of equipment that is already suitably protected with permanent guard rails or edge protection.*
- Can you minimise the consequences of a fall?
 - *For example the use of safety nets and fall arrest equipment.*
- What other additional measures do you need to take to reduce the risk of a fall?
 - *For example by making sure that staff are adequately trained to use equipment safely and that it is regularly inspected and well maintained*
- Have you identified whether there are any fragile surfaces?
 - *A fragile surface is one, which would be liable to break if a person worked on it or fell onto it. A common example being a skylight above a ward area. Consideration must also be given to the safety of individuals working below the surface.*

In the majority of work situations in the clinical setting the only work at height will involve accessing shelving which may be located above shoulder height for example in a storage area. The most common method of safe access used in these situations is either the use of a kick stool or a suitably designed stepladder fitted with adequate handrail protection. (Cross refer to Manual Handling Policy)

With the exception of some routine maintenance work that is carried out by the Trust's Estates Department work at height is generally undertaken by specialist contractors. Where a contractor is appointed the Trust will ensure that they have taken into account the company's experience, competence and management arrangements and whether they are asking the Trust about any risks or needs. Information will be exchanged as necessary and an agreement reached upon a safe method of work. The work of contractors will be monitored by either by the Estates Manager or the Head of Facilities.

5.2 Equipment

When selecting equipment to work at height the following factors need to be considered:

- Working conditions - does the work involve positioning equipment on slopes or poor ground conditions or on fragile surfaces?

- Distance to be climbed – portable ladders are less suitable for higher climbs and where loads are carried. Where possible, provide temporary stairs or scaffold access towers with internal stairs.
- Duration and frequency of use – longer duration or regular jobs justify a better standard of fall protection. A ladder may be acceptable for short duration tasks.
- Distance and consequences of a potential fall – fall arrest systems and safety nets must be used and deployed correctly if they are to help reduce the consequences of any fall.
- Evacuation and rescue – make sure that it is possible to rescue any person who may fall and be left suspended from a roof edge.
- Installation and removal – consider the number of people being placed at risk when installing equipment. You may need to install collective protection measures i.e. those that can protect more than one person, in preference to personal protective measures. For example use a tower scaffold rather than work restraint.
- Personal fall protective equipment – requires high level of training and appropriate close supervision. It is important that the right equipment is chosen for the right job and that it is being properly maintained.

Although this policy specifically refers to work at heights the Trust will ensure that opening restrictors are fitted to all windows in areas above the ground floor where patients have access. These fall protection measures will be installed and maintained by the Estates staff.

5.3 Inspections

An inspection is defined by the Regulations as ‘such visual or more rigorous inspection by a competent person as is appropriate for safety purposes (including) any testing appropriate for those purposes’. The Trust will ensure that any individual place at which work at height is to be done is checked before that place is used.

Any equipment that is installed or assembled for the purposes of access or protection will be inspected after it is in place and at regular intervals as determined by the risk assessment and/or detailed in the method of work.

Any equipment that is used must indicate the date of the last inspection required by the Regulations.

Any work platform used for (or for access to) construction work and from which a person could fall more than 2 metre is inspected in place before use (and not more than seven days before use). Where it is a mobile platform, inspection at the site is sufficient without re-inspection every time it is moved.

The use of ladders and step ladders will include daily pre-use checks (to include feet) carried out by the users. Detailed visual inspections of ladders and stepladders will be recorded in the Estates Log. Ladder stability devices will be checked pre-use and inspected in accordance with the manufacturer’s instructions.

All inspection reports will be held by the Estates Department.

5.4 Training, instruction and information

Managers will ensure that anyone involved in work at height is competent (or if being trained is supervised by a competent person). This includes involvement in organisation, planning, supervision and the supply and maintenance of equipment.

Where other precautions do not entirely eliminate the risk of a fall occurring the manager will, as far as is as reasonably practicable to do so, instruct or provide information in how to avoid falling, and how to avoid or minimise injury to them should they fall. Guidance can be sought from the Trust's Manual Handling Advisers or the Health & Safety Manager.

5.5 Falling Objects

Where it is necessary to prevent injury the Trust will do all that is reasonably practicable to prevent anything falling from a height. Person working at height must ensure that nothing is thrown or tipped from height if it is likely to injure anyone or stored in such a way that its movement is likely to injure anyone.

If the workplace contains an area in which there is a risk of someone being struck by a falling object or person, including any areas immediately below a fragile surface, the Trust will ensure that that area is clearly indicated and that as far as reasonably practicable unauthorised people are unable to gain access.

6 Implementation arrangements

6.1 Plan for implementation

This policy will be implemented by local managers in their respective areas of responsibility.

6.2 Dissemination process

This Policy will be made available on the Trust Intranet. Copies will also be made available to contractors who may be required to work at height whilst on Trust premises.

6.3 Training and awareness (see 5.4)

The Trust will ensure that the appropriate members of staff are suitably trained in safe work at height procedures. All staff will be made aware of this policy via the Trust's local induction process. A manager's brief will be issued to all managers detailing the actions that are needed to implement the policy. It will also be communicated to managers and staff-side representatives via the Trust Health and Safety Committee.

7 Monitoring and compliance

The Estates Managers will monitor the effectiveness of this policy, as a standard, and the general level of compliance with its requirements. (See Sections 5.1 and 5.3 above)

8 Policy Review

The Policy will be reviewed by the Health and Safety Committee two years from the date of approval, unless any statutory or national guidance is introduced in the intervening period that requires revision of the document before the planned review.

9. References

References:

Code:

Health and Safety at Work, etc Act 1974	
Management of Health and Safety at Work Regulations 1999	
Work at Height Regulations 2005	
INDG401 The Work at Height Regulations 2005 – A brief guide	
INDG402 Safe use of ladders and stepladders (HSE)	
Health and Safety Strategy	
Risk Assessment Policy	
Manual Handling Policy	

10. Background

10.1 Equality requirements

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

10.2 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.

10.3 Consultation

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

- Policy Working Group
- Members of the Health and Safety Committee

10.4 Approval process

This policy will obtain final approval from the Trust Leadership Group. Changes to this document will be recorded and monitored in accordance with the Policy for Policies.

Supporting Document 1 - Equality Impact Assessment Tool

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.

	Title of document	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	
	• Disability	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?	N/A	
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 Head 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 Head of Human Resources.

Supporting Document 2 - Financial Risk 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: Topical negative pressure or Vacuumed Assisted Closure has been used within the Trust for many years. Implementation of the guideline should contribute to ensuring cost-effective use	N/A

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 Executive Team before progressing to the relevant committee for approval