

The Newcastle upon Tyne Hospitals NHS Foundation Trust

Human Resources Policies & Procedures

Policy Regarding Use of Contractors

Effective From: November 2011

Review Date: July 2013

1 Summary

- 1.1 The policy provides guidance for managers, contractors and sub contractors on the minimum NHS Employment Check Standards contractors and their sub contractors should meet. The standards are those contained in the NHS Employment Check Standards, produced by NHS Employers.
- 1.2 The Trust requires assurance verifying that the contractor (and their subcontractors) comply in full with the NHS Employment Check Standards relating to right to work, verification of identity, occupational health, CRB, professional registration, qualifications, employment history and reference checks.
- 1.3 Assurance should be provided prior to contract workers commencing work for the Trust. Any false declaration provided by a contractor to the Trust may result in discontinuation of the contract.
- 1.4 A contractor is a person or business that contracts with the Trust to provide goods or services. A contractor is not employed by the Trust and is not subject to control by it except for what is specified in a mutually binding agreement for a specific good or service.

2 Statement of Requirements

2.1 NHS Employment Check Standards

- 2.1.1 The contractor must ensure that its recruitment procedures meet all the requirements of the NHS Employment Check Standards. Whilst it is appreciated that recruitment procedures may differ the Trust is required to ensure its contractors meet and comply with NHS requirements. Appendix 1 of this guidance contains a brief summary of the employment checks required. The standards can be reviewed in full at: <http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards>.
- 2.1.2 The Standards are mandatory for all contractors working in the Trust and will form part of the contractual agreement between the Contractor and the Trust.
- 2.1.3 Contractor workers must be able to communicate clearly and effectively similarly, they must be able to receive communication and be able to read and understand any such communication given in writing.

2.1.4 For the purpose of this policy contractors will be regarded as falling into 2 categories:

- a) Category 1 - High Risk
- b) Category 2 - Low Risk

2.1.5 Category 1 (high risk) contractors are those who will have patient contact by the nature and/or location of their work e.g. working in wards and departments with patients present. Contractors falling within this category will be required to self audit compliance with all NHS Employment Check Standards using the form in appendix 2 and must agree to submit to random audits of their relevant employment records by the Trust upon request.

2.1.6 Category 2 (low risk) contractors are those who will have no (or incidental only) patient contact by the nature and/or location of their work e.g. working in areas where patients are not present must agree to submit to random audits of their relevant employment records by the Trust upon request.

2.1.7 In exceptional circumstances (e.g. patient safety, immediate emergencies) a high risk contractor may commence work within the Trust prior to employment checks being assured provided a risk assessment has been completed and appropriate action has been taken as a result of that assessment, e.g. supervision arrangements.

2.2 Manager's Responsibilities

2.2.1 Category 1 (high risk) contractors.

The manager responsible for 'engaging' the contractor must;

- a) ensure the NHS Employer Check Standards form part of the contractual agreement between the contractor and the Trust, for this purpose Appendix 1 of this guidance contains a summary of the employment checks required. In circumstances where the contractual agreement pre dates this requirement, the manager must write to the contractor to advise of the requirements and obtain assurances using the letter in Appendix 5.
- b) ensure the contractor is aware via the contract arrangements of the level of CRB deemed fit for purpose by the Trust for the work being undertaken. Please refer to paragraph 2.42 of the [Pre-Employment Checks & Use of the Criminal Records Bureau Policy](#).
- c) retain on file written assurance of compliance with the Employment Check Standards.
- d) undertake a risk assessment using the form in appendix 6 before the contractor commences work for the Trust. The manager should then take any appropriate measures to

manage identified risks. The completed risk assessment should be retained on file by the manager.

- e) ensure when a contractor comes onto site they are asked to report to a named manager (or designated other). At this time the contractor must be provided with documentation (e.g. estates docket/control form appendix 7) that clearly identifies the activity to be undertaken and the name of the Trust manager authorising the activity. The contractor must be asked to present this to the relevant line manager with responsibility for the area in which a contract worker will work. The line manager must sign to accept the contract worker and record the time of arrival and departure. The documentation must be returned by the contractor to the named manager (*note - by signing the documentation the line manager is not verifying the quality of the work undertaken*). This documentation must be retained for future reference.
- f) ensure high risk contractors are audited at random and asked to demonstrate compliance with all Employment Check Standards by completing the Document Declaration for Audit form (Appendix 2). Each month two contractors will be selected at random (1 via Estates, 1 via Supplies) and asked to submit a completed Document Declaration for Audit form (Appendix 2) for named contractor(s) selected at random.
- g) ensure ID badges are provided or, alternatively the Contractor has provided its employees with a form of identification that is acceptable to the Trust and which employees shall display on their clothing at all times when they are at the Location.
- h) ensure local induction is undertaken and recorded for audit purposes.

2.2.2 Category 2 (low risk) contractors

The manager responsible for 'engaging' the contractor must;

- a) ensure the NHS Employer Check Standards form part of the contractual agreement between the contractor and the Trust, for this purpose Appendix 1 of this guidance contains a summary of the employment checks required. In circumstances where the contractual agreement pre dates this requirement, the manager must write to the contractor to advise of the requirements and obtain assurances using the letter in Appendix 5.
- b) retain on file written assurance of compliance with the Employment Check Standards.
- c) ensure ID badges are provided or, alternatively the Contractor has provided its employees with a form of identification that is acceptable to the Trust and which employees shall display on their clothing at all times when they are at the Location.
- d) Ensure local induction is undertaken and recorded for audit purposes.

2.2.3 Managers must ensure there are appropriate local induction arrangements in place for all contractors and must keep records for future reference and audit purposes.

3 Operational Standards of the Contractor

3.1 Documentation

The contractor should accurately document and ensure that its workers read and fully understand:

- a) the contract between the worker and the contractor
- b) the induction pack (appendix 8)
- c) ID badge and uniform requirements
- d) local induction arrangements (where specified)

The contractor should ensure that it continuously updates its workers in all of these areas and that it responds quickly to issues that arise.

3.2 Confidentiality

All contractors must ensure their employees have signed and accepted the Trust's Medical, Employment Records, E-mail and Internet Usage Statement (Appendix 3) prior to the contractor commencing work within the Trust. Signed and dated copies must be provided upon request for audit and monitoring purposes.

All contractor organisations must complete and return the Trust confidentiality agreement (Appendix 4)

3.3 Control of Infection

It is a requirement of contractors to ensure that, so far as is reasonably practicable, contractor workers minimise the risk of infection to themselves, colleagues, Trust employees, trainees, patients, relatives and visitors and, in so doing, they should:

- a) be familiar with and adhere to Trust policies and guidance on infection prevention and control
- b) attend upon request Trust statutory education programmes or local induction sessions in infection prevention and control
- c) take personal responsibility, so far as is reasonably practicable, in helping ensure that effective prevention and control of health care acquired infections is embedded into everyday practice and applied consistently by them and their co-workers
- d) if unsure of Trust requirements, be able to identify the most appropriate individual to seek advice

3.4 Information Governance

It is a requirement that contractors comply fully with Information Governance standards and responsibilities with regard to data protection, confidentiality, and information security. In doing so, contractors;

- a) must regard all identifiable personal information relating to patients and staff as confidential and at all times maintain appropriate standards of confidentiality
- b) must not disclose confidential information to any other person unless in pursuit of duties or where specific permission is given.
- c) must be familiar with Trust policies and procedures for the control and appropriate sharing of patient information with other agencies, taking account of relevant legislation.
- d) are responsible for implementing good records management (where appropriate) in line with the Trust's records management policy and following the Trust's guidelines for enabling information to be disclosed within the requirements of the Trusts' Freedom of Information policy
- e) must ensure Information Governance is an integral part of their continuous personal/professional development
- f) must take personal responsibility so far as is reasonably practicable, in helping to ensure that Information Governance is embedded into everyday practice and applied consistently by staff.

4 Professional Development of Contractor Workers by the Contractor

4.1 Codes of professional practice/conduct

Where professional codes of practice/conduct exist then these should be fully observed by the contractor and the contractor's workers at all times.

4.2 Training

The contractor should ensure that contractor workers receive appropriate training from qualified trainers and achieve acceptable competence in all areas necessary for their job roles.

Additional training or qualifications notified to the contractor should be checked and validated in the same formal way as in recruitment.

4.3 Mandatory Training Updates

The contractor should ensure contract workers have completed mandatory training where required by professional and regulatory bodies and that they do not work in the Trust until such mandatory training has been completed. The contractor is responsible for managing the completeness of all required training for their workers.

5 Guidance Monitoring and Audit

- 5.1 Compliance with this policy will be monitored by the Director of Human Resources.
- 5.2 Contractors (defined as high risk under the policy) will be asked, at random, to provide copies of the Document Declaration for Audit form to ensure they are undertaking all pre-engagement checks in accordance with the NHS Employment Check Standards. This process will be audited by HR annually to ensure managers have written assurance of compliance and have undertaken appropriate audits.
- 5.3 Information will be collated and presented annually to HR Heads, who will identify appropriate action plans to address areas of the process which can be improved and will continue to monitor the plan until its completion.

6 Guidance Review and Amendment

The Director of Human Resources is responsible for the review and amendment of this guidance.

CONTRACTOR'S QUICK GUIDE TO NHS PRE-EMPLOYMENT CHECK STANDARDS

VERIFICATION OF IDENTITY

Employees must provide two forms of photographic personal identification and one document confirming their address or one form of photographic personal identification and two documents confirming their address.

If unable to provide photographic identification, then two forms of non-photographic personal identification, and two documents confirming the employees address must be provided and a passport sized photograph. All four documents must be from a different source. All photographs must be endorsed on the back with the signature of a 'person of standing' in the community. The photograph should be accompanied by a signed statement from that person, indicating the period of time that they have been known to them.

All documentation provided as evidence must be copied as per the detailed guidance, signed and dated by the individual making the copy. Detailed guidance of what constitutes acceptable documentation for these purposes can be found at: <http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards> and should be reviewed.

RIGHT TO WORK IN THE UK CHECKS

Checks must be undertaken to confirm that an employee has the legal right to work in the UK; the contractor must see one of the documents or combinations of documents specified in List A or List B of the Employment Check Standard. The employee must only provide documents form List B if s/he cannot provide documents form List A

The documents must show that the employee is entitled to do the type of work being offered.

If the contractor shows one of the original documents, or combinations of documents contained in List B, it indicates that they only have limited leave to work in the UK. The contractor must evidence that checks have been repeated one month before the expiry date of the document/s, at which point the contractor must produce new documents from List A or B or cease working for the contractor. All documentation provided as evidence must be copied as per the detailed guidance, signed and dated by the individual making the copy. Detailed guidance of what constitutes acceptable documentation for these purposes can be found at: <http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards>

OCCUPATIONAL HEALTH CLEARANCE

The contractor's employee must have a pre-engagement health check which adheres to equal opportunities legislation and good occupational health practice.

If unsure of the requirements the contractor must seek advice from an appropriate manager.

CRIMINAL RECORDS BUREAU DISCLOSURE

The employee must have an appropriate CRB check at the correct level, with the appropriate list checks prior to working within any Trust site. The Trust will advise what is deemed to be a 'fit for purpose' CRB. Please refer to paragraph 2.42 of the Pre-Employment Checks & Use of the Criminal Records Bureau Policy.

If the Contractors uses agency staff the CRB must have been obtained within the last 12 months. The following must be evidenced during a self audit, the disclosure number, the date it was issued, the level of the disclosure, which lists have been checked, if the disclosure was clear and if the disclosure included any additional information.

PROFESSIONAL REGISTRATIONS

If applicable the registration of an employee with the relevant regulatory body must be checked and verified. If the employee is not appropriately registered, is subject to current restrictions or is subject to any fitness to practice investigation, then the employee must not be placed with the Trust.

QUALIFICATIONS

Qualification checks verify the information about educational or professional qualifications. Qualifications that form part of the essential requirements of the job must be evidenced as per the detailed guidance, signed and dated by the individual making the copy.

EMPLOYMENT HISTORY & REFERENCES

Appropriate references should be sought from prospective employees, contractors must;

- have checked at least three complete years of previous employment and/or training
- have obtained references in writing
- ensure all references include the referee's name, job title, a mainline switchboard number, the referee's signature and, where using a standardised form, should also include the referee's company stamp.
- ensure for the purposes of checking employment history, references must provide details on dates of employment and the position held.

For further detailed guidance please refer to the Trust contact or review the guidance at <http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards>

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST

**DOCUMENTATION DECLARATION FOR AUDITS
Contractors**

1. This checklist must be completed by the Contractor and returned to the Trust Manager for audit purposes
2. Please be aware that any false declaration/documentation provided by a contractor to the Trust may result in immediate discontinuation of the contract.

Declaration

I (Contractor), declare that as a representative of the (Business name), have conducted all of the required pre-engagement checks on (Contract Worker Name), in accordance with NHS Employment Check Standards.

I confirm below what documentation was seen to meet each NHS Employment Check Standards and the date on which the check was performed.

NHS EMPLOYMENT CHECK STANDARDS	What Documentation Checked?	Date Check Performed (DD/MM/YYYY)
Right to Work		
Verification of Identity		
Occupational Health Check		
Criminal Record Bureau		
Registration & Qualification		
Employment History & References		
	Date signed by contractor (DD/MM/YYYY)	Copy available if requested (yes / no)
Trust confidentiality of Medical, Employment Records, E-mail and Internet Usage Statement		

Signed on behalf of contractor :..... **Date:**.....

Business Name:

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST

Confidentiality of Medical, Employment Records, E-mail and Internet Usage Statement

Medical Records

A medical record is any record of the physical or mental health of a patient made by a health professional in connection with the care of the patient. Contractors are only authorised to access medical records in relation to their specified duties i.e. the records of a patient in whose treatment they are involved, and only for the purposes of such treatment or in relation to associated administrative duties. Specifically, contractors may not access their own medical records, or those of relatives or acquaintances, or any person in whose care they are not involved, other than through the formal access procedures for patients, as provided for under the Data Protection Act 1998 and the Access to Health Records Act 1990.

Employment Records

Employment records are those records, either manual or computerised, which contain information regarding individual members of staff, both past and present. Individuals on whom employment information is held have the right to amendment and erasure of inaccurate information and compensation for damages caused by inaccuracy unless the source of the information is the individual concerned or an identifiable third party.

E-Mail Internet Information

Contractors shall only access, read, retrieve or disseminate information from E-mail and Internet services at the Trust that relates specifically to their duties. The distribution of any information through E-mail and the Internet is subject to the scrutiny of the Trust which reserves the right to determine the suitability of this information.

All such records, medical and employment – computerised or manual – must be:

- confidential and secure against unauthorised access
- identifiable and readily accessible
- clear, accurate and readable
- accessible to authorised persons only
- accessible to patients on request (medical records)

Unauthorised access, modification, transfer, disclosure or deletion of computer held records are criminal offences under the Computer Misuse Act 1990 and make the offender liable to a fine, or five years imprisonment or both. These offences constitute gross misconduct and will result in immediate discontinuation of use of that contractor and potentially the contract. Unauthorised access, modification, transfer, disclosure or deletion of manual records will attract similar action as may misuse of the Trusts' E-mail and Internet services.

Any queries regarding access, confidentiality, E-mail or Internet usage can be raised with the manager, the Trust's Data Protection Officer, the Trusts IM&T Security Officer or the Human Resource Department. Policies can be found on the Trust's Intranet.

Prevention and Control of Health Care Associated Infections (HCAIs)

The statutory requirements of The Health Act 2006: 'Code of Practice for the Prevention and Control of Health Care Associated Infections', state that NHS bodies must ensure that

policies and procedures are in place in relation to the prevention and control of HCAs such that the responsibilities of all contractors for prevention and control of infection are appropriately reflected. All contractors must;

Ensure the risk of infection to yourself, colleagues, staff, patients, relatives and visitors is minimised by:

- being familiar with, and adhering to Trust policies and guidance on infection prevention and control
- attending Trust Induction Programme(s) where appropriate
- taking personal responsibility so far as is reasonably practicable, in helping ensure that effective prevention and control of health care acquired infections is embedded into everyday practice and applied consistently by you and your colleagues

Information Governance

It is a condition that you comply fully with Information Governance standards and responsibilities with regard to data protection, confidentiality, and information security. In doing so you;

- must regard all identifiable personal information relating to patients and staff as confidential and at all times maintain appropriate standards of confidentiality
- must not disclose confidential information to any other person unless in pursuit of your duties or where specific permission is given.
- Where appropriate you must familiarise yourself with Trust policies and procedures for the control and appropriate sharing of patient information with other agencies, taking account of relevant legislation
- are responsible for implementing good records management (where appropriate) in line with the Trust's records management policy and following the Trust's guidelines for enabling information to be disclosed within the requirements of the Trusts' Freedom of Information policy
- must ensure Information Governance is an integral part of your continuous personal/professional development
- must take personal responsibility so far as is reasonably practicable, in helping to ensure that Information Governance is embedded into everyday practice and applied consistently by you

I have read and understand this summary and accept my obligations in relation to medical, employment records, Internet usage, HCAI's and Information Governance

Employer:

Name: Signature:

Post: Date:

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST

Confidentiality Agreement for Contractors

1.0 The Contractor undertakes:

- To treat as confidential all information which may be derived from or be obtained in the course of the contract or which may come into the possession of the contractor or an employee, servant or agent or sub-contractor of the contractor as a result or in connection with the contract; and
- To provide all necessary precautions to ensure that all such information is treated as confidential by the contractor, his employees, servants, agents or sub-contractors; and
- To ensure that he, his employees, servants, agents and sub-contractors are aware of the provisions of the Data Protection Act 1998 and BS7799 and that any personal information obtained from the Trust shall not be disclosed or used in any unlawful manner; and
- To indemnify the Trust against any loss arising under the Data Protection Act 1998 caused by any action, authorised or unauthorised, taken by himself, his employees, servants, agents or sub-contractors.

1.1 All employees, servants, agents and/or sub-contractors of the Contractor will be required to agree to and sign a confidentiality statement when they come to any of the Trust sites where they may see or have access to confidential personal and/or business information

2.0 Contractor Code of Practice

2.1 The following Code of Practice applies where access is obtained to the Trusts personal data/information, as defined within the Data Protection Act 1998, for the purpose of preventative maintenance, fault diagnosis, hardware or software testing, repair, upgrade, replacement or any other related activity.

2.2 The access referred to may include:-

- a. access to data/information on Trust premises
- b. access to data/information from a remote site
- c. examination, testing and repair of media (e.g. fixed disc assemblies)
- d. examination of software dumps
- e. processing using the Trusts data/information

2.3 The Contractor must certify that the organisation is registered appropriately under the Data Protection Act 1998 and legally entitled to undertake the work proposed.

- 2.4 The Contractor must undertake not to transfer the personal data/information out of the EEA unless such a transfer has been registered, approved by the Trust and complies with the Information Commissioners guidance on Safe Harbours.
- 2.5 The work shall be done only by authorised employees, servants, or agents of the contractor who are aware of the requirements of the Data Protection Act 1998 of their personal responsibilities under the Act to maintain the security of the Authority/Trust/Practice personal data/information.
- 2.6 While the data/information is in the custody of the contractor it shall be kept in appropriately secure means.
- 2.7 Any data/information sent from one place to another by or for the contractor shall be carried out by secure means. These places should be within the suppliers own organisation or an approved sub-contractor.
- 2.8 Data/Information which can identify any patient/employee of the Trust must only be transferred electronically if previously agreed by the Trust. This is essential to ensure compliance with strict NHS controls surrounding the electronic transfer of identifiable personal data/information and hence compliance with the Data Protection Act 1998 and BS7799. This will also apply to any direct-dial access to a computer held database by the supplier or their agent.
- 2.9 The data/information must not be copied for any other purpose than that agreed by the contractor and the Trust.
- 2.10 Where personal data/information is recorded in any intelligible form, it shall either be returned to the Trust on completion of the work or disposed of by secure means and a certificate of secure disposal shall be issued to Trust.
- 2.11 Where the contractor sub-contracts any work, the contractor shall require the sub-contractor to observe the standards outlined
- 2.12 The Trust shall, wherever practical, arrange for the equipment or software to be maintained, repaired or tested using dummy data that does not include the disclosure of any personal data/information.
- 2.13 The Trust reserves the right to audit the supplier's contractual responsibilities or to have those audits carried out by a third party.
- 2.14 The Trust will expect an escalation process for problem resolving relating to any breaches of security and/or confidentiality of personal information by the contractors employee and/or any agents and/or sub-contractors.
- 2.15 Any security breaches made by the contractor's employees, agents or sub-contractors will immediately be reported to the Caldicott Guardian of the Trust.

Certification form:

Name of supplier: _____

Address of supplier
prime contractor: _____

Telephone number: _____

E-mail details: _____

On behalf of the above organisation I certify as follows:

- The organisation is appropriately registered under the Data Protection Act 1998 and is legally entitled to undertake the work agreed in the contract agreed with the Authority/Trust/Practice
- The organisation will abide by the requirements set out above for handling any of the Authority/Trust/Practice personal data/information disclosed to my organisation during the performance of such contracts

Signed: _____

Name of Individual: _____

Position in organisation: _____

Date: _____

Letter to Obtain Assurance of Compliance with NHS Employment Check Standards

Dear

Re: Employment checks for Contractors

The Newcastle upon Tyne NHS Foundation Trust (the "Trust") seeks to appoint Contractors that consistently meet the highest professional levels of performance and conduct including;

- a. Compliance with legislation and regulations
- b. Minimisation of risk, in respect of the following:
 - harm to others, such as patients, staff, visitors
 - security, confidentiality, health of patients and workers
- c. Diversity and equality of opportunity

Where there is need to engage Contractor staff to carry out work within the Trust, it is essential that all persons working for the Contractor or Sub-Contractor are trustworthy and reliable. Many problems can be avoided if contractors carry out thorough pre-appointment checks on their employees.

Following the introduction of the NHS Employment Checks Standards, contractors engaged to carry out work within the NHS are expected to ensure the standard of employment checks are equivalent to NHS Standards and to give assurance that their recruitment procedures meet legislative and regulatory requirements. As a result you are required to provide written assurance to the above address by the (date) 2011 and confirm your willingness to participate in self audits, as and when requested in this regard.

The Trust makes it clear to prospective Contractors that appointment to any contract is conditional on the necessary assurances being satisfactory and the Contractor being willing to participate in self audits.. All prospective Contractors are also informed that any contract may be withdrawn if they knowingly withhold information or provide false or misleading information, and that a contract may be terminated should any subsequent information come to light once they have been appointed.

If you have any queries, please contact

Yours sincerely

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THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST

Contractor Risk Assessment

A: Contractor mostly unsupervised

B: Contractor will have access to patients as part of normal duties

C: Contractor mostly supervised

D: Contractor will not have access patients as part of normal duties

A & B = High Risk

Control Form required.

Can appropriate measures be put in place to reduce risk to low?

- a) work carried out at a time and/or place where there are no patients present
- b) supervision of contractor at all times

A & D = Low Risk

Control Form not required

C & B = Low Risk

Control Form not required

C & D = Low Risk

Control Form not required

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST**Control Form**

Authorised by :	
Signature:	
Date:	
Job Description:	
Area(s) work to be undertaken:	
Time of arrival:	
Time of Departure:	
Manager confirming arrival / departure:	
Signature:	

The Newcastle upon Tyne NHS Foundation Trust

Contractor Induction Pack

1. Fire Precautions - What to do in the event of fire

Fire safety in the hospital is everyone's responsibility. It is mandatory under fire legislation, health and safety legislation and hospital policy that all contractors are instructed on the basic skills and given the knowledge to enable them to carry out the correct procedures in the event of a fire incident.

Fire alarms are tested every week as follows:

Freeman 10.30 am Tuesday
RVI Peacock Hall 9.15 am Monday
RVI Leazes Wing 9.30 am Wednesday
NGH 8.30 am Tuesday
Walkergate 11.00 am Wednesday
Institute of Human Genetics 11.00 a.m. Friday

Fire alarms at the Institute of Human Genetics are connected to a manned control room in the Centre for Life. The staff in the control room will ring the fire brigade when the fire alarm is activated.

1.1 Actions to be taken in the event of fire;

- a. Shout for assistance, remove persons in immediate danger
- b. Raise the alarm
- c. Try to put out the fire (if safe to do so) using first aid fire extinguishers
- d. Evacuate if necessary
- e. If possible isolate the supplies of gas/electricity
- f. Close all doors and windows

1.2 Methods of raising the alarm

- a. Shout for assistance
- b. Operate internal fire alarm (break glass)
- c. Use the emergency telephone number (333)

If you use the direct outside public telephone dialling 999, you will bypass the hospital's emergency response arrangement. This will delay the staff's response time and they may not know there is an incident until the fire service arrives.

1.3 Action on hearing the alarm

Continuous Alarm - Contractors should evacuate to the assembly point and await instructions.

Intermittent Alarm – Contractors should stay in the area of work and be prepared for possible evacuation if the fire spreads or if the alarm changes to continuous operation.

Fire Doors - when the alarm operates check that all fire doors in the area are closed.

When evacuation is necessary - you must conduct yourself in a calm and orderly manner. This gives confidence to the patients and avoids the possibility of panic, which could result in injuries.

1.5 Fire Action Notices

These notices are displayed at every fire point and on noticeboards throughout the hospital. The information given includes action to be taken in the event of a fire, the assembly point for your area and other general information. Contractors should familiarise themselves with the arrangements in there are of work.

1.6 Fire Door

Fire doors are necessary to check the spread of fire and smoke, allowing personnel to safely evacuate the building in the event of a fire. They must not be:

- a. Propped or wedged open
- b. Disconnected from their self-closers
- c. Obstructed

2. First Aid

Designated First Aiders and First Aid boxes are available in all non-clinical areas. You are expected to make yourself aware of the location of first aid boxes and know who the First Aider is. In clinical areas First Aid protocol anticipates that medical/nursing staff would be able to administer assistance.

3. General Health and Safety Information

Whilst working within the Trust you have a general duty to take care of yourself and others in your working environment. You can very easily become an accident statistic, so don't leave Health and Safety to chance.

- a. Think! Am I doing everything I can to prevent accidents where I work?
- b. Be aware of your working environment. Ask yourself what the hazards are?
- c. Comply with Health & Safety Procedures and Policies and don't take shortcuts.
- d. If you see anything that could possibly cause an accident you must report it to a supervisor/manager.

4. General Housekeeping and Avoiding Slips, Trips and Falls

Housekeeping is everyone's responsibility;

- a. Make sure work areas are kept tidy
- b. Be aware of moving equipment and traffic in your area
- c. Trolleys and shelves should not be overloaded

- d. Don't store materials in hallways, corridors or in front of fire exits
- e. Floors should remain dry and free from debris.
- f. Clean up any spillages immediately
- g. Always make sure that you can see where you are going and that your path is not obstructed
- h. Be aware of trailing electrical flexes, hoses and other similar equipment
- i. Equipment should be well maintained, clean and in good working order
- j. Don't use makeshift ladders, use a kick-stool or steps
- k. Clean up as you go

5. Reporting of Accidents and Incidents (Data)

The Trust is committed to learning from errors and actively promotes a *"fair blame"* culture. You are encouraged to report incidents and *"near misses"* promptly. The following types of incident should always be reported:

- a. Personal accident or injury
- b. Violence, abuse or harassment - please report initially by telephone on **ext. 24874**

The Clinical Governance and Risk Department review all incident report forms.

6. Personal Protective Equipment (PPE)

If you are supplied with PPE by either your substantive employer or the Trust for the purposes of undertaking tasks within the Trust you must wear it.

- a. You must be fully instructed and trained prior to use
- b. You are responsible for cleaning and maintaining it, in addition to keeping it secure
- c. If there are any defects you must report them so it can be replaced/repared
- d. All PPE must be suitable to the wearer and fit correctly

7. Security awareness

It is our intention to protect not only staff, but also patients, contractors and visitors to Trust property. We aim to promote a safe environment to work and live in. By doing this we will provide a smooth and uninterrupted delivery of healthcare.

8. ID Badges

You must always wear your ID badge when working within the Trust.

9. No Smoking Policy

The Trust operates a Smoke Free Trust policy applicable to all staff, patients, visitors, contractors and other persons who attend the Trust's premises and grounds whether on personal or Trust business, and applies across all sites/premises and land, whether owned or leased and, occupied by the Trust.

- Contractors must not smoke in buildings or in the grounds owned, leased or occupied by the Trust.

- Contractors must not smoke outside of the premises.
- Contractors choosing to smoke must do so in their own time.
- Failure to comply with this policy may result in a contractor being asked to leave Trusts premises followed by notification to the employer.

10. Trust Telephones

Private telephone calls – Contractors must not make or receive personal telephone calls via the Trust telephone system.

11. E-mail and the Internet

If you have access to the Trust email and internet as part of your duties you must read the Trusts e-mail and Internet policies before using either facility. All internet access is monitored and all emails are scanned for appropriate content.

Website with which Contractors should be familiar (this list is not exhaustive)

Health

NHS Employers

www.nhsemployers.org/

NHS Litigation Authority

www.nhsla.com/

Government

Audit Commission

www.audit-commission.gov.uk/

Department for Business Innovation & Skills

www.bis.gov.uk

Employment Relations Directorate

www.berr.gov.uk/employment/

Equality & Human Rights Commission

www.equalityhumanrights.com

Health & Safety Executive

www.hse.gov.uk/

Home Office

www.homeoffice.gov.uk/

UK Borders Agency

www.ukba.homeoffice.gov.uk

Information Commissioner's Office

www.ico.gov.uk

HM Revenue & Customs

www.hmrc.gov.uk/

Jobcentre Plus

www.jobcentreplus.gov.uk/

Sustainable Development Commission

www.sd-commission.org.uk/

Other

Recruitment and Employment Confederation

www.rec.uk.com

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST
IMPACT ASSESSMENT – SCREENING FORM A

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	Policy on the Use of Contractors	Policy Author:	Karen Pearce
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of the following: (* denotes protected characteristics under the Equality Act 2010)	No	Procedure applies to all contractor workers and is in accordance with the NHS Employment Check Standards. It is underpinned by Trust's overriding policy on Equal Opportunities and Diversity
	• 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 – learning difficulties, physical disability, sensory impairment and mental health problems *	No	Paragraph 2.1.2 identifies that contractors must be able to communicate clearly and effectively and receive communication, be able to read and understand communication given in writing. This requirement would be subject to reasonable adjustments in the case of contractors with disabilities.
	• Gender reassignment *	No	
	• Marriage and civil partnership *	No	
2.	Is there any evidence that some groups are affected differently?	No	There is no evidence to support any group was affected differently
3.	If you have identified potential discrimination which can include associative discrimination i.e. direct discrimination against someone because they associate with another person who possesses a protected characteristic, are any exceptions valid, legal and/or justifiable?	N/A	
4(a).	Is the impact of the policy/guidance likely to be negative? (If "yes", please answer sections 4(b) to 4(d)).	No	
4(b).	If so can the impact be avoided?	N/A	
4(c).	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
4(d).	Can we reduce the impact by taking different action?	N/A	

Comments:	Action Plan due (or Not Applicable): N/A
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Name and Designation of Person responsible for completion of this form: Karen Pearce Senior HR Manager (Projects) Date: .. 27 January 2011

Names & Designations of those involved in the impact assessment screening process: Employment Policies and Procedures Consultation Group

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)

For advice on answering the above questions please contact Frances Blackburn, Head of Nursing, Freeman/Walkergate, or, Christine Holland, Senior HR Manager. On completion this form must be forwarded electronically to Steven Stoker, Clinical Effectiveness Manager, (Ext. 24963) steven.stoker@nuth.nhs.uk together with the procedural document. If you have identified a potential discriminatory impact of this procedural document, please ensure that you arrange for a full consultation, with relevant stakeholders, to complete a Full Impact Assessment (Form B) and to develop an Action Plan to avoid/reduce this impact; both Form B and the Action Plan should also be sent electronically to Steven Stoker within six weeks of the completion of this form.