



London Ambulance Service **NHS**
NHS Trust

Workplace Inspection Procedure

DOCUMENT PROFILE and CONTROL

Purpose of the document:

To ensure the London Ambulance Service NHS Trust (LAS) comply with the provisions and duties contained within the Workplace (Health, Safety and Welfare) Regulations 1992, and to ensure that all LAS premises provide a safe and healthy environment for its staff. Additionally, to ensure that all LAS premises are inspected with regards to security to minimise the risk of crime.

Sponsor Department: Health, Safety and Security (HSS) Department.

Author/Reviewer: Head of Health, Safety and Security. To be reviewed by January 2020.

Document Status: Final

Amendment History			
Date	Version*	Author/Contributor	Amendment Details
08/02/17	3.1	IG Manager	Document Profile and Control update
31/01/17	2.4	Head of Health Safety & Security	Further amendments
26/01/17	2.3	Director of Corporate Governance	Review
29/11/2016	2.2	Dty. H&S Advisor/ Office Manager	Updated to reflect new departmental structure and Datixweb.
30/07/12	2.1	Senior Health, Safety and Risk Advisor	Review of monitoring section and addition of flowchart to Appendix 2
06/09/10	1.4	Safety and Risk Adviser, Governance and Compliance Manager	Included reference to Lockdown procedures, updated Responsibilities, Definitions added, defined Risk Assessment section, added information on Security Arrangements
12/04/10	1.3	Safety and Risk Adviser	Added 4.3
17/03/10	1.2	Safety and Risk Adviser	Reformatted, added scope, definitions
15/09/08	1.1	Senior Safety and Risk Advisor	Reformatted, added monitoring
01/03/07	0.1	Senior Safety and Risk Advisor	First draft

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* **Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1, 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved

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PMAG (Chair's Action)	02/02/17	3.0
SMG	15/09/2010	2.0
Chief Executive	01/03/2017	1.0
Agreed by Trust Board (if appropriate):		

Published on:	Date	By	Department
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LAS Website (v3.1)	08/02/2017	Governance Administrator	G&A
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12/04/2010	Safety and Risk Advisor
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Links to Related documents or references providing additional information		
Ref. No.	Title	Version
	The Workplace (Health, Safety and Welfare) Regulations 1992	1992
	Management (Health and Safety at Work) Regulations 1999	1999
TP077	Security Management Policy	
TP027	Infection Prevention and Control Policy	
HS011	Incident Reporting Procedure	
TP055	Investigation of Incidents, PALS, Claims and Complaints Policy	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

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1. Introduction

- 1.1. The Workplace (Health and Safety and Welfare) Regulations 1992 place duties on employers, to undertake regular work place inspections, with a written record being taken of such inspections.

2. Scope

- 2.1. This procedure applies to all premises owned, rented or used on a regular basis by the London Ambulance Service (LAS) NHS Trust. The procedure is intended to apply to any hazard within the workplace.

3. Objectives

- To ensure the London Ambulance Service NHS Trust (LAS) complies with the Workplace (Health, Safety and Welfare) Regulations 1992;
- To ensure that all LAS premises provide a safe and healthy environment for its staff.

4. Responsibilities

4.1. **GSM / Workshop Manager / Departmental Manager:**

- 4.1.1. To carry out inspections of their premises on a quarterly basis, recording the findings on an LA156 Workplace Premises Inspection Form (Workshops are to be inspected using the LA156a Workshop Premises Inspection Form). This inspection must be conducted with a representative of a recognised union, or if that is not possible with a representative from the workforce who use the site;
- 4.1.2. To record all hazards on the LA156 (or LA156a), and to notify Estates of any works required as soon as is reasonably practicable;
- 4.1.3. To submit the completed LA156 (or LA156a) to:
- The Health, Safety and Security (HSS) Department via the email premisesinspections@lond-amb.nhs.uk;
 - The Estates Department using the email EstatesServiceDesk@lond-amb.nhs.uk;
 - To their QGAM or equivalent.
- 4.1.4. To chase groups delegated to provide remedial works to ensure that actions designed to reduce the risk of a hazard are completed within timescales appropriate to the risk;

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- 4.1.5. If remedial works are not completed within the agreed time scales, to escalate to the QGAM (or equivalent) and enter it onto the local risk register.

4.2. **Quality Governance and Assurance Managers (QGAM):**

- 4.2.1. To receive the completed premises inspection forms and oversee remedial works;
- 4.2.2. To ensure that works not completed within agreed timescales are entered onto the local risk register.

4.3. **Directors / Assistant Directors:**

- 4.3.1. To keep aware of workplace inspections to ensure that responsible managers are undertaking inspections quarterly, and that risks are being managed

4.4. **Estates Department:**

- 4.4.1. To arrange for the maintenance, repair or other corrective works as required to reduce the risk of hazards identified during inspections. The timescale will vary depending on the risk, but under normal conditions it should be expected for works to be completed within 1 month.

4.5. **Health, Safety and Security (HSS) Department:**

- 4.5.1. To collate the returned premises inspections and keep the register of completed inspections up to date;
- 4.5.2. To submit summaries and analysis of returned inspections to the Corporate Health and Safety Committee;
- 4.5.3. To provide specialist advice when required during the inspection process;
- 4.5.4. To update the LA156, LA156a forms and this policy document as and when required, or every three years.

5. Definitions

5.1. **Workplace**

Any office, ambulance station, garage, workshop, control suite or other premises owned or operated by the London Ambulance Service NHS Trust. (Please note this list is not exhaustive).

- 5.2. **Hazard**
Something which has the potential to cause harm.
- 5.3. **Premises:** The buildings and sites in which staff and professionals work, carrying out the business of the LAS.
- 5.4. **Assets:** Materials and equipment used for carrying out the business of the LAS in delivering healthcare and in supporting the delivery of healthcare. An asset can be any piece of equipment, building, vehicles owned by the trust.
- 5.5. **Security Incident:** Any occasion where property is stolen, damaged or compromised.
- 5.6. **Theft:** The dishonest appropriation of property belonging to another with the intention of permanently depriving the other of it.
- 5.7. **Criminal Damage:** Without lawful excuse, destroys or damages property belonging to another intending to destroy or damage such property, or being reckless as to whether such property is destroyed or damaged.

6. Procedure

- 6.1. An LA156 (or LA156a for Workshops) form should be completed by each premises under inspection. The form covers the following areas:
- Accommodation
 - Building and Security (physical security of premises and assets)
 - Fire
 - Health and Safety Information
- 6.2. When a section has been found to be non-compliant, it must be recorded on part 3 (Hazard Notification Sheet) of the form for actions to be taken.
- 6.3. A copy of the completed LA156 or LA156a should be kept locally, and an electronic copy emailed to:
- The Health, Safety and Security Department via the email premisesinspections@lond-amb.nhs.uk;
 - The Estates Department using the email EstatesServiceDesk@lond-amb.nhs.uk;
 - To their QGAM or equivalent.

- 6.4. Hazards should be recorded on the local risk register via Datix, with actions assigned using the in-build tool.
- 6.5. All hazards identified during the inspection that require action by Estates should be brought to their attention. A timescale for the remedial works should be agreed. If this timescale is not met, or when it becomes apparent it cannot be met, then this should be escalated to the QGAM (or equivalent).
- 6.6. Serious issues are to be monitored by the relevant local Health and Safety group. Issues are to be escalated to the Health and Safety Operational Partnership Forum.
- 6.7. Appendix 1 summarises the processes for completion and follow-up of the premises inspections.

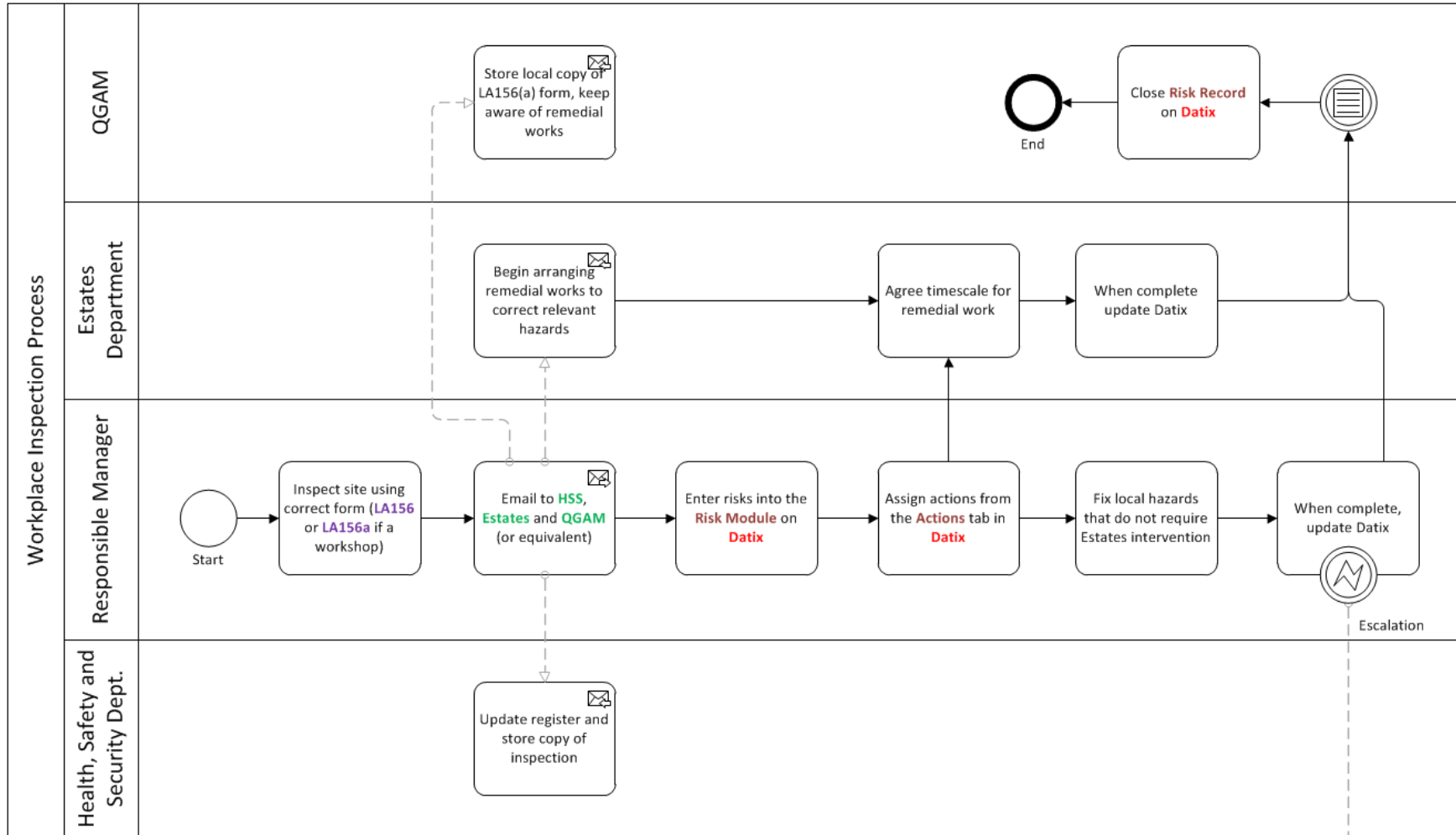
7. Security Arrangements

- 7.1. The Trust follows the Secretary of State's Directions issued to Health bodies and manages security issues via a Non-Executive Director, an Executive Director appointed as the Security Management Director (SMD) and a Local Security Management Specialist (LSMS). The SMD leads on security issues and is supported operationally by the LSMS, however it is a responsibility of all employees of the LAS to assist in the effective management of security. Where appropriate, assistance will be sought from other bodies (including but not limited to NHS Protect (NHSP) and the Police).
- 7.2. Security questions are included in the LA156 and LA156a, however the Health, Safety and Security Department will undertake separate full security assessments and audits in line with their Security Management Workplan.

8. Records Management

- 8.1. A copy of the completed workplace inspection form should be retained by local Managers and copies forwarded to both the Health, Safety and Security and Estates Departments.
- 8.2. The Health, Safety and Security Department will maintain a database on the corporate shared drive of all completed workplace inspection forms submitted to them and monitor compliance on a quarterly basis.

IMPLEMENTATION PLAN				
Intended Audience	For all LAS staff			
Dissemination				
Communications	Available to all staff on the Pulse			
Training				
Monitoring:				
Aspect to be monitored	Frequency of monitoring	Individual/ team responsible for carrying out monitoring AND Committee/ group where results are reported	Committee/ group responsible for monitoring outcomes/ recommendations	How learning will take place
Duties and compliance with the procedure	Quarterly Premises Inspection Reports Quarterly review of Datix incident reporting data Annual feedback from RIDDOR – learning and obtaining guidance on risk management within the workplace, from reported incidents related to injuries, disease and dangerous occurrences	Health, Safety and Security Department report to the Corporate Health and Safety Committee	Risk Compliance and Assurance Group	Dissemination of lessons via various mechanisms including recommendations from Corporate Health and Safety GCommittee, Health and Safety Bulletins, local risk registers and action plans, etc



H&S Operational Partnership Forum