


Health and Safety Policy

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1. Introduction

- 1.1 This policy sets out the principles and requirements for Healthy and Safety (H&S) within Central East Integrated Care Board (CE ICB). It aims to ensure a consistent and effective approach that supports the organisation's objectives, complies with statutory and regulatory requirements and promotes best practice.

2. Purpose and Scope

- 2.1 The purpose of this policy and associated documents is to set out a clear and consistent framework for the safe and effective management of health and safety across the CE ICB. Its objective is to ensure that risks are identified, assessed, and appropriately controlled; that staff and stakeholders are protected from harm; and that the organisation maintains full compliance with statutory health and safety requirements and recognised best practice.
- 2.2 This policy applies to all CE ICB staff, Board members, contractors, and others involved in the delivery, management, or support of ICB activities. This includes anyone undertaking work on behalf of the ICB, whether on ICB premises, in partner locations, or when working remotely or in the community.

3. Definitions

- 3.1 **Acts or Omissions:** Actions taken, or failures to act, which may cause injury, harm, or loss to another person.
- 3.2 **Accountable Person:** The senior individual with overall organisational responsibility for ensuring compliance with health and safety legislation.
- 3.3 **Competent Person:** Suitably trained and experienced person/s appointed to support the organisation in meeting its legal duties.
- 3.4 **Duty of Care:** The legal and moral obligation placed on all individuals to take reasonable care of their own health and safety and that of others who may be affected by their actions or omissions.
- 3.5 **Hazard:** A source or situation with the potential to cause harm, including injury, ill health, damage to property, or environmental impact.
- 3.6 **Risk:** The likelihood that a hazard will cause harm, combined with the severity of the potential outcome.
- 3.7 **Risk Assessment:** A systematic examination of work activities, environments, or processes to identify hazards, evaluate associated risks, and determine appropriate control measures to eliminate or reduce those risks.

- 3.8 Reasonably Practicable:** A balance between the level of risk and the measures required to control it, considering time, effort, and cost. All reasonably practicable steps must be taken to protect people from harm.
- 3.9 Incident:** An unplanned event that causes injury, ill health, damage, or another loss.
- 3.10 Near Miss:** An unplanned event that did not cause harm but had the potential to do so.
- 3.11 ICB Premises:** Any building, workplace, or location owned, leased, occupied, or managed by the Central East Integrated Care Board.
- 3.12 Managers / Line Managers:** Individuals with supervisory responsibility for staff.
- 3.13 Staff:** All individuals working on behalf of the ICB, including permanent employees, temporary staff, agency workers, contractors, volunteers, and others engaged in ICB activities.
- 3.14 Safety Assistance:** Staff designated to support the organisation's protective and preventative measures, such as first aiders and fire wardens.
- 3.15 Personal Protective Equipment (PPE):** Equipment provided to protect staff from health and safety risks, in accordance with relevant regulations.
- 3.16 RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013):**
Under RIDDOR employers are required by law to inform the relevant enforcing authority of
- The death of a person
 - Specified injuries to workers.
 - Injuries to workers which result in them being incapacitated or unable to perform their normal work for more than 7 consecutive days
 - Non-fatal injuries to people other than workers
 - Dangerous occurrences
 - Fires that result in cessation of work for 24 hours

4. Policy Statement

- 4.1 Central East Integrated Care Board (CE ICB) is committed to complying with Health and safety legislation, including the Health and Safety at Work Act (HASAWA) 1974, Management of Health and Safety at Work Regulations 1999, Corporate Manslaughter and Homicide Act 2007 and other associated regulations.
- 4.2 To achieve this the CE ICB will implement effective practices; aiming to create a safe working environment, fostering a proactive safety culture and minimising risks associated with its undertakings. By prioritising health and safety, the organisation

strives to protect the well-being of its staff, visitors, members of public and other stakeholders, as far as reasonably practicable.

To achieve this, CE ICB will:

- a. Maintain clear, effective governance arrangements for managing health and safety
 - b. Identify, assess, and control risks associated with its work activities
 - c. Provide appropriate information, instruction, training, and supervision
 - d. Ensure suitable welfare facilities, safe systems of work, and appropriate work equipment
 - e. Promote continuous improvement through ongoing monitoring, audit, and review
 - f. Encourage open reporting of incidents, near misses, and concerns
 - g. Provide access to competent advice and specialist support when required
- 4.3 All staff are expected to adhere to the requirements set out in this policy, cooperate with health and safety arrangements, and take reasonable care of their own safety and that of others who may be affected by their actions.
- 4.4 It is vital to the effectiveness of this policy that this and any subsequent revisions are available to all staff; they understand its contents and are aware of their role in ensuring a safe working environment.

5. Roles and Responsibilities

5.1 The following have specific responsibilities in relation to this policy:

5.1.1 Accountable Person

The accountable person for CE ICB is the Chief Executive, who has entrusted the Executive Director of Corporate Services & ICB Development with the responsibility for Health and Safety. They will:

- Hold ultimate accountability for health and safety performance and compliance
- Ensure that health and safety is integrated into organisational priorities and decision-making
- Ensure appropriate resources, competent advice, and management systems are in place
- Receive and review reports on incidents, risks, and assurance outcomes

5.1.1 Competent Person/s

- Will provide expert advice on health and safety matters
- Will provide strategic direction and oversight of corporate strategies and policies relating to H&S
- Coordinate risk assessments, inspections, and annual audits
- Support incident reporting, investigation, and RIDDOR notifications
- Lead on developing, updating, and communicating health and safety policies and procedures
- Monitor compliance and advise managers of required actions

CE ICBs delegated competent person is the Deputy Director of Corporate Services.

5.1.3 Senior Management

- Will promote a proactive safety culture and lead by example
- Ensure service areas comply with policy requirements
- Review performance, risks, and incident data within their areas
- Support the implementation of improvements and corrective actions

5.1.4 Line Managers

Managers are responsible for day-to-day implementation of this policy within their teams. They must:

- Ensure safe working practices and environments
- Identify, assess, and control risks associated with work activities
- Make sure staff receive appropriate induction, training, and supervision
- Ensure all incidents, accidents, and near misses are reported and investigated
- Maintain accurate records (training, risk assessments, equipment checks, etc.)
- Support staff with any health, safety, or welfare concerns

5.1.5 All Staff

All staff, regardless of role or seniority, must:

- Take reasonable care of their own health and safety and that of others
- Follow all policies, procedures, and safe systems of work
- Report hazards, unsafe conditions/equipment, incidents, and near misses promptly
- Complete required health and safety related training
- Use equipment, PPE, and systems responsibly and as instructed
- Inform their manager of any health condition, disability, or change that may affect workplace safety

6. Processes and Procedures

6.1 The following processes must be followed to comply with this policy and ensure the effective management of health and safety across Central East ICB:

6.1.1 Risk Assessment, policies & guidance

All work activities, environments, and changes in working arrangements must be assessed to identify hazards and associated risks. This includes:

- All staff completing task-specific, activity-based, and environmental risk assessments; using competent persons to support where required
- The competent person reviewing risk assessments, policies and guidance annually, or sooner if conditions change or following an incident
- The competent person ensuring risk control measures are implemented, monitored, and kept up to date

6.1.2 Accident, Incident, and Near-Miss Reporting

The following processes apply:

- All work-related accidents, incidents, near misses, and unsafe conditions must be reported through the ICB's reporting system
- Managers and the competent person/s must ensure appropriate local investigation is completed
- Serious incidents must be escalated to the Competent Person
- RIDDOR-reportable events will be reported to the enforcing authority by the Competent Person or a HR representative

6.1.3 Health and Safety Training

- All staff must complete mandatory health and safety training relevant to their role
- Training must be refreshed at defined intervals which are outlined in individual policies, guidance and risk assessments
- Managers must monitor completion and maintain training records
- Specialist training must be provided for those undertaking specific safety roles (e.g., fire wardens, first aiders)

6.1.4 Display Screen Equipment (DSE)

Managers must ensure:

- All staff have carried out DSE training
- All staff have carried out a DSE assessment for home and office workstations
- Any changes to working methods or equipment are risk assessed before implementation

6.1.5 Workplace Inspections and Monitoring

The competent person must ensure:

- Regular inspections/audits are carried out to identify hazards, unsafe conditions, or non-compliance
- Work equipment is maintained and in safe condition – all staff must report any concerns to the competent person or line manager
- Outcomes are documented and follow-up actions must be completed within agreed timescales

6.1.6 Health & Safety Provisions

The competent person must ensure:

- Statutory notices are displayed
- First aid supplies are provided
- Designated individuals are available to carry out safety assistance roles
- PPE is available in line with regulations

6.1.7 Fire Safety and Emergency Procedures

- All staff must comply with fire safety procedures and evacuation protocols
- Fire risk assessments must be completed for all premises
- Personal Emergency Evacuation Plans (PEEPs) must be created for individuals needing additional support

6.1.8 Homeworking and Remote Working

- All staff that work from home must complete a homeworking DSE risk assessment
- Staff must report any concerns related to their home working environment to Managers

6.1.9 Health and Safety Considerations for People with Disabilities

- Managers must consult with staff who have disclosed a disability or condition that may affect safety
- Reasonable adjustments must be made in accordance with legislation
- Additional assessments, including PEEPs, must be implemented where appropriate

6.1.10 Lone Working

All staff and managers must ensure:

- Lone working risks are assessed
- Safe check-in arrangements are in place
- Concerns or incidents are reported promptly

6.1.11 Occupational Health, Stress and Wellbeing

- Stress and wellbeing risks must be assessed when concerns arise
- Staff must be supported through wellbeing services and/or Occupational Health
- Managers must review workloads and make reasonable adjustments
- The ICB must promote wellbeing resources (e.g., stress support, check-ins, employee assistance programmes)

6.1.12 Driving for Work

- Journeys must be planned safely and staff must be fit to drive
- Vehicles used for work must be roadworthy and appropriately insured
- Driving-related incidents or concerns must be reported

7. Statutory and National Guidance.

7.1 This policy and associated documents have been developed with reference to the following statutory and national guidance:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Corporate Manslaughter and Corporate Homicide Act 2007
- Regulatory Reform (Fire Safety) Order 2005
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- Health & Safety Executive (HSE) Guidance inc. HSG65: Managing for Health and Safety
- Personal Protective Equipment at Work (Amendment) Regulations 2022
- Control of Substances Hazardous to Health (COSHH) Regulations
- Display Screen Equipment Regulations 1992 (as amended)
- Health and Safety (Consultation with Employees) Regulations 1996
- Equality Act 2010
- NHS England requirements for integrated care boards
- NHS England Health, Safety and Wellbeing Standards
- NHS People Plan and NHS People Promise (relevant to wellbeing and safe workplaces)

8. Stakeholder Engagement Record

8.1 The following stakeholders were engaged in the development of this policy:

Role/Group	Date of Engagement	Summary of Feedback
Director of Corporate Services & ICB Development	06/03/2026	No feedback provided.
Trade Union Representative (HWE)	08/03/2026	No feedback provided.
Equality & Diversity Lead (HWE)	18/03/2026	This sets out the broad health and safety environment from which other policies will follow. It is not likely that there is an equality impact as the result of this policy but there could be from the subsequent specific policies. It is likely that decision makers will have sufficient information to show Due Regard, as required by the Equality Act.
Office Manager (C&P)	06/03/2026	No feedback provided.

Accessibility Statement

This policy is available in alternative formats upon request, including large print, Braille and translated versions, to ensure accessibility for all staff and stakeholders.

Implementation Plan

Development and Consultation: Policy developed by Kelly Taylor – Head of Corporate Support (HWE) and Nora Pesheva – Office Manager (BLMK), with input from relevant stakeholders including the Office Manager (C&P), Trade Union representatives and Equality & Diversity leads.

Dissemination: Policy will be published on the Central East ICB website and shared via internal communications channels (email, intranet, team briefings). Printed copies will be available upon request.

Training: Mandatory health and safety training will be provided to all staff, with specialist training for designated roles (e.g., fire wardens, first aiders). Training records will be maintained and monitored by managers. Refresher training will be scheduled as outlined in policy and guidance.

Monitoring: Compliance will be monitored through regular audits, inspections, and review of incident reports. Managers and the competent person will ensure follow-up actions are completed. Outcomes will be reported to senior management.

Review: Policy will be reviewed annually or sooner if required by changes in legislation, guidance, changes to the organisational structure or following significant incidents.

Equality, Diversity, and Privacy: See Appendices for Equality Impact Assessment and Data Protection Impact Assessment.

Associated Documents: Related internal health & safety policies, risk assessments, procedures and guidance.

References: Refer to statutory and national guidance listed in Section 7.

Appendix 1: Equality Impact Assessment

Please answer the questions against each of the protected characteristic and inclusion health groups. If there are significant impacts and issues identified a full Equality / Quality Impact Assessment (EQIA) must be undertaken. It is against the law to discriminate against someone because of these protected characteristics. For support and advice on undertaking EQIAs please contact: agcsu.equalities@nhs.net.

Name of Policy:	Central East ICB Health & Safety Policy
Date of assessment:	06-03-2026
Screening undertaken by:	Kelly Taylor – Head of Corporate Support (HWE)

Protected characteristic and inclusion health groups.	Could the policy create a disadvantage for some groups in application or access? (Give brief summary)	If Yes - are there any mechanisms already in place to mitigate the potential adverse impacts identified? If not, please detail additional actions that could help. If this is not possible, please explain why
<p>Find out more about the Equality Act 2010, which provides the legal framework to tackle disadvantage and discrimination:</p> <p>https://www.equalityhumanrights.com/en/equality-act/protected-characteristics</p>		
<p>Age A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).</p>	Unlikely. Policy applies equally to all ages.	Training and risk assessments are accessible to all age groups.
<p>Disability A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.</p>	Possible if reasonable adjustments are not made.	Policy requires reasonable adjustments and additional assessments (e.g., PEEPs).
<p>Gender reassignment The process of transitioning from one gender to another.</p>	Unlikely. No specific disadvantage identified.	Policy applies equally; support available if needed.
<p>Marriage and civil partnership Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.</p>	Unlikely. Policy applies equally.	No specific disadvantage; policy is inclusive.
<p>Pregnancy and maternity</p>	Possible if workplace	Policy requires risk assessments

Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

adjustments are not made.

and adjustments for pregnant staff.

Race

Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour and nationality (including citizenship) ethnic or national origins.

Unlikely. Policy applies equally.

Policy is inclusive; training and communication accessible to all.

Religion or belief

Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

Unlikely. Policy applies equally.

Policy is inclusive; reasonable adjustments available if needed.

Sex

A man or a woman.

Unlikely. Policy applies equally.

Policy is inclusive; support available if needed.

Sexual orientation

Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none.

Unlikely. Policy applies equally.

Policy is inclusive; support available if needed.

Carers

Individuals within the ICB which may have carer responsibilities.

Possible if flexible working is not supported.

Policy supports reasonable adjustments and flexible arrangements.

Please summarise the improvements which this policy offers compared to the previous version or position.

Clearer requirements for reasonable adjustments and risk assessments for staff with disabilities, pregnancy, or caring responsibilities. Enhanced focus on wellbeing, stress, and mental health. More robust monitoring and review processes. Inclusive language and accessibility provisions.

Has potential disadvantage for some groups been identified which require mitigation?

~~Yes~~ / No – (If there are significant impacts and issues identified a full Equality / Quality Impact Assessment (EQIA) must be undertaken.)

No significant disadvantages identified. Where risks exist (e.g., disability, pregnancy, carers), mitigation is provided through reasonable adjustments, risk assessments, and support services.

If significant impacts are identified in practice, a full Equality / Quality Impact Assessment (EQIA) will be undertaken.

Appendix 2: Data Protection Impact Assessment

Screening questions to determine if a full DPIA is required. Guidance on handling personal and sensitive data.

Data protection is the fair and proper use of information about people. Before completing this form, please refer to the Data Protection Impact Assessment (DPIA) Guidance in the Information Governance (IG) section on the staff Intranet or contact the Data Protection Officer for support.

A DPIA is a process to help you identify and minimise the data protection risks. You must do a DPIA for processing that is likely to result in a high risk to individuals. You can use our screening checklist below to help you decide when to do one. If you have answered 'Yes' to any of the 10 screening questions, you must then carry out a full DPIA using the Stage 2 form, which is also available on the Intranet in the IG section.

Name of Policy:	Central East ICB Health & Safety Policy
Date of assessment:	06/03/2026
Screening undertaken by:	Kelly Taylor – Head of Corporate Support (HWE)

Stage 1 – DPIA form

please answer 'Yes' or 'No'

1. Will the policy result in the processing of personal identifiable information / data? This includes information about living or deceased individuals, including their name, address postcode, email address, telephone number, payroll number etc.	Yes / No
2. Will the policy result in the processing of sensitive information / data? This includes for living or deceased individuals, including their physical health, mental health, sexuality, sexual orientation, religious belief, National Insurance No., political interest etc.	Yes / No
3. Will the policy involve the sharing of identifiers which are unique to an individual or household? e.g., Hospital Number, NHS Number, National Insurance Number, Payroll Number etc.	Yes / No
4. Will the policy result in the processing of pseudonymised information by organisations who have the key / ability to reidentify the information? Pseudonymised data - where all identifiers have been removed and replaced with alternative identifiers that do not identify any individual. Re-identification can only be achieved with knowledge of the re-identification key. Anonymised data - data where all identifiers have been removed and data left does not identify any patients. Re-identification is remotely possible, but very unlikely.	Yes / No
5. Will the policy result in organisations or people having access to information they do not currently have access to?	Yes / No
6. Will the policy result in an organisation using information it already holds or has access to, but for a different purpose?	Yes / No
7. Does the policy result in the use of technology which might be perceived as being privacy intruding? e.g., biometrics, facial recognition, CCTV, audio recording etc.	Yes / No
8. Will the policy result in decisions being made or action being taken against individuals in ways which could have a significant impact on them? Including profiling and automated decision making. (This is automated processing of personal data to evaluate certain things about an individual i.e., diagnosis and then making a decision solely by automated means - without any human involvement)	Yes / No

9. Will the policy result in the collection of additional information about individuals in addition to what is already collected / held?	Yes / No
10. Will the policy require individuals to be contacted in ways which they may not be aware of and may find intrusive? e.g., personal email, text message etc.	Yes / No