

Health and Safety Strategy

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Responsible Officer	Stephen Young
Author	Lee Crowe, Governance Manager (H&S/Fire/Security), NECS
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1 Introduction

1.1 This Strategy sets out:

- the approach and arrangements for the management of Health and Safety within NHS Northumberland Clinical Commissioning Group (CCG)
- the approach to the management of health and safety in our role as a CCG

Subsequent reviews of the CCG's Health and Safety Strategy will take place before the revision date if so needed.

1.2 This Strategy aims to set out the CCG's approach to Health and Safety ensuring the health, safety and welfare of its employees, clients, students, contractors, visitors and members of the general public as a matter of prime importance and will, so far as is reasonably practicable, establish procedures and systems necessary to implement this strategy and to ensure compliance with legal and statutory obligations under the Health and Safety at Work act. In addition the adoption and embedding within the organisation of an effective Health and Safety strategy and processes will ensure that the reputation of the CCG is maintained and enhanced, to ensure business success, continuing financial strength.

1.3 As part of this Strategy it is also acknowledged that not all Health and Safety risks can be eliminated. Ultimately it is for the organisation to decide which risks it is prepared to accept based on the knowledge that an effective risk assessment has been carried out and the risk has been reduced to an acceptable level as a consequence of effective controls.

1.4 The Health and Safety Strategy will help the CCG fulfil its legal and statutory obligations under the Health and Safety at Work Act 1974, and to develop action plans and objectives in line with HSG65.

2 General Approach to Health and Safety: Principles, Aims and Objectives

2.1 This Strategy sets out the CCG's approach to the way in which in general terms Health and Safety is managed. This will be achieved by having robust processes in place for health and safety. This will provide a useful tool for the systematic and effective management of health and safety and will inform and guide managers and staff as to the way in which all Health and Safety matters are to be controlled.

2.2 To ensure adherence with this strategy subsequent policies and procedures will be developed to ensure compliance with all Health and Safety Regulations and close links will be made between the CCG and NECS Health and Safety Team who currently provide the Health and Safety function for the CCG.

2.2 The aims of the Strategy are summarised as follows:

- to ensure that the CCG meets its legal and statutory obligations under the Health and Safety at Work Act 1974 and subsequent regulations.

- to ensure that Health and Safety Management is understood and effectively managed
- to maintain Health and Safety compliance and to assure the Joint Locality Executive Board via the Governance Group that Health and Safety is effectively managed
- to ensure that Health and Safety management is a cohesive element of the internal control systems within the CCG
- to ensure that Health and Safety is an integral part of Northumberland CCG culture and its operating systems
- to assure customers, staff and partner organisations that the CCG is committed to managing Health and Safety appropriately
- to protect the services, staff, reputation and finances of the CCG through the process of early identification of risks relating to health and safety and where these risks are identified ensuring sufficient risk assessment, risk control and elimination is undertaken.
- to ensure safe systems of work are set and followed
- to provide a safe working environment without risks to health
- to ensure there is provision of adequate welfare facilities
- to ensure there is provision of sufficient training, instruction, supervision and information to enable all employees to contribute positively to their own safety and health at work and to avoid hazards and control risks
- to ensure plant and equipment are safe
- there are safe arrangements for the use, handling and storage and transport of articles, materials and substances
- to ensure there is safe access and egress
- to ensure that buildings used by the CCG are safe and free from dangers working collaboratively with NHS Property services with respective responsibilities in line with the Memorandum of Occupation.

2.3 In order to achieve these aims the CCG is committed to ensuring that:

- Health and Safety management is embedded as an integral part of the management approach to the achievement of our objectives
- Support is given to managers and staff in achieving levels of competency and Health and Safety knowledge

- Communication and consultation takes place between the organisation, NECS, Local Authority and also other organisations where shared occupancy of buildings is identified in relation to health and safety matters
- Staff understand the need to comply with Health and Safety standards
- Staff are involved in Health and Safety performance through line management
- There is a top-down commitment to Health and Safety, in order to progress the effective Health and Safety working arrangements as the daily norm
- Workplace risks are assessed and safe systems of work are introduced
- The management of Health and Safety is seen as a collective and individual responsibility, managed through the agreed committee and management structures
- A supportive and “fair blame” culture and approach is maintained and that staff are encouraged to report Health and Safety problems and incidents with a view to individuals and the organisation learning the lessons
- Key objectives are set around health and safety
- Robust workplans are developed in relation to health and safety
- Appropriate training and development is provided to all staff in the application of this strategy and the approach to Health and Safety which it describes.

3 Responsibility for Implementation of the Health and Safety Strategy

3.1 The Joint Locality Executive Board has overall responsibility for Health and Safety Management. The Joint Locality Executive Board has a duty to assure itself that the organisation has properly identified the requirements for Health and Safety and that it has processes and controls in place to mitigate any health and safety risks and the impact they have on the organisation and its stakeholders. The Board discharges this duty as follows:

- Ensures that there is a robust structure in place in for the effective management of Health and Safety throughout the CCG
- Approves and reviews the strategy for Health and Safety when required
- Receives regular reports from the Governance Group identifying significant risks and mitigating actions following review of the annual work plan and other documentation

- Demonstrates leadership, active involvement and support in health and safety management.

3.2 Governance Group

3.2.1 The principal purpose of the Governance Group is to exercise on behalf of the Joint Locality Executive Board those functions that are delegated to it in respect of the development, implementation and monitoring of Health and Safety/Fire/Security ensuring compliance with Health and Safety Legislation. This is in particular by providing assurance on the systems and processes on which the Joint Locality Executive Board leads, directs and controls its functions in order to achieve the CCG's organisational objectives.

3.3 Management Structure

Key members of the management team have responsibility for the effective implementation of this Strategy and the systems that support it as follows;

3.3.1 Accountable Officer

The Accountable Officer has the overall responsibility for:

- ensuring the implementation of an effective Health and Safety strategy, supporting the work undertaken under the Health and Safety agenda as set out in the Health and Safety Strategy
- Continually promoting Health and Safety, demonstrating leadership, commitment and support.
- Ensuring an appropriate committee structure is in place
- Planning for adequate staffing, finances and other resources, to ensure the effective management of Health and Safety within the CCG.
- Meeting all the statutory requirements and ensuring positive performance towards the achievement of the CCG's Health and Safety objectives
- Ensuring all senior leads are appointed with managerial responsibility for Health and Safety
- Ensuring an Annual Health and Safety Report, adequately reflecting the Health and Safety management issues within the CCG, is prepared for the Governance Group

3.3.2 The Joint Locality Executive Board

The Joint Locality Executive Board has delegated responsibility to the Governance Group to keep the Health and Safety/Fire matters under regular review. Members of the Governance Group will ensure that all health and safety issues are coordinated, managed, monitored and reviewed including:

- notifying the organisation of any health and safety risks
- ensuring that appropriate operational risk registers are maintained and actively managed
- ensuring staff comply with all organisational policies and procedures
- leading the management of Health and Safety by following the health and safety strategy and any action plans arising from this strategy
- ensuring all staff fulfil their responsibility regarding health and safety as set out within the relevant regulations and approved codes of practices
- ensuring that all activities undertaken are consistent with the safe operation of the CCG
- Ensuring that the organisation adheres to policies and procedures for Health and Safety at Work in respect of its employees, visitors, others, as reviewed and updated
- Ensuring that there is establishment of health and safety procedures
- Ensuring that all liability is covered by adequate insurance through the CCG's insurance arrangements
- Ensuring sufficient resources are made available to enable the CCG to fulfil its legal and statutory obligations in relation to health and safety

3.3.3 Corporate Affairs Manager

The Corporate Affairs Manager reports directly to the Strategic Head of Corporate Affairs and will take the role as organisational lead for Health and Safety and is responsible for:

- ensuring Health and Safety management systems are in place throughout the CCG, co-ordinating Health and Safety Management in accordance with this Strategy
- ensuring the Health and Safety work plan is reviewed and updated and presented to the Governance Group
- scrutinising the controls and assurances in place
- scheduling Health and Safety Matters on the Board agendas or one of its committees
- coordinating and collation of regular reports regarding health and safety
- ensuring that there is an appropriate review of the CCG's Health and Safety systems and that these are reported to the Board.

- overseeing the management of Health and Safety as identified by the Governance Group, ensuring action plans are put in place, regularly monitored and implemented
- Ensuring annual training on Health and Safety for Senior Managers

3.3.4 All line managers

All line managers have a responsibility to incorporate Health and Safety management within all aspects of their work and are responsible for ensuring the implementation of this Strategy by:

- demonstrating personal involvement and support for the promotion of Health and Safety
- ensuring staff under their management are aware of their responsibilities in relation to this strategy
- setting personal objectives for Health and Safety and monitoring their achievement
- ensuring risks relating to health and safety are identified, managed and mitigating actions are implemented in functions for which they are accountable

3.3.5 All Staff

All staff working within the CCG, including temporary/agency staff, have a responsibility to:

- be aware of their responsibilities around health and safety in line with this Strategy
- have a duty under legislation to take reasonable care of their own safety and the safety of others who may be affected by the CCG's business and to comply with appropriate policies, procedures and guidelines
- identify and report Health and Safety risks to their line manager in line with this Strategy
- ensure incidents, are reported using the appropriate procedures and systems
- attend statutory, mandatory and other appropriate training as determined by the CCG and their line manager.

3.3.6 Contractors, Commissioning Support Unit and Agency Staff

Managers must ensure that where they are employing or contracting staff those staff are aware of, and adhere to, all relevant policies, procedures and guidance of the CCG.

4 Legal Requirements

4.1 To ensure the CCG provides a safe and secure environment for public, staff and contractors the following regulations underpin the approach to safety management:

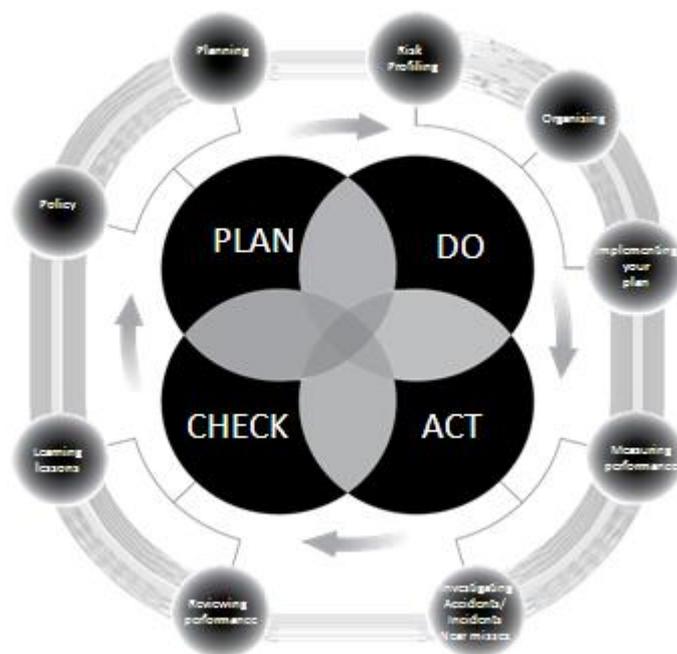
- The Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- Workplace (Health, Safety and Welfare) Regulations 1992
- Health and Safety (Display Screen Equipment) Regulations 1992
- Health and Safety (Consultations with Employees) Regulations 1996
- Manual Handling Operations Regulations 1992
- Health and Safety (Safety signs and signals) regulations 1996
- Control of substances Hazardous to Health (COSHH) Regulations 2002
- Electricity at Work Regulations 1989
- Noise at work regulations 1989
- Personal Protective Equipment at work Regulations 1998
- Provision and Use of Work Equipment Regulations 1998
- Reporting of Injuries and Dangerous Occurrences Regulations 1995
- Regulatory Reform Order (Fire Safety) 2005
- Corporate Manslaughter and Corporate Homicide act 2007

5 Approach to Health and Safety Management

5.1 The CCG will follow the approved HSE guidance for management of Health and Safety known as HSG65 (Health Service Guidance).

5.2 HSG65 provides guidance for management, health and safety professionals and employee representatives who wish to improve health and safety in their workplaces as it focuses on effective health and safety policies, organising for health and safety, planning and implementation, measuring performance and auditing and reviewing performance.

5.3 The diagram below describes the essential requirements of successful health and safety management HSG65



5.4 Plan

5.4.1 The CCG will ensure that Health and Safety Procedures are developed ensuring that it sets out the general approach, objectives and arrangements that need to be put in place for managing health and safety within its business. This document will say who does what, when and how and will influence the activities throughout the CCG ensuring that it works in a safe manner whilst discharging its day to day duties. A number of Health and Safety procedures will be developed to underpin this policy ensuring the CCG meets its Health and Safety obligations and to also clearly state how the CCG will effectively plan and implement health and safety.

5.5.3 Planning is vital to implementing the CCG's Health and Safety Strategy. Annual action plans will be developed to ensure a systematic approach is taken to implement the strategy and the health and safety duties required by the CCG as an organisation.

5.5 Do

5.5.1 The CCG needs to have in place an effective management structure and arrangements in place for executing its health and safety requirements and to also implement Health and Safety across the organisation. The Health and Safety policies and procedures that are developed will empower and encourage staff to work safely within their and others place of work without apportioning blame.

5.5.2 Organising within the CCG will be sustained by follow the four Cs:

Control – methods within the organisation in relation to Governance Structure and the reporting between committees

Co-operation - between individuals by means of safety representative and groups

Communication – Ensuring there is clear two way communication throughout the organisation

Competence – Ensuring there are systems in place to assess competence
The organisations values and beliefs should be shared across the whole of the organisation aimed at all levels of staff to maintain a positive health and safety culture.

The CCG has an effective management structure in place with clear defined roles there will also be effective control methods within the organisation with a governance structure in place and committee maps showing how each group feeds in to each other (see appendix 2)

5.6 Check

5.6.2 Objectives along with performance standards and key performance indicators will be set and used for measuring achievement across the organisation in relation to Health and Safety and these should be given the same attention as other organisational standards with an emphasis on Senior Management responsibility. This work will be implemented by the Governance Group

5.6.3 Active monitoring needs to be in place to reveal how effectively the CCG's Health and Safety systems are functioning, and should their controls fail. Active monitoring will show how effective the health and safety management system is functioning. Active monitoring will be established through Health and Safety Audits, Workplace inspections, training compliance.

5.6.4 Reactive monitoring also needs to be in place through systems such as investigating accidents or incidents, which may well cause harm or loss, it can then be used to plan corrective action required. Reactive monitoring can determine causes of poor performance and also identify underlying causes of poor health and Safety performance. The CCG will ensure reactive monitoring takes place by reviewing incidents, claims, risks, complaints etc.

5.6.5 Incidents and accidents will be monitored by the CCG and any measures that have been put in place following this to help control risk and prevent accidents and incidents from happening in the future.

5.7 Act

5.7.1 Key performance indicators will be reviewed by the Governance Group.

5.7.2 Health and Safety Audits and subsequent work arising from these audits will be monitored via the Governance Group to ensure lessons learned are taking forward.

- 5.7.3 Monitoring of staff sickness absence and workplace health will be monitored by the HR department and any relevant issues will be fed into the Governance Group.
- 5.7.4 Occupational Health Department will provide data to the Governance Group as and when requested.
- 5.7.5 NECS Governance Team will be responsible for presenting Health and Safety progress reports to the Governance Group.
- 5.7.6 Accident and Incidents will be reviewed by the Governance Group ensuring that all injuries, illnesses and dangerous occurrences are reported through the RIDDOR system.
- 5.7.7 Any prosecutions for Health and Safety Offences and Health and Safety enforcement notices served on the CCG will be monitored by the Governance Group.

6 Health and Safety Incident Reporting

- 6.1 CCG staff will need to comply with Incident Reporting Policies. These policies require that all incidents are reported and that the lessons learned are appropriately shared across the organisation and, where appropriate, more widely within the NHS locally and nationally.
- 6.2 Specifically, the CCG wishes to foster a culture of openness and learning, and staff are encouraged to be open about raising problems.
- 6.3 Incidents will be recorded & analysed using the SIRMS (Safeguarding Incident Reporting Management System) and the impact of an incident will be graded according to the matrix together with the likelihood of occurrence or recurrence.

7 CCG equality statement

- 7.1 The CCG is committed to promoting human rights and providing equality of opportunity; not only in our employment practices, but also in the way we commission or provide services. The organisation also values and respects the diversity of our employees and the communities we serve. In applying this strategy, the organisation will have due regard for the need to:
- Promote human rights
 - Eliminate unlawful discrimination
 - Promote equality of opportunity
 - Provide for good relations between people of diverse groups
- 7.2 This Strategy aims to be accessible to everyone regardless of age, disability (physical, mental or learning), gender (including transgender), race, sexual orientation, religion/belief or any other factor which may result in unfair treatment or inequalities in health or employment.

- 7.3 Throughout the development of this Strategy, the CCG has sought to promote equality, human rights and tackling health inequalities by considering the impacts and implications when writing and reviewing the Strategy. The impact of this strategy is subject to an on-going process of review through the Equality Impact Assessment.

8 Equality impact assessment

- 8.1 In accordance with our equality duties an Equality Impact Assessment has been carried out on this strategy. There is no evidence to suggest that the strategy would have an adverse impact in relation to race, disability, gender, age, sexual orientation, religion and belief or infringe individuals' human rights.

9 Dissemination and implementation

- 9.1 The Strategy will be circulated to all individuals identified with specific responsibilities and will be communicated to all staff and stakeholders by the most appropriate means. All line managers are required to share the contents of this Strategy with their staff.
- 9.2 For Health and Safety Management to be effective within the organisation, this strategy will become a living document and a natural "part of everyday working practice"

10 Accountability, responsibilities and training

- 10.1 Overall accountability for procedural documents across the organisation lies with the Accountable Officer who has overall responsibility for establishing and maintaining an effective document management system, for meeting all statutory requirements and adhering to guidance issued in respect of procedural documents.
- 10.2 Overall responsibility for the Health and Safety Strategy lies with the North of England Commissioning Support Unit Governance Manager Health and Safety who has delegated responsibility for managing the development and implementation of Health and Safety procedural documents.
- 10.3 Training and education are key to the successful implementation of this Strategy and embedding a culture of a safe working environment in the organisation. Staff will have the opportunity to develop more detailed knowledge and appreciation of the role of Health and Safety through:
- Policy/strategy manuals
 - Induction
 - Line manager
 - Specific training courses

11 Review

11.1 This strategy will be updated in accordance with the following:

- Identified review date
- legislative changes
- good practice guidance;
- case law;
- significant incidents reported;
- new vulnerabilities; and
- changes to organisational infrastructure.

11.2 The review of this Strategy will be received by the Governance Group for approval.

12 Equality Impact Assessment



Introduction - Equality Impact Assessment

An Equality Impact Assessment (EIA) is a process of analysing a new or existing service, policy or process. The aim is to identify what is the (likely) effect of implementation for different groups within the community (including patients, public and staff).

We need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- Advance equality of opportunity between people who share a protected characteristic and those who do not
- Foster good relations between people who share a protected characteristic and those who do not

This is the law. In simple terms it means thinking about how some people might be excluded from what we are offering.

The way in which we organise things, or the assumptions we make, may mean that they cannot join in or if they do, it will not really work for them.

It's good practice to think of all reasons why people may be excluded, not just the ones covered by the law. Think about people who may be suffering from socio-economic deprivation or the challenges facing carers for example.

This will not only ensure legal compliance, but also help to ensure that services best support the healthcare needs of the local population.

Think of it as simply providing great customer service to everyone.

As a manager or someone who is involved in a service, policy, or process development, you are required to complete an Equality Impact Assessment using this toolkit.

Policy	A written statement of intent describing the broad approach or course of action the Trust is taking with a particular service or issue.
Service	A system or organisation that provides for a public need.
Process	Any of a group of related actions contributing to a larger action.



STEP 1 - EVIDENCE GATHERING

Name of person completing EIA:	Lee Crowe
Title of service/policy/process:	Health and Safety Strategy
Existing: <input type="checkbox"/> New/proposed: <input checked="" type="checkbox"/> Changed: <input type="checkbox"/>	
What are the intended outcomes of this policy/service/process? Include outline of objectives and aims	
The aim of the strategy is to ensure CCG considers Health and Safety along with its other business objectives and to ensure that the CCG follows the details stipulated within H&S Regulations.	
Who will be affected by this policy/service /process? (please tick)	
<input type="checkbox"/> Consultants <input type="checkbox"/> Nurses <input type="checkbox"/> Doctors <input checked="" type="checkbox"/> Staff members <input type="checkbox"/> Patients <input type="checkbox"/> Public <input type="checkbox"/> Other	
If other please state:	
What is your source of feedback/existing evidence? (please tick)	
<input type="checkbox"/> National Reports <input type="checkbox"/> Internal Audits <input type="checkbox"/> Patient Surveys <input type="checkbox"/> Staff Surveys <input type="checkbox"/> Complaints/Incidents <input type="checkbox"/> Focus Groups <input type="checkbox"/> Stakeholder groups <input type="checkbox"/> Previous EIAs <input checked="" type="checkbox"/> Other	
If other please state:	
<ul style="list-style-type: none"> • Health and Safety at Work Act • Management of Health and Safety at Work Regulations • Health and Safety Guidance HSG65 • Feedback from CCG staff and regular service line meetings between NECS/CCG. 	

Evidence	What does it tell me? (about the existing service/policy/process? Is there anything suggest there may be challenges when designing something new?)
National Reports	Not applicable
Patient Surveys	Strategy has no impact on patients
Staff Surveys	Staff Survey's to include questions around H&S
Complaints and Incidents	Strategy will ensure that systems are in place should there be any complaints received or Incidents regarding Health and Safety and that the CCG has robust systems in place around H&S Management
Results of consultations with different stakeholder groups – staff/local community groups	Only applicable to staff within CCG
Focus Groups	Only applicable to staff within CCG
Other evidence (please describe)	



STEP 2 - IMPACT ASSESSMENT

What impact will the new policy/system/process have on the following: (Please refer to the 'EIA Impact Questions to Ask' document for reference)
Age A person belonging to a particular age The Strategy will ensure that individuals of all ages are considered in relation to Health and Safety tasks.
Disability A person who 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 This Strategy has a positive impact on any staff who have a physical/Mental impairment by considering their needs regarding H&S and the subsequent policies and procedures that underpin the Health and Safety Strategy.
Gender reassignment (including transgender) Medical term for what transgender people often call gender-confirmation surgery; surgery to bring the primary and secondary sex characteristics of a transgender person's body into alignment with his or her internal self perception. As far as we are aware there are no members of staff to whom this applies. Should there be a member of staff undergoing gender reassignment/transgender the content within the strategy does not include vocabulary that should cause offense
Marriage and civil partnership Marriage is defined as a union of a man and a woman (or, in some jurisdictions, two people of the same sex) as partners in a relationship. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must be treated the same as married couples on a wide range of legal matters The Strategy has no impact on marriage or civil partnership
Pregnancy and maternity 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. The Strategy can be accessed by all staff via intranet and policies/procedures are in place which underpin the strategies aims.
Race It refers to a group of people defined by their race, colour, and nationality, ethnic or national origins, including travelling communities. There are no requirements for translation within the current staff group should the staff group characteristics change then versions in other languages can be obtained.
Religion or belief Religion is defined as a particular system of faith and worship but belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. Risk assessments and training can be arranged for staff unavailable due to religious or other reasons.
Sex/Gender A man or a woman. There is no discriminations between males and females within the strategy
Sexual orientation Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes Strategy uses appropriate language no additional considerations are required.
Carers _A family member or paid helper who regularly looks after a child or a sick, elderly, or disabled person Risk assessments and training can be arranged for those staff that have caring responsibilities and there is also online training which can be accessed whilst working within the CCG or at home.
Other identified groups such as deprived socio-economic groups, substance/alcohol abuse and sex workers Other groups have been considered however as the Strategy is for staff there are no additional impacts on health inequalities.



STEP 3 - ENGAGEMENT AND INVOLVEMENT

How have you engaged stakeholders in testing the strategy or process proposals including the impact on protected characteristics?

Please list the stakeholders engaged:

Shared procedure with Governance Colleagues within CCG. Regular service line meetings with CCG to discuss any H&S issues that arise.



STEP 4 - METHODS OF COMMUNICATION

What methods of communication do you plan to use to inform service users of the strategy?

- Verbal – stakeholder groups/meetings Verbal - Telephone
- Written – Letter Written – Leaflets/guidance booklets
- Email Internet Other

If other please state:

ACCESSIBLE INFORMATION STANDARD

The Accessible Information Standard directs and defines a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of service users.

Tick to confirm you have you considered an agreed process for:

- Sending out correspondence in alternative formats.
- Sending out correspondence in alternative languages.
- Producing / obtaining information in alternative formats.
- Arranging / booking professional communication support.
- Booking / arranging longer appointments for patients / service users with communication needs.

If any of the above have not been considered, please state the reason:

As this is a staff policy needs have been considered internally and appropriate recommendations made.



STEP 5 - SUMMARY OF POTENTIAL CHALLENGES

Having considered the potential impact on the people accessing the service, policy or process please summarise the areas have been identified as needing action to avoid discrimination.

Potential Challenge	What problems/issues may this cause?
1 Workforce Characteristics	May require other formats such as braille, size of font etc. May also need to consider if face to face training takes place that accessibility of training venues is sufficient.



STEP 6- ACTION PLAN

Ref no.	Potential Challenge/ Negative Impact	Protected Group Impacted (Age, Race etc)	Action(s) required	Expected Outcome	Owner	Timescale/ Completion date
1	Staff unable to access Strategy	Age, Disability	Alternative formats provided if required, font size adjustment. As part of reasonable adjustments on appointment.	All staff can access the strategy for reference	CCG/NE CS H&S	On receipt of individual request

Ref no.	Who have you consulted with for a solution? (users, other services, etc)	Person/ People to inform	How will you monitor and review whether the action is effective?
1	CCG Governance Colleagues	NECS Health and Safety Team	Regular Service Line Meetings



SIGN OFF

Completed by:	Lee Crowe
Date:	June 2017
Signed:	
Presented to: (appropriate committee)	Governance Group
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Appendix 1

Meeting Structure

