



# Policy:

## Falls (Staff and Public)

<b>Executive Director Lead</b>	Director of Strategy
<b>Policy Owner</b>	Health and Safety Manager
<b>Policy Author</b>	Health, Safety and Risk Advisor

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<b>Document Version Number</b>	9
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<b>Ratified By</b>	Quality Assurance Committee
<b>Date of Issue</b>	October 2022
<b>Date for Review</b>	August 2025

### Summary of policy

This policy has been created to help the Trust prevent harm to its employees and others using Trust facilities and to meet its legal requirement under the Health and Safety Act 1974 and Regulations made under the Act.

<b>Target audience</b>	All SHSC staff
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<b>Keywords</b>	Health, safety, slips, trips, falls
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### Storage and Version Control

This is version 9 of this policy which is stored and available through the SHSC intranet/internet.

This version supersedes the previous Version 8.1 of October 2019.

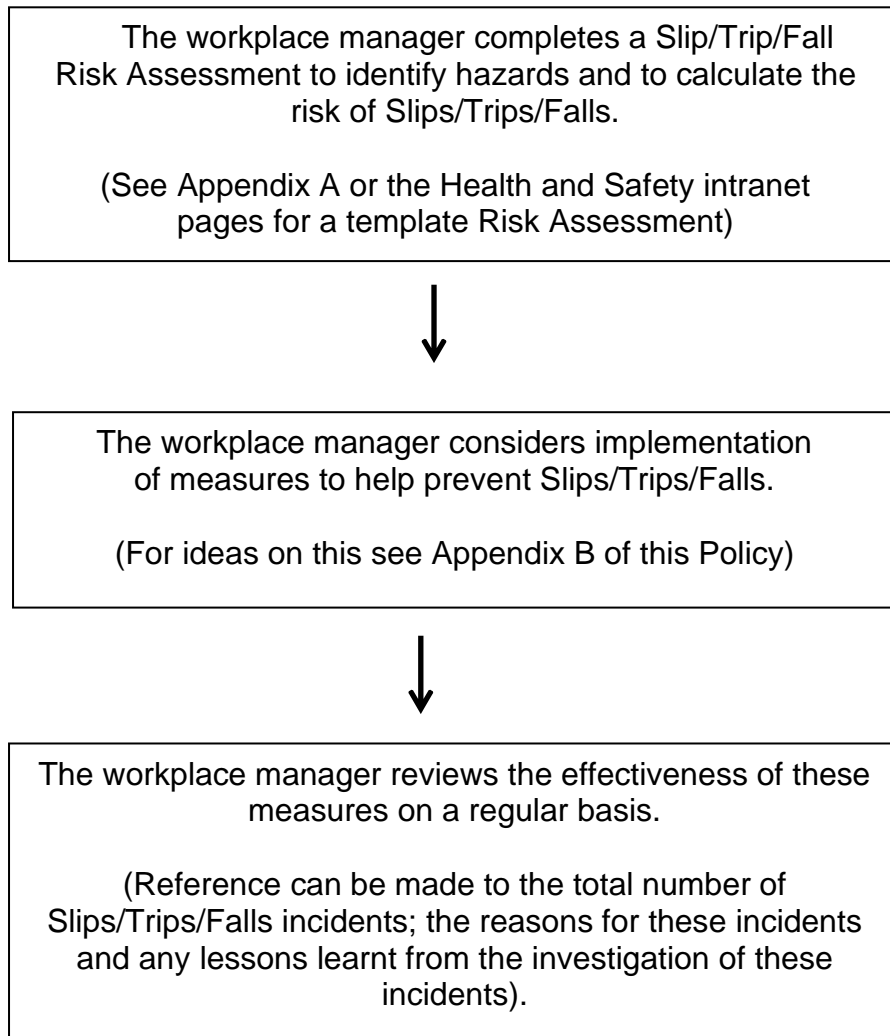
Any copies of the previous policy held separately should be destroyed and replaced with this version.

## Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
6	Policy revision	October 2016	Revised and updated. New policy format adopted and some references to post of 'Back Care Advisor' deleted.
7	Policy review	April 2019	Reviewed and updated. References to the 'Health and Safety Committee' changed to 'Health and Safety Group.' However, this version didn't reach the intranet and internet.
8	Policy review	October 2019	Between version 6 and version 8 the following changes have been made: <ul style="list-style-type: none"> <li>• Most changes simply reflect the different formatting required by different Trust policy format templates, e.g. putting identical text into a different sequence between versions.</li> <li>• Similarly, the name of the 'Health and Safety Committee' has been changed to 'Health and Safety Group' on several pages.</li> <li>• Two corrections have been made in the table at item 9 to reflect the correct division of responsibilities between the 'H&amp;S Advisor' and the 'Manager of the affected staff', e.g. the latter being responsible for the 'Completion of current staff training records showing staff attendance at suitable and sufficient Slips/Trips/Falls training'.</li> <li>• The title of a Trust policy and the title of an external publication have been updated in the references section</li> <li>• Reference to the OH Dept at STH has been removed from the 'Contact Details' section to reflect the removal of this contract. It is not necessary to refer to the new OH provider.</li> <li>• Changes to the text have been made between versions, which do not change the meaning or intent of the policy.</li> </ul>

8.1	EIA added	July 2020	PGG recommendation that an EIA form be added to the policy.
9	Policy review	October 2022	Changes to format of policy and text changes, which do not affect the meaning or purpose of the policy, for example clearer roles and responsibilities have been defined for the different levels of staff and reference to the 'Health and Safety Group' has been updated to the 'Health and Safety Committee'.

## Flowchart



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## 1 Introduction

Sheffield Health and Social Care NHS Foundation Trust recognises its responsibilities under Health and Safety legislation to provide workplaces, which are safe for all employees, service users and other lawful visitors, so far as is reasonably practicable.

This policy details the organisational arrangements in place to meet the legal and good practice requirements to prevent slip, trip and fall incidents within the Trust.

These include:

**The Health and Safety at Work etc. Act 1974 (HSWA)** requires employers to ensure the health and safety of all employees and anyone who may be affected by their work, so far as is reasonably practicable. This includes taking steps to control slip, trip and fall risks.

**The Management of Health and Safety at Work Regulations 1999** require employers to assess risks, (including slip and trip risks), and, where necessary, take action to address them.

**The Workplace (Health, Safety and Welfare) Regulations 1992** require employers to ensure that floors are suitable, in good condition and free from obstructions, in order to help reduce slip, trip and falls risks.

**The Work at Height Regulations 2005** apply to all work conducted at height, where there is risk of a fall liable to cause personal injury. They place duties on employers, and those who control any work at height.

**The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014** require premises, where care and treatment are delivered, to be clean, suitable for the intended purpose and maintained.

## 2 Scope

This is a Trust-wide policy, which applies to all employees of Sheffield Health and Social Care NHS Foundation Trust.

## 3 Purpose

The purpose of this policy is to provide an unambiguous statement of health and safety practices applicable to Sheffield Health and Social Care NHS Foundation Trust, in accordance with national legislation and so help the Trust to gain assurance that it provides an environment and working practices that, so far as reasonably practicable, are free from a significant risk of slips, trips and falls to its staff and visitors.

## 4 Definitions

**Fall** - is an event which results in an individual, or a body part of the individual, coming to rest inadvertently on the ground or any other surface lower than the individual, whether or not an injury is sustained (Cohen & Guin, 1991).

**Slip** - is a slide accidentally causing the individual to lose their balance; this is either corrected or causes the individual to fall.

**Trip** - is to stumble accidentally, often over an obstacle, causing the individual to lose their balance. This is either corrected or causes the individual to fall.

**Hazard** – any object or situation with the potential to cause a slip, trip or a fall.

**Risk** - the likelihood that the hazardous work task/situation will cause someone harm

**Risk Assessment** – the practice of examining what in your work could cause harm to someone, so that you can consider the need to put in place additional precautions to prevent such harm.

## 5 Details of the policy

The broad overview of this policy is as described in the introduction.

## 6 Duties

### **Board**

Has ultimate responsibility for managing the implementation of health and safety within the Trust and so complying with applicable legislation.

### **Chief Executive**

The Chief Executive will ensure that this policy is enacted within Sheffield Health and Social Care Trust.

### **Directors/Heads of Service**

Directors/Heads of Service will ensure that this policy is understood, implemented and monitored within their areas of responsibility and that staff are supported to promote the development of a health and safety culture, using this policy and the guidance within it.

In particular, they will ensure that the health, safety and welfare of staff is always considered at the planning stage of organisational changes within the Trust.

### **Line Managers/Service and Team Leaders**

Line Managers/Service and Team Leaders are responsible for ensuring that within their areas of responsibility appropriate Risk Assessments are completed and that measures to prevent significant harm are taken when necessary.

In addition, they must co-operate with owners of premises visited or otherwise used by any Trust staff who are managed by them in order to ensure the health and safety of those staff.

### **Health, Safety and Risk Adviser**

The Health, Safety and Risk Adviser will provide advice on compliance with applicable legislation and can assist line managers to develop procedural arrangements, which help to ensure the safety of Trust staff and others.

### **Estate Services**

Is responsible for ensuring that Trust-owned premises are designed and maintained in a way to minimise the risk of slips, trips and falls.

Where possible, the design and maintenance of premises will involve consultation with Trust managers.

### **All SHSC Staff**

Staff have a responsibility to take reasonable care of their own personal health and safety and to comply with the measures detailed within this policy.

### **Owners of Premises from where Trust-Employed Staff Deliver Services**

Building owners are responsible for maintaining their property to a safe standard in-line with relevant health and safety legislation; this includes measures to help prevent or reduce slips, trips and falls risk. They should co-operate with Trust Service/Operational Managers to help achieve this aim.

## **7 Procedure**

Wherever necessary, reasonable adjustments to premises and or work activities must be made to accommodate those who are at risk of significant harm.

For further information on reasonable adjustments for members of staff, see the Equal Opportunities and Dignity at Work Policy.

Managers must ensure that a relevant 'Slips, Trips and Falls' Risk Assessment is completed, and its findings are acted upon.

An example Risk Assessment can be found on the 'Health and Safety pages of Jarvis.

Additional guidance is given on the completion of Risk Assessments in online Health and Safety training.



## 8 Development, Consultation and Approval

This Policy has been developed by the Health, Safety and Risk Adviser in consultation with Trust staff.

It is based on the Health and Safety legislation and Regulations outlined in the Introduction of this policy and has been reviewed by the Health and Safety Committee and the Policy Governance Group. Including the Staff Side policy forum

<b>Name of Policy: Falls (Staff and Visitors)</b>	<b>Name of Policy Lead: Charlie Stephenson</b>
<b>Date: October 2022</b>	<b>Contact Details: (0114) 27 16208</b>
<b>Consultation Plan:</b>	
Health and Safety Manager	
Health and Safety Committee members, including co-opt members	

## 9 Audit, Monitoring and Review

The policy will be reviewed in 3 years, i.e. October 2025, or earlier should the need occur.

<b>Monitoring Compliance Template</b>						
Minimum Requirement	Process for Monitoring	Responsible Individual/ Group/ Committee	Frequency of Monitoring	Review of Results Process (e.g. who does this?)	Responsible Individual/Group /Committee for Action Plan Development	Responsible Individual/ Group/Committee for Action Plan Monitoring and Implementation
Continuing relevance and accuracy of the Policy	Review	Health & Safety Risk Adviser	Every 3rd year	Health and Safety Committee	Health & Safety/ Risk Adviser Health and Safety Committee	Trust Health and Safety Committee
Completion of current Slip/Trip/Fall Risk Assessments	Audit	Manager of staff affected	At least annually	Health and Safety Committee	Health and Safety Committee	Health and Safety Committee
Completion of current staff training records showing staff attendance at Slips/Trips/Falls training	Audit	Manager of affected staff	At least annually	Health and Safety Committee	Health and Safety Committee	Health and Safety Committee
Number and type of reported Slips/Trips/ Falls Incidents	Review	Integrated Governance	Quarterly	Health and Safety Committee	Health and Safety Committee	Health and Safety Committee

## 10 Implementation Plan

Action/Task	Responsible Person	Deadline	Progress update
New policy to be uploaded onto the intranet and Trust website.	Communications via the Director of Corporate Governance	Within 5 working days of ratification	October 2022
A communication will be issued to all staff via Connect, immediately following publication.			October 2022
A communication will be sent to Education, Training and Development to review training provision.	Health, Safety and Risk Adviser		As necessary
Reference the revised policy in relevant training	Education, Training and Development	October 2022	October 2022

## 11 Dissemination, Storage and Archiving (Control)

Version	Date added to intranet	Date added to internet	Date of inclusion in Connect	Any other promotion/ dissemination (include dates)
9	November 2022	November 2022	November 2022	N/A



## 12 Training and Other Resource Implications

Managers at all levels must ensure that staff for whom they are responsible are aware of this policy, including their individual responsibilities.

## 13 Links to Other Policies, Standards (Associated Documents)

- Risk Management Strategy
- Health and Safety Policy
- Incident Reporting and Investigation Policy
- Dress Code, Uniform and Appearance Policy
- Falls (in patient and residential areas)
- Health and Safety at Work etc. Act 1974
- HSE, L21 Management Health and Safety at Work Regulations 1999 Approved Code of Practice and Guidance
- HSE, L24 Workplace (Health, Safety and Welfare) Regulations 1992 Approved Code of Practice and Guidance
- DH (2006), Health Technical Memorandum 61: Flooring
- HSE (2003), Slips and trips in the health services. Health services information sheet No.2 (HSIS2) HSE, INDG 225(rev2) Preventing slips and trips at work

## 14 Contact Details

<i>Title</i>	<i>Name</i>	<i>Phone</i>	<i>Email</i>
Health and Safety Manager	Sam Crosby	27 18260	<a href="mailto:sam.crosby@shsc.nhs.uk">sam.crosby@shsc.nhs.uk</a>
Health, Safety and Risk Adviser	Charlie Stephenson	27 16208	<a href="mailto:charlie.stephenson@shsc.nhs.uk">charlie.stephenson@shsc.nhs.uk</a>

## Appendix A - Risk Assessment

<b>Workplace/Team:</b>		<b>Risk Assessor:</b>			
<b>Title of Risk Assessment: Slips, Trips and Falls</b>		<b>Date of Assessment:</b>			
		<b>Date of Assessment Review: (or following any significant change)</b>			
<b>What are the hazards?</b>	<b>Who might be harmed by the hazard?</b>	<b>What is the risk of this harm happening now? (CxL)</b>	<b>List any additional measures needed to reduce the risk to an acceptable level</b>	<b>Additional measures completed by person and date of completion</b>	<b>What is the risk of this harm happening now? (CxL)</b>
<b><u>Internal areas</u></b>					
Bruise, sprain or broken bones	Staff, visitors and service users		Clear liquid spills when found and make sure wet flooring signs are used.		
			Health and safety checks to be completed to check suitability of flooring.		
			Continue to keep pedestrian routes clear of obstructions,		
			Appropriate, anti-slip entrance matting at doorways leading outdoors are present.		
			Relevant staff trained in the use of cleaning equipment and cleaning practices, ensuring the cleaned area is left dry.		
<b><u>External areas</u></b>					
Bruise, sprain or broken bones	Staff, visitors and service users		Continue to ensure that relevant, external pedestrian areas are gritted to help provide safe walkways in snowy/icy weather.		
			Continue regular inspections of floors and walkways - part of the weekly, health and safety checks.		
			Falls screening to be completed for each service user on admission to highlight needs and support required, (e.g. observations, chair and bed alarms).		

## Appendix B - Simple Steps to Reduce Slip, Trip and Fall Risks

There are many simple steps one can take to reduce risks. A few examples are below. (Source: HSE guidance document: INDG 225 Preventing slips and trips at work).

Hazard	Suggested Action
Spillage of wet and dry substances	Clean up spills immediately. If a liquid is greasy make sure a suitable cleaning agent is used. After cleaning, the floor can be wet for some time; dry it where possible. Use appropriate barriers to tell people the floor is still wet and arrange alternative bypass routes. If cleaning is done once a day, it may be possible to do it last thing at night so it is dry for the start of the next shift.
Trailing cables	Position equipment to avoid cables crossing pedestrian routes, use cable covers to securely fix to surfaces, restrict access to prevent contact. Consider the use of cordless tools. Remember that contractors will also need to be managed.
Miscellaneous rubbish, e.g. plastic bags	Keep areas clear, remove rubbish and do not allow it to build up.
Rugs/mats	Ensure mats are securely fixed and do not have curling edges.
Poor lighting	Improve lighting levels and placement of light fittings to ensure more even lighting of all floor areas.
Slippery surfaces	Assess the cause and treat accordingly, for example always keep them dry if wet causes the problem. In certain situations you may have to treat them chemically and use appropriate cleaning methods etc.
Change from wet to dry floor surface	Provide suitable footwear, warn of risks by using signs, locate doormats where these changes are likely.
Changes of level	Try to avoid. If you cannot, improve lighting, add high-visible tread nosings, (e.g. white/reflective edge to step).
Slopes	Improve visibility, provide hand rails and use floor markings.
Smoke/steam obscuring view	Eliminate it or control by re-directing it away from risk areas; improve ventilation and warn of it.
Unsuitable footwear	Ensure employees choose suitable footwear, particularly with the correct type of sole. If the type of work requires special, protective footwear, the employer is required by law to provide it - without charge.
Step ladders	Visually inspect before use to check for major damage or defect. Have them maintained as required. Use in-line with available, manufacturer's instructions.

## Appendix C - Equality Impact Assessment Process and Record for Written Policies

**Stage 1 – Relevance** - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

**NO** – No further action is required – please sign and date the following statement.  
**I confirm that this policy does not impact on staff, patients or the public.**

*I confirm that this policy does not impact on staff, patients or the public.*  
 Charlie Stephenson, August 2022

**YES, go to Stage 2**

**Stage 2 Policy Screening and Drafting Policy** - Public authorities are legally required to have ‘due regard’ to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain ‘protected characteristics’ and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don’t know and note reasons). Please see the SHSC Guidance and Flow Chart.

**Stage 3 – Policy Revision** - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
<b>Age</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Age related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Disability</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Ability related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Gender Reassignment</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Gender related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		



<b>Pregnancy and Maternity</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Pregnancy and Maternity related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Race</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Race related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Religion or Belief</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Religion related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Sex</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Sex related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Sexual Orientation</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Sexual orientation related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		
<b>Marriage or Civil Partnership</b>	H&S risk assessments consider all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Marriage or Civil partnership related issues are an inclusive part of this process and require the implementation of suitable and sufficient arrangements to reduce the likelihood of any harm so far as is reasonably practicable.		

Please delete as appropriate: - Policy Amended / Action Identified (see Implementation Plan) / no changes made.

Impact Assessment Completed by:  
Charlie Stephenson, August 2022