



Policy:

Management of Lifts (EST 004)

Executive Director Lead	Director of Strategy
Policy Owner	Head of Estate Services
Policy Author	Head of Estate Services

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Summary of policy

This policy outlines the process for the Inspection and maintenance of passenger lifts at Trust owned and leased properties where we have a maintenance contract, in accordance with the requirements of LOLER and HTM 08

Target audience	All SHSC staff
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Keywords	Lift, Controls, LOLER, Maintenance, Health Technical Memoranda 08
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Storage and Version Control

Version 2 of this policy is stored and available through the SHSC intranet/internet. This version of the policy supersedes the previous version (V1 29 July 2019). Any copies of the previous policy held separately should be destroyed and replaced with this version.

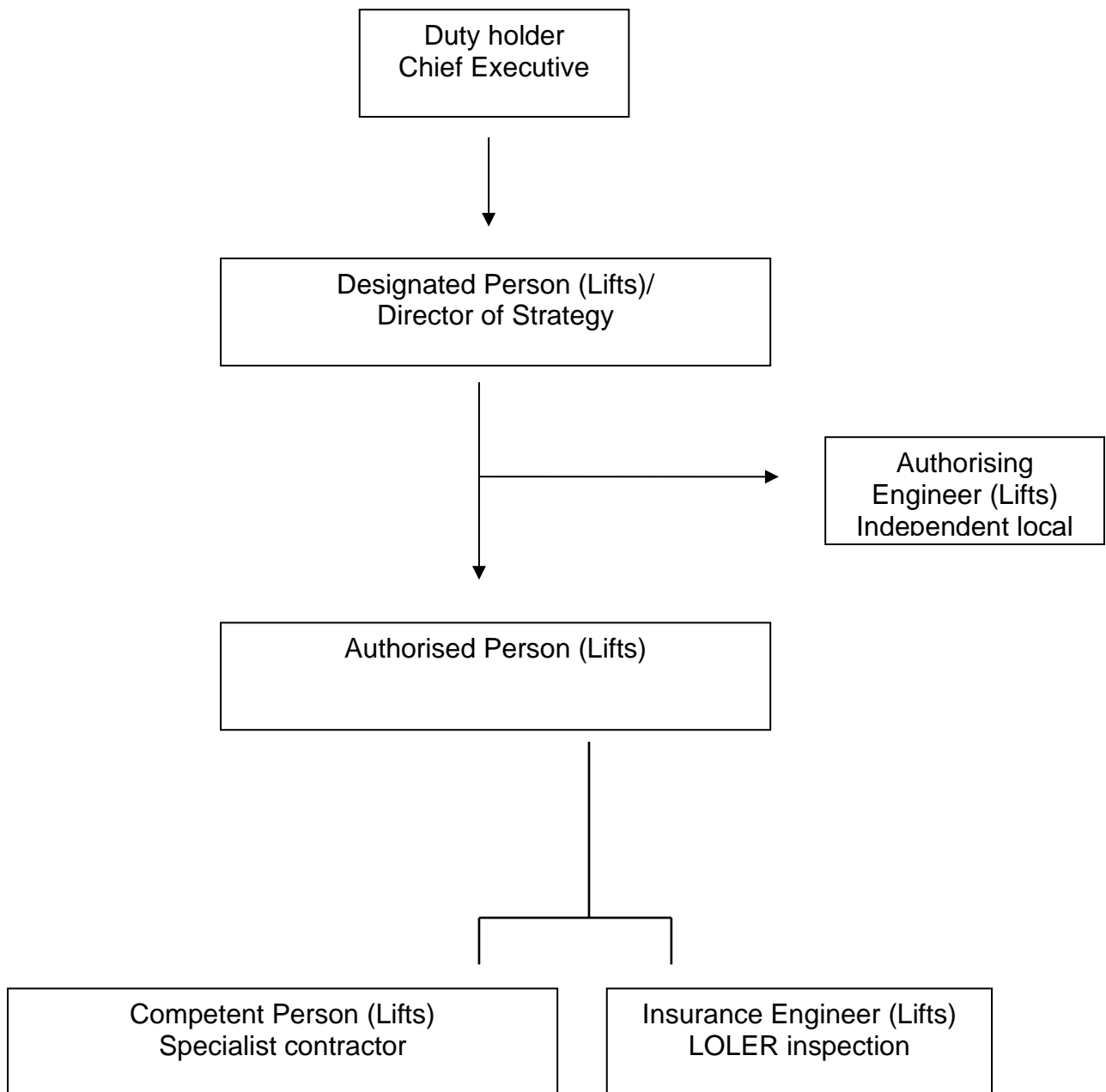
Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
1	New policy created	July 2019	New policy commissioned
2	Policy revision	July 2022	Amended in-line with comments made during consultation

Contents

Section		Page
	Version Control and Amendment Log	1
	Flow Chart	3
1	Introduction	4
2	Scope	4
3	Purpose	5
4	Definitions	6
5	Detail of the Policy	6
6	Duties	7-9
7	Procedure	9-12
8	Development, Consultation and Approval	13
9	Audit, Monitoring and Review	14
10	Implementation Plan	15
11	Dissemination, Storage and Archiving (control)	15
12	Training and Other Resource Implications	15
13	Links to Other Policies, Standards, References, Legislation and National Guidance	16
14	Contact Details	16
	APPENDICES	
	Appendix 1 - Equality Impact Assessment Process and Record for Written Policies	17-18
	Appendix 2 - Review Policy Checklist	19

Flowchart



1 Introduction

As required by various health and safety regulations, SHSC, as owners and operators of lifts, is required to ensure lifts are operated and maintained in a safe manner. HTM 08 requires a Policy Statement on Lift Management to satisfy the Health and Safety Act and the Lifting Operations and Lifting Equipment Regulations 1998, (LOLER).

The aim of this policy is to ensure lifts belonging to, or maintained by, Sheffield Health and Social Care NHS Foundation Trust, (SHSC), are constructed, operated and maintained to the highest standards and comply, at all times, with current statutory requirements plus industry recognised guidance and standards.

The policy is to provide and maintain safe and healthy working conditions, equipment and systems of work for all staff, service users and visitors, and to provide such resources, information, training and supervision as they need for this purpose. SHSC aims to do all that is reasonably practicable to manage passenger and goods lifts, and to follow the steps laid out in this policy.

Sheffield Health and Social Care NHS Foundation Trust premises are dependent on lifts to provide an efficient, fast and comfortable vertical transportation service for the movement of service users, staff, visitors, medical equipment and ancillary service items.

Contractors employed to work on SHSC's lift systems will be procured in-line with SHSC's Management of Contractors Policy, e.g. via the Facilities Directorate's Approved Contractors List, the NHS Framework and in compliance with a Competence Verification Scheme.

2 Scope

The objective of this policy is to define specific roles and responsibilities for staff and a safe system of management for the operation of lifts across SHSC. As such, SHSC will comply with legal requirements to protect staff, service users and visitors, and staff members and contractors need to be aware of their responsibilities and assistance with:

- Operation and maintenance
- Emergency situations
- Risk assessments

This policy will apply wherever any SHSC employees are working and to all lift equipment of SHSC, wherever it is located.

3 Purpose

SHSC is committed to the safe operation of all the lift systems for which it has a responsibility. The policy aims to determine the management arrangements for safe working when using and maintaining lifts. It will ensure all powered lifts and associated equipment will be designed and installed such that they may be operated and maintained safely when approved operational procedures are followed correctly.

It will also ensure all powered lifts and equipment installed within SHSC premises are installed, serviced and used so as to protect staff, service users and members of the public from personal injury or any other damage arising from its use, as far as is reasonably practical.

SHSC regards lift safety at work as also being a responsibility of every employee in order to safeguard themselves, their colleagues and other persons within the sphere of SHSC's interests.

SHSC proposes to continue to promote and develop a proactive safety regime by providing information, training and instruction for all employees, together with safe workplace procedures and rigorous maintenance routines for all lifts and associated equipment.

SHSC reviews procedures for health and safety matters. Identification of hazards, and elimination of risks, shall also take account of the lift systems, with the safety codes guidance and HTM 08 (Health Technical Memoranda) to ensure compliance with statutory legislation.

The effectiveness of the Lift Policy and procedures depends, to a large extent, on the full co-operation and active participation of all employees to implement safe working practices and to report any perceived risk of danger arising from the use of the lift system and associated equipment.

Suitable and sufficient risk assessments and safe systems of work will be undertaken by management. Management will ensure employees are competent to undertake tasks involving lift maintenance and safety.

Management will ensure correct safety signs are provided to ensure compliance with legislation.

This policy sets out the detailed requirements for the maintenance and safe operation of all passenger and goods lifts serviced by SHSC's Estate Services or contractors.

The lifts will be maintained so they do not present either a physical risk to persons using the lifts or a statutory compliance risk to SHSC.

4 Definitions

Designated Person (DP)

An individual appointed by the healthcare organisation, (a board member or a person with responsibilities to the board), who has overall authority and responsibility for the lift systems on the premises.

Authorising Engineer (AE)

A chartered or incorporated engineer with the required knowledge, training and experience who possesses the necessary independence from local management and is appointed in writing by the Designated Person. The AE assesses the suitability and appointment of Authorised Persons.

Authorised Person (AP)

Individuals possessing sufficient technical knowledge and training on SHSC lift installations will be appointed by management on the recommendation of the Authorising Engineer. Authorised Persons are responsible for implementing the Lift Policy on a daily basis.

Competent Person (CP)

An individual recognised by the Authorising Persons as having sufficient technical knowledge, experience and training to prevent danger to themselves and others when working on the electrical system. Normally, an SHSC-appointed, competent lift contractor.

HTM

Health Technical Memoranda give advice and guidance on the design, installation and operation of specialised building and engineering technology used in healthcare.

ACOP

Approved Code of Practice

LOLER

Lifting Operations and Lifting Equipment Regulations

5 Details of the Policy

The purpose of the is policy is to outline the procedure for the inspection and maintenance of lifts at Trust owned and leased properties maintained under a contract. It will outline the responsibilities of Trust and contracted individuals

6 Duties

Roles and Management Responsibility

The full roles and responsibilities are defined within HTM 08 and should be referred to for fuller details of individual roles.

Chief Executive

The Chief Executive holds the overall responsibility for SHSC's health and safety and the implementation of this policy. This responsibility is delegated to the Director of Strategy and nominated Estate Services officers identified below.

Director of Strategy

The Director of Strategy has been delegated the role of Designated Person. The Director of Strategy is SHSC's lead for lift safety. He/she will give assurance to SHSC's Board regarding compliance with statutory legislation and provide a link with the Director of Corporate Governance to ensure all identified risks are included in SHSC's Risk Register.

Designated Person

The designated person will carry out the following duties:

- a) Appoint in writing a Lift Authorising Engineer for all lift installations for which management has responsibility.
- b) Review the Authorising Engineer's lift duties have been carried out to comply with the Health Technical memorandum HTM 08.
- c) Maintain a register of all nominated personnel.

Authorising Engineer (external consultant)

The Authorising Engineer (AE) will ideally be a Chartered Engineer who is appointed in writing by the Designated Person, to advise on safety arrangements for defined lift systems.

The AE shall be independent of SHSC and will assess the suitability and appointment of all Authorised Persons (Lifts) for SHSC. The Authorising Engineer (Lifts) will be responsible for implementing, administering and monitoring the application of guidance HTM 08.

The Authorising Engineer's (Lifts) roles include the following:

- a) Assess, and recommend in writing, sufficient Authorised Persons (Lifts) to provide the necessary cover for all systems for which management has responsibility.
- b) Define the exact extent of the systems and installations for which each Authorised Person (Lifts) is responsible.
- c) If necessary, recommend the suspension or cancellation of the appointment of an Authorised Person (Lifts) and withdraw the certification.
- d) Maintain a register of all Authorised persons (Lifts) and make available to the Designated Person.
- e) Ensure candidates for appointment as Authorised Persons (Lifts) satisfy the qualification requirements of HTM 08.
- f) Satisfy the training and familiarisation requirements of HTM 08.
- g) Demonstrating adequate knowledge of each system, installation and type of equipment for which authorisation is sought.

Authorised Persons

The Authorised Persons (Lifts) are to be senior Estate Services managers, or a similar status, which possess adequate knowledge, sufficient experience and have received the necessary training within this field.

The Authorised Persons should be appointed in writing by the Authorising Engineer to control and manage all lift equipment. This will involve the practical implementation of maintaining, testing and inspecting all passenger lifts. They are to liaise with all necessary parties and provide information to enable the policy to be fully implemented.

The Authorised Person (Lifts) will be responsible for the practical implementation and operation of guidance HTM 08 and the systems and installations for which management is in control of the danger and for which the Authorised Person (Lifts) has been appointed.

The duties of the Authorised Person include the following:

- a) Appoint in writing Competent Persons (Lifts) and maintain a register of all appointments and make available to the Designated Person.
- b) Co-operate with the Authorising Engineer (Lifts) in matters of policy concerning the lift systems.
- c) Auditing and ensuring the accepted policy and procedures for the safe inspection and testing of all electrical equipment are effectively implemented.

Competent Person

The Competent Person (Lifts) will have sufficient technical knowledge and experience to organise, supervise and control skilled persons and to prevent danger while carrying out work on passenger lift systems. A Competent Person (Lifts) may be a member of Estate Services or a contractor appointed to undertake defined installation or maintenance work. All Competent Persons (Lifts) must be both adequately and appropriately trained. The Competent Person (Lifts) shall comply with this safety guidance and operation of guidance HTM 08.

Head of Technical Support

The Head of Technical Support has the responsibility for the maintenance and upkeep of asset records appertaining to the inventory and history of all lift equipment in use within SHSC. He/she will ensure the timely production of the Planned Preventative Maintenance (PPM) and status reports.

Head of Improvement - Capital Programme and Development

The Head of Improvement - Capital Programme and Development, and the Capital Project Managers, will ensure all new capital works shall comply with this safety policy and all current legislation, provide adequate information to the appointed personnel so the new installations can be assessed and approved.

With respect to all capital and project work undertaken by SHSC's Project Managers, they shall be responsible for:

- a) Ensuring adequate communication between the design team and Authorised Persons (Lifts).
- b) Ensuring works are carried out in accordance with all relevant legislation, standards and guidance documents.
- c) Designing and managing all capital schemes, including commissioning and the provision of 'as fitted' drawings for lift equipment.
- d) The provision of operating and maintenance manuals for all new lift equipment as required by HTM 08-01 and HTM 06-02.

Where a specialist contractor has been appointed under contract by SHSC's management, the contractor shall be required to comply with site rules, developed risk assessments, method statements, permits to work, safe system of working and the following polices:

- a) The requirements of SHSC's Health and Safety policy
- b) SHSC's Low Voltage Electrical Safety Policy
- c) Any instruction issued by SHSC's Authorised Person(s) in accordance with SHSC's Electrical Safety Rules for Low Voltage Systems.
- d) All contracted staff must comply with the Management of Contractors Policy.

7 Procedure

7.1 General

The law requires that all lifts, when in use, should be thoroughly examined: This will be in accordance with LOLER and carried out by SHSC-appointed Engineering Insurance Inspector.

- After substantial and significant changes have been made.
- At least every six months if the lift is used, at any time, to carry people.
- Every 12 months if the lift carries only loads, in accordance with an examination scheme.
- Following 'exceptional circumstances', such as damage to, or failure of, the lift, long periods out of use or a major change in operating conditions which is likely to affect the integrity of the equipment.

Each lift is to be examined by Competent Person (Lifts) once a month in accordance with HTM 08. A report of the result of every such examination must be prepared on the prescribed form, signed and dated by the person carrying out the examination.

All work relating to SHSC's LV electrical systems must be sanctioned by SHSC's Authorised Person LV.

All staff using passenger and goods lifts shall observe the following:

- Only use the lift for its intended purpose. Goods lifts are not to be used to carry passengers and should be identified within the Fire Evacuation Plan.
- Do not exceed the stated maximum number of passengers in any lift.
- Do not exceed the stated maximum load for any lift.
- Lifts must not be used in the event of fire alarm activation unless it is a lift specifying that it can be used for evacuation purposes.
- Report any defects to the Estate Services helpdesk, (x18181).

7.2 Lift Motor Room

- The lift motor room is to be kept locked at all times; access is by persons authorised to carry out duties within the room.
- All safety rails and guards are to be in place.
- If rotating parts are not guarded, take particular care when hand winding. All rotating parts are to be painted yellow (BS7255 1989 and the Provision and Use of Work Equipment Regulations (PUWER) 1998. Safe use of work equipment, Approved Code of Practice and guidance L22).
- Lift motor room floor hatches should be tested and marked with the safe working load [SWL].

- Suitable safety rails, (edge protection), will be used if the hatch has to be open for any reason, (see: ACOP 'Safe use of Lifting Equipment' L113.Regulation 3, Paragraph 68 to82).
- Rubber safety mats are to be in place at control panels/equipment. These should be examined by the Competent Person to ensure compliance.
- Ensure appropriate signage is posted at all times.
- The room is to be kept clean and tidy at all times and free of redundant materials/equipment.

7.3 Working on Lifts

- Safety/caution signs must be posted at all point of lift car access, (each landing), to warn the lift is out of service.
- Isolate and lock off all sources of supply in accordance with the lock off procedures before working on electrical equipment.
- Ensure appropriate signage is posted at all times.

7.4 Working on/in the Lift Pit

- *Safety/caution* signs must be posted to warn of the risk of falling.
- Safety barriers are to be used whenever work is required in the lift pit or at car doors.
- Safety/caution signs must be posted to warn of the danger of crushing by the car or platform of a hydraulically-operated lift.
- The lift should be suitably propped and prevented from downward movement before any work is undertaken beneath it.
- Before any person enters a lift pit the electrical power supply shall be isolated - under all circumstances - using the lift pit switch, where provided, and 'Caution' notices placed on points of isolation.
- Ensure appropriate signage is posted at all times.

7.5 Working in a Lift Shaft

- *Safety/caution* signs must be posted at all points of lift car access, (each landing), to warn that the lift is out of service.
- Isolate and lock off all sources of supply in accordance with the lock off procedures before working on electrical equipment.
- Ensure appropriate signage is posted at all times.

7.6 Working on Car Tops

- *Safety/caution* signs must be posted at all points of lift car access, (each landing), to warn that the lift is out of service.
- Keep clear of counter weight when riding on car top.
- All double lift installations should have the lift shaft totally screened - keep away from that adjacent edge.
- Ensure appropriate signage is posted at all times.

7.7 Hand Winding

- Staff must be trained to carry out hand winding.
- Isolate and lock off all sources of supply in accordance with the lock off procedures before working on electrical equipment.
- When hand winding has been carried out, any separate winding wheel and/or brake release lever shall be removed before restoring the electrical supply.
- Ensure appropriate signage is posted at all times.

7.8 Access Controls

Ensure:

- Only authorised persons are permitted to enter a lift motor room.
- *No Entry* signs to be fitted to all lift motor room doors.
- Before any plant, equipment, electrical and pressure, (hydraulic), systems are worked on, they must be safely isolated from all sources of danger. Safe isolation methods include permits, locks and caution notices.
- Safety lock-offs will be controlled using special locking devices to allow the use of safety locks.

- The keys to safety locks are to be retained by the Competent Person who applied them. Each competent person will be issued with a personal lock(s). The issue will be recorded. A spare key will be locked in a safe where access can only be obtained in an emergency by the Authorised Person.

- If an Authorised Person applies the safety lock before the permit-to-work is issued, the key must be placed in a key safe; one key to the key safe being retained by the Authorised Person and the other being issued to the Competent Person in receipt of the permit.

7.9 Maintenance and Test Records

Records will be kept of:

- The thorough examination and test LOLER report
- All maintenance, service and repairs

The thorough examination report - by law should:

- Identify the equipment examined, (serial number, make, etc.), the employer and the premises.
- State the date of the last thorough examination and specify when the next one should take place.
- Specify the safe working load of the lift.
- State the reason for the thorough examination, (e.g. following installation, according to an examination scheme, statutory interval, etc.).
- Identify any defect which is, or may become, a danger to people.
- Give the details of any repair, renewal or alteration required to remedy the defect and the date by which it should be undertaken.
- Give details of any tests carried out.
- Give details of the person carrying out the report.

7.10 Competence

Any individual working on lift equipment should have documented competence in lift works, as identified in HTM 08, and noted previously in this policy.

Persons required to monitor and control lift specialist contractors and oversee lift stewards and wardens will be suitably trained by having attended appropriate courses, which may include specialist lift manufacturer courses.

A Training Needs Analysis will be conducted in order to identify staff requiring training and the level of such training.

7.11 **Training - Emergency Release of Passengers**

The emergency release of lift passengers, and using the hand winding procedure, will be only carried out by trained people - normally the competent contractor employed to provide a maintenance contract to SHSC, or those who have received training from the lift manufacturer or passed approved courses in accordance with the HTM, which will include:

- Instruction in the safety skills and knowledge common to the safe operation of lifts
- The dangers arising from inappropriate actions
- Hazardous areas, (e.g. beneath lift cars)
- The main causes of accidents and relevant safe working practices, including the correct use of barriers
- Slips trips and falls

8 Development, Consultation and Approval

Name of Policy: Lift	Name of Policy Lead: Mark Gamble
Date: July 2022	Contact Details: (0114) 27 18698
Consultation Plan:	
Authorised Engineer (Lifts)	
Director of Strategy	
Director of Facilities Management	
Head of Improvement - Capital Programme and Development	
Health and Safety Manager	
Fire and Security Officer	
Health, Safety and Risk Advisor	
Maintenance Manager	
Deputy Maintenance Manager	
Health and Safety Committee members, including co-opt members	
Estate Services Compliance Group	

RECORD OF CONSULTATION (interactive)			
Group or individual consulted	Date of consultation/ response received	Comments on draft policy	Your response (say if policy amended - if not, why not)
Director of Facilities Management	15 May 2019	Section 5: Competent Person - amended from Competent Person LV to Competent Person (Lifts) Section 6.1 - amended to include Insurance Inspector	Amended accordingly
Health, Safety and Risk Advisor	June 2022	Section 2: text changes Section 3: description of HTM Section 4: clarification on training Section 6: clarification of duties regarding the Authorised Engineer's role Section 7: clarification regarding the key safety box	Amended accordingly

9 Audit, Monitoring and Review

The policy arrangement will be monitored by Estate Services.

Monitoring Compliance Template						
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
A) Maintenance of Lifts	e.g. Review, audit	Estate Services Compliance Group	Quarterly	Health and Safety Committee	Authorising Engineer (Lifts) and Authorised Person (Lifts)	Estate Services Compliance Group

The Policy to be reviewed in 3 years - i.e. July 2025 - or earlier should there be any changes in local or national requirements or guidance or lessons learnt.

10 Implementation Plan

Action/Task	Responsible Person	Deadline	Progress update
Advise the consulted-on committees/groups that the policy has been ratified	Head of Estate Services	TBC	
Following ratification, upload the new policy onto the intranet and remove the old version	Communications	TBC	
Reference the revised policy in Risk Management Training	Head of Estate Services	TBC	

11 Dissemination, Storage and Archiving (Control)

An electronic copy of the policy shall be accessible via SHSC's intranet.

Version	Date added to intranet	Date added to internet	Date of inclusion in Connect	Any other promotion/ dissemination (include dates)
1	July 2019	July 2019	August 2019	/
2	October 2022	October 2022	October 2022	/

12 Training and Other Resource Implications

Estate Services managers will require training in accordance with HTM 08 to be appointed as Authorised Persons Lifts.

13 Links to Other Policies, Standards (Associated Documents)

Health and Safety Policy
 Low Voltage Electrical Safety Policy
 Management of Contractors Policy
 Procurement Policy
 Confidentiality Code of Conduct Policy

Health and Safety at Work etc. Act 1974
 HTM 06 - 01 Electrical services supply and distribution **Part B**: Operational management
 HTM 06 - 02 'Electrical services supply and distribution' Electrical Safety Guidance for low voltage systems
 The Management of Health and Safety at Work Regulations 1999
 The Provision and Use of Work Equipment Regulations 1998
 The Working at Height Regulations 2005; page 14 of 18
 The Control of Substances Hazardous to Health Regulations 2002
 The Electricity at Work Regulations 1989
 Memorandum of Guidance on the Electricity at Work Regulations 1989
 Electrical Equipment (Safety) Regulations 1994
 Guidance on safe isolation procedures
 GS38. Electrical test equipment for use by electricians
 INDG354 (rev1): Safety in electrical Testing.

HSG85: Electricity at work: safe working practices
 The Health and Safety (Safety Signs and Signals) Regulations 1996
 ACOP L22 PUWER - Safe use of work equipment
 HSE L113 - 'Safe use of Lifting Equipment'
 Personal protective equipment at work 2nd edition
 INDG402: Safe use of ladders
 INDG405: Top tips for ladder and stepladder safety
 INDG73 (rev): Working Alone in safety
 Thorough examination and testing of lifts, simple guidance for lift owners

14 Contact Details

Title	Name	Phone	Email
Head of Estate Services	Mark Gamble	27 18698	mark.gamble@shsc.nhs.uk
Head of Improvement - Capital Programme and Development	Derek Bolton	30 50635	derek.bolton@shsc.nhs.uk
Maintenance Manager	Paul Thackeray	22 62210	paul.thackeray@shsc.nhs.uk

Appendix 1

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.
 Mark Gamble, July 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?
Age	This policy considers 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.		
Disability	This policy considers 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.		
Gender Reassignment	This policy considers 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.		

Pregnancy and Maternity	This policy considers 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.		
Race	This policy considers 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.		
Religion or Belief	This policy considers all staff, service users and members of the public, to whom SHSC owes a duty of care under health and safety law. Religion or belief 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.		
Sex	This policy considers 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.		
Sexual Orientation	This policy considers 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.		
Marriage or Civil Partnership	This policy considers 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: Mark Gamble, July 2022

Appendix 2

Review Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
Engagement		
1.	Is the Executive Lead sighted on the development/review of the policy?	√
2.	Is the local Policy Champion member sighted on the development/review of the policy?	√
Development and Consultation		
3.	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	N/A
4.	Is there evidence of consultation with all relevant services, partners and other relevant bodies?	√
5.	Has the policy been discussed and agreed by the local governance groups?	√
6.	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	√
Template Compliance		
7.	Has the version control/storage section been updated?	√
8.	Is the policy title clear and unambiguous?	√
9.	Is the policy in Arial font 12?	√
10.	Have page numbers been inserted?	√
11.	Has the policy been quality checked for spelling errors, links, accuracy?	√
Policy Content		
12.	Is the purpose of the policy clear?	√
13.	Does the policy comply with requirements of the CQC or other relevant bodies? (where appropriate)	√
14.	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	N/A
15.	Where appropriate, does the policy contain a list of definitions of terms used?	√
16.	Does the policy include any references to other associated policies and key documents?	√
17.	Has the EIA Form been completed (Appendix 1)?	√
Dissemination, Implementation, Review and Audit Compliance		
18.	Does the dissemination plan identify how the policy will be implemented?	√
19.	Does the dissemination plan include the necessary training/support to ensure compliance?	√
20.	Is there a plan to i. review ii. audit compliance with the document?	√
21.	Is the review date identified, and is it appropriate and justifiable?	√