Facilities and Estates

Safety and Suitability of Premises Policy

Document Control Summary

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1. Introduction

It is the intention of South Staffordshire & Shropshire Healthcare Foundation Trust (SSSFT) that Service Users, Visitors and staff who access/use the Trusts services do so in safe, accessible surroundings that promote wellbeing.

2. Purpose

The Trust will ensure that Service Users, visitors and staff are protected against the risks of unsafe or unsuitable premises by the design and layout of the premises being suitable for carrying out SSSFT Services by:

- Compliance with any requirements relating to Trust premises (HTM's, HBN's)
- Taking into account of any relevant design, technical and operating standards and manage all risks in relation to Trust premises
- The appropriate measures being in place to ensure the security of Trust premises
- The Trust premises and any grounds being maintained

3. Scope

Service Users, Visitors and Staff in SSSFT premises in relation to Safety and Suitability of Premises the Trust will:

- All specialist equipment and engineering systems have the required safety precautions in place, and are validated and have the required compliance checks.
- Care is taken to maintain a suitable comfortable environment for the delivery of care.
- Ensure that the premises are accessible to Service Users, Visitors and Staff who require access to Trust premises and meet the requirements of the Disability Discrimination Act 1995
- Ensure that the premises are suitable for the required activity
- Ensure that the premises have heating, lighting, space, and ventilation that conform to relevant and recognised standards.
- Ensure that the premises are free from preventable offensive odours
- Ensure that the premises protect Service Users and visitor's rights to privacy, dignity, choice, autonomy and safety.
- Ensure that the Trust premises reflect Department of Health guidelines (HTM's, HBN's)
• Licenses and SOP’s in place for the safe collection, classification, Disposal, handling, segregation, storage, transport, treatment of clinical waste in line with current legislation.
• Meet the requirements of the Control of Substances Hazardous to Health Regulations 2002 (COSHH) as amended.
• Meet the requirements of the Health & Safety at Work Act 1974
• Meet the requirements of the Regulatory Reform (Fire Safety) Order 2005 and other relevant legislation.
• Take account of recognised risk and put steps in place to lower risk to an acceptable level.
• Take account of the needs of Service Users, Visitors and Staff who enter or use the premises including the safety of children or other vulnerable people where they are permitted to enter.
• Where premises are altered/ extended or undergo a change of use, the continued Safety and Suitability of premises is assessed.

4.0 Trust Premises

Trust premises are to be designed and adapted so that Service Users, Visitors, and Staff can move around and be as independent as possible in normal hospital activities and meet the requirements of the Disabilities Discrimination Act 1995. All Trust premises should have sufficient toilet provisions, as well as where necessary bathroom and bathing facilities that takes into account the needs of Service Users, Visitors and Staff and promote dignity, independence and privacy.

Where required, Trust Staff are to have an installed Nurse Call System in place to allow Staff to summon urgent assistance. Where Service Users have limited mobility issues then a Service User call system should be installed to allow staff to be summoned for whatever reason.

4.1 Maintenance of Trust Premises

The Trust has implemented clear procedures which include:

• Assessment, identification and management of risks associated with Trust premises, including water hygiene and fire safety
• All relevant legislation and guidance including design, technical, and operational guidance, (HTM's, HBN'S) etc.
• Regular Assessments are undertaken regarding the safety and suitability of premises, when the Trust is not responsible for the premises in which Trust care, support and treatment is delivered.
• Systems in place to ensure that the décor of Trust premises is maintained and refreshed.
• The management of building facilities, electrical, heating and safety complies with statutory requirements/ manufactures recommendations, and are used to minimise risk.
• The method to which Trust premises are maintained.
• The collection, disposal, handling, prevention, transport, treatment and disposal of waste.
• The development and implementation of plans for the adaption of Trust premises

4.2 Premises Backlog Maintenance

Summary of recommended process for establishing and managing backlog maintenance as follows:

4.2.1 Collect background information
• Block/building room drawings, site plans and engineering schematics
• Historical information – ages of buildings, services, plant and equipment
• Maintenance schedules
• Known defects and failure problems
• Planned major investment

4.2.2 Carry out a survey
• For each block, on a room by room basis for internal services and across site for external services
• Collect data using electronic/manual data collection sheets and drawings.
• Take photographs, where appropriate, as memory joggers and/or for inclusion in reports
• Estimate remaining lives using historic information, standard data, experience and observation of assets in-situ
• Record provisional condition rankings for physical condition, mandatory fire safety requirements and statutory safety legislation.
• Record factors related to risk

4.2.3 Collate the information and produce a report
• Firm up condition rankings for physical condition, fire safety and statutory safety
• Complete risk assessments/produce risk rankings – taking account of the views of your estates department.
• Complete survey report forms
• Complete a five-year backlog profile for each block; produce a summary for each site and the entire trust
• Produce a backlog cost summary for each site and on a trust-wide basis
• Write a report for investment decisions, presenting the survey results and investment needs

4.2.4 Estate investment planning
• To eradicate backlog as quickly as possible
• Prioritise high and significant risk items
• Take into account existing and future investment plans
• Include all costs relevant to the suggested scheme(s) (for example works costs, fees, VAT etc)
• Follow your trust's financial standing orders or 'Capital Investment Manual' requirements, as appropriate
• Seek trust board approval for funding

4.2.5 Undertake the required works and carry out annual review
• Project manage the execution and completion of approved schemes
• Carry out an annual review of progress made
• Update survey information to ensure accuracy of figures as at 31 March of each year
• Ensure a detailed condition survey is undertaken for each block over a 5-year cycle

4.2.6 Premises Assurance Model (PAM)
The Directorate (F&E) needs to respond to the current challenges that represent key components of quality and provide evidence of the provision of care in a safe environment.
The NHS Premises Assurance Model is being used to assess and demonstrate compliance and is the recognised NHS methodology to demonstrate estates compliance.

The NHS PAM tool may be referred to by the CQC when undertaking inspections of healthcare premises.

A fundamental part of the whole NHS PAM assessment is being able to produce suitable evidence that supports the organisation's self-assessment. This evidence is what the CQC are likely to scrutinise during any inspection. The expectation is that evidence is the organisation's every day policies, procedures, working practices, records etc. relating to estates and facilities services.

As a general principle the approach defined in the policies, procedures, working practices etc. should demonstrate:

1. They comply with relevant guidance and legislation.
2. Are understood,
3. Operationally applied,
4. Adequately recorded,
5. Reported on,
6. Audited and reviewed.

**Self-Assessment**

4.2.7 The 2016 NHS PAM is a refreshed and updated version, of the previous version and encompasses changes in policy, strategy, regulations and technology. The NHS PAM supports the NHS Constitution right:

“You have the right to be cared for in a clean, safe, secure and suitable environment.”

The main benefits of the NHS PAM are to:

- Enable NHS funded providers of healthcare to demonstrate to their patients, commissioners and regulators that robust systems are in place to assure that their premises and associated services are safe,
- Provide a consistent basis to measure compliance against legislation and guidance, across the whole NHS;
- Prioritise investment decisions to raise standards in the most advantageous way.

4.2.8 The SSSFT 2014 to 2015 PAM document details five main domains as follows:

- Effectiveness
- Efficiency
- Organisational Governance
- Patient Experience
- Safety
The three domains Efficiency, Organisational Governance, and Patient Experience all scored at Good Rating and the two remaining domains Effectiveness and Safety were both rated as requiring “Minimal Improvement”. This was due to the lack of submitted Estates & Facilities Operational Policies and Procedures. Although all domains within PAM 2014-2015 required some action, going forwards the domains of Effectiveness and Safety were identified as requiring priority.

After looking into the PAM rating mechanism it was realised that the scores achieved within the 2014-2015 PAM were at a reasonable level overall, as the minimal score within PAM reads “The impact on people that use services, visitors or staff, is low”. In real terms the difficulty with the PAM 2014-2015 rating was that the organisation wasn’t able to demonstrate evidence to support the operational work carried out within the Estates and Facilities Directorate.

The re-assessment has been tougher than the original as we have greater understanding of the process so the re-scoring has not shown improvement in three domains where actual improvement has been made.

4.2.9 The new updated version of PAM 2015-2016 is based upon the output requirements of the 2014-2015 PAM, which in a prioritised view were the deficiencies within the two domains:

- Effectiveness
- Safety

To this end extra resource has been assigned within the Estates and Facilities Directorate to write missing and out of date Operational Policies and Procedures, this work is ongoing though core requirements have been written.

4.3.0 In the work required within the Effectiveness Domain there were six self-assessment questions, which in broad terms are as follows:

- An Estates Strategy that is integrated with relevant local and national organisation service development plans
- A well-managed approach to the disposal of freehold and leasehold land
- A well-managed robust approach to land and property
- A well-managed annual approved updated board approved sustainable development management plan
- Effective transport and access arrangements
- Participation in the development of local and regional development policy

4.3.1 Across the Effectiveness Domain there has now been improvement across the six self-assessment questions from overall Minimal Rating PAM 2014-2015 to overall Good Rating PAM 2015-2016. This is due to the submission of the applicable information from the key stakeholder multi-discipline meetings across the Trust that was held in the summer 2015. This improvement in Effectiveness Domain rating was helped by the Trust:

- Effectively using existing systems such as Performance Plus
- Information gathering
- New systems such as MICAD,
- Safety Reporting Systems “Safeguard”
4.3.2 In the works required within the Safety Domain there are 27 self-assessment questions and these are Organisational, Site Safe Systems of Work, and Compliance with well managed systems for example:

- Asbestos
- Asset Management & Maintenance
- Contractor Management
- Fire Safety
- New Build & Refurbishment Works
- Safety & Suitability of Premises & Services, where the Organisation is not responsible the premises in which the care, treatment and support is delivered

4.3.3 There has now been improvement within the Safety Domain ratings from the overall PAM 2015-2016 “Minimal Improvement” requirement, to overall Good Rating PAM 2015-2016. The improvement in Safety Domain rating was helped by:

- Asset Management & Maintenance Records
- A full review of Statutory Requirements, initiated with a 3 day Kaizen Event
- Clear Defined Roles & Responsibilities
- Development of Authorising Engineer(AE) & Authorised Person’s(AP) Register
- Development of Contractor Controls building and maintenance works
- Development of Operational Policies & Procedures
- Revised Business Continuity Plan
- Revised schedule of training requirements

4.3.4 In summary a full PAM Audit has been undertaken of the 2014-2015 PAM tool in all Domains to ensure that all evidence required by PAM has been sited and verified within the PAM Document. The 2015-2016 PAM will have an output going forwards as SSSFT strives to reach the “Outstanding Level” within each domain

There are also clear emergency procedures in place:

- In the event of electricity, water or gas supply failures to Trust premises
- In the event of flood or fire within Trust premises, such as a fully planned and practised fire evacuation procedure
- The failure of premises integral IT systems, such as the Phone System.

4.2 Security of Trust Premises

The Trust will ensure that:

- A risk assessment is in place to assess incidences of unauthorised access, and that there is a procedure in place to address remedial actions from the unauthorised access risk assessment in a timely fashion.
• Security arrangements are in place to protect the Service Users, visitors and staff who access SSSFT Trust services and others such as contractors who have access to SSSFT Trust premises and associated grounds.
• Systems are in place to protect Service Users, Visitors and Staff personal possessions.

5. Monitoring Compliance with Procedural Documents.

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<th>Frequency</th>
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6. References

British Standards

BS 5266-1: Emergency lighting. Code of practice for the emergency lighting of premises other than cinemas and certain other specified premises used for entertainment. 1999.
BS 7671: Requirements for electrical installations. 2001.

Department of Health

Health Guidance Notes

Health Technical Memoranda
- HTM 2027 – ‘Hot and cold water supply, storage and mains services’. 1995.

Other publications
- Estatecode – Essential guidance on estates and facilities management. 2002
- Confined Spaces Regulations 1977.
- Construction, Design, Management (CDM) Regulations. Control of Substances Hazardous to Health Regulations 2002 (COSHH) as amended
- The Hazardous Waste (England and Wales) Regulations 2005
- Health Technical Memorandum (HTM) & Health Building Notes (HBN).
- Regulatory Reform (Fire Safety) Order 2005.
- Control of Asbestos at Work Regulations. 2002.
- Control of Substances Hazardous to Health (COSHH) Regulations.
- Electricity at Work Regulations. 1989.
- Health and Safety (Safety Signs and Signals) Regulations. 1996.