NHS

Joint Policy for Cumbria Partnership Foundation NHS Trust & North Cumbria University Hospital NHS Trust

HEALTH & SAFETY POLICY (JOINT)

Reference	POL/COR/003
Version	2.0
Date Ratified	22/08/2018
Next Review Date	31/08/2021
Accountable Director	Director of Finance, Strategy and Support Services (CPFT) and Director of Finance (NCUH)
Policy Author	Health Safety & Security Officer

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Cumbria Partnership NHS Foundation Trust | North Cumbria University Hospitals NHS Trust

POLICY ON A PAGE

SUMMARY & AIM

To prevent accidents, injury and work related ill-health from occurring.

The aim of the policy is to have a single integrated approach as North Cumbria University Hospitals and Cumbria Partnership NHS Foundation Trust integrate services.

TARGET AUDIENCE:

All staff and contractors working on Trust Sites.

TRAINING:

Corporate induction
Local induction
Core Skills Framework

KEY REQUIREMENTS

Managers

- Must provide a safe working environment ensuring Safe Systems of Work are safe and without risk to health.
- Provision of such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of its employees.
- All hazards should be identified and a suitable and sufficient risk assessment carried out.
- Ensure safety devices, safety equipment and protective clothing are provided where identified and that these items are used effectively.
- Ensure procedures are in place for active monitoring and review of health and safety matters.
- Ensure all incidents are recorded and investigated in accordance with Trust policy, particularly ensuring those falling within the requirements of RIDDOR 2013 are reported to the Health and Safety Executive within appropriate timescales.
- Ensure arrangements are in place to identify and share the learning from reported incidents, risk assessments and other events which may eliminate or minimise risks to staff and patient safety.

Staff
- Take reasonable care for the health and safety of themselves and of other persons who may be affected by their acts or omissions at work.
- Follow any training and /or SSOW that they have been given carrying out their work in a safe manner.
- Report all incidents on Ulysses system.

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HEALTH & SAFETY POLICY STATEMENT OF INTENT

The Trust recognises and accepts its duty towards ensuring the health, safety and welfare of all its employees and any person who uses its services and premises.

The Trust will ensure as far as is reasonably practicable that all work is carried out in the safest possible manner without undue risk to staff, patients and others. In particular will ensure it:-

- Provides safe and healthy working environments and maintains premises in a safe condition,
- Provides and maintains safe plant and equipment.
- Develops and maintains safe systems of work and provides adequate facilities for staff.
- Makes appropriate arrangements for the safe use, handling, storage and transportation of articles, equipment and substances.
- Provides information, structured training and supervision to staff as is necessary to ensure work is carried out in the safest way practicable

The Trust will ensure health and safety legislative compliance as a minimum standard, and will endeavour to achieve recognised good practice standards wherever practicable.

The Trust accepts that health and safety management must be integrated within its business strategy and all management decisions. Consequently the Trust will ensure so far as is reasonably practicable that adequate funds and other resources are made available to meet health and safety requirements.

Health and safety matters will also be considered an essential aspect in the planning, development, implementation and delivery of the Trust's services, ensuring a commitment towards a positive safety culture is reflected within all policies and procedures and to ensure their effective communication to all staff and contractors.

The Trust is committed to the continual improvement of health and safety performance across its services. It will continuously monitor and review its health and safety arrangements, and through proactive risk management strategies aims to minimise losses suffered as a consequence of work related injuries and ill health.

Signature _____   _____
                      Chief Executive   CPFT Trust Board Chair
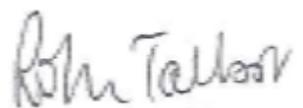
Date   22 August 2018

_____
NCUH Trust Board Chair

1.   INTRODUCTION

The Health and Safety at Work etc. Act 1974,Section 2(3) requires employers of five or more persons to prepare and keep up to date a written safety policy supported by information on the organisation and arrangements for carrying out the policy. The safety policy has to be brought to the notice of employees. The Trust has a legal obligation and a moral responsibility to ensure the health, safety and welfare of its staff, patients, contractors and visitors in its facilities and associated services.

2.   PURPOSE

The purpose of this policy is to enable the Trust to continually improve its health and safety arrangements and encourage the workforce to improve health and safety performance by challenging work practices and participating in Committees and forums to drive and enable change.

3.   ARRANGEMENTS FOR THE MANAGEMENT OF HEALTH AND SAFETY

3.1 Arrangements

3.1.1 Risk Assessment

Regulation 3 of the Management of Health and Safety at Work Regulations 1999 places a duty on employers to complete suitable and sufficient risk assessments on all significant risks within the workplace. The Trust shall complete suitable and sufficient risk assessments for all areas of its activities and the creation of local arrangements and Safe Systems of Work (SSOW) using on line Ulysses risk assessment template in accordance with its Risk Management Policy. All systems of work identified in risk assessments will be monitored on a regular basis by the relevant departmental heads and specialists (see appendix one for list of common risks in healthcare).

3.1.2 Health and Safety Training

Managers are responsible for identifying training needs required in the interests of health and safety as well as job proficiency. All staff will be trained in the use of all relevant equipment and systems of work by a responsible person. Supervision will be provided to new recruits and inexperienced employees or those undergoing training in each procedure and to the safety of any persons under 18, when employed by the Trust.

Health and safety related training will be organised via the Trust's Training Team within Workforce and Organisational Development Directorate wherever practicable in conjunction with the Trust's Safety and Security Team. The Corporate Health, Safety & Security Committee will monitor the Trust's health and safety training performance, as well as make recommendations to the Training Team regarding future training events.

3.1.3 Consultation with Employees

The Trust shall consult with Trade Union Health and Safety Representatives as recognised by the Safety Representatives Safety Committee Regulations 1977 and Employee Safety Representatives as recognised by the Health and Safety (Consultation with Employee's) Regulations 1996. The Corporate Health, Safety and Security Committee is the principle consultation forum but not exclusive of other forums. The Partnership Forum, Care Groups, support services governance groups and a variety of other means including direct consultation with line management will also be used for consultation purposes where appropriate to do so.

3.1.4 Governance of Health and Safety

The Corporate Health Safety and Security Committee (CHSSC) shall be chaired by the Director of Finance and Strategy and will include Senior Managers from the Care Groups relevant Corporate Services Support Teams and Specialist Advisors as required. The key function of the Committee is to establish and maintain standards of, health and safety and security, by developing and monitoring Trust policies and procedures and working to an annual action plan. The Committee aims to promote a culture of consultation, understanding and co-operation across the Trust to ensure the health, safety and welfare of all staff, patients and visitors. The CHSSC will report to the Trust Wide Clinical Governance Group quarterly.

Care Groups will ensure they have governance and risk management arrangements in place for the delivery of safe services and lessons learned. Issues affecting, health, safety and security which are Trust wide should be referred to the Corporate Health, Safety and Security Committee. Responsibility for monitoring performance and governance lies with the Care Groups clinical governance and Corporate Services governance groups.

In accordance with Governance arrangements, it is expected that managers of all teams / departments / wards will hold regular team meetings with staff, where health and safety and security issues are raised and discussed as a standing agenda item. The purpose of such meetings is to communicate and consult upon health and safety policies and procedures as well as enable clear lines of communication for information to pass up and down through the line management structure.

3.1.5 Significant Event/Accident/Incident Reporting

All health, safety and security incidents must be reported and reviewed in accordance with NCUH and CPFT Incident Reporting and Management Policies.

3.1.6 Safety Audits/Inspections and Monitoring

Monitoring of health and safety performance and audits/inspections of work environments will be undertaken as necessary by the Trust Health, Safety and Security Team to ensure the adequacy of any control measures used. Monitoring of health and safety audits and inspections will be undertaken by the Corporate Health Safety and Security Committee.

3.1.7 Safety Policies and Procedures

In view of the wide ranging requirements of the Health and Safety at Work Act 1974 and its subordinate legislation, the Trust will also issue individual policies and procedures as appropriate, reflecting those requirements. These polices will be developed by suitable competent persons within the organisation and will then be brought to the Corporate Health Safety and Security Committee, and other Committees/Groups as appropriate, for consultation with staff side representatives. After the consultation process is over the policy shall be subject to ratification in accordance with the Trust's Document Development policy.

Care Group Associate Directors and other senior managers are responsible for issuing, implementing and monitoring policies and procedures within their service areas. Line / Departmental Managers are responsible for issuing, implementing and monitoring policies, procedures and risk assessments within their departments. Copies of all relevant local arrangements, procedures and risk assessments will be maintained within each department and reviewed annually. Electronic Copies of local arrangements must be submitted to the H & S Department.

Health and safety policies are available on both Trust's intranet site, allowing free access to all employees and others wishing to view them.

The Trust's Health and Safety Manager will be responsible for maintaining an up to date schedule of health and safety policies and procedures. The Corporate Health Safety and Security Committee will be responsible for monitoring and reviewing polices, taking into account any statutory changes and operational practices. Services and Departments may produce polices and procedural arrangements for specific areas of health and safety management. In such circumstances, it is the responsibility of the local manager to ensure these procedures reflect the principles of Trust policies, and that all staff subject to the arrangements stated within them, are made aware of the procedural requirements.

4.   TRAINING AND SUPPORT

Attendance at training will be managed in line with the Trust's Learning and Development Policy.

5.   PROCESS FOR MONITORING COMPLIANCE

The process for monitoring compliance with the effectiveness of this policy is as follows:

Aspect being monitored	Monitoring Methodology	Reporting		
		Presented by	Committee	Frequency
Reporting arrangements for health & safety are effective	Review of Corporate Health, Safety & Security Committee Terms of Reference	Health and Safety Manager	Corporate Health, Safety & Security Committee	Annually
Reporting arrangements for health & safety are effective	Performance against Annual Work Plan	Health and Safety Manager	Corporate Health, Safety & Security Committee	At each meeting
Audit of implementation of policy undertaken by Departments	Program of departmental H & S Audit	Health and Safety Manager	Trust Policy Group	Quarterly
Quarterly Health and Safety Report	Incident and Risk management - Dashboards to be reviewed at each H & S Committee and lessons learned and recorded within minutes and subsequent actions recommended. Safety Alerts – All alerts reviewed and monitored and actions recorded.Risk Assessments, Policy development	Health and Safety Manager	Trust Wide Clinical Governance Group quarterly.	Mid Way Financial Year – October meeting
Annual Health and Safety Report	Report providing an overview of the H&S incidents, Risk Assessments, Policy development, Fire & alarm activation	Health and Safety Manager	Trust Wide Clinical Governance Group quarterly.	Annual (end of Financial Year) May meeting

Wherever the above monitoring has identified deficiencies, the following must be in place:

- Action plan
- Progress of action plan monitored by the *name of relevant committee* minutes

- Risks will be considered for inclusion in the appropriate risk registers

6.   REFERENCES

Health and Safety at Work etc. Act 1974
NICE NG
The Safety Representatives and Safety Committees Regulations 1977
The Management of Health and Safety at Work Regulations 1999
The Health and Safety (Consultation with Employees) Regulations 1996
The Corporate Manslaughter and Corporate Homicide Act 2007
Reporting of Injuries, Diseases and Dangerous Occurrences regulations (RIDDOR) 2013

7.   ASSOCIATED DOCUMENTATION

Joint Safety Policies
Fire Safety Policy

Joint Estates Policies
Pest Control Policy

NCUH Safety Policies

Asbestos Management Policy
Glove Selection Policy
Lockdown Policy
Moving and Handling of People and Inanimate Loads Policy
Radiation Safety Policy
Safe Water Policy
Security Policy
Suspect Package Policy
Risk Management Policy
Incident Management Policy including Management of Serious Incidents
Slips Trips and Falls Policy

NUCH Estates Safety Policies

Cleaning Service Policy
Disposal of Assets Policy
Medical Devices Management Policy
Medical Gas Policy
Ventilation Policy
Waste Management Policy

CPFT Safety Policies
Closed Circuit Television Policy - CCTV
Control of Substances Hazardous to Health (COSHH) Policy
Driving At Work Policy
First Aid at Work Policy
Lone Worker Policy
Preparing for a Serious Security Occurrence (Lockdown) Policy

Risk Assessment of New and Expectant Mothers at Work Policy
Risk Assessment of Young Persons at Work
Risk Management Policy and Process
Risk Management Strategy
Security Policy
Security Strategy

CPFT Estates Policies
Cleaning Policy (Apr 16-Apr 18)
Cleaning Manual (Apr 16)
Colour Coding of Cleaning Materials and Equipment Policy (May 16-May 18)
Control of Asbestos Policy (Aug 16-Sep 19)
Control and Maintenance of Fixed Installation Pressure Vessels
Control of Contractors Engaged in Construction & Engineering Works (Aug 16-Jul 19)
Electrical Safety (Fixed Installations) Policy (Oct 15-Oct 18)
Electrical Safety (PAT) Testing Policy (Aug 15-Aug 18)
Environmental & Oil Storage Policy (Feb 17-Feb 20)
Food Safety Manual - Conventional Catering (Nov 17)
Food Safety Manual - Food Regeneration (Nov 17)
Food Safety Policy (Nov 17-Nov 19)
Gas Safety Policy for Fixed Gas Installations (Oct 15-Oct 18)
Maintenance and Management of Passenger and Goods Lifts (Aug 16-Aug 19)
Maintenance and Management of Ventilation Systems Policy (Oct 16-Oct 19)
Medical Gas Cylinder Policy (Sep 16-Sep 19)
Water Safety and Control of Legionella Policy (Oct 16-Aug 19)
Waste Management Policy (Aug 16-Aug 19)

8. DUTIES (ROLES & RESPONSIBILITIES)

8.1 Chief Executive / Trust Board Responsibilities

The Chief Executive and Trust Board jointly have overall responsibility for the strategic and operational management of the Trust, including ensuring that Trust policies comply with all legal, statutory and good practice requirements.

8.2 Executive Director Responsibilities

All policies have a designated Executive Director and it is their responsibility to be involved in the development and sign off of the policies, this should ensure that Trust policies meet statutory legislation and guidance where appropriate. They must ensure the policies are kept up to date by the relevant author and approved at the appropriate committee and ensure this policy is implemented throughout their area of responsibility.

Care Group Associate Directors of Operations/Heads of Support Services will ensure this policy is implemented throughout their Care Group/Service, in particular they will:-

- Have overall responsibility for all matters of health, safety and welfare within their responsibilities or services.

- Be individually responsible for ensuring the development and implementation of health and safety arrangements within the Care Group/Service which facilitate the implementation of the Trust Health and Safety Policy in full.
- Ensure that service managers have in place health and safety procedures for dealing with the assessment of all risks, and the control and monitoring of risks.
- Ensure that job descriptions detail specific health and safety responsibilities and accountabilities and that health and safety performance is part of the formal appraisal system for staff.
- Ensure appropriate and effective risk management processes are in place within their designated areas, including ensuring all staff is made aware of the risks within their work environment and of their personal responsibilities towards managing those risks.
- Ensure arrangements are in place to allow efficient communication flow throughout the Care Group/Service and the Trust in general, including from the Corporate Health Safety and Security Committee via governance/risk management/health and safety groups as appropriate to the Care Groups and services.
- Ensure arrangements are in place to identify and share the learning from reported incidents, risk assessments and other events which may eliminate or minimise risks to staff and patient safety.
- Ensure all necessary risk assessments are carried out within their service in liaison with appropriate advisors as necessary e.g. Health and Safety, Manual Handling, Infection Control, Fire, Occupational Health.
- Provide clear lines of accountability for health and safety matters within their areas of responsibility and ensure systems are in place for the effective communication of health and safety on all levels and directions, including Union Health and Safety Representatives and non-union Representatives of Employee Safety.
- Ensure that all managers and supervisors properly interpret this policy and take action to meet their responsibilities and duties.

8.3   Health and Safety Manager

The Health and Safety Manager Reports to Head of Resilience and Urgent Care Development and is responsible for:

- The formulation, development, review and launch/dissemination of the Trust Health & Safety strategy statements and policy documents
- The co-ordination and delivery the Trust's Annual Health and Safety Action Plan, ensuring that the standards are being met, and any gaps are proactively managed to ensure staff and patient safety
- The promotion, development, co-ordination and monitoring of the health and safety culture and performance of the Trust - providing bi-monthly reports to the Health and Safety Committee, 6 monthly reports to the Governance Committee and an Annual Report to the Trust Board
- The provision of professional advice, guidance and information throughout the Trust on health and safety matters
- The establishment and implementation of a health and safety management system and performance measures, reporting the measurement outcomes to the Trust Board

- Trend analysis and advice to the Trust Board on corporate health and safety priorities
- The provision of support and advice to managers and staff dealing with RIDDOR reportable incidents and security incidents. Initiate and co-ordinate the investigation and follow up
- The reporting of RIDDOR incidents to the Health and Safety Executive
- The provision of specialist advice for the planning/commissioning of new builds and /or alterations to existing buildings
- The provision of health & safety and security advice on incidents and investigations particularly with regard to violence and aggression, respect and health and safety incidents linking in with the external agencies such as the Police, Crown Prosecution Service, Health and Safety Executive and Medicines and Healthcare Products Regulatory Authority

8.4   Managers Responsibilities

- Ensure all staff are made aware of the hazards and associated risks and the controls used to manage the risk within their work environment, through regular discussion of health and safety issues and risk assessments with staff
- Ensure staff receive appropriate information, instruction and training in Departmental safe systems of work, to enable them to work safely. Managers should be aware that people for whom English is not first language may require additional support in being able to understand written safety rules / procedures and make necessary arrangements for this support to be offered.
- Implement and monitor any identified risk management control measures within their designated areas of scope and responsibility. In situations where significant risks have been identified and where local control measures are considered to be potentially inadequate, these risks should be brought to the attention of the appropriate Director or Clinical Governance Group.
- Act as the nominated health and safety contact for the area in question and ensure a planned approach to risk assessment so that priorities can be determined and reviewed for the implementation of preventative measures
- Ensure procedures are in place for active monitoring and review of health and safety matters
- Ensure that the work of external contractors does not adversely affect the objectives of this policy and that their activities do not place their own employees, or other people, at risk on Trust premises.
- Ensure all incidents are recorded and investigated in accordance with Trust policy, particularly ensuring those falling within the requirements of Reporting of Injuries, Diseases and Dangerous Occurrences regulations (RIDDOR) 2013 are reported to the Health and Safety Executive within appropriate timescales.
- Set an example and actively encourage the cooperation of all employees to promote health and safety.
- Ensure safety devices, safety equipment and protective clothing are provided where identified and that these items are used effectively.
- In accordance with the Service Delivery Health and Safety Risk Assessment Policy ensure risk assessments are completed on the electronic risk assessment system and reviewed regularly and any appropriate remedial actions are put in place or given a prioritised timescale for completion as soon as is reasonably

8.5   Staff Responsibilities

- Contribute positively to their own health and safety and that of others, and cooperate with the trust so as to enable it to carry out its responsibilities successfully
- Use equipment or clothing provided in the interests of health and safety in a proper manner and for the purpose intended
- Work in accordance with any health and safety procedures, instruction or training that has been given, and not undertake any task for which they have not been authorised or for which they are not adequately trained.
- Bring to the attention of a responsible person any perceived shortcoming in Trust safety arrangements or any defects in work equipment.

8.6   The Trust's Health Safety & Security Team Responsibilities

- Assist in the provision of advice to Trust managers and their staff to ensure statutory obligations are met
- Assist in proactively monitoring service and departmental performance on health and safety matters (without detracting from the primary responsibility of Directors and line managers for ensuring health and safety within their departments), including conducting audits and inspections.
- Investigate significant events or accidents in conjunction with appropriate manager and advise on remedial action where appropriate
- Assist in ensuring as far as practicable that safety legislation is being followed and that statutory registers and notices applicable to Health Services are being maintained
- Assist in identifying training needs and cooperate in the arrangements for health and safety training in line with the Trust's Learning and Development Policy
- Assist in the planning of Trust-wide strategy and policy setting, and assist in the implementation and monitoring process
- Assist in the design and participate in the delivery of health and safety training to all levels of Trust staff, as appropriate.
- Assist in advice on Health and Safety and Security aspects of new and proposed developments.

8.7   Corporate Health and Safety Committee Responsibilities

The Chair of the approving committee will ensure the policy approval is documented in the final section of the Checklist for Policy Changes. The committee will agree the approval of the final draft of the policy.

9.   ABBREVIATIONS / DEFINITION OF TERMS USED

ABBREVIATION	DEFINITION
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
SSOW	Safe System of Work

TERM USED	DEFINITION
Health and Safety Risk Assessment	Health and Safety Risk Assessment is a structured process of planning or reviewing procedures/activities to identify the hazards and the risks to the health and safety for any person arising out of, or in connection with, work or the conduct of their undertaking. It should identify how the risks arise and how they impact on those affected. This information is needed to make decisions on how they manage these risks so that the decisions are made in an informed, rational and structured manner, the action is proportionate, and in compliance with the law.
Hazard	A hazard is something with the potential to cause harm (this can include articles, substances, plant or machines, methods of work, the working environment and other aspects of work organisation).
Risk	A risk is the likelihood of potential harm from that hazard being realised. The extent of the risk will depend on: The likelihood of that harm occurring; • The potential severity of that harm, i.e. of any resultant injury or adverse health effect; and • The population which might be affected by the hazard, i.e. the number of people who might be exposed.

APPENDIX 1 RISK ASSESSMENT ISSUES IN HEALTHCARE

The Trust recognises that the following health and safety issues have significant impact for those who work within and for those who are cared for by the organisation

• The moving and handling of persons and inanimate objects*
• Ergonomic issues arising from working with computers
• The management of violence and aggression in the workplace*

- Lone Working
- Security of physical assets*
- Lockdown*
- Slip, trips and falls*
- Falls when working at a height
- Stress*
- Patient suicide/homicide/self-harm
- Absence without leave of vulnerable people
- Contact with hot surfaces and liquids
- Legionella*
- Control of substances hazardous to health – Chemical & Biological
Includes blood borne viruses and use of sharps with safety devices
- Asbestos
- Fire*
- First Aid
- Correct and competent use Medical Devices*
- Electricity and electrical equipment
- Work in Confined Spaces
- Waste*
- Incidents leading to a RIDDOR Report*
- Stored/compressed Gases
- Noise/Vibration
- Stored fuels/flammable liquids
- Ionising Radiation*
- Non-Ionising Radiation
- Housekeeping including lighting, storage
- Latex
- Work Equipment (includes medical devices)
- Workplace Transport
* Specific policy

DOCUMENT CONTROL

Equality Impact Assessment Date	20/08/2018
Sub-Committee & Approval Date	Health and Safety Committee – via email – 20/08/2018

History of previous published versions of this document:

Trust	Version	Ratified Date	Review Date	Date Published	Disposal Date
CPFT – Health and Safety Policy / Procedure POL/002/019	POL/002/019	27/10/2015	31/10/2018		
NCUH – Health & Safety Policy H&S04	3.0	28/03/2014	30/04/2017	16/04/2014	30/04/2024

Statement of changes made from previous version – new joint policy

Version	Date	Section & Description of change
0.1		• References to new structure of Care Groups and Governance Committees. • NB Governance Committees have not been finalised and this section may require update in September/October
		• Minor change to appendix 1 removal of double asterix Procedures
		• 3.1.3 added Corporate Support Services • 3.1.4 change Clinical Divisions to Care Groups • 5 monitoring matrix changed frequency of TOR to annual • 5 monitoring Matrix expanded description of Audit • 5 expanded detail of compliance section • Added Estates safety policies in associated documentation
2	28/9/18	• Correction to Definition of RIDDOR on page 14 as did not include I for Injuries

List of Stakeholders who have reviewed the document

Name	Job Title	Date
Diane Teasdale	Head of Strategic Planning & Risk, Risk Management	12 July 2018
Joint H&S distribution 19 July.docx Appendix 1		19 July 2018
Stakeholders Distribution.docx Appendix 2		13 August 2018

Appendix 1

Joint H & S Committee Circulation List policy sent for comment 19 July
Adams Andrew (RNL) North Cumbria University Hospitals <Andrew.Adams@ncuh.nhs.uk>; Anderson Lynn (RNL) North Cumbria University Hospitals <Lynn.Anderson@ncuh.nhs.uk>; Anderson Neil (RNL) North Cumbria University Hospitals <Neil.Anderson@ncuh.nhs.uk>; Andrews Robin (RNL) North Cumbria University Hospitals <Robin.Andrews@ncuh.nhs.uk>; Ashcroft Amanda (RNL) North Cumbria University Hospitals <Amanda.Ashcroft@ncuh.nhs.uk>; Beecher Donna (RNL) North Cumbria University Hospitals <Donna.Beecher@ncuh.nhs.uk>; Bridson-Nelson Nikki (RNN) Cumbria Partnership NHS FT <Nikki.Bridson-Nelson@cumbria.nhs.uk>; Collins Philip (RNL) North Cumbria University Hospitals <Philip.Collins@ncuh.nhs.uk>; Davies Michelle (RNN) Cumbria Partnership NHS FT <Michelle.Davies@cumbria.nhs.uk>; Donaldson Grant (RNN) Cumbria Partnership NHS FT <Grant.Donaldson@cumbria.nhs.uk>; Dougan Steve (RNL) North Cumbria University Hospitals <Steve.Dougan@ncuh.nhs.uk>; Edwards Jayne (RNL) North Cumbria University Hospitals <Jayne.Edwards1@ncuh.nhs.uk>; Edwards Karen (RNN) Cumbria Partnership NHS FT <Karen.Edwards@cumbria.nhs.uk>; Glover David (RNL) North Cumbria University Hospitals <David.Glover@ncuh.nhs.uk>; Gordon Morrison (gordon.morrison@imagilegroup.com); Graham Clive (RNL) North Cumbria University Hospitals <Clive.Graham@ncuh.nhs.uk>; Gulston Helen (RNL) North Cumbria University Hospitals <Helen.Gulston@ncuh.nhs.uk>; Heaton Richard (RNL) North Cumbria University Hospitals <Richard.Heaton@ncuh.nhs.uk>; Hill Jean (RNL) North Cumbria University Hospitals <Jean.Hill@ncuh.nhs.uk>; Hoyles Emma (RNN) Cumbria Partnership NHS FT <Emma.Hoyles@cumbria.nhs.uk>; Irving Paula (RNL) North Cumbria University Hospitals <Paula.Irving@ncuh.nhs.uk>; Jenner Sharon (RNL) North Cumbria University Hospitals <Sharon.Jenner@ncuh.nhs.uk>; Jones Gillian (RNN) Cumbria Partnership NHS FT <Gillian.Jones@cumbria.nhs.uk>; Kelly Joanne (RNL) North Cumbria University Hospitals <Joanne.Kelly@ncuh.nhs.uk>; Kennon Rachael (RNL) North Cumbria University Hospitals <Rachael.Kennon@ncuh.nhs.uk>; Klein Elizabeth (RNL) North Cumbria University Hospitals <Elizabeth.Klein@ncuh.nhs.uk>; Law Russell (RNN) Cumbria Partnership NHS FT <Russell.Law@cumbria.nhs.uk>; Maley Mike <Mike.Maley@interservefm.com>; Mitchell John (RNL) North Cumbria University Hospitals <John.Mitchell@ncuh.nhs.uk>; Moore Claire (RNL) North Cumbria University Hospitals <Claire.Moore@ncuh.nhs.uk>; Mounsey Jacquie (RNL) North Cumbria University Hospitals <Jacquie.Mounsey@ncuh.nhs.uk>; O'Reilly Nicola (RNL) North Cumbria University Hospitals <Nicola.O'Reilly@ncuh.nhs.uk>; Pape Richard (RNN) Cumbria Partnership NHS FT <Richard.Pape@cumbria.nhs.uk>; Park Emma (RNN) Cumbria Partnership NHS FT <Emma.Park@cumbria.nhs.uk>; Ray Helen (RNL) North Cumbria University Hospitals <Helen.Ray@ncuh.nhs.uk>; Rigby Jackie (RNN) Cumbria Partnership NHS FT <Jackie.Rigby@cumbria.nhs.uk>; Shepherd Alan (RNN) Cumbria Partnership NHS FT <Alan.Shepherd@cumbria.nhs.uk>; Smillie Michael (RNN) Cumbria Partnership NHS FT <Michael.Smillie@cumbria.nhs.uk>; Speight Pauline (RNL) North Cumbria University Hospitals <Pauline.Speight@ncuh.nhs.uk>; Pearson Steve <steve.pearson@interservefm.com>; Thompson Julie (RNN) Cumbria Partnership NHS FT <Julie.Thompson@cumbria.nhs.uk>; Tomlinson Andrea (RNL) North Cumbria University Hospitals <Andrea.Tomlinson@ncuh.nhs.uk>; Tryhorn Emma (RNL) North Cumbria University Hospitals <Emma.Tryhorn@ncuh.nhs.uk>; Waddington David (RNN) Cumbria Partnership NHS FT <David.Waddington@cumbria.nhs.uk>; Watson Stephanie (RNN) Cumbria Partnership NHS FT <Stephanie.Watson@cumbria.nhs.uk>; Weatherill

Jane (RNN) Cumbria Partnership NHS FT <Jane.Weatherill@cumbria.nhs.uk>; Wharton Jan (RNL) North Cumbria University Hospitals <Jan.Wharton@ncuh.nhs.uk>; Winter Ashley (RNL) North Cumbria University Hospitals <Ashley.

Appendix 2

H & S Policy was circulated to the following shareholders 13th August asking for a read receipt
Scheffer Daniel (RNN) Cumbria Partnership NHS FT (Daniel.Scheffer@cumbria.nhs.uk);
Teasdale Diane (RNN) Cumbria Partnership NHS FT Diane.Teasdale@cumbria.nhs.uk>;
Brown Alison (RNN) Cumbria Partnership NHS FT <Alison.Brown@cumbria.nhs.uk>;
Barton Jemma (RNN) Cumbria Partnership NHS FT <Jemma.Barton@cumbria.nhs.uk>;
Bridson-Nelson Nikki (RNN) Cumbria Partnership NHS FT <Nikki.Bridson-Nelson@cumbria.nhs.uk>; Moore Lyn (RNN) Cumbria Partnership NHS FT <Lyn.Moore@cumbria.nhs.uk>; Evans Caroline (RNN) Cumbria Partnership NHS FT <Caroline.Evans@cumbria.nhs.uk>; Travers Pam (RNN) Cumbria Partnership NHS FT <Pam.Travers@cumbria.nhs.uk>; Hill Nina (RNN) Cumbria Partnership NHS FT <Nina.Hill@cumbria.nhs.uk>; Pilcher Salli (RNN) Cumbria Partnership NHS FT <Salli.Pilcher@cumbria.nhs.uk>; Worton Karen (RNN) Cumbria Partnership NHS FT <Karen.Worton@cumbria.nhs.uk>; Prince Stephen (RNN) Cumbria Partnership NHS FT <Stephen.Prince@cumbria.nhs.uk>; !Acute.Business.Unit.Deputy.Directors <!Acute.Business.Unit.Deputy.Directors3@ncumbria.nhs.uk>; !Acute.Business.Manager <!Acute.Business.Manager@ncumbria.nhs.uk>; !Acute.Governance.Facilitators <!Acute.Governance.Facilitators@ncumbria.nhs.uk>; !Acute.Matrons <!Acute.Matrons@ncumbria.nhs.uk>; Barnes Kathy (RNL) North Cumbria University Hospitals Kathy.Barnes@ncuh.nhs.uk
Copied into
Wilson Hannah (RNL) North Cumbria University Hospitals <Hannah.Wilson1@ncuh.nhs.uk>; Wharton Jan (RNL) North Cumbria University Hospitals <Jan.Wharton@ncuh.nhs.uk>; Donaldson Grant (RNN) Cumbria Partnership NHS FT (Grant.Donaldson@cumbria.nhs.uk); Collins Philip (RNL) North Cumbria University Hospitals <Philip.Collins@ncuh.nhs.uk>; Lucetti Nadia (RNL) North Cumbria University Hospitals Nadia.Lucetti@ncuh.nhs.uk