UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
24 JANUARY 2019

Title:	**APPROVAL OF POLICIES**
Responsible Director:	David Burbridge
Contact:	Berit Reglar, Deputy Foundation Secretary, Ext 14324

Purpose:	The following policies have been reviewed by all relevant stakeholders and the Policy Review Group and are submitted for approval: • Emergency Preparedness Policy • Health and Safety Policy
Confidentiality Level & Reason:	None
Annual Plan Ref:	None
Key Issues Summary:	The Policy on Controlled Documents states that all policies are reviewed, as a minimum, every three years. The policies below have been reviewed in accordance with this. **Emergency Preparedness Policy:** The main purpose of this policy is to set out the Trust's strategic framework for the management of emergency preparedness and maintenance of business continuity. **Health and Safety Policy:** The main purpose of the policy is to detail the framework and responsibilities for the safeguarding of health, safety and welfare of individuals across the Trust.
Recommendations:	The Board is asked to consider, and if thought fit, approve the following: 1. Emergency Preparedness Policy 2. Health and Safety Policy
Signed: David Burbridge	**Date:** 24 January 2019

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

BOARD OF DIRECTORS

THURSDAY 24 JANUARY 2019

APPROVAL OF EMERGENCY PREPAREDNESS POLICY and HEALTH AND SAFETY POLICY

PRESENTED BY THE DIRECTOR OF CORPORATE AFFAIRS

1. **Emergency Preparedness Policy**

   1.1. The updated and aligned Emergency Preparedness Policy has undertaken a full stakeholder consultation review (inclusive of QEHB and HGS Divisions) as part of the three-yearly mandated review of Controlled Documents.

   1.2. This policy sets out the framework for the assurance that the Trust is compliant with the legal requirements as regards to the planning, monitoring and implementation of its plans in the event of an emergency.

   1.3. This policy categorises emergency events into two main work streams, which the Trust expects to be managed separately through emergency plans, in order to effectively deliver an emergency response should it be required:

       - Major Incident Planning; and

       - Business Continuity Planning

   1.4. The Scope section has been reviewed and amended to expressly include the Trust's community services.

   1.5. The Ramp Plan has been added to the suite of emergency plans which are prepared and submitted to the Emergency Preparedness Steering Groups for approval.

   1.6. Under the Duties section, the Chief Operating Officers' responsibilities now expressly include the provision of assurance that all departments across the Trust have Business Continuity Plans in place; the duties pertaining to the development and maintenance of an Information Technology disaster recovery plans is now under the remit of the Director of Information Technology.

   1.7. The implementation standards were reviewed and amended to include a brief description of emergency planning preparation, training and response arrangements in place by the Trust in order to meet this policy's objectives.

1.8. The Monitoring Matrix now includes an audit of all Business Continuity Plans, which will be reported to the Strategic Emergency Preparedness Group.

2. Health and Safety Policy

2.1. This updated and aligned policy is aimed at ensuring that the Trust has adequate arrangements in place in regards to three key health and safety areas:

- Adequate implementation of health and safety statutory requirements,

- Effective inter-organisational collaboration in shared premises; and

- Dissemination of a culture that promotes health and safety best practice in all sites

2.2. The definitions table has been reviewed and amended to include the term Young Workers; Charge Nurse have also been added to the definition of Nominated Manager.

2.3. In the Duties section, the Divisional Directors of Operations section now reads Board Directors and Directors of Operations.

2.4. A diagram has been included to demonstrate the reporting hierarchy of Health and Safety Groups and ad-hoc Sub-Groups, which report to the Trust's Health Safety and Environment Committee.

2.5. The Monitoring Matrix of this policy has been amended to clarify that the risk documentation will be reported by the Health and Safety Team on a rolling programme of audits of the Trust's ward/ areas in a three year cycle.

3. Recommendation

The Board of Directors is asked to consider, and if thought fit, approve the following policies:

3.1. Emergency Preparedness Policy.
3.2. Health and Safety Policy

David Burbridge

Director of Corporate Affairs

24 January 2019