

Policy for the Prevention of Slips, Trips and Falls to Staff and Others

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Version control

Version	Type of Change	Date	Revisions from previous issues
V. 4	Review	August 2015	<ul style="list-style-type: none"> Minor amendments to descriptors in line with current risk grading matrix.

Equality Impact

Bolton NHS Foundation Trust strives to ensure equality of opportunity for all service users, local people and the workforce. As an employer and a provider of healthcare Bolton NHS FT aims to ensure that none are placed at a disadvantage as a result of its policies and procedures. This document has therefore been equality impact assessed to ensure fairness and consistency for all those covered by it regardless of their individuality. The results are shown in the Equality Impact Assessment (EIA).

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1. INTRODUCTION

Slips and trips resulting in falls are preventable, however they are the most common cause of major injuries in all workplaces in the UK and the second biggest cause of over 3 day injuries.

The purpose of this policy is to define the measures by which the Trust will comply with its duty under the Workplace (Health, Safety and Welfare) Regulations 1992 and the Management of Health & Safety at Work Regulations 1999, to assess workplace risks including those presented by slip, trip and fall hazards.

It will set out specific staff responsibilities in identifying, evaluating, mitigating, recording and monitoring risks consistently across the Trust.

2. SCOPE

This Policy applies to all Trust employees, visitors, contractors and others using the Trust's facilities and entering Trust property. This Policy does not relate to patient falls. For patient related falls please refer to the "Falls Prevention Policy".

3. DEFINITIONS

The Health and Safety Executive provide the following definitions:

Slip: To slide accidentally causing the person to lose their balance. This is either corrected or causes the person to fall.

Trip: To stumble accidentally, often over an obstacle causing the person to lose their balance. This is either corrected or causes the person to fall.

Fall: An event which results in the person or a body part of the person coming to rest inadvertently on the ground or other surface lower than the person, whether or not an injury is sustained.

4. RESPONSIBILITIES/DUTIES

4.1 The Chief Executive

Will ensure the implementation of this policy and associated policies to ensure a safe working environment with relevant, and reasonably practicable control measures to minimize the risk of slips, trips and falls.

4.2 Director of Corporate Services

Is responsible for health and safety and risk management.

4.3 Divisional/Directorate Managers will ensure:

- Compliance with this policy within their area of authority.
- Suitable and sufficient risk assessment, specifically relating to slips, trips and falls, are included within their risk assessment process.
- Adequate arrangements are in place to prevent slips, trips and falls.

4.4 Ward/Departmental Managers will ensure:

Adequate arrangements are in place in their areas, to prevent slips, trips and falls to staff and others.

Identification of slips trips and fall hazards (including falls from height) and carry out RAs (Risk Assessments) in conjunction with staff and/or staff representatives and introduce reasonably practicable measures to reduce the risks to the lowest reasonably practicable level.

4.5 Estates and Facilities Managers will ensure:

- Current good practice, in line with HTM 61, is followed when introducing new or refurbished floor surfaces.
- Risk assessments in their area of responsibility relating to slips, trips and falls (including falls from height) are carried out and reasonably practicable control measures implemented where necessary.
- Activities of contractors are monitored to minimize the risk of slip, trips and falls.
- Gritting of pathways, roads and car parks in line with the Winter Gritting Policy, during winter months ensure grounds, both internally and externally, are maintained to reduce the risk of slip, trip and falls.
- Adequate lighting, both internally and externally, is maintained throughout the site.

4.6 Health & Safety Committee will:

Will lead on the dissemination and implementation on this policy.

Will monitor and review accident trends relating to the falls of staff and others within the hospital grounds.

4.7 All Employees

Under the Health & Safety at Work Act 1974 every employee has a duty of care to themselves and others (colleagues, visitors, relatives, patients, contractors).

Employees are responsible for their own actions and for ensuring they don't put themselves or anyone else in danger and will

- Will carry out their duties in such a manner as to prevent or minimize the risk of slips and trips.
- Will report any slip or trip hazards they are aware of to their line manager.
- Clean up any spillage they are responsible for creating or ensure that the area is made as safe as possible e.g place warning sign and report the spillage to the relevant cleaning team (ward domestic/ISS Mediclean)
- Report slips, trips or falls in accordance with the Trust's accident/incident reporting policy.
- Must wear suitable footwear for the environment in line with the Trust's Uniform Policy.

5. PREVENTION

The main causes of slips and trips accidents in healthcare are:

- Slippery/wet surfaces- caused by water, other fluids.
- Slippery surfaces caused by dry or dusty floor contamination e.g. talcum powder
- Obstructions, both temporary and permanent
- Uneven surfaces and changes of level
- Poor lighting
- Human factors, such as employees rushing, running or carrying cumbersome items
- Wearing unsuitable footwear

5.1 Slips

5.1.1 Liquid spillages on a ward/department

Place a wet floor sign in the location to warn staff and others. Clean the spillage if you are responsible for creating it. Otherwise notify the domestic immediately and ensure the spillage is cleaned up as soon as possible to reduce the likelihood that someone will slip and injure themselves. If a domestic is not on duty ensure that the spillage is cleaned up by a member of the ward/department team.

Take into account infection control measures if necessary.

Additional care should be taken if the liquid is unidentified.

Remove the wet floor sign as soon as the floor is dry.

Some wards/departments may have inherent slip hazards, e.g Birthing Pool, kitchens. Activities in such areas must be risk assessed with the implementation of reasonably practicable control measures to reduce the risk of slips to the lowest practicable level.

5.1.2 Liquid spillages on a public corridor (includes wet floors due to wet weather)

Any staff noticing a spillage or wet floor will place a wet floor sign in the location if one is readily available nearby.

Ring Domestic Services **Bleep 4886** immediately and notify them of the location and requesting it is cleaned and made safe.

5.1.3 Cleaning/Mopping Activities

During the cleaning/mopping of hard floor areas, wet floor warning signs will be placed in the area. Staff and public must take extra care when moving through these areas.

Staff should challenge the domestic if warning signs are not in place.

Remove the wet floor sign as soon as the floor is dry.

5.1.4 Footwear

Staff will adhere to the Trust's uniform policy in respect of wearing suitable, approved footwear for the environment.

5.2 Trips

5.2.1 Managers and all staff will ensure that their workplace and work area is kept free from tripping hazards including:

- trailing cables/extension leads
- equipment
- boxes
- patient records
- personal property
- tools
- waste

5.2.2 Uneven or Damaged Floor Surfaces

Immediately report any uneven or damaged floor surface to the Estates Helpline on extension 5995. Inform your line manager.

5.3 Falls (including from height)

Falls from height remain the single biggest cause of workplace deaths and one of the main causes of major injury.

A place is "at height" if a person could be injured falling from it , even it is at or below ground level. This includes working from a:

- step ladder/ladder
- stool/kick stool
- platform/scaffolding
- roof

5.3.1 Hierarchy of Controls

1. Eliminate the need to work at height where possible.
2. Select the correct access/work equipment, harness
3. Minimise the consequences of falling e.g falls arrest equipment.

5.3.2 Managers must ensure:

No work "at height" is carried out if it is safe and reasonably practicable to do it other than at "at height"

5.3.3 Work is properly planned, appropriately supervised and carried out in as safe a way as is reasonably practicable.

5.3.4 Access equipment selected is fit for purpose and inspected.

5.3.5 Carry out and take into account risk assessments for the proposed work at height.

5.3.6 Those involved in working at height are trained and competent.

6. WORKING FROM LADDERS/STEP LADDERS

General Guidance

Ladders/step ladders should only be used for work of:

- Short duration
- Light duty
- Low risk

In all circumstances:

- Check the ladder/step ladder for defects prior to each use. All ladders/step ladders should have an inspection tag.
- Do not work off the top 3 rungs of a ladder or the top 2 rungs of a step ladder.
- Always have 3 points of contact on the ladder/step ladder
- Knees should not extend beyond the top step of a step ladder
- Ensure the ladder is
 - on level, clear ground
 - against a solid, secure surface i.e not plastic guttering
 - at an angle ratio of 4:1
 - secure at the base by tying, footing or staking. Where available someone should foot the ladder

7. RISK ASSESSMENT

The general principles for the completion of suitable and sufficient workplace risk assessments are:

- | | |
|--------|---|
| Step 1 | Identify the hazards |
| Step 2 | Identify who might be harmed and how |
| Step 3 | Evaluate the risk and decide on precautions |
| Step 4 | Record your findings and implement them |
| Step 5 | Review your risk assessment and update if necessary |

Step 1 **WHERE ARE THE SLIP, TRIP and FALL HAZARDS IN YOUR AREA?**

Ward/Departmental Managers will, with the cooperation and assistance of staff, examine their work area and activities and identify likely areas or practices where liquid spillages may reasonably be expected to occur, e.g. kitchens, corridors, bedsides, sink areas, which could cause a person to slip, conditions which could cause a person to trip and where a fall from height may occur e.g. from a platform, step ladder, ladder.

Step 2 Decide who may be harmed or injured and how e.g. staff, others.

Step 3 With the assistance of staff, evaluate the risk using the risk grading matrix on the Intranet homepage as guidance. Implement any recommended control measures

- Step 4 Record the risk assessment form at Appendix 1 (generic assessment but record any risks peculiar to your area)
- Step 5 Review the assessment:
 If significant changes occur
 After accidents/incidents
 If new equipment introduced
 If new procedures introduced
 At least annually

If any high and/or extreme risks are identified, the ward/department manager must seek to identify and introduce measures which will reduce the risk to the lowest reasonably practicable level.

8. RAISING AWARENESS and Training

Awareness of slip, trip and fall hazards are raised during:

8.1 Corporate Induction

Information regarding the causes and prevention of slips, trips and falls is given to all new employees during Corporate Induction, including examples of slip and trip hazards and recommendations on avoiding accidents.

8.2 Management Training

IOSH Managing Safely course is available to all managers. Course content includes the principles and process of risk assessments.

8.3 Accident Reports

Daily accident/incident report is e mailed to senior managers.

Statistical data of staff accidents, including slip, trip and falls, are presented to and discussed by the Premises Assurance Model Health & Safety and RIDDOR Committee.

8.4 Information on Hospital Intranet

Periodic posting of information in regard to slip, trip and falls prevention on the hospital's intranet.

9. REPORTING ACCIDENTS

All accidents and incidents, including slips, trips and falls must be reported using the Trust's Incident reporting system (Safeguard). See **Accidents & Incidents Reporting Policy**. Ward/departmental managers must identify record and implement actions which will effectively reduce the probability of reoccurrence.

10. MONITORING

Area to be monitored	methodology	Who	Reported to	Frequency

All wards/departments have copy of generic risk assessment	Audit	Fire and Health & Safety Department	Managers. Divisional DDOs PAM Committee	Monthly dept. audits
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12. REFERENCES

The Health & Safety at Work Act 1974
 The Management of Health & Safety at Work Regulations 1999
 The Workplace (Health Safety and Welfare) Regulations 1992
 The Work at Height Regulations 2005
 The General Safety & Risk Management Policy
 The Risk Assessment Protocol
 The Winter Gritting Policy
 Accident and Incident Reporting Policy

GENERIC SLIPS TRIPS AND FALLS RISK ASSESSMENT

Appendix 1

(Staff and others)

The completed assessment should be retained on the ward/dept

REVIEW THIS RISK ASSESSMENT AFTER 12 MONTHS OR WHEN SIGNIFICANT CHANGES OCCUR OR IMMEDIATELY AFTER ANY INCIDENT

Ward/Dept.	(insert ward/dept)
Assessed By	Eric Porter
Job Title	Health & Safety Advisor
Date of Assessment	20 th July 2010

Description of the task under assessment GENERIC SLIPS, TRIPS AND FALLS RISKS WARD/DEPARTMENT AND MAIN STREET/CORRIDOR AREAS. ADD ANY SPECIFIC RISKS APPLICABLE IN YOUR WORK AREA

REVIEW DATE July 11
SIGNED E Porter

REVIEW DATE July 12
SIGNED E Porter

REVIEW DATE July 2013
SIGNED E Porter

REVIEW DATE July 2014
SIGNED E Porter

REVIEW DATE July 2015
SIGNED E Porter

Hazard Identified	Persons at Risk	How they might be harmed	Existing Controls/Precautions	Likelihood	Severity	Risk Rating
SLIPS Water/liquid spillages in: Ward/dept kitchen Ward/dept corridors Ward/dept bays/bedside	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Staff awareness to take care when handling water. Clean up spillage immediately, Domestic or self if responsible. Place "wet floor" warning sign. (removed when floor is dry) Staff wear appropriate footwear for the area. Contact ISS Facilities 4886	2	3	6 Moderate
Body fluids in ward/dept	Staff	Fall injuries	Clean up spillage immediately,	2	3	6 Moderate

areas.	Visitors Others	e.g fractures, bruising, sprains	Domestic or ward/dept staff. Place “wet floor” warning sign. (removed when floor is dry) Staff wear appropriate footwear for the area. Take Infection Control measures.			
Talcum Powder. In-patients who use talcum powder can leave excess on the floor.	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Staff awareness of in-patients using talcum powder. Clean up spillage immediately, Domestic or ward/dept staff. Staff wear appropriate footwear.	2	3	6 Moderate
Food spillages at meal times	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Staff awareness during meal times. Clean up spillage immediately, domestic or ward/dept staff.	2	3	6 Moderate
Wet floors on hospital corridors as a result of wet weather.	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Staff contact ISS Facilities on noting wet hospital corridors. (ext 4886) ISS Facilities response. Area mopped, “wet floor” warning signage (removed when floor is dry). Leave walk way for pedestrians.	2	3	6 Moderate
Mopping/Cleaning hard floor areas	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	“Wet Floor” warning signage placed. Verbal warning given to anyone approaching.	1	3	3 Low
Slip during winter conditions (e.g. ice)	Staff Visitors Others	Fractures, sprains	Winter Gritting Policy Staff warning e mails	2	3	6 Moderate
TRIPS Trips over: Personal belongings Equipment Tools Boxes	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Ward/Dept Managers maintain high standards of housekeeping. Staff report unsafe conditions to Line Manager.	2	3	6 Moderate

Medical Records stored at floor level. Trailing cables Furniture Loose matting/carpet Uneven/damaged flooring			Staff maintain a safe work station. Avoid storing items at floor level which obstruct a walkway			
Carrying items which obstruct view ahead.	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Manual Handling training given.	2	3	6 Moderate
Poor lighting	Staff Visitors Others	Fall injuries e.g fractures, bruising, sprains	Estates maintain good lighting	2	3	6 Moderate
FALLS FROM HEIGHT Falls from: Ladders Access Platforms Step Ladders Roof Step Stool	Staff Contractors	Serious injury. fractures	Training Ladder inspection Roof edge protection Fall arrest devices where appropriate Permit to Work	1	4	4 Moderate

Risk Rating = Likelihood x Severity

Likelihood

1. Rare
2. Unlikely
3. Possible
4. Likely
5. Almost Certain

Severity

1. Insignificant
2. Minor
3. Moderate
4. Major
5. Catastrophic

Risk Rating

- | | |
|---------|----------|
| 1 – 3 | Low |
| 4 – 6 | Moderate |
| 8 – 12 | High |
| 15 – 25 | Extreme |

For guidance refer to the ‘Risk Grading Matrix’ on the Intranet Home page.

Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/no	Comments
1.	Does the document/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (including gypsies/travellers)	No	
	• Nationality	No	
	• Gender (including gender reassignment)	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation	No	
	• Age	No	
	• Disability (learning, physical, sensory impairment, mental health)	No	
2.	• Is there any evidence that some groups are affected differently	No	
3.	• If you have identified potential discrimination are there any valid exceptions, legal and/or justifiable?		
4.	• Is the impact of the document/guidance likely to be negative?	No	
5.	• If so, can the impact be avoided?		
6.	• What alternative is there to achieving the document, guidance without the impact?		
7.	• Can we reduce the impact by taking different action?		

If you have identified a potential discriminatory impact of this procedural document, please refer it to the Equality and Diversity Co-Ordinator together with any suggestions as to the action required to avoid/reduce this impact.

Appendix 3

Document Control Tracking

To be completed and attached to documents submitted for consideration and approval. After ratification to be included within appendices

Document Title:				
Prevention of Slips, Trips and Falls to Staff and Others Policy				
Author:				
Eric Porter (Fire and Health & Safety Officer)				
New/revised:				
Revised. Minor changes: <ul style="list-style-type: none"> Revised risk descriptors in line with current risk grading matrix. 				
Summary:				
This document describes the Trust policy for the prevention of slips trips and falls to its staff and others such as visitors/members of the public. It includes provision of a generic risk assessment applicable for all wards/departments.				
Staff/Stakeholders Consulted:				
Minor revision to previous version.				
Section below to be completed by ratifying committee				
Ratifying Committee:				
Executives Directors' Meeting				
Date presented for Ratification:				
5 th November 2015				
Outcome:				
Ratified	✓	Ratified subject to minor amendments		Not ratified
Comments:				