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University Health Board

IMS-02-02-CAV: H&S Management System Overview



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IMS-02-02-CAV: H&S MANAGEMENT SYSTEM OVERVIEW

Introduction and Aim

This procedure describes how the Health and Safety Management System (HSMS) is implemented, maintained, and reviewed to ensure the safe and effective control of organisational activities.

The aim of this procedure is to set out the arrangements for managing health and safety risks across the Health Board in a consistent and systematic manner, supporting compliance with relevant health and safety legislation, NHS requirements, and recognised best practice.

Objectives

The objectives of this procedure are to:

- Describe how the Health and Safety Management System is applied across the UHB
- Define responsibilities for implementing, maintaining, and reviewing the HSMS
- Ensure health and safety risks are identified, assessed, and controlled
- Support learning from incidents, audits, inspections, and reviews
- Provide a framework for monitoring performance and driving continual improvement

Ensure each Clinical or Service Board undertakes an annual Health and Safety Management System Review

Scope

This procedure applies to all Health Board activities, services, premises, and locations, whether delivered directly by the Health Board or on its behalf. It applies to all staff groups, including permanent, temporary, bank, agency, and volunteer staff, and to contractors and others working on behalf of the Health Board or where the Board has control or influence.

Equality and Health Impact Assessment

This document supports the Health and Safety Policy and will sit under this Equality and Health Impact Assessment (EHIA).

Documents to read alongside this Procedure

IMS-01-01-CAV: Health and Safety Policy
IMS-02-05-CAV: Health and Safety Management Review Procedure

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Disclaimer
If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).

| Summary of reviews/amendments | | | |
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| Version Number | Date of Review Approved | Date Published | Summary of Amendments |
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1.0 Introduction

Health and Safety Management System Overview

The UHB's Health and Safety Management System (HSMS) has been developed to ensure the safe, effective, and efficient control of organisational activities. It provides a structured and systematic approach to managing health and safety risks, supporting compliance with statutory duties, NHS requirements, and recognised best practice.

The HSMS is based on a 22-element management system framework, aligned to established Integrated Management System (IMS) principles. These elements collectively set out how health and safety is governed, planned, implemented, monitored, and continually improved across the Health Board.

2.0 The HSMS Model

The HSMS consists of three core components:

2.1 Standard IMS Library

The foundation of the system is a centrally maintained IMS library, which defines the Health Boards approach to health and safety management.

This includes:

- Policies, procedures, standards, and guidance documents
- Clearly defined roles, responsibilities, and accountabilities

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- Arrangements for risk assessment, safe systems of work, and incident management
- Processes that ensure legal compliance and consistency across all clinical and non-clinical areas
- The IMS library ensures that all parts of the organisation work to a common, standardised framework, while allowing for local implementation appropriate to service risks.

2.2 Learning and Improvement Mechanisms

The HSMS incorporates mechanisms to promote learning, competence, and continuous improvement, including:

- Incident reporting, investigation, and learning
- Monitoring of accidents, near misses, and unsafe conditions
- Staff training, instruction, and supervision
- Sharing of learning from internal reviews, external guidance, and national alerts

These mechanisms enable the Health Board to identify trends, address underlying causes, and proactively reduce health and safety risks.

2.3 Evaluation, Assurance, and Audit

The effectiveness of the HSMS is evaluated through a structured programme of monitoring, review, and assurance, including:

- Performance indicators and management reporting
- Internal audits and inspections
- Review of compliance against the 22 IMS elements
- Action planning and follow-up to address identified gaps

This component provides assurance to the Executive Board that health and safety arrangements are effective and operating as intended.

3.0 IMS Element Structure

| Element | Title and Description | Typical Documents |
|---------|--|--|
| IMS-01 | Responsibilities and Accountability Responsibilities of all managers and the desired behaviours that demonstrate commitment to those | Health and safety strategies and plans, Health and safety policy. RACI |

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| | responsibilities including continual improvement and planning. | |
| IMS-02 | Management System About CAVUHB's H&S management system including use, support structure, format and application and management review process | Annual management review documents, arrangements for managing H&S. This document and any others pertaining to the management system |
| IMS-03 | Document and Data Control Controlled Documents are all types and form of documents providing information and instruction that requires managed updates in the event of change to ensure any intended users have the latest information. | Requirements for the control of documents and information Policy writing requirements and document storage requirements for management system and operational procedures. Records management also sit in this folder |
| IMS-04 | Testing and Calibration | Departmental equipment test and calibration results, e.g. weighing scale calibrations, Loler testing etc. |
| IMS-05 | Audits Describes H&S audit principles | Audit reports and audit action tracker documents. Audits not held in a software package such as AMaT should be stored by subject or type and then by year that particular audit was conducted. |
| IMS-06 | Fire Safety Management Sub folders will include: IMS-06-01 – Fire Safety Policy IMS-06-07 – Fire Risk Assessment | Fire safety related documents including the fire safety policy and fire risk assessments. It is easier to store documents relating to fire training in IMS-13 and not in IMS-06 |
| IMS-07 | Risk Management Sub folders will include Risk Register COSHH, PPE, Manual Handling, Task Specific Maintenance. | Risk assessments: This folder should be broken down so all risk assessments are stored here, i.e. COVID, COSHH, PPE, Manual Handling, Task specific maintenance etc. These should form the titles for your sub folders. Historic risk registers (pre-AMaT) should be stored here. |
| IMS-08 | Incident Management Responsibilities for the management of incidents, including investigation, analysis, regulatory reporting and close out. | Incident details, supplementary investigation documents that get attached to Datix Cymru. It is easier to store these documents by year. |
| IMS-09 | Personal Protective Equipment Responsibilities for the selection, assessment and use of PPE. | Records of any PPE issued to staff, face fit records etc. Lone worker information. |

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| IMS-10 | Health and Hygiene Sub folders should include: IMS-10-01 COSHH IMS-10-02 Vibration IMS-10-03 Thermal Comfort IMS-10-04 Noise IMS-10-05 Lighting IMS-10-06 Radiation | Documents, records and information pertaining to the elements listed. Note COSHH risk assessments should sit in the risk assessment folder under COSHH |
| IMS-11 | Violence Prevention Case Management Responsibilities in managing violence and aggression against staff | No personal information should be held in communal folders. Records of training should be kept in the training element. Lone worker device information should be kept in PPE. |
| IMS-12 | Manual Handling | Information pertaining to any manual handling lifting aids. Suggest Risk assessments and training records are kept in the relevant folders not in manual handling. |
| IMS-13 | Training & Competence | Departmental training records, training needs analysis. All non-electronic/ESR training records should be kept here. |
| IMS-14 | Contractor Management Controls to be applied when managing contractors, agency workers, and temporary/casual employees, including safety and environmental aspects. | Completed contractor control documents for specific work conducted in area of control. |
| IMS-15 | Emergency Planning Procedures for the management of emergencies | Details of departmental emergency plans and exercises that have been conducted. |
| IMS-16 | Communications Sub folders should include: IMS-16-01 Internal IMS-16-02 External | The sub folders should be broken down further to include meetings. All meeting minutes should be stored in suitably titled folders and can be stored in year subfolders. Other suitable documents would be presentations, non-training and regulatory correspondence. |
| IMS-17 | Change Management Procedures for the management of change within the UHB. | Detail of any changes, can be organisational or physical/structural such as ward moves/changes or the introduction of new equipment or processes. |
| IMS-18 | Safe Systems of Work IMS-18-01 Safe system of work | Details of any work conducted in or on behalf of the department |

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| | Policies and Procedures IMS-18-02 Permit to Work IMS-18-03 Physical Isolation IMS-18-04 Mechanical Lifting Operations IMS-18-05 Excavation IMS-18-06 Elevated Work IMS-18-07 Asbestos IMS-18-08 Hot Work IMS-18-09 Confined Space Electrical Isolation – Covered by HTM Medical Gases – Covered by HTM | |
| IMS-19 | Hiring and placement Staff and job roles | No personal information but typical documents would be organisational charts, HR templates pertinent to hiring and placement. Job descriptions. |
| IMS-20 | Loss Prevention Inspections Responsibilities and practices for conducting planned workplace inspections | Records of inspections conducted templates etc. Typical examples would be Workplace inspections. These should be stored by area inspected. For frequent inspections they should also be stored by year/month |
| IMS-21 | Waste Waste minimisation, pollution prevention planning, hazardous waste and the storage and handling / disposal of waste. | Storage of any departmental licenses/waste exemptions. Any waste transfer or consignment notes. Site/departmental maps indicating waste storage areas. Disposal procedures, processes. Details of any waste KPI's |
| IMS-22 | Environmental Management Management processes and responsibilities for environmental risk control strategies, environmental monitoring, energy conservation and environmental remediation. | Details of the Environmental Management System (If one is in place). Details of any hazardous storage, bund/interceptor checks, inspections. Details of any spill equipment, Environmental Aspect and Impact Reviews. Details of chemical storage areas/containers. |

4.0 Commitment to the H&S Management System

All managers are expected to demonstrate visible commitment to the HSMS and support its effective application within their areas of responsibility

They should:

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- Allocate resources for effective health and safety management
- Apply HSMS requirements locally
- Conduct annual HSMS reviews and report outcomes
- Ensure risks are assessed, controlled, and recorded
- Ensure staff are trained and competent
- Report incidents, hazards, and near misses

All Staff Contractors and Others

- Comply with HSMS procedures and safe working practices
- Report hazards, incidents, or unsafe conditions promptly
- Comply with Health Board health and safety requirements while on-site or delivering services

5.0 Monitoring and Evaluation

Managers monitor compliance with HSMS requirements through audits, inspections, and local checks.

Non-compliance or gaps are recorded and addressed via corrective actions. Results feed into Clinical and Service Board reporting and assurance processes.

6.0 Annual Health and Safety Management System Review

Each Clinical or Service Board completes an annual review of HSMS implementation.

Reviews assess:

- Compliance with HSMS procedures
- Effectiveness of risk controls
- Implementation of learning from incidents and audits
- Outstanding actions and improvement areas
- Review outcomes are reported to the Executive team and Board through the Clinical Board review process

7. Records and Documentation

HSMS records, including incident reports, audits, training logs, and review reports, must be maintained in accordance with the Health Board's Records Management Policy.

Records should be kept securely and retained for the period specified unless longer retention is required for legal, safeguarding, or risk management purposes.

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8. Continuous Improvement

The HSMS operates on a principle of continual improvement. Feedback from audits, incident investigations, and annual reviews is used to strengthen health and safety arrangements across the Health Board. Updates to the IMS library, training materials, and procedures are made as necessary to reflect learning and regulatory change

