

**UHL Apprenticeship and Development Centre
Health and Safety Policy**

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Document Amendment and Review Log

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March 2021	V3 Expected Refresh/Update	01/04/2021	JAM
January 2023	V3.1 Refresh and format	23/01/2023	JS
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December 2024	V4 Annual refresh/check	01/12/2024	JAM
December 2025	V5 Annual check and refresh	01/12/2025	JG

1. Rationale

- 1.1 The Centre is committed to providing and maintaining a healthy and safe working environment for all its employees, its apprentices/learners and all those who visit its premises; as well as ensuring that all that is reasonable and practicable is done to prevent personal injury and to comply with the duties laid on it by the Health and Safety at Work Act (1974).
- 1.2 The Centre recognises the existence of a UHL Trust Health and Safety Policy, which applies not only to its employees but to apprentices/learners who use the Trusts services and the organisations premise.
- 1.3 This policy does not in any way supersede the Trusts Health and Safety Policy and is in addition to this as required by external inspection authorities to support apprentices/learner needs.

2. Aims of the Policy

- 2.1 The Centre will ensure that its staff and apprentices/learners are aware of, and accept, their individual and collective responsibilities in the care of health and safety of themselves and others; including apprentices/learners. Centre staff and apprentices/learners are expected to co-operate with the carrying out of this policy and the Centre will encourage full participation of its employees in matters concerning health and safety at the Centre.
- 2.2 The Centre will identify and eliminate, or control, any situations likely to be hazardous to health and safety or cause injury or damage to people and/or equipment.
- 2.3 The Centre is responsible as a department and employees of the National Health Service through the existing Trust processes and procedures for providing the necessary resources for the implementation of health and safety legislation and the objectives found in both this policy and the UHL Health and Safety Policy.

3. Responsibilities of Health and Safety Matters

Centre and Trust responsibilities:

- 3.1 The overall responsibility for the implementation of this policy rests with the Centre Management Team who are managed by the Trust in accordance with the Trusts policies and procedures
- 3.2 The Centre Management Team will be required to do all that is reasonably practicable to meet the health and safety standards laid down in this policy and in legislation; and implement and carry out the policy. The Centre will identify any necessary preventative and proactive measures and prioritise actions needed to comply with relevant legislation. It will ensure that all staff members are aware of and follow UHL Trust procedures relating to accidents and sickness

- 3.3 The Centre is responsible for overseeing the implementation of this policy. Regular risk assessments (Appendix 1 and 2) will be carried out on Centre activities and resources to identify, eliminate or control risk. These will be shared with the Centre team and advice and guidance will be provided on the risk assessment, ensuring that the following are implemented;
- 3.3.1 Ensuring all new members of Centre staff are aware of this policy and the wider Trust Health and Safety Policy and how to raise concerns
 - 3.3.2 Ensuring all new Centre staff receive an induction into the Centre
 - 3.3.3 Routinely conducting a risk assessment for Centre learning environments that are used by staff, apprentices/learners, visitors/others NB: as the UHL Centre is an employer (main) provider all locations for the apprentices/learners are within a highly controlled multipurpose NHS organisation. There are limited opportunities to have dedicated space to teach just apprentices/learners.
 - 3.3.3.1 The managers of the apprentices/learners are managed through the Trusts Health and Safety policy and are primarily responsible for their staff and their locations of work under the core Trust policy. This means that the Apprentice's manager will be carrying out risk assessments in their areas of work as appropriate for both the apprentices/learners/employees and area of work. They record and manage these on Datix independently of the Centre. Apprentices at UHL are appointed to the Trust, not to the Centre
 - 3.3.3.2 Managers of apprentices/learners should share any risk assessments with Centre staff if risks exist so Centre staff can support the management or mitigation of them and ensure the Centre staff have appropriate support in place to manage any risk to them
 - 3.3.4 Ensuring all Centre staff have completed mandatory training in matters relating to health and safety and providing additional training and re-training on health and safety matters as the need arises
 - 3.3.5 Investigating all accidents and incidents in line with Trust guidelines and report to the relevant internal/external organisation(s) as appropriate
 - 3.3.6 Ensuring all Centre staff and apprentices/learners are made fully aware of the safety regulations during study days in the event of a fire.
 - 3.3.6.1 The manager in their area of work remains responsible for their health and safety during their Apprenticeship outside of study days under the Trust policies

3.3.7 Where situations arise that exceed the knowledge or competency of the Centre Management Team, advice, guidance and support will be accessed through the Trust's Health and Safety Services Team.

3.4 Fire Officers:

3.4.1 The Trust will ensure there are adequate fire prevention measures in place, adequate firefighting resources and that these are serviced as required

3.4.2 The Trust is responsible, through the Fire Officer, for overseeing the fire risk assessment for all Trust buildings including the Centres classrooms and offices.

3.4.3 The Centre is covered under the Trust Fire Policy and has the support of the organisations' Fire Officer to assist with risk assessments, concerns or incidents.

3.4.4 Overall responsibility for the Trust Fire Safety Policy is that of the Board of Directors.

3.4.5 Day to day responsibility for ensuring the Fire Policy is put into practice is delegated to the Quality, Safety, Health and Environment (QSHE) Manager (Estates and Facilities).

3.4.6 The Centre will ensure there are fire risk assessments, evacuation plans, signage and an overall trained fire marshal is in place to support the activities. Due to hybrid working and the number of venues across the hospital training is completed in it is not possible to have a fire marshal in each separate training room available on all days. The Centre staff have access to training on their clerk in charge duties in terms of fire marshal for their classroom session so they can take a lead role. The Centre is part of a hospital and follows the processes and procedures of that hospital including calling 2222 for assistance in an emergency. For other buildings and rooms used at the Trust outside Learning and Development there will be separate fire arrangements in line with that area and nominated fire officers routinely available. These are managed by the Trust.

3.5 First Aid and Accidents:

3.5.1 The Centre will ensure the main Centre building has an appointed and trained first aider and other Centre buildings know who the first aider is. NB: for other buildings and rooms used at the Trust there will be separate first-aid arrangements in line with that area and nominated first aiders routinely available. Due to hybrid working and the volume of venues used for training within the hospital colleagues are made aware of the 2222 assistance line for emergencies and the onsite A&E department.

- 3.5.2 The Trust requires areas and departments to have a trained and nominated first aider
 - 3.5.3 The Centre will ensure their hospital department has a nominated first aider who has the necessary training to hold a First Aid certificate. The individual will be responsible for keeping this training up to date
 - 3.5.4 The Centre will ensure staff and apprentices/learners know who the first aider is through signage, access to 2222 for emergencies and 999 (plus A&E on site)
 - 3.5.5 First aid boxes are located at each site. They are checked and replenished by the first aider on a regular basis
 - 3.5.6 All accidents and incidents must be reported using the Datix system in line with Trust policy and procedure. All accidents and incidents should also be reported to the Centre Education Manager who will collate them on Appendix 3. It is the Centre Education Manager's responsibility to record these in the Accident and Incident reporting log to monitor Centre incidents. The Centre Education Manager will collate the data and report annually to the Apprenticeship Centre Governors.
- 3.6 The Responsibility and Role of the Centre Employees and Apprentices/Learners:
- 3.6.1 All employees and apprentices/learners are expected to observe all hazards and accidents and report immediately to the person in charge (Practitioner/Facilitator/their manager)
 - 3.6.2 All employees and apprentices/learners must acquaint themselves with both this and their organisations Health and Safety Policy and ensure the following:
 - Report any faulty or hazardous fixtures, fittings, furniture or equipment in a timely manner
 - Do not attempt to repair any electrical equipment
 - Switch off all electrical equipment before leaving the building
 - Keep all emergency exits clear and free from obstruction
 - Only use the equipment for which they are trained to do so and ensuring they speak up if they are expected to use something for which they are not trained or are unsure how to use it
 - Observe all rules and procedures relating to the evacuation of the premises during an emergency.

4. Safe use of Machinery and Equipment

- 4.1 The Centre will ensure any machinery and equipment which requires maintenance is identified, and that maintenance and routine safety checks are carried out in line with Trust requirements
- 4.2 Managers will be responsible for:
 - Checking new machinery and equipment meets the statutory and prevailing health and safety standards before it is purchased
 - Identifying all equipment needing maintenance and report any problems on Datix
 - Ensuring effective maintenance procedures are drawn up.
- 4.3 Apprentices/learners should report any problems with machinery or equipment to a member of staff.

5. Safe Handling and Use of Substances

- 5.1 The use of substances potentially hazardous to health is limited at the Centre environments. The Centre will assess risks under the Control of Substances Hazardous to Health Regulations 2002 (COSHH) and keep a record of these. NB: As the Centre is embedded within a highly controlled NHS organisation the COSHH regulations for the building used will be those of the Trusts.

The Centre Education Manager and The Education and Practice Development Lead are responsible for:

- Identifying all substances which require a COSHH risk assessment
 - Undertaking COSHH assessments
 - Ensuring all actions/controls identified in assessments are implemented
 - Ensuring all relevant employees are informed about the COSHH assessments
 - Checking all new substances can be used safely before they are purchased.
- 5.2 COSHH risk assessments should be carried out using the approved University Hospitals of Leicester format.

6. Learner's Safety

Apprentices/Learner's safety is our prime responsibility. There is a separate Safeguarding Policy that will also support their safety and wellbeing. The Centre will support the apprentices/learners health and safety through a number of measures including:

- Induction at the start of their programme
- Signing in and out procedure on all classroom-based study days
- Fire evacuation procedures covered at the start of every classroom-based study day
- Safeguarding, prevent, bullying and harassment policies
- Reinforcement of apprentices/learners acceptable behaviour policy and Code of Conduct

- Centre staff Code of Conduct

All apprentices/learners receive regular progress reviews with a member of Centre staff and their line manager which includes within the discussion checks on health and safety and wellbeing.

7. Visitors Safety

From time to time the Centre may receive visitors from outside the UHL Trust into their classrooms and Learning and Development department. Their wellbeing while within the Centre is important. There is a visitor policy to support this.

Visitor's safety will be supported by:

- Ensuring there is a signing in procedure in place for expected visitors on entry to the Learning and Development department
- A visitors' badge issued for identification, must be worn for the duration of the visit and returned to the Centre when the visitor leaves
- Visitors will be the responsibility of the member of Centre staff they are meeting; Centre staff will ensure visitors are aware of emergency procedures in the most appropriate way e.g. for a 30 minute meeting the Centre staff would ensure they were escorted out the building in the case of a fire alarm but if they were working independently for a day in one of the rooms they would be provided with verbal information showing them the nearest fire exit, indicating the meeting point and highlighting who to go to in case of a first aid or health and safety concerns.

8. Training on This Policy

- The Trusts mandatory training, policies and procedures are the main source of training for this policy.
- Additional development can be requested from the Trust subject matter experts for fire, health and safety or safeguarding/prevent as needed/identified.
- The Centre Education Manager can also provide 121/team training on the clerk in charge arrangements for Centre staff.

Appendix 1

Health and Safety Risk Assessment			Assessment No.
Campus:			
Directorate /Department:		Location:	
Assessor:	Job title:	Date completed:	
Date due for review:	Date reviewed:	Reviewed by:	

Description of activity													
To review the Centre's learning environments (classrooms) for apprenticeship education programmes taking into account the Practitioner, Facilitator, apprentice/ learner and visitors to the environment.													
Supporting information (for example, case of need, explanation of activity)													
Apprentice/Learners are at risk within the learning environment because it is different to their normal place of work. There may be different evacuation procedures, equipment and rules in the different areas.													
Risks, Controls and Assessment													
No	Risk Identified	Controls in place	A- Objectives	B- Harm	C- Experience	D- Service Delivery	E- External	Likelihood	Risk Score (Highest Score A-E x Likelihood)	Priority Indicator Score (A+B+C + D+E)	Does the control adequately address the risk? Yes / No	Is the control measure documented and communicated? Yes / No	Is the control Measure in operation and applied consistently? Yes/ No
1	Slips, trips and falls; Damaged flooring, other trip hazards	Induction will familiarise apprentices/learners with the environment.											

		<p>Spillages cleaned up immediately.</p> <p>No running in building.</p> <p>Workspace inspections.</p> <p>Faults and defects reported to Estates.</p> <p>Aware of keeping areas tidy and walkways clear of obstructions.</p>											
2	<p>Electricity;</p> <p>Fire, shock, burns</p>	<p>All electrical equipment within the environment is PAT tested.</p> <p>Supervision in use of equipment.</p> <p>Induction will identify equipment to be used and potential training requirements.</p>											
3	<p>Fire;</p> <p>Smoke inhalation, burns</p>	<p>Throughout premises: Programme of weekly fire alarm call point testing in place.</p> <p>Fire risk assessments conducted on premises.</p> <p>Induction to familiarise participant with local arrangements in the event of fire. Weekly audibility tests by Trust.</p> <p>Emergency evacuation exits should be clear of obstructions.</p>											

4	<p>Toxic, irritant , harmful, corrosive substances hazardous to health:</p> <p>Cleaning products, substances used for clinical procedures, latex, body fluids</p>	<p>Appropriate storage and disposal arrangements are in place for chemicals.</p> <p>Personal protective equipment is provided.</p> <p>Spillage kit located centrally within clinic areas and staff trained in use.</p> <p>Participants told not to deal with spillages at induction.</p>																							
5	<p>Exposure to ionising and non-ionising radiation sources;</p>	<p>The young person (<18) will not be allowed to work in areas where they might be exposed to radiation unless they are required to do so as part of their training and this would be under the direct supervision of a competent supervisor and only where the Radiation Protection Advisor has assessed the risk and advised on safe participation.</p>																							
6	<p>Clinical waste and sharps Infection;</p> <p>Needle stick injuries</p>	<p>Sharps are disposed of according to [<i>Sharps Management UHL Policy</i>]</p> <p>Participants will not be directly handling clinical medical devices including sharps.</p> <p>Waste segregation and identification.</p>																							

		Participants always supervised by staff.											
7	Aggression, abuse; Members of the public/other apprentices/learners/visitors to the Centre	Participants not to undertake any form of lone working. Participants instructed to seek assistance in the event of any concerns.											
8	Infectious diseases; Illness	Follow infection control procedures with regard to hand washing as outlined at induction.											
9	Manual handling of office equipment and Consumables; Musculoskeletal injuries resulting in back pain from handling heavy objects	Use equipment if provided for lifting and carrying e.g. trolleys. Follow good practice with regard to lifting as outlined at induction.											
10	Use of display screen equipment; Posture problems and pain, discomfort or injuries to hands and arms from improper use. Headaches and sore eyes from work environments e.g. poor lighting, glare etc.	Workstation to be set up for participant according to good practice. Participant advised to take regular breaks/change of activity every 50 - 60 minutes and to report any concerns to supervisor.											
11	Hot Liquids; Scalding	Induction to include instruction to carry hot											

		liquids on a tray and avoid overfilling of cups.											
12	<p>Stress caused by:</p> <p>Travelling to unfamiliar locations Unfamiliar surroundings and meeting new people. Exposure to distressing situations</p>	<p>Clarification of activities and timetable with supervisor. Participant to be asked to raise any concerns with supervisor.</p>											
13	<p>Attending non-trust premises e.g. patients' homes, nursing homes;</p> <p>NB even where a visit is considered low risk, supervisors should carefully consider the patient and their treatment before planning to bring a apprentice/learner.</p> <p>Heightened likelihood of some risks covered above, especially slips, trips, falls; aggression/abuse; breach of confidentiality.</p>	<p>Only accompanying where it is a follow up visit to a known patient without any known behavioural issues and the staff member is confident that there will be no issues with any other Occupants of the property.</p> <p>The member of staff being satisfied the student displays an appropriate level of maturity i.e. a home visit would not be the first activity timetabled with a new student.</p> <p>The environmental conditions outside and within the property do not present significant risks.</p>											

		There is a procedure for recording/ contacting with main work site of arriving and leaving times for e.g.LPT home visits, apprentice/learners should follow their employers reporting procedure for entering and leaving home premises.											
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Summary of action taken to date

Health and Safety is discussed at induction and at progress reviews with the apprentice/learner and their manager.

Action Planning and monitoring (dependant upon score)

Risk Ref No.	Action still required	Cost (£) (if known)	By Whom	Due Date	Review Date	Revised Risk Score

Official Use Only
 Approval
 Group
 Added to the Risk Register Y / N

Date Score Approved
 Date added to the Register

**Appendix 2
UHL Consequence and Likelihood Matrix**

	Objectives / Financial	Degree of Harm (to Patient, Visitor or Member of the Public)	Claims & Complaints / Patient Experience / Outcomes	Impact on Service Delivery / Business Interruption / Projects	Adverse Publicity / Reputation / Inspection / Audit / Enforcement Action	Likelihood
1 Minor	Minor impact on Trust objective. AND /OR Barely noticeable reduction in scope or quality AND /OR Small loss.	Minor injury not requiring first aid or no apparent injury / adverse outcome, Near Miss.	Verbal locally resolved Complaint. Reduced quality of patient experience not directly related to the delivery of patient care Small claims (up to £25,000)	Negligible impact, brief loss / interruption > 1 hour of service. Insignificant cost increase / schedule slippage. <1%)	Local interest, rumours within Trust. Little effect upon staff morale. Small number of minor recommendations, which focus on minor quality improvement issues. Minor non-compliance with Standards for Better Health	Not expected to occur for years Probability <1%
2 Moderate	Temporary non-compliance with Trust Key Tasks* AND /OR Minor reduction in quality / scope AND /OR Loss > 0.1% of Trust budget	Temporary Minor Injury / Illness / Effect. First aid treatment needed, referral to A&E / OH / GP	Justified formal Compliant. Unsatisfactory patient experience directly related to patient care- readily resolvable	Local only. Some loss / interruption delays in service provision (> 8 hours) < 5% over budget / schedule slippage.	Local adverse publicity, local media coverage, adverse publicity for < 3 days. Minor effect on staff morale/public attitudes. Internal inquiry reported to local committee structure. Recommendations made which can be addressed by low-level management action. Non-compliance with the Developmental requirements of the Standards for Better Health	Expected to occur annually in the UK or 1-5 years in the Trust Probability 1-5 % The event may only occur in exceptional circumstances
3	Temporary non-compliance with	Semi-permanent	Independent review. Mismanagement of	Critical Service loss / interruption,	Local media coverage, adverse publicity for > 3 days. Significant effect on staff morale / public perception of organisation.	Expected to occur at least annually

Serious	Trust Primary Objective* AND /OR Reduction in scope or quality. AND /OR Loss > 0.25% of Trust budget	Injury, Over 3 day reportable injury. RIDDOR / Agency reportable	patient care, short term effects (<1 week) Justified complaint involving lack of appropriate care. Significant claim (up to £250,000)	minor delays > 1 day. 5 -10% over budget / schedule slippage.	Internal inquiry reported to external agency. Challenging recommendations that can be addressed with appropriate action plan. Reduced rating. Non-compliance with core requirements of the Standards for Better Health	Probability 6-20% The event may occur at some time
4 Major	Non-achievement of Trust's Key Tasks* AND /OR Loss > 0.5% of Trust budget	Major injuries, or long term incapacity / disability, Major Specified Injury (RIDDOR)	Ongoing National publicity. Regional inquiry. Ombudsman. Serious mismanagement of patient care, long term effects (>1week) Multiple justified complaints. Multiple claims or single major claim (over £250,000).	Critical Service loss, major reduction in service > 1 week 10 - 25% over budget / schedule slippage.	National media coverage, adverse publicity for < 3 days. Regional inquiry. Severe effect on staff morale, public confidence in organisation undermined. Enforcement action Low rating / Critical report Major non-compliance with core requirements of the Standards for Better Health	Expected to occur monthly Probability 21-50% The event will occur at some time
5 Catastrophic	Non -achievement of Trust Primary Objective(s)* AND /OR Loss > 1% of Trust budget	Death or major permanent incapacity	Full National Inquiry. Select Committee. Public Accounts Committee. Totally unsatisfactory patient outcome or experience	Total loss of Critical Service or facility. >25% over budget/ schedule slippage.	National/international media coverage with adverse publicity for > 3 days. Loss of key staff. Public inquiry / MP Concerns raised in Parliament. Court enforcement. Non-compliance with legal requirement, which may result in Prosecution, Zero rating. Severely critical report	Expected to occur at least weekly Probability > 50% The event is expected to occur in most circumstances

**Appendix 3
Health and Safety Log**

Date	Apprentice/Learners Name	Learner Number	Programme	Unit	Incident/Concern/Accident	Action taken / by whom/date