NHS TAYSIDE

HEALTH & SAFETY

Management of Health & Safety Policy

Author: Chief Executive

Review Group: Strategic Risk/Management Group

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Signed: Executive Officer

Signatory (Authorised)
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<th>Author</th>
<th>Date</th>
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<td>1.0</td>
<td><strong>Please note earlier versions of this policy are available prior to version control being implemented in July 2011</strong></td>
<td>Hilary Walker</td>
<td>October 2009</td>
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<td>1.1</td>
<td>Annual Review – minor changes</td>
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MANAGEMENT OF HEALTH AND SAFETY POLICY

Section 1: Introduction

1.1 NHS Tayside believes that the effective management of health and safety contributes to a general improvement in organisational and clinical performance. It regards health and safety to be a key priority for all staff and is committed to working in partnership with them and their representatives to ensure that it adopts high standards in this area. As part of this commitment to developing effective arrangements for staff and corporate governance NHS Tayside intends to provide a safe and healthy environment for staff, patients and visitors. This policy outlines the aims, objectives and roles which underpin the management of health and safety across NHS Tayside.

Section 2: Aims & Objectives

To achieve the above aim NHS Tayside has the following aims and objectives:

2.1 Develop and foster a culture which regards health and safety management as an integral part of the organisation's general management arrangements.

2.2 Develop and implement a range of risk control measures which ensure compliance with statutory requirements and applicable codes of practice.

2.3 Develop 2-year strategic and associated annual action plans. Progress will be regularly evaluated, reported, and the results published in the Mid Year and Year End Reports to the Audit Committee.

2.4 Ensure that responsibilities of individuals are clearly defined and understood by all staff.

2.5 Develop effective risk management arrangements in respect of both workplace and systems of work to ensure that risk is assessed and controlled appropriately.

2.6 Ensure the availability of accurate and accessible information on the incidence and costs of work related accidents and occupational ill-health, with the setting of clear priorities, targets and strategies for their reduction.

2.7 To appropriately equip staff by ensuring they receive relevant information, instruction, training and supervision as timeously as possible.

2.8 Provide effective arrangements for two-way communications, through partnership working, for all matters relating to health and safety.

2.9 Develop effective arrangements to enable regular auditing of health and safety practices, the monitoring of corrective actions and the updating of operational policies.

2.10 Provide an Occupational Health & Safety Service in accordance with Scottish Executive Policy and Guidance which is available and accessible to all the staff in the organisation.
2.11 Provide appropriate resources to enable legal compliance as a minimum acceptable level of Health & Safety.

2.12 Ensure that systems are implemented to plan for safety and to measure performance against such plans.

2.13 Ensure that systems are implemented to review and develop policy with the aim of progressive improvement in Health & Safety performance.

SECTION 3: ROLES & RESPONSIBILITIES

3.1 Roles and Responsibilities

NHS Tayside recognises the importance and value of effective health and safety and that it must be an integral part of the work of all staff. Line managers have a particular role to play in developing a health and safety culture with staff and NHS Tayside expects the co-operation and involvement of all staff and health and safety representatives in achieving a safe, healthy workplace.

3.2 The Chief Executive for NHS Tayside has ultimate accountability for health and safety within the organisation.
The Chief Executive will delegate responsibilities appropriately and seek advice from suitably experienced and qualified specialists.

The Chief Executive’s role in relation to health and safety is as follows:-

3.2.1 Establish appropriate Policies and Procedures and Risk Control Measures, and ensure that they are routinely revised.

3.2.2 Ensure that roles and responsibilities relating to health and safety management are specified to support their integration with all aspects of organisational management.

3.2.3 Determine priorities through developing a strategic plan and produce an associated action plan with targets which are measurable, achievable and realistic.

3.2.4 Develop appropriate methods of measuring performance in respect of agreed targets and standards and ensure their implementation.

3.2.5 Ensure that audits of compliance with the health and safety management systems are undertaken, reports received and corrective action implemented.

3.2.6 Review performance and produce subsequent routine reports for submission for senior management.

3.3 In order to assist the Chief Executive to discharge this role a Strategic Risk Management Group has been established. This Group will be chaired by the Deputy Chief Executive who will lead the development and implementation of the NHS Tayside Health & Safety Strategy. The role and remit of the Committee is to:

3.3.1 Identify the key statutory requirements for health and safety and ensure they are understood across all services.

3.3.2 Develop a strategic health and safety framework which facilitates the planning of health and safety systems with the appropriate resources against an achievable time-frame.

3.3.3 Identify best practice in health and safety management in healthcare and consider its application.

3.3.4 Ensure an appropriate health and safety training and development plan which meets Statutory Health and Safety regulations.

3.3.5 Develop new ways to establish and maintain an effective health and safety culture so that all staff take their responsibilities seriously, the workforce is fully involved and risks are properly managed.

3.3.6 Ensure that NHS Tayside addresses new and emerging work related health issues.

3.3.7 Achieve high levels of recognition and respect for health and safety as an integral part of a modern health service.

3.4 The Operational Risk/Health and Safety Management Group will be responsible for the operational overview of health and safety issues. This Group will be chaired by the Director of Operations. In addition each Community Health Partnership/geographical area will have Locality Risk/Health & Safety Management Groups. All Committees will provide a direct link via the Operational Risk/Health and Safety Management Group with the Strategic Risk Management Group to ensure that strategic priorities are addressed.
The roles of the Locality Risk/Health & Safety Management Groups and Community Health Partnerships are to

3.4.1 Plan, implement and monitor a rigorous risk assessment programme.

3.4.2 Identify clear lines of responsibility for health and safety practice.

3.4.3 Examine reports and trends in accidents and incidents, in order to identify problem areas and ways of improving health and safety.

3.4.4 Discuss safety audits which have been undertaken, in order to review the results and decide what actions need to be taken.

3.4.5 Receive reports from staff/safety representatives, of employees concerns and requests.

3.4.6 Examine the health and safety training provided, and whether it is proving effective.

3.4.7 Discuss what health and safety information needs to be communicated to the staff, and how this should be done.

3.4.8 Monitor and review health and safety organisational arrangements to ensure they are fit for purpose.

The Dundee Community Health Partnership will also cover Board HQ services.

The Chief Operating Officer and General Managers have lead responsibility for the management of all aspects of health and safety within their area of responsibility and are accountable to the NHS Tayside Chief Executive for ensuring the adequate health and safety of staff through the application of Policy, Procedure and Management Arrangements.

3.5 Directors, General Managers and all managers within the reporting structure will, where delegated, act on behalf of the Chief Operating Officer/Chief Executive and will have day-to-day responsibility for ensuring that suitable and sufficient arrangements are made for health, safety, security and environmental protection in all aspects of each NHS establishment for which they have responsibility (including any services which may be provided off-site). They will establish local procedures and plans for the management of health, safety and environmental issues for all staff and activities in each area of responsibility under their control which include arrangements for:

- identification of hazards
- assessment of risks
- implementation of control procedures
- monitoring the effectiveness of control systems
- communicating and training staff
- liaising with functional managers where appropriate
- re-assessing risks

3.6 Directors, General Managers and all managers within the reporting structure will ensure that health and safety is an important and integral part of the management process. To assist in this process they will appoint a team of Health and Safety Workbook Holders. The number and designation of Health and Safety Workbook Holders will vary, depending on the size and nature of the services being provided and the existing management arrangements.
3.7 **Health and Safety Workbook Holders** will be appointed by the Director or General Manager within the area of responsibility. The role of the Health and Safety Workbook Holder is to:

3.7.1 Co-ordinate and supervise health and safety management within their designated areas.

3.7.2 Form a link and point of contact for members of the organisation, specialist advisers, safety representatives and members of staff.

3.7.3 Prepare management systems and action plans which they monitor and review regularly.

3.7.4 Define the areas and activities of their staff including common access areas.

3.7.5 Support line managers in the appointment of suitable Risk Assessors.

3.7.6 Support and encourage managers in ensuring that risk assessments are undertaken and that appropriate action is taken to control identified risks.

3.8 Directors, General Managers and all managers within the reporting structure will also ensure that **Local Health and Safety Management Arrangement Documents** are introduced which address specific operational and organisational health and safety risks within their area of responsibility.

In addition, Directors, General Managers and all managers within the reporting structure will monitor the implementation of local arrangements and prepare and implement local **Health and Safety Action Plans**.

3.9 **Line Managers and Supervisors** are responsible to their Director, General Manager and all managers within the reporting structure for the implementation and management of the Health and Safety Policies by providing their staff with direction, help and guidance, with the aim of ensuring that risks are fully understood and that safe systems of work are constantly applied. They must ensure that safety is maintained when equipment and working practices change and, have further risk assessments carried out with action taken as required. Line Managers and Supervisors are responsible for risk assessing each post and determining and recording the level and frequency of training required to allow their staff to carry out their role in a safe manner.

3.10 **Individual Members of Staff** must take reasonable care of the health and safety of themselves and of other persons who may be affected by their work. They **must** co-operate with the approved policies and risk control measures so far as necessary to enable NHS Tayside to carry out its legal duties relating to health, safety and environmental matters, including the wearing of protective clothing or equipment where required. Staff **must not** interfere, either intentionally or recklessly, with anything provided in the interests of health, safety and environmental protection. Staff should report any perceived danger of unsafe working practices or conditions to their appropriate supervisor or manager and/or to their staff Health & Safety Representative. They must also be aware of emergency procedures, including evacuation and fire precaution arrangements in their area of work.

3.11 **The Director of Operations** with support from Safety, Governance and Risk and OHSAS will be responsible for ensuring that specialist advice is provided to managers and for co-ordinating and monitoring the implementation of this Policy on
behalf of the Organisation. In practice the day-to-day responsibility for implementing and co-ordinating the Policy will be delegated to Senior Managers, whilst the provision of statutory specialist advice compliant with Regulation 6 of the Management of Health & Safety Regulations will be the responsibility of the Occupational Health & Safety Advisory Service (OHSAS). In addition, NHS Tayside will appoint such competent advisers as may be required under other Health & Safety related legislation e.g. Fire Safety Adviser, Radiation Protection Adviser etc.

The Director of Operations, as Executive Lead, is responsible for implementing a single system Health & Safety Framework within NHS Tayside. The Health & Safety systems will be an integral component of Safety, Governance and Risk activities.

They will be assisted and supported by Health & Safety Advisers who will take a lead role in the development, implementation review and audit of NHS Tayside’s safety management arrangements.

3.12 The NHS Tayside Medical Director will be responsible for the safe ethical use of ionising radiation throughout NHS Tayside, and in particular for implementing the requirements of the Ionising Radiation (Medical Exposure) Regulations.

Arrangements for the protection of staff, patients and others who might be affected by the Board’s undertakings, and for protection of the environment, for the risks associated with ionising and non-ionising radiations, shall be specified in an NHS Tayside “General Radiation Safety Policy” (RSP). The Associate Medical Director of the Access Directorate of NHS Tayside shall be responsible to the Chief Executive for providing and maintaining the RSP and for overseeing implementation of it’s provisions. The RSP shall include provisions for establishing an NHS Tayside Radiation Safety Committee (RSC) which shall make an annual report to NHS Tayside Improvement and Quality Committee on the activities of the RSC, including matters related to the maintenance of the Radiation Safety Policy and implementation of its provisions.

3.13 Health and Safety Risk Assessors will be selected, trained and organised by line managers and will undertake and record the risk assessments and subsequent reviews required by legislation. Any necessary action to reduce risks identified by these assessments will be the responsibility of the line manager.

3.14 Specialist Advisers are available to provide advice and practical assistance:-

The Occupational Health and Safety Advisory Service (OHSAS) provides a focus of information, advice and practical assistance as well as confidential counselling and health surveillance through its team of:-

Director of OHSAS
Head of Safety Services
Health & Safety Advisors
Assistant Health & Safety Advisors
Health and Safety Support Worker
Occupational Health Nurses
Occupational Health Clinical and Counselling Psychologists
Counsellors
Manual Handling Adviser
Violence and Aggression Adviser

In addition NHS Tayside has the following sources of specialist expertise:
Further specialist advice will be provided from within the organisation or by outside specialists as appropriate.

The **Role of Specialist Advisers** is to:-

- provide specialist information and advice
- undertake the role of Competent Adviser under the terms of specific legislation (where appropriate)
- assist management to identify health and safety problems and advise on appropriate action
- advise on training needs
- provide, in conjunction with other training programmes, health and safety training
- assist in the investigation of accidents at work
- assist with monitoring accident reports
- maintain contacts with local health and safety inspectors, fire officers, etc.
- remain up-to-date with developments within their area of competence
- to work with Line Managers and Supervisors to determine appropriate training requirements for each staff group.

### 3.15 Staff Representation

**NHS Tayside** is committed to working in partnership with Health and Safety Representatives both as part of its organisational health and safety arrangements but also at a local level when addressing specific issues. Health and Safety Representatives will participate on all health and safety committees. In addition NHS Tayside will ensure that any representative receives adequate facilities arrangements to undertake this key role.

### 3.16 Partnership Working in Health and Safety

NHS Tayside must work in partnership with Health and Safety Representatives and Staff Representatives to promote a safe and harm free environment for all staff and patients. Staff Representatives must be included at all stages of Health and Safety; from the initial reports of incidents to the strategic operational policies. A full and robust reporting mechanism to the Area Partnership Forum must be incorporated within this policy.

### 3.17 Training

**3.17.1** NHS Tayside will provide appropriate training as identified by risk assessment for each post to support staff at all levels, as well as Health and Safety Co-ordinators and Risk Assessors, to fulfil their various health and safety responsibilities.

**3.17.2** Risk Assessor training will be more practically orientated and will concentrate on training individuals to support their managers by undertaking risk assessments to comply with legislative requirements.

**3.17.3** Individual staff will receive, as part of their induction programme, an introduction to health and safety which will be supplemented by specific and ongoing training, following appropriate risk assessment of the post, identified by their line manager.
3.17.4 The Knowledge and Skills Framework (KSF) defines and describes the knowledge and skills that staff require to apply to their work. Health and Safety is one of the core dimensions within this framework. The core dimension supports effective learning and development of all staff with regards to Health and Safety and encourages the application of the knowledge and skills they have developed. Development of Health and Safety Knowledge by all staff is actively encouraged by NHS Tayside.

Suitable arrangements will be developed to monitor the effectiveness of training provided.

3.18 Emergent Health and Safety Issues

3.18.1 Detailed aspects of health and safety matters will be covered by additional Procedures and Protocols in respect of specific issues, which will be agreed, in partnership with staff side/safety representatives, for adoption throughout NHS Tayside. These Procedures and Protocols arise out of the NHS Tayside’s Management of Health & Safety Policy and should be read in conjunction with it.

Staff must therefore comply with the requirements of these arrangements.

It is recognised that further detailed instruction may be required within some areas in the form of local health and safety procedures/workplace precautions which will be prepared by line managers and locality managers as appropriate working in partnership with Staff Side/Safety representatives.

3.19 Contractors

Contractors carrying out work on NHS Tayside property will be expected to comply with Statute, the Management of the Health & Safety Policy and any relevant Service/Departmental Procedures. Prior to the award of any contract NHS Tayside will ensure that the contractor complies with all relevant health and safety requirements. It will be the responsibility of the person supervising the contract to ensure that the contractors comply with relevant policies and procedures and, where appropriate, specify detailed health and safety performance requirements in the written terms of the agreement.

3.20 Third Party Premises

Where NHS Tayside Employees are sharing premises with other parties, there is a requirement under ‘the Management of Health and Safety at Work Regulations 1992’ that all occupiers should co-operate to ensure risks are assessed and managed. For further help, information and advice please contact OHSAS.

Section 4: KEY CONTACTS

Key health and safety individuals can be contacted through the Switchboard.
Section 5: MEMBERSHIP OF COMMITTEES

Operational Risk/Health and Safety Group

Director of Operations (Chair)
Safety, Clinical Governance and Risk Representative
Head of Human Resources
Medical Director/Nurse Director (Virtual)
OHSAS Representatives (x2)
Representative from Pharmacy
Staff Side Representatives (x2)
Internal Audit Representative (Advisor)
Representative from Dundee Locality
Representative from Angus Locality
Representative from Perth & Kinross Locality
Primary Care Directorate Representative
Board Secretary
Head of Site/Support Services, NHS Tayside
Emergency Planning Officer
Infection Control Representative
Fire Safety Representative
General Manager Representative
Blood Transfusion Representative
PPG Representative

NHS Tayside Strategic Risk Management Group

Deputy Chief Executive, NHS Tayside (Chair)
Chief Executive
Human Resources Director, NHS Tayside
Director of Finance, NHS Tayside
Chief Operating Officer, NHS Tayside
Medical Director, NHS Tayside
Nurse Director, NHS Tayside
Director of Public Health, NHS Tayside

Executive Team Members:
Director of Operations, NHS Tayside
Employee Director, NHS Tayside
Board Secretary, NHS Tayside

In attendance:
Emergency Planning Officer
Director of OHSAS
Lead Infection Control Doctor, NHS Tayside
Chair of Emergency Planning Advisory Group (EPAG)
Risk Management Representative
Acting Health and Safety Team Leader, OHSAS
Staff Representative

Dundee Locality Health & Safety/Risk Management Forum

Service Manager Dundee CHP – Co Chair
Locality Site/Support Services Manager – Co Chair
Health & Safety Adviser, OHSAS
Capital Accountant, Maryfield
Fire Safety Advisor
Estates Maintenance Manager
Staff Side Representative x 2
Infection Control Adviser
HLI Manager
Mental Health Representative
AHP Representative
Inspector, Tayside Police
Capital Projects Representative
Access Directorate Representative
Pharmacy Representative
Safety, Clinical Governance and Risk Representative
Representative Community Nursing
Representative Medicine Planned and Urgent Care
Representative Dundee CHP
Representative Specialist Services

Perth & Kinross Locality Health & Safety / Risk Management Executive Group
Head of Corporate Services, Perth & Kinross CHP (Co-Chair)
Locality Site/Support Services Manager (Co-Chair)
Integrated Mental Health Manager
Estates Manager
Fire Safety Adviser x2
Head of Nursing, Medicine
Head of Nursing, Surgery
Theatre Manager, PRI
Infection Control Adviser
Health and Safety Adviser
Staff Side Representative x 2
Service Manager - Psychiatry of Old Age/Community Hospitals
Clinical Services Manager, Dental, Access Directorate
Site/Support Services Manager
Head of Physiotherapy, P&K CHP
Workforce Manager, P&K CHP
Clinical Nurse Manager, P&K CHP
Safety, Clinical Governance and Risk Representative

Angus Locality Risk Management Group
Head of Pharmacy (Co-Chair)
Locality Site/Support Services Manager (Co-Chair)
Clinical Team Manager, Integrated Mental Health Services
Staff Side Representative x 2
Service Manager – MIIU/OOH Service
Principal Pharmacist, Tayside Substance Misuse Service
Dispensary Manager, Stracathro
Site Manager – Forfar
Site Manager – Montrose/Brechin
Site Manager - Arbroath
Angus Practice Managers Group Representative
Infection Control Adviser/Infection Control Nurse
Head of Nursing, SRTC
Workforce Manager (Angus)
Site/Support Services Manager
Clinical Team Manager – Psychiatry of Old Age
Health and Safety Adviser
Clinical Team Manager – Community Services
Angus Allied Health Professional Lead
NHS Estates Representative
Safety, Governance and Risk Co-ordinator
Team Leader, Health Visiting
SRTC Manager
Fire Safety Adviser
ORGANISATIONAL STRUCTURE

Tayside NHS Board

Improvement and Quality Committee

Audit Committee

Clinical Quality Forum

Strategic Risk/Management Group

Operational Risk/Health and Safety Management Group

Drugs & Therapeutics Committee

Area Partnership Forum

Dundee Locality Risk/Health and Safety Management Group

P&K Locality Risk/Health and Safety Management Group

Angus Locality Risk/Health and Safety Management Group

Directorate/CHP Safety, Governance and Risk Fora

LEGEND:

STANDING COMMITTEE OF THE BOARD

Health and Safety Representative present

Report To

Minutes only

Information Sharing
Section 6: NHS TAYSIDE - POLICY APPROVAL CHECKLIST

This checklist must be completed and forwarded with policy to the appropriate forum/committee for approval.

| POLICY AREA: (See Intranet Framework) | Health & Safety |
| POLICY TITLE: | Health & Safety Policy |
| LEAD OFFICER: | Head of Safety, Governance and Risk |

| Why has this policy been developed? | To meet the responsibilities of the Health & Safety at Work Act 1974 |
| Has the policy been developed in accordance with or related to legislation? – Please give details of applicable legislation. | Health & Safety at Work Act 1974 |
| Has a risk control plan been developed? Who is the owner of the risk? | Yes, Owned by Mr Marr, Chief Executive. Managed by Hilary Walker, Lead for Risk Management |
| Who has been involved/consulted in the development of the policy? | Strategic Risk/Health & Safety Group |
| Has the policy been assessed for Equality and diversity in relation to:- | |
| Race/Ethnicity | Yes ☒ No ☐ |
| Gender | Yes ☒ No ☐ |
| Age | Yes ☒ No ☐ |
| Religion/Faith | Yes ☒ No ☐ |
| Disability | Yes ☒ No ☐ |
| Sexual Orientation | Yes ☒ No ☐ |
| Minority Ethnic Communities (includes Gypsy/Travellers, Refugees & Asylum Seekers) | Yes ☒ No ☐ |
| Women and Men Religious & Faith Groups Disabled People Children and Young People Lesbian, Gay, Bisexual & Transgender Community | Yes ☒ No ☐ |
| Does the policy contain evidence of the Equality & Diversity Impact Assessment Process? | YES ☒ NO ☐ |
| Is there an implementation plan? | YES ☒ NO ☐ |
| Which officers are responsible for implementation? | Members of SDU Risk/Health Group |
| When will the policy take effect? | Immediate effect |
| Who must comply with the policy? | All Staff |
| How will they be informed of their responsibilities? | Via local line management structures |
| Is any training required? | YES ☐ NO ☒ |
| If yes, has any been arranged? | YES ☐ NO ☒ |
| Are there any cost implications? | YES ☐ NO ☒ |
| If yes, please detail costs and note source of funding | |
| Who is responsible for auditing the implementation of the policy? | Operational Risk/Health & Safety Management Group reporting to Strategic Risk Management Group |
| What is the audit interval? | Annually |
| Who will receive the audit reports? | Strategic Risk Management Group |
| When will the policy be reviewed and by whom? (please give designation) | Annually by Strategic Risk Management Group |

Name: Head of Safety, Governance and Risk    Date: January 2012
1. Rapid Impact Checklist (RIC)
Each policy must include a completed and signed template of assessment

<table>
<thead>
<tr>
<th>Which groups of the population do you think will be affected by this proposal?</th>
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<tr>
<td>• minority ethnic people (incl. gypsy/travellers, refugees &amp; asylum seekers)</td>
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<tr>
<td>• women and men</td>
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<td>• people in religious/faith groups</td>
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<tr>
<td>• disabled people</td>
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<tr>
<td>• older people, children and young people</td>
</tr>
<tr>
<td>• lesbian, gay, bisexual and transgender people</td>
</tr>
<tr>
<td>• people of low income</td>
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<td>• people with mental health problems</td>
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<td>• homeless people</td>
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<td>• people involved in criminal justice system</td>
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<tr>
<td>• staff</td>
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<tr>
<td>Other</td>
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N.B. The word proposal is used below as shorthand for any policy, procedure, strategy or proposal that might be assessed.

<table>
<thead>
<tr>
<th>What positive and negative impacts do you think there may be?</th>
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<tr>
<td>What impact will the proposal have on lifestyles? For example, will the changes affect:</td>
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<td>• Diet and nutrition?</td>
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<td>• Exercise and physical activity?</td>
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<td>• Substance use: tobacco, alcohol or drugs?</td>
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<td>• Risk taking behaviour?</td>
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<td>• Education and learning, or skills?</td>
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<tr>
<th>Which groups will be affected by these impacts?</th>
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<tr>
<td>Will the proposal have any impact on the social environment? Things that might be affected include</td>
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<td>• Social status</td>
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<td>• Employment (paid or unpaid)</td>
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<td>• Social/family support</td>
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<td>• Stress</td>
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<td>• Income</td>
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<th>Will the proposal have any impact on</th>
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<td>• Discrimination?</td>
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<td>• Equality of opportunity?</td>
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<td>• Relations between groups?</td>
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<tr>
<th>Will the proposal have an impact on the physical environment? For example, will there be impacts on:</th>
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<td>• Living conditions?</td>
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<td>• Working conditions?</td>
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<td>• Accidental injuries or public safety?</td>
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<td>• Transmission of infectious disease?</td>
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<th>Will the proposal affect access to and experience of services? For example,</th>
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<tr>
<td>• Health care</td>
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<td>• Transport</td>
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<td>• Social services</td>
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<td>• Housing services</td>
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<td>• Education</td>
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Rapid Impact Checklist (RIC): Summary Sheet
Each policy must include a completed and signed template of assessment

<table>
<thead>
<tr>
<th>1. POSITIVE IMPACTS (NOTE THE GROUPS AFFECTED)</th>
<th>2. NEGATIVE IMPACTS (NOTE THE GROUPS AFFECTED)</th>
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<td>3. ADDITIONAL INFORMATION AND EVIDENCE REQUIRED</td>
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<td>4. RECOMMENDATIONS</td>
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<td>5. FROM THE OUTCOME OF THE RIC, HAVE NEGATIVE IMPACTS BEEN IDENTIFIED FOR RACE OR OTHER EQUALITY GROUPS? HAS A FULL EQIA PROCESS BEEN RECOMMENDED? IF NOT, WHY NOT?</td>
<td></td>
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</table>

Manager's Signature:                                               Date: