



Doncaster and Bassetlaw
Teaching Hospitals
NHS Foundation Trust

Operational Maintenance Policy



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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 1	30 September 2025	This is a new procedural document, please read in full	James Hutchinson

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1 INTRODUCTION

The content of this document has two clear purposes. It is a Trust Policy covering the guidelines, regulations, and duty of care for all staff and contractors undertaking work on Trust properties in relation to the Operational Maintenance.

The policy describes the commitment of the Trust for ensuring assets held by the Trust are managed and maintained in a reliable, safe, compliant and cost-effective manner. To achieve this, the Directorate of Estates and Facilities ensures internal and external maintenance are provided to the right level and at the right time, to buildings, service infrastructure, plant and equipment, by a combination of Planned Preventative Maintenance (PPM), Back of House Reactive Maintenance (Infrastructure and Non-Clinical Areas), Front of House Proactive and Reactive Maintenance, Grounds and Gardens Maintenance and Out of Hours (Emergency) Reactive Maintenance.

This policy applies to all maintenance services provided to assets owned and occupied by Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust (The Trust), and to those owned by the Trust and occupied by other service providers under Lease, Licence to Occupy, or Service Level Agreement.

The Operational Maintenance Policy is a formal written system by the Estates Maintenance team to ensure a robust Maintenance System is in place to provide a safe environment for patients, staff & visitors. All assets on the premises of the Trust are maintained to the required level, which reduces the breakdowns of equipment, which can cause inconvenience to the users of the service. It aims to ensure that priority is given to the assets required to keep the environment safe and meet the current statutory regulation.

It also serves as a Policy detailing the Trusts requirements of those contracting companies employed under Maintenance contracts. This document shall be issued to all contracting companies as a part of their approval process and available by request from the Trust in electronic format. Contracting companies are expected to ensure that all personnel under their employ who are to be engaged on Trust maintenance work are trained on the requirements of this policy. Non-compliance with Statutory Regulations or with Trust policies by a contracting company or any of its employees shall lead to the suspension of operations at no cost to the Trust.

Nothing within this Policy and Procedure is to be construed as relieving a Contractor of any of his Statutory obligations under the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999, or any other current and relevant Legislation, Regulations or Approved Codes of Practice.

2 PURPOSE

This Policy and Procedure lays down the mandatory requirements of the Trust for Maintenance activities within the Trust's Estates & Facilities, and applies to all sites, premises and equipment within the Trust, or where the Trust provides a service from, at which maintenance work is undertaken.

As part of the Trust's duty of care, this policy also applies to all Employees of the Trust, Agency staff, Students and persons affected by the Trust's safety arrangement, that is, patient, visitors, contractor's staff and anyone else who has cause to be on the Trust's sites. This policy outlines the guidelines, regulations and duty of care for all Contractors undertaking maintenance work on Trust property. Nothing in these guidelines absolves Contractors or their respective Sub-Contractors, their employees and the self-employed from their duty to comply with all relevant Health and Safety legislation.

3 DUTIES AND RESPONSIBILITIES

3.1 The Trust Board

The Trust Board has a generic responsibility for all aspects of Health & Safety. Contractors working on Trust property pose a significant risk and the Trust Board, therefore, has a responsibility to ensure that there is an approved Policy for the Operational Maintenance available to minimise that risk.

3.2 Chief Executive

The Chief Executive is responsible for ensuring that there is a suitable management structure in place to manage the Policy for the Operational Maintenance and its associated procedures. Responsibility for this is delegated to the Director of Estates and Facilities.

3.3 All Directors and Deputy Directors

All Directors and Deputy Directors have a responsibility for ensuring that their wards and department managers are aware of the Policy & Procedures for the Operational Maintenance and enforce its use within their own areas of responsibility.

3.4 Operational Director of Estates and Facilities

The Operational Director of Estates and Facilities is accountable to Director of Infrastructure who is reportable to the Chief Executive and Trust Board for ensuring that all who undertake work in connection with the maintenance of Trust's assets do so in accordance with the requirements set out within this policy. They are also responsible for ensuring services provided by external providers are appropriate, effective, efficient, safe and compliant with current statutory Legislation, Regulations and NHS Good Practice Guidance including Health and Safety and Infection Prevention and Control and that the risks are identified and managed as part of the Trust Governance Framework.

3.5 Deputy Operational Director of Estates and Facilities

The Deputy Operational Director of Estates and Facilities is accountable to the Operational Director of Estates and Facilities for ensuring that this policy and appropriate procedures and systems are in place to ensure that all staff and contractors' activities are conducted safely and in compliance with current legislation, regulations and good practice.

The Deputy Operational Director shall ensure the Operational Director of Estates and Facilities is kept informed at reasonable time intervals as to the effectiveness of the arrangements for the management of Operational Maintenance and shall report any serious deviations to and when they arise. The Deputy Operational Director of Estates and Facilities shall ensure that regular audits are undertaken regarding the Policy & Procedures for the Operational Maintenance, including regular checks on adherence to the Trust Policies and Procedures.

The Deputy Operational Director shall ensure an approved Contractors list is maintained, which will define all specific Contractors who can maintain trust assets.

3.6 Estates Managers

The Estates Operations Managers are responsible for overseeing all maintenance services within the Trust, including planned preventative programmes and reactive maintenance.

Their key duties include:

- Planning, organising, leading, monitoring, and controlling activities carried out by directly employed staff and service contractors.
- Ensuring effective communication between the Directorate Maintenance function, service recipients, and key stakeholders such as the Infection Prevention and Control Team (IPCT).
- Reviewing the Planned Preventative Maintenance (PPM) Programme annually.

Commissioning and Contractor Management

Staff involved in commissioning maintenance work and managing contractors hold a responsibility to be familiar with and adhere to the Operational Maintenance Policy. They must ensure compliance with relevant regulations and best practices, both personally and within their teams:

- Managers must ensure that work undertaken by staff and contractors is carried out safely and in accordance with applicable legislation and best practice guidelines.
- Before any work begins, the responsible person must arrange a pre-start meeting where the contractor provides details of the work, associated risks, and any necessary precautions. If required, a permit to work system should be agreed upon and documented before commencement.
- Managers in areas where contractors are working must be informed of potential hazards, risks, and safety measures. Likewise, contractors must be made aware of any risks in their work environment.
- If work could impact patient care or occurs near a clinical area, advice must be sought from the Trust Infection Control Team.

3.7 Estates Officers

Estates Officers hold the day-to-day responsibility for ensuring that all relevant Planned Preventative Maintenance (PPM) is planned and satisfactorily completed, either by their direct craft team or by contractors under their control, in a timely manner. They will arrange all necessary actions to remedy any faults or deficiencies found during these maintenance activities. Where appropriate, the Estates Manager will be notified and informed of any remedial action taken.

3.8 Other Staff

All employees who may be required to organise, work alongside, or assist contractors have a responsibility to co-operate with their line manager in using the Trust's Operational Maintenance Policy and to participate, where required in any relevant training.

All staff have a duty to look after their own safety and that of others affected by their acts or omissions, and therefore must co-operate with management in following agreed procedures when contractors are undertaking work on behalf of the Trust.

3.9 Health and Safety Advisor

The Health and Safety Advisor will work closely with those responsible for the Operational Maintenance Policy in the provision of advice and practical assistance in all matters for health and safety.

3.10 Fire Safety Advisor

The Fire Safety Manager will work closely with those responsible for the Operational Maintenance Policy in the provision of advice and practical assistance in all matters relating to fire safety.

3.11 Local Security Management Specialist (LSMS)

The Local Security Management Specialist will work closely with those responsible for the Operational Maintenance Policy in the provision of advice and practical assistance in all matters relating to Security Management.

3.12 Infection, Prevention and Control Team

The Infection, Prevention and Control Team is responsible for providing advice on matters relating to infection, prevention and control and the risks which could arise as a result of construction work in clinical areas. The Infection, Prevention and Control Team will be responsible for performing audits in clinical areas during the construction/alteration work to ensure that the highest standards of infection, prevention and control are maintained throughout the work.

3.13 Contractors

Contractors are responsible for ensuring compliance with all Health and Safety procedures and legislative requirements. Contractors working on premises, which are leased out, to another Trust must, in addition to the Trust procedures, set out in this policy, follow any relevant policies on Health and Safety Management that the occupying Trust has in place. Non-compliance with any of these policies may result in termination of the contract. The Contractor must also ensure that they do not interfere with the day-to-day operation of the departments or site.

All contractors either visiting or working on any of the Trust's properties will ensure all his employees on the Trusts site have logged in to the site contractor management scheme have ID badges which includes company name, employees name and photograph and must have a Contractors pass or a Permit to Commence Work document supplied by the Trust.

Additional permits are in existence to cover different types of work activities on various specialist / hazardous pieces of equipment or systems. The Trust's Representative who is responsible for a given project/work will under normal circumstances be the first person to contact in respect of any necessary Permits and any issues associated with the work.

Risk Assessments Method Statements and Safe Systems of Work are the responsibility of the Contractor unless work is being carried out jointly with Trust personnel. In such cases the safe system of work must first be approved by the Trust's representatives.

Contractors working on behalf of the Trust must be registered on the Trusts “Approved list of Contractors” and appointed as competent for the task. They will comply with the Trusts Policy and Procedures for the Operational Maintenance, Trusts Trust Policy and Procedure for the Management and Control of Contractors. Trusts Policy and Procedure for the Permit to Work Policy) and all other trust policies for which they have been appointed.

If the Main Contractor intend to use any other sub-contractors or self-employed individuals to provide services to the Trust these must also be registered with RCS and follow all instruction as required by the Trust for the Contractor and be approved by the Trust. They can register and subscribe themselves as companies or individuals.

4 PROCEDURE

Within Doncaster and Bassetlaw Teaching Hospitals Foundation Trust there are two categories of operational maintenance service which are as follows:

1. Planned Preventative Maintenance (PPM), this element avoids breakdown of crucial plant and equipment, maintains safety standards and statutory compliance and enables activities to be planned, thus keeping disruption to services to a minimum
2. Reactive Maintenance, this element is a repair service actioned normally by Estates and Facilities Management staff or user departments and comprises of (Priority 1), Urgent repairs patient area (Priority 2) urgent repairs non patient area (Priority 4) non urgent patient area (priority 5)

4.1 Methods of Communicating Repair Requests

All Emergency and urgent repair requests should be communicated by phone to the Trust Service Help Desk 644111 clearly identifying at the time of reporting and will be given a higher status by the Service Help Desk personnel.

The Trust operates an emergency ‘on call’ system for out-of-hours emergencies that is accessed via the switchboard. Switchboard will pass the call on to an Estates on-call Manager for action.

Non-urgent requests should be logged on email via the Trust intranet system.

4.2 Service Contracts

Complex or specialist equipment is usually covered by a Maintenance service contract (e.g. lifts, medical gases etc.) Response times for repairs may vary depending on the terms of the contract. External Maintenance contractors will follow the Trusts Policy & Procedures for the Management of Contractors and the Trusts Policy and Procedure for the Permit to Work System and will also follow all necessary site protocols, this will include all relevant infection prevention and control policies and procedures.

The Contractor must be on the Approved Contractors Register and before the Contractor Maintains any asset owned by the trust a Risk Assessment and Method Statement (RAMS) must be provided to the Trust. The person who is carrying out the work must also be appointed as a competent person.

The work will be controlled by a Permit to work which will be issued to the Competent Person as detailed in the Trusts Policy and Procedure for the Permit to Work System

4.3 Minor Works

Minor work is for work requests over and above normal maintenance procedures and frequencies.

Requests for Minor works and improvements will be logged through the Estates Helpdesk and logged as a priority 6, this will then be assessed with by the relevant Estates officer in consultation with and Estates Manager, the works will be checked to ascertain if the work need to be managed via the Infrastructure Team.

Additional works will be funded from the Ward or Departments budget requesting the work, the budget holder should be consulted to ensure funding is available before detail works are carried out.

4.4 Service Specification

Nature and Level of Service

The Maintenance Service Provision is a defect/reactive and PPM facility.

The defect/reactive system is an Intranet and telephone reporting system via the Trust Service Help Desk.

All calls, whether from the Trust or an external property will be routed through the Trust Service Help Desk and logged on the Estates Labour Management Information System. The person reporting the defect or making the request will be allocated a reference number. The Estates Maintenance Department will then deal with the request appropriately.

4.5 Reactive Maintenance

The Trust Service Help Desk categorises activities on a priority basis. These priorities are as follows:

Priority 1: Urgent in Patient Areas

Examples of Priority 1 response include but not limited to a breakdown or occurrence makes it impossible to adequately treat, look after, or maintain a safe environment for the patient (such as loss of electricity, or flood) or where it has a high impact on health and safety or when delay in attending could cause serious damage, or endanger security.

Priority 2: Urgent in Non-Patient Area

Examples of Priority 2 response include but not limited to, Health and safety issues, Disruption to activity, Minor electricity supply failure, Fire alarm faults, Heating and hot water system failure, Minor floods, Drain/Macerator blockages, Roof leaks, Glazing and Vandalism and break-ins presenting safety or security risk.

Priority 4: Non-Urgent in Patient Areas

Examples of Priority 4 response include but not limited to repairs which have a potential to affect the service not covered by priority 1 and 2.

Priority 5: Non-Urgent in Non- Patient Areas

Examples of Priority 5 response include but not limited to repairs that are not service affecting.

Priority 0: Long-Term Works- More than Seven Day Response

Examples of Priority 5 response include but are not limited to repairs than are of a more superficial nature or new work.

4.6 Planned Preventative Maintenance (PPM)

All Planned Preventative Maintenance (PPM) are assessed on a risk basis.

The PPM System enables agreed statutory obligations to be fulfilled and is designed to provide the most cost-effective method of maintaining buildings, existing plant, services and machinery for maximum economic life.

PPM is undertaken in line with all necessary Health Technical Memorandums and customer requirements.

The main categories of PPM are:

- Mandatory (e.g. health and safety requirements)
- Statutory (legal, technical memorandums, MHRA) requirements
- Essential (needs checking but is not covered by above)
- Good Practice (reduces reactive works or break downs)

The categories of activities are based on priority. These priorities are:

Priority 3: PPM tasks to meet Statutory and Mandatory Regulations or tasks required to meet Hospital Technical Memorandum (HTM) and Health Safety guidance notes, but that are not required to meet Statutory and Mandatory Regulations.

Priority 7: PPM tasks that could affect service delivery and which are not covered by Priority 3.

The PPM program will be reviewed annually by the Estates Operations Manager to ensure that necessary statutory, mandatory and customer requirements are covered. Any gaps in the PPM program will be identified by the Estates Operations Managers or Estates Manager and added to the Departmental or Divisional Risk Register for adequate management of potential risks. If the risks are serious, these gaps may also be reported to the appropriate governance committee.

Estates and Facilities staff and/or contractors undertaking PPM or reactive work will ensure that safe systems of work are always adhered to. These systems will include all necessary infection prevention and control policies and procedures. In addition, the Estates and Facilities team will attend regular infection prevention and control training and be fully trained in safe systems of working in clinical environments. Records of training will be held on the individual's personal record and on a Facilities Personnel risk register.

Performance of Estates Maintenance will be monitored as a 'Key Performance Indicator' (KPI). It will be given as a percentage of work completed on both reactive and PPM systems, as in sections 4.5 and 4.6 against Priority Categories 1 and 2.

4.7 Development and New Installations

All new development and installation work will consider both operational maintenance management and infection prevention and control at a prestart meeting, to assess implications for future operational issues.

Upon completion of all new development and installation work, handover documentation will give details of all final quality control inspections, together with commissioning data, manual and 'as-fitted' drawings. Once this is available, risk assessments, PPM and scheduled work will be planned.

5 DATA QUALITY AND ASSURANCE

To support effective delivery of the Planned Preventive Maintenance (PPM) programme, the Estates department is committed to maintaining high standards of data quality across all maintenance systems and records.

All asset and maintenance data must be:

- **Accurate** – records should reflect the actual condition, location, and service requirements of assets.
- **Complete** – no essential fields or maintenance records should be left incomplete or unlogged.
- **Timely** – data should be updated in real time or as soon as practicably possible following maintenance activity.
- **Consistent** – data entry should align with agreed naming conventions and formats.

Periodic data audits will be carried out to ensure accuracy and integrity of maintenance records. Any inconsistencies or errors identified will be rectified promptly, and appropriate training or system changes introduced to prevent recurrence.

6 ASSET MANAGEMENT

Effective asset management is a critical component of the Estates strategy, ensuring that all physical assets across the estate are properly identified, recorded, maintained, and reviewed throughout their lifecycle.

The Estates department will ensure the following:

- **Asset Register:** A comprehensive and up-to-date asset register will be maintained, including plant, equipment, infrastructure, and building components. Each asset will have a unique identifier and be categorised by location, type, and maintenance requirement.
- **Lifecycle Management:** Assets will be managed through their full lifecycle — from acquisition and installation, through to maintenance, renewal, or decommissioning.
- **Condition Surveys:** Regular condition assessments will be undertaken to inform capital planning, risk assessments, and prioritisation of maintenance works.
- **Link to PPM Programme:** Each asset will be assigned appropriate maintenance schedules within the Planned Preventive Maintenance (PPM) programme based on manufacturer guidance, statutory requirements, and operational risk.
- **Responsibility and Oversight:** A nominated Estates lead will be responsible for the accuracy and oversight of asset data, ensuring alignment with operational and strategic planning.

- **Change Control:** Any changes to assets (e.g., additions, removals, major repairs) must be formally recorded and reflected within the central maintenance system.
- **Audit and Review:** Routine audits will be conducted to verify the asset register's accuracy. Discrepancies will be investigated and addressed promptly.

The Estates team will utilise the asset data to support capital planning, backlog maintenance reporting, compliance monitoring, and risk management.

7 TRAINING/SUPPORT

Training is essential so that personnel will have a sound understanding of the principles, design and function of all equipment they maintain.

Staff (from both the Trust and contractors) must be suitably trained and qualified to carry out maintenance work. This includes training in the requirements of the Health and Safety at Work Act 1974, HTMs and any other appropriate regulations.

Please note: The Standard Training Needs Analysis (TNA) – The training requirements of staff will be identified through a training needs analysis. Role specific education will be delivered by the service lead.

8 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

The Estates team will implement ongoing performance monitoring processes to ensure the effective delivery of the PPM programme. This includes:

- Regular review of completion rates against scheduled PPM tasks.
- Monitoring response and resolution times for statutory and non-statutory tasks.
- Reporting compliance levels to the relevant Governance Group or equivalent oversight body.
- Conducting internal quality assurance checks, including random audits of completed work to ensure it meets safety and compliance standards.
- Ensuring documentation (e.g., service reports, certification) is uploaded and appropriately stored.

Where underperformance is identified, a clear action plan will be developed and implemented, including escalation processes where required. These measures ensure services are delivered safely, efficiently, and in accordance with statutory and contractual obligations.

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
The Monitor and Compliance and Effectiveness of this Policy	Risk and Governance Facilitator	Annually	Action plan with timeline, To the Operational Director of Estates & Facilities
Review of Policy	Deputy Operational Director of Estates & Facilities	3 Yearly or when significant change to process	Approval from Estates & Facilities SMT

Monitor Approved Contractors Register	Head of Estates/ Compliance	Annually	Action plan with timeline, To the Operational Director of Estates & Facilities
Monitor Competent Persons Register	Head of Estates/ Compliance	Annually	Action plan with timeline, To the Operational Director of Estates & Facilities
Review of Planned Preventative Maintenance (PPM) Schedules	Head of Estates	Annually	Action plan with timeline, To the Operational Director of Estates & Facilities
Audit of Labour Management System	Head of Estates/ Compliance	Annually	Action plan with timeline, To the Director of Estates & Facilities

9 DEFINITIONS

PPM – Planned Preventative Maintenance

HTM – Health Technical Memorandum – A document that provides guidance on the design, installation, and operation of specialized building and engineering technology used in healthcare.

10 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27), the Equality Diversity and Inclusion Policy (CORP/EMP 59) and the Civility, Respect and Resolution Policy (CORP/EMP 58).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. ([See Appendix 1](#))

11 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

PAT/PA 19 – mental Capacity Act 2005 Policy and Guidance, including Deprivation of Liberty Safeguards (DoLS)

PAT/PA 28 - Eliminating Mixed Sex Accommodation whilst maintaining Privacy and Dignity Policy

CORP/HSFS 30 - Management of Contractors.

CORP/HSFS 31 - Permit to Work.

12 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR) 2021).

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website:

<https://www.dbth.nhs.uk/about-us/our-publications/information-governance/>

13 REFERENCES

The Management of Health and Safety at Work Regulations 1999
 Confined Space Regulations 1997
 Construction (Health, Safety & Welfare) Regulations 1996
 Control of Asbestos at Work Regulations 2012
 Health and Safety at Work act 1974
 Health and Safety (First Aid) Regulations 1981
 Electrical Safety, Quality and Continuity Regulations 2002
 Electromagnetic Compatibility Regulations 1992
 Provision & Use of Work Equipment Regulations 1998
 Health and Safety (first aid) Regulations 1981
 Personal Protective Equipment Regulations 2002
 Manual Handling Operations Regulations 1999
 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
 Confined Spaces Regulations 1997
 Lifting Operations & Lifting Equipment Regulations (LOLER) 1998
 Personal Protective Equipment at Work Regulations 1992
 Provision and Use of Work/Equipment Regulations 1992
 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
 Pressure Systems Safety Regulations 2000
 The Construction (Design and Management) Regulations 2015
 The Electricity at Work Regulations 1989
 The Noise at Work Regulations 1989
 The Working at Height Regulations 2005

This list is not exhaustive and is the responsibility of Staff and Contractor to ensure that they are conversant with all relevant legislation.

APPENDIX 1 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Division	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Operational Maintenance Policy	Estates & Facilities	James Hutchinson	New Policy	15 August 25
1) Who is responsible for this policy? Name of Division/Directorate: Estates & Facilities - Estates				
2) Describe the purpose of the service / function / policy / project/ strategy? Who is it intended to benefit? What are the intended outcomes? It is a Trust Policy covering the guidelines, regulations, and duty of care for all staff and contractors undertaking work on Trust properties in relation to the Operational Maintenance				
3) Are there any associated objectives? Legislation, targets national expectation, standards: Compliance with HTM's for healthcare.				
4) What factors contribute or detract from achieving intended outcomes? – Awareness of Procedures for Operational Maintenance.				
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? Details: [see Equality Impact Assessment Guidance] - No				
<ul style="list-style-type: none"> If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] – N/A 				
6) Is there any scope for new measures which would promote equality? [any actions to be taken] N/A				
7) Are any of the following groups adversely affected by the policy?				
Protected Characteristics	Affected?	Impact		
a) Age	No			
b) Disability	No			
c) Gender	No			
d) Gender Reassignment	No			
e) Marriage/Civil Partnership	No			
f) Maternity/Pregnancy	No			
g) Race	No			
h) Religion/Belief	No			
i) Sexual Orientation	No			
8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
<i>*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form – see CORP/EMP 27.</i>				
Date for next review: 15 Aug 28				
Checked by: Mathew Gleadall			Date 15 Aug 25	