

DOCUMENT CONTROL	
Title:	Electrical Safety Policy
Version:	2
Reference Number:	CO116
Scope:	
This Policy and its procedures apply to all persons (staff, contractors, patients and visitors) who may be affected by any electrical work being undertaken (including use or contact with electrical equipment) at any of the Trusts properties that are currently owned or leased by the Trust, and at any properties that may be purchased or leased in the future.	
Purpose:	
It is the policy of the Trust that all Electrical installations and equipment are installed, inspected, serviced and maintained in accordance with all Statutory Requirements, NHS Guidelines, Health Technical Memoranda or similar, to ensure that such installations and equipment does not pose a health or operational risk to either, staff, patients or members of the public.	
Requirement for Policy	
PAT Testing	
Keywords:	
Electrical, PAT Testing, UPS, Maintenance	
Supersedes:	
Version 1	
Description of Amendment(s):	
Full re-write: Reflects how the Estates Department manage and work with the systems. Added to new template.	
Owner:	
Estate Operations Engineer – Warren Duffy	
Individual(s) & group(s) involved in the Development:	
This document has been developed in collaboration with the following interested parties: <ul style="list-style-type: none"> • Estates and Capital Investment 	

Individual(s) & group(s) involved in the Consultation:	
The document has been circulated for consultation and comments have been taken into consideration and the document amended accordingly:	
<ul style="list-style-type: none"> • Estates and Capital Investment • Health & Safety • Electrical Group 	
Equality Impact Analysis:	
Date approved:	27 th of September 2018
Reference:	CO116 – EIAC0116
Freedom of Information Exemption Assessment:	
Date approved:	5 th of August 2018
Reference:	POL2018-50
Information Governance Assessment:	
Date approved:	5 th of August 2018
Reference:	POL2018-50
Policy Panel:	
Date Presented to Panel:	6 th September 2018
Presented by:	Warren Duffy
Date Approved by Panel:	6 th September 2018
Policy Management Team tasks:	
Date Executive Directors informed:	18 th of September 2018
Date uploaded to Trust's intranet:	28 th of September 2018
Date uploaded to Trust's internet site:	28 th of September 2018
Review:	
Next review date:	September 2021
Responsibility of:	Estate Operations Engineer
Other Trust documentation to which this policy relates (and when appropriate should be read in conjunction with):	
CO009	Health & Safety Policy

Policy Associated Documents:	
TAD_CO116_01	LV permit Request Procedure
TAD_CO116_02	Trust LV Management Structure
TAD_CO116_03	PAT – Ongoing Maintenance Plan
TAD_CO116_04	Outline Procedures
Other external documentation/resources to which this policy relates:	
Health & Safety Guideline 107 (Third edition) 2013	http://www.hse.gov.uk/pUbns/priced/hsg107.pdf
HTM 06-01	Electrical Services Supply & Distribution
HTM 06-02	Electrical Safety for LV systems
HTM 06-03	Electrical Safety Guidance for HV systems
	Electricity at Work Regulations 1989
HSE INDG246 (V3)	Maintaining portable electrical equipment
CQC Regulations	
This Policy supports the following CQC regulations:	
Regulation 15	Premises and Equipment

Contents Page

1.	Introduction	5
2.	Purpose	5
3.	Responsibilities, Accountabilities & Duties	5
4.	Live Working	6
5.	Maintenance	6
6.	Capital Projects and New Work	7
7.	System Monitoring	7
8.	Training	8
9.	Records	8
10.	Portable Appliance Testing (PAT)	8
11.	Associated Documentation	9
12.	Equality Impact Analysis	10
13.	Freedom of Information Exemption Assessment	10
14.	Information Governance Assessment	10
15.	Safeguarding	11
16.	Monitoring	11
17.	Review	11

1. INTRODUCTION

Pennine Care NHS Foundation Trust, (The Trust), and its Health and Safety Policy, outlines its commitment to protecting and continually improving the health, safety and wellbeing of all patients, visitors, staff, external contractors and the wider community, through responsible and effective management and development of the natural and built environment.

This Electrical Safety Policy is issued with the permission of the Trusts Chief Executive and will apply to all activities taking place within the trust related to the provision of electrical power.

This Policy and its procedures apply to all persons (staff, contractors, patients and visitors) who may be affected by any electrical work being undertaken (including use or contact with electrical equipment) at any of the Trusts properties that are currently owned or leased by the Trust, and at any properties that may be purchased or leased in the future.

2. PURPOSE

It is the policy of the Trust that all Electrical installations and equipment is installed, inspected, serviced and maintained in accordance with all Statutory Requirements, NHS Guidelines, Health Technical Memoranda or similar, to ensure that such installations and equipment does not pose a health or operational risk to either, staff, patients or members of the public.

This Policy applies to the Trusts Electrical High Voltage (HV), Low Voltage (LV) and Extra Low Voltage (ELV) infrastructure;

- Up to and including the point of use/local isolation from the LV system
- Building services plant and non-medical equipment connected to its LV system

This policy does not apply to the following:

- ICT systems, wiring, components or its equipment
- Security systems, wiring, components or its equipment;
- Patient Connected Medical Electronic systems
- Fire Alarm Systems (Load side of supplies)

3. RESPONSIBILITIES, ACCOUNTABILITIES AND DUTIES

The following Roles and Responsibilities are adopted by the Trust and are guided in HTM 06:02:

Duty Holder – The Duty Holder is a person on whom the Electricity at Work Regulations 1989 impose a duty in connection with safety

Management – Management is defined as the owner, occupier, employer, general manager, chief executive or other person in a healthcare organisation, or their appointed responsible contractor, who is accountable for the premises and who is responsible for issuing or implementing a general policy statement under the Health and Safety at Work etc. Act 1974.

Designated Person – The role of the DP is to appoint an Authorising Engineer (LV) for all systems which the Trusts management has responsibility.

Authorising Engineer (LV) – The Authorising Engineer has responsibility to monitor the implementation of guidance given in HTM 06 02. The Authorising Engineer will also appoint in writing the Authorised Person subject to training and assessment. The Authorising Engineer will define the scope of duties for the Authorised Person due to the complexity of the Trust's Electrical equipment.

Authorised Person (LV) – An Authorised Person (LV) is appointed in writing by the management on the recommendation of the Authorising Engineer (LV) in accordance with this safety guidance (LV) and is responsible for the implementation and operation of this guidance with regard to work on, or the testing of, defined electrical equipment.

Competent Person (LV) – A Competent Person (LV) is approved and appointed in writing by an Authorised Person (LV) for defined work, possessing the necessary technical knowledge, skill and experience relevant to the nature of the work to be undertaken, who is able to prevent danger or, where appropriate, injury, and who is able to accept a permit-to-work from an Authorised Person (LV).

Accompanying Safety Person (ASP) – An Accompanying Safety Person is a person not involved in the work or test who has received training in emergency first-aid for electric shock and who has adequate knowledge, experience and the ability to avoid danger, keep watch, prevent interruption, apply first-aid and summon help. The person is to be familiar with the system or Installation being worked on or tested, and is to have been instructed on the action to be taken to safely rescue a person in the event of an accident.

The Trust LV Management structure is showing in TAD_CO116_02

4. LIVE WORKING

The Trust does not authorise Live Working on any of its Electrical Systems (LV/HV). The Trusts interpretation of *Regulation 14* of Electricity at Work Regulations 1989 considers Live Working to be;

- When the front cover of a distribution board/consumer unit/switchgear is removed whilst still energised (including for visual inspection)
- Final circuits are worked on without being safely isolated
- Final circuits are worked on with no lock out equipment at the protective device
- Work on Emergency Back-Up equipment that has not been disconnected

5. MAINTENANCE

Low Voltage

The Trust employs specialists in the relevant areas for the maintenance of its electrical distribution systems. This includes:

- Periodic Testing and Inspections of fixed equipment (these are at 5 year frequencies)
- UPS (Uninterruptable Power Supply) Systems and batteries (bi-annually)

- Standby Emergency Generators (these are serviced bi-annually)

The in-house maintenance teams will cover all re-active electrical maintenance items. It is a Trust requirement that all final circuits that have had additions/alterations made, are only put back into service once a Minor Works Certificate has been completed to confirm presence of the circuit protective conductor.

High Voltage

The Trust has an on-going COMA (Controlled Operation Maintenance Agreement) in place with Electricity Northwest to maintain all HV switchgear on Trust property. Records of this is stored within the Estates Department.

Please note: LV Permit Request procedure is in TAD_CO116_01 of this document.

6. CAPITAL PROJECTS AND NEW WORK

It is the responsibility of the Capital Project Manager to inform the Authorised Person(s) of any Capital Investment work which may affect the Electrical Distribution System.

It is the responsibility of any member of the Estates Department who orders New Work affecting the Electrical Distribution System to involve the Authorised Person(s). The Project Manager (Capital Investment, Estates & Maintenance Department member) must be made aware of, via the design consultant or Trust AP:

- Discrimination
- Diversity
- Overload
- Back-up systems and loading (Generators, batteries, UPS)
- Essential and Non Essential Services
- Amendments to the Trust's Electrical Distribution Schematics
- On-going Maintenance (Periodic Testing and Inspections)
- Completion Certification

Please note: LV Permit Request procedure is in TAD_CO116_01 of this document.

Capital Projects and New works that may be under alternative Regulations, such as Construction Design & Management Regulations 2015, do not need to use this policy as a terms of reference but must show consideration when working

7. SYSTEM MONITORING

The Trust has implemented a Management group to manage the electrical systems within its premises. This group is known as the Electrical Group and consists of the Authorised Persons. The Group report to the Head of Estates and the Authorising Engineer. Notes from the group are held within the Trusts LV Logbook.

The below table gives frequencies and information for audits and who is responsible for the audits and the actions:

Audit Type	Frequency	Auditors	Actions by
H.V Switchgear	Annually	COMA (ENW ltd)	A.E/A.P
H.V Documentation	Annually	A.E	A.P
L.V Switchgear	Quarterly	A.P	A.P
L.V Documentation	Annually	A.E	A.P
Authorised Person(s)	Annually	A.E	A.P
Competent Person(s)	Annually	A.P	A.P
First Aid Training	Annually	A.P	A.P

8. TRAINING

The Trust recognises that it must offer relevant, up to date training to those with a responsibility for working on, or managing the Electrical Distribution Systems throughout the Trust. Training requirements and frequencies will follow those outlined in HTM 06-02, or by way of Risk Assessment. The Trust acknowledges as standards are updated, the training requirements will also need to be reviewed. Relevant training information will be stored within the Trusts LV Logbook.

9. RECORDS

Records for work relating to the electrical infrastructure for the Trust will be kept in the Trusts LV Logbook and is to be kept updated by the Authorised Person(s). The LV Logbook is to be kept in a secure, lockable cupboard with access controlled by the Authorised Person(s) only.

These records will include:

- Permit to work and associated documentation (Safety Programme, Isolation & Earthing Diagram, Limitation of Access, Authorisation for Live Working, Permission to Disconnect)
- Training Records
- Audit reports by the Authorising Engineer
- Notes/Minutes of any group with reference to Electrical Safety
- Estate Facilities National Alerts
- Authorised Person on Duty Rota
- Contractors Competency records
- Copies of the COMA for HV

10. PORTABLE APPLIANCE TESTING (PAT)

10.1 Scope

Whilst acknowledging that there is no legal requirement to carry out PAT Testing nor is there a prescriptive specification on what shall be done, or by who, or how often, The Duty Holder of The Trust should select precautions they deems necessary to demonstrate best practice and ensure the safe management of the electrical appliances.

However, there is still a risk identified in having portable electrical equipment in circulation on the Trusts premises. The risk is controlled by way of Risk Assessment and periodic

inspection of equipment, which identifies potential hazards, and this allows The Trust can do everything that is reasonably practicable to ensure safety to those using the equipment.

10.2 User Responsibility

The User has a responsibility to visually check the equipment is safe before putting the equipment into use. The following pathway should be used when checking the safety of portable appliances:

- Initial checks by the user;
- Formal visual inspections by a competent person;
- Where necessary a combined inspection and test, also known as a portable appliance test (PAT), by a suitably trained person.

The above is further detailed in **Health & Safety Guideline 107 (Third edition) 2013**.

10.3 On-Going Maintenance Plan

The Trust has an on-going maintenance plan for PAT to assist in ensuring safety is upheld:

- The scope of the on-going maintenance plan is to ensure all Trust premises are visited annually. (TAD_CO116_03)
- The Trust does have a labelling procedure which is in-line with the 'suggested maintenance intervals' which is shown in **HSG 107 – Table 1**.
- Equipment with a label with a date that has expired does not suggest the equipment is unsafe. However, the Trust strongly encourages that any equipment that fails a user visual inspection is taken out of service immediately and is reported to the EFM Helpdesk.
- Ad-hoc portable appliance testing will be prioritised accordingly.

10.4 PAT Supporting Documentation

The Trust embraces all current guidance from **HSE Publications - HSG107 (Maintaining Portable Electrical Equipment)** and **INDG236 (Rev 3- Maintaining Portable Electric Equipment in Low-Risk environments)** but recognises that this is guidance information only and that any frequencies or statements are only suggestions and there is no obligation to carry these out, and that all frequencies of PAT will be governed by way of Risk Assessment.

Regulations, (Electricity at Work Regulations 1989), require that all electrical systems are safe, and the Trust accomplishes this by complying with BS 7671.

11. ASSOCIATED DOCUMENTATION

11.1 Legal Duties:

- Health and Safety at Work Act 1974

11.2 Regulations that underpin the Acts:

- Confined Spaces Regulations 2009
- Control of Major Accident Hazard Regulations 1999 (amended 2005) Building Regulations 2015

- Electricity at Work Regulations 1989
- Health and Safety (Consultation with employees) Regulations 1996 Health and Safety (Display Screen Equipment) Regulations 1992 Health and Safety (First Aid) Regulations 1981
- Health and Safety (Signs and Signals) Regulations 1996
- Management of Health and Safety at Work Regulations 1999 (amended 2006)
- Personal Protective Equipment Regulations 2002
- Provision and Use of Work Equipment Regulations 1988
- Reporting of Injuries Diseases and Dangerous Occurrences Regulations 1995
- Work at Height Regulations 2005 (amended 2007)
- Waste Electrical & Electronic Equipment Regulations 2013

11.3 British Standards:

- BS 7671 Requirements for Electrical Installations
- BS8300: 2009 Design of Buildings and Their Approach to Meet the Needs of Disabled People

11.4 Department of Health Guidelines

- Health Building Notes
- Health Facility Notes
- Health Guidance Notes
- Health Technical Memorandum

12. EQUALITY IMPACT ANALYSIS

As part of its development, this document was analysed to consider / challenge and address any detrimental impact the policy may have on individuals and or groups protected by the Equality Act 2010. This analysis has been undertaken and recorded using the Trust's analysis tool, and appropriate measures will be taken to remove barriers and advance equality of opportunity in the delivery of this policy.

13. FREEDOM OF INFORMATION EXEMPTION ASSESSMENT

Under the Freedom of Information Act (2000) we are obliged to publish our policies on the Trust's website, unless an exemption from disclosure applies. As part of its development, this policy was assessed to establish if it was suitable for publication under this legislation. The assessment aims to establish if disclosure of the policy could cause prejudice or harm to the Trust, or its staff, patients, or partners. This assessment has been undertaken using the Trust's Freedom of Information Exemption Guide, and will be reviewed upon each policy review.

14. INFORMATION GOVERNANCE ASSESSMENT

This Policy has been analysed to ensure it is compliant with relevant information law and standards as in place at the time of approval, and are consistent with the Trust's

interpretation and implementation of information governance components such as data protection, confidentiality, consent, information risk, and records management.

Compliance will be reviewed against any changes to legislation / standards or at the next review of this document.

15. SAFEGUARDING

All staff have a responsibility to promote the welfare of any child, young person or vulnerable adult they come into contact with and in cases where there are safeguarding concerns, to act upon them and protect the individual from harm.

All staff should refer any safeguarding issues to their manager and escalate accordingly in line with the Trust Safeguarding Families Policy and Local Safeguarding Children/Adult Board processes.

16. MONITORING

The effective application of this policy, including adherence to any standards identified within will be subject to monitoring using an appropriate methodology and design, such as clinical audit.

Monitoring will take place on a biannual basis and will be reportable to the Quality Group via the Clinical Effectiveness and Quality Improvement Team.

17. REVIEW

This policy will be reviewed three-yearly unless there is a need to do so prior to this; e.g. change in national guidance.