HEALTH SURVEILLANCE POLICY

February 2016

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EXECUTIVE SUMMARY

1.0 Key messages

1.0.1 NHS Lothian shall ensure that suitable precautions are taken to ensure the health and wellbeing of NHS Lothian staff (and other persons by prior arrangement) working for or using its premises in order to fully comply with legal requirements and its general duty of care.

1.0.2 Certain statutory legislation includes a requirement for staff exposed to specific health risks to undergo periodic health checks, where checks are required by appropriate legislation these are defined in law as statutory health surveillance. See Section 5.0 for the full range of relevant legislation.

1.0.3 Following suitable and sufficient risk assessment to confirm the need for health surveillance, NHS Lothian shall ensure that there is an appropriate and effective system in place for the statutory health surveillance of those members of NHS Lothian staff exposed to specific physical, mechanical, chemical or biological hazards within the course of their employment.

1.0.4 This policy shall be supported by subject specific procedure documents that must be read in conjunction with this policy and shall provide relevant management with clear and concise instructions on their role with respect to the different categories of health surveillance (skin health, vibration, hearing etc.).

1.0.5 NHS Lothian managers and staff shall fully comply with the content of this policy and participate in the recording (on Datix) and investigation of occupational health related incidents in accordance with the NHSL Adverse Event Management Policy. This will include the reporting of certain adverse events relating to occupational illness as RIDDOR events to the HSE, subject to advice from NHS Lothian Health and Safety Services.

1.0.6 The Director of Occupational Health and Safety Services (OHSS) shall ensure (primarily through identification of key roles and responsibilities), that critical activities pertaining to the Health Surveillance Policy are undertaken and that documentation is in place to record and administer the health surveillance system. Such documents will be held in accordance with relevant document control and retention policies applicable for both NHS Lothian and UK/Scottish Governments, including those pertaining to confidentiality and legal considerations.

1.0.7 The Director of Occupational Health and Safety Services (OHSS) shall also ensure that the contents of this policy and associated procedure material shall compliment and conform to the content of any internal NHSL Occupational Health and Safety Directorate documentation related to statutory health surveillance. Basically internal OHSS documents should not contradict this Policy or Procedures.

1.1 Legislative caveat

This Policy was published in 2015; consequently readers should be aware that in the period between publication and review there may be changes to standards or legislation referred to within this Policy document.
2.0 Introduction

2.1 A key principle of any organisation is to ensure the health, safety and welfare of people directly employed by the organisation. This includes consideration of people directly affected by its activities, in the context of the NHS Lothian; this extends to patients, visitors, students and contractors etc.

2.2 For a full definition of health surveillance refer to Section 6.0 below, however in simple terms, health surveillance applies specifically to NHS Lothian staff who may undertake tasks and activities that expose them to risks that may in turn necessitate regular health surveillance or fitness for work assessment. The purpose of health surveillance is to identify at the earliest opportunity the requirement to institute changes to working practices or specialist clinical support as required.

2.3 This Policy provides an overview of NHS Lothian’s health surveillance approach with associated procedures providing further detail on the implementation requirements for specific categories of health surveillance.

2.4 NHS Lothian must seek to achieve full compliance with all health and safety legislation that explicitly or implicitly requires the determination of the need for health surveillance for employees. Relevant health and safety legislation is outlined in Section 5.0.

2.5 The type of health surveillance required in a given work environment will be determined through an evaluation of the risks to which employees may be exposed through the use of a suitable and sufficient risk assessment outlined in Section 8.0.

3.0 Policy Objectives

3.1 This policy establishes the framework for statutory health surveillance within NHS Lothian with due regard to the following key objectives:

a) To identify the roles and responsibilities associated with statutory health surveillance within NHS Lothian.

b) To outline the framework of the statutory health surveillance system and the risk reduction and prevention strategy for NHS Lothian with due reference to NHS Lothian Occupational Health and Safety procedures, policies and associated procedure documentation where applicable.

c) To outline the arrangements for reporting and monitoring of issues associated with statutory health surveillance, including document and statistical data compilation.

d) To outline the process for audit and review to ensure the effectiveness of corrective measures and that continual improvement is sought.
4.0 Scope of the Policy

4.1 This policy shall apply to all NHS Lothian staff working in premises owned by NHS Lothian and/or premises managed by NHS Lothian Estates where patients, staff, visitors and other users (including contractors) have access.

4.2 The scope of this Policy shall include persons employed by other organisations only by prior agreement with the NHS Lothian Director of Occupational Health and Safety Services. Historically for example some persons employed by PFI providers have been provided with health surveillance through the auspices of NHS Lothian either on a limited ad hoc basis or potentially as an income generation opportunity.

4.3 Where NHS Lothian staff are based in premises that are neither owned by NHS Lothian nor managed by NHS Lothian Estates, for example a PFI facility, there shall be a commitment by NHS Lothian to fully co-operate with the owner/operator of such premises with respect to any 'local' health surveillance arrangements that may be in place. Such arrangements may include a combination of NHS Lothian and owner/operator protocols following agreement with NHS Lothian and shall be communicated to relevant NHS Lothian staff accordingly.

5.0 Legal Considerations

5.1 With respect to ensuring the health and wellbeing of staff there is key health and safety legislation which NHS Lothian must comply with and within the context of health surveillance this includes, but is not limited to, the following:

5.2 *The Health and Safety at Work etc. Act 1974* establishes in broad terms the duty of care that NHS Lothian owes to its employees and the core requirements for health and safety. This specifically mentions the need, so far as is reasonably practicable, to ensure the absence of risks to health in connection with the use, handling, storage and transport of articles and substances.

5.3 *The Management of Health and Safety at Work Regulations 1992 & (Amendment) Regulations 2006* requires every employer to make a suitable and sufficient assessment of all risks to health and safety of employees and other persons affected by their work activities. In order to achieve this aim there is a requirement for appropriate arrangements to be in place for effective planning, organisation, control, monitoring and review of any measures to safeguard health and safety.

5.4 *Control of Substances Hazardous to Health (COSHH) Regulations 2002 & (Amendment) Regulations 2004* applies to microorganisms and to chemicals that employees may be exposed to and establishes that employers have a duty to assess the risks from exposure to these substances in order to ensure that they are adequately controlled. There is also specific reference within this legislation to the need to consider health surveillance in the context of hazardous substances.
In essence the legislation states that there is a legal duty of care placed on an employer that includes a requirement to ensure that the risks arising out of or in connection with work activities to which their employees may be exposed are suitably and sufficiently assessed and where necessary that suitable and effective health surveillance is provided to monitor and protect the health and wellbeing of those employees. Where any health and safety legislation identifies a need for health surveillance this is defined in law as ‘statutory’ health surveillance.

5.5 In addition to the legislation noted above there are specific regulations covering Noise (Control of Noise at Work Regulations 2005) and Vibration (Control of Vibration at Work Regulations) which may also initiate health surveillance. It should however be mentioned that the management of Radiation within NHS Lothian is covered by a separate Policy:


5.6 It should also be noted that the Public Health (Infectious Diseases) Regulations 1988 require that an appointed officer (the Head of Public Health in the case of NHS Lothian) shall inform the Chief Medical Officer for Scotland, of any serious outbreak of any disease that to his/her knowledge has occurred in the district. While not strictly part of the health surveillance process per se, this legislation is included as it relates to the wider issue of Public health which may have implications for NHS Lothian staff.

6.0 Health Surveillance Principles

Health surveillance is aimed at the early identification of ill health and identifying areas for improvement with respect to work activities.

6.1 Health surveillance is essentially a system of ongoing health checks for employees working with, or exposed to, noise, vibration, ionising radiation, hazardous substances, fumes, dusts and biological agents.

Health surveillance is typically carried out by Occupational Health Nursing Services Staff Nurses, but can also be carried out medical officers appointed by the Health and Safety Executive, doctors or trained designated responsible persons and can be supported by health questionnaires, both at the pre-employment stage and periodically thereafter.

The aim of health surveillance can be summarised as follows:

- To detect ill health in individuals at the earliest opportunity to ensure that treatment and support are provided as quickly as possible
- To enable NHS Lothian to identify changes in working practices or controls needed to prevent re-occurrence of ill health and to provide feedback for risk assessment purposes
To provide an opportunity for staff to raise concerns about the effects of work on their health

To provide statistical data to allow NHS Lothian to evaluate health risks for the organisation

Health surveillance also helps to reinforce training and safety messages by highlighting the consequences to an individual’s health of failing to follow identified risk reduction measures.

Identifying areas for improvement with respect to work activities.

6.2 Types of health surveillance undertaken within NHS Lothian include:

- Audimetry – where staff are regularly exposed to noises levels of 85db or above
- Hand-Arm Vibration (HAV) – primarily where staff use hand held equipment that vibrates i.e. power tools such as grinders or strimmers
- Respiratory (spirometry) – primarily for staff exposed to potential airborne sensitisers and asthmagens at work.
- Skin – primarily for staff exposed to sensitisers/irritants, wet work, frequent hand hygiene or glove changes, where exposure to some or all of these factors may result in skin disease or reactions/changes to skin.

Additional information on the types of health surveillance and crucially the roles and responsibilities of employees and management are outlined in the following Section and in specific health surveillance procedure documentation that accompanies this Policy. In addition information regarding the risk assessment process that determines the need for health surveillance can be found in Section 8.0 below.

7.0 NHS Lothian Organisational Roles and Responsibilities

While the ultimate responsibility and accountability for Policy implementation resides with the Chief Executive and Board of NHS Lothian, in practice this Policy shall be implemented through assigned roles and responsibilities primarily within, but not limited to, the Occupational Health and Safety Directorate.

Organisational Roles and Responsibilities can be summarised as follows;

7.1 The Chief Executive and NHS Lothian Board is responsible for:

a) Ensuring the full and effective implementation of this Policy and of the key aims identified within the NHS Lothian Health and Safety Policy

b) Ensuring there are suitable and sufficient arrangements in place for the management of health surveillance within NHS Lothian, including necessary resources, monitoring processes and incident oversight where appropriate.
c) Ensuring that the Lothian Partnership Forum review this Policy when changes occur or where the Policy review date has been reached.

7.2 The Director of Occupational Health and Safety is responsible for:

a) Providing the Chief Executive and NHS Lothian Board with information pertaining to the management of health surveillance within NHS Lothian and professional advice as required. This shall include a commitment to provide assurance, to the Chief Executive and NHS Lothian Board, that their corporate level responsibilities have been fully met in practice.

b) Providing a point of contact between NHS Lothian and external parties, including relevant enforcing authorities (i.e. HSE) and Governmental or Professional bodies. With due consideration of any potential shared or co-operative arrangements for health surveillance with respect to the Integrated Joint Board Structure and the Health and Social Care Partnerships.

c) Liaison with Medical Directors and management teams whose staff are subject to frequent changes of base or the nature of their works includes irregular working patterns (Medical staff, District Nursing, Bank Staff etc.). The aim is to ensure that there are robust systems in place to ensure that these staff groups are fully covered by the health surveillance management system.

d) Ensuring that NHS Lothian has a robust system and organisational structure in place for the management of health surveillance.

e) Ensuring there is full compliance with relevant legal considerations.

f) Ensuring that specific roles and responsibilities required to achieve full compliance with the provisions of this Policy are assigned and are fully effective in practice. These roles and responsibilities shall be clearly defined in greater detail within the subject specific health surveillance procedure documentation that accompanies this Policy (skin health, vibration, noise etc.).

g) Ensuring there is a robust mechanism for the monitoring and validation of the health surveillance system and that measures are in place to provide statistical data on surveillance outcomes. To provide feedback to relevant managers on the outcomes of health surveillance to enable actions to be taken to address work related issues identified and to provide suitable support and guidance to staff therein.

h) Ensuring there are suitable arrangements in place for the review and audit of this policy document to ensure that the policy remains fit for purpose and that full policy compliance is achieved. With due reference to Section 12.0 Audit and Review.

7.3 Directors of Operations, Hospital Site Directors and Service Directors are responsible for:

a) Ensuring all managers are aware of this Policy and the requirements contained therein.
b) Liaising with Occupational Health and Safety Services to determine any site specific conditions that may apply with respect to the management of health surveillance for example where PFI contracts exist and there are any ad hoc or income generation arrangements in place.

c) Ensuring the NHS Lothian Health and Safety Committee is apprised of the status of health surveillance pertaining to their area of responsibility and is promptly notified of any issues identified with respect to operational procedures, management controls or significant incidents relating to health surveillance.

d) Ensuring that information pertaining to the frequency and extent of skin health surveillance and other statistical data is readily available for collation by Occupational Health and Safety Services or at the request of the enforcement body (HSE).

e) Ensuring that when a formal notification of a diagnosis of an occupational condition has been received by a line manager in relation to an NHS Lothian employee, that a RIDDOR Form is duly completed and submitted to the Health and Safety Executive immediately. NHS Lothian Health and Safety Services can provide advice and support on how to report an ‘occupational illness’ related RIDDOR.

7.4 CMTs/Service Managers/Charge Nurse or equivalent is responsible for:

a) Ensuring staff awareness of the contents of this Policy and relevant sections of the associated health surveillance procedure documentation pertaining to their area of responsibility. This is undertaken at corporate and local induction and periodically at local level to maintain awareness.

b) Determining the need for statutory health surveillance through the process of risk assessment and compliance within the system therein, with support provided primarily by Occupational Health and Safety Services as required.

c) Ensuring, where the need for statutory health surveillance is confirmed, that this is duly recorded within the appropriate risk assessment (or COSHH Assessment) and that the need for health surveillance is also recorded in the job descriptions of the posts concerned and in any associated recruitment documentation.

d) Ensuring that lists of staff subject to statutory health surveillance are created and maintained and that policy (or procedure) requirements pertaining to the creation, retention and transfer of documentation is adhered to. This is with due reference to any document record keeping or confidentiality requirements therein (see 10.0, 11.0 and relevant procedure sections, with particular focus on section 11.6).

e) Ensuring that where the outcome of statutory health surveillance results in restrictions to work for a given member of staff, that these restrictions are duly applied in practice.
f) Ensuring that any staff members deemed unfit for specific duties by Occupational Health due to a health condition do not carry out these duties until the condition improves and this has been formally advised by OH. The relevant line manager will aim to provide alternative work in the interim period.

g) Ensuring that adverse events related to occupational illness are duly recorded on Datix and investigated using the NHS Lothian Adverse Event Management Policy, the NHS Lothian Adverse Events Management Operational Procedure where applicable and that NHS Lothian Occupational Health and Safety are duly notified of any adverse events likely to result in a RIDDOR submission to the HSE (Health and Safety Executive).

The requirement to report a case under RIDDOR is determined by management receiving formal notification of a diagnosis of a work related illness from NHSL Occupational Health or potentially the individual’s GP. In the latter case management should inform Health and Safety Services by way of an alert and to obtain any support or guidance that may be required.

Where NHSL Occupational Health has carried out the diagnosis, the Head of Health and Safety will receive written confirmation from Occupational Health indicating that the relevant RIDDOR reporting criteria have been met.

7.5 All members of staff are responsible for:

a) Compliance and co-operation with the provisions of this Policy, the associated procedure documentation and any instructions given by line management. This includes any risk reduction measures identified through risk assessment.

b) Informing line management of any concerns relating to health surveillance and participating in adverse event investigation where applicable.

c) Notifying line management at the earliest opportunity of any health related issue that is linked with a work related activity or that may impact on the ability of the individual to undertake their regular duties. The aim is to provide appropriate help and support at the earliest opportunity to mitigate the affects of the health related issue.

d) Alternatively staff may utilise the occupational health self referral process where a health related issue arises in order to elicit help and support at the earliest opportunity.

e) Ensuring attendance at any occupational health appointment made on their behalf. If attendance is not possible, notifying occupational health at the earliest opportunity to enable rescheduling of the appointment.

f) Use of appropriate Personal Protective Equipment (PPE) issued by NHS Lothian particularly whilst undertaking any activities where exposure to a biological, chemical agents or airborne hazards (including dusts) may occur.
g) Appropriate use of any Personal Protective Equipment (PPE) and/or equipment provided by NHS Lothian with the purpose of providing protection against noise, vibration or other mechanical hazards.

h) Complying with any procedures, information, instruction or training deemed necessary by NHS Lothian for the health and safety of employees.

7.6 NHS Lothian Head of Recruitment is responsible for:

a) Ensuring that recruitment documentation includes a mechanism for management to indicate that an advertised post is subject to statutory health surveillance

b) Ensuring that NHS Lothian Occupational Health is aware of any statutory health surveillance requirements pertaining to a given post at the pre-employment clearance stage.

7.7 NHS Lothian Occupational Health and Safety Services is responsible for:

a) Liaising with managers to determine the need for statutory health surveillance within their area and providing the advice required

b) Performing initial statutory health surveillance actions as part of the pre-employment process

c) The provision of support and guidance with respect to identified roles and responsibilities in relation to statutory health surveillance

d) Completion of documentation as described in internal OH procedures and/or Procedural Documentation associated with this Policy related to specific types of health surveillance. In addition OH will provide annual returns and reports as required.

7.9 NHS Lothian Health and Safety Committee is responsible for:

a) Oversight of incidents and issues pertaining to health surveillance within NHS Lothian. The Committee shall include representation from Occupational Health and Safety, Facilities, Infection Control and other specialists from within NHS Lothian whose input will assist with the formulation of any remedial measures that may be required and to assist with the aim of seeking continual improvement of the NHS Lothian Health Surveillance Management System.

7.10 General Procedure specific roles and responsibilities

In addition to the above there are specific roles and responsibilities contained within the procedure documentation associated with this Policy. For example with respect to skin health checks there is a specific role termed ‘Responsible Person’ assigned to a nominated member of staff. The tasks and activities undertaken by NHS Lothian Occupational Health will also vary to some extent depending on the type of health surveillance being carried out. Consequently it is crucial that this Policy must be read in conjunction with any relevant procedural documentation available from the NHS Lothian Intranet.
7.11 Selection criteria of individuals with assigned roles

The roles and responsibilities pertaining to NHS Lothian management of health surveillance are outlined above and within the associated procedure documentation. When selecting individuals to perform roles and responsibilities, relevant managers should consider the following aspects:

a) Ensuring the necessary competence and expertise of individuals’ assigned specific roles and responsibilities.

b) Assessing any training requirements associated with health surveillance roles and responsibilities

c) Maintenance of competencies via e-learning packages or refresher courses

d) Allowing adequate time for the individuals to carry out the roles and responsibilities, including the provision of suitable cover during periods of absence

e) Monitoring, measuring, review and audit measures that may be required to ensure that the roles and responsibilities pertaining to health surveillance are applied in practice and that they continue to be effective

f) Lessons learned from the outcome of health surveillance should be used as a means of improving precautions, revising works activities and practices, including the revision of documentation or purchase of additional PPE (Personal Protective Equipment) etc. in addition to any adverse event outcomes.

8.0 Risk Assessment for health surveillance

8.1 As part of the NHSL Health and Safety Management System, a suitable and sufficient risk assessment (either a general or COSSH) shall be carried out within NHS Lothian for each work task or activity particularly where there is a risk of exposure of staff to a hazard with the potential to result in injury or to require statutory health surveillance.

The completion of the risk assessment (either a general or COSSH) shall be the responsibility of the manager responsible for a given ward, department or directorate. This role shall include due consideration of the need for any consultation and communication within the context of the risk assessment process and ensuring the participation of partnership and specialist NHSL advisory services (Occupational Health, Health and Safety etc.) as required.

8.2 The risk assessment process shall be used to determine the nature and extent of any precautionary measures where exposure to harmful physical, biological or chemical hazards may occur and shall determine whether there is a need, for appropriate statutory health surveillance. This should be recorded on the relevant risk or COSHH assessment form under the precautions section.
8.3 Where there is uncertainty with respect to the requirement for health surveillance or with respect to the process of health surveillance itself, managers will be expected to refer any queries to the NHS Lothian Occupational Health Team in the first instance.

8.4 Those persons undertaking risk assessment should also refer to the Health Surveillance Procedure documentation and any NHSL Policies and Procedures that may be applicable to the particular work activity subject to risk assessment.

Where employees are exposed to a physical, biological or chemical hazard that may result in harm to those individuals, a risk assessment (general or COSHH) shall be used to identify and record appropriate precautions, one of which may be a need for periodic statutory health surveillance.

Where a risk assessment determines a foreseeable risk and it is reasonably practicable to prevent or control the risk of exposure this should be the primary aim for the responsible manager. However it is recognised that even where suitable precautions have been adopted that there may still be a requirement for health surveillance either to ensure that the precautions remain effective or more usually in order to comply with the legal considerations outlined in Section 5.0 above.

9.0 General Health Surveillance Process

The detailed process for each category of health surveillance is outlined in the procedural documentation that accompanies this policy. Hence the following is a brief outline of the common stages of health surveillance.

9.1 Initial Health Surveillance:

An initial health surveillance check may be carried out for staff at the point where the decision to initiate health surveillance has been made, typically following risk assessment or at the behest of Occupational Health. Once the health surveillance process is established, staff already in post will be included in the routine checks and these will follow the relevant health surveillance procedure for the type of health surveillance required.

9.1 Pre-employment health surveillance checks

For new starts, pre-employment checks will be triggered by the manager ensuring that posts subject to health surveillance are highlighted as such within the job description and also in any associated recruitment material. This in turn will act as a prompt to NHSL Occupational Health that health surveillance is required for that particular post and consequently Occupational Health shall carry out initial clearance of those individuals, creating a statutory health record for any staff that have been seen by Occupational Health as a result of answers given in the pre-employment questionnaire or medical records supplied by the individual’s GP merit further investigation.
Outcomes of the pre-employment screening will be documented by Occupational Health on an approved form and information pertinent to the employee’s job capabilities will be passed to the recruitment team. This will in turn be passed to the relevant line manager and held securely in the individual’s personal records. Occupational Health shall also ensure that the statutory health record form created for any staff seen is submitted to the relevant line manager within two months. If managers have not received this within that time frame they should contact Occupational Health immediately. The statutory health record shall be maintained by line management for the duration of the individual’s employment with due reference to the Record Keeping section below.

9.2 Periodic Assessment

The process of health surveillance involves line management programming health surveillance checks for individual members of staff at a frequency that is determined by Occupational Health or by the outcome of a previous cycle of health surveillance. At the time of the health surveillance check, managers will typically retrieve the statutory health record form for the individual and issue this to the person undertaking the check (typically OH or a designated ‘responsible person’) who in turn will annotate and return the form to the manager concerned. This will either indicate the staff members’ fitness for work in the case of OH checks or a need for OH referral in the case of a ‘responsible person’ check. The form will be filed on receipt by the manager concerned and actioned based on the content.

9.3 Follow Up Actions

Where OH have carried out the health surveillance check the manager will be informed of the individuals fitness for work status and whether there are any restrictions in the workplace that the manager will need to comply with following discussion with occupational health. There should also be an indication of any date(s) pertaining to a follow up referrals or appointments.

Where the health surveillance process indicates a potential health related issue resulting from a work activity it is essential that these are duly investigated by the relevant manager, with specialist advice given as required.

This may entail changes to working practices or in rare circumstances a temporary suspension of an activity where an immediate risk has been identified. The outcome of any investigation should be appropriately recorded. In addition any associated risk or COSHH assessments, SOPs or procedural documentation shall be amended to reflect any remedial measures or controls.

9.4 Cycle Review:

Typically for posts subject to health surveillance there will be a minimum of annual checks, unless there is a specific clinical or legal requirement to increase the frequency of checks or where increased numbers of occupational health referrals necessitates a more frequent checking period in order to determine the effectiveness of any remedial measures that may have been adopted.
The frequency of future checks will be determined in consultation with occupational health, with information relating to the outcomes of a health surveillance cycle being recorded on the relevant review form.

10.0 Health Surveillance Documentation

10.1 Statutory Health Surveillance Assessment Form

For certain categories of health surveillance, there is a need to complete a Statutory Health Surveillance Assessment Form as a means of determining whether there is a need for health surveillance in a specific service area. The Form is typically in a questionnaire style format with any positive responses to the questions asked likely to highlight a need for health surveillance.

10.2 Statutory Health Record Form

All statutory health surveillance in NHS Lothian is recorded on a statutory health record form which is established for each member of staff subject to health surveillance and is used to record the outcome of any health surveillance checks carried out. The completed statutory health records contain no clinical information, and where OH undertake the health surveillance check, this form will only show that the individual is fit, unfit or fit with restrictions. Where health surveillance is undertaken by responsible persons, the health record indicates that the outcome is satisfactory or that the individual should be referred to Occupational Health.

It is recommended that managers maintain a list of staff subject to health surveillance and should periodically check that individual health records are in date.

10.1 Statutory Health Surveillance Review Form

Completed at the end of a health surveillance cycle, this form records key information on the outcome of the checks, including the total number of staff subject to health surveillance, the numbers considered fit, fit with restrictions and unfit. Typically there are three sections to be completed by line management, OH or responsible persons respectively depending on the nature of the health surveillance being carried out.

The content of this form will also be used as a basis for the determination of the frequency of future health surveillance checks and to highlight potential areas of work activity where issues have been identified and will subsequently require remedial action to address, with support potentially provided by Occupational Health and Health and Safety as required as part of a formal review process.
11.0 Record keeping

11.1 Persons assigned roles and responsibilities (see Section 7.0) shall ensure that appropriate records are kept, in electronic or written format where applicable. The records are to be held securely to preclude loss, damage or breach of confidentiality. With respect to electronic records retaining back up copies and considerations to future proof the data is required (i.e. where a new electronic record management system may potentially be incompatible with older file formats) and to the use of electronic records for trend analysis. Such records shall include details of the following:

a) Risk assessments (both COSHH and General) where health surveillance is explicitly stated as a requirement

b) Health Surveillance (Management) Form used to determine whether health surveillance is required

c) Statutory health surveillance records for individual staff members

d) Significant findings from the outcome of health surveillance, including the OHSS Health Surveillance (Management) Feedback Form

e) The results of monitoring, inspection, test or checks carried out and the dates

11.2 General records should be retained throughout the period they remain current and at least two years thereafter

11.3 Health records pertaining to individuals should be maintained for all staff subject to health surveillance and must be retained for a minimum of 40 years from the date of the last entry. This is in recognition of the fact that there can occasionally be a long delay from the time of exposure to the onset of ill health.

11.4 When an individual or post is no longer subject to health surveillance, the statutory health record for that person should be transferred to their personal file. When they leave that post, their personal file, including statutory health record shall be transferred to their new management team and if health surveillance be required for the new post the statutory health record will be retrieved and added to the health surveillance process for the new role.

11.5 When an individual leaves the employment of NHS Lothian, their line management shall ensure that the individual's health records are sent to NHS Lothian Occupational Health for inclusion and retention as part of the historic Occupational Health records.

11.6 Distinction between Statutory health surveillance and medical records

It is essential to note that there is a key difference between statutory health surveillance records and Medical records.
Statutory health surveillance records include general employee details (name, gender, Date of Birth etc.), details of the health surveillance check carried out including the date, the person who carried out the check and the outcome. In addition NHS Lothian Occupational Health may add information pertaining to fitness for work and any restrictions that may apply. However the statutory health surveillance record should not contain information of a confidential medical nature and therefore these two types of records must be kept separately in order to avoid any breach of confidentiality.

Medical records are compiled by a Doctor or Nurse and while they may include information derived from the health surveillance process, due to the potential for the inclusion of sensitive medical information such as clinical notes, biological results and other information relating to non work related activities, such information is treated as confidential and should not be disclosed without the individuals consent.

12.0 Audit and Review

The method for achieving compliance with the provisions of this Policy shall be established by the Director of Occupational Health and Safety with due consideration to the requirement to identify key individual(s) involved in the audit process, the frequency and nature of audits and crucially the mechanism for the escalation of results and remedial actions required therein.

Consideration should be given to the creation of a performance standard to assist with monitoring the extent of Policy compliance. The performance standard should consider measurable indicators of performance including quantity measures, quality checks, timescales, training levels, resource allocation, response times, incident and general statistics, cost and other measurable outcomes or goals.

The Director of Occupational Health and Safety, in consultation with clinical colleagues, would have a key role within the compliance audit process. The timing and targeting of audits will be based to a greater extent on the knowledge and understanding of the operational arrangements for the management of health surveillance within NHS Lothian considering the outcomes of occupational health referrals.

The audit process should compliment any existing monitoring, inspection, test or check arrangements and should ultimately assist the Director of Occupational Health and Safety in providing assurance to the Chief Executive and Board of NHS Lothian that their corporate level responsibilities have been fully met (7.1).

The outcome from audits (including any review and action plans) shall be escalated to the NHS Lothian Health and Safety Committee by the Director of Occupational Health and Safety. There should also be consideration of the creation of a strategic action plan to address any audit recommendations or remedial measures that may be required in light of the outcome of systematic audits.
Audit results will be subject to the same Record keeping requirements as other documentation associated with the Management of Health Surveillance Policy (Section 11.0) in order to provide a sound audit trail.

This Policy document shall be subject to review in two years time from the date of issue or sooner following an audit or review of the health surveillance management system that identifies significant gaps, omissions or the need for remedial measures.

13.0 Equality and Diversity

13.1 No significant issues are anticipated within the parameters of this Policy.

14.0 Related Documents

NHS Lothian documents available of the intranet:

- NHS Lothian Adverse Event Management Policy
- NHS Lothian Adverse Event Management Operational Procedure
- NHS Lothian Health and Safety Policy

In addition, for NHS Lothian Occupational Health and Safety Services staff, this policy should be read in conjunction with the NHS Lothian Occupational Health and Safety internal Policy and procedure documentation, including, but not limited to, Standard Operating Policies and Procedures document dated June 2013 or the latest revision therein.

15.0 References

- Health and Safety at Work Etc. Act 1974, section 2

- Management of Health and Safety at Work Regulations 2003, Regulations 3 and 5, with particular reference to Regulation 6 which covers Health Surveillance

- Control of Substances Hazardous to Health Regulations 2012, Regulations 6,11 and 12, with Regulation 11 dealing specifically with Health Surveillance

  www.hse.gov.uk/pubns/indg453.htm