

Facilities

Control of Contractors

Standard Operating Procedure

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Introduction

Contractors are routinely used by businesses and organisations for maintenance, servicing, repairs, installations, constructions, deconstructions and demolition purposes.

It is essential that Engaging Officers arranging for Contractors to attend understand their responsibilities for all aspects of that attendance under ***NHS Lothian Control of Contractors Policy, this Standard Operating Procedure*** and compliance with the ***Health and Safety at Work Act 1974***.

Additional guidance can be found in the Health and Safety Executive Publication '***Managing Contractors – a guide for Employers***' (HSG159).

This procedure also follows the principles of 'Plan, Do, Check, Act' in establishing management systems to control contractors.

This Procedure should also be used in conjunction with the ***NHS Lothian Control of Contractors Policy***.

Definitions

1. A **Contractor** is anyone Facilities requisition to carry out work and who is not an Employee.
2. An **Engaging Officer** is the person requesting or requisitioning the Contractor to carry out a routine, emergency or specific task or area of work, whether in or out of hours

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1.1 Pre-engagement

Engaging officers must assure themselves that they have engaged with the appropriate Contractor for the job required and this must be done prior to any work commencing. The approved supplier list must also be considered.

This can be done in the form of a planning checklist which must include the following:

- Provision of information specific to working within a healthcare setting
- Informing the contractor of any actual or potential health and safety hazards or risks and what mitigating measures are in place to control these hazards; sharing of risk assessments where required
- Detailing any specific health and safety conditions or restricted areas on site e.g. Asbestos or Harmful Chemicals
- Ensuring the contractor receives detailed and appropriate information on the job to be done, the area they will be working in and timescales for completion
- Providing detail on the standard the work should be done to and the importance of good housekeeping, protection or safe isolation of essential services and hand hygiene
- Confirming (before progressing to the next stage) that the contractor fully understands the requirements of the job, the standard you require this completed to and is able to meet these conditions. This will include any specific HAI Scribe control measures.
- In emergency/urgent situations the normal pre-engagement planning may be subject to alteration by the on call duty holder or the engaging officer.

1.2 Exceptions

- There are some exceptions to this procedure - specifically contractors that are not directly employed by NHS Lothian such as those dealing with vehicle breakdowns i.e. the AA, RAC etc. These contractors engaged with via our leasing partners or on some occasions directly by individuals who may not be employees through private arrangements.

2. Contractor Competence

- Departments engaging a Contractor must ensure that the company and employees of that company who will be attending to carry out any work task are properly qualified, accredited and insured to carry out such work.
- This can be achieved by requesting the training and competency records applicable to the work to be carried out.

- This is best done at the initiation of contract stage. Departments who arrange contracts (via Estates) should include specific terms and conditions in their request to Estates together with a list of all equipment which work will take place on.
- As well as the training and competency records departments should request photographic I.D's of all staff who may attend to carry out work and risk assessments/method statements – specific to the task.
- Accident/Incident records and any HSE interventions should also be requested prior to any contract commencing.

3. Risk Assessment and Method Statement (RAMS)

Before the contractor attends to carry out work the engaging officer must request the following documents:

- a) **Risk Assessment** :- a document which outlines what the task is, who may be harmed and how (including the contractor), how significant that harm may be and what mitigation has been put into place to remove or reduce the risk(s)

Mitigation measures can include:

- Isolating electrical supplies prior to commencing the work task
- Shutting off water supplies
- Erecting a suitable platform to work at height from safely
- Cordoning off an area with barriers and displaying signage
- Wearing the appropriate personal protective equipment and safety gear
- Security of work equipment to prevent patient access

- b) **Method Statement**: - this is a plan which should outline exactly how the particular task will be undertaken safely and include consideration of the environment where the work will take place.

How the task will be carried out safely can be detailed as a description of:

- How the work area will be made safe prior to work commencing and ensuring no one will be harmed whilst the work is in progress
- Detailing how lone workers will be kept safe when working in remote locations
- Detailing how work done at height will be carried out safely, protecting those working at height and people below
- How equipment will be brought on site
- How heavy parts will be set aside for access where this is required
- How long services such as power and water will be isolated or shut off for

In addition method statements should identify the principal contractor for the job and how they will communicate with you e.g. before starting work in the morning and when finishing at the end of the day.

These documents are commonly referred to as RAMS and it should be stressed that these must not take a generic form but be specific to the particular job and site.

If this is a regular repetitive task then these documents can be used again as long as the engaging officer and the contractor have checked that circumstances have not changed since last visit.

You must check these documents are suitable and appropriate to the proposed task and if they are not then the work should not commence until they have been revised, re-submitted and you are now satisfied of their quality.

Reference: Checklist for checking the quality of RAMS on the intranet

Lastly, there are certain tasks which must be carried out under specific conditions (Permit to Work), but this will be organised via the Estates Department or our PFI/PPP Provider Partners.

You must retain these documents for your records.

Note: If you do not receive these documents within a reasonable timescale or the Contractor is unwilling to provide them, then the work will not proceed.

4. Site Access - a) In Hours

NHS Lothian view effectively controlled traffic management on sites as essential for the safety of all and therefore Departments organising attendance of Contractors should contact the Logistics Manager on site to make suitable arrangements for access and parking.

A copy of the site Traffic Management Site Rules or a link to the web page will be sent out to the Contractor prior to work commencing.

Some non NHS owned properties may have specific access and parking arrangements and these should be explained to the Contractor before they attend the site.

Site Access - b) Out of Hours

In the out of hours period the engaging officer or the on call duty holder will:

- Inform the Contractor of any local site access arrangements and parking provision before they arrive on site
- Obtain where required and appropriate to the situation RAMS for access before the work commences

- Advise the Contractor of any specific contact or reporting arrangements
- Advise on the need for a Permit to Work

5. Site Induction

Once all the documentation has been received, checked and deemed fit for purpose the engaging officer must arrange for attendance of the Contractor at a Site induction information session.

Site induction sessions should be a prearranged date and time with the site and contractor to avoid any unnecessary disruptions or delays.

Site induction should include checking that a competent person has been sent and then informing them of:

- Departmental rules including signing in and out requirements and wearing of identification
- Acceptable and non acceptable behaviours and attitudes when working on a hospital site including client and patient confidentiality
- Hand hygiene procedures and welfare facilities
- On site parking if available and required
- Fire precautions (evacuation requirements)
- Infection control measures
- Hazardous areas in departments
- Hazardous chemicals (and control measures/actions for spillages)
- Who to report an accident or incident to
- Advising of any departmental Risk Assessments relative to the task
- Use of Permit to Work Systems

If the Contractor attending has been to the site before and has been previously 'inducted' then only advising of any changes is all that is required.

6. Monitoring Procedures

For most situations work is carried out in a specific room or location, which means that if all the necessary arrangements have been made to create a safe environment and a safe system of work is followed, then the likelihood of the Contractor being harmed performing the task is minimal.

However the work should still be monitored by the engaging officer or designated depute, in accordance with the significance of the level of risk, this includes monitoring of the HAI Scribe requirements and other Safety Procedures.

If any contraventions are found then the work should be stopped immediately and the deficiencies corrected.

It is the engaging officers decision as to whether the work can continue depending on the breach or breaches of procedures, but in all cases the Contractor must be notified and advised of the breach and the improvement required.

This can be done:

- informally (verbal)
- formally (written)
- recorded on Datix
- escalated as required and appropriate to the situation

7. Completion of Work and Handover

When the Contractor has notified the controlling engaging officer or on call duty holder that the work has been completed, it may be necessary to inspect the work area to see that it is clean, tidy, safe to use and no equipment has been unsafe or not properly secured.

Where deemed necessary the engaging officer or on call duty holder may request a working demonstration of the repaired/serviced equipment.

The departmental manager should receive a fully completed worksheet for their records and if the contract was facilitated by Estates forward a copy of this to Estates Contracts Department
The contractor must sign out of the site and return any documentation, keys or equipment issued.

If you are not satisfied with the work carried out or the attitudes or behaviours of the contractor, then you should act upon this without delay.

8. Review of Process

At the end of any period of work it is good practice to review the process and act upon any deficiencies and therefore improvements that could be made for the next time you engage with a Contractor.

You should consider the following:

- In the pre engagement period did the contractor forward all the necessary documentation within the agreed timescale?
- Were the documents of a quality standard?

- Did the contractor attend on the agreed date and at the agreed time?
- During the work did the contractor sign in/out, wear ID and communicate with you at agreed intervals?
- Did the contractor work to the agreed standard, follow all the requirements of the risk assessment, method statement and site specific rules?
- Where the Contractor was required to wear PPE, was this visible?
- Were areas (where required) segregated to keep employees, patients and visitors free from harm?
- Did the Contractor comply with NHS Lothian site traffic management rules?
- Did the contractor leave the job/site clean, tidy, and safe?
- Did they provide you with a sufficient handover?
- Did the contractor display positive attitudes and behaviours?
- Did the contractor provide good value for money?
- Would you use the contractor again?

By checking on the quality of work provided and monitoring the safety standards the work was completed to, will give an assurance of the importance placed on Health and Safety by the Contractor and how the Contractor controlled all the risks associated with the work.

REFERENCE: NHS LOTHIAN ESTATES CONTRACTS DEPARTMENT

'CONTRACTORS QUALITY ASSUARANCE AND HEALTH AND SAFETY NON COMPLIANCE FORM'

If you have a compliant regarding a specific Contractor please complete the above form and return to the Estates Contracts Department.