

GAS SAFETY POLICY

		POLICY
Reference	<i>E&F 013</i>	
Approving Body	<i>Estates Governance Committee</i>	
Date Approved	<i>3rd February 2022</i>	
For publication to external SFH website	Positive confirmation received from the approving body that the content does not risk the safety of patients or the public:	
	YES	NO
	x	
Issue Date	<i>February 2022</i>	
Version	<i>2</i>	
Summary of Changes from Previous Version	<i>Transferred on to new Policy template</i>	
Supersedes	<i>1.1</i>	
Document Category	<i>Estates and Facilities</i>	
Consultation Undertaken	<i>Hard FM Group, Estates Governance</i>	
Date of Completion of Equality Impact Assessment	<i>03/02/22</i>	
Date of Environmental Impact Assessment (if applicable)	<i>N/A</i>	
Legal and/or Accreditation Implications	<i>N/A</i>	
Target Audience	All Trust staff, the Trust's PFI partners and any occupier of SFHF Trust estate involved with the maintenance and management of gas systems.	
Review Date	<i>February 2025</i>	
Sponsor (Position)	<i>Associate Director of Estates and Facilities</i>	
Author (Position & Name)	<i>Operational Head of Estates & Facilities</i>	
Lead Division/ Directorate	<i>Corporate</i>	
Lead Specialty/ Service/ Department	<i>Estates and Facilities</i>	
Position of Person able to provide Further Guidance/Information	<i>Lead Executive / Lead Manager/Senior Estates Manager</i>	
Associated Documents/ Information		Date Associated Documents/ Information was reviewed
<i>N/A</i>		<i>N/A</i>
Template control		June 2020

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1.0 INTRODUCTION

This policy is issued and maintained by the Director of Strategic Planning & Commercial Development [the sponsor] on behalf of Sherwood Forest NHS Foundation Trust [herein known as the Trust], at the issue date defined on the front sheet, which supersedes and replaces all previous versions.

The Trust, in recognition of its statutory duties endeavours to comply with the H&SE Gas Safety (Installation and Use) Regulations 1998 ACOF Safety in the installation and use of gas systems and appliances (L56:2013) and the Gas Safety (Management) Regulations 1996.

Trust premises have a range of gas fired equipment and the Trust recognises the inherent danger of gas escapes and the need for the safe and effective operation of gas fired systems and will take all reasonably practical steps to ensure the safe installation, operations and maintenance of all gas services included within the scope of this policy. Gas can be inherently dangerous if the distribution pipe system and gas fired equipment is not installed and maintained correctly.

Hazards normally associated with gas include the risk of explosion and fire resulting in an escape of gas and asphyxiation by carbon monoxide gas, a colourless and odourless gas that is the by-product of combustion. This may be a danger due to inappropriate ventilation of the combustion flue gases from gas fired equipment.

Due to legislation which requires proven competence to work on gas appliances (to be Gas Safe registered) and therefore all installations and gas maintenance is undertaken by contractors and their employees all whom are Gas Safe Registered to assure competence. The current authorising body is the Gas Safe Register (Gas Safe) it is acknowledged that the authorised body may be subject to change in which case all reference to gas safe in the policy should be read as the new authorising body.

2.0 POLICY STATEMENT

This Policy covers the safe installation and use of all fixed gas distribution systems and gas fired equipment on Trust premises i.e. all permanently installed distribution pipe work and equipment. This will include gas service mains and equipment under the control of the Trust on Trust premises and all permanently installed gas served equipment e.g. gas fired boilers, catering equipment, gas etc. Included in this Policy is equipment served by mains gas provided by the National Network supply and locally stored liquefied petroleum gas (Calor gas) serving permanently fixed equipment.

Excluded from this policy are any piped medical gases or gases stored in cylinders for portable equipment e.g. blow torches, barbecue grilles or portable medical gas cylinders. All of which can be easily transported from one location to another.

The Trust recognises its responsibilities as duty holder and will ensure that:

- In as much as is reasonably practicable, that the Trust complies with all Statutory Regulations and other guidance relating to gas safety

- The Trust will ensure that all parties working with natural gas are Gas Safety Registered.

The accountability for the management of gas systems is devolved to the organisation with overall control of the building. These can be categorised as follows:

Properties managed by other organisations – other NHS organisations, Local Authorities, private landlords

3.0 DEFINITIONS/ ABBREVIATIONS

The Trust: This means Sherwood Forest Hospitals NHS Foundation Trust.

Staff: Means all employees of the Trust including those managed by a third party organisation on behalf of the Trust.

Private Finance Initiative [PFI]: The initiative under which the Trust has entered into an agreement with partners to build and provide certain services [such as Planned Preventative Maintenance [PPM] at its hospitals.

PFI Project Agreement: The agreement or contract between the Trust and partners for the building of the new hospital buildings and the provision of a facilities management services.

Project Co.: This is the term used for the Central Nottinghamshire Hospitals PLC [or CNH]. It is the organisation appointed by the Trust who built the new hospital buildings, provide facilities services and then manage these facilities for the life of the contract, at which time they are then handed back to the Trust

Skanska Facilities Services [SFS]: This is the organisation appointed by Project Co to provide certain facilities management services including estates and maintenance functions.

Schedule 14 Service Level Specifications: The part of the PFI Project Agreement mainly concerned with the facilities management services provided by Project Co through their subcontract with SFS.

Schedule 22 Variations: The part of the PFI Project Agreement mainly concerned

Mansfield Community Hospital: NHS Property Services are the owners of Mansfield Community Hospital and therefore have a responsibility as a duty holder. Sherwood Forest Hospitals NHS Foundation Trust occupies certain areas of the building for services to the local community. The Trust's Partners through Skanska Facilities Services [SFS] provide the maintenance via the PFI agreement.

Gas Safe Register: The official list of gas engineers who are registered to work safely and legally on boilers, cookers, fires and all other gas appliances.

By law all gas engineers must be on the Gas Safe Register Equipment and systems that use a liquid or gas under pressure in order to operate.

Medirect: This is the organisation appointed by Project Co to provide certain facilities management services including 'soft' facilities functions.

4.0 ROLES AND RESPONSIBILITIES

4.1 Trust Board

The Trust Board, through The Chief Executive (who is the Accountable Officer), has overall responsibility for Health and Safety within The Trust, and as so carries the ultimate responsibility for providing a safe and appropriately functioning environment for patient care.

4.2 Collective Responsibilities (Policy & Procedures)

The Trust and its PFI partners both have responsibilities as duty holders to ensure they maintain the provision of Gas safety.

Each key party of the PFI scheme (Trust, Project Co, Medirest and Skanska Facilities Services) has relevant responsibilities to develop, implement, manage and monitor the safety, quality and resilience of these key systems. This is undertaken both through policies and procedures that reflect each party's respective responsibilities as responsible partners.

The 'principal' duties and responsibilities of the key appointments are highlighted below,

4.3 Trust Duty Holder

The Chief Executive is the statutory Duty Holder. The Duty Holder and the Board have overall responsibility for Health and Safety within The Trust, including Gas safety. They shall appoint in writing the Trust Designated Person [Gas Safety].

4.4 Trust Designated Person [Gas Safety]

The Trusts Director of Strategic Planning & Commercial Development, who is the Appointed Board Level Executive responsible for gas safety.

Under the direction of the Chief Executive they are therefore responsible for the organisational arrangements, which will ensure that compliance with standards is achieved and that where problems occur, they are identified and resolved with minimum risk to employees, patients or members of the public.

They shall appoint in writing the Trust Senior Operational Manager.

4.5 Trust Senior Operational Manager

The Senior Estates Manager who is appointed in writing by the Trust Designated Person [Gas Safety]. They fulfil the appointed Senior Operational Management role, under the direction of the Trust Designated Person [Gas Safety] and as such, have responsibility for co-ordinating resources, ensuring the policy is reviewed, ratified and implemented.

They will be responsible for notifying SFS, via Project Co, in advance of any works on any of the Gas systems initiated by the Trust if undertaken outside of the formal PFI schedule 22 change process. For changes on the site covered by the PFI Variation process i.e. works undertaken by Project Co, the PFI variation process will cover off notification to Project Co and SFS of new systems to be added to the scheme of control.

The Trust will ensure that its directly employed contractors comply with SFS' permit procedures.

4.6 Trust Other Professionals [i.e. Capital planning / Strategy / Projects]

Capital Project Officer/Managers will consult with the appointed external specialist with respect to gas capacity and compliance as follows:

All new and altered gas systems shall comply with the requirements of this policy and current regulations.

The specification and the consulting engineer's competence and interpretation of the requirements. The contractor's competence and their interpretation of the requirements.

The engineer's competence and interpretation with respect to site conditions, the existing and new installation and commissioning requirements.

The Clerk of Works competence and interpretation of the requirements.

4.7 Project Co [CNH] Duty Holder

Project Co is not an employer and therefore does not have duties under Section 2 and 3 of the Health and Safety at Work Act, the Management of Health and Safety at Work Regulations 1999 or the Control of Substances Hazardous to Health Regulations 2002.

Project Co has entered into a sub-contract with SFS and Medirest in respect of certain of its obligations under the PFI agreement with the Trust. SFS is an employer and has duties under the above requirements.

Project Co does however have duties under Section 4 of the Health and Safety at Work Act to take such steps that are reasonable to ensure that as far as is reasonably practicable the premises which it has control are safe and, as such is a "Duty holder" for the purposes of both this policy and Section 4 of the Health and Safety at Work Act in relation to those matters for which it is responsible under the PFI agreement with the Trust.

They shall appoint in writing the Project Co Designated Person [Gas Safety].

4.8 Project Co Designated Person [Gas Safety]

The General Manager for Project Co is the Project Co Designated Person [Gas Safety] they shall be appointed in writing by the Project Co Duty Holder for Project Co. They shall have responsibility for compliance with this policy document.

4.9 Skanska Facilities Services [SFS] Duty Holder

The SFS Chief Executive is the statutory Duty Holder. The Duty Holder has overall responsibility for Health and Safety within SFS, including Gas safety. They shall appoint in writing the SFS Designated Person [Gas Safety].

4.10 SFS Designated Person [Gas Safety]

The General Manager for SFS is the SFS Designated Person [Gas Safety] they shall be appointed in writing by the SFS Duty Holder.

Has responsibility for ensuring that suitable information, instruction and training is provided to the SFS Competent Persons and formally appoint each. Ensure any risk assessments remain current and are reviewed and updated as required.

They shall inform the Trust, Project Co & SFS Designated Person [Gas Safety] when system non compliances / deficiencies are found.

4.11 SFS Nominated Responsible Person [Gas Safety]

The SFS Designated Person [Gas Safety] shall appoint a Nominated Responsible Person in writing. The Nominated Responsible Person (in respect of gas safety) shall have sufficient competence to assess the risk associated with maintaining gas safety and implement procedures

and control measures to maintain and confirm compliance with the Gas Safety Regulations and their responsibilities will include:

- Maintaining a current record of the location and route of all gas mains and service pipes on Trust operated property including locations of all isolation valves, primary meters and check meters
- Ensure gas service pipes above ground level are appropriately identified appropriate British Standard markings or banding
- Maintaining a current asset register of all gas equipment to include the type of equipment, age and estimated remaining life
- Maintain a library of health and safety maintenance manuals and operating instructions provided for each item of equipment and to ensure users receive adequate instruction on the routine operation of individual items of equipment. This will normally be in the form of a “user’s manual” supplied with the equipment
- Ensure adequate maintenance programmes are initiated for all gas fired equipment and work is undertaken at appropriate frequencies by competent persons in accordance with the Gas Safety Regulations
- Ensure all gas detection systems and automatic gas isolation systems are routinely physically tested and work efficiently
- Maintain all records of installations, maintenance and repairs undertaken on gas equipment in such a form to allow easy retrieval and inspection
- Liaise with all premises to ensure planned maintenance work on gas equipment is undertaken at times to cause minimum disruption
- Ensure individuals working on gas equipment are competent for the tasks undertaken
- Ensure a “Permit to Work System” for any isolation of the gas mains distribution system affecting more than one building
- For properties managed by other organisations the Nominated Person will review the arrangements in place relating to the management of the gas systems, to ensure their suitability.

4.12 SFS Competent Persons [Gas Safety]

A Competent Person [Gas Safety] is a person, suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions to enable the required work to be carried out safely.

These can be:

SFS staff with appropriate experience and training to carry out the following tasks -

- Safe Isolation of gas supplies in the event of an emergency or gas smell / leak.
- Disconnection / Reconnection of gas equipment that is connected via a hose

Approved and Nominated Gas safe Contractors

- Nominated Person (Contractors) - management / supervision of works/ inspection & testing
- Competent Persons (Contractors) - carrying out the works / inspection & testing

4.13 NHS Property Services Duty Holder

The Chief Executive of NHS Property Services is the statutory Duty Holder. The Duty Holder and the Board have overall responsibility for Health and Safety within NHS Property Services, including Gas safety. They shall appoint in writing the NHS Property Services Designated Person [Gas Safety].

4.14 NHS Property Services Designated Person [Gas Safety]

Is NHS Property Services Regional Director, who is the Appointed Board Level Executive responsible for Gas safety. Under the direction of the Chief Executive they are therefore responsible for the organisational arrangements, which will ensure that compliance with standards is achieved and that where problems occur, they are identified and resolved with minimum risk to employees, patients or members of the public. They shall appoint in writing the NHS Property Services Nominated Responsible Person.

4.15 NHS Property Services Responsible Person [Gas Safety]

The FM Support Service Manager for NHS Property Services is the NHS Property Services Nominated Responsible Person [Gas Safety] they shall be appointed in writing by the NHS Property Services Designated Person. They shall have responsibility for compliance with this policy document.

4.16 Medirest Duty Holder

The Chief Executive of Medirest is the statutory Duty Holder. The Duty Holder and the Board have overall responsibility for Health and Safety within Medirest, including Gas safety. They shall appoint in writing the Medirest Designated Person [Gas Safety].

4.17 Medirest Nominated Responsible Person [Gas Safety]

The Operations Director for Medirest is the Medirest Nominated Responsible Person [Gas Safety] they shall be appointed in writing by the Medirest Duty Holder. They shall ensure its contractual obligations with regards to Schedule 14 of the PFI Project Agreement are achieved. As well as working with the Trust & SFS to ensure this policy is followed.

4.18 Medirest Competent Persons [Gas Safety]

A Competent Person [Gas Safety] is a person, suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions to enable the required work to be carried out safely.

Approved and Nominated Gas safe Contractors

- Nominated Person (Contractors) - management / supervision of works/ inspection & testing
- Competent Persons (Contractors) - carrying out the works / inspection & testing

5.0 APPROVAL

The Gas Safety Policy was consulted with the Hard FM Group and Estates Governance. The Gas Safety Policy was approved at the Estates Governance Committee on the 25th May 2017.

6.0 DOCUMENT REQUIREMENTS

Gas Emergency Actions and Procedures

It is the responsibility of the person who manages the premises or the most senior person on site to take immediate reasonable steps whenever they suspect that gas or fumes are escaping into the premises including shutting off the gas supply at the meter/emergency control valve and to ventilate the property. Only a competent person (Gas Safe) is allowed to reinstate the supply and re-commission the installation.

Faults on gas fired equipment where there is no gas escape evident should be reported to the estates department in the normal manner on Extn 3005 (internal).

Report the leak to the Medirest Helpdesk on Extn 3005 (internal).

For premises maintained by other Heath Trust Estates Departments (normally where premises are embedded into other Trust premises) reports of faults and leaks should be made to that local estate service in line with normal procedures.

- Turn off the gas supply if possible at the meter or to the affected equipment.
- Open doors and windows to ventilate the area affected.
- Prevent any smoking.
- Prevent turning on or off light switches.
- Prevent the use of naked flames.
- If in doubt, evacuate the area.

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Policy	Trust senior Estates manager	Audit/review	Annual	Hard FM Group
All Gas Fired equipment is safety checked by a competent individual at least annually	Trust Senior Estates manager	Audit/review	Annual	Hard FM Group
Only Gas Safe Registered individuals to work/inspect or test Gas Systems equipment	Trust Senior Estates manager	Audit/review	Annual	Hard FM Group

8.0 TRAINING AND IMPLEMENTATION

Each Head of Department will be responsible for ensuring staff are briefed regarding relevant procedures.

9.0 IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1
- This document is not subject to an Environmental Impact Assessment

10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

Evidence Base:

- Gas Safety (installation and use) Gas Safety Regulations 1998
- Approved code of practice and guidance: safety in the installation and use of gas systems and appliances
- Gas Safety (Management) Regulations 1996
- Health and Safety at Work act 1974
- HSE Approved Code of Practices
- Gas safe Registration / Register
- HTM 00-00 Policies and Principles of Healthcare engineering
- SFHFT Standing Orders and Scheme of Delegation

Related SFHFT Documents:

- N/A

11.0 KEYWORDS

Gas Safety

12.0 APPENDICES

- Appendix 1- Equality Impact Assessment Form (EQIA)

APPENDIX 1 - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of service/policy/procedure being reviewed: Gas Safety Policy			
New or existing service/policy/procedure: Existing			
Date of Assessment: February 2022			
For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)			
Protected Characteristic	a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?	b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?	c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality
The area of policy or its implementation being assessed:			
Race and Ethnicity	Availability of this policy in languages other than English	Alternative versions can be created on request.	None
Gender	None	Not applicable	None
Age	None	Not applicable	None
Religion	None	Not applicable	None
Disability	Visual accessibility of this document	Already in font size 14. Use of technology by end user. Alternative versions can be created on request.	None
Sexuality	None	Not applicable	None
Pregnancy and Maternity	None	Not applicable	None
Gender Reassignment	None	Not applicable	None
Marriage and Civil Partnership	None	Not applicable	None
Socio-Economic Factors	None	Not applicable	None

(i.e. living in a poorer neighbourhood / social deprivation)			
<p>What consultation with protected characteristic groups including patient groups have you carried out?</p> <p>None for this version</p>			
<p>What data or information did you use in support of this EqIA?</p> <p>Trust policy approach to availability of alternative versions.</p>			
<p>As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments?</p> <p>None</p>			
<p>Level of impact</p> <p>From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (click here), please indicate the perceived level of impact:</p> <p>Low level of impact</p>			
<p>Name of Responsible Person undertaking this assessment:</p> <p>Associate Director of Estates and Facilities</p>			
<p>Signature: BEN WIDDOWSON</p>			
<p>Date: February 2022</p>			