

ELECTRICAL SAFETY POLICY

NON-CLINICAL

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APPENDICIES

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1.0 - INTRODUCTION

This policy is issued and maintained by the Director of Estates & Facilities on behalf of Sherwood Forest Hospitals 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 is responsible for ensuring the health, safety and welfare of its employees, patients and others on its premises relating to Electrical safety. This commitment is demonstrated through compliance with all statutory requirements and codes of practice in all premises for which it is responsible.

The Health and Safety at Work etc. Act places a duty on the Trust to ensure that all equipment, plant and machinery is adequately maintained in a safe condition so as not to present a risk to its employees or other persons.

The Electricity at Work Regulations 1989 further extend the Act placing a duty on employers (Directors, Managers and Heads of Service) to ensure that all electrical equipment and electrical supply systems are maintained in a safe condition and that only competent persons are permitted to work with, repair or maintain electrical systems or apparatus. The Electricity at Work Regulations applies to all places of work and to electrical systems at all voltages.

The primary objective of this policy is to ensure a robust management system for the effective control of electrical systems throughout the Trusts premises, to minimise the risk of causing harm or fire to patients, visitors, contractors, staff and property

2.0 - POLICY STATEMENT

Sherwood Forest Hospitals NHS Foundation Trust (hereafter referred to as the “Trust”) is committed to taking all reasonably practicable steps to protect patients, visitors, staff, contractors and other building users from the risks of electrical systems.

This policy sets out the management approach to be adopted by the Trust and the PFI service provider Central Nottinghamshire Hospitals Plc (CNH or Project Co) and their Hard & Soft FM service providers Skanska and Medirest for operating, inspecting and maintaining the High Voltage and Low Voltage Electrical systems and infrastructure.

The Hard FM service provider undertakes the maintenance and management of all High Voltage and Low Voltage systems across the various properties the Trust occupy or own. The Trust recognises it still has a duty of care to ensure these electrical systems are being managed and maintained appropriately.

The Trust will establish the conditions whereby the use of both electrical power and electrical equipment connected to the electrical installations will, so far as is reasonably practicable, be adequately controlled and safe to use.

The Trust recognises the importance of a safe workplace with appropriate equipment and facilities as well as high standards of leadership, engagement, communication, training and competence and other management issues.

This policy aims to ensure that all risks to patients, visitors, staff and others from exposure to electrical hazards at work and on Trust sites are adequately controlled and that all electrical systems are maintained to a high standard and are safe to use.

This policy seeks to both set out and define the Trust's management approach and commitment to maintaining safe electrical systems on its premises, as well as providing a framework to adopt when coordinating the management of risk.

This policy and the procedures outlined require the cooperation of all employees, all building users and contractors who also have responsibilities to ensure a safe and healthy working environment is always maintained.

For the purposes of this policy the Trust Estate comprises all the buildings owned or occupied by the Trust. This policy also applies to all the properties owned or managed on behalf of Sherwood Forest Hospitals NHS Foundation Trust

This policy should also be read in conjunction with local Standing Operational Procedures (SOP), safe systems of management that they describe, and the Control of Contractors Policy for working and managing electrical systems on a day-to-day basis.

2.1 - Statement of Intent

The Trust, as a major healthcare provider, is fully committed to maintaining an appropriate level of care and management in relation to the management of electrical systems in all Trust premises.

The Trust recognise that, although they outsource the management of electrical systems to others, through the PFI Agreement, it still retains a duty of care to manage quality and check that appropriate management controls and procedures are in place and to ensure that patients, visitors and Trust staff, using or working within the buildings are appropriately trained and informed to enable compliance with the requirements relevant to them and their work.

2.2 - Purpose

The purpose of this governance Policy is to safeguard all patients, visitors, staff and assets through prevention and reduction of harm or loss.

The aims of this governance Policy are as follows:

- To set out a clear framework to protect all staff, patients and visitors by minimisation of the risks associated with electrical systems.
- To identify correct practice for the safe operation of electrical equipment for staff to implement based upon nationally accepted guidance and the principle of 'so far as is reasonably practicable' (SFAIRP).
- To enable staff to understand their roles and responsibilities in relation to electrical safety.
- To establish arrangements for the monitoring and review of this Governance Policy in order that it continues to reflect the most up-to-date legislation and guidance.

2.3 - Scope

This Governance Policy sets out the management approach to be adopted by Trust for providing and maintaining safe electrical systems, as well as preventing waste, misuse and unnecessary consumption of electricity supplied across the Trust.

This Governance Policy applies to all Trust:

- service users, patients and visitors.
- employees (including those managed by a third party).
- premises where they work that are owned and occupied, including those properties which Trust may occupy under lease.

The following locations are listed as properties where this policy shall be implemented:

- Kingsmill Hospital.
- Mansfield Community Hospital.
- Newark General Hospital.

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 (CNH / Vercity):** This is the term used for the Central Nottinghamshire Hospitals PLC or CNH (Vercity as a company provides the employees who work on behalf of CNH / Project Co). It is the organisation appointed by the PFI Funder who built the new hospital buildings, they 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 (Skanska):** This is the organisation and service provider appointed by Project Co to provide Hard facilities management services including estates and maintenance functions.
- **Compass Group – Medirest:** This is the organisation and service provider appointed by Project Co to provide Soft facilities management services and functions.
- **NHS PS – 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.
- **Nottinghamshire Health Informatics Service [NHIS]** provide information, communication and technology [ICT] services for the Trust and therefore have the same responsibilities as the Trust and its partners.
- **Schedule 14 (SLS)** 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 Skanska.

- **Schedule 22 (Trust Variation Enquires = TVE's)** Variations the part of the PFI Project Agreement mainly concerned with Trust variations enquiries regarding the PFI contract
- **Kingsmill Hospital (KMH):** SFH NHS Foundation Trust occupies the buildings to provide services to the local community. Maintenance, servicing, and repairs through Skanska are provided via the PFI agreement.
- **Mansfield Community Hospital (MCH):** NHS Property Services (NHS PS) are the owners of the MCH site and have a responsibility as a duty holder. SFH NHS Foundation Trust occupies certain areas of the building to provide services to the local community. Maintenance, servicing, and repairs through Skanska are provided via the PFI agreement.
- **Newark General Hospital (NGH):** SFH NHS Foundation Trust occupies the building to provide services to the local community. Maintenance, servicing, and repairs through Skanska are provided via the PFI agreement.
- **High Voltage:** A voltage in excess of 650 volts AC (11,000 volts systems)
- **Low Voltage:** A voltage exceeding 50v AC or 120v DC between conductors or earth, but not exceeding 1000v AC or 1500v DC between conductors or 600v AC or 900V DC between any conductor and earth (230v single phase and 400v three phase systems).
- **PAT:** Portable Appliance Testing is the testing of portable appliances (at a frequency that would be sensible for the items use based on its use and environment, this can be risk based) to meet the requirements of the IEE code of practice for In-service Inspection and Testing of Electrical Equipment.
- **Electrical Equipment:** Anything used, intended to be used or installed for use, to generate, transmit, transform, rectify, convert, conduct, distribute, control, store, measure or use electrical energy.
- **Method Statement** – (Task specific) Details of how work is to be done safely (safe system of work).
- **Permit to work** - A permit-to-work ensures a formal authorisation is given incorporating written checks to ensure all the elements of a safe system of work are in place before people are allowed to enter, or work on/in a potentially dangerous environment. It incorporates a means of communication between those carrying out the hazardous work. Essential features of a permit-to-work are:
 - Clear identification of who may authorise tasks (and any limits to their authority)
 - Who is responsible for the specifying of the necessary precautions (e.g. isolation, emergency arrangements, etc.)
 - Provision for ensuring that subcontractors engaged to carry out work are included.
 - Training and instruction in the issue of permits.
 - Closure of the permit to confirm a safe condition on the completion of the work.
- **Mobile units (MRI/Theatres etc.):** Medical facilities units, mobile theatres, scanners, etc. are self-contained with their own installation and designed to be connected to a supply by, for instance, a plug and socket. The standard installation protective measures against shock are required with the added requirement that the automatic disconnection of the supply should be by means of an RCD. A valid Inspection and Testing certificate should be provided with the unit prior to connection to the Trust's infrastructure. Copies of the certificate should be made and retained by the department for the duration of the use.

4.0 ROLES AND RESPONSIBILITIES

This section details the general responsibilities of all relevant persons and groups. The Trust and its partners all have responsibilities as duty holders to ensure they maintain the electrical safety in all its premises.

Below the responsibilities are defined for each role within the Trust and its partners. *NOTE* All formal appointments shall use the standard format HTM appointment documentation.

4.1 - Collective Responsibilities (Policy & Procedures)

The Trust and its PFI partners all have responsibilities as duty holders to ensure they maintain the provision of electrical safety. Each key party of the PFI scheme (Trust, Project Co, and Skanska) has relevant responsibilities to develop, implement, manage, and monitor the safety and 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

4.2 - Trust - Duty Holder – Trust Board

The Chief Executive has overall responsibility on behalf of the Trust Board for all matters relating to health and safety (including electrical safety). The Trust Board is the statutory "Duty Holder" for, and as so carries the ultimate responsibility for providing a safe and appropriately functioning environment for patient care. They shall appoint in writing the Trust Designated Person (Electrical).

4.3 - Trust - Chief Executive

The Chief Executive will ensure that financial resources are made available to support this policy based upon a risk assessment of priorities. The Chief Executive has appointed a nominated person, the Director of Estates & Facilities, to do all, or part, of the work to assist in complying with the duties.

The responsibility of the Chief Executive includes ensuring that all electrical management matters are seen as an important priority for the Trust as addressed through comprehensive policies and management procedures that are effectively implemented and appropriately resourced within the overall financial position of the Trust.

4.4 - Trust - Designated Person (DP Electrical) - Director of Finance

The Trust Director of Finance is the Appointed Board Level Executive responsible for electrical 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 (SOM Electrical) – Director of Estates & Facilities

Is the Senior Operational Estates Manager who is appointed in writing by the Trusts Designated Person (DP Electrical). They fulfil the appointed Senior Operational Management role, under the direction of the Trust Designated Person (DP Electrical) and as such, have responsibility for co-ordinating resources, ensuring the policy is reviewed, ratified and implemented.

They will be responsible for notifying Skanska, via Project Co, in advance of any works on electrical systems initiated by the Trust if undertaken outside of the formal PFI 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 Skanska of new systems to be added to the scheme of control. The Trust will ensure that its directly employed contractors comply with Project Co (Skanska) permit procedures.

4.6 - Trust - Heads of Departments / General Managers / Clinical Leads

The Heads of Departments / General Managers / Clinical Leads are responsible for ensuring the provision and safe use of equipment from the plug onwards to the equipment being used and are responsible for the maintenance of equipment in their areas which are not maintained either by Estates, ICT or Medical Engineering.

Where appropriate a maintenance contract must be raised to ensure that the equipment is fit to connect to the Trust fixed electrical network. Where departmental electrical equipment is identified and there is no evidence of appropriate maintenance the equipment shall be immediately removed from service until such time as the responsible person implements the correct maintenance regime.

Any training for staff that use equipment connected to the electrical supply system must be recorded in a format that can easily be audited and reviewed. This training should form part of the local induction procedure.

4.7 – Trust - Medical Engineering Department - MEMD

Medical Engineering (MEMD) is responsible for the electrical safety of all electrical medical equipment. All medical equipment in use within the Trust, whether owned, on hire to, or hired by the Trust shall be electrically safety checked at commissioning prior to first use on site and periodically at planned preventative maintenance (PPM) intervals as determined by Medical Engineering and/or the manufacturer.

This arrangement covers all except for devices under the PFI Contract “Equipment Responsibility Matrix” where alternative arrangements exist (e.g. with SFS for hoist-associated, drugs fridges, plinth/couches etc.).

4.8 - The Information, Communication and Technology Department (NHIS)

The Information, Communication and Technology department is responsible for the electrical safety of all IT and communications portable electrical equipment (printers, laptops, PC's, monitors etc.) and such equipment shall be electrically safety checked at commissioning prior to first use. A risk assessment will be carried out and regularly reviewed to determine the frequency of further testing.

4.9 - Staff / Users of Electrical Equipment

All users of electrical equipment have a duty to use the equipment safely in accordance with the training given and the manufacturer's instructions.

Prior to each use the individual using the equipment must visually inspect any electrical equipment or appliances for damage (i.e. frayed or damaged cables, burn marks on cables or plugs, coloured wiring visible or loose etc.) and ensure that it carries a valid PAT test label. Staff should also be mindful of potential of fire or serious incidents to occur in particular:

Contexts or environment specific examples include: -

- 1) Damage to air mattress power cords from poor management (e.g. left on floor where bed wheels could cut through exposing live conductors causing an electric shock to a patient or a member of staff.
- 2) Inappropriate direct installation of humidified oxygen water reservoirs, where mounting should always be on a remotely positional IV pole stand.

Further advice is available from MEMD's website and in Appendix 2 (Visual User Checks). Trust staff identifying such faults should immediately remove the equipment from service, clearly label the faulty item with a 'DO NOT USE' label indicating the date taken out of service, the ward or department, the contact's name in the ward or department, and contact the relevant department for the repair or replacement of the equipment (NHIS Portal or Facilities Helpdesk).

All portable appliances shall undergo either an inspection or test, undertaken by a competent person, at regular intervals in accordance with current regulations.

Where inspection of any portable electrical appliance by a competent person which, in their opinion, gives rise to an imminent risk of serious personal injury to the user or others, that appliance will be rendered safe by taking the appropriate action to prevent further use of the appliance. The Trust will not accept any liability for loss of work/data or any other inconvenience as a consequence of taking the appliance out of service on the grounds of safety.

As part of pre-use checks, Staff should ensure that the medical device (and where appropriate its detachable power cord) are labelled with evidence of a completed safety test in the last 12 months. Where a risk assessment outcome favours continued use of a last test date exceeding 12 months, staff should ensure that subsequent to its current use, it is reported for testing

Portable electrical appliances owned by employees are not to be brought onto Trust premises, connected to the Trusts' electrical supply system or used in the workplace. All Directorate management teams are responsible for ensuring that any such items are immediately removed from the Trust's premises.

Approved extension leads may be used for IT equipment or as a temporary solution to provide additional socket outlets while a request for permanent solution to be delivered or to provide power during a mains failure from an alternative source.

These leads must have been inspected and tested before use and have an in-date Pat test and should only be used for shortest period of time as possible.

4.10 - Purchasing and Supplies

Trust staff initiating purchase requests must ensure that the equipment to be obtained is suitable for the use in the environment intended. The Trust Estates department (Hard FM & Fire teams) should be consulted for advice for non-medical equipment and Clinical Engineering for medical devices, in the first instance.

So far as is reasonably practicable, equipment conforming to the appropriate British Standard and commercially rated should be purchased. When obtaining foreign equipment, the purchaser shall ensure that the equipment is at least as safe as equipment constructed to the equivalent British Standard. Where the equipment is energy rated then the most energy efficient model option should be purchased.

4.11 - Trust - Other Professionals (i.e. Capital planning / Strategy / Projects).

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

- All new and altered electrical systems shall comply with the requirements of documents series HTM 06.
- All new and altered electrical systems shall comply with the requirements of this policy and all 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.

4.12 – Project Co - Duty Holder (DH Electrical) - Project Co Executive or the PFI Funders

Project Co (CNH) 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.

Project Co (CNH) employs Skanska as a subcontractor to provide Hard FM services under the PFI agreement with the Trust. Skanska is an employer and has duties in respect of the provision of services and obligations under the PFI agreement.

Project Co (CNH) has duties under Section 4 of the Health and Safety at Work etc.

Project Co (CNH) must act to take such steps as are reasonable to ensure so far as is reasonably practicable the premises over 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.

Project Co (CNH) shall:

- Appoint in writing a Designated Person (DP Electrical).
- Appoint in writing a Responsible Manager (RM Electrical).
- Monitor the compliance of its Service Providers.
- Ensure full compliance with this Policy.

4.13 - Project Co - Designated Person Electrical (DPE) – General Manager

The General Manager for Project Co is the Project Co Designated Person Electrical (DPE) they shall be appointed in writing by the Project Co Duty Holder (DH Electrical). They shall have responsibility for compliance with this policy document.

4.14 - Project Co - Responsible Manager (RM Electrical) – Hard FM Manager

Is the Senior Estates Manager who is appointed in writing by the Project Co Designated Person (DP Electrical), they fulfil the appointed Responsible Manager (RM Electrical) role, under the direction of the Project Co Designated Person (DP Electrical) and as such, have responsibility for co-ordinating resources and ensuring the policy is implemented.

4.15 - Skanska - Duty Holder Electrical (DH Electrical)

The Skanska Chief Executive is the statutory Duty Holder. The Duty Holder has overall responsibility for Health and Safety within Skanska, including electrical safety. They shall appoint in writing the Skanska Designated Person Electrical (DP Electrical).

4.16 - Skanska - Designated Person Electrical (DP Electrical)

The Skanska General Manager is the Skanska Designated Person Electrical (DP Electrical) they shall be appointed in writing by the Skanska Duty Holder Electrical.

The Skanska DP Electrical has responsibility for ensuring that suitable information, instruction and training is provided to the Skanska Authorised Person/s low voltage (AP-LV) or high voltage (AP-HV) & Skanska Competent Persons Low voltage (CP-LV) or high voltage (CP-HV). Ensure any risk assessments remain current and are reviewed and updated as required.

They shall inform the Trust, Project Co & Skanska Designated Persons Electrical when system non compliances / deficiencies are found. They shall appoint in writing the Independent Authorising Engineers Low Voltage Electrical (AE-LV) & High Voltage Electrical (AE-HV).

4.17 - Skanska - Authorised Persons Low Voltage (AP-LV) or High Voltage (AP-HV)

Estates Officers employed by Skanska are the Skanska Authorised Persons Low Voltage (AP-LV) and/or High Voltage (AP-HV) they shall be appointed in writing by Skanska Designated Person Electrical (DP Electrical). The AP-LV and /or AP-HV has responsibility for the day-to-day operational management and safe systems of work of High Voltage and/or Low Voltage electrical systems on the Trust's premises.

The Authorised Person(s) AP-LV and/or AP-HV are responsible for the practical implementation and operation of this policy and the systems and installations for which management is in control of, this includes known dangers for which the AP-LV and/or AP-HV has been appointed to manage.

More than one Authorised Person AP-LV and/or AP-HV may be appointed for a system or installation but, at any one time, only one Authorised Person is the duty AP-LV and/or AP-HV. Each transfer of responsibility between Authorised Persons is to be recorded in the respective HV or LV logbook as appropriate.

The Authorised Person(s) AP-LV and/or AP-HV must ensure that any person working on any of the electrical systems is competent to do so, has been appointed as a competent person (LV or HV) and that all test equipment being used is maintained in good condition & is within its calibration date.

Where any defects, dangerous practices, dangerous and/or unusual occurrences are experienced; the Authorised Person(s) AP-LV and/or AP-HV must report these immediately to all Designated Persons Electrical (DP Electrical) and to the Authorising Engineer (AE-LV and/or AE-HV) in writing.

The AP-LV and/or AP-HV will also ensure all respective Competent Persons remain current and up to date with appointments and/or training.

The Duty Authorised Person AP-LV and/or AP-HV shall issue/cancel all Permits to Work, Limitations of Access, Sanction for Test, Isolating and Earthing Diagrams, Safety Programmes and Permission for Disconnection forms as prescribed in the HTM 06 series of documents.

The Authorised Person AP-LV and/or AP-HV shall record all events in the Electrical site Logbook.

The Authorised Person AP-LV and/or AP-HV shall carry out all duties as prescribed in the HTM 06 series of documents.

Adequate numbers of Authorised Persons AP-LV and/or AP-HV shall be available 24/7 and to cover for sickness or annual leave etc.

4.18 - Skanska - Competent Persons Low Voltage (CP-LV) or High Voltage (CP-HV)

Competent Persons are suitably qualified and experienced trades staff. They shall be appointed in writing by a Skanska Authorised Persons AP-LV and/or AP-HV and work under the direction of the Authorised Person AP-LV and/or AP-HV.

CP-LV and/or CP-HV must carry out all works in accordance with this policy, HTM's, current legislation and the PPM programme.

The Skanska competent persons CP-LV and/or CP-HV shall be skilled and have sufficient technical knowledge in the installation, inspection and testing and / or maintenance of the electrical systems they are working on.

Non compliances will be rectified in line with the contract rectification times. In cases of where building or life Safety is at immediate risk remedial works will be carried out immediately.

The CP-LV and/or CP-HV shall alert the Duty Authorised Person (LV or HV) of the issues and actions taken. Competent Person CP-LV and/or CP-HV shall always use safe systems of work, safe means of access and the personal protective equipment and clothing provided for their safety.

4.19 - Skanska - Competent Persons [External Consultants & Contractors]

All external individuals who will work on the electrical systems will need to demonstrate and provide evidence of Low voltage and/or High Voltage competency appropriate to their activities.

These competent persons CP-LV and/or CP-HV shall be appointed in writing by a Skanska Authorised Person AP-LV and/or AP-HV. These Competent Person shall always use safe systems of work, safe means of access and the personal protective equipment and clothing provided for their safety. For further guidance please reference the Control of Contractors Policy.

All CP-LV and/or CP-HV shall be skilled and shall have sufficient technical knowledge in the installation, inspection and testing and / or maintenance of electrical systems. All CP-LV and/or CP-HV shall be required to follow this policy and supporting reference documents.

These competent persons CP-LV and/or CP-HV shall immediately report any non-compliant issues to the Duty Skanska Authorised Person AP-LV and/or AP-HV.

4.20 – Skanska - Accompanying Safety Person Electrical (ASP)

The Accompanying Safety Person Electrical (ASP) is a person, not directly involved in the electrical work or test but must have adequate skills, knowledge and experience of the task being undertaken and shall have the ability to ensure danger is avoided. They are required to keep watch, prevent unauthorised interruption of the work or test, be able to apply first-aid, to summon help if required, and to stop the works if there is unsafe practice. The Accompanying Safety Person Electrical (ASP) should have received training in emergency first aid as prescribed in the HTM 06 series of documents. The Accompanying Safety Person Electrical (ASP) shall carry out the duties as defined in the HTM 06 series of documents.

4.21 - NHS Property Services (NHS PS) - Duty Holder

The Chief Executive of NHS Property Services is a statutory Duty Holder for the MCH site. The Duty Holder and the NHS PS Board have overall responsibility for Health and Safety within NHS Property Services, including electrical safety. They shall appoint in writing the NHS Property Services Designated Person Electrical (DP Electrical).

4.22 - NHS Property Services - Designated Person Electrical (DP Electrical)

The NHS Property Services Regional Director is the Appointed Board Level Executive responsible for electrical 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 Responsible Manager Electrical (RM Electrical).

4.23 - NHS Property Services - Responsible Manager Electrical (RM Electrical)

The NHS PS Property Manager is the NHS Property Services Responsible Manager Electrical (RM Electrical), they shall be appointed in writing by the NHS Property Services Designated Person Electrical. They shall have responsibility for compliance with this policy document.

4.24 - Independent Authorising Engineer - Low Voltage (AE-LV)

This independent engineer provides expert support, oversight and controls the appointment of Authorised Persons Low Voltage (AP-LV) will be suitably qualified in accordance with the requirements of HTM 06 series and have specialist knowledge of the low voltage systems on each site. The specialist acting in this role will be responsible for:

- Having specialist knowledge of Low Voltage systems in SFHFT, in particular the systems for which an Authorised Person(s) (AP-LV) will assume responsibility on appointment.
- The Authorising Engineer (AE-LV) will, subsequent to performing an assessment of a potential Authorised Person Low Voltage (AP-LV), recommend to the Designated Person Electrical (DP Electrical) of the submitting organisation either that the person is able to proceed to written appointment or requires further training.
- To ensure that all Authorised Persons Low Voltage (AP-LV) have satisfactorily completed an appropriate training course and that all training is documented.
- To ensure that all Authorised Persons Low Voltage (AP-LV) are re-assessed every three years and have attended a refresher or other training course prior to such re-assessment.
- To conduct an annual audit and review of the management systems of the Low Voltage systems including Permits to Work, SOP's and other documentation.
- Review of written procedures and operational policies as well as advising on changes in technology.
- To assist the Authorised Person Low Voltage (AP-LV), when required, with monitoring the implementation of the Electrical Safety Policy and Electrical SOP's.

4.25 - Independent Authorising Engineer - High Voltage (AE-HV)

This independent engineer provides expert support, oversight and controls the appointment of Authorised Persons High Voltage (AP-HV) will be suitably qualified in accordance with the requirements of HTM 06 series and have specialist knowledge of the high voltage systems on each site. The specialist acting in this role will be responsible for:

- Having specialist knowledge of High Voltage systems in SFHFT, in particular the systems for which an Authorised Person(s) High Voltage (AP-HV) will assume responsibility on appointment.
- The Authorising Engineer High Voltage (AE-HV) will, subsequent to performing an assessment of a potential Authorised Person High Voltage (AP-HV), recommend to the Designated Person Electrical (DP Electrical) of the submitting organisation either that the person is able to proceed to written appointment or requires further training.
- To ensure that all Authorised Persons High Voltage (AP-HV) have satisfactorily completed an appropriate training course and that all training is documented.
- To ensure that all Authorised Persons High Voltage (AP-HV) are re-assessed every three years and have attended a refresher or other training course prior to such re-assessment.
- To conduct an annual audit and review of the management systems of the High Voltage systems including Permits to Work, SOP's and other documentation.
- Review of written procedures and operational policies as well as advising on changes in technology.
- To assist the Authorised Person High Voltage (AP-HV), when required, with monitoring the implementation of the Electrical Safety Policy and Electrical SOP's.

These roles shall be kept independent of organisations submitting potential Authorised Persons Low Voltage (AP-LV) or Authorised Persons High Voltage (AP-HV) for assessment.

5.0 - APPROVAL

Approval is given by the Authorising Engineer (AE-LV and AE-HV) and the Estates Governance Group.

6.0 - DOCUMENT REQUIREMENTS

It is the policy of the Trust and its partners to minimise the risk of harm or fire from electrical supplies by ensuring that electrical systems are rigorously maintained, monitored and tested according to the following:

- Compliance with the Electricity at Work Regulations
- Compliance with the Health & Safety Executive Guidance HSG 85 - "Electricity at Work. Safe working practices"
- Compliance with the IEE Wiring Regulations BS 7671, amendments and guidance notes.
- Compliance with the Department of Health documents HTM 00-00 Policies and principles of Healthcare Engineering.
- Compliance with the Department of Health documents HTM06-01 Part A & B: Electrical services supply and distribution.
- Compliance with the Department of Health documents HTM06-02: Electrical safety guidance for low voltage systems, which is related to healthcare premises.
- Compliance with the Department of Health documents HTM06-03: Electrical safety guidance for high voltage systems, which is related to healthcare premises.
- Work with all parties in an open, transparent and co-ordinated relationship to ensure the safety of patients, staff, visitors and others.

The Trust is committed to ensuring that none of its policies, procedures and guidelines discriminate against individuals directly or indirectly based on gender, colour, race, nationality, ethnic or national origin, age, sexual orientation, marital status, disability, religion, beliefs, political affiliation, trade union membership, and social and employment status.

6.1 - Appointments

All the appointments identified in this policy shall be formally made in writing. The individuals shall be provided with the necessary training and resources. The Authorising Engineer (AE-LV and AE-HV) shall complete a suitability assessment of the key appointed individuals.

6.2 - Electrical Safety Group (ESG)

The Electrical safety group shall meet on a quarterly basis.

The minimum core agenda shall include:

- Appointments and training.
- Electrical Systems condition and reliability.
- Electrical Policies, Procedures and SOP's.
- Electrical system maintenance.
- AOB.

A Terms of Reference has been produced and agreed.

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 & Procedures	Trust Senior Operational Manager (SOM Electrical) & ESG	Audit/review	Annually	Trust Designated Person & ESG
Process Compliance	Authorising Engineer	Audit/review	Annually	SOM & Designated Person
Electrical Safety & Compliance	Skanska	Audit/review	Monthly	RM & Designated Person
Policy, Procedures, Activities, Issues and Incidents	Electrical Safety Group (ESG)	Audit, review, reports, meetings	Quarterly as a minimum	Estates Governance Group

8.0 - TRAINING AND IMPLEMENTATION

Operation, inspection and maintenance procedures can cause risks to the health of staff carrying out the work. All those involved in electrical works should be suitably trained in an appropriate manner to fulfil the task, they must be aware of the risks and must work to the agreed safe systems of work. This may involve the Trust representatives receiving training in awareness. Key appointed persons should also be formally notified in writing and this position accepted in writing.

Training requirements for the Hard FM Service Provider staff will be regularly assessed by the Low Voltage and High Voltage AE's and AP's and appropriate training undertaken and recorded, together with the date of delivery and topics covered.

Any contractors involved in the installation, commissioning, modification or maintenance of High Voltage and Low Voltage systems shall be fully conversant with this Policy and shall be suitably qualified, trained, experience and appointed as an appropriate competent person for the works being undertaken.

9.0 - IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1.
- This document has been subject to an Environmental Impact Assessment, see completed form at Appendix 2.

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

Evidence Base:

- Health & Safety at Work etc, Act (HASAWA)
- Electricity at Work Regulations
- Workplace (Health, Safety and Welfare) Regulations
- Management of Health & Safety at Work Regulations
- Display Screen Equipment Regulations
- Electrical Equipment (Safety) Regulations
- HSG 85 Electricity at Work. Safe Working Practices
- Memorandum on Electricity at Works Regulations
- Lifting Operations and Lifting Equipment Regulations LOLER
- British Standard 7671 IEE Wiring Regulations, guidance notes and amendments
- CIBSE Guidance documents
- Provision and use of Work Equipment Regulations PUWER
- Department of Health HTM 06 Series, High and Low Voltage
- Department of Health HTM 00 Policies and Principles of healthcare engineering
- Regulatory Reform (Fire Safety) Order
- Code of Practice for In-service Inspection and Testing of Electrical Equipment

Related SFHFT Documents:

- Control of Contractors Policy
- Fire Safety Policy
- Portable Appliance Fact Sheet

11.0 - APPENDICES

Appendix 1 – Equality Impact Assessment

Appendix 2 – Environment Impact Assessment

APPENDIX 1 - Equality Impact Assessment (EIA) Form (Please complete all sections)

EIA Form Stage One:

Name EIA Assessor: Lee Fox		Date of EIA completion: 28 th April 2025
Department: Estates & Facilities		Division:
Name of service/policy/procedure being reviewed or created: Electrical Safety Policy		
Name of person responsible for service/policy/procedure: Senior Hard FM Manager		
Brief summary of policy, procedure or service being assessed:		
Policy for the safe procedure for Electrical Safety across the Trust		
Please state who this policy will affect: Patients or Service Users, Carers or families, Commissioned Services, Communities in placed based settings, Staff, Stakeholder organisations, Others (give details) (Please delete as appropriate)		
Protected Characteristic	Considering data and supporting information, could protected characteristic groups' face negative impact, barriers, or discrimination? For example, are there any known health inequality or access issues to consider? (Yes or No)	Please describe what is contained within the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening. Please also provide a brief summary of what data or supporting information was considered to measure/decipher any impact.
Race and Ethnicity	No	This Policy outlines expected reasoning and process for Electrical Safety. Following the Policy should ensure that no barriers of discrimination is faced by either patients or staff in relation to Electrical Safety.
Sex	No	
Age	No	
Religion and Belief	No	
Disability	No	
Sexuality	No	
Pregnancy and Maternity	No	
Gender Reassignment	No	
Marriage and Civil Partnership	No	
Socio-Economic	no	

Factors (i.e. living in a poorer neighbour hood / social deprivation)		
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If you have answered 'yes' to any of the above, please complete Stage 2 of the EIA on Page 3 and 4.

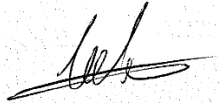
What consultation with protected characteristic groups including patient groups have you carried out? None
As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments? No

EIA Form Stage Two:

On the basis of the information/evidence/consideration so far, do you believe that the policy / practice / service / other will have a positive or negative adverse impact on equality? (delete as appropriate)						
Positive			Negative			
High	Medium	Low	Nil	Low	Medium	High
If you identified positive impact, please outline the details here:						

Protected Characteristic	Please explain, using examples of evidence and data, what the impact of the Policy, Procedure or Service/Clinical Guideline will be on the protected characteristic group.	Please outline any further actions to be taken to address and mitigate or remove any in barriers that have been identified.
Race and Ethnicity	None	
Gender	None	
Age	None	
Religion	None	
Disability	None	
Sexuality	None	
Pregnancy and Maternity	None	
Gender Reassignment	None	
Marriage and Civil Partnership	None	
Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	None	

Signature:



I can confirm I have read the Trust's Guidance document on Equality Impact Assessments prior to completing this form

Date:

6th October 2025

Please send the complete EIA form to the People EDI Team for review.
Please send the form to: sfh-tr.edisupport@nhs.net

APPENDIX 2 – ENVIRONMENTAL IMPACT ASSESSMENT

The purpose of an environmental impact assessment is to identify the environmental impact, assess the significance of the consequences and, if required, reduce and mitigate the effect by either, a) amend the policy b) implement mitigating actions.

Area of impact	Environmental Risk/Impacts to consider	Yes/No	Action Taken (where necessary)
Waste and materials	- Is the policy encouraging using more materials/supplies? - Is the policy likely to increase the waste produced? - Does the policy fail to utilise opportunities for introduction/replacement of materials that can be recycled?	No No No	N/A N/A N/A
Soil/Land	- Is the policy likely to promote the use of substances dangerous to the land if released? (e.g. lubricants, liquid chemicals) - Does the policy fail to consider the need to provide adequate containment for these substances? (For example bunded containers, etc.)	No No	N/A N/A
Water	- Is the policy likely to result in an increase of water usage? (estimate quantities) - Is the policy likely to result in water being polluted? (e.g. dangerous chemicals being introduced in the water) - Does the policy fail to include a mitigating procedure? (e.g. modify procedure to prevent water from being polluted; polluted water containment for adequate disposal)	No No No	N/A N/A N/A
Air	- Is the policy likely to result in the introduction of procedures and equipment with resulting emissions to air? (For example use of a furnaces; combustion of fuels, emission or particles to the atmosphere, etc.) - Does the policy fail to include a procedure to mitigate the effects? - Does the policy fail to require compliance with the limits of emission imposed by the relevant regulations?	No No No	N/A N/A N/A
Energy	Does the policy result in an increase in energy consumption levels in the Trust? (estimate quantities)	No	N/A
Nuisances	Would the policy result in the creation of nuisances such as noise or odour (for staff, patients, visitors, neighbours and other relevant stakeholders)?	No	N/A