

LIFT POLICY

Non-clinical Policy

Reference	E&F-009		
Approving Body	Estates Governance Group		
Date Approved	8 th May 2025		
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	N/A
	X		
Issue Date	8 th September 2025		
Version	4		
Summary of Changes from Previous Version	Review and update in line with HTM		
Supersedes	3.1		
Document Category	Estates & Facilities		
Consultation Undertaken	TAD Authorising Engineer Lifts		
Date of Completion of Equality Impact Assessment	28 April 2025		
Date of Environmental Impact Assessment (if applicable)	28 April 2025		
Legal and/or Accreditation Implications	The Health and Safety at Work Etc Act, The Electricity at Work Regulations The Lifting Operations and Lifting Equipment Regulations (LOLER) The Provision and Use of Work Equipment Regulations (PUWER)		
Target Audience	All Trust staff, the Trust's PFI Partners, All Contractors and any occupiers of the SFH Trust estate		
Review Date	8 th May 2028		
Sponsor (Position)	Chief Financial Officer Director of Estates & Facilities		
Author (Position & Name)	Senior Hard FM Manager – Lee Fox		
Lead Division/ Directorate	Estates & Facilities		
Lead Specialty/ Service/ Department	Estates & Facilities		
Position of Person able to provide Further Guidance/Information	Authorising Engineer (Lifts)		
Associated Documents/ Information		Date Associated Documents/ Information was reviewed	
<ul style="list-style-type: none"> Control of Contractors Policy. Electrical Safety Policy. 		May 2025 May 2025	
Template control		April 2024	

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1.0 INTRODUCTION

This policy is issued and maintained by the Director of Estates & Facilities (the sponsor) on behalf of Sherwood Forest NHS Foundation Trust (herein known as the Trust), at the approval 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 the safe use of lifts. This commitment is demonstrated through compliance with all regulations, statutory requirements, codes of practice and guidance in all premises for which it is responsible. The lifts are to be maintained and serviced so that they do not present either a physical risk to persons using the lifts or a statutory compliance risk to the Trust.

The Health and Safety at Work Etc Act 1974 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 Lifting Operations and Lifting Equipment Regulations 1998 (LOLER) require that thorough inspections are carried out at six monthly intervals and a report issued.

The Provision and Use of Work Equipment Regulations 1998 (PUWER) require that equipment at work is maintained, inspected and suitable for use.

The primary objective of this policy is to ensure a robust management system for the effective control of Lifts and their systems throughout the Trusts premises, to minimise the risk of causing harm 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 staff, contractors, patients or visitors when using the lifts on Trust premises.

It is also committed to ensuring that the Trust complies with its legal requirements relating to the management of lifts.

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 lifts in Trust premises.

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

The Trust will establish the conditions whereby the use of Lifts 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 hazards at work and on Trust sites are adequately controlled and that all Lifts 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 Lifts 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 Lifts 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 Lifts in all Trust premises.

The Trust recognise that, although they outsource the management of Lifts 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 Lifts.
- To identify correct practice for the safe operation of Lifts 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 Lift 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 Lifts.

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.
- **Duty Holders** - Sherwood Forest Hospitals NHS Foundation Trust, Central Nottinghamshire Hospitals PLC, Skanska, Medirest, NHS PS.
- **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.
- **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.
- **Low Voltage (LV):** 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.
- **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.
- **LOLER:** Lifting Operations and Lifting Equipment Regulations. These regulations govern all activities concerned with the operation, inspection, and use of lifting equipment, including Lifts.
- **PUWER:** Provision and Use of Work Equipment Regulations. These regulations require that equipment provided for use at work is suitable for the intended use, maintained in a safe condition, and inspected at suitable intervals and in certain circumstances.
- **Hydraulic Lift:** Permanently installed lifting equipment, serving defined landing levels, having a car designed for the transportation of passenger or persons and goods, suspended by jacks, ropes or chains and moving in guide rails inclined not more than 15 degrees to the vertical.
- **MRL Lift:** Machine–room-less Lift. Passenger lift that does not require a separate machine room and where the machine is generally located in the lift shaft and the control panel is integrated into the wall or architrave on the top-level landing.
- **Traction Lift:** Electrically powered cable operated lift driven by steel ropes rolled over a pulley and balanced by a counterweight.
- **Firefighting Lift:** A lift designed to have additional fire protection, with IP65 protection to the lift equipment, with two sources of supply, with controls that enable it to be used under the direct control of the fire and rescue service when fighting a fire.
- **Escape or Evacuation Lift:** A passenger lift protected in accordance with HTM 05- 03 Part E – Escape lifts to enable it to be used to safely transport staff patients and visitors to the ground storey in the event of a fire.
- **Machine Room:** A room in which a lift machine or machines and or the associated equipment are located on a Hydraulic or Electric traction lift.

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 safety of the Lifts 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 and manage safe water systems. Each key party of the PFI scheme (Trust, Project Co, Skanska, Medirest and NHS PS) have relevant responsibilities to develop, implement, manage, and monitor water systems to ensure they are safe.

4.2 Trust Duty Holder (DH)

The Chief Executive has overall responsibility on behalf of the Trust Board and is the statutory Duty Holder. The Duty Holder and the Board have overall responsibility for Health and Safety within The Trust, including water safety. They shall appoint in writing the Trust Designated Person Water (DPW).

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 Designated 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 water system 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 Lifts) – Director of Finance

The Trust Director of Estates & Facilities is the Trust Designated Person (DP Lifts), who is the Appointed Board Level Executive responsible for the safety of Lifts. Under the direction of the Chief Executive, they are 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 (SOM Lifts).

4.5 Trust Senior Operational Manager (SOM Lifts) – Director of Estates & Facilities

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

The Senior Estates Manager (SOM Lifts) will be responsible for notifying Skanska, via Project Co, in advance of any works on any of the Lift systems initiated by the Trust if undertaken outside of the formal PFI variation process.

For changes on the site covered by the PFI Variation process (TVE) i.e., works undertaken by Project Co, the PFI variation process will cover off notification to Project Co 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 - Other Professionals (i.e., Estates Development / Capital planning / Strategy / Projects).

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

- All new and altered Lifts shall comply with the requirements of the latest HTM's.
- All new and altered Lifts shall comply with the requirements of this policy, all current regulations, and all guidance.
- All new and altered electrical systems shall comply with the requirements of the latest HTM's.
- All new and altered electrical systems shall comply with the requirements of this policy, all current regulations, and all guidance.
- 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 Trust – Lift Warden (LW Lifts)

A Lift Warden is a person appointed in writing by an AP Lifts to assist in the evacuation of occupants during emergency evacuation by using an escape or evacuation lift. There are three types of lift warden:

- Lift Warden (Floor)
- Lift Warden (Control) and
- Lift Warden (Car)

Every Lift warden should be trained to be able to fulfil all the three types detailed above. Training in the use of the appropriate equipment shall be delivered by a Skanska AP Lifts in conjunction with the Trust Fire Safety Manager in relation to the emergency evacuation duties.

This training should consider the description of the operation of the lift and its features as described in the lift owner's manual provided for each new lift (see HTM 05-03 Part E – 'Escape lifts' for full details).

4.8 Project Co - Duty Holder (DH Lifts) - 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 or the Control of Substances Hazardous to Health 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 Lifts).
- Appoint in writing a Senior Operational Management (SOM Lifts).
- Monitor the compliance of its Service Providers.
- Ensure full compliance with this Policy.

4.9 Project Co - Designated Person (DP Lifts)

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

4.10 Project Co - Responsible Manager (RM Lifts) – Hard FM Manager

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

4.11 Skanska - Duty Holder (DH Lifts)

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

4.12 Skanska - Designated Person (DP Lifts)

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

The Skanska Designated Person (DP Lifts) has responsibility for ensuring that suitable information, instruction, and training is provided to the Skanska Authorised Person/s (AP Lifts) & Skanska Competent Persons (CP Lifts) and formally appoints each AP Lifts.

Ensuring any risk assessments remain current and are reviewed and updated annually as a minimum or as required following required updates or amendments.

The Skanska Designated Person (DP Lifts) shall inform the Trust DP and Project Co DP when system non compliances / deficiencies are found. They shall appoint in writing the Independent Skanska Independent Authorising Engineer (AE Lifts).

4.13 Skanska - Responsible Manager (RM Lifts) – Skanska Operations Manager

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

4.14 Skanska - Authorised Persons (AP Lifts)

Estates Officers employed by Skanska will be appointed as Skanska Authorised Persons (AP Lifts) they shall be appointed in writing by the Skanska Designated Person (DP Lifts) following successful assessment by the AE Lifts. All Skanska AP Lifts have the responsibility for the day-to-day operational management and safe systems of work on all Lifting systems on SFH Trust's premises.

Skanska AP Lifts are responsible for the practical implementation and operation of this policy and the systems & installations for which it has management control of this includes known dangers for which the Skanska AP Lifts have been appointed to manage.

More than one Skanska AP Lifts may be appointed for a system or installation but, at any one time, only one Skanska AP Lifts shall be the "duty AP" Lifts on site. Each transfer of responsibility between Skanska AP Lifts is to be recorded in the respective Lift logbook as appropriate.

Skanska AP Lifts are responsible for the appointment in writing of the Competent Person (CP Lifts) insurance inspectors; Competent Person (CP Lifts) lift service engineers, Lift Release Wardens (LRW Lifts), Lift Wardens (LW Lifts) and Lift Stewards (LS Lifts).

Skanska AP Lifts are responsible for ensuring the respective Competent Persons (CP Lifts), lift release wardens (LRW Lifts), lift wardens (LW Lifts) and lift stewards (LS Lifts) remain current and up to date with their appointments, regular assessments and all required training and certification.

Skanska AP Lifts must ensure that before any person works on the Lifts, the person carrying out the work has been suitably assessed and appointed as a Competent Person (CP Lifts) and an electrical Competent Person Low Voltage (CP LV) where necessary, that they are suitably qualified, experience, knowledgeable and deemed competent to carry out the work, and that any test equipment used is maintained in good condition and has valid calibration.

Where any defects, dangerous practices, dangerous and/or unusual occurrences are experienced; the Skanska AP Lifts must immediately report these to all DP Lifts, the SOM Lifts, and the AE Lifts, to also be confirmed in writing via a detailed incident report (IR) as soon as reasonably possible.

Skanska AP Lifts are responsible for obtaining regular monthly condition-based and reliability-based assessments of all the lifts to be used to apply the necessary and required levels of maintenance and repairs to avoid unnecessary failures and break downs.

Skanska AP Lifts shall carry out all duties as detailed in the latest version of the HTM's. Adequate numbers of Skanska AP Lifts shall be available to attend site 24 hours a day / 7 days a week and shall ensure adequate cover is provided to cover for sickness, annual leave, etc.

Skanska AP Lifts are responsible for overseeing and ensuring the correct completion of the daily duties carried out by the Skanska Lift Stewards (LS Lifts).

Skanska AP Lifts are responsible for providing training and support to all Lift Wardens and to provide and supervise the annual lift release refresher training exercises involving Lift Release Wardens (LRW Lifts) and to arrange the 3-year formal training for all LRW Lifts.

Skanska AP Lifts shall issue/cancel Permits to Work forms as prescribed in the HTM series of documents.

4.15 Skanska - Competent Persons (CP Lifts)

A Competent Person (CP Lifts) 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.

It is unlikely that any other staff will have the necessary practical experience and theoretical knowledge to carry out the servicing and maintenance role and this would normally be carried out by a specialist Lift contractor employing specialist Lift Service Engineers who should be appointed in writing as a Competent Person (Lifts).

The Statutory Insurance Inspections should be carried out at regular intervals in accordance with the type of Lift and the examination scheme drawn up by an Insurance Inspector who should also be appointed in writing as a Competent Person (Lifts).

Specialist Lift contractors appointed by management should only use trained and competent persons to carry out the maintenance of lifts. If this person is to carry out electrical work on the electrical supplies to lifts, they will also need to be authorised to carry out this work by a Skanska Electrical Authorised Person Low Voltage (AP LV).

Only one of the above noted competent persons (CP Lifts) can reset and return to service, once a lift is either switched off at the main electrical supply or is reset using the internal functions the lift has been taken out of service and can only be returned to service by an appointed competent person (CP Lifts).

All Competent Persons (CP Lifts) shall be formally appointed in writing and work under the control of a Skanska Authorised Person (AP Lifts). Competent Persons (CP Lifts) shall carry out all works in accordance with this policy, latest HTM's, current legislation, current guidance, manufacturers requirements, and PPM schedules.

All Competent Persons (CP Lifts) shall be highly skilled specialists and shall have sufficient technical knowledge of the installation, inspection, testing and / or maintenance of Lifts and their associated electrical systems.

Any non-compliance discovered by a Competent Persons (CP Lifts) shall be repaired if possible and immediately reported to a Skanska Authorised Person (AP Lifts) with full details of the issues and actions taken.

All Competent Persons (CP Lifts) shall always use safe systems of work, safe means of access and the personal protective equipment and clothing provided for their safety.

4.16 Skanska - Lift Steward (LS Lifts)

A Lift Steward (LS Lifts) is a person appointed in writing by an Authorised Person (AP Lifts) to undertake daily testing of the emergency call systems in all passenger lifts and other simple daily monitoring and checks of the lifts to ensure their correct and safe operation.

A Lift Steward (LS Lifts) is not permitted to reset and return a Lift to service.

4.17 Skanska - Lift Warden (LW Lifts)

A Lift Warden (LW Lifts) is a person appointed in writing by an Authorised Person (AP Lifts) to assist in the safe evacuation of occupants during emergency evacuations by using an escape or evacuation lift. There are three types of lift warden:

- Lift Warden (Floor)
- Lift Warden (Control) and
- Lift Warden (Car)

Every Lift warden should be trained to be able to fulfil all of the three types detailed above. Training in the use of the appropriate equipment shall be delivered by an SFS Authorised Person (Lifts) in conjunction with the Trust specialist Fire Safety Adviser in relation to the emergency evacuation duties.

This training should consider the description of the operation of the lift and its features as described in the lift owner's manual provided for each new lift (see Health Technical Memorandum 05-03 Part E – 'Escape lifts' for full details).

A Lift Warden (LW Lifts) is not permitted to reset and return a Lift to service.

4.18 Skanska - Lift Release Warden (LRW Lifts)

A Lift Release Warden is a person, suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions to enable the safe release of passengers from lifts. They should be recommended by the Authorised Person [Lifts], be formally appointed by the Skanska Designated Person (DP Lifts) and should undergo formal classroom training every 3 years and refresher training provided by a Skanska AP Lifts annually.

A Lift Release Warden (LRW Lifts) is not permitted to reset and return a Lift to service.

4.19 NHS PS (MCH) Duty Holder (DH Lifts)

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

4.20 NHS PS (MCH) Designated Person (DP Lifts)

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

4.21 NHS PS (MCH) Responsible Manager (RM Lifts)

The NHS PS Property Manager is the Responsible Manager (RM Lifts) they shall be appointed in writing by the NHS PS Designated Person (DP Lifts). They shall have responsibility for ensuring the policy is implemented.

4.22 Independent Authorising Engineer (AE Lifts)

This independent engineer will be suitably qualified in accordance with the requirements of the latest HTM's and shall have specialist detailed knowledge of all the systems on each site.

The Independent Authorising Engineer (AE Lifts) will be responsible for:

- Having specialist knowledge of all the Lifts and their systems on SFHFT occupied premises, in particular the systems for which an Authorised Persons (AP Lifts) will assume responsibility for on appointment.
- Determining the required number of AP Lift's and performing regular assessments of all Authorised Person (AP Lifts) before recommending to all Designated Persons (DP Lifts) either that the person can proceed to written appointment or requires further training.
- To ensure that all Authorised Persons (AP Lifts) are fully supported and have satisfactorily completed all appropriate training courses and that all training is documented.
- To ensure that all Authorised Persons (AP Lifts) are re-assessed every three years and have attended a refresher or other relevant training course prior to such re-assessment.
- To conduct an annual audit of all lifts and review of the operational management systems of the Lifts including Permit to Works, SOP's and all relevant processes and procedures. The audit shall be submitted annually for review to all Designated Persons (DP Lifts), Senior Operational Managers (SOM Lifts) for review in a timely manner.
- Review of written procedures and operational policies as well advising on changes in law, guidance, and technology.
- To assist the Authorised Person (AP Lifts), when required, with monitoring the implementation of the Lift Policy, Electrical Safety Policy, and associated SOP's.

The AE role shall be kept totally independent of organisations submitting potential Authorised Persons (AP Lifts) for assessment.

All formal appointments shall use the HTM standard appointment process and documentation, to be provided in writing to all DP Lifts, before persons are allowed to operate or work on any Lifts or Lifting equipment.

An up to date and accurate responsibility matrix, listing the training and appointment of all persons associated with lifts must be kept by all relevant parties.

5.0 APPROVAL

This Policy has been presented to the Estates Governance Group and the Authorising Engineer for comment and approval.

6.0 - DOCUMENT REQUIREMENTS

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

This policy and the procedures outlined require the cooperation of all employees, all regular 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 under a full maintenance lease or otherwise by the Trust. This policy applies to all the properties owned or managed on behalf of Sherwood Forest Hospitals NHS Foundation Trust.

6.1 Appointments

All the appointments identified within this policy shall be formally made in writing. The individuals shall be provided with the necessary training and resources. The Authorising Engineer (Lifts) will complete an annual suitability assessment of the key appointed individuals.

6.2 Lift Management Group

The Electrical Safety Group shall include a section of the regular ESG meeting to include Lift safety, with implementation of the strategic Lift action plan developed by the group, based on the condition and reliability of the Lifts, including any identified issues following the annual AE audit.

The Lift section of the meeting will include:

- Appointments.
- Trend analysis
- Condition Surveys.
- Policy and Procedures.
- Training.
- Audit Action Plan Progress.
- AOB.

The Terms of Reference relating to Lifts will follow the ToR for the Electrical safety Group (ESG).

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 Lifts) & ESG	Audit/review	Trust Senior Operational Manager	Trusted Designated Person & ESG
Lift Process Compliance	Authorising Engineer	Audit/review	Annually	SOM & Designated Person
Electrical / Lift Safety & Compliance	Skanska	Audit/review	Monthly	RM & Designated Person

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 should be trained appropriately to fulfil the task, be aware of the risks, and must work to the agreed safe systems of work. This may involve the Trust's PFI management team receiving training in awareness.

Key appointed persons must 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 AE / AP Lifts 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 Lift systems shall be fully conversant with this Policy and shall be suitably qualified and trained.

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

A summary of the information or guidance that has been used to develop this policy is detailed below but not limited to:

Health and Safety at Work Act
Electricity at Work Regulations
Workplace (Health, safety and Welfare) Regulations
Management of Health & Safety at Work Regulations
Lift 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
All relevant British, European and ISO Standards
Department of Health HTM 06 Series, Low Voltage
Department of Health HTM 00 Policies and Principles of healthcare engineering
Department of Health HTM 08-02 Lifts
Construction (Design and Management) Regulations
Control of Contractors Policy

Fire Safety Policy
HSE INDG339- Thorough examination and testing of lifts
SAFED (Safety Assessment Federation) Guidance notes

Related SFHFT Documents:

- Control of Contractors Policy
- Electrical Safety Policy

11.0 APPENDICES

Appendix 1 – Equality Impact Assessment

Appendix 2 – Environment Impact Assessment

APPENDIX 1 EQUALITY IMPACT ASSESSMENT

Equality Impact Assessment (EIA) Form (Please complete all sections)

EIA Form Stage One:

Name EIA Assessor: Lee Fox		Date of EIA completion: 28 April 2025
Department: Estates and Facilities		Division: Corporate
Name of service/policy/procedure being reviewed or created: E&F-009 Lift Policy		
Name of person responsible for service/policy/procedure: Senior Hard FM Manager		
E&F-009 Lift Policy – to ensure safe operation and maintenance activity to all lifts within the SFHT estate.		
Please state who this policy will affect: All personnel, contractors, sub-contractors, patients and visitors to SFHT premises.		
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. - The purpose of this governance Policy is to safeguard all patients, visitors, staff and assets through prevention and reduction of harm or loss. Please also provide a brief summary of what data or supporting information was considered to measure/decipher any impact. - Emergency evacuation procedures.
Race and Ethnicity	No	There are no potential risks for barriers or discrimination for protected characteristics groups arising from this policy
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 Factors (i.e. living in a poorer neighbour hood / social deprivation)	no	

If you have answered 'yes' to any of the above, please complete Stage 2 of the EIA on Page 3 and 4.

This Policy has been presented for review and comment and ratified at the Estates Governance Group.

None

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	

EIA Form Stage Two:

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	

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

Signature:

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

Date: 8 May 2025

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	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Does the policy result in an increase in energy consumption levels in the Trust? (estimate quantities) 	No	N/A
Nuisances	<ul style="list-style-type: none"> 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