

Electrical Safety Policy

Approved By:	E&F SMT & Policy & Guideline Committee
Date of Original Approval:	20 April 2012
Trust Reference:	B27/2006
Version:	V3
Supersedes:	V2
Authors / Originator(s):	Martin Owen, Principal Specialist Engineer Matthew Smith, Associate Director of Estates Operations and Engineering.
Board Director Lead:	Nigel Bond – Interim Director of Estates, Facilities and Sustainability.
Date of Latest Approval	May 2019
Next Review Date:	TBA after PGC approval

CONTENTS

Section		Page
1	Introduction and Overview	3
2	Policy Scope – Who the Policy applies to and any specific exemptions	3
3	Definitions and Abbreviations	5
4	Roles- Who Does What	5
5	Policy Implementation and Associated Documents	10
6	Education and Training	11
7	Process for Monitoring Compliance	12
8	Equality Impact Assessment	13
9	Supporting References, Evidence Base and Related Policies	13
10	Process for Version Control, Document Archiving and Review	14

Appendices		Page
1	N/A	
2	N/A	
3	N/A	

REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

The policy document has been reviewed and updated to a single document to cover both High and Low voltage inclusive of any battery powered system.

KEY WORDS

List of words, phrases that may be used by staff searching for the Policy in PAGL

Voltage, Electrical equipment, PAT testing, Portable appliance testing, Authorising Engineer, Authorised Person, Competent Person.

1.1. This document sets out the University Hospitals of Leicester (UHL) NHS Trusts Policy and Procedures for the provision of an Electrical Safety Policy across the University Hospitals of Leicester NHS Trust (hereafter referred to as the Trust).

1.2. The Trust, accepts its responsibility under the Health and Safety at Work Act 1974 (HSAWA), the Management of Health and Safety at Work Regulations 1999 (MHSW), Provision and Use of Work Equipment Regulations 1998 (PUWER), the Electricity at Work Regulations 1989 (EAWR), IEE Wiring Regulations latest version, HTM 06-01 (2017), HTM 06-02 (2023) and HTM 06-03 (2023) place a duty on the Trust to publish, issue and implement an Electrical Safety Policy, which outlines the organisation and procedures required to achieve the objectives set out in those legislative documents.

1.3. Senior Trust management, acknowledge their responsibilities for maintaining the Electrical systems to the required standards and for providing training of key personnel associated with its operation.

1.4. The Trust recognises that the lowest acceptable standards of electrical safety are contained in legislation, and it is the aim of the Trust, as an organisation committed to quality performance, to improve upon these standards. The aim of this policy is to ensure the provision of safe electrical systems and equipment, which is insulated, earthed or otherwise suitably protected, thereby ensuring the safety of the user and facility.

1.5. All work on electrical systems and equipment must be carried out using the electrical safety procedures as noted in the reference documents of clause 1.2, which are formalised as written instructions and safety rules HTM 06-02 & HTM 06-03, as appropriate.

1.6. The electrical safety procedures are to be subject to annual review with regard to safe systems of work and the competence of staff for their assigned duties.

1.7. Programmed work and testing on the electrical systems is only to be carried out under formal safety documentation procedures using written instructions and safe systems of work as set out in the electrical safety procedures within the HTM 06 suite of documents or any other relevant superior guidance.

1.8. The effectiveness of the Electrical Safety Policy and the relevant Estates Guidance documents depends largely on comprehensive procedures being written and adopted dealing with the operational management of the electrical systems & equipment. Wherever possible, these guidance notes & procedures will be standard throughout the Trust. The written guidance notes & procedures shall take into account any special considerations requiring to be addressed at the individual sites.

2 POLICY SCOPE –WHO THE POLICY APPLIES TO AND ANY SPECIFIC EXCLUSIONS

2.1 This Policy applies to **all** Trust premises whether owned or occupied by the Trust under lease or other Service Level Agreements (SLAs). Where the management of buildings/areas occupied by Trust staff and/or patients is carried-out by others, the requirements of this Policy remain applicable although implementation of the site-specific risk management requirements is managed by local policies and the relevant Estates Guidance Notes.

- 2.2 The Trust accepts that safe management of Electrical Systems and Equipment requires a high level of professional competence and commitment supported by adequate resources. The Trust will adhere to the testing of portable and fixed electrical equipment to promote a safe working environment for all persons who use the Trust facilities.
- 2.3 The Trust will continue to promote and develop a pro-active electrical safety regime by providing information, training and instruction for all employees, together with safe workplace procedures and rigorous maintenance routines for all electrical systems & equipment. The Identification of hazards and elimination of risks shall also take account of the electrical systems, with the safety codes guidance and HTM 06 suite of documents to ensure compliance with statutory legislation.
- 2.4 The Trust regards Health and Safety as matters of prime importance which are to be given an equal priority with other business and operating objectives and will ensure so far as is reasonably practicable that the safety of employees at work, patients and other persons is not adversely affected by any of the Hospital's operational activities.
- 2.5 The Trust regards safety at work as also being a responsibility of every employee & Contractor in order to safeguard themselves, their colleagues and other persons who may be affected by their acts, or omissions.
- 2.6 This policy is intended for use by all Trust staff & Contractors involved with electrical systems and Equipment both high and low voltage including all types of batteries and related equipment as defined in Health Technical Memorandum (HTM) 06 Suite at all Trust occupied locations.
- 2.7 Suitable and sufficient risk assessments and safe systems of work will be undertaken by suitably qualified person within the Trust.
- 2.8 The Trusts will ensure that employees and contractors are competent to undertake tasks involving electrical safety and that the correct safety signs are provided to ensure compliance with legislation.
- 2.9 It applies throughout the Trust, to all fixed and portable equipment, systems inclusive of batteries of all types and plant within any area where electrical power including batteries may be used or installed.
- 2.10 The safe management of the electrical systems, plant and equipment is the responsibility of the Estates Department. It is the Trust's policy that, the relevant procedures and guidance within HTM 06 suite have been applied and the formal safety documents have been duly signed and countersigned by the appointed in writing AP's.

3 DEFINITIONS AND ABBREVIATIONS

HSWA –	Health and Safety at Work etc. Act 1974	
MHSWR –	Management of Health and Safety at Work Regulations 1999	
EAR –	Electricity at Work Regulations 1989	
RAMS -	Risk Assessments and Method Statements	
HTM –	Health Technical Memorandum	ECG – Electro Cardiograph
IT –	Information Technology	PAT – Portable Appliance Testing
DP –	Designated Person	AE – Authorising Engineer
AP –	Authorised Person	CP – Competent Person
ESG -	Electrical Safety Group	SRO - Senior Responsible Officer

4 ROLES – WHO DOES WHAT

4.1 Key Personnel and Responsibilities within the organisation

The Chief Executive has overall responsibility for ensuring that the Trust's premises comply with all statutory requirements and also has an overriding duty of care as the duty holder under the HASWA.

This responsibility is delegated to the Director of Estates, Facilities & Sustainability (Designated Person) within the Trust. To help with such responsibility, the Authorised Person(s) as recommended for appointment by the Authorising Engineer will carry out the day-to-day management and implement the electrical safety policy.

4.2 Designated Person – Director of Estates, Facilities & Sustainability (DP)

The DP is classed as the nominated Designated Person and will provide a link with the Trust Board and the Compliance and Assurance Group to ensure that appropriate management systems are put into place to address electrical safety and ensure compliance with legislation within the Trust.

The DP will oversee the management arrangements and advise the Trust Board accordingly and ensure that the Trust's risk register is maintained with regard to electrical safety management.

The DP will appoint, in writing, an Authorising Engineer (AE) and nominated Authorised Persons (AP) to implement, administer and monitor the safety arrangements for the high voltage and low voltage electrical systems inclusive of batteries.

The DP will review the appointment of the AE on an annual basis.

Where appropriate, The DP will seek advice from the AE, AP's and the Trust's Health & Safety Risk Lead to ensure the Trust meets its statutory obligations for the control and management arrangements for electrical safety.

The DP and Senior Responsible Officer (SRO) will agree any deviation / derogations from HTM 06 suite and formally sign off using the appropriate Risk Assessment documentation as produced by a suitably trained person within the Trust.

The DP will ensure that sufficient resources are made available to the Estates Directorate to comply with their duties outlined in this policy.

4.3 Senior Operational Manager – Associate Director of Operational Estates and Engineering

The Senior Operational Manager is responsible for ensuring that the AP's have the ability to fulfil their duties as AP's under HTM 06 suite.

4.4 Authorising Engineer AE (E)

The Authorising Engineer will be an independent appointee to the Trust, reporting directly to the DP. They will hold AE qualifications in line with HTM 06 suite.

The AE will be responsible for implementing, administering and monitoring the implementation of HTM 06 suite.

The Authorising Engineer will:

- Assess and recommend, in writing, an appropriate number of AP's.
- Define the exact area of responsibility for each AP and may remove an AP from their post if appropriate.
- Audit compliance of the Trust against HTM 06 suite and produce an Action Plan for completion by the Trust, and review progress of the Action Plan.
- Co-ordinate the investigation of serious incidents relating to the electrical system.
- Authorise the AP to allow live working where appropriate.

4.5 Authorised Persons

Will have a letter of Appointment & Authorisation which explains the role & responsibilities as from the DP at the recommendation of the AE which is time bound.

There can be more than one AP for an area, but only one can be on duty at any time.

Transfer of responsibility must be recorded.

An AP will follow the duties and responsibilities laid down in HTM 06 suite.

An Authorised Person must:

- Appoint Competent Persons (CP), who possess the necessary technical knowledge, skill and experience relevant to the nature of the work to be undertaken, who is able to prevent danger or where appropriate, injury and who is able to accept a safety document from the AP.
- Maintain a register of all CP's for electrical safety.
- Define the extent of the systems for which CP's are responsible.
- Ensure that there are suitable and sufficient risk assessments and safe systems of work in place for all electrical procedures and tasks.

- Ensure that portable and fixed electrical appliances undergo the necessary testing and maintenance as laid down by statutory legislation, to ensure that equipment is fully serviceable at all times.
- Ensure that remedial action is taken, as required, when items of equipment are found and/or reported to be defective.
- Ensure that where immediate action is not taken, on defective equipment, then the item of equipment is isolated so as to render it harmless until such repairs are carried out.
- Ensure all staff and or Contractors, under his/her control, receives appropriate training in relation to the duties they are required to undertake.
- Ensure that prior to carrying out programmed equipment tests and maintenance, the ward/department manager is informed to ensure the availability of equipment.

4.6 Competent Person

A Competent Person either direct labour or a contractor is approved and appointed in writing by an AP for defined work, possessing the necessary technical knowledge, skill and experience relevant to the nature of the work to be undertaken, who is able to prevent danger or, where appropriate, injury, and who is able to accept a permit-to-work from an AP. The CP must be reassessed every 3 years.

4.7 Accompanying Safety Person

He/she is a person not involved in the work or test, that is present at the point of work or test.

He/she is to conduct first aid if required and to summon help in an emergency situation.

4.8 Department and Ward Managers

Department and ward managers are responsible for ensuring that: -

Electrical items are checked in accordance with the visual users check list before use by all employees following the Estates Guidance Document (EGD) & Estates Operational Procedures (EOP) suite of documents especially

- a) EGD 1 - Electrical Safety Portable Equipment Overview
- b) EGD 2 - Electrical Safety Portable Equipment Visual User checklist
- c) EGD 3 - Fire risk from rechargeable electronic devices toolbox talk
- d) EGD 4 - Rechargeable Devices Visitor Poster
- e) EGD 5 - E&F Alert - Fire risk from rechargeable electronic devices
- f) EGD 6 - A guide to user visual checks of Portable Electrical Equipment
- g) EOP 1 - Portable Appliance Testing Procedure (PAT)

When items are found to be defective or are suspected of being unserviceable, to attach adequate warning signs, report the defects to the Estates Directorate via the Facilities Helpdesk on 01162 58 7888 or 17888, immediately and not use or allow the item of equipment to be used, until the Estates Directorate, have carried out the necessary repairs by a competent person.

An inventory of all portable and fixed Electrical equipment is made available for inspection and testing as laid down in this policy.

Staff must be instructed and encouraged not to bring private electrical items (telephone chargers, hair dryers, radios, etc.) onto Trust premises.

Extension leads are not used as permanent fixtures. Sockets are requested to replace extension leads as soon as practicable. Extension leads of an approved type must and only to be obtained from Estates with following a suitable risk assessment produced by a suitably trained person within the Trust.

Patients may use phone chargers etc. after a satisfactory visual inspection by staff as per the relevant Estates Operational Procedures 1 & Estates Guidance Documents 1- 6 as noted in clause 5.8 above.

Items which are not deemed suitable for use on the hospital premise must be removed, either by the patient's family or friends or by staff. Communication support should be provided to any patients who need this to understand electrical risks and safety precautions.

All new purchases of electrical equipment must be acquired using the correct procurement procedure and prior to the purchase; a pre-purchase questionnaire is completed (excluding Medical and IM&T equipment procured or leased via the Medical Engineering or IT Procurement Department).

4.9 Departments which manage their own equipment

The Head of the department must ensure the electrical integrity of the equipment they manage.

Estates Directorate are made aware of any new equipment, whether purchased or leased, and made available for inspection prior to use (excluding Medical and IM&T equipment procured or leased via the Medical Engineering or IT Procurement Department). Electrical equipment also includes general items such as photocopiers and vending machines and battery powered items, etc.

Medical Engineering / Medical Physics Department

They have the responsibility to manage the electrical safety of Medical Equipment with their high level overview noted below.

Medical Equipment is the term used to describe the subgroup of medical devices that includes electro-mechanical medical equipment (For exact definition please refer to the UHL Medical devices policy)

Equipment owners / users must ensure that all medical electrical equipment in their clinical area is inspected prior to use and any defects which may compromise its safety or function are reported to the normal maintenance agency.

Electrically operated medical equipment requires periodic electrical safety testing and will be carried out at a frequency based on a risk-based scoring system used by the Medical Physics Clinical Engineering department, or the approved maintenance provider for that equipment.

Routine safety testing of medical equipment undertaken by the Medical Physics Clinical Engineering department is compliant to the Medical electrical equipment standard of IEC 62353, which is different to standard PAT testing.

If medical equipment are found to have an out of date service label the equipment owners shall inform the Medical Physics Clinical engineering department with immediate effect

Compliance of medical equipment servicing and Electrical safety testing is measured via the trust held Medical Equipment database and is monitored and reported to the trust governance structure via monthly meetings.

For further details refer to the UHL Medical devices policy

Information Management and Technology - IM&T now “One Digital”

One Digital 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.

Both must ensure that competent contractors maintain the equipment; advice may be provided by the AP within the Estates.

Where faults occur, investigations must be undertaken by the appropriate person within the department and documented on Datix.

4.10 Employees

It is the employees' responsibility to ensure that they: -

Understand and comply with this and other relevant policies in the area in which they work and bring any problems to the attention of their line manager.

Attend the Fire Safety training which will include elements Electrical Awareness guidance.

Immediately remove from service, any unsafe and defective equipment/items, that they are correctly labelled and reported to the line manager.

Make full and proper use of risk assessments and safe systems of work provided when using electrical equipment.

Undertake a visual user's check before using any electrical equipment/items as noted within the Estates Operation Procedures Document suite 1 & Estates Guidance Document suite 1 - 6 as note in clause 5.8 above.

Never attempt to undertake any repairs on electrical equipment/items.

Complete a Trust Datix; incident/accident report form, if there is a dangerous occurrence or incident, and report it to their line manager.

4.11 Contractors

It is the responsibility of all contractors, employed on Trust premises, to ensure that: -

They liaise directly with the AP to ensure that the work is being undertaken is in accordance with HTM 06 suite guidance.

They must not attach any electrical equipment to the mains supply unless authority has been given by the Estates Directorate, via a Permit-to-Work or Sanction for Test.

Contractors must ensure that they provide the relevant information in the form of detailed Risk Assessments and Method Statements (RAMS) by a suitably trained person to the AP for approval and acceptance before any works are commenced.

Contractors must ensure that they provide the relevant information and project specific drawings to the AP for approval and acceptance that will allow whole site and operational working electrical drawings to be kept up to date.

All new electrical accessories must be labelled appropriately to satisfy the Trusts asset marking system.

4.12 Electrical Safety Group

The Electrical Safety Group (ESG) is responsible for the coordination and oversight of electrical safety management and electrical risks, including oversight of Lift safety. The meeting will be formally documented and report to the Trust Health and Safety Committee. The Group will work to the Terms of Reference (TOR) which will be reviewed annually.

Detailed operational issues will be discussed at site specific Electrical Safety Working Groups, at the Leicester Royal Infirmary, Glenfield Hospital, Leicester General Hospital and the 10 satellite premises. Led by the relevant Engineering Manager (i.e. site lead engineer), relevant operational issues will be escalated to the Trust Electrical Safety Group and then on to the Health and Safety Committee.

5. POLICY IMPLEMENTATION AND ASSOCIATED DOCUMENTS –WHAT TO DO AND HOW TO DO IT

5.1. The approved document will be uploaded onto the Connect documents section of the UHL Estates Share point. Electronic copies of the policy will be forwarded to the UHL AP's (HV/LV) by the Senior Specialist Engineer, for additional distribution by the AP's to key stakeholders.

Incident Reporting

Any incident which involves the electrical system and which compromises safety, must be reported on DATIX and to the Estates Directorate, who will inform the AP for the system, and who, in turn will determine what action is to be taken to prevent any risk or danger arising from the reported equipment.

All reported incidents are to be investigated by the AP and recorded on a Trust incident/accident system (DATIX).

The reporting of injuries or dangerous occurrences, under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2012 (RIDDOR), will be acted upon, as required, by the Health and Safety Department.

A dangerous occurrence is to be reported to the AP by CP's as soon as reasonably practicable and the AP will then also inform the AE immediately.

6 EDUCATION AND TRAINING REQUIREMENTS

6.1 Estates/Contractor Training

All Recorded Competency Matrix –

It is essential for the safety of patients and staff that no person should operate, or work on, any part of an Electrical Systems all voltages and sources of supply & equipment unless adequately trained or supervised. This will be recorded with the Competency Matrix to ensure the relevant training and reviews are maintained current. Further details relating to AP's Section 4.4 and CP's Section 4.5 and highlight the need for the additional higher level of training required to fulfil these roles.

6.2 Training of Clinical Staff

Although the AP (LV) will be able to advise on suitable training for the Clinical Staff they do not work on the electrical system but do need to have operational familiar with their equipment and procedures within the various electrical equipment guidance.

It is the responsibility of Clinical Line Management to identify and monitor such provision for Clinical Staff, where required.

6.3. Training of Key Personnel

Retraining and reassessment should be carried out at regular intervals. Table 1 shows recommended intervals, but there will be occasions when additional training may be required (for example response to changes in technology or guidance, equipment failures, and incidents involving risks to staff/patients).

Training is an essential element of safe work practices, and all staff must be appropriately trained, prior to being appointed or instructed to undertake duties under the safety procedures.

The training of an individual, which can be by formal education and by on-the-job tuition as appropriate, is to be assessed for suitability by the person responsible for the appointment of the individual to a particular duty.

Examination of each person's training record is to be included in the procedures review process and where necessary, periodic retraining is to be arranged to cover the technical aspects, electrical safety and first aid matters, as appropriate for each individual's duties. Training requirements will be updated according to renewed Regulations (e.g., wiring Regulations), and compliance with training will be monitored by the ESG.

The Fire Safety Course is part of the Trust Training Plan; this includes elements of electrical safety which all staff members must undertake on an annual basis. Completion of this course is recorded.

Table 1 Refresher training and reassessment schedule for personnel working with the electrical systems

Personnel	Retraining	Re-assessment
Authorising Engineer	Every 3 years	Every 3 years
Authorised Person	Every 3 years	Every 1 years
Competent Person	Every 3 years	Every 1 years

7 PROCESS FOR MONITORING COMPLIANCE

The Estates Directorate will have the overall responsibility to ensure this policy for Estates related electrical installations and portable equipment is adhered to. Aspects of the policy where user involvement is identified should be adopted and promoted by the relevant managers as identified above.

7.1. Policy Monitoring Table

Standard / process / issue	Monitoring and audit			
	Method	By	Committee	Frequency
Audit of the Electrical Safety procedures implemented across the three different sites and external properties to assess compliance with The Electricity at Work Act and relevant HTM documents i.e. 06-02 (LV) and 06-03 (HV).	Audit	Externally appointed Authorising Engineer (Electricity)	Electrical Safety Group	Annual
Actions Resulting from the Authorising Engineer (E) report	Action plan	Estates Manager(s) Operations (Engineering)	Electrical Safety Group	Quarterly until actions are completed
PPM activities: •Emergency Lighting PPM completed •Nurse Call system testing, •Annual DB Electrical testing •UPS Maintenance •IPS Maintenance •Operating theatre electrical tests •5 yearly fixed electrical testing	CAFM	Estates Management	Electrical Safety Group	Quarterly
Portable appliance testing	CAFM – as defined by UHL PAT guidance Document	Estates Management	Electrical Safety Group	Quarterly
Training, competence and appointments including: AE (E) APs (E) CPs (E) First Aid training	Competency Matrix	Senior Estates Manager	Management Governance Structure and Electrical Safety Group	Quarterly
Audit and or Visit by the CQC	Audit/Visit Report	CQC	Management Governance Structure and Electrical Safety Group	Annual

8 EQUALITY IMPACT ASSESSMENT

- 8.1.** The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
- 8.2.** As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

9 SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES

9.1. A non-exhaustive list of documentation relevant to the Electrical systems.

9.2. Statutory requirements relevant to the Electrical Systems plant and equipment:

- Health and Safety at Work etc. Act 1974
- The Electricity at Work Regulations 1989
- Electrical Equipment (Safety Regulations) 1994
- Electricity Safety, Quality and Continuity Regulations 2002
- Electromagnetic Compatibility Regulations 1992
- Low Voltage Electrical Regulations 1997
- The Management of Health and Safety at work Regulations 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2012
- Provision and Use of Work Equipment Regulations 1998
- Plugs and Sockets Etc. (Safety) Regulations 1994
- Memorandum of Guidance on the Electricity at Work Regulations 1989
- Electricity at Work – HSG 85
- Health and Safety (Safety Signs and Signals) Regulations 1996
- Health and Safety (Information for Employees) Regulations 1989
- Health and Safety (Training for Employment) Regulations 1990
- BS 7671 IEE Regulations, current edition
- Health Technical Memorandum 06 (Electrical Services)
- Safety in Electrical Testing: Engineering Information Sheet No. 36 (HSE)
- Electrical Safety and You (HSE) IND (G) 231.
- Control of Substances Hazardous to Health (COSHH) Regulations 2002

9.3. This policy is supported by the following procedures in the associated documents will be with the Estates Sharepoint as detailed below, which must be used in conjunction with this policy:

1. Fire Policy & Fire Strategy
2. Emergency Action Plans for wards / departments
3. Major incident Plan
4. DATIX Incident Reporting
5. Trust Health and Safety Policy
6. Estates Operational Procedures
 - a. EOP 1 - Portable Appliance Testing Procedure (PAT)

7. Other guidance docs created and published on the Estates SharePoint
Estates Guidance Documents
- a. EGD 1 - Electrical Safety Portable Equipment Overview
 - b. EGD 2 - Electrical Safety Portable Equipment Visual User checklist
 - c. EGD 3 - Fire risk from rechargeable electronic devices toolbox talk
 - d. EGD 4 - Rechargeable Devices Visitor Poster
 - e. EGD 5 - E&F Alert - Fire risk from rechargeable electronic devices
 - f. EGD 6 - A guide to user visual checks of Portable Electrical Equipment
 - g. Other guidance docs created and published on the Estates SharePoint page

10 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW

10.1. This policy should be reviewed every three years (or when conditions change) by the Trust AP's (Electrical) and presented to the ESG, the UHL Senior Management Team and finally to the UHL Policy and Guidelines Committee for comment and ratification.

10.2. Document control is facilitated by the allocation of a unique reference number by Trust Administration Department maintaining the master copy and responsibility for any amendments.

10.3. The approved current version of the Policy will be available through UHL's Internet Connect and the Trust's externally-accessible Freedom of Information publication scheme. It will be archived through the Trusts PAGL system.