

Display Screen Equipment (DSE) Policy

Version 3.0

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Name of Policy:	Display Screen Equipment (DSE)
Date Issued:	May 2019
Date to be reviewed:	May 2022

Policy Title:	Display Screen Equipment (DSE)	
Supersedes: (Please List)	Display Screen Equipment Policy V2.0	
Description of Amendment(s):	Policy reviewed, job title updates, addition of Bribery paragraph, no material changes	
This policy will impact on:	All staff using a computer for work	
Policy Area:	HR & Corporate Policies	
Version No:	3.0	
Author:	Helen Johnson, Health & Safety Advisor	
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Review Date:	15 th May 2022	
Equality Impact Assessment Date:	13 th March 2019	
APPROVAL RECORD	Integrated Audit and Governance Committee (Subject to EQI sign off)	14-May-19
Consultation:	T Yel (Staff Side – GMB)	27 – Mar- 19

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1. Introduction

The Health and Safety (Display Screen Equipment) Regulations 1992 (as amended) 2002 covers the whole workstation, job and work environment, as well as the visual display unit (VDU), keyboard and other equipment. Staff may experience aches and pains in their hands, wrists, arms, neck, shoulders or back, especially after long periods of uninterrupted VDU work, leading to repetitive strain injury or upper limb disorders. Staff may also experience eye strain.

It is the statutory duty of the employer to take all reasonably practicable steps to reduce the risk from injury or hazard to health to his employees, and anyone else who may be affected by his work activities, to a minimum. Where this is not possible the employer must provide and maintain suitable control measures, including Personal Protective Equipment.

It is the statutory duty of employees to comply with health and safety legislation and any other procedures and policies that are designed to protect them from the risks associated with hazardous activities or materials.

2. Purpose

- Hull Clinical Commissioning Group (Hull CCG) will take all reasonably practicable steps to protect staff, patients, visitors and contractors from all activities hazardous to health that may be used in their work based routines.
- This Procedure provides an overview of the Display Screen Equipment (and other work station equipment/furniture) arrangements within Hull CCG controlled environments.
- The objective of the Display Screen Equipment self assessment process is to ensure that risk of injury or long term ill-health is prevented or adequately controlled in compliance with the Health and Safety (Display Screen Equipment) Regulations 1992 (as amended) 2002 and associated Approved Codes of Practice.

3. Scope

This policy applies to all employees of the CCG, any staff who are seconded to the CCG, contracted and agency staff and any other individual working on CCG premises.

4. Impact Analyses

4.1 Equality

The CCG is committed to:

- Eliminating discrimination and promoting equality and diversity in its Policies, Procedures and Guidelines, and

- Designing and implementing services, policies and measures that meet the diverse needs of its population and workforce, ensuring that no individual or group is disadvantaged.

In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation.

In developing this policy, an Equality Impact Analysis has been undertaken and is attached at Appendix 2. As a result of the initial screening, the policy does not appear to have any adverse effects on people who share protected characteristics and no further actions are required at this stage.

The application of this policy will be monitored alongside recruitment monitoring data to ensure fair application.

4.2 Bribery Act 2010

NHS Hull Clinical Commissioning Group has a responsibility to ensure that all staff are made aware of their duties and responsibilities arising from The Bribery Act 2010.

The Bribery Act 2010 makes it a criminal offence to bribe or be bribed by another person by offering or requesting a financial or other advantage as a reward or incentive to perform a relevant function or activity improperly performed. The penalties for any breaches of the Act are potentially severe. There is no upper limit on the level of fines that can be imposed and an individual convicted of an offence can face a prison sentence of up to 10 years.

For further information see <http://www.justice.gov.uk/guidance/docs/bribery-act-2010-quick-start-guide.pdf>.

If you require assistance in determining the implications of the Bribery Act please contact the Local Counter Fraud Specialist on telephone number 01482 866800 or email at nikki.cooper1@nhs.net, Due consideration has been given to the Bribery Act 2010 in the review of this policy document and no specific risks were identified.

5. NHS Constitution

5.1 The CCG is committed to:

- Designing and implementing services, policies and measures that meet the diverse needs of its population and workforce, ensuring that no individual or group is disadvantaged.

5.2 This Policy supports the NHS Constitution as follows:

The NHS aspires to the highest standards of excellence and professionalism in the provision of high-quality care that is safe, effective and focused on patient experience; in the planning and delivery of the clinical and other services it provides; in the people it employs and the education, training and development they receive; in the leadership and management of its organisations; and through its commitment to innovation and to the promotion and conduct of research to improve the current and future health and care of the population.

6. Responsibilities

The Health and Safety (Display Screen Equipment) Regulations 1992 (as amended) 2002 state:-

- It is duty of every employer and self-employed person to comply with the provisions of these regulations in so far as they relate to matters which is within their control;
- It is duty of every employee whilst at work to co-operate with his employer so far as is necessary to enable any duty placed upon that employer by the provisions of these regulations to be complied with. Also to comply with the provision of these regulations in so far as they relate to matters which are within their control.

6.1 The Chief Officer

The Chief Officer has the overall responsibility to ensure that Hull CCG complies with all relevant health and safety legislation. Specific duties include:

- Ensure that the Health and Safety Advisor works with Line Management to ensure suitable arrangements for DSE are in place on a day to day basis.
- Ensure that following any incidents involving DSE, a thorough investigation is undertaken.
- Receive reports/audits of the arrangements for DSE from the Health and Safety Advisor and ensure that, if appropriate, recommendations are acted upon and corrective actions are taken.

6.2 Director with Responsibility for Health & Safety

The CCG Director with responsibility for health and safety (The Director of Quality and Clinical Governance/Executive Nurse) The Director has the overall responsibility to ensure that Hull CCG complies with all relevant health and safety legislation. Specific duties include:

- Provide reports/feedback, where appropriate, to the Health & Safety Group and the Integrated Audit and Governance Committee on all matters relating to DSE.
- Ensure that the Health and Safety Advisor manages the arrangements for DSE in the workplace as required.
- Receive reports on audits of the DSE arrangements by the Health and Safety Advisor and ensure that, if appropriate, recommendations are acted upon and corrective actions are taken.

6.3 Health & Safety Advisor

The Health and Safety Advisor has responsibility for the ongoing management of the DSE arrangements. Specific duties include:

- Review completed assessments, where appropriate, to ensure that they have been completed in accordance with this procedure and provide guidance as necessary to all staff.
- Provide information, instruction and training to staff as required in relation to DSE matters and the self assessment process
- Review and update this policy on a regular basis to ensure it meets regulatory requirements, and the requirements of the Hull CCG Health and Safety Policy.

6.4 Line Managers

It is duty of all departmental managers to ensure compliance with this policy in so far as it relates to DSE equipment and associated activities that are within their direct operational control.

- Ensure that DSE self assessments are completed by all staff on commencement of employment, using the correct DSE Self Assessment form (Appendix 1).
- Ensure that completed DSE self assessments forms are placed in the individuals personal file.
- Ensure that staff review DSE self assessments when appropriate.
- Ensure that any adverse findings of DSE self assessments are acted upon and, where appropriate, corrective actions taken including the involvement of the Occupational Health Provider if appropriate.

6.5 All Staff

It is the duty of all staff and any others who may be affected by the work activities of Hull CCG to comply with the findings of DSE self assessments and any actions recommended by the Occupational Health Provider.

Staff should make themselves aware of the potential risks of injury and ill-health as well as control measures and practices in place for their protection within their work routines.

It is also the duty of all staff to report any deficiencies within the DSE arrangements to Line Management, and to co-operate (where appropriate) in developing a safe outcome to identified deficiencies.

Specific duties include:

- Carry out a DSE self assessment on commencement of employment with Hull CCG and ensure that the assessment is forwarded to their Line Manager.
- Ensure that the recommendations made on the DSE Self Assessment form are followed (Appendix 1).
- Ensure that where appropriate, assistance is sought from the Occupational Health Provider.
- Ensure that the DSE self assessment is reviewed at appropriate intervals, if equipment/furniture changes, if the working environment changes, or if any discomfort/difficulties are being experienced.
- Ensure that regular breaks away from the workstation are taken.
- Ensure that Line Management is informed if any difficulties or problems of discomfort persist for more than 3 days.

7. Statutory Requirements

The following legislation is addressed by the introduction and operation of this policy:

- The Health And Safety at Work etc Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Health and Safety (Display Screen Equipment) Regulations 1992 (as amended) 2002
- The Provision and Use of Work Equipment Regulations 1998
- The Equality Act 2010

8. Arrangements

- Any activity carried out within Hull CCG business which may result in exposure to a substance or activity hazardous to health must only be carried out after a suitable and sufficient assessment of the risks involved. The assessment must properly consider and apply the Principles of Good Practice where the elimination or substitution of the risk must be considered as the primary methods of control. Where this is not possible other adequate control measures must be applied.
- The individual will complete the DSE self assessment, with help from Line Management if required. All assessments must be completed on the Hull CCG DSE Self Assessment form.
- The Line Manager Advisor must ensure that all DSE self assessments are reviewed at the appropriate times. As a minimum, it is suggested (though not compulsory) that self assessments are reviewed annually.
- Where control measures are required, Line Management must ensure their use. The Line Manager must also ensure that all control measures and work station furniture, etc, are properly maintained and procedures observed and revised as appropriate.
- The Line Manager and Health and Safety Advisor must ensure that any additional information, instruction and training of employees is provided to ensure that the risks are adequately controlled. Records of all such provision must be kept locally along with records of maintenance of other control measures.

9. Measuring Compliance with and Effectiveness of This Policy

- All those operating within the DSE arrangements should assess them continuously on an informal basis. Any faults, failings and potential areas for improvement should be communicated initially to their line manager, and also the Health and Safety Advisor.
- The Health and Safety Advisor will keep up to date with any changes in statutory requirements and implement them where appropriate.
- The Health & Safety Advisor will report matters relating to compliance with this policy to the Hull CCG Health & Safety Group

10. Review

This policy will be reviewed every 3 years or as required by legislative changes or in response to any relevant incidents.

HR / Corporate Policy Equality Impact Analysis:

Policy / Project / Function:	Display Screen Equipment Policies
Date of Analysis:	13 th March 2019
Completed by: (Name and Department)	Helen Johnson, Health & Safety Advisor
What are the aims and intended effects of this policy, project or function?	To ensure that all staff who use a computer for work are aware of the risks associated with use of the equipment and know how to minimise the risk. To ensure that Hull CCG is compliant with relevant legislation
Are there any significant changes to previous policy likely to have an impact on staff / other stakeholder groups?	No changes to previous policy
Please list any other policies that are related to or referred to as part of this analysis	Hull CCG Health & Safety Policy
Who will the policy, project or function affect?	Staff who use DSE equipment for work
What engagement / consultation has been done, or is planned for this policy and the equality impact assessment?	This policy has been agreed with the local staff side representative Toni Yel
Promoting Inclusivity and Hull CCG's Equality Objectives. How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation? How does the policy promote our equality	This policy ensures that all staff are able to access appropriate DSE equipment according to their individual needs

<p>objectives:</p> <ol style="list-style-type: none"> 1. Ensure patients and public have improved access to information and minimise communications barriers 2. To ensure and provide evidence that equality is consciously considered in all commissioning activities and ownership of this is part of everyone's day-to-day job 3. Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve 4. Ensure the that NHS Hull Clinical Commissioning Group is welcoming and inclusive to people from all backgrounds and with a range of access needs 	
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Equality Data	
<p>Is any Equality Data available relating to the use or implementation of this policy, project or function?</p> <p>Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine <i>Protected Characteristics</i> – referred to hereafter as '<i>Equality Groups</i>'.</p> <p>Examples of <i>Equality Data</i> include: (this list is not definitive)</p> <ol style="list-style-type: none"> 1: Recruitment data, e.g. applications compared to the population profile, application success rates 2: Complaints by groups who share / represent protected characteristics 4: Grievances or decisions upheld and dismissed by protected characteristic group 5: Insight gained through engagement 	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Where you have answered yes, please incorporate this data when performing the <i>Equality Impact Assessment Test</i> (the next section of this document). If you answered No, what information will you use to assess impact?</p> <p>Please note that due to the small number of staff employed by the CCG, data with returns small enough to identify individuals cannot be published. However, the data should still be analysed as part of the EIA process, and where it is possible to identify trends or issues, these should be recorded in the EIA.</p>

Assessing Impact

Is this policy (or the implementation of this policy) likely to have a particular impact on any of the protected characteristic groups?

(Based on analysis of the data / insights gathered through engagement, or your knowledge of the substance of this policy)

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and, if applicable, justification where a <i>Genuine Determining Reason</i> ¹ exists (see footnote below – seek further advice in this case)
Gender	X			The policy applies to all staff regardless of gender
Age	X			The policy applies to all staff regardless of age
Race / ethnicity / nationality	X			<p>The policy applies to all staff regardless of race/ethnicity.</p> <p>Analysis of employee data indicates that the percentage of white employees is reflective of the local population. However, the proportion of BME staff is lower than that of the local population it serves</p> <p>All staff require competencies which include the ability to read and understand English or to request the information in another format available to them</p>
Disability		X		The policy applies to all staff regardless of disability. Self

1. ¹ The action is proportionate to the legitimate aims of the organisation (please seek further advice)

				assessment is specifically aimed at identifying individual equipment needs
Religion or Belief	X			The policy applies to all, regardless of religion or belief
Sexual Orientation	X			The policy applies to all, regardless of sexual orientation
Pregnancy and Maternity		X		The policy applies to all, regardless of pregnancy or maternity. Self assessment is specifically aimed at identifying individual equipment needs
Transgender / Gender reassignment	X			The policy applies to all regardless of transgender or gender reassignment
Marriage or civil partnership	X			The policy applies to all regardless of marriage or civil partnership

Action Planning:

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse impact or strengthen the promotion of equality?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:
Apprentices and Volunteers to the CCG may need additional support in interpreting the policy and com[letting the risk assessment.	Managers to ensure that apprentices and young people are offered additional support in order to understand the policy	Line Managers	ongoing	Next Policy Review - June 2020

Sign-off
All policy EIAs must be signed off by Mike Napier, Associate Director of Corporate Affairs
I agree with this assessment / action plan

Signed:
Date: 03.05.19

