



# BOMB THREAT AND SUSPICIOUS PACKAGES POLICY AND PROCEDURE

## (F-027)

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Name of approving body:	Health and Safety Committee (V1.0)
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<i>Minor amendments made prior to full review date above (see appended document control sheet for details)</i>	
<i>Date approved by Lead Director:</i>	<i>December 2021</i>
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## 1. INTRODUCTION

This policy and procedure should be read in conjunction with the trust Security and Fire Policies and Procedures (see section 9).

During the past few decades, organisations have had to deal with the threat of terrorist crime. This is well known in Great Britain and can manifest itself as bomb threats or suspect package incidents.

Various terrorist groups have resorted to this type of action to publicise their political objectives, but it is important that this is kept in perspective.

Terrorist crimes are often very violent and may be targeted against specific people and organisations, but as is becoming common these may be indiscriminate and everyone and every organisation may be at risk.

Whilst hospitals and health premises may not seem to be a logical target, it must not lead to complacency. Bomb threats/suspect package incidents are as important as any other incident and consequently a contingency policy is necessary.

The receipt or setting of explosive or other potentially dangerous devices (bomb threats) is a potential hazard in all premises. The consequence of an incident within the trust could be potentially serious. The aim at all times must be to protect, so far as it is reasonably practical, the safety of patients, the general public and staff

## 2. SCOPE

The purpose of the policy is to outline to staff how to recognise a suspect package or bomb threat and what action to take if a threat occurs.

All staff within the Trust have a legal responsibility to observe the Bomb Threat/Suspect Package Policy and procedure at all times. It is imperative that all staff understand what to do in the event of a bomb threat to protect the safety of their colleagues, patients, the general public and themselves.

## 3. DUTIES AND RESPONSIBILITIES

**Chief Executive.** The Chief Executive has overall responsibility for managing all bomb threat and suspect package situations throughout the Trust.

**Directors.** The Directors are responsible for: -

- Being aware of what to do in the event of a bomb threat/suspect package incident and take appropriate action.
- Being aware of what to do if a suspicious package or letter is discovered and take appropriate action.
- Managing all bomb threat situations within their area, or as Director on call, until more suitable management takes over.
- Liaising with the more suitable manager to effectively manage the situation.

**MANAGERS.** The Manager is responsible for: -

- Being aware of what to do in the event of a bomb threat and take appropriate action
- Being aware of what to do if a suspicious package or letter is discovered and take appropriate action.
- Implementing the procedures and precautions when dealing with bomb threats.
- Ensuring that all staff receive the necessary training and clearly understand the procedures for bomb threat or suspect package.
- Co-ordinating and directing staff, patients, and the general public in the event of a bomb threat/suspect package.
- Reporting all bomb threat/suspect package incidents to their manager, Director, the Safety Team and the police.
- Complete a DATIX report.

**STAFF.** Staff have a responsibility to: -

- Be aware of what to do in the event of a bomb threat and take appropriate action.
- Be aware of what to do if a suspicious package / letter is discovered and take appropriate action.
- Attend any training session or practice evacuation as required
- Comply with other security initiatives and procedures such as carrying identity cards, secure entrances etc.
- Immediately report all bomb threat incidents to their manager and if necessary, the police.
- Complete a DATIX report

#### **4. PROCEDURES RELATING TO THE POLICY**

##### **4.1 NOTIFICATION OF A BOMB THREAT**

Notification of a bomb threat can be made at any time and can be made and delivered by several means, usually anonymous, but all must be considered seriously.

##### Telephone Calls

With direct dialing into a health premises, potentially any person can be on the receiving end of a bomb threat call. In such circumstances staff should be mindful of the actions to be taken to help them deal with such a call. A list of actions is contained in the checklist attached to the Bomb Alert Procedure at Appendix A. These actions include;

- Let the caller finish their message without interruption.
- Try to keep the caller on the line as long as possible and ask the caller where the bomb is located, when the bomb is going to explode, what kind of bomb it is and what it looks like, who placed the bomb, when and why.
- Ask for the name of the caller and where they are calling from and whether they intend to call back.
- Make note of the caller's voice, accent, tone, foul language, etc.
- Listen for background noises.

##### **4.2 LETTER BOMBS, CONTAMINATED LETTERS AND SUSPECT PACKAGES**

Devices of this sort can take many forms and are designed to maim or kill the person opening them. Possible indications of this type of device are;

- Grease marks on the envelope or wrapping.

- An unusual odour, such as almonds or machine oil.
- An unknown powder or liquid substance is leaking from the package.
- Visible wiring or tin foil, especially if the wrapping has been damaged.
- The envelope or package is heavy for its size.
- The distribution of weight may be uneven; a flexible envelope may have rigid contents.
- The package has been excessively wrapped.
- There may be poor handwriting, spelling or typing.
- The name and, or address may be misspelled or incorrect. The package may come from an unexpected source.
- Does the postmark agree with the sender's address if shown? Is the postmark recognised?
- There may be too many stamps for the weight of the package.
- The package may be hand delivered from an unknown source.

If a suspicious package is received the following actions should be taken (note comments on contaminated packages below);

- The package or letter must immediately be placed on a flat surface. It is more likely to be an incendiary device than a bomb, i.e. it is designed to start a fire.
- Do not shake it, squeeze, or open the letter or package.
- Turn off all air conditioners, fans, photocopiers, printers, computers and heaters within the room where the letter/package is located.
- Inform the Local Security Management Specialists (LSMS). For out of hours contact on call Manager via Miranda House telephone: 01482 216624. Cascade to on call Director as appropriate.
- Call the Police.

If the letter/package has been opened and appears to contain a chemical or biological contaminant (such as white powder or unexpected liquid substances, unusual musty smell), the priority is to prevent spread and manage the situation;

- The package or letter must immediately be placed in isolation and away from water, sand, chemicals, heated surfaces, naked flames and gaseous substances.
- Do not shake, squeeze, or handle the letter or package more than necessary.
- Items of mail should be placed in a transparent, sealed plastic bag or container, if a bag or container is not available then cover it with anything to hand e.g. clothing, paper, waste bin and do not remove this cover.
- Turn off all air conditioners, fans, photocopiers, printers, computers and heaters within the room where the letter/package is located.
- Close all windows and evacuate the room, lock all doors and leave the keys in the lock.
- Place a clearly visible warning on the door.
- Inform the LSMS, or out of hours the on-call Manager, of the situation as soon as the room is vacated. Cascade to on call Director as appropriate.
- Call the Police.
- Go to an isolated room and avoid other people if you can. It is vitally important that you segregate yourself and others who may have come into contact with the suspicious package.

- **REASSURE YOUR STAFF OR COLLEAGUES.** It is unlikely that they are contaminated, and they will get medical treatment if required.
- Do not rub your eyes; touch your face or other people.
- Thoroughly wash your hands in soap and water as soon as possible.

#### **4.3 CAR BOMBS AND OTHER (SUSPICIOUS PACKAGES)**

A suspicious object is an item, which may contain a bomb, which is out of place and which cannot be accounted for. Any suspicious package or box found must be treated with extreme caution and must be reported immediately.

Unidentified parcels, packages, bags and other items left unattended for some time must be considered as suspicious and reported to the on-call Manager, if applicable the Site Security Officer, and during normal working hours the Trust's LSMS in the first instance. Packages of this nature must not be touched or tampered with in any way.

Attempts must be made to identify the owner of the package. Where this fails and cause for concern remains, the Police must be called upon to give advice on the next possible course of action.

#### **4.4 RECEIVING A TELEPHONE OR VERBAL THREAT**

In usual circumstances the information regarding the bomb threat/suspect package will be relayed to the Switchboard by telephone or by a runner.

As stated earlier a Bomb Alert Procedure and Telephone Bomb Threat Checklist is attached to this Policy document at Appendix A. It is essential that the checklist is maintained during the call and supplied to the LSMS or Duty Manager immediately the call is concluded. This information should be cascaded to the on call Director as appropriate.

All staff that may receive such a call should remain calm throughout and use the checklist pro forma to guide them.

If it is possible, alert someone else to the fact that a bomb threat call is in operation. That person should immediately notify the LSMS or Duty Manager to the fact and where on a site the incident has been reported. The switchboard will notify the relevant personnel and the Police.

Whilst the call is in progress special attention should be paid to any other clues that may help in the course of Police enquiries. Any words spoken must be remembered verbatim and recorded on the checklist, especially any code words. The call must be timed and dated.

#### **4.5 ALERT PROCESS**

In all cases, the member of staff receiving the threat, or identifying the possible threat, must report it to their immediate Manager/Director, or if they are not available the Duty Manager or LSMS.

Each department/service under the Trust's management control is required to have in place local Business Continuity Plans and evacuation procedures that may be required to be implemented in the event of a bomb alert or other major incident.

For Trust services based within a building controlled by another organisation, their Major Incident Plan is to be followed and their managers are to be contacted for their cascade

system to be activated.

The Duty Manager or LSMS will assess the threat and if necessary contact the following;

DURING OFFICE HOURS;

- Switchboard (if on a hospital site) to commence the hospital cascade system.
- Police.
- Service Director for affected area.
- Head of Estates.
- Security Management Director.
- Local Security Management Specialist (LSMS).
- Communications Manager.
- Estates Helpdesk.
- Emergency Planning Lead/Officer.

OUT OF NORMAL WORKING HOURS;

- Switchboard (if on a hospital site) to commence the hospital cascade system or normal communication through Miranda House.
- Police.
- On call Estates Manager.
- Site Security (where applicable).
- Communications Manager.
- Duty Site/Service Manager.
- Most Senior Director/Manager on duty.

#### **4.6 RADIO TRANSMITTER AND RECEIVING DEVICES**

As soon as a specific area has been identified from the caller, or a suspect package has been located, all devices capable of picking up or sending radio signals must be excluded from use in the area, for example mobile phones, radio pagers, 'walkie-talkies'.

During the management of a bomb threat, communication will be by the telephone and person to person. Until such a time when it can be assured that a radio signal presents no risk to detonate a device, this advice must be maintained.

Response to the Threat

With the information provided on the checklist, the most senior person on site or the On-Call Duty Manager will make a decision in liaison with the On Call Director based on advice from other members of the team, including the Police to;

- Do nothing – decision having been reached that the call was a malicious hoax.
- To search and evacuate if a suspicious object is found.
- To evacuate all – except search teams and essential staff, then to carry out a search and evacuate all persons if a suspicious object is found.
- To evacuate all immediately without searching.

To aid the most senior person on site or On-Call Duty Manager's decision, Police can, if requested, bring 'sniffer' dogs in to check specific areas of concern.

#### **4.7 EVACUATION**

If a suspicious package/object is found, and depending on the LSMS or On Call Manager's decision, evacuation commences as for fire via the nearest available exits as quickly and efficiently as possible, the only difference being;

- Rooms should be left with windows open to minimise any blast.
- Lights should be left on and machinery shut down.
- Staff must take their personal belongings with them, to assist eliminating suspicion over articles of property left behind after evacuation.
- The assembly point may be different from that used in a fire (see below)

In the absence of a public address system, a runner will be needed to pass on this information, however this should be balanced with the time it would take and consideration should be made to using the fire alarm as the only way of ensuring rapid evacuation. Messages will need to be relayed to fire wardens shepherding sectional evacuation and adopt the appropriate role and procedures.

The area around the suspect bomb must be evacuated immediately and cordoned off to prevent other staff from having to pass close to the suspect area.

Additional staff from other areas can be called upon to assist with directing staff along the appropriate routes towards the exits.

#### **4.8 ASSEMBLY POINTS**

Where convenient, fire assembly points can be utilised for this purpose, but only if they are located at a distance of at least 400 meters from the suspected bomb site. Safe assembly points are best situated behind a solid building at a distance away from the blast site.

Staff, patients and visitors who have been evacuated may have to remain outside for a long time before the all clear is given. In these circumstances, it is advisable if some form of shelter could be made available to cater for individual needs.

A personnel check must be initiated to account for all evacuated and check that areas are also empty of visitors who should be recorded during evacuation. They must be instructed by senior managers/officers/staff, not to re-enter until the building is declared safe.

This information will normally be passed to the most senior person on duty/on call from the Police Officer in charge or senior fire Officer present.

#### **4.9 ACCESS TO PREMISES**

Once the evacuation has been completed, the Police will erect a wider cordon around the suspect area whilst the incident continues. During this time it may be necessary for certain trust staff to be called to the hospital/property by personnel conducting the investigation.

Staff will only be able to regain access on production of official proof of identity. Similarly whilst a cordon is in place, contractors and other facilities estates/works people will only be allowed access on the authority of the Police.

#### **4.10 STAND-DOWN**

Where the outcome of a threat is assessed as a hoax, it is expected that the all clear will be given to the most senior person co-ordinating the incident on behalf of the Trust.



The information will be relayed to all parties who have responded to the alert. Where the all clear is given to a different member of the response team it must be passed on to the most senior person without delay.

Where the outcome is realised to be of a serious nature, eventual stand down and the all clear will be given to the Police from the operatives called to deal with the device. This may be a number of hours (or even days) later and so the most senior person co-ordinating the incident on behalf of the Trust must liaise with other Trust staff and decide if longer term relocation of patients and staff is required.

#### **4.11 DEALING WITH THE MEDIA**

Reporting the incident must be factual and accurate. All media requests for information should be referred to the Trust's Head of Communications who will manage the best line of response to meet the inevitable press enquiries.

#### **4.12 THE AFTERMATH OF A BOMB ALERT**

The trauma experienced by staff in dealing with a bomb threat can be intense and lasting. These feelings can be mitigated by the support shown to the person co-ordinating the response to a bomb threat and afterwards during a de-briefing session during which many lessons can be learned gaining valuable information for future incidents.

#### **4.13 DEBRIEFING**

The Director for the area affected, assisted by the LSMS, will convene a session to include the front line staff involved in the alert to provide an information exchange as to all circumstances and actions which occurred during the alert. Key staff will include;

- Director/Duty Director
- Communications Manager
- Duty Site/Service Duty Manager
- Most Senior Manager on duty at time of alert
- Duty Managers involved in alert
- Emergency Planning Lead/Officer
- LSMS
- Head of Estates
- Duty Facilities Manager if involved
- Key personnel involved in managing the threat

This will provide the opportunity to expand on existing information provided within the Policy and maintain regular update.

#### **4.14 STAFF SUPPORT AND COUNSELLING**

Receiving a bomb threat call particularly if it proves to be genuine and if people are subsequently killed or injured is likely to have significant psychological impact on the individuals.

The Trust recognises the need for appropriate care and counselling in such cases and should prepare to deal with any long-term effects. A counselling service is always available from the Trust's Occupational Health Service.

## **5 IMPLEMENTATION AND MONITORING**

This policy will be disseminated by the method described in the Policy for the Development and Management of Procedural Documents.

All employees will have access to this Policy. Locum, seconded, agency staff and volunteers should also be made aware of the policy by their Team Leaders. All contracted and Sub-Contractors will also be provided with a copy of the policy and details of workplace requirements by the Estates Department.

This includes:

- Policy to be shared via the Midweek global emails.
- Interactive sessions within the MDT/Team Meeting by senior staff within all teams.
- Clear accountability and responsibility is identified within the team/unit with feedback to the Team Manager/Modern Matron.
- All issues with regards to implementation to be raised via the policy awareness log, with a copy returned to the Team Leader/Modern Matron.
- Modern Matrons/Team Manager/Leader to ensure that a copy is held centrally.

### **DEPARTMENT SPECIALIST ADVISORS**

All employees should contact specialist advisors such as the Local Security Management Specialist for specialist advice in security requirements or the Estates Department in relation to security of buildings and assets.

### **It is the decision of the author as to whether this policy requires additional financial resource or not:**

This policy may require additional financial resources in the future in accordance with national guidance relating to lone working devices.

The Health & Safety Group are provided with an update when required on all incidents, findings and any recommendations.

## **6 TRAINING AND SUPPORT**

There are no specific training needs in relation to this policy, but the following staff will need to be familiar with its contents:

- All Managers and Staff, in particular switchboard and reception staff, and any other individual or group with a responsibility for implementing the contents of this policy.

As a Trust policy, all staff need to be aware of the key points that the policy covers. Staff can be made aware through a number of a variety of means such as;

- Team Brief/Weekly Global.
- Team meetings.
- One to one meetings/Supervision Group supervision.
- Local Induction training.

## **7 REFERENCE TO ANY SUPPORTING DOCUMENTS**

- Physical Security and Other Assets Policy
- Fire Safety Policy
- Health & Safety Policy
- Major Incident Plan
- Business Continuity Plans

**APPENDIX A ACTION TO BE TAKEN ON RECEIPT OF A BOMB THREAT**

(Ensure copies of this form are to hand)

DATE		TIME	
YOUR NAME		YOUR PHONE No.	

RECORD THE EXACT WORDING OF THREAT (Best you can)

**ASK THESE QUESTIONS**

a) Where is the bomb right now?	
b) When is it going to explode?	
c) What does it look like?	
d) What kind of bomb is it?	
e) What will cause it to explode?	
f) Did you place the bomb?	
g) Why?	
h) What is your name?	
i) What is your address?	
j) What is your telephone number?	

**OTHER DETAILS;**

<b>DO YOU KNOW THE NUMBER THE CALL WAS MADE FROM?</b> (Where automatic number reveal equipment is available record number shown / use the '1471' facility)
<b>INFORM THE SENIOR MANAGER/NOMINATED DEPUTY</b> Time, Name and telephone number of person informed.

**CONTACT THE POLICE BY USING THE EMERGENCY TELEPHONE NUMBER 999**

Name of person informed, time of call to police

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**ABOUT THE CALLER**

Name	
Organisation	
Cause / Complaint	
Nationality? (Guess)	Age? (guess)

(Tick any applicable)

Male		Female		Unsure	
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**THREAT LANGUAGE (tick any applicable)**

Well-spoken		Irrational		Taped message
Incoherent		Message reading		Altered voice
Other (Specify)				

**CALLER'S VOICE (tick any applicable)**

Calm		Crying		Clear throat
Angry		Nasal Slurred		Excited
Stutter		Disguised		Slow
Lisp		Accent		Hoarse
Other (Specify)				

If the voice sounded familiar, who did it sound like?	
What accent?	

**BACKGROUND SOUNDS (tick any applicable)**

Street noises		House noises		Animal noises
Crockery		Motor		Clear Voices
Static		P A system		Booth Music
Factory machinery		Office machinery		
Add more detail or comment on other sounds (specify)				

**REMARKS**

Print your name ..... Date .....

## APPENDIX B - DOCUMENT CONTROL SHEET:

This document control sheet, when presented to an approving committee must be completed in full to provide assurance to the approving committee.

Document Type	Bomb Threat and Suspect Package Policy		
Document Purpose	The purpose of the policy is to outline to staff how to recognise a suspect package or bomb threat and what action to take if a threat occurs.		
Consultation/ Peer Review:	Date:	Group / Individual	
<i>list in right hand columns consultation groups and dates -&gt;</i>	8 December 2021	Health & Safety Group	
	13 December 2021	EMT (as part of Health & Safety Group chairs log)	
Approving Committee:	H&S Committee	Date of Approval:	April 2017 (v1.0)
Ratified at:	Trust Board	Date of Ratification:	April 2017
Training Needs Analysis: <i>(please indicate training required and the timescale for providing assurance to the approving committee that this has been delivered)</i>	N/A	Financial Resource Impact	N/A
Equality Impact Assessment undertaken?	Yes [ <input checked="" type="checkbox"/> ]	No [ <input type="checkbox"/> ]	N/A [ <input type="checkbox"/> ] Rationale:
Publication and Dissemination	Intranet [ <input checked="" type="checkbox"/> ]	Internet [ <input type="checkbox"/> ]	Staff Email [ <input checked="" type="checkbox"/> ]
Master version held by:	Author [ <input checked="" type="checkbox"/> ]	HealthAssure [ <input type="checkbox"/> ]	
Implementation:	<i>Describe implementation plans below – to be delivered by the Author:</i>		
	Placed on the intranet Midweek and Weekly Global email		
Monitoring and Compliance:	Line Managers are required to review risk assessments on an annual basis or following any incident or changes to relevant legislation. The Safety Team will audit compliance with this policy as part of the Unit/Team health and safety management reviews.		

### Document Change History:

Version Number / Name of procedural document this supersedes	Type of Change i.e. Review / Legislation	Date	Details of Change and approving group or Executive Lead (if done outside of the formal revision process)
V1	New policy	April 2017	New policy
V1.1	Review	April 2019	Minor updates
V1.2	Review	Dec 2021	Minor updates to job titles Approved at Health & Safety Group – Dec-21



## APPENDIX C - EQUALITY IMPACT ASSESSMENT (EIA)

### For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

1. Document or Process or Service Name: **Bomb Threat and Suspected Package Policy**
2. EIA Reviewer (name, job title, base and contact details) **P Dent, Information and Safety Manager**
3. Is it a **Policy**, Strategy, Procedure, Process, Tender, Service or Other? **Policy**

#### Main Aims of the Document, Process or Service

It is imperative that all staff understand what to do in the event of a bomb threat to protect the safety of their colleagues, patients, the general public and themselves.

Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma

Equality Target Group Age Disability Sex Marriage/Civil Partnership Pregnancy/Maternity Race Religion/Belief Sexual Orientation Gender re-assignment	Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?  Equality Impact Score <b>Low = Little or No evidence or concern (Green)</b> <b>Medium = some evidence or concern (Amber)</b> <b>High = significant evidence or concern (Red)</b>	How have you arrived at the equality impact score? who have you consulted with what have they said what information or data have you used where are the gaps in your analysis how will your document/process or service promote equality and diversity good practice
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Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
<b>Age</b>	Including specific ages and age groups:  Older people Young people Children Early years	<b>Low</b>	The Policy sets out responsibilities and arrangements to protect the safety of people involved with or affected regardless of their age.
<b>Disability</b>	Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities:  Sensory Physical Learning Mental Health  (and including cancer, HIV, multiple sclerosis)	<b>Low</b>	Where an individual's sensory, physical, learning or mental health may adversely impact on their ability to undertake activities, a specific risk assessment is required to be carried out by the Line Manager.  Where the risk assessment identified a requirement to implement a reasonable adjustment due a disability, the Trust would seek to implement the adjustment.  Advice and guidance on the carrying out of and implications of the risk assessment would be available from the Safety Team, Occupational Health and Human Resources.
<b>Sex</b>	Men/Male Women/Female	<b>Low</b>	The requirements of the policy apply equally.
<b>Marriage/Civil Partnership</b>		<b>Low</b>	The requirements of the policy apply equally.
<b>Pregnancy/ Maternity</b>		<b>Low</b>	Where an individual's pregnancy may adversely impact on their ability to undertake activities, a specific risk assessment is required to be carried out by the Line Manager.  Where the risk assessment identified a requirement to implement a reasonable adjustment to the individual's work activity, the Trust would seek to implement this adjustment.
Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score

<b>Race</b>	Colour Nationality Ethnic/national origins	<b>Low</b>	The Policy sets out responsibilities and arrangements to protect the safety of people involved with or affected by using hazardous materials activities regardless of their age.
<b>Religion or Belief</b>	All Religions  Including lack of religion or belief and where belief includes any religious or philosophical belief	<b>Low</b>	The requirements of the policy apply equally to any to any religion or belief.
<b>Sexual Orientation</b>	Lesbian Gay Men Bisexual	<b>Low</b>	The requirements of the policy apply equally to any sexual orientation.
<b>Gender re-assignment</b>	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	<b>Low</b>	The requirements of the policy apply equally to either gender.

### Summary

Please describe the main points/actions arising from your assessment that supports your decision above

Regular safety management reviews are held where unit/team risk assessments are reviewed. Findings from management reviews are fed back to the Health and Safety Group meetings as required. As part of the reviews any equality issues raised by the assessments will be assessed.

EIA Reviewer – **Paul Dent**

Date completed; **8 December 2021**

Signature; P Dent

Please return the completed form to: [HNF-TR.policymanagement@nhs.net](mailto:HNF-TR.policymanagement@nhs.net)