

Display Screen Equipment Policy

**(For the use and management of Display
Screen Equipment (DSE) in the
Workplace)**

(HSP 008)

V8.0

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Summary

This document outlines the Trust Policy for the Assessment and Reduction of Risks with regards to the use of Display Screen Equipment (DSE). To enable the Trust to comply with the requirements of the Regulations, all workstations must be assessed and regular reviews carried out.

The document outlines the roles and responsibilities of employees; it describes the procedure for the identification of DSE users, risk assessment, guidance and use of eye test voucher.

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Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team.

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1. Introduction

- 1.1. The regulations are directed at the protection of employees who habitually use Display Screen Equipment (DSE) for significant periods in their normal work.
- 1.2. The main requirements of the regulations and the accompanying schedule are:
 - Assessment and the reduction of risks.
 - Minimum requirements for workstations including work equipment – work environment – user/computer interface.
 - Eye and eyesight tests and corrective appliances.
 - Work breaks, consultation, information and training.
- 1.3. This version supersedes any previous versions of this document.

2. Purpose of this Policy/Procedure

- 2.1. This document is intended to outline the management arrangements within the Trust to reduce risks arising from the use of Display Screen Equipment.
- 2.2. This policy and guidance is available to all employees and should be read in conjunction with the Trust Health and Safety General Policy.
- 2.3. The purpose of this policy is to support colleagues to prevent harm or injury from the use of DSE.

3. Scope

- 3.1. The Health and Safety (Display Screen Equipment) Regulations 1992 as amended by the Health and Safety (Miscellaneous Amendment) Regulations 2002 shall apply to employees identified as users and are designed to protect users whether they are employed to work:
 - At their own employer's workstation.
 - At a workstation at home.
 - At another employer's workstation.
 - Home Workers and Tele Workers.

3.2. Home Workers and Tele Workers

If a DSE user is employed to work at home, or at other locations away from their main base, whether permanently or for irregular/ad-hoc days, the regulations apply, whether or not the workstation is provided in whole or in part by the employing Trust.

3.3. Agency Workers

In situations where the worker is an employee of an agency or is self-employed, both the agency/employment business and the Trust as host employer have duties in accordance with current DSE regulations. The following list seeks to clarify those responsibilities:

3.3.1. Host employees should:

- 3.3.1.1 Assess risks to agency workers using Trust workstations.
- 3.3.1.2 Ensure all workstations comply with regulatory requirements.
- 3.3.1.3 Ensure activities are planned so that agency employee users can have the required breaks.
- 3.3.1.4 Provide training to agency employee users when their workstation is being modified.
- 3.3.1.5 Provide information to agency employees about risks, risk assessment and risk reduction measures.

3.3.2. Employment Agencies/Employment Businesses should:

- 3.3.2.1. Provide free eye tests if required for agency employees' who are regular DSE users.
- 3.3.2.2. Provide Health and Safety training for such employees' which covers workstation compliance and use.
- 3.3.2.3. Provide information to employees regarding funding where glasses are required for computer use only.

3.3.3. Check that host employers (The Trust) carry out their duties to:

- 3.3.3.1. Ensure their workstations comply.
- 3.3.3.2. Plan breaks and changes of activities for users.
- 3.3.3.3. Provide information to agency workers as necessary.

3.4. Exemptions

The following examples of equipment that are specifically excluded from the requirements of this document:

- 3.4.1. Driver's cabs or control cabs for vehicles or machinery, including computer systems on board a means of transport.
- 3.4.2. Computer systems mainly intended for public use.
- 3.4.3. Portable systems that are not in prolonged use, but do apply where portable systems are in prolonged use i.e. longer than ONE hour a day or 10% of the user's working week.

3.4.4. Calculators, cash registers or any other equipment which have a small data or measuring display.

3.4.5. Window typewriters.

3.5. Policy Statement

The Trust aims to secure the health and safety of its employees and others in so far as is reasonably practicable by:

3.5.1. Ensuring that each workstation is risk assessed annually and kept under review, taking into account the display screen, keyboard, mouse, furniture, working environment and the user/operator.

3.5.2. Taking all steps necessary to remedy any risks found as a result of an assessment.

3.5.3. Taking all steps necessary to incorporate changes of task within the working day, to prevent intensive periods of on-screen and keyboard/mouse activity.

3.5.4. Reviewing software to ensure that it is suitable for the task.

3.5.5. Arranging for the provision of eye tests following a risk assessment or upon receipt of recommendations from the Occupational Health Service.

3.5.6. Arranging for the supply of corrective appliances, appropriate to user's needs, where these are specifically required for DSE work.

3.5.7. Advising existing employees and all prospective employees of the risks to health, particularly physical issues that may arise through DSE work, how they can be identified and how they can be avoided.

4. Definitions / Glossary

In addition to the definitions given in the Royal Cornwall Hospitals NHS Trust Health and Safety Policy the following terms shall apply within this document:

Display Screen Equipment (DSE)	Display Screen Equipment (DSE) - Any alpha numeric or graphic display screen.
Regulations	The Health and Safety (Display Screen Equipment) Regulations 1992 as amended by the Health and Safety (Miscellaneous Amendments) Regulations 2002.
Workstation	Any assembly comprising of a display screen and any optional accessories including disk drives, modem, printer, document holder, work-chair, work-desk, work-surface or other item peripheral to the display screen equipment and the immediate work environment around the display screen equipment.

User	An employee who habitually uses display screen equipment as a significant part of their normal work and depends on the equipment to do a particular job, as alternative means are not readily available. In addition, the equipment is used by that person for continuous spells of one hour per day or more 10% of the user's working week.
Hardware	All physical equipment comprising the workstation including screen, keyboard, mouse, Computer Processing Unit, desk, chair and associated and peripheral equipment.
Software	The programs and other operating information used by a computer to facilitate operation of the system and the inputting and processing of data in any form.
Laptop Users	This term applies to anyone that uses a laptop computer, either as a regular feature of their work activity, or if they are ad-hoc users as defined above.
Cardinus / PACE	The names given to the system currently used within the Trust to manage the DSE training, risk assessments and action plans.
Hand-held Electronic Communication Devices	This term applies to Mobile Telephones and Smart Phones, such as a 'Blackberry', 'iPhone' or any other 'Smart Devices'. iPad and other 'Tablet' type computer. Portable Digital Assistants (PDA). In essence the definition applies to all electrical hand-held communications devices that are used as a regular or significant element of an individual's daily workload, and are used to: • Read or review documents, photos, text and drawings. • Read, review and update electronic documents, including emails, spread sheets, power point presentations, testing and web pages. The definition does not incorporate hand-held gaming machines as these are not considered items of work equipment in this policy.

5. Ownership and Responsibilities

5.1. Further to the general health and safety roles and responsibilities set out in the RCHT Health and Safety General Policy (HSP001), additional responsibilities exist and are described in this policy, which complies with the Health and Safety (Display Screen Equipment) Regulations 1992 as amended by the Health and Safety (Miscellaneous Amendments) Regulations 2002.

5.2. Role of the Chief Executive Officer

- The Chief Executive Officer is accountable for ensuring compliance with Health and Safety matters within all Care Groups and corporate areas. This includes the provision of funds to meet the procurement of peripheral equipment to support the user's needs.
- The Chief Operating Officer holds delegated responsibility from the Chief Executive Officer for the delivery of Health and Safety compliance.
- On a day-to-day basis, all Care Group managers act on behalf of the Chief Operating Officer in discharging the responsibilities for the management of Health and Safety.

5.3. Role of the Care Group General Managers

The Care Group General Managers are responsible for:

- Being aware of the Trust's Health and Safety Strategy and Policies.
- Supporting the departmental manager in promoting a Health and Safety culture within your working environment, ensuring participation and involvement when requested.
- Identifying potential risks and health and safety issues that may impact on the Trust ability to achieve its objectives, and report concerns through your line management structure.
- Ensuring all staff take due care at work, report any accidents, incidents or untoward occurrences and comply with the Trust's Health and Safety Policies in order that the Trust can fulfil its health and safety responsibilities.

5.4. Role of Heads of Service and Ward/ Department Managers

The role of any Head of Service, Ward or Department Managers is to ensure compliance. They will:

- Ensure regular DSE users have an up to date DSE assessments of their working environments, including working from home.
- Review individual self-assessments to ensure the risk has been lowered to the lowest reasonably practicable level.

- Where further support for employee is required from the Occupational Health Service, ensure that completed self-assessments are included in the management referral for retention on the individual's occupational health file.
- Be prepared to discuss complex issues identified in the initial self-assessment with either the Occupational Health Service and/or Health and Safety teams, within the given time frames.
- Escalate to the Health, Safety, Moving and Handling Teams any reports received from the Occupational Health Service following referrals so that suitable and sufficient actions taken.
- Maintain links to Healthy Working Team to enable review of all up to date records of all the risk assessments, action plans and reviews.
- Review and where necessary, monitor sickness absence where it is suspected to be related to DSE or the associated with the working environment, and promptly bring this to the attention of the Occupational Health Service.
- Ensure all employees, using DSE, arranges their workload in such a way as to ensure frequent work breaks away from DSE activities are incorporated into daily activities.
- Ensure all workstations are set up correctly in accordance with the DSE Regulations and this Policy.
- Ensure that any member they employ, that is a DSE user, is aware that any problems arising from, or affecting their use of DSE equipment, which may be highlighted by the DSE system during their training and assessment, must be notify and addressed by their Line Manager in the first instance.
- Ensure where additional equipment has been highlighted as necessary this is purchased at the earliest opportunity. Where equipment is expensive, advice will be sought from the General Manager.
- Ensure any risk identified that requires modification of room design or layout the employees and their representatives are consulted and the self-assessment is reviewed.
- Will ensure all DSE users are aware of their right to a free eye test and financial support for the purchasing of glasses where they are tested and deemed to be for computer use only.

5.5. Role of Heads of Nursing (or Care Group equivalent)

The Heads of Nursing are to:

- Monitor and audit Wards/Departments within the Care Group to ensure this policy is being implemented in its entirety.

- Ensure there are sufficient funds to replace equipment when required to do so.
- Monitor the risk assessment number for compliance.
- Ensure the Managers monitor and review each DSE user to ensure they carry out a self-assessment. (Compliance reports available from Safety Business Support rch-tr.safetybusinesssupport@nhs.net).
- Ensure all 'follow on/up' risk assessments and reviews are carried out in accordance with this policy, by trained competent employee. That the results are recorded on appropriate Risk Registers; actions are taken in reasonable timeframes, are properly planned, resourced and where necessary departmental DSE action plans should be produced.
- In conjunction with Human Resources Business Partner (HRBP) monitor sickness absence relating to workstations.
- Monitor employee with work related health issues are being referred to the appropriate departments within the given time frames.
- Ensure when a new additional workstation is to be installed, a risk assessment is carried out to ensure:
 - It fully complies with the DSE Regulations and Trust Policy.
 - Its installation is carried out in a manner ensuring it does not create problems for other users or contravene statutory requirements.
 - All new equipment relating to workstations is suitable and appropriate and meets with the requirements of the DSE Regulations and this Policy.

5.6. Role of Employees

The role of individual employees, identified as “users” in the Trust is to:

- Undertake a DSE self-assessment at least annually and in the event of any significant change to the workstation, location or equipment. Furthermore, a re-assessment will be undertaken in the event of any incident of ill health or injury associated with the use of a workstation.
- Inform their Line Manager if they are experiencing any pain and discomfort during or after using a workstation.
- Ensure their workstation and surrounding area is kept clean, tidy and free from tripping and other hazards.
- Ensure their DSE workstation is correctly adjusted to meet their individual needs as per the advice given.
- They will take short frequent breaks away from DSE work activity.

- Bring to the attention of their Manager/Supervisor any health and safety concerns related to their DSE, furniture and/or working environment, inclusive of any actions from the Healthy Working Plan.
- Attend relevant training courses provided by the Trust in relation to DSE and the workplace environment. (Refer to section 6.4).

5.7. Role of Occupational Health Service

Take the lead on ill health issues that have been identified by managers, users, or other concerning. This may be any of the following:

- A risk assessment or review.
- A period or repeated period of sickness absence.
- An ill health referral from an employee GP.
- A work-related accident or incident.
- A disability or incapacity.
- Liaise with Health and Safety Advisors, Managers and employees, providing advice and guidance on good working practices and methods to prevent or alleviate identified ill-health problems.
- Assist Managers in identifying the correct workplace furniture or equipment to alleviate/reduce specific ill health related issues.
- To undertake complex workstation assessments for individual employees following the identification of issues that cannot be resolved at a local level or following injury or condition associated with or impacting upon the use of a workstation.

5.8. Role of the Health and Safety Team and Safety Representatives

- Monitor and audit the effectiveness of the policy on HSE document INDG36 'Working with Display Screen Equipment' in liaison with Managers.
- Liaise with all levels of line management in providing advice and guidance on the policy and risk assessment process.
- Support Managers and Supervisors when they are undertaking risk assessments through the provision of practical advice and guidance.
- Provide practical training in the risk assessment process.
- Advise the Estates and Capital Development Departments on the spatial requirements of all workstations. Where there is a shortfall will bring this to the attention of the Chief Operating Officer.
- Work with the Occupational Health Service and Estates in resolving workstation layout and design issues.

- Where appropriate, will carry out ergonomic evaluations and risk assessments.

6. Standards and Practice

- 6.1. Trust procedure for the Assessment and the Reduction of Risks: To enable the Trust to comply with the requirements of the Regulations, all workstations must be assessed, and regular reviews carried out inline with that detailed in section 6.7.
- 6.2. Prior to undertaking assessments and reviews, Managers need to understand the rationale behind the regulations and the techniques involved in DSE risk assessment.
- 6.3. The purpose of the assessment is to identify the risks to Display Screen Equipment (DSE) users, which arise out of, or in connection with equipment use to eliminate, so far as is reasonably practicable, or to reduce any risk identified.

6.4. The Assessment

- 6.4.1 The paper based/form version has been replaced by the electronic Cardinus PACE system.
- 6.4.2 The manager notifies the healthy working team that they have a new starter, the manager completes and sends the form (Appendix 3) back to rcht.safetybusinesssupport@nhs.net.
- 6.4.3 Individual users are added to the system and receive a new joiners email, instructions for the first time log-in are highlighted (Appendix 4).
- 6.4.4 Individual user completes their training package, and they complete their self-assessment.
- 6.4.5 Following the assessment, any layout or set up adjustments deemed necessary to improve the user's working conditions shall be implemented by the user. If after completing the actions identified there are issues relating to the user's health or safety remaining, the individual will advise their line manager.
- 6.4.6 Adjustments such as keyboards, mouse-mats, foot rests and chairs etc. Should be resolved by the line manager in the first instance.
- 6.4.7 Where the manager requires further assistance, this should be escalated to the respective department e.g. Health and Safety Team or Occupational Health Service.
- 6.4.8 Once a manager has reviewed the user assessment and where necessary gained further assistance and follow-up assistance with the user if necessary they should:
 - 6.4.8.1 Meet with the employee to discover the issues highlighted in the assessment.

6.4.8.2 Make a referral to Occupational or Health and Safety Department depending on the issues identified during the assessment:

- Problems with Ill Health – refer to Occupational Health Service.
- Problems with the Workstation – refer to Health and Safety Department.

6.5. The Evaluation (Cardinus system)

6.5.1. It must be noted that a risk identified in the assessment (mouse, keyboard, footrest, etc.) which involves an order or repair will only be eliminated or reduced when that order or repair has been satisfactorily concluded i.e. the required equipment is in place or repair rectified:

6.5.1.1 The electronic system is made up from three parts.

- Part one is the individual user training.
- Part two is the individual risk assessment.
- Part three is an action plan which may highlight any outstanding actions that may be required, either by the individual or by the line manager.

6.5.1.2 Once these outstanding works or repairs have been concluded the user should be consulted and the original risk assessment reviewed/amended and a new assessment review date will be set.

6.5.1.3 The assessment checklists are not designed to be used to requisition supplies or obtain building modifications, although these may be highlighted by the assessment for renewal or modification.

6.5.1.4 Some simple solutions exist to correcting hazards associated with DSE such as moving desks or chairs to reduce reflection or glare: these should be implemented as faults found. Other issues may be more complicated to solve and advice can be obtained through the Health, Safety and Moving and Handling Team.

6.5.1.5 Some hazards may need other resources in order to resolve them, they may be outside the authority of the individual or the manager, in which case these should be escalated using normal Trust procedures.

6.5.1.6 Where additional assistance, guidance or resources are required, then the completed assessment must be provided to the individuals line manager for action and a copy provided to Occupational Health/Health and Safety Teams.

- 6.5.1.7 Where the individual user has a disability, condition or illness that may be affected by the use of DSE, their ability to use the electronic DSE system or where a complex assessment may be required, please contact the Health and Safety or Occupational Health Teams.

6.6. Exceptions

- 6.6.1. When the risks can be reduced or eliminated, or a problem can be resolved with immediate effect for example by moving the furniture to avoid glare/reflection.
- 6.6.2. When a rectification or repair has been identified and replacement furniture, blinds etc. are on order or repair works have been requested.

6.7. Risk Assessment Reviews

Risk assessment must be carried out and/or reviewed, when any of the following occur (except where the item is an exact and identical replacement):

- 6.7.1 A major change to, or replacement of software used.
- 6.7.2 A change to, or replacement of the hardware (screen, keyboard, etc.).
- 6.7.3 A change in, or replacement of workstation furniture.
- 6.7.4 An increase in the amount of time spent in using the equipment.
- 6.7.5 A change in the task.
- 6.7.6 If the workstation is moved to another location or within the same office space.
- 6.7.7 If the environment is changed, i.e., building modification or alteration.
- 6.7.8 If a person or user highlights a problem, or an episode of ill health occurs.
- 6.7.9 If none of these applies, then the system will periodically send a reminder every 12 months.

6.8. Minimum Requirements for Workstation Equipment

6.8.1. Display Screens

- 6.8.1.1. Must be/have well defined, clear legible characters that are stable, flicker free image with adjustable brightness/contrast control and be free of glare/reflections.
- 6.8.1.2. Must allow adjustment of resolution, colour contrast, brightness to suit the individual user.
- 6.8.1.3. It must have easy swivel/tilt facilities and be height adjustable.

6.8.2. Keyboards

- 6.8.2.1. Must be separate from screen, have a tilt facility, have clearly distinguishable characters marked on the keys and have a matt non-reflective surface.
- 6.8.2.2. Be positioned on the desk to allow space in front of the keyboard to support arms/hands/wrists (around one hand length i.e., approximately 40mm from the edge of the desk).

6.8.3. Work Desks

- 6.8.3.1. Must have large non-reflective smooth surfaces, ideally in a wood effect, but not white.
- 6.8.3.2. The desk must be at least 720mm high. If adjustable, the range should be 680-760mm. For Sit/Stand desks the height range should be 900-1200mm.
- 6.8.3.3. Minimum of 1400mm length (wide).
- 6.8.3.4. Minimum 800mm depth.
- 6.8.3.5. Desk top lip should be no greater than 40mm in depth.
- 6.8.3.6. There must be leg room of 850mm width with no clutter on the underside.
- 6.8.3.7. Consideration should be given to those employees who are six feet or more as they require a desk which has a different surface height to prevent their legs from pressing on the underside of the desk.
- 6.8.3.8. A footrest should be made available when required.

6.8.4. Work Chairs

- 6.8.4.1. Must be stable with a five point base.
- 6.8.4.2. Wheels must be appropriate to the floor surface. For example; soft castors on a hard floor, standard on a carpeted area.
- 6.8.4.3. Height adjustable arms.
- 6.8.4.4. Height back and tilt.
- 6.8.4.5. Seat height and tilt.
- 6.8.4.6. Foam density that conforms to Health and Safety Guidance.

6.8.5. The Mouse

- 6.8.5.1. The mouse may be wired or wireless.
- 6.8.5.2. It should be used located closely to the keyboard.
- 6.8.5.3. Specialist mice must be approved by the Occupational Health Service or Health, Safety, Moving and Handling.

6.9. **Minimum Requirements for Workstation Environment**

6.9.1. Space

This should allow for adequate clearances for thighs, knees, lower legs and feet under the work surface and between furniture for the user to change position and have easy access to file, documents and other office equipment without the risk of injury. Adequate space must also be provided to store personal belongings in a safe manner.

Workplace Regulations stipulate minimum requirements for room sizes. When empty, room size should be 11m³ (cubic) per person.

However, when occupied there must be sufficient space to allow people to move around workstations comfortably. Depending on the employee needs or those with disabilities, the free space or traffic routes may need to be greater. The minimum is insufficient if much of the room is taken up with furniture etc.

More advice can be obtained from the Health, Safety, Moving and Handling Team.

6.9.2. Lighting

Lighting levels should be 450lx for computer work. The workstation should be without glare to the screen or veiling across the workstation.

6.9.3. Glare and Reflections

Workstations must be designed and positioned so that sources of light such as windows and other openings, transparent and translucent walls and brightly coloured fixtures or walls cause no glare or disturbing reflections on the screen.

6.9.4. Heat and Humidity

Electronic equipment can be a source of dry heat, which can modify the thermal environment causing discomfort and sore eyes. Adequate ventilation and humidity must be maintained at levels which maintain the comfort of users.

6.9.5. Noise

From printers and equipment should be kept low so as not to impair concentration, prevent normal conversation or decrease efficiency.

6.9.6. User/Operator Computer Interface

- 6.9.6.1. Inappropriate task design can be a source of stress at work. Stress prejudices employee motivation, effectiveness and efficiency and, in some instances, can significantly affect an employee's health. In DSE work, good design of the task can be as important as the choice of equipment, furniture and working environment.
- 6.9.6.2. The Regulations require the Trust (Managers) to plan the activities (tasks) of each user so that:
- Natural pauses occur as a consequence of the inherent organisation of the work.
 - Variety is built into jobs to prevent repetition; ensure a mix of screen based and non-screen-based work to prevent fatigue and vary visual and mental demands.
 - Should the job not be able to be organised in such a way as to prevent intensive use of DSE then activity breaks should be introduced prior to the onset of fatigue, not in order to recuperate. They should be included in working time, not result in longer hours and should be taken away from the screen: doing other work related tasks, i.e., filing, or telephoning and not taken as "coffee breaks".
 - Activity breaks should consist of a minimum of 5 minutes to a maximum of 10 minutes for each hour spent actually working at a screen. Activity breaks cannot be taken cumulatively (i.e. work for four hours then take a 20 minute break).
 - In addition to work planning and task design the principles of software ergonomics are important to the health of DSE users; badly designed or inappropriate software will impede the efficient completion of work.

6.9.7. Workstation Design

- 6.9.7.1. Managers responsible for implementing the risk assessment action plans and/or arranging the purchase of furniture used with DSE must be fully aware of the desirable design characteristics of such items. There are two important points to be noted:
- Any design must comply with the requirements laid down in BS-EN-ISO-9241 (Ergonomic requirements for office work with VDU, Workstation Layout and Postural requirements).see Appendix 7.

- Some workers may have particular physical constraints or disabilities, which prevent them from using normal adjustable furniture. Special provision may be needed to accommodate their individual need.

6.9.7.2. Employees are responsible for:

- Remove anything from under your workstation that causes you to twist when sitting.
- Arrange pieces of equipment that you use frequently, e.g., the telephone, so that you do not stretch to reach them.
- Use a document holder If you frequently refer to paper documents at the same time as working on your screen, e.g., when entering data.
- Do not cradle the telephone between your neck and shoulder. Ask for a telephone headset if you spend long periods on the phone whilst working on your screen.

6.9.8. Work with Portable DSE and other Electronic Communications Media

- 6.9.8.1. Work with laptops, notepad computers, PDA and smart phones is on the increase and when subjected to prolonged use is subject to the DSE Regulations.
- 6.9.8.2. Some of the risks that are associated with portable DSE are different to those of a desktop computer; these can be attributable to the size, design and function of the hardware, for example: keyboards are smaller; there is normally a lack of keyboard/screen separation making it more difficult to operate the keys or to achieve a comfortable working posture.
- 6.9.8.3. Portable DSE is also used in a wider range of environments many of which are poorly suited to DSE work; it is therefore important that users of portable DSE are given instruction and training in how to best utilise such equipment and workplaces to avoid safety or health issues developing.

6.10. Portable DSE and Risk Assessments

- 6.10.1. It would not be practicable to undertake independent assessments of each temporary work location (i.e. rail travel, hotel room, etc.) However, users must be aware of how to establish the safest possible work location and be aware of controls that they may implement.
- 6.10.2. Therefore the instruction and training given to users of portable DSE must be sufficient to enable them to make their own risk assessments and ensure that measures are taken to control risks whenever they set up their equipment.

- 6.10.3. When working in a fixed or regular location the use of docking stations, laptop stands and separate keyboards and mice should be encouraged as these will assist in avoiding many of the ergonomic risks with portable DSE.
- 6.10.4. A more vigorous and reinforced attitude to taking regular breaks and/or changes of activity is necessary for portable users not working at docking stations.

6.11. Manual Handling Risks

- 6.11.1. When moving between locations, keep in mind:
- 6.11.1.1. Not only the PC but also such items as spare batteries, printers, papers, files etc. that have to be carried.
 - 6.11.1.2. The loading and unloading of this equipment into cars.
 - 6.11.1.3. The distances they are to be carried.
 - 6.11.1.4. The terrain (i.e. hills, stairs).
 - 6.11.1.5. The environment (dry, wet, snow, slippery surfaces etc.).
 - 6.11.1.6. Consider using wheeled luggage or trolley.
 - 6.11.1.7. Do not carry papers or equipment that may not be required.
 - 6.11.1.8. Risk of theft and the possibility of assault/mugging – take precautions such as:
 - Not leaving portable computers on show in parked cars.
 - Avoid going to places where theft may occur during unsociable hours.
 - Design tasks to avoid lone working in circumstances where theft is likely.

6.12. Eye and Eyesight tests and Corrective Appliances

- 6.12.1. Trust employees who use DSE as a regular feature of their normal work are classified as 'users' (definition – section 4) by the Trust are entitled to receive eye and eyesight tests:
- 6.12.1.1. Upon recruitment.
 - 6.12.1.2. When becoming a user.
 - 6.12.1.3. If a user, upon request.
 - 6.12.1.4. At regular intervals every two years or as advised by their optician.

- 6.12.1.5. When the user experiences visual difficulties.
- 6.12.2. The procedure with reference to eye and eyesight tests is administered by the Occupational Health Service and employee should contact them to arrange for their tests.
- 6.12.3. Special corrective appliances will be provided for DSE use only (as appropriate to the user's role and tasks undertaken) to control vision defects at the normal display screen viewing distance, but not normal correctly appliances prescribed for any other purpose.
- 6.12.4. To meet the provisions under the regulations the Trust will bear the expense of eye and eyesight tests and the provision of "special" corrective appliances for DSE use only. If a user selects an appliance other than a basic appliance i.e. designer frames, tinted or coated lenses, then the Trust will only contribute that portion of the total cost equal to the cost of a basic appliance.
- 6.12.5. If, as a result of an eyesight test provided by the Trust, users are prescribed spectacles or lenses to correct eye defects or vision defects not associated with the use of DSE then the Trust absolves all responsibility for costs pertaining to those corrective appliances.

6.13. Information, Consultation and Training

- 6.13.1. Users of DSE are required under the regulations to receive information and training on the measures taken by the Trust to protect them from, or to reduce the risks associated with the use of display screen equipment; these provisions are met within the Trust by:
 - 6.13.1.1. Training courses aimed at all users of DSE.
 - 6.13.1.2. Specific DSE assessors courses for managers/supervisors with responsibility for carrying out DSE risk assessments.
 - 6.13.1.3. Eyesight tests upon request and corrective appliances for DSE use only.
 - 6.13.1.4. Information sheets supplied for display near DSE.
 - 6.13.1.5. Specific training for portable DSE users.

6.14. Reporting Adverse Effects from Work with DSE

- 6.14.1. Users of DSE who feel they are suffering from any adverse effects for their work, either from a health, or from a safety viewpoint will have the cause investigated, substantiated and remedial action carried out by raising the issue with their line manager and/or raising further concerns on the Trust Incident Reporting System.

- 6.14.2. The first stage in the process of having adverse health or safety issues rectified is to ensure that these instances are reported, they are either:
- 6.14.2.1. To report the problem to their line manager in the first instance who will review the risk assessment and investigate any safety issues calling upon a Trust Health and Safety Advisor for advice and guidance as necessary.
 - 6.14.2.2. Alternatively, the manager may refer the user to the Occupational Health Service, who will make contact with the person to see them and investigate any health issues and provide or arrange treatment and/or advice to the user.
- 6.14.3. In all cases an incident report must be created for each adverse instance.
- 6.14.4. Should it be established that work with DSE is the cause then, dependant on cause and recommended action, the Health and Safety Team or the Occupational Health Service with liaise with the manager to affect remedial action.
- 6.14.5. Should a user decide to seek help from their GP, the Trust may not be informed and, therefore, the problem may remain undetected and unresolved to the detriment of all concerned.
- 6.14.6. Medical confidentiality will be observed by all concerned.

6.15. **Records**

- 6.15.1. Records of all previous paper based (prior to August 2020) risk assessments, action plans and reviews should be kept in the individual's personnel file.
- 6.15.2. Electronic copies (after August 2020) will be held within the new Cardinus PACE system. Managers wishing to receive copies to enable user actions plans to be pursued can contact the health working team rcht.safetybusinesssupport@nhs.net.

7. Dissemination and Implementation

- 7.1. This policy shall be published on the Trust Documents Library site once approved by the Health and Safety Committee and signed by the Executive Director with responsibility for Health and Safety matters.
- 7.2. The membership of the Health and Safety Committee shall assist in the distribution and dissemination of the policy by communication at both divisional and local levels.

8. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Compliance with the undertaking of self-assessment requirement.
Lead	Health and Safety Committee.
Tool	Monthly return and self-audit tool reported to the Health and Safety Committee.
Frequency	Health and Safety Manager quarterly report and Care Group reports to the Health and Safety Committee.
Reporting arrangements	Reports received by the Health and Safety Committee as detailed above and reported in accordance with the Committee Terms of Reference.
Acting on recommendations and Lead(s)	The Health and Safety Committee, supported by the specialist advisors, shall make recommendations as appropriate.
Change in practice and lessons to be shared	Where issues are identified within reports; all such comments will be fed back to the relevant area by the appropriate representative on the committee within a timeframe identified by the Committee.

9. Updating and Review

- 9.1. This policy will need to be reviewed not more than every 3 years, or subject to any industry and Government guidance and best practice updates.
- 9.2. Revisions can be made ahead of the review date when the procedural document requires updating. Where the revisions are significant and the overall policy is changed, the author should ensure the revised document is taken through the standard consultation, approval and dissemination processes.
- 9.3. Where the revisions are minor e.g. amended job titles or changes in the organisational structure, approval can be sought from the Executive Director responsible for signatory approval and can be re-published accordingly without having gone through the full consultation and ratification process.
- 9.4. Any revision activity is to be recorded in the Version Control Table as part of the document control process.

10. Equality and Diversity

10.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the [Equality Diversity And Inclusion Policy](#) or the [Equality and Diversity website](#).

10.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	Display Screen Equipment Policy (HSP 008) V8.0
This document replaces (exact title of previous version):	Display Screen Equipment Policy (HSP 008) V7.0
Date Issued / Approved:	July 2024
Date Valid From:	July 2024
Date Valid To:	July 2027
Author / Owner:	G Griffiths, Head of Health and Safety
Contact details:	01872 252266
Brief summary of contents:	To clarify the Trusts position on the management of the use of Display Screen Equipment (DSE)
Suggested Keywords:	Display Screen Equipment, Health, Safety, Posture, DSE Eye test
Target Audience:	RCHT: Yes CFT: No CIOB ICB: No
Executive Director responsible for Policy:	Chief Operating Officer
Approval route for consultation and ratification:	Health and Safety Committee
Manager confirming approval processes:	G Griffiths, Head of Health and Safety
Name of Governance Lead confirming consultation and ratification:	G Griffiths, Head of Health and Safety

Information Category	Detailed Information
Links to key external standards:	Health and Safety (display Screen Equipment) Regulations 1992 Provision and Use of Work Equipment Regulations 1998 L26 Work with display screen equipment L122 Provision and use of Work Equipment Regulations 1998 Approved Code of Practice and guidance INDG 36 Working with VDUs CQC Essential Standards Outcome 10 - Safety and Suitability of Premises
Related Documents:	Health and Safety General Policy Incident Reporting Policy Risk Assessment and Risk Registers Policy and Guidance
Training Need Identified:	Yes – Provided via the Cardinus System
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Chief Operating Officer / Health and Safety

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
March 2006	V1.0	Original.	Len Welch Health and Safety Advisor
March 2010	V2.0	Minor changes to sentences to add clarity and change from directorate to divisional structure. Removal of paper system of risk assessment.	Len Welch Health and Safety Advisor
Aug 2011	V3.0	Included in this document are revised and new definition; changes to roles and responsibilities (including the requirement).	Andrew Basham Interim Health and Safety Advisor
Oct 2011	V4.0	Reformat Policy in line with new Trust guidelines.	Robin Gatenby Health and Safety Manager

Date	Version Number	Summary of Changes	Changes Made by
Dec 2013	V5.0	Review of whole document.	Robin Gatenby Health and Safety Manager
Jan 2016	V6.0	Minor corrections for clarity and conformity.	Paul Freeman H and S Auditor
April 2019 to August 2021	V7.0	Full Review. Change from paper based system to electronic system. Minor corrections for clarity and conformity.	Natasha Quick, Senior Health and Safety Advisor. Malcolm Irving, Health and Safety Auditor. G Griffiths, Head of Health and Safety
January 2024	V8.0	Full Review and reformatted Policy in line with new Trust Templates. Minor corrections made for clarity and conformity.	G Griffiths, Head of Health and Safety

All or part of this document can be released under the Freedom of Information Act 2000.

All Policies, Strategies and Operating Procedures, including Business Plans, are to be kept for the lifetime of the organisation plus 6 years.

This document is only valid on the day of printing.

Controlled Document.

This document has been created following the Royal Cornwall Hospitals NHS Trust [The Policy on Policies \(Development and Management of Knowledge Procedural and Web Documents Policy\)](#). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity, and Inclusion Team
rcht.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy / policy / proposal / service function to be assessed:	Display Screen Equipment Policy (HSP 008) V8.0
Department and Service Area:	Corporate / Health and Safety
Is this a new or existing document?	Existing
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Jemma Dunstan, Health and Business Support Advisor.
Contact details:	01872 25 2976

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	To establish a safe and robust systems and processes for use and management of DSE in the workplace environment.
2. Policy Objectives	Ensure compliance with Statutory instruments, industry best practice guidance. Clarify the arrangements for the safe use of DSE.
3. Policy Intended Outcomes	Establish a policy to reduce risk of injury and ill health associated with the use of DSE.
4. How will you measure each outcome?	Regular reports to Health and Safety Committee using general sickness absence information and the monitoring of Datix incidents.
5. Who is intended to benefit from the policy?	All employee and stakeholders.

Information Category	Detailed Information
6a. Who did you consult with? (Please select Yes or No for each category)	- Workforce: Yes - Patients/ visitors: No - Local groups/ system partners: No - External organisations: No - Other: No
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Health and Safety Committee
6c. What was the outcome of the consultation?	Approved
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff, or patient surveys: None

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale
Age	No	This policy does not impact on age.
Sex (male or female)	No	This policy does not impact on Sex.
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	This policy does not impact on gender reassignment.
Race	No	This policy does not impact on race.
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	This policy does not impact on disability.
Religion or belief	No	This policy does not discriminate with any religious or cultural beliefs.
Marriage and civil partnership	No	This policy does not impact on marriage/ civil partnership.

Protected Characteristic	(Yes or No)	Rationale
Pregnancy and maternity	No	This policy does not impact on pregnancy / maternity.
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	This policy does not impact on sexual orientation.

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment:

Jemma Dunstan, Health and Business Support Advisor.

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:

[Section 2. Full Equality Analysis](#)

Appendix 3. Cardinus User Account Form



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Royal Cornwall Hospitals
NHS Trust

Cardinus – Healthy Working / DSE User Account – Request Form					
Employee Number:			(Payroll Ref No)		
First & Surname:					
Contact Number:					
Email Address:					
Position/ Job Title:					
Role:					
Department:					
Care Group:					
Site Location:					
Work from home:	Yes ☐	No ☐			
Reports to:					
Line Manager:					
FOR HEALTHY WORKING / DSE USE ONLY:					
Account Status:	☐	Existing	New	Archived	Special Factors
Account Created:	☐				NEM
Account Confirmed:	☐				WFH
Account Complete:	☐				EQ
Account Archived:	☐				OH
Date Archived:					Other
Comments:					
For any other queries, please contact us on: Tel No: 01872 252181 e-mail: rcht.safetybusinesssupport@nhs.net					

Appendix 4. Cardinus – Instructions (First Time User Log In)

Instructions for the Cardinus System – Display Screen Equipment Assessment and Training Toolkit

The Trust has invested in an online training and assessment package for all Display Screen Screen Users (DSE).

This is a training and assessment toolkit. It is designed to show you how to set up your workstation and why it is important to ensure you are sitting correctly and using the appropriate equipment.

Once you are registered you can use this for any workstation you work at.

The course takes approximately 30 minutes to complete

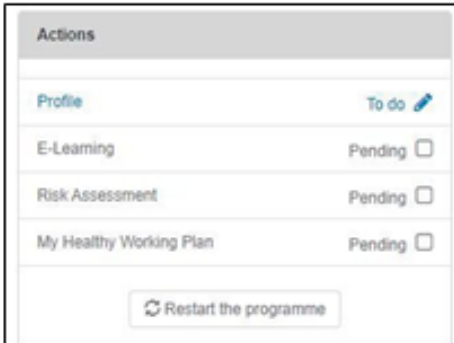
How to use the system?

1. You will receive an email from the system asking you to click a link
2. Click on the link, this will open a new page
3. Your User ID already filled
4. You need to create a password
5. The system will now send you confirmation your password is accepted and your account is set up.

Please note: If you do not receive an email Please check your junk mail

Click on the link, this is the screen you will see
Follow the natural flow.

1. Complete your profile
2. Complete the e-learning programme and the test, you must answer all 10 questions. The pass rate is 80%. If you fail you can re-do again and again.
3. Carry out your assessment
4. My healthy plan will show you how to get the issues fixed.



Actions	
Profile	To do 
E-Learning	Pending ☐
Risk Assessment	Pending ☐
My Healthy Working Plan	Pending ☐
 Restart the programme	

Reminder email: If you do not complete you will receive a reminder.

Chaser email: Sent because you have outstanding risk on the system.

Completion: On completion you **must** email a copy of the assessment to your line manager.

Further Action: If the line manager cannot resolve they must email the assessment to rch-tr.healthandsafety@nhs.net

Problems: If you have problems with the system email rcht.safetybusinesssupport@nhs.net

Appendix 5. Cardinus – Whitelisting Instructions (Password Reset)

Instructions for the Cardinus System – Password Reset

The Trust has invested in the Cardinus online training and self-assessment package for all employees. You will need to log into the system to complete your training and self-assessment or to record that you are not a DSE user.

Due to the security settings within the NHS Mail service, the Cardinus system - password reset email needs to be whitelisted.

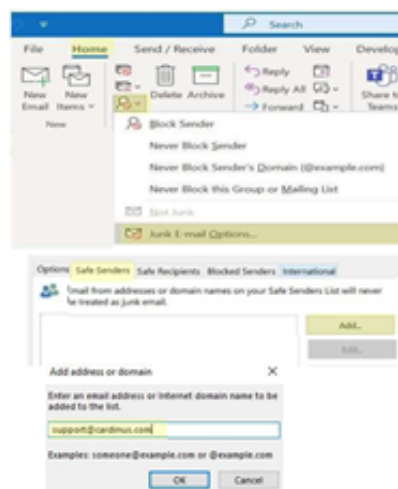
Why do I need to whitelist an Email Address?

Whitelisting is the name given to the process of adding an email address to an approved senders list and confirms they are a trusted sender. By whitelisting an email address this ensures emails from the sender are delivered to your inbox and not moved to the junk files.

How to whitelist an Email Address

In Microsoft Outlook complete the following steps:

- 1) Click on the home tab
- 2) Select junk
- 3) From the drop-down menu select Junk E-mail Options
- 4) Select the 'Safe Senders' tab and 'Add'
- 5) Enter 'support@cardinus.com' into the pop-up tab and click OK.
- 6) Click Apply and then OK on the safe senders tab
- 7) The dialog box will then disappear. Once the Cardinus system - password reset email address has been added this will now show in the safe senders tab.



If you have any problems with the system or require a copy of your personal access link email:
richt.safetybusinesssupport@nhs.net

Appendix 6. Cardinus – Whitelisting Instructions (Personal Access Link)

Instructions for the Cardinus System – Personal Access Link

The Trust has invested in the Cardinus online training and self-assessment package for all employees. You will need to log into the system to complete your training and self-assessment or to record that you are not a DSE user.

Due to the security settings within the NHS Mail service the Cardinus system access needs to be whitelisted.

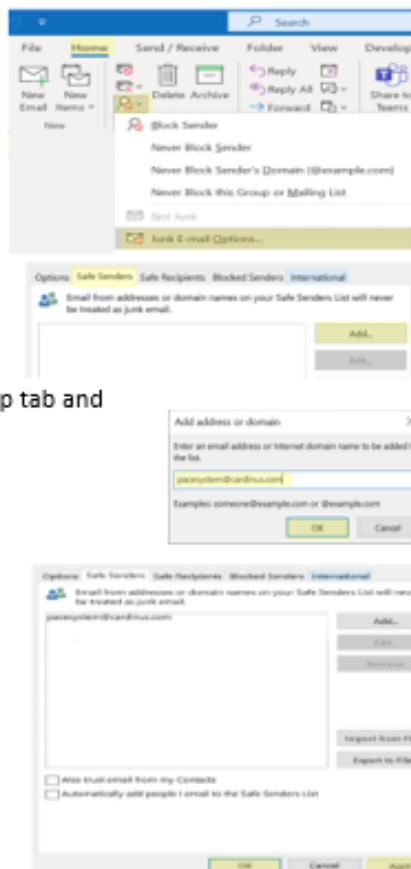
Why do I need to whitelist an Email Address?

Whitelisting is the name given to the process of adding an email address to an approved senders list and confirms they are a trusted sender. By whitelisting an email address this ensures emails from the sender are delivered to your inbox and not moved to the junk files.

How to whitelist an Email Address

In Microsoft Outlook complete the following steps:

- 1) Click on the home tab
- 2) Select junk
- 3) From the drop-down menu select Junk E-mail Options
- 4) Select the 'Safe Senders' tab and 'Add'
- 5) Enter 'pacesystem@cardinus.com' into the pop-up tab and click OK.
- 6) Click Apply and then OK on the safe senders tab
- 7) The dialog box will then disappear. Once the Cardinus pace email address has been added this will now show in the safe senders tab.



If you have any problems with the system or require a copy of your personal access link email:

richt.safetybusinesssupport@nhs.net

Appendix 7. Ergonomic Workstation Requirements

