

The Provision and Use of Work Equipment and Management of Vibration Attributed to Work Equipment Policy

(HSP-23)

V4.0

June 2026

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Data Protection Act 2018 (UK General Data Protection Regulation – GDPR) Legislation.

The Trust has a duty under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

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.

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

1. Introduction

- 1.1. The Trust Board views compliance with health and safety legislation as the minimum standard and is committed to exceeding this standard to achieve best practice.
- 1.2. The Trust will ensure that all work equipment in use or obtained complies with the requirements of the Provision and Use of Work Equipment Regulations 1998 and The Control of Vibration at Work Regulations 2005.
- 1.3. To meet these legal requirements, where the equipment being obtained is not of simple construction, the Trust will require that discussion takes place between staff obtaining, end users and specialist advisors such as members of the Health, Safety, Moving and Handling Team. In this way the requirements of the Regulations can be met prior to the equipment being procured and accepted on site.
- 1.4. Work equipment is any machinery, appliance, apparatus, device, tool or installation for use at work.
- 1.5. This version supersedes any previous version of this document.

2. Purpose of this Policy/Procedure

- 2.1. This policy applies to all persons identified as being at risk within the risk assessment.
- 2.2. The purpose of this document is to ensure that:
 - The Trust provides a safe working environment so far as is reasonably practicable.
 - Suitable risk assessments and control measures are in place.

3. Policy Statement

- 3.1. The aim of this Policy is to ensure that work equipment is identified, assessed, controlled, managed and maintained in order to minimise risks to staff and others.
- 3.2. The Royal Cornwall Hospitals NHS Trust will take all reasonable steps to ensure that the risk of injury or harm to staff, patients and others is reduced to the lowest level reasonably practicable by the selection, maintenance, use and safe disposal of work equipment.
- 3.3. This Policy applies to all Trust staff, sites and activities.

4. Definitions/Glossary

For the purposes of this document, unless otherwise stated specifically the following definitions will apply throughout.

The Trust	The Royal Cornwall Hospitals NHS Trust.
Trust Sites	All areas, sites, buildings or premises owned, occupied or controlled by the Trust.
Staff	All persons who are employed or carry out work directed by the Trust whether on permanent or temporary contracts (written or implied), paid or unpaid, and shall include persons employed through recruitment and employment agency providers to assist the Trust in delivery of services but excludes contractors and third parties undertaking works for or on behalf of the Trust.
Personal Protective Equipment (PPE)	All equipment which is intended to be worn or held by a person at work that protects them against one or more risks to their health or safety i.e. safety helmets, gloves, eye protection, high visibility clothing, safety footwear, and safety harnesses and any addition or accessory designed to meet that objective.
Risk Assessment	The careful examination of what could cause harm, and the likelihood of the harm occurring; in order to decide on precautions to prevent that harm occurring.
Control Measure	Any measure to reduce the risk in the workplace, e.g. Standing Operating Procedures, mechanical devices, Personal Protective Equipment, training, restricted access zones.
PUWER	The Provision and Use of Work Equipment Regulations 1998.
Work Equipment	Any machinery, appliance, apparatus or hand/power tool used on Trust sites or in connection with the Trusts undertaking e.g., laboratory equipment, medical devices, surgical instruments, office equipment, vehicles, catering and engineering tools and equipment etc.
Use	Includes using, starting, stopping, erecting, installing, dismantling, transporting, maintaining, servicing, operating, cleaning, lifting, carrying, and any other equipment used for or at work for any purpose related to Trusts activities.

ACOP	Approved Code of Practice that accompanies the PUWER 1998 Regulations.
Vibration Regulations	The Control of Vibration at Work Regulations 2005 and associated Approved Code of Practice and guidance.
HAVS	Hand-Arm Vibration Syndrome and vibration-related carpal tunnel syndrome.
ELV	The daily exposure limit value (ELV) is the maximum amount of vibration an employee may be exposed to on any single day.
Work Environment	Any environment where activities are being undertaken for, by or on behalf of the Trust.
Contractors	Any person employed by or working for a third party organisation working for or acting on behalf of the Trust.
HSE	Health and Safety Executive.
Riddor	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

5. Ownership and Responsibilities

5.1. Role of The Chief Executive

The Chief Executive Officer has the overall accountability for ensuring that RCHT meets its statutory obligations and that effective arrangements for the management of health and safety are put in place.

5.2. Role of the Chief Operating Officer

The Chief Operating Officer is the nominated Executive Director with responsibility for Health and Safety across the organisation.

5.3. Role of all Directors and Senior Managers

- 5.3.1. Identify those activities and equipment that present a risk to staff and ensure this is added to the local risk register and appropriately monitored.
- 5.3.2. Ensure the provision of safe working procedures and measures as identified by documented risk assessment and written safe systems of Work including the provision of training, resources, equipment etc.

- 5.3.3. Ensure that new/replacement work equipment is fully compliant with the latest legislative and best practice requirements and is correctly marked.
- 5.3.4. Ensure that all equipment is recorded in the Trust asset register.
- 5.3.5. Ensure the provision of resources for servicing and maintenance of work equipment by competent engineers in accordance with the manufacturers recommendations.
- 5.3.6. Directors must ensure that managers are adequately trained to:
 - Identify hazards, assess risks, develop adequate control measure.
 - Understand their responsibility and level of authority.
- 5.3.7. Directors will also ensure that there is a robust business continuity strategy to maintain services in the event of a fault, defect or breakdown with equipment.
- 5.3.8. Ensure the appointment of competent contractors providing an adequate service where required for the repair and maintenance of work equipment. A suitable contract manager must also be appointed in accordance with the Trust Management of Contracts Policy.

5.4. Role of Managers and Supervisors

Each manager is responsible for ensuring that the operations and activities under their control using equipment are managed and controlled in a safe manner; and will:

- 5.4.1. Assess the risks associated with work equipment prior to use and evaluate those risks throughout the life of the equipment.
- 5.4.2. Where the risk assessment or manufacturers information identifies use of additional equipment and/or personal protective equipment the principal equipment shall not be released for use until all elements are provided on site.
- 5.4.3. Consider the safety factors of new, reconditioned, and relocated equipment, ensuring that so far as reasonably practicable risks associated with the equipment and processes are reduced to minimum levels.
- 5.4.4. Ensure that all equipment is checked prior to each use and that any damage or defects are fully reported, and defective equipment is clearly labeled and removed from service.
- 5.4.5. Ensure that all relevant staff are adequately trained to ensure that the requirements of this document are applied.
- 5.4.6. Ensure that staff within their work area, regardless of their role, follow safe working procedures and implement the controls identified in the risk assessment.

- 5.4.7. Seek assistance and support, as required regarding the management of work equipment.
- 5.4.8. Ensure that all incidents or near-misses relating to work equipment are fully reported, regardless of outcome, in the Trust incident reporting and management system (Datix).
- 5.4.9. Arrange for the immediate referral to the Occupational Health Service of all cases of staff members reporting suspected or actual problems or health conditions that may be attributed to the use of work equipment.

5.5. Role of Staff

In addition to and in compliance with the statutory obligations placed upon all employees, staff will:

- 5.5.1. Undertake pre-use checks of the equipment as identified in training and manufacturer's instructions.
- 5.5.2. Report any problems/incidents with regard to the use of work equipment to their line manager.
- 5.5.3. Co-operate with the undertaking of risk assessment and implementing safe working procedures.
- 5.5.4. Ensure that work equipment is operated in accordance with manufacturer's instructions; Standard operating procedures and that any safe systems of work are followed.
- 5.5.5. Use personal protective equipment provided as identified by risk assessment and ensure it remains fit for purpose by checking it for defects and storing it correctly.
- 5.5.6. Not use, attempt to use or interfere with equipment which they have not been trained and authorised to use.
- 5.5.7. Participate fully in training provided.
- 5.5.8. Report all incidents and matters which may present a serious and immediate danger via the Trust incident reporting system.

5.6. Role of Contracts and Contractor Sites

- 5.6.1. The Trust will utilise the services of contractors to undertake works that may result in work equipment being used and stored on site.
- 5.6.2. The manager appointing the contractor shall ensure provision of:
 - Competent management of activities involving the use of work equipment.
 - Comprehensive and site-specific risk assessments and method statements prior to the works commencing.

5.6.3. The contractor is required to provide:

- Evidence of training and competency for individuals, particularly those using mobile plant and other heavy equipment on site.
- Security for the site and all plant and equipment during non-operational hours whilst ensuring that the Trust has emergency access at all times.

5.6.4. The Trust may at any time have removed from site or put beyond use any equipment that in the opinion of the Project Manager, Clerk of Works, Authorised Person, and/or the Head of and/or the head of Health, Safety, Moving and Handling or their authorised representative that is damaged, not fit for purpose or that is not being suitably controlled for the duration of the contract. This action would be taken without penalty or loss to the Trust.

5.6.5. Defective equipment must remain out of use/off site until evidence is provided that suitable remedial action has been undertaken.

5.7. Role of the Trust Procurement Team

5.7.1. The procurement process will be led by the Head of Procurement supported by the Deputy Medical Director in their role of Chair of the Medical Equipment Procurement Group.

5.7.2. The Trust Procurement Team will gather relevant safety information from potential suppliers of equipment and advise procuring managers accordingly.

5.7.3. Ensure that all requests for new equipment where required by policy or other local process are referred to the Health, Safety, Moving and Handling Department for review prior to placing the final order.

5.7.4. The Trust Procurement Team will have confirmation from the equipment requester and the Health, Safety, Moving and Handling Department (if required) that the work equipment is suitable for the intended activity and area of use.

5.7.5. Orders for new equipment or replacement equipment that has been significantly updated, provided from a different supplier, etc. should also include training for end users unless the Divisional Manager or equivalent senior manager can confirm that alternative training arrangements have been established.

5.8. Role of the Health, Safety, Moving and Handling Department

5.8.1. Advise and assist with the risk assessment process particularly with regards to equipment and vibration risk assessments.

5.8.2. Provide information about activities that may include risks to staff, patients or others to the Health and Safety Committee and other groups as required.

- 5.8.3. Investigate reports of incidents related to the use of work equipment.
- 5.8.4. Where appropriate make reports to external agencies regarding failure of equipment or injuries and ill health conditions.
- 5.8.5. Periodically monitor and audit procedures related to work equipment in addition, evaluate training arrangements for compliance with this document.

5.9. Role of the Trust Occupational Health Services

- 5.9.1. Provide health surveillance, in particular around musculoskeletal conditions, noise and vibration arising from or attributed to work equipment to staff identified by assessment.
- 5.9.2. Provide information to Line managers on control measures required for individuals.
- 5.9.3. Notify line managers, Divisional Managers and Health, Safety, Moving and Handling Department of any employees who are particularly sensitive to vibration or noise, these include:
 - Employees with existing HAVS or other diseases of the hands, arms, wrists or shoulders.
 - Employees with diseases affecting blood circulation, e.g. diabetes, or nerve disorders affecting the hands or arms, e.g., carpal tunnel syndrome.
 - Employees with hearing reduction, loss or damage associated with or contributed to the use of work equipment.
- 5.9.4. Notify the Health, Safety, Moving and Handling Department of all cases of ill health or injury associated with or contributed to the use of work equipment.
- 5.9.5. Ensure that a Datix entry is created for each incident of potential or actual injuries, ill health or harm, including near-miss situations, reported or referred to the service.

5.10. Role of the Health and Safety Committee

- 5.10.1. Shall receive and review periodic reports on matters relating to work equipment.
- 5.10.2. Ensure that the content of this document is cascaded throughout the organisation via Divisional forums, meetings etc.

5.10.3. Evaluate data relating to equipment associated incidents and occupational ill health through:

- Incident and accident statistics.
- RIDDOR incidents reported to the HSE.
- Legal actions/claims data.
- Sickness absence data.
- Occupational Health data on health surveillance.

6. Standards and Practice

6.1. Training

6.1.1. Training will depend on the type of equipment and the controls required. This should be carried out at a local level by a competent advisor (this may be the supplier representative or a specialist trainer). For more complex equipment a nationally accredited training provider may be required. The course content and attendees to the training will be recorded within the Trusts corporate training records. A local record of individual training will be recorded within the individuals Personnel (P) File.

6.1.2. All staff involved in the assessment of work equipment risks shall receive training/instruction, commensurate directly with their duties.

6.1.3. All staff will be briefed on the risks to which they may be exposed and the findings of the risk assessment and the controls to be in place.

6.1.4. Where appropriate staff will be provided with information as to:

- What they should do to minimise risk including control measures, wearing PPE and safe working practices.
- How to report defects in the work equipment and control measure.
- Where to obtain and how to use PPE.
- The Trust health surveillance process.
- How to detect the first signs of injury or damage (many injuries in their early stages can be hard to detect e.g. Noise and Vibration over-exposure, Repetitive stress etc.).

6.2. Vibration

The control of Vibration at Work regulations 2005 require the Trust to take specific action at certain levels of vibration caused by work equipment. These relate to the levels of exposure averaged over a working day or week the maximum which staff are exposed to in a working day.

6.2.1. For hand-arm vibration

- a) The daily exposure limit value (ELV) is $5\text{ m/s}^2 \text{ A}(8)$, that represents a high risk above which employees should not be exposed.
- b) The daily exposure action value (EAV) is $2.5 \text{ m/s}^2 \text{ A}(8)$, that represents a clear risk requiring management.

Where hand-arm vibration exposure is identified the regulations require:

- That any risks from vibration are controlled.
- That information, instruction and training is provided to staff on the risk and the actions being taken to control the risk.
- Provision of health surveillance.

6.2.2. For whole-body vibration

- a) The daily exposure limit value (ELV) is $1.15 \text{ m/s}^2 \text{ A}(8)$; and if reached immediate action must be taken to reduce exposure below the limit value and;
 - Provide information and training to staff at risk.
 - Consult with Union or employee safety representatives about the risk and corrective actions.
 - Keep a record of risk assessment and control actions.
 - Review and update risk assessment regularly.
- b) The daily exposure action (EAV) is $0.5 \text{ m/s}^2 \text{ A}(8)$, is at which level a program of controls should be introduced to eliminate or reduce exposure.

6.3. Identifying if there is a vibration problem

6.3.1. Some of the symptoms and effects of HAVS, include:

- Tingling and numbness in the fingers which can result in an inability to do fine work (for example, fastening buttons).
- Loss of strength in the hands which might affect the ability to do work safely.
- The fingers going white (blanching) and becoming red and painful on recovery, reducing ability to work in cold damp conditions, e.g., outdoors.

6.3.2. If any of the above symptoms are noted or reported, then a detailed risk assessment review and Occupational Health Referral must be initiated immediately.

6.4. Risk Assessment

6.4.1. An equipment risk assessment will assist in identifying the hazards and the potential for harm arising from the use of the equipment. The assessment should be carried out by considering the work activity and the information provided by the supplier (data sheets, training, instructions, etc.).

6.4.2. The risk assessment should consider:

- The work undertaken or likely to be undertaken by staff.
- The way in which work is carried out.
- Whether there are variations from day to day.
- Manufacturers'/suppliers information including noise, vibration, etc.
- Repetitive movements.
- Environmental considerations (lighting, temperature, weather, etc.).
- Location, frequency and duration of the work.
- History of incidents, accidents and near misses associated with the equipment.
- Identifying means by which risk can be eliminated or reduced to an acceptable level.
- Alternative equipment or work methods that might reduce risk or exposure.

6.5. Health Surveillance

6.5.1. Health surveillance will be provided by the Trusts Occupational Health Service for all staff who are likely to be regularly exposed to or above the ELV'S, and/or at risk for any reason, e.g., have pre-existing condition.

6.5.2. The purpose of health surveillance is to provide advance warning of any early signs of injury or damage so that control measures can be implemented, and the situation monitored.

6.5.3. Health surveillance will also be carried out for new starters or those changing jobs before staff maybe exposed to vibration, where the job has been identified as one requiring health surveillance.

6.5.4. Health surveillance will provide a baseline assessment. Health surveillance can be introduced at any time for staff, even if the member of staff has already had exposure to high levels vibration or where dictated by risk assessment.

6.5.5. This would be followed by routine and planned checks (usually annually).

6.6. Accidents, Near Misses, Incidents and Occupational Ill Health

- 6.6.1. All accidents and incidents involving work equipment and/or exposure to vibration must be reported directly to the manager of that department and the incident reported on the Trust's incidents reporting system (Datix).
- 6.6.2. All instances of staff reporting or suspecting Occupational Disease (full listing from HSE Website) that may be attributable to work activities must be recorded in the incident reporting system. The individual must be referred to the Occupational Health Service for assessment or treatment regimens being undertaken.
- 6.6.3. All such Datix reports will be fully investigated in accordance with the Trust Incident Reporting process.

6.7. Modification

- 6.7.1. Generally work equipment should not be modified other than in accord of specific instruction from the manufacturer/ supplier usually in response to a safety concern.
- 6.7.2. Modifications to equipment should only be undertaken when all of the following criteria have been met:
 - There is no other suitable alternative available.
 - The manufacturer/supplier has given written approval/instruction for the modification and it does not impact on any ability to be serviced or maintained with any warranty unaffected.
 - A risk assessment has been undertaken and demonstrated that the magnitude of risk remains unchanged.
 - Personnel have the necessary training and competence to utilise the modified equipment safely.
 - The modified equipment does not affect any other items of plant or equipment.

7. Dissemination and Implementation

- 7.1. Document to be disseminated to the Health and Safety Committee for distribution throughout Divisional groups and stored in the Trust Document Library with unrestricted access for all staff.
- 7.2. Notification of the publication of the policy will be made via an all user Trust email.

8. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Work equipment assessments. Equipment training. Incidents and occupational ill health attributed to work equipment. Vibration assessments.
Lead	Health and safety Committee.
Tool	Reports to Health and Safety Committee.
Frequency	Bi-monthly.
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 special advisors, shall make recommendations as appropriate.
Change in practice and lessons to be shared	Where issues are identified within the report, all such comments will be fed back to the relevant department/area by the appropriate representative on the committee within a timeframe identified by the committee to undertake improvement or remedial action.

9. Updating and Review

- 9.1. This policy will need to be reviewed not more than every three 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 for 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:	The provision and Use of work Equipment and Management of Vibration Attributed to Work Equipment Policy HSP 23 V4.0
This document replaces (exact title of previous version):	The provision and Use of work Equipment and Management of Vibration Attributed to Work Equipment Policy HSP 15.2 V3.0
Date Issued/Approved:	June 2026
Date Valid From:	June 2026
Date Valid To:	June 2029
Author/Owner:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Contact details:	01872 252266.
Brief summary of contents:	Policy procedures and guidance for the management of work equipment and the management of vibration risks.
Suggested Keywords:	Work equipment, vibration, VWF, plant, tools, risk assessment, carpal tunnel syndrome, hand-arm vibration, HSP 23.
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. Health and Safety Leadership Team
Manager confirming approval processes:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Name of Governance Lead confirming consultation and ratification:	Jemma Dunstan, Senior Health and Business Support Advisor.

Information Category	Detailed Information
Links to key external standards:	Including but not restricted to: Health and Safety at Work etc. Act 1974. The Provision and Use of Work Equipment Regulations 1998. The Control of Vibration at Work Regulations 2005. CQC Regulations. HSE Guidance.
Related Documents:	Including but not restricted to: Health and Safety General Policy Risk Assessment and Management Strategy Policy COSHH Policy Personal Protective Equipment Policy Health Surveillance Policy Noise at Work Policy
Training Need Identified:	Yes, Line managers – Risk assessment training
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
22 July 2014	V1.0	Initial issue	J. Robin Gatenby, Health and Safety Manager.
1 October 2015	V1.1	Full review	J. Robin Gatenby, Health and Safety Manager.
17 April 2019	V2.0	Review against current legislation. Policy has been split from existing LOLER/PUWER combined policy and taken into account changes to template and governance information.	M Irving, Health and Safety Auditor (Interim) N Quick Senior Health and Safety Advisor.

Date	Version Number	Summary of Changes	Changes Made by
September 2022	V3.0	Full Review and updated onto new template.	Rob Harris, Senior Safety Advisor.
June 2026	V4.0	Full Review and updated onto new template.	Gavin Griffiths, Head of Health, safety, Moving and Handling. Rob Harris, Senior Safety Advisor.

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. Quality and Equality Impact Assessment (QEIA) Form

The QEIA process allows RCHT to monitor the impact of changes to its policies and services, ensuring that nobody is unduly disadvantaged.

Please ensure you have completed a Quality and Equality Impact Assessment (QEIA) using this link to complete the form:

[E11 QEIA Policy](#)

For guidance, please see the [QEIA Essentials – Quick Reference Guide](#) or contact as required below:

Equality, Diversity and Inclusion guidance, please contact: rcht.inclusion@nhs.net

Quality Governance guidance, please contact Jillian Tozer: jillian.tozer3@nhs.net