

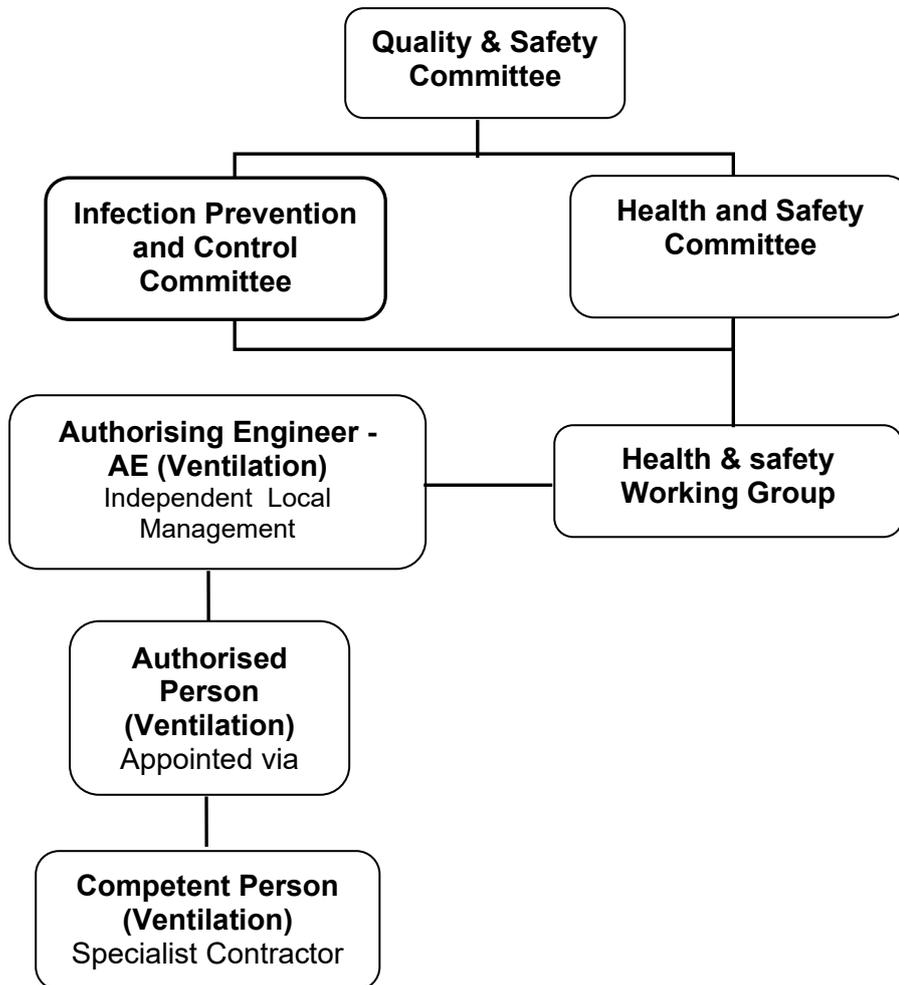
Policies, Procedures, Guidelines and Protocols

Document Details		
Title	Ventilation Safety Policy	
Trust Ref No	2541	
Local Ref (optional)		
Main points the document covers	Ventilation systems utilised in Healthcare environments	
Who is the document aimed at?	All Staff	
Author	Associate Director of Estates	
Approval Process		
Approved by (Committee/Director)	Infection Prevention and Control Committee	
Approval Date	February 2026	
Initial Equality Impact Screening	Yes	
Full Equality Impact Assessment	N/A	
Lead Director	Director of Nursing, Clinical Delivery and Quality	
Category	Clinical	
Sub Category	Estates, Infection Prevention and Control and Health & Safety	
Review Date	3 years following approval	
Distribution		
Who the policy will be distributed to	IPC Operational Group (IPCOG) Meeting Members, Hospital Managers, Hotel Service Managers, Site/Building Managers and clinical leads	
Method	Electronically and available on the Trust's website	
Document Links		
Required by CQC		
Required by NHSLA		
Other		
Amendments History		
No	Date	Amendment
1	14-02-24	New Policy out for review with various groups and appointed Ventilation AE
2	24-09-25	Updates following September IPCC meeting
3	04-03-2026	General formatting of final draft shared at IPCC for final comments 11-12-2025
4		

Contents

1.	ORGANISATION Flowchart	4
2.	Introduction.....	4
3.	Scope	5
4.	Purpose	5
5.	Definitions.....	5
6.	Duties	7
7.	Procedure.....	13
8.	Audit, Monitoring and Review.....	15
9.	Training and Other Resource Implications	16

1. ORGANISATION FLOWCHART



2. INTRODUCTION

It Shropshire Community Health Trust (SCHT) policy to fully comply with statutory requirements with respect to the Health and Safety at Work etc. Act 1974 and specific guidance produced by the Department of Health, European or ISO standards authorities with regard to Ventilation Systems.

Ventilation systems are designed to meet the demands of modern healthcare buildings and, as such, form an integral part of the building services systems supporting SCHT's clinical activities. They are a method of supplying the correct conditions for staff, service users and visitors' care and comfort.

3. SCOPE

This Ventilation Safety Policy is issued under the authority of the Chief Executive and Trust Board and will apply to all ventilation activities undertaken on SCHAT's owned and leased premises.

As such, SCHAT will comply with legal requirements to protect staff, service users and visitors, and staff members and contractors need to be aware of their responsibilities and assistance with:

- Operation and maintenance
- Emergency situations
- Risk assessments
- Authorising Engineers audits

This policy applies to all persons, (staff, contractors, service users and members of the public), who may be affected by any specialist ventilation activity/works carried out on Trust owned/ leased property undertaken by employees and/or contractors.

4. PURPOSE

The purpose of the is policy is to outline the procedure for the inspection and maintenance of lifts at Trust owned and leased properties maintained under a contract.

It will enable SCHAT to:

- Provide assurance that safe systems of work, servicing and maintenance programmes are in place to manage ventilation systems across SCHAT.
- Enable compliance with NHS England and NHS Improvement's Health Technical Memorandum Specialised Ventilation for Healthcare Buildings (HTM 03-01) June 2021, Parts A and B. National, European and ISO standards.
- Define the ventilation training requirements and standardise any other procedures.
- Ensure that Trust employees understand their specific roles and responsibilities with regard to ventilation systems.
- Provide expertise, oversight, and auditing for all ventilation systems.
- Assist in assessing the risks associated with ventilation systems particularly when there are planned works or new building/refurbishment projects.

5. DEFINITIONS

Designated Person (DP) - is an individual appointed by the Healthcare organisation (a board member or a person with responsibilities to the board) who has overall authority and responsibility for the Lift systems on the premises.

Authorising Engineer (AE) Ventilation Referred to as **AE (V)** within the remainder of this document- is a chartered or incorporated engineer with the required

knowledge, training and experience who possess the necessary independence from local management as is appointed in writing by the Designated Person.

The AE also validates and recommends the appointment of all **Authorised Persons (AP) Ventilation** employed by SCHAT to monitor and maintain these systems. They should be able to offer expert technical advice to operators and users.

Authorised Person (AP) Ventilation – are individuals possessing sufficient technical knowledge and training appointed by in writing by the Executive Manager on the recommendation of the Authorising Engineer.

The Authorised Person AP(V) must be able to apply the relevant guidance of Health Technical Memorandum (HTM) 03-01 specialised ventilation for healthcare buildings, Parts A and B, (especially in relation to validation and verification) and should also be completely familiar with the central plant, and the ductwork routes. They should ensure that the work described in any permit-to-work is supervised and carried out to the necessary standards..

Competent Person (CP)- A person having sufficient technical knowledge, training and experience to carry out their duties in a competent manner with respect to ventilation systems; their name will be on the register of Competent Persons (Ventilation). The register should be maintained by the Authorised Person (Ventilation).

Health Technical Memorandum Specialised Ventilation for Healthcare Buildings (HTM 03-01) June 2021, (Parts A and B) provides guidance on the design and management of heating and specialised ventilation systems in health sector buildings and its requirements apply to new installations and major refurbishments of existing installations.

Health Technical Memorandum Specialised Ventilation for Healthcare Buildings (HTM 03-01) June 2021, (Parts A and B) includes the operational management, supply and maintenance of systems for:

- a. Natural ventilation
- b. Extract ventilation systems
- c. Supply only ventilation
- d. Supply and extract ventilation
- e. Comfort cooling
- f. Air conditioning
- g. Specialised ventilation
- h. Local exhaust ventilation (LEV)
- i. Ventilation for general areas
- j. Commissioning, verification and validation

Permit-to-work

A form of declaration used to control work on the ventilation system. Its objective is to prevent injury or ill health to all persons who may be affected by any specialist ventilation activity/works carried out on Trust-owned/leased property undertaken by employees and/or contractors, for example via the inadvertent isolation of, or unauthorised work on, the ventilation system.

Specific Health and Safety

Some units are subject to access restrictions therefore Estate Services, or contract staff requiring access, may need additional training or they must be accompanied by trained staff when entering the unit, as per local procedures, (which may include the need for a Permit to work and the donning/doffing of Personal Protective Equipment - PPE).

Records must be kept of equipment design, commissioning and maintenance information. The Health and Safety Executive (HSE), the Medicines and Healthcare Products Regulatory Agency (MHRA), Department for the Environment and Rural Affairs (DEFRA) and other interested bodies have a statutory right to inspect these records at any time. All records must be kept for at least 5-years.

Critical Ventilation Systems

There are other specialist units, as designated by HTM 03-01 throughout SCHT that also need to be taken into account. These include treatment rooms and others that are listed in HTM 03-01. All such rooms will receive annual verification 'as being effective', i.e. undertaken by a third party to confirm the system meets HTM requirements to reduce any health or safety risk to an acceptable level.

In all of the above cases, clinical staff and operational staff require specific training to ensure they understand what is required of the equipment and how it should work and how to recognise if the ventilation equipment is not performing correctly.

The servicing and maintenance of these critical ventilation systems take priority over the general ventilation systems throughout the estate.

6. DUTIES

Roles and Management Responsibility

The Chief Executive has overall responsibility for the effective implementation, monitoring and review of Trust Policies. The responsibility for establishing the arrangements and organisation to carry out the requirements of this Ventilation Safety Policy has been delegated to the Associate Director of Estate. Through onward delegated responsibility to the Director of Finance, managers and supervisors, they will ensure all possible steps are taken to provide a safe working environment and service user care conditions.

Trust personnel have specific responsibilities with regard to the implementation of this policy's requirements. This section outlines those main responsibilities and how all these nominated staff must work together; however, it does not provide the definitive detail for every person or eventuality.

Chief Executive

The Chief Executive holds the overall responsibility for SCHT's Health and Safety and the implementation of this policy. This responsibility is delegated to the Director of Finance and nominated Estate officers identified below.

Director of Finance

The Director of Finance has been delegated the role of Designated Person. The Director of Finance is SCHT's lead for lift safety. He/she will give assurance to

SCHT's Board regarding compliance with statutory legislation and provide a link with the Director Governance/ Corporate Secretary & F2SU guardian to ensure all identified risks are included in SCHT's Risk Register.

Designated Person

The designated person will carry out the following duties:

- a. Appoint in writing an Authorising Engineer (AE) V for all systems and installations for which management has responsibility.
- b. With support from the Associate Director of Estates
 - I. Review the Authorising Engineer's lift duties have been carried out to comply with the Health Technical memorandum HTM 08.
 - II. Maintain a register of all nominated personnel.

Estate Management Services

The overall operational management responsibility for SCHT's Ventilation Systems resides with Estate department via the Service Level Agreement (SLA) with the main weight of authority with the Associate Director of Head of Estate.

All records from the third-party maintenance contractors are to be provided to SCHT's Estate Services for inspection and filing.

All maintenance and validation records are to be stored and collated electronically by the Estate Services Maintenance Team and will be provided for inspection on demand.

Authorising Engineer (external consultant) – AE (V)

The Authorising Engineer – AE (V) will ideally be a Chartered Engineer who is appointed in writing by the Designated Person, to advise on safety arrangements for defined ventilation systems. The AE (V) should be appointed by the organisation with a brief to provide services in accordance with the relevant HTMs/HBNs. The professional status and role required may vary in accordance with the specialist service being provided.

- a. Assess the suitability of prospective Authorised Persons for appointment within SCHT and to recommend to the designated person those persons who, through individual assessment or reassessment, are suitable to be Authorised Persons AP(V).
- b. To ensure all Authorised Persons AP(V) have satisfactorily completed an appropriate training course and are re-assessed every 3-years. There may be a requirement for Refresher Training; this is part of re-assessment by the AE(V) who may state such a course is required. The AE(V) will review assessments every 3 years.
- c. To review the management systems of the Ventilation Systems, including the permit-to-work system.

- d. In liaison with the Authorised Persons (V), monitor the implementation of the Ventilation operational policy and procedures.
- e. To provide SCHAT with an accessible source of Ventilation expertise, in support of the Authorised Persons (V).

Authorised Persons

The Authorised Person AP(V) is appointed in writing and is the person appointed by the designated person to be responsible for the day-to-day management of the Ventilation Systems, including the operation of the permit to work system. Currently the AP is provided via an SLA with Midlands Partnership Foundation Trusts (MPFT) via the Divisional Estates Manager.

The AP(V) is an appropriately qualified engineer with at least 3-years relevant professional experience. They will also have successfully completed an accredited Authorised Person AP(V) training course. In addition, they will have been assessed as suitable by the Authorising Engineer and appointed in writing by the designated person.

Each Authorised Person AP(V) must have sufficient site knowledge and experience, together with adequate resources, (such as ductwork drawings, key registers, key safe, permit to work system etc.) to manage the systems safely.

The Authorised Person AP(V) assumes effective responsibility for the on-site, day-to-day management and maintenance of the Ventilation Systems.

A sufficient number of Authorised Persons AP(V) to maintain adequate cover is required for SCHAT. One of these is nominated as the Co-ordinating Authorised Person AP(V) and will retain control of the Ventilation permit to work records.

The AP(V) is the primary lead in all matters relating to the Ventilation Systems, their duties and responsibilities will be to ensure that they:

- a. Provide safe and efficient day-to-day management of the Ventilation system, in accordance with the statutory requirements, HTMs, current guidelines, Approved Codes of Practice (ACOPs) and best practice.
- b. Appoint Competent Persons (V), supervise their work and monitor the standard of that work.
- c. Establish and maintain the Register of Competent Persons (V) and Specialist Contractors after assessing their suitability for inclusion.
- d. Annually review each Contractors and Competent Persons continued inclusion in the register.
- e. Have a Permit to Work System in place, including the issuing of Permits to Competent Persons (V) for all servicing, repair, alteration and extension work carried out on the Ventilation Systems.
- f. Keep the Estates Ventilation maintenance specification and schedule of equipment up to date.
- g. Display appropriate safety warning signs prominently, in accordance with current requirements, ACOPs, guidelines and best practice and ensure these

include emergency contact numbers appropriate to the area and Ventilation installation.

- h. Organise such training of Estate Services staff, (and others as required), and/or the communication of Ventilation information and instructions as required.
- i. Follow incident and accident reporting procedures using SCHAT's incident reporting system and any other relevant procedures as defined by any NHS, Medicines and Healthcare Products Regulatory Agency (MHRA) and/or statutory guidance (RIDDOR, Device Alerts, Hazard Notices, etc.).
- j. Monitor, in liaison with the Authorising Engineer AE(V), the implementation of this Policy and to feedback to the Health & Safety Working Group any significant issues such as non-compliance with this Policy.
- k. Maintain copies of such documentation and other records required for the safe operation of the Ventilation System and/or are required by direction of Trust management and/or the Authorising Engineer, AE(V).
- l. Prepare or commission surveys to ascertain the condition of the Ventilation System and compliance with current standards and guidance and, from the findings of the survey, produce a risk analysis and prioritised list of remedial actions.

With regard to work carried out under a **permit to work**, the AP(V) will:

- a. Assess the level of hazard and risks and prepare a suitable permit to work.
- b. Liaise with all relevant staff, wards and departments in sufficient time prior to commencement of work.
- c. Obtain permission for interruption to supplies or to work on the Ventilation System.
- d. Explain the detail of the work to the competent person.
- e. Supervise the isolation of the system or the parts on which work is to be carried out.
- f. Supervise appropriate engineering validation and verification tests.
- g. Obtain acceptance for system re-instatement/completion of work.
- h. Remove 'Do Not Use' or prohibition notices, locks or devices.
- i. Confirmation of the restoration of normal service with documented exact times, dates and signatures.
- j. Upon completion of maintenance, ensure the annual ventilation service has been carried out and it is evident and recorded that all facilities are safe.

Competent Person CP (V)

The Competent Person CP(V) is the individual who carries out work on the Ventilation System. All Competent Persons CP(V) are craftsperson's, either directly employed by the approved Estates provider to the Trust or registered and employed by specialist contractors.

All Competent Persons CP(V) **directly employed by the nominated service provider or employed by specialist contractors** shall have satisfactorily

completed an appropriate accredited training course, be sufficiently experienced and familiar with Ventilation Systems before being appointed by their line manager. Training and assessment shall be refreshed every 3-years. In addition, all contractors shall be evaluated and selected by the site Authorised Person AP(V).

All project managers will be deemed as Competent Persons and will be required to be trained to a level required for a CP(V) to ensure they understand the workings of the Ventilation Systems contained in their project.

Responsibilities include:

- a. To report daily to the Authorised Person AP(V) prior to commencement of any work on the Ventilation Systems, (timings may vary depending on the findings of the risk assessment).
- b. To carry out work on the Ventilation Systems in accordance with the relevant ACOP, installation and maintenance specifications.
- c. To carry out repair, alteration or extension work as directed by the Authorised Person AP(V) in accordance with the Permit to Work System and HTM 03-01.
- d. To perform engineering tests appropriate to all work carried out and present all test results to the Authorised Person AP(V) for final approval.
- e. To carry out all work in accordance with SCHAT's Health and Safety Policy and all other relevant policies. With regard to work carried out under a permit to work, the CP(V) will:
- f. Accept instruction from the AP and acknowledge responsibility for the work.
- g. Acknowledge familiarity with site fire and safety requirements.
- h. Isolate systems only under direct supervision of the AP.
- i. Confirm completion of work and notification to AP.
- j. Carry out appropriate engineering validation and verification tests as required by- and under direct supervision of the AP(V).

Associate Director of Estates

The Associate Director of Estates, via the Capital Programme supported by Capital Project Managers, ensure all new capital works comply with this safety policy and all current legislation, provide adequate information to the appointed personnel so the new installations can be assessed and approved for connection into the system to which they are responsible.

The Estates provider will commission specialist contractors to carry out any microbiological testing that may be required to provide assurance that Ventilation Systems are free from microbiological- or other such contaminants.

Responsibilities include:

- a. Must be conversant with- and implement the requirements and specifications outlined in HTM 03-01.
- b. Must understand the needs of SCHAT with regards to heating, cooling and ventilation.

- c. Should, as a minimum, be trained to the level of CP (V) to enable comprehension of what is required of the Ventilation System.
- d. Must liaise with the Authoring Engineer AE(V) for validation and sign off of proposals and acceptance testing to enable the project to be compliant from start to finish.

Director of Infection Prevention and Control

- The Director of infection Prevention and Control (DIPC) has executive authority and responsibility for ensuring strategies are implemented to prevent avoidable, healthcare-associated infections (HCAIs) at all levels in the organisation, (including those associated with air-borne pathogens), and is a role specifically required by all registered NHS care providers under current legislation.
- The DIPC reports directly to the Chief Executive and is required to provide assurance to the Board, (and other relevant senior management committees), that SCHAT's policies, procedures and controls associated are appropriate fit for purpose and also for providing regular reports, including the annual report on SCHAT's infection prevention and control performance and activity.
- The DIPC should, where appropriate, in the interests of service users, staff and public, challenge un-helpful professional and organisational barriers, un-helpful management behaviour and inappropriate clinical practice, as well as making every effort to influence the allocation of resources so as to minimise the risks of HCAIs.

Trust Infection Prevention and Control Team

- SCHAT's Infection Prevention and Control team (IPCT) will provide advice and guidance to Estate and Facilities Services and Capital Development on monitoring infection prevention and control risks, (microbiological and other airborne pathogens), when air handling/Ventilation Systems are being introduced, cleaned, decontaminated, replaced or ventilation failures.
- For example, if fans and/or air handling units are posing the risk of spreading air-borne bacteria, dust or other pathogens they may intervene to take such measures as to prevent this happening.
- The IPCT is the source of in-house expertise and competence on a wide range of infection-related matters. The IPCT, under the guidance of the Director of Infection and Prevention will advise the Responsible Person and members of Estate Services regarding the increased potential 'vulnerability' of user groups and their associated susceptibility to the risks of air-borne pathogens. The IPCT will also advise regarding any special precautions which may need to be considered when caring for these service users.

Other related role holders

Locality Managers, Senior Managers, and Head of Services Responsibilities

These Managers are responsible for: -

- a) Ensuring that local, tailored procedures are developed which reflect site specific systems and processes used in their premises with regard to all staff who are involved with the use, handling and storage of medical gases.
- b) Participating in the Permit to Work control system.
- c) Ensuring protocols are in place to report breakdowns to the maintainers of the system local to the premises and ensure lifts are put out of service until such time as repairs are affected.

7. PROCEDURE

7.1 Maintenance of Ventilation Systems

All ventilation air handling units (AHU), plant, ductwork and systems shall be included in the planned preventative maintenance (PPM) schedule. Reference Appendix 1 Health Technical Memorandum Specialised Ventilation for Healthcare Buildings (HTM 03-01) June 2021, Part B.

Inspections and maintenance of heating and ventilation systems shall be carried out in accordance with the Health Technical Memorandum Specialised Ventilation for Healthcare Buildings (HTM 03-01) June 2021, Parts A and B.

The general frequency of inspections and validation for ventilation system shall consist of:

1. All Ventilation Systems to be subject to annual inspection and maintenance. All LEV's must be recorded on a register.
2. Local Exhaust Ventilation (LEV) systems to be examined and tested every 14-months.

A summary Schedule of Ventilation Systems will be formally recorded for audit purposes.

7.2 Maintenance and Test Records

In order that Ventilation Systems can be correctly operated and maintained, it is essential that as-fitted drawings, operating manuals, maintenance instructions and commissioning manuals are available. Log-books should be kept for each Ventilation System consisting of maintenance records, test and validation data.

7.3 Monitoring

7.3.1 The responsibility for monitoring specific aspects is delegated to the appropriate key personnel. It is the duty of the AP(V) for SCHAT to update the policy with respect to any of the changes outlined below and notify all personnel involved with air handling and Ventilation Systems.

7.3.2 The policy's content is shared with the Infection Prevention and Control Committee where a ratification process is carried out to support the compliance of this policy.

7.3.3 The monitoring of the policy will also be through the risk reporting system where any untoward incidents occur and subsequently through the Health and Safety Committee.

7.3.4 The AP(V) will carry out annual policy audits. The policy audit will be presented to establish whether compliance has been achieved, or actions are required. The AP(V) will review the Ventilation Policy and advise on any actions required; actions identified during the review will be followed up within the Health and Safety Working Group

7.4 Competence

It is essential that personnel at all levels have a sound general knowledge of the principles, design, operation and maintenance of air handling and Ventilation Systems. They should be trained on those specific systems for which they will be responsible and which they will be expected to use.

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

Records of all training activities are to be held in the operational procedures manual for each particular system. This will include the records of each individual who has received the necessary training appropriate to the duties to be undertaken.

7.5 Drawings

It is the responsibility of the Authorised Person to ensure the ventilation drawings are up-to-date and ensure all drawings and supplier information is handed over with every project.

7.6 Incident Reporting

Any incident which involves the Ventilation Systems, and which compromises safety, must be reported to Estate Services who will inform the Authorised Person for the system and, who in turn, will determine what action is to be taken to prevent any risk or danger arising from the reported equipment. Incidents must also be recorded on SCHAT's Risk Register.

All reported incidents are to be investigated by the Authorised Person and managed through SCHAT's incident/accident system Ulysses.

In the case of an emergency the Authorised Person will take immediate action and escalate to the Head of Estates and the Designated Person to understand and mitigate any immediate risks.

The reporting of injuries or dangerous occurrences, under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), will be acted upon, as required, by the Health and Safety team.

8. AUDIT, MONITORING AND REVIEW

The Authorising Engineer will monitor compliance of the site during their annual Ventilation System operational management audit.

The Health and Safety Working Group will review any AE(V) audits and accordingly assess the compliance and effectiveness of the Ventilation Safety Policy. The AE (V) is responsible for highlighting any significant ventilation issues identified as part of the audit. The AE (V) must confirm compliance/non-compliance via an email or site audit summary notification.

Monitoring Compliance Template	
Minimum Requirement	Policy monitoring, Maintenance of associated systems
Process for Monitoring	Review audit
Responsible Individual/group/committee	Author/ Associate Director of Estate Health and Safety Committee Infection Prevention and Control Committee Health and Safety Working Group Authorised Engineer: Ventilation Chief Pharmacist
Frequency of Monitoring	Annually
Review of Results process (e.g. who does this?)	Health and Safety Working Group
Responsible Individual/group/committee for action plan development	Health and Safety Working Group
Responsible Individual/group/committee for action plan monitoring and implementation	Health and Safety Working Group

The Policy to be reviewed in 3 years or earlier should there be any changes in local or national requirements or guidance, or lessons learnt.

- The recommended inspections and validations laid down in HTM 03 will be considered as the compliance levels required.
- The Associate Director of Estate will have the overall responsibility for any maintenance requirements and modifications to the plant. The Authorised Person (AP) Ventilation is primarily in control of the day-to-day running of the ventilation equipment. The AP will be appointed by the DP.
- The Ventilation Safety Group is responsible for recording data received and adding it to the compliance report. The Estates Quarterly Compliance Group is responsible for auditing all recorded information.

- The Ventilation Safety Group will be responsible to undertake the subsequent recommendations and will create action plans to be completed following these recommendations and dissemination of the information.
- Any changes in operation to the spaces or equipment will be agreed with the Ventilation Safety Group so as to maintain control of the situation. Any problems encountered with the equipment will be investigated and discussed under the authority of the Ventilation Safety Group.

9. TRAINING AND OTHER RESOURCE IMPLICATIONS

Managers and the AP(V) have the responsibility to inform relevant employees and contractors of any hazards that may exist when carrying out maintenance work, operation, testing or other repairs to equipment within their department. The nominated Estates providers Maintenance Craftsperson's are to be made aware of the associated dangers.

- The nature and type of risks to health, where applicable
- Control measures employed
- Working procedures/policies
- All records of training are to be maintained by the Facilities Directorate.
- Arrangements shall be made by the appropriate manager to ensure:
- All employees concerned with particular work activities are adequately informed as to the systems, plant and apparatus that are affected, and instructed in all necessary safety procedures.
- As far as reasonably practicable, other persons who are not employees, but may be affected by the work activities also receive adequate information and/or instruction.

Links to Other Policies, Standards (Associated Documents)

- Health and Safety at Work, etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Workplace (Health, Safety and Welfare) Regulations 1992 - L24 (second Edition) 2013
- Provision and Use of Work Equipment Regulations 1998 - L22 (Fourth Edition) 2014
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 as amended 2013
- Control of Substances Hazardous to Health (COSHH) Regulations 2002 – HSE COSHH L5 (Sixth Edition) 2013
- Manual Handling Operations Regulations 1992 (as amended 2002)
- Personal Protective Equipment at Work Regulations 1992 (as amended 2002)

- Electricity at Work Regulations 1989
- Health Technical Memorandum 03-01 (2021) Health Technical Memorandum Specialised Ventilation for Healthcare Buildings (HTM 03-01) June 2021: ▪
 - Part A: Design, installation, validation and verification
 - Part B: Operational management and Performance Verification
- Statutory requirements relevant to Ventilation systems.
- IPC policies and procedures and national IPC Manual
[NHS England » National infection prevention and control](#)
- Health and Safety Policy
- Management of Contractors Policy
- Procurement Policy