

PRESSURE SYSTEMS POLICY

NON-CLINICAL POLICY		
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APPENDICES

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1.0 INTRODUCTION

This policy is issued and maintained by the Director of Estates & Facilities on behalf of Sherwood Forest Hospitals NHS Foundation Trust (herein known as the Trust), at the issue date defined on the front sheet, which supersedes and replaces all previous versions.

The Trust is responsible for ensuring the health, safety and welfare of its employees, patients and others on its premises relating to Pressure systems. This commitment is demonstrated through compliance with all statutory requirements and codes of practice in all premises for which it is responsible.

The Health and Safety at Work etc. Act places a duty on the Trust to ensure that all equipment, plant and machinery is adequately maintained in a safe condition so as not to present a risk to its employees or other persons.

The Trust, in recognition of its statutory duties endeavours to comply with the Pressure System Safety Regulations and Approved Code of Practice in the installation and use of all systems covered by the Pressure Regulations.

Trust premises have a range of pressure systems, equipment & pressure vessels with containers that hold liquid, gas, air or steam under sufficient pressure where a sudden unexpected release of contents may cause potential harm.

The Trust recognises the inherent danger with these systems & equipment and the need for the safe and effective operation of pressure systems and will take all reasonably practical steps to ensure the safe installation, operations and maintenance of all pressure systems included within the scope of this policy.

Pressurised systems can be inherently dangerous if vessels, distribution pipework and equipment is not installed and maintained correctly.

The primary objective of this policy is to ensure a robust management system for the effective control of pressure systems and installations throughout the Trusts premises, to minimise the risk of causing harm or fire to patients, visitors, contractors, staff and property.

This policy document is provided to ensure that all staff involved with pressure systems understand their management and individual responsibility, and that methods employed by the Trust and its partners, ensure a safe operational practice for pressure systems.

The Pressure Systems Safety Regulations (PSSR) applies to all plant and/or systems which contain relevant fluid where the pressure is greater than 0.5 bar (7 psi) above atmospheric.

Also, certain small vessels, where the combination of the internal volume and pressure of the vessel is less than 250 bar litres are exempt from parts of the Regulations.

However, if the relevant fluid is steam then the regulations apply regardless of the pressure.

2.0 POLICY STATEMENT

Sherwood Forest Hospitals NHS Foundation Trust (hereafter referred to as the “Trust”) is committed to taking all reasonably practicable steps to protect patients, visitors, staff, contractors and other building users from the risks of Pressure systems and installations.

This policy sets out the management approach to be adopted by the Trust and the PFI service provider Central Nottinghamshire Hospitals Plc (CNH or Project Co) and their Hard & Soft FM service providers Skanska and Medirest for operating, inspecting and maintaining Pressure systems, infrastructure and equipment.

The Hard FM service provider undertakes the maintenance and management of all Pressure systems and installations across the various properties the Trust occupy or own. The Trust recognises it still has a duty of care to ensure these Pressure systems and installations are being managed and maintained appropriately.

The Trust will establish the conditions whereby the use of Gas and the equipment connected to it will, so far as is reasonably practicable, be adequately controlled and safe to use.

The Trust recognises the importance of a safe workplace with appropriate equipment and facilities as well as high standards of leadership, engagement, communication, training and competence and other management issues.

This policy aims to ensure that all risks to patients, visitors, staff and others from exposure to the hazards at work and on Trust sites associated with Pressure systems are adequately controlled and that all Pressure systems and installations are maintained to a high standard and are safe to use.

This policy seeks to both set out and define the Trust’s management approach and commitment to maintaining Pressure systems and installations on its premises, as well as providing a framework to adopt when coordinating the management of risk.

This policy and the procedures outlined require the cooperation of all employees, all building users and contractors who also have responsibilities to ensure a safe and healthy working environment is always maintained.

For the purposes of this policy the Trust Estate comprises all the buildings owned or occupied by the Trust. This policy also applies to all the properties owned or managed on behalf of Sherwood Forest Hospitals NHS Foundation Trust

This policy should also be read in conjunction with local Standing Operational Procedures (SOP), safe systems of management that they describe, and the Control of Contractors Policy for working and managing Pressure systems and installations on a day-to-day basis.

The purpose of this policy is to create a safe working environment that ensures the pressure systems in use within the Trust are maintained and operated within the requirements of PSSR 2000 according to the recommended frequency held within the ‘Written Scheme’ for each individual pressure system.

2.1 - Statement of Intent

The Trust, as a major healthcare provider, is fully committed to maintaining an appropriate level of care and management in relation to the management of Pressure systems and installations in all Trust premises.

The Trust recognise that, although they outsource the management of Pressure systems and installations to others, through the PFI Agreement, it still retains a duty of care to manage quality and check that appropriate management controls and procedures are in place and to ensure that patients, visitors and Trust staff, using or working within the buildings are appropriately trained and informed to enable compliance with the requirements relevant to them and their work.

2.2 - Purpose

The purpose of this governance Policy is to safeguard all patients, visitors, staff and assets through prevention and reduction of harm or loss.

The aims of this governance Policy are as follows:

- To set out a clear framework to protect all staff, patients and visitors by minimisation of the risks associated with Pressure systems and installations.
- To identify correct practice for the safe operation of pressurised systems and equipment for staff to implement based upon nationally accepted guidance and the principle of 'so far as is reasonably practicable' (SFAIRP).
- To enable staff to understand their roles and responsibilities in relation to Pressure systems.
- To establish arrangements for the monitoring and review of this Governance Policy in order that it continues to reflect the most up-to-date legislation and guidance.

2.3 - Scope

This Governance Policy sets out the management approach to be adopted by Trust for providing and maintaining safe pressure systems, as well as preventing waste, misuse and unnecessary consumption of energy across the Trust.

This Governance Policy applies to all Trust:

- service users, patients and visitors.
- employees (including those managed by a third party).
- premises where they work that are owned and occupied, including those properties which Trust may occupy under lease.

The following locations are listed as properties where this policy shall be implemented:

- Kingsmill Hospital.
- Mansfield Community Hospital.
- Newark General Hospital.

This Policy covers the safe installation and use of all fixed Pressure systems, installations and equipment on Trust premises, i.e. all permanently installed distribution pipe work and connected equipment.

This will include pressurised service mains and equipment on Trust premises, and all permanently installed equipment e.g. Steam boiler, pipework & protective devices, Steam sterilising autoclaves, associated pipework & protective devices, Compressed air systems (fixed & portable), Medical Gas Systems, Pressurised process plant & piping, Heat exchangers & refrigeration plant, Valves, steam traps & filters, Pipework & hoses, Pressure gauges & level indicators, etc.

3.0 DEFINITIONS/ ABBREVIATIONS

- **The Trust:** This means Sherwood Forest Hospitals NHS Foundation Trust.
- **Staff:** Means all employees of the Trust including those managed by a third-party organisation on behalf of the Trust.
- **Private Finance Initiative (PFI):** The initiative under which the Trust has entered into an agreement with partners to build and provide certain services such as Planned Preventative Maintenance (PPM) at its hospitals.
- **PFI Project Agreement:** The agreement or contract between the Trust and partners for the building of the new hospital buildings and the provision of a facilities management service.
- **Project Co (CNH / Vercity):** This is the term used for the Central Nottinghamshire Hospitals PLC or CNH (Vercity as a company provides the employees who work on behalf of CNH / Project Co). It is the organisation appointed by the PFI Funder who built the new hospital buildings, they provide facilities services and then manage these facilities for the life of the contract, at which time they are then handed back to the Trust.
- **Skanska Facilities Services (Skanska):** This is the organisation and service provider appointed by Project Co to provide Hard facilities management services including estates and maintenance functions.
- **Compass Group – Medirest:** This is the organisation and service provider appointed by Project Co to provide Soft facilities management services and functions.
- **NHS PS – NHS Property Services** are the owners of Mansfield Community Hospital and therefore have a responsibility as a duty holder. Sherwood Forest Hospitals NHS Foundation Trust occupies certain areas of the building for services to the local community. The Trust's Partners through Skanska Facilities Services [SFS] provide the maintenance via the PFI agreement.
- **Nottinghamshire Health Informatics Service [NHIS]** provide information, communication and technology [ICT] services for the Trust and therefore have the same responsibilities as the Trust and its partners.
- **Schedule 14 (SLS)** Service Level Specifications, the part of the PFI Project Agreement mainly concerned with the facilities management services provided by Project Co through their subcontract with Skanska.
- **Schedule 22 (Trust Variation Enquires = TVE's)** Variations the part of the PFI Project Agreement mainly concerned with Trust variations enquiries regarding the PFI contract
- **Kingsmill Hospital (KMH):** SFH NHS Foundation Trust occupies the buildings to provide services to the local community. Maintenance, servicing, and repairs through Skanska are provided via the PFI agreement.
- **Mansfield Community Hospital (MCH):** NHS Property Services (NHS PS) are the owners of the MCH site and have a responsibility as a duty holder. SFH NHS Foundation Trust occupies certain areas of the building to provide services to the local community. Maintenance, servicing, and repairs through Skanska are provided via the PFI agreement.

- **Newark General Hospital (NGH):** SFH NHS Foundation Trust occupies the building to provide services to the local community. Maintenance, servicing, and repairs through Skanska are provided via the PFI agreement.
- **Pressure Systems & Equipment:** All plant, systems and/or equipment which contain relevant fluid or gas under pressure, where the pressure is greater than 0.5 bar (7 psi) above atmospheric pressure.
- **Method Statement – (Task specific)** Details of how work is to be done safely (safe system of work).
- **Permit to work** - A permit-to-work ensures a formal authorisation is given incorporating written checks to ensure all the elements of a safe system of work are in place before people are allowed to enter, or work on/in a potentially dangerous environment. It incorporates a means of communication between those carrying out the hazardous work. Essential features of a permit-to-work are:
 - Clear identification of who may authorise tasks (and any limits to their authority)
 - Who is responsible for the specifying of the necessary precautions (e.g. isolation, emergency arrangements, etc.)
 - Provision for ensuring that subcontractors engaged to carry out work are included.
 - Training and instruction in the issue of permits.
 - Closure of the permit to confirm a safe condition on the completion of the work.

4.0 ROLES AND RESPONSIBILITIES

4.1 - Collective Responsibilities (Policy & Procedures)

The Trust and its PFI partners all have responsibilities as duty holders to ensure they maintain the provision of Gas safety. Each key party of the PFI scheme (Trust, Project Co, Skanska and Medirest) has relevant responsibilities to develop, implement, manage, and monitor the safety and quality and resilience of these key systems.

This is undertaken both through policies and procedures that reflect each party's respective responsibilities as responsible partners. The 'principal' duties and responsibilities of the key appointments are highlighted below

4.2 - Trust - Duty Holder – Trust Board

The Chief Executive has overall responsibility on behalf of the Trust Board for all matters relating to health and safety (including Pressure systems safety). The Trust Board is the statutory "Duty Holder" for, and as so carries the ultimate responsibility for providing a safe and appropriately functioning environment for patient care. They shall appoint in writing the Trust Designated Person (DP Pressure Systems).

4.3 - Trust - Chief Executive

The Chief Executive will ensure that financial resources are made available to support this policy based upon a risk assessment of priorities. The Chief Executive has appointed a nominated person, the Director of Estates & Facilities, to do all, or part, of the work to assist in complying with the duties.

The responsibility of the Chief Executive includes ensuring that all pressure system safety management matters are seen as an important priority for the Trust as addressed through comprehensive policies and management procedures that are effectively implemented and appropriately resourced within the overall financial position of the Trust.

4.4 - Trust - Designated Person (DP Pressure Systems) - Director of Finance

The Trust Director of Finance is the Appointed Board Level Executive responsible for Pressure system safety. Under the direction of the Chief Executive, they are therefore responsible for the organisational arrangements, which will ensure that compliance with standards is achieved and that where problems occur, they are identified and resolved with minimum risk to employees, patients or members of the public. They shall appoint in writing the Trust Senior Operational Manager (SOM Pressure Systems).

4.5 - Trust - Senior Operational Manager (SOM Pressure Systems)

The Director of Estates & Facilities is the Senior Operational Manager (SOM Pressure Systems) who is appointed in writing by the Trusts Designated Person (DP Pressure Systems). They fulfil the appointed Senior Operational Management role, under the direction of the Trust Designated Person (DP Pressure Systems) and as such, have responsibility for co-ordinating resources, ensuring the policy is reviewed, ratified and implemented.

They will be responsible for notifying Skanska, via Project Co, in advance of any works on the Pressure Systems initiated by the Trust if undertaken outside of the formal PFI change process.

For changes on the site covered by the PFI Variation process i.e. works undertaken by Project Co the PFI variation process will cover off notification to Project Co and Skanska of new systems to be added to the scheme of control.

The Trust will ensure that its directly employed contractors comply with all Project Co (Skanska) permit procedures.

4.6 - Staff / Users of Gas Systems, Equipment & Installations

All users of Pressure Systems, equipment and installations have a duty to use the equipment safely in accordance with the training given and the manufacturer's instructions.

Prior to each use the individual using the equipment must visually inspect any equipment or appliances for damage, not to use damaged equipment and to immediately report any concerns or issues:

All portable appliances connected to pressurised systems shall undergo either an inspection or test, undertaken by a competent person, at regular intervals in accordance with current regulations.

Where inspection of any portable appliance connected to pressurised systems, in the inspector's opinion, gives rise to an imminent risk of serious personal injury to the user or others, that appliance must be rendered safe by taking the appropriate action to prevent further use of the appliance.

Portable appliances that can be connected to pressurised systems owned by employees are not to be brought onto Trust premises, connected to the Trust's pressure systems or used in the workplace.

All Directorate management teams are responsible for ensuring that any such items are not brought onto site, prevented from use and immediately removed from the Trust's premises if they are brought onto site.

4.7 - Trust - Other Professionals (i.e. Capital planning / Strategy / Projects).

Capital Project Officers / Managers will consult with the appointed external specialist with respect to Pressure system capacity and compliance as follows:

- All new and altered pressure systems and installations shall fully comply with the requirements of all the relevant regulations, codes of conduct and guidance documents.
- All new and altered pressure systems and installations shall comply with the requirements of this policy.
- The specification and the consulting engineer's competence and interpretation of the requirements.
- The contractor's competence and their interpretation of the requirements.
- The engineer's competence and interpretation with respect to site conditions, the existing and new installation and commissioning requirements.
- The Clerk of Works competence and interpretation of the requirements.

4.8 – Project Co - Duty Holder (DH Pressure systems) - PCo Executive or the PFI Funders

Project Co (CNH) is not an employer and therefore does not have duties under Section 2 and 3 of the Health and Safety at Work Act, the Management of Health and Safety at Work Regulations.

Project Co (CNH) employs Skanska as a subcontractor to provide Hard FM services under the PFI agreement with the Trust. Skanska is an employer and has duties in respect of the provision of services and obligations under the PFI agreement.

Project Co (CNH) has duties under Section 4 of the Health and Safety at Work etc.

Project Co (CNH) must act to take such steps as are reasonable to ensure so far as is reasonably practicable the premises over which it has control are safe and, as such is a "Duty holder" for the purposes of both this policy and Section 4 of the Health and Safety at Work Act in relation to those matters for which it is responsible under the PFI agreement with the Trust.

Project Co (CNH) shall:

- Appoint in writing a Designated Person (DP Pressure Systems).
- Appoint in writing a Responsible Manager (RM Pressure Systems).
- Monitor the compliance of its Service Providers.
- Ensure full compliance with this Policy.

4.10 - Project Co - Designated Person (DP Pressure Systems) – General Manager

The General Manager for Project Co is the Project Co Designated Person (DP Pressure systems) they shall be appointed in writing by the Project Co Duty Holder (DH Pressure systems). They shall have responsibility for compliance with this policy document.

4.11 - Project Co - Responsible Manager (RM Pressure Systems) – Hard FM Manager

Is the Senior Estates Manager who is appointed in writing by the Project Co Designated Person (DP Pressure Systems), they fulfil the appointed Responsible Manager (RM Pressure Systems) role, under the direction of the Project Co Designated Person (DP Pressure Systems) and as such, have responsibility for co-ordinating resources and ensuring the policy is implemented.

4.12 - Skanska - Duty Holder (DH Pressure Systems) – Chief Executive

The Skanska Chief Executive is the statutory Duty Holder. The Duty Holder has overall responsibility for Health and Safety within Skanska, including Pressure Systems safety. They shall appoint in writing the Skanska Designated Person (DP Pressure Systems).

4.13 - Skanska - Designated Person (DP Gas Safety) – General Manager

The Skanska General Manager is the Skanska Designated Person (DP Pressure Systems) they shall be appointed in writing by the Skanska Duty Holder (DH Pressure Systems).

The Skanska designated person (DP Pressure Systems) has responsibility for ensuring that suitable information, instruction and training has been achieved by the Competent Persons (CP Pressure Systems). Ensure any risk assessments remain current and are reviewed and updated as required.

They shall inform the Trust, Project Co & Skanska Designated Persons (DP Pressure Systems) when pressure system, equipment or installations are found to be non-compliant or deficiencies are found.

They shall appoint in writing the Skanska Responsible Manager (RM Pressure Systems).

4.14 - Skanska – Authorised Persons (AP Pressure Systems)

Are Estates Managers who are appointed in writing by the Skanska Designated Person (DP Pressure Systems), they fulfil the appointed Authorised Person (AP Pressure Systems) role, under the direction of the Project Co Designated Person (DP Pressure Systems) and as such, have responsibility for co-ordinating resources and ensuring this policy is implemented.

All Authorised Persons (AP Pressure Systems) shall be appointed in writing by Skanska Designated Person (DP Pressure Systems). The Authorised Persons (AP Pressure Systems) has the responsibility for the day-to-day operational management and safe systems of work on all Pressure Systems, equipment and/or installations on the Trust's premises.

The Authorised Persons (AP Pressure Systems) are responsible for the practical implementation and operation of this policy and the systems and installations for which management is in control of, this includes known dangers for which the Authorised Persons (AP Pressure Systems) has been appointed to manage.

More than one Authorised Person (AP Pressure Systems) may be appointed for the systems, equipment and installations but, at any one time, only one Authorised Person (AP Pressure Systems) is to be the duty Authorised Person (Duty AP Pressure Systems) for each site. Each transfer of responsibility between authorised persons is to be recorded in the respective Pressure Systems safety logbook as appropriate.

For properties managed by other organisations the Authorised Persons (AP Pressure Systems) will review the arrangements in place relating to the management of the Pressure Systems under their control, to ensure their suitability.

The Duty Authorised Person (Duty AP Pressure Systems) shall be competent to assess the risk associated with maintaining Pressure Systems, implementing procedures and control measures to maintain & confirm compliance with the Safety Regulations, their responsibilities will include but are not limited to:

- Maintaining a current record of the location and route of all Pressure Systems, service pipes and equipment on Trust operated property including locations of all isolation valves, primary meters and check meters
- Ensure Pressure Systems service pipes above ground level are appropriately identified appropriate British Standard markings or banding
- Maintaining a current asset register of all Pressure Systems equipment to include the type of equipment, age and estimated remaining life
- Maintain a library of health and safety maintenance manuals and operating instructions provided for each system or item of equipment and to ensure users receive adequate instruction on the routine operation of individual items of equipment. This will normally be in the form of a “user’s manual” supplied with the equipment
- Ensure adequate maintenance programmes are initiated for all Pressure Systems equipment and work is undertaken at appropriate frequencies by competent persons in accordance with the Safety Regulations
- Ensure all Pressure Systems and automatic isolation systems are routinely physically tested and work efficiently
- Maintain all records of installations, maintenance and repairs undertaken on Pressure Systems equipment in such a form to allow easy retrieval and inspection
- Liaise with all premises to ensure planned maintenance work on Pressure Systems equipment is undertaken at times to cause minimum disruption
- Ensure individuals working on Pressure Systems equipment are competent for the tasks undertaken
- Ensure a “Permit to Work System” is in use and being used for any works on or isolation of any Pressure Systems, especially where it affects more than one building.

The Authorised Person (AP Pressure Systems) must ensure that any person working on any of the Pressure Systems, equipment or installations is competent to do so, has been appointed as a competent person (CP Pressure Systems) and that all test equipment being used is maintained in good condition & is within its calibration date.

Where any defects, dangerous practices, dangerous and/or unusual occurrences are experienced; the Duty Authorised Person (Duty AP Pressure Systems) must report these immediately to all Designated Persons (DP Pressure Systems) in writing.

The Authorised Person (AP Pressure Systems) will also ensure all respective Competent Persons (CP Pressure Systems) remain current and up to date with appointments and/or training.

The Duty Authorised Person (Duty AP Pressure Systems) shall issue/cancel all Permits to Work and Permission for Disconnection forms as necessary to operate a safe system of work.

The Duty Authorised Person (Duty AP Pressure Systems) shall record all events in the Pressure Systems Safety site Logbook.

An adequate number of Authorised Persons (AP Pressure Systems) shall be available 24/7 and to cover for sickness or annual leave etc to meet the PFI agreement requirements.

4.15 - Skanska - Competent Persons (CP Pressure Systems)

Competent Persons (CP Pressure Systems) are suitably qualified and experienced trades staff. They shall be appointed in writing by a Skanska Authorised Person (AP Pressure Systems) to work under the direction of the Skanska Authorised Person (AP Pressure Systems).

All competent persons (CP Pressure Systems) must carry out all works in accordance with this policy, all relevant regulations, legislation and safe systems of work.

All competent persons (CP Pressure Systems) shall be skilled and have sufficient technical knowledge of the installation, inspection and testing and / or maintenance of the Pressure Systems, equipment and installations they are working on.

Non compliances will be rectified immediately in line with the contract emergency rectification time in all cases of where building or life Safety is at immediate risk.

All competent persons (CP Pressure Systems) shall alert the Duty Authorised Person (AP Pressure Systems) of any issues and all actions taken. Competent person (CP Pressure Systems) shall always use safe systems of work; safe means of access and the personal protective equipment and clothing provided for their safety.

4.16 - NHS Property Services (NHS PS) - Duty Holder (DH Pressure Systems)

The Chief Executive of NHS Property Services is a statutory Duty Holder for the MCH site. The Duty Holder and the NHS PS Board have overall responsibility for Health and Safety within NHS Property Services, including Pressure Systems. They shall appoint in writing the NHS Property Services Designated Person (DP Pressure Systems).

4.17 - NHS Property Services - Designated Person (DP Pressure Systems)

The NHS Property Services Regional Director is the Appointed Board Level Executive responsible for Pressure Systems Safety. Under the direction of the Chief Executive, they are therefore responsible for the organisational arrangements, which will ensure that compliance with standards is achieved and that where problems occur, they are identified and resolved with minimum risk to employees, patients or members of the public. They shall appoint in writing the NHS Property Services Responsible Manager (RM Pressure Systems).

4.18 - NHS Property Services - Responsible Manager (RM Pressure Systems)

The NHS PS Property Manager is the NHS Property Services Responsible Manager (RM Pressure Systems), they shall be appointed in writing by the NHS Property Services Designated Person (DP Pressure Systems). They shall have responsibility for compliance with this policy document.

4.19 - Medirest - Duty Holder (DH Pressure Systems)

The Chief Executive of Medirest is the statutory Duty Holder. The Duty Holder and the Board have overall responsibility for Health and Safety within Medirest, including Pressure Systems safety. They shall appoint in writing the Medirest Designated Person (DP Pressure Systems).

4.20 - Medirest - Responsible Manager (RM Pressure Systems)

The Operations Director for Medirest is the Medirest Responsible Manager (RM Pressure Systems) they shall be appointed in writing by the Medirest Duty Holder (DH Pressure Systems). They shall ensure its contractual obligations with regards to Schedule 14 of the PFI Project Agreement are achieved. As well as working with the Trust & Skanska to ensure this policy is followed.

4.21 - Medirest - Competent Persons (CP Pressure Systems)

A Competent Person (CP Pressure Systems) is a person, suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions to enable the required work to be carried out safely. Medirest will need to appoint Competent persons (CP Pressure Systems) in relation to the management of medical gas cylinders and any other system or equipment they use that falls under the Pressure Systems regulations.

The Medirest Responsible Manager (RM Pressure Systems) shall follow the same process as detailed under the Skanska Authorised Persons (AP Pressure Systems) section for the appointment and management of Competent Persons (CP Pressure Systems) and shall provide all necessary information to allow the logbook and all other relevant documents to be updated appropriately.

4.22 - Independent Authorising Engineer - (AE Pressure Systems)

This independent engineer provides expert support, oversight and controls the appointment of Authorised Persons (AP Pressure Systems) will be suitably qualified in accordance with the requirements of series and have specialist knowledge of the Pressure Systems on each site. The specialist acting in this role will be responsible for:

- Having specialist knowledge of Pressure Systems in SFHFT, in particular the systems for which an Authorised Person(s) (AP Pressure Systems) will assume responsibility on appointment.
- The Authorising Engineer (AE Pressure Systems) will, subsequent to performing an assessment of a potential Authorised Person (AP Pressure Systems), recommend to the Designated Person (DP Pressure Systems) of the submitting organisation either that the person is able to proceed to written appointment or requires further training.
- To ensure that all Authorised Persons (AP Pressure Systems) have satisfactorily completed an appropriate training course and that all training is documented.
- To ensure that all Authorised Persons (AP Pressure Systems) are re-assessed every three years and have attended a refresher or other training course prior to such re-assessment.
- To conduct an annual audit and review of the management systems of the Pressure Systems including Permits to Work, SOP's and other documentation.
- Review of written procedures and operational policies as well as advising on changes in technology.
- To assist the Authorised Person (AP Pressure Systems), when required, with monitoring the implementation of the Pressure Systems Safety Policy and SOPs.

5.0 APPROVAL

Approval is given by the Director of Estates & Facilities and the Estates Governance Group.

6.0 DOCUMENT REQUIREMENTS

The Regulations requires the Trust to:

- Establish the “safe operating limits” of the system.
- Have suitable Written Schemes drawn up or certified by a Competent Person for the examination at appropriate intervals for each Pressure System.
- Ensure those parts of the pressure system in which a defect may give rise to danger shall be identified in the scheme
- Check operation of all safety devices.
- Identify any pipework which is potentially dangerous.

The Written Scheme is a working document produced and maintained by Skanska Facilities external ‘Competent Person’, who determines the frequency and nature of the examinations needed on each of the pressure systems and specifies any special measures needed to prepare the system for safe examination.

The Written Scheme should include:

- Identification of the plant or equipment.
- Those parts of the system to be examined.
- The nature of the examination required.
- The frequency of examination.
- Preparatory work needed to enable item to be examined safely.
- Inspection and testing of any protection devices.
- Date of certification.
- Name of person certifying the written scheme.
- Repair and modification testing process and certification.

6.1 - Appointments

All the appointments identified in this policy shall be formally made in writing. The individuals shall be provided with the necessary training and resources.

6.2 - Operational Estates Meeting (OEM)

The Operational Estates Meeting takes place on a fortnightly basis, where Pressure System safety related items can be discussed.

The meeting has a core agenda which includes:

- Appointments and training.
- System condition and reliability.
- Policies, Procedures and SOPs.
- Planned and Reactive maintenance.
- AOB.

A Terms of Reference (TOR) for the meeting has been produced and agreed.

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Trust Policy & Procedures	Trust Senior Operational Manager	Audit/review	Annually	Trust Designated Person & OEM
All Gas Fired equipment is safety checked by a competent individual at least annually	Skanska	Audit/review	Annually	AP & Designated Person
Only Gas Safe Registered individuals to work/inspect or test Gas Systems equipment	Skanska	Audit/review	Annual	AP & Designated Person
Policy, Procedures, Activities, Issues and Incidents	Operational Estates Meeting (OEM)	Audit, review, reports, meetings	Fortnightly as a minimum	Estates Governance Group

8.0 TRAINING AND IMPLEMENTATION

Operation, inspection and maintenance procedures can cause risks to the health of staff carrying out the work. All those involved in works to Pressure systems, equipment and installations should be suitably trained in an appropriate manner to fulfil the task, they must be aware of the risks and must work to the agreed safe systems of work. This may involve the Trust representatives receiving training in awareness. Key appointed persons should also be formally notified in writing and this position accepted in writing.

Training requirements for the Hard FM Service Provider staff will be assessed at the Operational Estates Meeting (OEM) with a requirement to demonstrate all appropriate training undertaken and recorded, together with the date of delivery and topics covered.

Any contractors involved in the installation, commissioning, modification or maintenance of Pressure systems, equipment and installations shall be fully conversant with this Policy and shall be suitably qualified, trained, experience and appointed as an appropriate competent person (CP Pressure Systems) for the works being undertaken.

9.0 IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1.
- This document has been subject to an Environmental Impact Assessment, see completed form at Appendix 2.

10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

Evidence Base:

- The Health & Safety at Work Act (HASAWA)
- The Pressure Systems Safety Regulations
- The Pressure Equipment Regulations
- Pressure Vessels (Safety) Regulations
- Approved code of practice and guidance documents
- The Management of Health and Safety at Work Regulations.
- The Workplace (Health, Safety and Welfare) Regulations.
- Provision and Use of Work Equipment Regulations (PUWER)
- HTM 00-00 Policies and Principles of Healthcare engineering
- SFHFT Standing Orders and Scheme of Delegation
- HSE Best Practice Guidance Documents

Related SFHFT Documents

- Control of Contractors Policy

11.0 APPENDICES

Appendix 1 – Equality Impact Assessment

Appendix 2 – Environment Impact Assessment

APPENDIX 1 – EQUALITY IMPACT ASSESSMENT

Equality Impact Assessment (EIA) Form (Please complete all sections)

EIA Form Stage One:

Name EIA Assessor: Lee Fox	Date of EIA completion: 28 th January 2026	
Department: Estates and Facilities	Division: Corporate	
Name of service/policy/procedure being reviewed or created: Pressure Systems Policy		
Name of person responsible for service/policy/procedure: Lee Fox		
Brief summary of policy, procedure or service being assessed: Pressure Systems Policy		
Please state who this policy will affect: Patients or Service Users, Carers or families, Commissioned Services, Communities in placed based settings, Staff, Stakeholder organisations, Others (give details)		
Protected Characteristic	Considering data and supporting information, could protected characteristic groups' face negative impact, barriers, or discrimination? For example, are there any known health inequality or access issues to consider? (Yes or No)	Please describe what is contained within the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening. Please also provide a brief summary of what data or supporting information was considered to measure/decipher any impact.
Race and Ethnicity	None	None
Sex	None	
Age	None	
Religion and Belief	None	
Disability	None	
Sexuality	None	
Pregnancy and Maternity	None	
Gender Reassignment	None	

Marriage and Civil Partnership	None	
Socio-Economic Factors (i.e. living in a poorer neighbour hood / social deprivation)	None	

If you have answered 'yes' to any of the above, please complete Stage 2 of the EIA on Page 3 and 4.

What consultation with protected characteristic groups including patient groups have you carried out?

None required

As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments?

None required

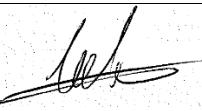
On the basis of the information/evidence/consideration so far, do you believe that the policy / practice / service / other will have a positive or negative adverse impact on equality? (delete as appropriate)

Positive	Negative		
	Nil		

If you identified positive impact, please outline the details here:

EIA Form Stage Two:

Protected Characteristic	Please explain, using examples of evidence and data, what the impact of the Policy, Procedure or Service/Clinical Guideline will be on the protected characteristic group.	Please outline any further actions to be taken to address and mitigate or remove any in barriers that have been identified.
Race and Ethnicity	None	None
Gender	None	None
Age	None	None
Religion	None	None
Disability	None	None
Sexuality	None	None
Pregnancy and Maternity	None	None
Gender Reassignment	None	None
Marriage and Civil Partnership	None	None
Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	None	None

Signature: 

I can confirm I have read the Trust's Guidance document on Equality Impact Assessments prior to completing this form

Date: 28/01/2026

Please send the complete EIA form to the People EDI Team for review.

Please send the form to: sfh-tr.edisupport@nhs.net

APPENDIX 2 – ENVIRONMENTAL IMPACT ASSESSMENT

The purpose of an environmental impact assessment is to identify the environmental impact, assess the significance of the consequences and, if required, reduce and mitigate the effect by either, a) amend the policy b) implement mitigating actions.

Area of impact	Environmental Risk/Impacts to consider	Yes/No	Action Taken (where necessary)
Waste and materials	<ul style="list-style-type: none"> Is the policy encouraging using more materials/supplies? Is the policy likely to increase the waste produced? Does the policy fail to utilise opportunities for introduction/replacement of materials that can be recycled? 	No No No	N/A N/A N/A
Soil/Land	<ul style="list-style-type: none"> Is the policy likely to promote the use of substances dangerous to the land if released? (e.g. lubricants, liquid chemicals) Does the policy fail to consider the need to provide adequate containment for these substances? (For example, bunded containers, etc.) 	No No	N/A N/A
Water	<ul style="list-style-type: none"> Is the policy likely to result in an increase of water usage? (estimate quantities) Is the policy likely to result in water being polluted? (e.g. dangerous chemicals being introduced in the water) Does the policy fail to include a mitigating procedure? (e.g. modify procedure to prevent water from being polluted; polluted water containment for adequate disposal) 	No No No	N/A N/A N/A
Air	<ul style="list-style-type: none"> Is the policy likely to result in the introduction of procedures and equipment with resulting emissions to air? (For example, use of a furnaces; combustion of fuels, emission or particles to the atmosphere, etc.) Does the policy fail to include a procedure to mitigate the effects? Does the policy fail to require compliance with the limits of emission imposed by the relevant regulations? 	No No No	N/A N/A N/A
Energy	<ul style="list-style-type: none"> Does the policy result in an increase in energy consumption levels in the Trust? (estimate quantities) 	No	N/A
Nuisances	<ul style="list-style-type: none"> Would the policy result in the creation of nuisances such as noise or odour (for staff, patients, visitors, neighbours and other relevant stakeholders)? 	No	N/A