7-Minute Briefing: Equipment Policy

1. Why it matters

This policy ensures that all CRGPA staff have appropriate and safe equipment to enable them to carry out their role and to ensure that all equipment is accounted for and logged.

2. Who It Applies To

The policy applies to all CRGPA employees (permanent, temporary, agency, contractors).

3. Key Principles

- All staff are expected to take responsibility for any equipment issued to them and ensure it is returned in good condition when no longer required or when employment ends.
- Comply by bringing equipment in when requested for calibration, testing or servicing, carry out basic maintenance tasks where appropriate, such as routine checks or cleaning,
- Report any damage or equipment that is stolen immediately.
- The organisation has a responsibility to ensure that where required equipment is regularly calibrated, serviced, checked or tested.

4. What you need to do

- Ensure equipment forms are completed, signed and sent to HR for filing for ALL new starters and leavers.
- Ensure compliance with the policy and seek support from HR/Governance & Safety Team if needed.
- Take prompt action if equipment is reported as faulty, unsafe, or damaged.
- Monitor how staff use equipment to ensure proper operation and prevent misuse, negligence, or unsafe behaviour.
- Report any losses to finance as per the Losses and Compensation Policy.

5. Roles and Responsibilities

- Board has overall accountability for the quality and standards of care delivered by CRGPA including compliance with this policy.
- CEO on behalf of the organisation has a responsibility to ensure that processes from this policy have been established within the workplace.
- HR are responsible for filing equipment forms, providing guidance and support to line managers to address non-compliance and assisting managers in investigations of equipment loss, damage or misuse.
- H&S Representatives are responsible for scheduling maintenance, calibrations, inspections, or servicing of equipment, taking prompt action if equipment is reported as faulty, unsafe, or damaged and removing unsafe equipment from use and arranging for repair or replacement as necessary.
- Office and Facilities Coordinator/Practice Managers/Site Leads are responsible for keeping accurate asset logs of equipment, issuing equipment to line managers on request, ensuring safe storage of equipment and supporting the maintenance of accurate records relating to equipment allocation, return, and any associated employee agreements (e.g., equipment forms, ensuring these are returned to HR once completed).

6. Consequences of Breach

- As per the employees' contract of employment, CRGPA has a right to deduct from an employee's wages to cover the cost of any replacement.
- If a former employee (leaver) fails to return any CRGPA equipment by their leave date or by an agreed timeframe they may be liable for the cost of replacing the equipment.
- The employee may be liable for the cost of replacing any lost/damaged equipment belonging to CRGPA for one of the following reasons:
  - Lost the equipment in the employee's care.
  - Insurers refused to pay out on a claim for lost/damaged equipment.
  - Failure to follow policy/process.
  - Wilful neglect: the employee intentionally lost/damaged the equipment.
  - Written consent: the employee has signed a document agreeing to be held financially responsible for lost/damaged equipment.

7. Where to find more information

Contact the HR/Governance & Safety Team.

8. Review & Monitoring

Reviewed every 3 years or if employment law changes.

Document Title	DRAFT Equipment Policy
Document Class	Policy
Target Audience	This policy applies to those members of staff that are directly employed by Coventry & Rugby GP Alliance and for whom Coventry & Rugby GP Alliance has legal responsibility
Author & Designation	Dale Ball, Head of People
Owner & Designation	HR
Version	1.0
CQC Domain	Well Led
Approved By	Policy Review Group
Approved Date	07/01/2026
Ratified By	S&Q Committee
Ratified Date	
Review Date	

Table of Contents

1. Introduction 3
2. Purpose 3
3. Scope 4
4. Definitions 4
5. Roles and Responsibilities 4
5.1 CRGPA Board 4
5.2 Chief Executive 4
5.3 Managers/Heads of Service 4
5.4 All CRGPA staff (including Bank/Contracted/Temporary Staff) 5
6. Process 7
7. Consultation 9
8. Implementation 9
9. Training and Support 9
10. Review 9
11. Monitoring and Compliance 9
12. Version Control 10
13. Equality Impact Assessment 10
14. References 11

1.	Introduction
1.1	The purpose of this Equipment Policy is to establish clear standards for the acquisition, use, care, and management of all equipment owned or provided by the organisation. This policy ensures that equipment is used safely, responsibly, and efficiently to support operational needs and maintain compliance with relevant health, safety, and regulatory requirements.
1.2	The organisation is committed to providing employees with the tools and equipment necessary to perform their duties effectively. In return, all employees are expected to use and maintain equipment in a manner that protects organisational assets, promotes workplace safety, and minimises the risk of damage, loss, or misuse.
1.3	Equipment can include but is not limited to: • Mobile Phones • Headphones • Keys/door fobs • NHS Smartcards • Personal Alarms • Laptops/Desktops • Clothing including PPE • Medical devices including defibrillators • Furniture • Foot/back rests • Keyboard/mouse • Medical Equipment • Anything else owned/leased by CRGPA

2.	Purpose
2.1	The purpose of this Policy is to ensure that all organisational equipment is managed, used, and maintained in a safe, responsible, and consistent manner.
2.2	This policy provides a framework for the proper allocation, care, and return of equipment to protect organisational assets, support operational efficiency, and minimise the risk of damage, loss, or misuse.
2.3	This policy also ensures compliance with relevant health, safety, and regulatory requirements, while outlining the responsibilities of all individuals who use or manage equipment within the organisation.

3.	Scope
3.1	This policy applies to those members of staff that are directly employed by Coventry & Rugby GP Alliance and for whom Coventry & Rugby GP Alliance has legal responsibility. For those staff covered by a letter of authority / honorary contract or work experience this policy is also applicable whilst undertaking duties on behalf of Coventry & Rugby GP Alliance or working on Coventry & Rugby GP Alliance premises and forms part of their arrangements with Coventry & Rugby GP Alliance.

4.	Definitions
4.1	**Work equipment:** This is defined under the Provision and Use of Work Equipment Regulations 1998 (PUWER) as any machinery, appliance, tool, or installation provided by an employer for employees to use at work.
4.2	**Medical equipment:** A medical device is any instrument, apparatus, appliance, software, material, or other article, which is intended for human use that performs a medical purpose, such as diagnosing, monitoring, or treating a medical condition.

5.	Roles and Responsibilities
5.1	**CRGPA Board**
	CRGPA Board has overall accountability for the quality and standards of care delivered by CRGPA including compliance with this policy.
5.2	**Chief Executive**
	The Chief Executive on behalf of the organisation has a responsibility to ensure that processes from this policy have been established within the workplace.
5.3	**Managers/Heads of Service**
	Managers/Heads of Service are responsible for: • Ensuring that all staff within their team understand and comply with the Equipment Policy and related procedures. • Following the Onboarding and Offboarding processes. • Reinforcing the correct use, storage, and care of equipment through regular reminders and guidance. • Authorising the issue of equipment to staff in line with operational needs. • Maintaining accurate records of equipment assigned to individuals or used within their department. • Ensuring that equipment is returned, replaced, or transferred when roles change or employment ends.

- Ensuring the appropriate equipment forms have been completed and signed by staff members and that these are sent to HR (crgpa.hr@nhs.net) for filing.
- Ensuring staff receive appropriate training, instruction, or supervision before using equipment, particularly items that require specialist knowledge.
- Identifying staff who need refresher training or additional support in the safe use of equipment.
- Ensuring that all equipment in their area is safe, fit for purpose, and used in accordance with health and safety requirements.
- Taking prompt action if equipment is reported as faulty, unsafe, or damaged.
- Removing unsafe equipment from use and arranging for repair or replacement as necessary.
- Monitoring how staff use equipment to ensure proper operation and prevent misuse, negligence, or unsafe behaviour.
- Addressing non-compliance or inappropriate use through corrective action or performance management where required.

5.4 **All CRGPA staff (including Bank/Contracted/Temporary Staff)**

Employees are responsible for adhering to this policy. In addition, employees are responsible for:

- Ensuring any equipment, they are in possession of is looked after/maintained.
- Using equipment only for authorised work-related purposes and in accordance with training, instructions, and safety guidelines.
- Kept in a safe place.
- Report any damage or equipment that is stolen immediately.
- Report any losses to finance as per the Losses and Compensation Policy.
- Not use faulty equipment.
- Ensure they are trained to use the equipment where applicable.
- Use the equipment for its intended purpose and in a safe manner.
- Comply by bringing equipment in when requested for calibration, testing or servicing.
- Carry out basic maintenance tasks where appropriate, such as routine checks or cleaning.
- Follow all relevant policies, including health and safety requirements, IT and data protection rules (where applicable), and manufacturer guidelines.
- Take responsibility for any equipment issued to them and ensure it is returned in good condition when no longer required or when employment ends.
- Refrain from altering, modifying, or repairing equipment unless specifically authorised and competent to do so.

	• Ensure that any repairs or servicing are carried out by approved personnel only. • Providing feedback to HR, Health & Safety team, IT, or Facilities where improvements, upgrades, or policy updates may be necessary.
5.5	**Human Resources** Human Resources are responsible for: • Assisting managers in investigating incidents involving equipment loss, damage, or misuse. • Ensuring incident outcomes are recorded and that appropriate follow-up actions are taken. • Storing equipment forms in individual personnel files and providing these to Line Managers if their team member is to leave the organisation to ensure all equipment issued is returned. • Providing guidance to managers on addressing non-compliance and supporting any necessary HR processes, such as performance management or disciplinary procedures. • Ensuring consistent application of the policy across all departments.
5.6	**Health and Safety Representatives** Health and Safety representatives are responsible for: • Ensuring that scheduled maintenance, calibrations, inspections, or servicing are carried out as required. • Taking prompt action if equipment is reported as faulty, unsafe, or damaged. • Removing unsafe equipment from use and arranging for repair or replacement as necessary. • Identifying opportunities to improve equipment use, safety, or processes within their area.
5.7	**Office and Facilities Coordinator/Practice Managers/Site Leads** Are responsible for: • Keeping an accurate asset log of all equipment in their buildings and estimated prices for insurance purposes – to be updated and reviewed annually • Keeping accurate and up to date asset log of equipment issued to staff eg. Mobiles and Laptops • Issue equipment to Managers on request for new starters. • Liaise with providers eg; IT, mobile phone providers where required. • Ensuring safe and secure storage of equipment within the office/surgery. • Coordinating with managers to ensure all equipment is properly returned during offboarding and documenting any issues or discrepancies. • Supporting the maintenance of accurate records relating to equipment allocation, return, and any associated employee agreements (e.g., equipment forms, ensuring these are returned to HR once completed).

6.	Process
6.1	**Issuing of equipment/New Starters** Following the onboarding process Line Managers are to make suitable arrangements to ensure new starters have the necessary equipment required on their first day of work. See the Line Managers Induction Pack, available on Managers Zone. On issuing any equipment to new starters, or any additional equipment to existing staff Line Managers, must complete and sign the equipment form, ensuring this has been signed by the staff member and sent to HR for filing. See the Equipment form in Appendix 1. Any member of the organisation whose role includes using medical devices should be competent to do so and should also have received training to operate any medical equipment that they are using and know how these should be maintained.
6.2	**Returning Equipment/Leavers** When an employee leaves the organisation Line Managers must ensure the Line Managers Exit Pack has been followed and all equipment has been returned. See the Line Managers Exit Pack available on Managers Zone . It is the Line Managers responsibility to ensure that **ALL** equipment issued to the staff member throughout their time with the organisation has been returned and is in suitable condition. On returning the equipment Line Managers must complete and sign the equipment form, ensuring this has been signed by the staff member and sent to HR for filing. See the Returning Equipment form in Appendix 2.
6.3	**DSE Equipment** Additional equipment may be provided based on the outcomes of individual DSE assessments, ensuring that any specific needs or reasonable adjustments are identified and met. For further guidance please see the DSE Standard Operating Procedure and Occupational Health Policy.
6.4	**Reimbursement/Replacement** The employee maybe liable for the cost of replacing any lost/damaged equipment belonging to CRGPA for one of the following reasons:

	• Lost the equipment in the employee's care. • Insurers refused to pay out on a claim for lost/damaged equipment. • Failure to follow policy/process. • Wilful neglect: the employee intentionally lost/damaged the equipment. • Written consent: the employee has signed a document agreeing to be held financially responsible for lost/damaged equipment. As per the employees' contract of employment, CRGPA has a right to deduct from an employee's wages to cover the cost of any replacement. Any potential deduction of wages will be discussed with the employee in the first instance. If a former employee (leaver) fails to return any CRGPA equipment by their leave date or by an agreed timeframe they may be liable for the cost of replacing the equipment. CRGPA will deduct any costs from the leaver's final salary. If this is not possible, CRGPA will contact the leaver to discuss arrangements to make the payment owed. If the equipment is not returned, the Chief of Finance (crgpa.finance@nhs.net) is to be informed so this can be logged on the Losses and Compensations log.
6.5	**Calibration/Servicing/PAT Testing** Health and Safety Representatives are responsible for arranging the calibration, servicing and checks of equipment is conducted on a regular basis in line with relevant guidance and good practice. Any ongoing servicing or repairs must be undertaken as per the manufacturer's instructions and recommendations and by an appropriately qualified person. Appropriate records are to be maintained, including keeping records of all medical equipment used. These must contain the following: • Intervals between inspections • Logging of checks, calibration, and maintenance • Reports of faults and actions required Equipment that has regular checks includes but is not limited to: • Medical fridge (including thermometers) • Any other thermometers • Nebuliser compressors • Spirometers • Pulse oximeters • Sphygmomanometers • Weighing scales • Electronic ear irrigators • Defibrillators
6.6	**Expiry dates** Many medical devices have supporting or ancillary equipment that also needs to be maintained in good order, including ensuring that no equipment is

	available to be used past its expiry date and that it is disposed of as per the manufacturer's instructions.

7.	**Consultation**
7.1	CRGPA Staff will have the opportunity to comment on any drafts and/or amendments to this policy via Staff Zone before presentation at Policy Review Group.

8.	**Implementation**
8.1	This Policy will be available to all persons working for CRGPA. An electronic copy will be available on CRGPA's Practice Index.
8.2	This policy will be implemented through application of the policy in practice.

9.	**Training and Support**
9.1	All employees will be offered relevant training commensurate with their duties and responsibilities. Employees requiring support should speak to their line manager in the first instance. Support may also be obtained through Human Resources.

10.	**Review**
10.1	This policy will be reviewed every three years by the Policy lead and in accordance with the following on an as and when required basis: • Legislatives changes • Good practice guidelines • Case Law • Significant incidents reported • New vulnerabilities identified • Changes to organisational infrastructure • Changes in practice

11.	**Monitoring and Compliance**
11.1	Monitoring and review of legislative changes and national/local developments which may impact on the content of this policy will be the responsibility of the Policy author and/or Policy Owner. Where any changes are required the Policy Author and/or Owner will be required to amend the policy and arrange for its presentation at the next available Policy Review Group for review and ratification. Compliance with this policy will be reviewed annually, on the anniversary of the policy ratification date.

12. Version Control

Version	Date	Author (name and Designation)	Comments
V1	Nov 2025 01/12/2025	Dale Ball, Head of People Kallie French, Governance Manager	Created Updated

13. Equality Impact Assessment

13.1 As part of its development, this procedural document and its impact on staff, patients and the public has been reviewed in line with Coventry & Rugby GP Alliance's Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act.

		Yes/No	Comments
1.	Does the document affect one group more or less favourably than another based on:-		
	Race	No	
	Religion/Religious Belief	No	
	Gender	No	
	Gender Reassignment	No	
	Sexual Orientation	No	
	Age	No	
	Any Form of Disability, impairment or mental health problems	No	
	Marriage and civil partnership	No	
	Pregnancy/Maternity	No	
2.	Is there any evidence that any groups are affected differently?	No	
3.	If any potential discrimination has been identified, are there any valid, legal or justifiable reasons?	NA	
4.	Could the document have a negative impact?	No	
	If so, can the impact be avoided/reduced?	NA	

	If not, what alternative is there to achieving the document without the negative impact?	NA	
5.	Name and Designation of 3 staff members who have contributed to or considered this assessment		Dale Ball Kallie French Sarah Forsyth
6.	Date of Assessment		01/12/2025

13.2	Any potential discriminatory impact which has been identified must be referred back to the author of the document for consideration of additional actions to reduce or remove the potential discriminatory impact.

14.	**References**
14.1	Provision and Use of Work Equipment Regulations 1998 (PUWER) - overview - HSE

Appendix 1 – Agreement to Care for and Return Company Property Form

Appendix 3 - Agreement to Care Fo

Appendix 2 – Returning Company Property Form

Appendix 4 - Returning Company F

Document Title	DRAFT Equipment Policy
Document Class	Policy
Target Audience	This policy applies to those members of staff that are directly employed by Coventry & Rugby GP Alliance and for whom Coventry & Rugby GP Alliance has legal responsibility
Author & Designation	Dale Ball, Head of People
Owner & Designation	HR
Version	1.0
CQC Domain	Well Led
Approved By	Policy Review Group
Approved Date	07/01/2026
Ratified By	S&Q Committee
Ratified Date	
Review Date	

Table of Contents

1. Introduction 3
2. Purpose 3
3. Scope 4
4. Definitions 4
5. Roles and Responsibilities 4
5.1 CRGPA Board 4
5.2 Chief Executive 4
5.3 Managers/Heads of Service 4
5.4 All CRGPA staff (including Bank/Contracted/Temporary Staff) 5
6. Process 7
7. Consultation 9
8. Implementation 9
9. Training and Support 9
10. Review 9
11. Monitoring and Compliance 9
12. Version Control 10
13. Equality Impact Assessment 10
14. References 11

1.	Introduction
1.1	The purpose of this Equipment Policy is to establish clear standards for the acquisition, use, care, and management of all equipment owned or provided by the organisation. This policy ensures that equipment is used safely, responsibly, and efficiently to support operational needs and maintain compliance with relevant health, safety, and regulatory requirements.
1.2	The organisation is committed to providing employees with the tools and equipment necessary to perform their duties effectively. In return, all employees are expected to use and maintain equipment in a manner that protects organisational assets, promotes workplace safety, and minimises the risk of damage, loss, or misuse.
1.3	Equipment can include but is not limited to: • Mobile Phones • Headphones • Keys/door fobs • NHS Smartcards • Personal Alarms • Laptops/Desktops • Clothing including PPE • Medical devices including defibrillators • Furniture • Foot/back rests • Keyboard/mouse • Medical Equipment • Anything else owned/leased by CRGPA

2.	Purpose
2.1	The purpose of this Policy is to ensure that all organisational equipment is managed, used, and maintained in a safe, responsible, and consistent manner.
2.2	This policy provides a framework for the proper allocation, care, and return of equipment to protect organisational assets, support operational efficiency, and minimise the risk of damage, loss, or misuse.
2.3	This policy also ensures compliance with relevant health, safety, and regulatory requirements, while outlining the responsibilities of all individuals who use or manage equipment within the organisation.

3.	Scope
3.1	This policy applies to those members of staff that are directly employed by Coventry & Rugby GP Alliance and for whom Coventry & Rugby GP Alliance has legal responsibility. For those staff covered by a letter of authority / honorary contract or work experience this policy is also applicable whilst undertaking duties on behalf of Coventry & Rugby GP Alliance or working on Coventry & Rugby GP Alliance premises and forms part of their arrangements with Coventry & Rugby GP Alliance.

4.	Definitions
4.1	**Work equipment:** This is defined under the Provision and Use of Work Equipment Regulations 1998 (PUWER) as any machinery, appliance, tool, or installation provided by an employer for employees to use at work.
4.2	**Medical equipment:** A medical device is any instrument, apparatus, appliance, software, material, or other article, which is intended for human use that performs a medical purpose, such as diagnosing, monitoring, or treating a medical condition.

5.	Roles and Responsibilities
5.1	**CRGPA Board**
	CRGPA Board has overall accountability for the quality and standards of care delivered by CRGPA including compliance with this policy.
5.2	**Chief Executive**
	The Chief Executive on behalf of the organisation has a responsibility to ensure that processes from this policy have been established within the workplace.
5.3	**Managers/Heads of Service**
	Managers/Heads of Service are responsible for: • Ensuring that all staff within their team understand and comply with the Equipment Policy and related procedures. • Following the Onboarding and Offboarding processes. • Reinforcing the correct use, storage, and care of equipment through regular reminders and guidance. • Authorising the issue of equipment to staff in line with operational needs. • Maintaining accurate records of equipment assigned to individuals or used within their department. • Ensuring that equipment is returned, replaced, or transferred when roles change or employment ends.

- Ensuring the appropriate equipment forms have been completed and signed by staff members and that these are sent to HR (crgpa.hr@nhs.net) for filing.
- Ensuring staff receive appropriate training, instruction, or supervision before using equipment, particularly items that require specialist knowledge.
- Identifying staff who need refresher training or additional support in the safe use of equipment.
- Ensuring that all equipment in their area is safe, fit for purpose, and used in accordance with health and safety requirements.
- Taking prompt action if equipment is reported as faulty, unsafe, or damaged.
- Removing unsafe equipment from use and arranging for repair or replacement as necessary.
- Monitoring how staff use equipment to ensure proper operation and prevent misuse, negligence, or unsafe behaviour.
- Addressing non-compliance or inappropriate use through corrective action or performance management where required.

5.4 **All CRGPA staff (including Bank/Contracted/Temporary Staff)**

Employees are responsible for adhering to this policy. In addition, employees are responsible for:

- Ensuring any equipment, they are in possession of is looked after/maintained.
- Using equipment only for authorised work-related purposes and in accordance with training, instructions, and safety guidelines.
- Kept in a safe place.
- Report any damage or equipment that is stolen immediately.
- Report any losses to finance as per the Losses and Compensation Policy.
- Not use faulty equipment.
- Ensure they are trained to use the equipment where applicable.
- Use the equipment for its intended purpose and in a safe manner.
- Comply by bringing equipment in when requested for calibration, testing or servicing.
- Carry out basic maintenance tasks where appropriate, such as routine checks or cleaning.
- Follow all relevant policies, including health and safety requirements, IT and data protection rules (where applicable), and manufacturer guidelines.
- Take responsibility for any equipment issued to them and ensure it is returned in good condition when no longer required or when employment ends.
- Refrain from altering, modifying, or repairing equipment unless specifically authorised and competent to do so.

	• Ensure that any repairs or servicing are carried out by approved personnel only. • Providing feedback to HR, Health & Safety team, IT, or Facilities where improvements, upgrades, or policy updates may be necessary.
5.5	**Human Resources** Human Resources are responsible for: • Assisting managers in investigating incidents involving equipment loss, damage, or misuse. • Ensuring incident outcomes are recorded and that appropriate follow-up actions are taken. • Storing equipment forms in individual personnel files and providing these to Line Managers if their team member is to leave the organisation to ensure all equipment issued is returned. • Providing guidance to managers on addressing non-compliance and supporting any necessary HR processes, such as performance management or disciplinary procedures. • Ensuring consistent application of the policy across all departments.
5.6	**Health and Safety Representatives** Health and Safety representatives are responsible for: • Ensuring that scheduled maintenance, calibrations, inspections, or servicing are carried out as required. • Taking prompt action if equipment is reported as faulty, unsafe, or damaged. • Removing unsafe equipment from use and arranging for repair or replacement as necessary. • Identifying opportunities to improve equipment use, safety, or processes within their area.
5.7	**Office and Facilities Coordinator/Practice Managers/Site Leads** Are responsible for: • Keeping an accurate asset log of all equipment in their buildings and estimated prices for insurance purposes – to be updated and reviewed annually • Keeping accurate and up to date asset log of equipment issued to staff eg. Mobiles and Laptops • Issue equipment to Managers on request for new starters. • Liaise with providers eg; IT, mobile phone providers where required. • Ensuring safe and secure storage of equipment within the office/surgery. • Coordinating with managers to ensure all equipment is properly returned during offboarding and documenting any issues or discrepancies. • Supporting the maintenance of accurate records relating to equipment allocation, return, and any associated employee agreements (e.g., equipment forms, ensuring these are returned to HR once completed).

6.	Process
6.1	**Issuing of equipment/New Starters** Following the onboarding process Line Managers are to make suitable arrangements to ensure new starters have the necessary equipment required on their first day of work. See the Line Managers Induction Pack, available on Managers Zone. On issuing any equipment to new starters, or any additional equipment to existing staff Line Managers, must complete and sign the equipment form, ensuring this has been signed by the staff member and sent to HR for filing. See the Equipment form in Appendix 1. Any member of the organisation whose role includes using medical devices should be competent to do so and should also have received training to operate any medical equipment that they are using and know how these should be maintained.
6.2	**Returning Equipment/Leavers** When an employee leaves the organisation Line Managers must ensure the Line Managers Exit Pack has been followed and all equipment has been returned. See the Line Managers Exit Pack available on Managers Zone . It is the Line Managers responsibility to ensure that **ALL** equipment issued to the staff member throughout their time with the organisation has been returned and is in suitable condition. On returning the equipment Line Managers must complete and sign the equipment form, ensuring this has been signed by the staff member and sent to HR for filing. See the Returning Equipment form in Appendix 2.
6.3	**DSE Equipment** Additional equipment may be provided based on the outcomes of individual DSE assessments, ensuring that any specific needs or reasonable adjustments are identified and met. For further guidance please see the DSE Standard Operating Procedure and Occupational Health Policy.
6.4	**Reimbursement/Replacement** The employee maybe liable for the cost of replacing any lost/damaged equipment belonging to CRGPA for one of the following reasons:

	• Lost the equipment in the employee's care. • Insurers refused to pay out on a claim for lost/damaged equipment. • Failure to follow policy/process. • Wilful neglect: the employee intentionally lost/damaged the equipment. • Written consent: the employee has signed a document agreeing to be held financially responsible for lost/damaged equipment. As per the employees' contract of employment, CRGPA has a right to deduct from an employee's wages to cover the cost of any replacement. Any potential deduction of wages will be discussed with the employee in the first instance. If a former employee (leaver) fails to return any CRGPA equipment by their leave date or by an agreed timeframe they may be liable for the cost of replacing the equipment. CRGPA will deduct any costs from the leaver's final salary. If this is not possible, CRGPA will contact the leaver to discuss arrangements to make the payment owed. If the equipment is not returned, the Chief of Finance (crgpa.finance@nhs.net) is to be informed so this can be logged on the Losses and Compensations log.
6.5	**Calibration/Servicing/PAT Testing** Health and Safety Representatives are responsible for arranging the calibration, servicing and checks of equipment is conducted on a regular basis in line with relevant guidance and good practice. Any ongoing servicing or repairs must be undertaken as per the manufacturer's instructions and recommendations and by an appropriately qualified person. Appropriate records are to be maintained, including keeping records of all medical equipment used. These must contain the following: • Intervals between inspections • Logging of checks, calibration, and maintenance • Reports of faults and actions required Equipment that has regular checks includes but is not limited to: • Medical fridge (including thermometers) • Any other thermometers • Nebuliser compressors • Spirometers • Pulse oximeters • Sphygmomanometers • Weighing scales • Electronic ear irrigators • Defibrillators
6.6	**Expiry dates** Many medical devices have supporting or ancillary equipment that also needs to be maintained in good order, including ensuring that no equipment is

	available to be used past its expiry date and that it is disposed of as per the manufacturer's instructions.

7.	**Consultation**
7.1	CRGPA Staff will have the opportunity to comment on any drafts and/or amendments to this policy via Staff Zone before presentation at Policy Review Group.

8.	**Implementation**
8.1	This Policy will be available to all persons working for CRGPA. An electronic copy will be available on CRGPA's Practice Index.
8.2	This policy will be implemented through application of the policy in practice.

9.	**Training and Support**
9.1	All employees will be offered relevant training commensurate with their duties and responsibilities. Employees requiring support should speak to their line manager in the first instance. Support may also be obtained through Human Resources.

10.	**Review**
10.1	This policy will be reviewed every three years by the Policy lead and in accordance with the following on an as and when required basis: • Legislatives changes • Good practice guidelines • Case Law • Significant incidents reported • New vulnerabilities identified • Changes to organisational infrastructure • Changes in practice

11.	**Monitoring and Compliance**
11.1	Monitoring and review of legislative changes and national/local developments which may impact on the content of this policy will be the responsibility of the Policy author and/or Policy Owner. Where any changes are required the Policy Author and/or Owner will be required to amend the policy and arrange for its presentation at the next available Policy Review Group for review and ratification. Compliance with this policy will be reviewed annually, on the anniversary of the policy ratification date.

12. Version Control

Version	Date	Author (name and Designation)	Comments
V1	Nov 2025 01/12/2025	Dale Ball, Head of People Kallie French, Governance Manager	Created Updated

13. Equality Impact Assessment

13.1 As part of its development, this procedural document and its impact on staff, patients and the public has been reviewed in line with Coventry & Rugby GP Alliance's Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act.

		Yes/No	Comments
1.	Does the document affect one group more or less favourably than another based on:-		
	Race	No	
	Religion/Religious Belief	No	
	Gender	No	
	Gender Reassignment	No	
	Sexual Orientation	No	
	Age	No	
	Any Form of Disability, impairment or mental health problems	No	
	Marriage and civil partnership	No	
	Pregnancy/Maternity	No	
2.	Is there any evidence that any groups are affected differently?	No	
3.	If any potential discrimination has been identified, are there any valid, legal or justifiable reasons?	NA	
4.	Could the document have a negative impact?	No	
	If so, can the impact be avoided/reduced?	NA	

	If not, what alternative is there to achieving the document without the negative impact?	NA	
5.	Name and Designation of 3 staff members who have contributed to or considered this assessment		Dale Ball Kallie French Sarah Forsyth
6.	Date of Assessment		01/12/2025

13.2	Any potential discriminatory impact which has been identified must be referred back to the author of the document for consideration of additional actions to reduce or remove the potential discriminatory impact.

14.	**References**
14.1	Provision and Use of Work Equipment Regulations 1998 (PUWER) - overview - HSE

Appendix 1 – Agreement to Care for and Return Company Property Form

Appendix 3 - Agreement to Care Fo

Appendix 2 – Returning Company Property Form

Appendix 4 - Returning Company F