

Enw'r Pwyllgor / Name of Committee	Health and Safety Committee (HSC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Mrs Judith Hardisty, Independent Member
Cyfnod Adrodd/ Reporting Period:	Meeting held on 9 th May 2022
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Review of HSC Committee Terms of Reference – the Committee received the Terms of Reference for review, noting the revised planning objectives aligned to HSC. The Committee approved the HSC Committee Terms of Reference, for onward submission to Board. • HSC Annual Report 2021/22 – the Committee reviewed the HSC Annual Report, noting the achievements and progress made by the Committee and the relevance of the deep dive reports. The Committee endorsed the HSC Annual Report 2021/22 for onward submission to Board. • Health and Safety Update - the Committee received an update on the activities undertaken by the Health and Safety Team for the period March 2022 to May 2022. Members noted that this focused on COVID-19, Internal Audit, Ligature Assessment Review, Manual Handling, Security Management, Prevention, Assessment and Management of Violence and Aggressions (PAMOVA)/Reducing Restrictive Practice, Health and Safety Audit Programme and Policy updates. In relation to Ligature Assessment Compliance, Members were advised that NHS Wales Shared Services Partnership (NWSSP) has been commissioned to undertake an internal audit (IA) to review procedures for the prevention of self-harm following several actions identified by Health Inspectorate Wales (HIW). The management response to the findings was included within the IA report presented to the Audit and Risk Assurance Committee (ARAC) in April 2022. A procedure for improving LAC has been drafted. Members noted that a Security Management Group has been established to lead on the development of security management improvements identified within the Planning Objectives. In light of the sensitive nature of this work it has been agreed that a more detailed discussion will take place at the HSC in Committee meeting in July 2022. • Health and Safety Regulations/Deep Dive – Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) - the Committee received an update regarding compliance with RIDDOR and the end of year RIDDOR reporting figures for 2021/22. Initiatives undertaken by the Health, Safety and Security team such as the Critical Path Analysis and the Decision Making Flowchart were highlighted, together with a DATIX and RIDDOR guidance sheet for management, which will, in turn, serve to promote the RIDDOR reporting requirements and timeframes with a view to more timely reporting of incidents. Timeliness of reporting was identified as a major area requiring improvement. 	

Members were re-assured that RIDDOR reports are rigorously checked and, whilst numbers reported are low, this appears to follow a similar trend across the whole incident reporting process. RIDDOR incidents are now reported by directorate, enabling a focused approach to training provision, targeting those departments with particularly low reporting figures and actual data obtained from RIDDOR reporting can be utilised for training purposes to identify preventative measures and avoid recurrence of further incidents of a similar nature. The Committee received assurance that HDdUHB is operating in compliance with the RIDDOR regulations.

- **Fire Safety Update Report** – the Committee received the Fire Safety Update Report, identifying progress made in managing Fire Enforcement Notices (FEN)/Letters of Fire Safety Matters (LoFSM), Fire Safety Management and Fire Safety Governance. The Audit Tracker and Fire Safety Management update were included as appendices. Members welcomed confirmation that enforcement notices relating to advance works at both Withybush General Hospital and Glangwili General Hospital will be lifted and extension to the Phase 1 programme of works at WGH to December 2022/January 2023 had also been agreed. In relation to Phase 2, NHS Wales Shared Services Partnership (NWSSP) and Welsh Government G have jointly approved the resource schedule relating to the business case development work totalling approximately £1m. Work relating to Phase 2 decant arrangements – temporary decant ward is subject to a delay of one month resulting from complexities in relation to air handling on the ward, however Members noted this delay has no impact on the overall programme of Phase 2 works. A multi-phased approach has now been adopted at Prince Philip Hospital to ensure processes are aligned to those followed at other acute sites. In relation to Fire Safety training, resources are in place to deliver training, however attendance remains low despite promotion and raised awareness at management level. The Committee acknowledged and received assurance from the content of the report and the work achieved to strengthen fire safety compliance and noted further updates would be presented at future HSC meetings. The HSC noted the initial stages of the Health and Safety Dashboard have been developed
- **Health and Safety Dashboard/Performance Report** - the Committee received the Incident Assurance report, providing an overview of quality and safety across HDdUHB in relation to safety incidents, incidents reported to the Health and Safety Executive and Personal Injury Claims (PIC) for 2021/22, compiled through information obtained from the Datix system. In terms of the 110 incidents reported via the Datix system in relation to slips, trips and falls, Members received assurance that whilst all incidents are reported via the Datix system, only 21 met the definition of RIDDOR. Following discussion in relation to incidents involving weapons, the issue of the security was raised. Members were advised that the term 'weapon' is used to identify any object which could cause harm, and generally involved objects which are close to hand and not brought onto Health Board premises. The Committee sought further detail in relation to the high incidents of violence and aggression in both the midwifery and gynaecological departments.
- **Prevent and CONTEST Update** - the Committee received an update on CONTEST CYMRU – Protect Duty, detailing the duties placed on HDdUHB under the Counter Terrorism and Security Act (CTSA) 2015. A local Authority Forum – CONTEST Board has been established to provide a strategic lead in addressing the Regional and County threat, risk and vulnerabilities in relation to counter terrorism. The four work streams

covered are Prevent, Pursue, Protect and Prepare. Members were advised that a security management review is being undertaken which will be informed by the requirements under the duty placed on organisations. A security management framework is being prepared incorporating an agreed range of controls and a Health Board Security Management Group (HBSMG) is being established to oversee the improvements required with representation from the Information Governance department, Informatics department, Workforce and Organisational Development department and Estates and Facilities department. The Committee received assurance that the Emergency Planning and newly formed Security Management Group will be utilised to formally monitor progress of the identified risks and noted that further updates would be presented at future HSC meetings.

- **Bariatric Equipment Update** – the Committee received the Bariatric Update Report and noted progress around bariatric care and treatment has been slower than anticipated, however the appointment of a project manager, who will work in partnership with the Manual Handling team, will enhance the progress of this work. The template for manual handling risk assessments is now available for ward areas and includes a prompt regarding bariatric patient accommodation and fire evacuation. In addition to the health and safety aspects of bariatric care, Members were advised that a Health Weight Development Plan (HWDP) 2021/22 has been developed given that the Health Board has a responsibility to address the role of prevention. Further clarification in relation to the development of a HWDP for 2022/23 was sought and concern around the disparity in the levels of specialist weight management services offered across the three Counties was noted. The Committee received assurance that work has progressed, and improvements have been made in relation to bariatric equipment and care pathways.
- **Deep Dive: Display Screen Equipment** – the Committee received a deep dive report on Display Screen Equipment noting detailing compliance with DSE regulations and updated guidance for agile and homeworking. Members were informed that clear guidance in relation to home/agile working was issued in 2020, however DSE regulations were not enforced by HSE as a temporary measure due to COVID-19. The challenges of educating employees and managers of their home working responsibilities through the use of pre-home working checks, in addition to adherence to the correct use of DSE was discussed, specifically when viewed in relation to Personal Injury Claims (PIC). Members were informed of the Health and Safety Homeworking Guidance which contains a two-part risk assessment relating to both the suitability of the work environment to be considered for homeworking and the DSE workstation assessment specifically targeted to agile/homeworking staff. The Agile working Group is developing an Agile Working Programme, incorporating future policy and accommodation arrangements in addition to developing an all Wales DSE agile/homeworking guidance document. Members were advised that as agile/homeworking is in its infancy, and will be dependent upon a number of factors yet to be established such as employee roles and availability of hot desks, no data is currently available in relation to the number of employees requesting or required to agile/homework.
- **Corporate Risks Assigned to HSC** – the Committee received the Corporate Risks Assigned to HSC report, noting the three risks presented in the Risk Register:

- Risk 813 – Failure to fully comply with the requirements of the Regulatory Reform Order (Fire Safety) 2005 (RRO) – risk score 15.
- Risk 1016 – Increased COVID-19 infections from poor adherence to Social Distancing – risk score 10.
- Risk 1328 – Security Management (risk score 12).

Members noted there has been no change in the risks scores since these risks were reported to the previous HSC meeting, however following updated guidance from WG in relation to COVID-19 measures, it is anticipated that Risk 1016 will be reduced or possibly removed. Members were informed that actions raised from Risk 813 have not yet been completed and updated, in light of this Risk 813 will be reviewed.

The Committee gained assurance that all identified controls are in place and working effectively and all planned actions will be implemented within stated timescales and will reduce the risk further and/or mitigate the impact if the risk materialises.

- **Operational Risks Assigned to HSC** – the Committee reviewed and scrutinised the Operational Risks Assigned to the Health and Safety Committee, noting the three risks presented in the Risk Register:
 - **Risk 708: Inappropriate storage solutions associated with patient files/documents affecting Ceredigion Community sites** - Members were informed the next stage involves moving the boxes from local sites into the central store, which will act as a temporary measure to mitigate risk in the short term. There continues to be a security risk around the temporary provision in Ceredigion.
 - **Risk 951: Improperly functioning fire alarm detection and operation (WGH)** - work undertaken in relation to the Fire Alarm system in WGH is progressing, albeit at a slower pace than anticipated.
 - **Risk 503: Risks relating to the evacuation of bariatric (plus sized) patients in the event of an emergency** -joint working with the Manual Handling department and Fire Safety department is ongoing and progressing.

In addition to the risks identified within the Operational Risks report, the Committee noted the lack of updates received in relation to Tregaron Hospital and Members were informed that a request to review community hospitals had been raised at the Internal Risk Summit. Members noted the purpose, function and timescales for the future healthcare model of Tregaron Hospital will be outlined and this should be captured in the overall hospital review.

- **Planning Objectives (PO) Update** – the Committee received the PO report, providing an update on the progress made in the development of the revised POs that are aligned to the HSC and noted that *PO 3L: Review of existing security arrangements* and *PO 4H Review and refresh the Health Board’s emergency planning and civil contingencies / public protection strategies* are both on track. In terms of PO 4H , the Committee noted that whilst this PO is attributed to the Director of Public Health as Executive Lead, the PO will continue to be overseen by the Director of Nursing, Quality and Patient Experience as an interim measure.

- **Policies for Approval** – the Committee received Policy 814 – Fit testing for Respiratory Protective Equipment (RPE) Procedure for approval. Members noted the changes to the corporate elements of the procedure and that the Fit Testing process has evolved as a result of COVID-19, including the use of reusable masks. The Committee approved Policy 814 Fit Testing for RPE Procedure for uploading onto the HDdUHB Policy Internet site.

Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:

- To endorse (at the July 2022 meeting) the Health and Safety Committee Terms of Reference
- To endorse (at the June 2022 meeting) the Health and Safety Committee Annual Report 2021/22

Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:

None

Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:

Adrodd yn y Dyfodol / Future Reporting:

In addition to the items scheduled to be reviewed as part of the Committee's work programme, following up progress of the various actions identified above will be undertaken.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

11th July 2022