



PWYLLGOR IECHYD A DIOGELWCH HEALTH & SAFETY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 May 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Estates and Facilities Welsh Health Technical Memorandum's (WHTM's) – Governance Arrangements
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Executive Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Simon Chiffi, Head of Operational Services

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This report is being brought to the Health and Safety Committee (HSC) to provide the necessary assurances that appropriate management arrangements and governance systems have been implemented within the Estates and Facilities department to manage and track the requirements of the Welsh Health Technical Memorandums (WHTM's).

The purpose of this report is to:

1. Explain what the WHTM documents are and their intended purpose.
2. Describe the specialist areas/disciplines they cover and the leading directorates.
3. Identify the benefits of adhering to the guidance.
4. Highlight the key roles and appointments identified in the WHTM's.
5. Confirm what arrangements the Hywel Dda University Health Board (HDdUHB) has in place for each WHTM, our escalation mechanisms and the WHTM governance groups in place.
6. Explain the systems we have in place to track and manage all WHTM recommendations to provide necessary assurances, including the high-level compliance tracker and the Authorising Engineer (AE) Individual Audit Tracker System.

Cefndir / Background and Asesiad / Assessment

1. The WHTM's explained

The WHTM's are a suite of best practice guidance documents published by the department of health specifically for healthcare engineering. Their primary purpose is to provide estates and facilities teams with comprehensive advice and guidance for the management, design and procurement of business-critical engineering components within a healthcare facility to ensure optimum safety, reliability and resilience.

2. The Specialist Areas/Disciplines within the WHTM's.

Within the overall WHTM guidance structure, there are eight specialist subject areas, as detailed below. The WHTM 00 is a generic overview document covering the complete range of WHTM's.

In addition to the core WHTM documents listed below there will also be other related sub sections. For example, WHTM 02-01 for medical gasses, contains Part A – Design and installation and WHTM 02-01 and Part B Operational Management. So, there are many documents that make up the entire suite of the WHTM publication library.

Generic overview document:

Welsh Health Technical Memorandum 00: Policy and Principles of HealthCare Engineering

Specialist Subject Areas and The Leading Directorates:

Welsh Health Technical Memorandum 01: Decontamination (Central Operations)

Welsh Health Technical Memorandum 02: Medical gases (Estates & Facilities)

Welsh Health Technical Memorandum 03: Heating and ventilation systems (Estates & Facilities)

Welsh Health Technical Memorandum 04: Water systems (Infection Prevention & Control)

Welsh Health Technical Memorandum 05: Firecode – fire safety in the NHS (Estates & Facilities)

Welsh Health Technical Memorandum 06: Electrical services (Estates & Facilities)

Welsh Health Technical Memorandum 07: Environment and sustainability (Estates & Facilities)

Welsh Health Technical Memorandum 08: Specialist services (Estates & Facilities)

3. Benefits of adhering to the guidance.

There are many benefits for following this guidance, this includes most importantly ensuring our critical engineering components within our portfolio of buildings are safe and fit for purpose. That they are being maintained and appropriately managed to maximise efficiency and to sustain asset life. Lastly, that we are adhering to a structured set of published guidance principles, which subsequently helps to ensure compliance with standards and further associated legislation.

Furthermore, by ensuring this guidance is adhered to as far as reasonably practicable and by embedding systems to monitor, track and escalate any associated non-conformities, this provides HDdUHB with the necessary confidence that effective WHTM management is in place.

4. The key roles and appointments in the WHTM's.

NHS Wales Specialist Estates Services (NWSSP-SES) play a significant role in the management of WHTM's for the HDdUHB. For most of the specialist subject areas an independent Authorising Engineer (AE) is appointed in writing by the HDdUHB to advise and support with technical advice on implementation of the guidance. For many of these specialist areas, the AE's also regularly undertake independent audits for HDdUHB to assess our level of performance and compliance.

In addition to the role of the AE, the HDdUHB is also expected to appoint lead officers, for many of the specialist areas, these are called Authorised Persons or AP's (for Water systems this is called the RP - Responsible Person). This will be an official appointment made in writing by the designated person (DP - the director of operations) following an independent assessment and recommendation by the AE.

There are AP's and RP's based at each of the acute hospital sites across the organisation, specifically for Decontamination, Medical Gas Services, Ventilation Systems, Water Systems and Electrical Services.

The AP has the key operational responsibility for their specialist service. This person will be qualified and sufficiently experienced and skilled to fully operate their specialist service. They will be able to demonstrate:

- Understanding through familiarisation with the system and attendance at an appropriate professional course.
- Competency.
- Level of experience.
- Evidence of knowledge and skills.

The AP will also be responsible for establishing and maintaining the validation of Competent Persons (CPs), who may be employees of the organisation or appointed contractors.

CP Appointment

This person provides skilled installation and/or maintenance of the specialist service. The CP will be appointed, or authorised to work (if a contractor), by the AP. They will demonstrate a sound trade background and specific skill in the specialist service. They will work under the direction of the AP and in accordance with operating procedures, policies, and standards of the service. The HDdUHB has a range of available CP's across many of the WHTM disciplines.

5. The arrangements HDdUHB has in place for WHTM's and the various governance groups.

The WHTM specialist areas are led by a selection of directorate areas within HDdUHB, it is important to ensure effective reporting and escalation mechanisms are in place for all specialist fields. Despite areas such as Decontamination and Water Services being led outside of the Estates and Facilities Directorate, these disciplines are still fully dependent upon the support and engineering arrangements provided by the Estates operational workforce.

The narrative below aims to provide a brief overview for each WHTM area and offers the necessary assurances that effective arrangements are in place for these disciplines.

For WHTM 01 - Decontamination Services (Led by Central Operations):

According to the AE for decontamination services, HDdUHB are considered pathfinders within Wales with medical device decontamination. This is significantly reassuring.

There are currently 3 regional centres for decontamination with a fourth being considered by the centralisation of endoscopy into Hospital Sterilisation and Decontamination Unit (HSDU) at Bronglais General Hospital. All community decontamination services have been transferred into the HSDU's, thus removing the need for benchtop equipment within NHS community facilities and the risks associated with this.

The 4 Endoscopy units across the HDdUHB are Joint Advisory Group (JAG) accredited as per Welsh Government (WG) directives (decontamination is also included as part of this accreditation).

The 4 Central Sterile Services Departments (SSD's) are accredited to the medical device directives (as specified in WG policy).

There are AP's appointed across the 4 acute sites carrying out decontamination and there is a HDdUHB wide AP decontamination group which meets routinely.

CP's for decontamination services undergo training, however there are recognised gaps in the skill set of some individuals and this will need to be reviewed and a decision made to link with equipment manufacturers where such services cannot be serviced and maintained in the correct manner (resource issues).

Decontamination equipment is at various stages of life across sites, but a rolling programme is in place and equipment changed when at end of life or when there are continuing service problems.

For WHTM 02 – Medical Gas Pipeline Services (Led By Estates and Facilities)

HDdUHB has a very well-established Medical Gas Estates Group, chaired by the Head of Engineering. The group meets quarterly to discuss a wide range of medical gas compliance issues and topics covering policy development, site-based risks, AE audits, recommendations and capital improvements linked to Medical Gas infrastructure. The focus on the current group is very much Estates led with regard to pipeline systems. Our most recent AE health board wide estates audit issued back on the 28 March 2022 was categorised as both reasonably and limited assurance for compliance and resilience. The AE issued the HB with 6 key recommendations, all of which are being carefully managed and will be tracked by the compliance team to ensure they are all addressed in a timely manner.

In addition, a Medical Gas Cylinder Group has been established under the direction of the Pharmacy Department to address critical issues related to medical gas cylinders, in particular oxygen risks, medical gas alerts, cylinder management, appropriate use of medical gases and staff training.

The group is led and chaired by the Head of Pharmacy to ensure a co-ordinated approach to addressing issues relating to medical gases and promoting safe and effective practise across the health board.

The establishment of the Medical Gas Cylinder Group, chaired by the Pharmacy, is a proactive approach to ensuring patient safety, operational efficiency, and compliance in the management of medical gas cylinders at Hywel Dda UHB.

The expected outcomes of this group are to ensure patient safety through the implementation of standardised procedures and protocols for the management of medical gas cylinders. Reduce incidents related to medical gases, and finally, Improved efficiency in medical gas cylinder utilisation and inventory management, leading to cost savings and resource optimisation.

For WHTM 03 – Ventilation Services (Led by Estates and Facilities):

HDdUHB has also formulated an established Ventilation Safety Group (VSG), chaired by the Head of Engineering, meetings are taking place quarterly and are well attended by a multi-disciplinary team of staff across the whole of HDdUHB. The most recent AE audit was issued in May 2023 with a reasonable level of assurance for ventilation compliance. The AE clearly states that significant improvements have been made within the previous review period, which should be noted. The AE has identified 10 individual recommendations to address to further enhance our compliance on this discipline. All of which are being carefully managed and will be tracked by the compliance team to ensure they are all addressed in a timely manner.

For WHTM 04 - Water Services (Led By IPC):

HDdUHB has a very well-established Water Safety Group (WSG) meeting quarterly, which is led by IPC colleagues and chaired by a consultant microbiologist. The most recent AE health board wide report submitted in February 2024 has indicated that HDdUHB are currently achieving a reasonable level of assurance for water safety compliance across the organisation. The AE has acknowledged that many WHTM aspects are in place such as, a well-represented WSG, policy documentation and key staff appointments (Responsible Persons Water and Deputy Responsible Persons Water). The audit has however indicated 5 key recommendations to further improve our level of compliance. All of these actions will be tracked appropriately as part of the operational compliance WHTM tracker system.

For WHTM 05 – Fire (Estates and Facilities Led):

HDdUHB has very well-established systems in place to manage fire safety across the organisation. A fully resourced fire safety team is in place, with one fire safety advisor based at each of the acute sites. An appointed Head of Fire Safety Management is also nominated as the AP fire and there are already robust reporting mechanisms for fire safety governance.

These are in the form of an all-Wales Fire Safety Managers forum, established by NWSSP-SES. Internal fire safety subgroups (for each region of the HDdUHB) reporting to a Health Board Wide fire safety group chaired by the Director of Facilities. This group reports regularly to the HSC as a standing agenda item, where topics such as training performance, risk assessment programme and the progress made against actions issued directly from Mid and West Wales Fire & Rescue Service (MWWFRS) as enforcement notices or letters of fire safety matters. It is also appropriate to note that throughout this journey we have formed an excellent working relationship with MWWFRS and fully aligned our fire safety upgrades/investments across the HDdUHB with them for complete transparency.

The existing NWSSP-SES online fire safety risk assessment system has been in use for many years across NHS Wales by all HB's. The system is based on an older technology platform and is known to offer a very limited range of data interrogation tools for reporting and managing fire risk assessment actions.

This situation is well documented across NHS Wales and the difficulties are acknowledged by NWSSP-SES themselves. Despite NWSSP-SES confirming for several years of a new improved system, which has been significantly delayed and still not yet fully implemented. HDdUHB were not prepared to accept these delays and decided (as the only Health Board in Wales) to implement their own bespoke system provided by the Boris software team, which offers a variety of enhanced benefits. Such as handheld tablet data gathering and data entry of fire risk assessments, moving from the older paper-based system and advanced reporting and interrogating of data and ownership of fire risk assessment actions across the entire HB.

This has been a significant undertaking by the fire safety team transferring circa 300+ fire risk assessments onto the new Boris platform. We are now working with the Boris team to produce detailed KPI graphs and data reports to offer a greater level of assurance. This is being presented as part of the fire safety update SBAR to this committee.

For WHTM 06 – Electrical Services Low and High Voltage (Estates and Facilities Led):

HDdUHB has established an Electrical Safety Group (ESG) which is chaired by the Head of Engineering. The group meets quarterly and consists of a multi-disciplinary membership to discuss both Low Voltage (LV) and High Voltage (HV) systems. The most recent AE health board wide LV report received in February 2024 has indicated that HDdUHB are currently achieving a limited level of compliance for Low Voltage systems across the HDdUHB. We therefore fully acknowledge the recent 9 key recommendations for LV improvements.

As for HV, the most recent AE health board wide audit was received in March 2023, this report indicated that the HDdUHB are achieving a reasonable level of compliance for HV across the organisation. The AE has provided the HDdUHB with 4 key recommendations for improvements.

Due to our successful formed WHTM group, these items are noted and will be tracked by our compliance team to ensure that all AP's address these in a timely manner.

For WHTM 07 - Environmental and Sustainability (Estates and Facilities Led):

The HDdUHB has its own dedicated environmental department that leads on this aspect, the organisation is also accredited to ISO 14001 for environmental management. The HDdUHB waste management arrangements were recently audited (Feb 2022 – Reasonable) by NWSSP and the recommendations contained in this audit are centrally held and tracked by the risk team. In addition to this a decarbonisation task and finish group is established which reports to the Sustainable Resource Committee and further to Operational Compliance Group, so there are clear lines of escalation and reporting for WHTM 07.

For WHTM 08 – Specialist Services (Estates and Facilities Led*):

The WHTM08 documentation covers specialist areas of health care, such as Acoustics (01), Lifts (02), Bedhead Services (03) and Pathology Laboratory Gas Systems (06). At present

the HDdUHB does not have a specific WHTM governance group established to cover all aspects of this WHTM in totality that we can formally measure our level of compliance.

Furthermore, NWSSP-SES currently has no AE formally appointed to cover this area of the WHTM range.

However, in order to provide a degree of assurance for WHTM 08, acoustic issues for new builds and alterations for our estate are covered as part of the design service provided by the HDdUHB.

For Lifts, the HDdUHB has a full maintenance programme in place with Otis and has invested significantly in 2022 on a 5-year life cycle condition report across all of our lifts. This information helps us to secure necessary funding to ensure our lifts are being maintained in the most appropriate way based on risk and resilience. In addition to the Otis contract in place to ensure compliance the statutory insurance inspections are being carried out by Zurich.

The all-Wales NHS lift meetings have also been re-established in Jan 2024, with HDdUHB represented at this group.

For Bed Head Services and Pathology Gas

As previously mentioned, there is currently no requirement for an AE or dedicated safety group for special services. However, we can confirm this guidance is regularly being discussed in other safety groups such as medical gas and low voltage.

Furthermore, our discretionary design and major capital teams ensure that all new installations are completed in strict accordance with all WHTM's. The issue of bed head service guidance is taken very seriously to ensuring the safety and wellbeing of all patients and staff in our care.

6. The Estates Compliance Team and the WHTM high level tracker system/AE individual audit tracker system.

The HDdUHB is fortunate to have recently established an Estates Compliance Team, led by a Statutory Compliance Manager and 3 Operational Compliance Officers. The HDdUHB understands the scale and importance of the WHTM's in healthcare and has therefore when setting the structure for the new compliance team it was decided to appoint a lead WHTM Operational Compliance Officer within the team, dedicated to ensuring that effective measures & systems are in place to track and manage AE recommendations, to ultimately drive improvements on WHTM compliance over time.

Some of the actions listed by the AE's require significant investment and therefore they are being appropriately risk assessed for capital prioritisation.

The compliance team have implemented both a high-level tracker, to provide a quick summary on how each WHTM is progressing as a high-level snapshot. The headings for this table have been specifically created by the compliance team as key headings to track and monitor.

In addition to the High-Level Tracker, a detailed AE individual audit tracker has also been developed. The purpose of this system is to directly extract the recommendations received

from each of the AE reports into a tracker spreadsheet system. The compliance team then ensures each recommendation is provided with a risk score. This exercise is conducted with the direct support from the appointed AP for that discipline. The recommendations are also all given an anticipated timeline for completing, which are regularly tracked and monitored by the compliance team and the risk/recommendation owner.

This engagement is vital to track our progress over time and to demonstrate that improvements are being made and to keep a close eye on expectation. Similarly, there may be unavoidable changes that need to be considered and the trackers require updating accordingly.

The information is also presented in the form of a dashboard where we can clearly see what audits have been received, the dates of the audits, the levels of assurance obtained, the number of actions, the risk scores of each action and how many items have currently been addressed/closed to show progress.

This dashboard is provided in appendix 1.0.

To help support this work, the compliance team have also implemented monthly WHTM subgroups, in addition to the main quarterly WHTM safety groups. These act as formal technical discussion groups (or feeder groups) to ensure all actions are sighted and are being managed in line with our objectives.

We fully acknowledge the position we are currently in with regards to WHTM compliance.

Since the establishment of our fully resourced compliance team and the introduction of our support systems/trackers and groups, we are confident that our compliance arrangements are steadily improving, and we can now use these systems to measure our progress.

However, we appreciate that change does take time to translate into tangible results, especially when we have to consider an ever-ageing estate and infrastructure, along with capital availability. Furthermore, very recent additions to the operational workforce at Officer level to help drive this change has only now come online. This will significantly help deliver a more improved WHTM compliance standard across all sites in the very near future once embedded fully.

We are therefore setting a target objective to aspire to. We are confident that within an 18-to-24-month period from now, which will include some major further development work we plan to carry out on our WHTM system (the first HB in Wales to develop a system like this). We are optimistic that all future AE audits will improve year on year and will be awarded a reasonable assurance level as a minimum standard across all WHTM disciplines.

We are also in early discussions with NWSSP-SES senior management team to consider the proposal of introducing benchmarking systems to monitor our performance on WHTM compliance across the rest of NHS Wales. We will update the HSC on this progress in the next WHTM submission.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to:

- **TAKE ASSURANCE** from this report and acknowledge that while there are areas of our WHTM compliance requiring further improvement a vast amount of work is underway as described in this report to help significantly improve the HDdUHB's status of compliance across all WHTM's.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers contractors etc.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	1745 (15) linked to WHTM
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	2.1 Managing Risk and Promoting Health and Safety
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services
Amcanion Cynllunio Planning Objectives	2a Staff health and wellbeing
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Contained within the body of the report. Estates Audit and Inspection Tracker
Rhestr Termau: Glossary of Terms:	AE Authorising Engineers AP Authorised Persons CP Competent Persons

	DP Designated Persons HB Health Board HDdUHB Hywel Dda University Health Board WHTM Welsh Health Technical Memorandum
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:	No consultation was necessary

Effaith: (rhaid cwblhau)	
Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There may be financial implications if the issues identified require monetary rectification.
Ansawdd / Gofal Claf: Quality / Patient Care:	There is a positive impact on staff safety, health and wellbeing through compliance with the Workplace (Health, Safety and Welfare) Regulations 1992.
Gweithlu: Workforce:	Potential for adverse future staffing impacts if this legislation is not complied with as it relates to employee safety.
Risg: Risk:	Risk to health and safety management.
Cyfreithiol: Legal:	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
Enw Da: Reputational:	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

Appendix 1: Compliance Tracker: Ensuring that the Hywel Dda University Health Board fulfils its obligation to comply with thw Welsh Health Technical Memorandum (WHTM)

Table of Contents

<u>1.0 Compliance Tracker – WHTM01 Decontamination</u>	
<u>2.0 Compliance Tracker – HTM02-01 Medical Gases</u>	
<u>3.0 Compliance Tracker – HTM03-01 Heating and Ventilation</u>	
<u>4.0 Compliance Tracker – WHTM04-01 Water Systems</u>	
<u>5.0 Compliance Tracker – HTM05-01 Fire Safety</u>	
<u>6.0 Compliance Tracker – HTM06-01 Electrical Services – HV & LV</u>	
<u>7.0 Compliance Tracker – HTM 07-02 Environment and Sustainability</u>	
<u>8.0 Compliance Tracker – HTM08 Specialist Services</u>	

1.0 Compliance Tracker – WHTM01 Decontamination

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Governance group established	(d) AE Appointed	(e) AP's Appointed	(f) AP's Trained	(g) AP's Officially Appointed in writing	(h) Annual Capital Allocation for High Risk Reduction	(i) CP's (Staff) Appointed	(j) CP's (Staff) Trained	Supporting Comments Actions Outstanding
WHTM 01 Decontamination	✓	✓	✓	✓	✓	✓	✓	✓	∅	✓	(i) CP's Trained not appointed (planned for early 2025)

2.0 Compliance Tracker – HTM02-01 Medical Gases

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Governance group established	(d) AE Appointed	(e) AP's Appointed	(f) AP's Trained	(g) AP's Officially Appointed in writing	(h) Annual Capital Allocation for High Risk Reduction	(i) CP's (Staff) Appointed	(j) CP's (Staff) Trained	Supporting Comments Actions Outstanding
HTM 02 Medical Gasses	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	

3.0 Compliance Tracker – HTM03-01 Heating and Ventilation

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Governance group established	(d) AE Appointed	(e) AP's Appointed	(f) AP's Trained	(g) AP's Officially Appointed in writing	(h) Annual Capital Allocation for High Risk Reduction	(i) CP's (Staff) Appointed	(j) CP's (Staff) Trained	Supporting Comments Actions Outstanding
HTM 03 Heating and Ventilation	✓	✓	✓	✓	✓	✓	✓	✓		✓	i) Trained on all sites but currently not appointed in GGH and PPH (planned for late 2024)

4.0 Compliance Tracker – WHTM04-01 Water Systems

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Governance group established	(d) AE Appointed	(e) RP' s Appointed	(f) RP's Trained	(g) RP's Officially Appointed in writing	(h) Annual Capital Allocation for High Risk Reduction	(i) DRP's (Staff) Appointed	(j) DRP's (Staff) Trained	Supporting Comments Actions Outstanding
WHTM 04 Water Systems	✓	✓	✓	✓		✓		✓		✓	e) Only GGH Currently awaiting assessment 30/05/2024

5.0 Compliance Tracker – HTM05-01 Fire Safety

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Governance group established	(d) AE Appointed	(e) AP's Appointed	(f) AP's Trained	(g) AP's Officially Appointed in writing	(h) Annual Capital Allocation for High Risk Reduction	(i) CP's (Staff) Appointed	(j) CP's (Staff) Trained	Supporting Comments Actions Outstanding
HTM 05 Fire Safety	✓	✓	✓	✓	N/A	✓	N/A	✓	N/A	N/A	Significant progress is evidenced on fire safety compliance. This is through our commitments to address Enforcement Notices served on the HB, as well as Letters of Fire Safety Matters.

7.0 Compliance Tracker – HTM 07-02 Environment and Sustainability

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Strategy Approved	(d) Champion Identified	(e) Governance group established	(f) Supporting Groups Attended	(g) Contracts in place	(h) Covered by ISO 14001 Certification	(i) Annual Capital Allocation	(j) Legal Compliance	(k) Risk Management	Supporting Comments Actions Outstanding
WHTM 07-01 & 07-05 Waste	✓	✓	✓	✓	✓	✓	✓	✓	⊘	✓	✓	(i) Request capital allocation when required
HTM 07-02 Energy	✓	✓	✓	✓	✓	✓	✓	✓	⊘	✓	✓	(i) Request capital allocation when required
WHTM 07-03 Transport	✓	✓	✓	✓	✓	✓	✓	✓	⊘	✓	✓	(i) Request capital allocation when required
HTM 07-04 Water	✓	✓	✓	✓	✓	✓	✓	✓	⊘	✓	✓	(i) Request capital allocation when required
HTM 07-06 Community Pharmacies	✓	✓	✓	✓	✓	✓	✓	✓	⊘	✓	✓	(i) Request capital allocation when required
HTM 07-07 Sustainable Buildings	✓	✓	✓	✓	✓	✓	✓	✓	⊘	✓	✓	(i) Request capital allocation when required

8.0 Compliance Tracker – HTM08 Specialist Services

Discipline	(a) Policy Drafted	(b) Policy Approved	(c) Governance group established	(d) AE Appointed	(e) AP's Appointed	(f) AP's Trained	(g) AP's Officially Appointed in writing	(h) Annual Capital Allocation for High Risk Reduction	(i) CP's (Staff) Appointed	(j) CP's (Staff) Trained	Supporting Comments Actions Outstanding
HTM 08-01 Acoustic Services	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
HTM 08-02 Lifts	⊘	⊘	N/A	N/A	N/A	N/A	N/A	✓	N/A	N/A	(a,b) no policy in place for lifts (all Wales policy being discussed, planned for 2025) Otis contract in place and full 5 year life cycle costs are available also covered under Zurich inspections 1 AP received training on lifts not officially appointed (not currently a requirement)
HTM 08-03 Bed Head Services	N/A	N/A	N/A	N/A	N/A	N/A	N/A	✓	N/A	N/A	(a,b) no policy requirement at this stage

W.H.T.M - nominated designated persons & W.H.T.M professional structure

Engineering Service	Name and Title of Designated Person	Designated Person Address	Designated Person E-mail	Designated Person Telephone Contact
Decontamination	Mr Andrew Carruthers - Director of Operations	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd,Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699
Medical Gases	Mr Andrew Carruthers - Director of Operations	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd,Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699
Heating and Ventilation Systems	Mr Andrew Carruthers - Director of Operations	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd,Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699
Water Systems	Mr Andrew Carruthers - Director of Operations	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd,Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699
Fire Safety	Mr Andrew Carruthers - Director of Operations	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd,Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699

Electrical Safety	Mr Andrew Carruthers - Director of Operations	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd, Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699
Environmental and Sustainability	Mr Andrew Carruthers - Director of Operations.	Hywel Dda University Health Parc Dewi Sant, Jobswell Rd, Carmarthen, SA313BB	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699

Appendix 2 - AE Individual Audit Tracker (DASHBOARD)

Discipline	Area covered	Reference Number	Report date	Compliance Rating	Service / Directorate	Director	Likelihood	Impact	Priority & Value	Recommendation	Recommendation Owner	Original Completion Date	Progress update	Expiation			
HV Electrical	Prince Phillip Hospital	MKNNSBP-SES Job No: 313NVA001	May-22	Reasonable Assurance	Estimate	Director of Operations	Likely	4	Negligible	1	Moderate	4	R.1: HV Managers should attend a HV managers course and be formally appointed for the site to manage the HV system in accordance with the HV policy.	Simon Day	Dec-22	Completed	6 delegates attended on 27th-Oct-2022
							Likely	4	Negligible	1	Moderate	4	R.2: An operational procedure manual should be collated containing all relevant high voltage documentation as detailed in HTM06-03.	Stewart Evans	Mar-23	Behind schedule	
							Rare	1	Negligible	1	Low	1	R.3: When any non HV works are being undertaken in the substations, a limitation of access (LoA) form should be completed	Stewart Evans	Dec-22	Completed	
							Rare	1	Negligible	1	Low	1	R.4: There are also some minor site housekeeping issues which require attention as detailed in section 3 of this report.	Stewart Evans	Dec-22	Completed	Signage put up and basic house keeping addressed
							Possible	3	Catastrophic	5	Extreme	15	R.5: Due to the age of the switchgear and SOP's present on the system, consideration should be given to replacing the switchgear in the near future and examining the possibility of increasing site resilience by splitting the DNO supplies and replacing the switchgear	Simon Day	Dec-25	On schedule	
Risk assessment "procedure number 674"												Today's date	14/04/2023				

