

HEALTH & SAFETY COMMITTEE PWYLLGOR IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 September 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Health and Safety Executive Enforcement Action Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Tim Harrison, Head of Health, Safety and Security Adam Springthorpe, Health and Safety Manager

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 presented to the Health and Safety Committee (HSC) in order to provide an update on the continuing work towards compliance following the enforcement notices served against Hywel Dda University Health Board (HDdUHB) by the Health and Safety Executive (HSE) in October 2019, and to provide an update with regard to developments following previous reports presented to the HSC since October 2019.

Cefndir / Background

Action Plans for Improvement Notice 2 (IN2) (management of manual handling) and IN7 (manual handling in theatres, Bronglais General Hospital) were submitted to the HSE ahead of the compliance date of 25th June 2021.

The HM Inspector of Health and Safety visited Prince Philip Hospital (PPH), Llanelli, on 25th June 2021 to review IN2 compliance in practice. On the 30th June 2021, the HSE Inspectors also undertook a follow-up visit to the Theatre Department, Bronglais General Hospital (BGH), Aberystwyth, to review IN7 compliance.

A summary of the position at that time is detailed below:

Improvement Notices	Status
IN2 - Management of Manual Handling	Final evidence submitted ahead of 25 th June 2021 compliance date
IN6 - Incident Investigation	Compliance date - 24 th September 2021
IN7 - Manual Handling in Theatres, Bronglais General Hospital	Final evidence submitted ahead of 25 th June 2021 compliance date
IN8 - Needlestick Management	Compliance date - 24 th September 2021

An Executive-led Control Group continues to oversee the work concerning the final four remaining Improvement Notices, with a direct link from the Sharps Safety Group, led by the Assistant Director of Operational Nursing and Quality.

Asesiad / Assessment

The Head of Health, Safety & Security, the Health and Safety Manager and a Manual Handling Trainer met with the HM Inspector of Health and Safety on 23rd June 2021. At the time, all parties agreed the meeting had been positive and it was anticipated that IN2 and IN7 would be signed off.

The visit to PPH was also deemed positive. The Inspector was pleased with the responses received from the staff spoken to on the day and it was further noted that there was a positive culture of health and safety management.

The visit to BGH to assess compliance towards IN2 and IN7 however was not as positive. Informal feedback received included that although the wards visited performed very well on the day, they felt that there was further work to be undertaken regarding the outstanding work in the Theatre Department, and the Inspectors were critical of certain responses provided by the Hospital Senior Management in terms of demonstrating good health and safety leadership.

Following the visit, HDdUHB received an official letter on 23rd July 2021 explaining that, although satisfactory progress had been made with regard to the Manual Handling Notices, some aspects remained incomplete in order to achieve full compliance. The Inspector therefore formally extended improvement notices IN2 and IN7 to 24th September 2021 to match compliance dates of the existing outstanding Notices for IN6 (incident investigation) and IN8 (needlestick management). The amended summary position is detailed below:

Improvement Notices	Status
IN2 - Management of Manual Handling	Compliance date - 24 th September 2021
IN6 - Incident Investigation	Compliance date - 24 th September 2021
IN7 - Manual Handling in Theatres, Bronglais General Hospital	Compliance date - 24 th September 2021
IN8 - Needlestick Management	Compliance date - 24 th September 2021

The HSE letter focuses on four key areas for improvement which include leadership, monitoring, competence, and audit, and further specifies precise actions required under IN2 and IN7 in order to reach a satisfactory level of compliance. Due to all HDdUHB evidence to date having already been submitted to the HSE, a final overarching action plan has been developed to specifically track the additional work relating to the remaining Improvement Notices. A significant amount of additional work has been undertaken towards each of the outstanding notices.

The Health, Safety and Security Team have divided the outstanding work into two action groups in order to achieve compliance:

1. Corporate Teams (Health, Safety and Security, Occupational Health, Infection Prevention, Datix Team and Quality Assurance and Safety).
2. Directorate Management Teams.

The key corporate actions to be finalised include:

- Leadership: Develop a corporate health and safety vision.
- Examine referrals to Occupational Health in relation to musculoskeletal disorders (MSDs) arising from injury at work, sickness absence records in relation to MSDs, and other available data sources.
- Finalise health and safety targets/leading indicators.
- Develop a manual handling audit programme.
- Evidence the increased quality of incident investigations on the new Datix system "Once for Wales Concerns Management System", in comparison to the old Datix system.

- Continue the rollout of updated staff incident guidance documents via various routes.
- Develop needlestick injury management flowcharts.
- Analyse sharps injury data for root cause identification and lesson learning.

The key Directorate Management actions required are outlined below:

Leadership - to embed the principles of the Corporate Health and Safety vision into everyday activity; similar approach to the Health Board Values.

IN2 – Management of Manual Handling:

- Directorates to undertake quarterly manual handling compliance monitoring utilising the Workplace Manual Handling Monitoring Form (a standard checklist devised for all managers to self-monitor their performance against their responsibilities as outlined in the Manual Handling Management Standards).

IN6 – Incident Investigation:

- All managers to ensure that suitable and sufficient incident investigations are undertaken for all staff incidents within the required timeframes. To include the satisfactory investigation and closing of all historic open staff incidents.
- Senior Managers to ensure management staff attend the Manager’s Health and Safety Induction Training course.

IN7 – Manual Handling in Theatres, BGH:

- The Theatre Department to finalise new/updated risk assessments and Safe Systems of Work (SSoWs) for the outstanding, more complex, manual handling techniques required in Theatres and evidence the sharing of this learning;
- Confirm the operational arrangements for the specialist manual handling equipment utilised in Theatres.
- Ensure that the required medical staff attend manual handling training prior to the compliance date. This is an imperative action as this is a particular concern of the HM Inspectors.

IN8 – Needle stick Management:

- Ensure that the Sharps Injury Investigation Checklist is utilised following all sharps injuries that are acquired from dirty or unknown origin sharps/needles.
- Complete the Non-Safety Sharps Risk Assessment for all procedures where non-safety sharps are in use and where safer alternatives are available.

Argymhelliad / Recommendation

The Health & Safety Committee to requested to gain assurance from the HSE Enforcement Action Update Report that the necessary work is being undertaken towards compliance with the Notices served against HDdUHB by the Health and Safety Executive.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference:
Cyfeirnod Cylch Gorchwyl y
Pwyllgor:

3.10 Ensure there is a process of review of findings of safety management system audits and seek assurance that corrective actions are put in place.

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Focus On What Matters To Patients, Service users, Their Families and Carers, and Our Staff
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report	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:	Improvement Notices Material Breaches
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Committee:	Executive Control Group Task & Finish Groups
Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There is a growing financial impact in relation to the fee for intervention costs that HSE charge for their services.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Detailed action plans produced highlighting the mitigation of these identified risks.
Cyfreithiol: Legal:	Breaches of Health and Safety at Work Act 1974 potential for fines if not complied with within specified timescale.
Enw Da: Reputational:	Potential for political or media interest if compliance or further enforcement action is served.

Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	<ul style="list-style-type: none">• Has EqIA screening been undertaken? See below.• Has a full EqIA been undertaken? Full EqIAs have been undertaken for both the Violence & Aggression Policy and the Moving & Handling Policy under which the HSE work is focused.