

### HEALTH & SAFETY COMMITTEE PWYLLGOR IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD:	13 September 2021
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Welsh Health Circulars (WHC) Assurance Report
TITLE OF REPORT:	
CYFARWYDDWR ARWEINIOL:	Mandy Rayani, Director of Nursing, Quality and Patient
LEAD DIRECTOR:	Experience
SWYDDOG ADRODD:	Claire Bird, Assurance and Risk Officer
REPORTING OFFICER:	

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 includes an update on progress in relation to the implementation of Welsh Health Circulars (WHCs), which come under the Health & Safety Committee's (HSC) remit. The HSC is requested to seek assurance from the lead Executive Director or Supporting Officer on the management of WHCs within their area of responsibility, particularly in respect of understanding when the WHC will be delivered, any barriers to delivery, and impacts of non/late delivery, and to further seek assurance that the risks associated with these are being managed effectively.

## Cefndir / Background

WHCs provide a streamlined, transparent and traceable method of communication between the NHS Wales and NHS organisations relating to different areas such as estates, finance, governance, health professional letters, information governance, quality and safety, legislation, planning, performance and delivery, policy, public health, research, science, and workforce.

WHCs were reintroduced in October 2014 to replace the previous system of Ministerial Letters. The process was approved by the Minister for Health and Social Services and designed following advice from audit services, in agreement with the Local Health Board and NHS Trust Board Secretaries. The new arrangement was intended to provide a streamlined, transparent and traceable method of communication. WHCs are published on the Welsh Government website and on <u>HOWIS</u> (the official website of NHS Wales).

At its Public Board meeting on 27<sup>th</sup> July 2017, Hywel Dda University Health Board (HDdUHB) requested that WHCs which have not been implemented by the stated timescales should be closely monitored by its Committees, in order that assurance could be gained regarding the compliance and delivery of the outstanding WHC, as well as an understanding of the impacts resulting from late/ non-delivery.

### Asesiad / Assessment

Attached at Appendix 1 is an update provided by each Lead Officer in respect of the WHCs that fall under the remit of the HSC. WHCs are included in the bi-monthly reports distributed to services by the Assurance and Risk Team.

The information below indicates the WHCs aligned to the HSC which have a RAG rated status of **red** (i.e. have not been implemented within stated timescales) and **amber** (i.e. have not been implemented or there is no compliance date stated, however are in progress).

### WHCs which have not been implemented within stated timescales (Red RAG status)

There are currently no red RAG status WHCs under the remit of the HSC.

# WHCs which have not been implemented; nonetheless are on schedule or have no compliance date stated on WHC (Amber RAG status)

There are currently no amber RAG status WHCs under the remit of the HSC.

## WHCs that have been implemented (Green RAG status)

WHC Ref	Name of WHC	Date	Lead Executive/
		Issued	Director
012-21	Implementing the agreed approach to	22/04/2021	Director of
	preventing Violence and Aggression		Nursing, Quality
	towards NHS Staff in Wales		and Patient
			Experience

HDdUHB has identified and made a commitment to the protection of staff by increasing resources that now include a dedicated violence and aggression (V&A) case manager.

To support this agenda, a V&A pack has been developed and widely utilised and includes the revised risk assessment. The pack also includes police escalation and processes to be considered in a flow chart, as well as incident response models that are shared with and utilised at higher risk COVID-19 specific locations. HDdUHB is well represented at the NHS Wales Anti Violence Collaborative and promotes the obligatory response to violence in Healthcare. Posters have been displayed in prominent areas across HDdUHB.

To raise the profile, a dedicated section of V&A risks is included within the Managers Health and Safety Induction training. When incidents occur, support and advice, on both a personal victim level and management contact, is offered on every single reported event with a clear focus on protection and taking forward actions where appropriate. This ranges from internal code of conduct letters, anti-social behaviour (ASB) referrals, warning markers, referral for prosecution and liaison with police and the Crown Prosecution Service (CPS). All witnesses and victims are supported throughout any investigative process to court attendance and conclusion.

This has not only seen positive outcomes, but the staff express empowerment not to tolerate and be subjected to intimidating, violent or abusive behaviours, through the course of their work.

Argymhelliad / Recommendation

The Health and Safety Committee is asked to gain assurance from the report that the assigned Welsh Health Circulars are implemented and agree closure.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.7 Provide assurance that robust and effective safety management systems are in place operationally to deliver the Health Board's health, safety and security objectives and fulfil its statutory duties.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risks to delivery of WHCs should be identified on directorate/ service risk registers
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	All Quality Improvement Goals Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report</u>	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:							
Ar sail tystiolaeth:	Relevant Welsh Health Circulars						
Evidence Base:							
Rhestr Termau:	Explanation of terms is included in the body of the						
Glossary of Terms:	report						
Partïon / Pwyllgorau â ymgynhorwyd	Not applicable						
ymlaen llaw y Pwyllgor lechyd a							
Diogelwch:							
Parties / Committees consulted prior							
to Health and Safety Committee:							

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian:	Dependent on individual WHC
Financial / Service:	
Ansawdd / Gofal Claf:	Dependent on individual WHC
Quality / Patient Care:	
Gweithlu:	Dependent on individual WHC
Workforce:	
Risg:	Dependent on individual WHC
Risk:	

Cyfreithiol:	Dependent on individual WHC
Legal:	
Enw Da:	Dependent on individual WHC
Reputational:	
Gyfrinachedd:	Dependent on individual WHC
Privacy:	
Cydraddoldeb:	Dependent on individual WHC
Equality:	

WHC No	Name of WHC		Date Issued	Status	Category	Overarching Actions Required	Lead Director	Lead Officer	Date of Expiry / Review	Action required from	Action required by	Status RAG / R - behind schedule / A - on schedule / G - Completed	Progress update
012-21	WHC 2021/12: Implementing the agreed approach to preventing Violence and Aggression towards NHS Staff in Wales	https://gov.wale s/sites/default/fil es/publications/ 2021- 05/implementing the-agreed- approach-to- preventing- violence-and- aggression- towards-nhs- staff-in- wales.pdf	_	Action	Workforce	In the context of the A Healthier Wales commitment for the NHS to become an exemplar employer in respect of the health and well-being of its workforce, all NHS organisations have agreed the approach to preventing violence and aggression towards NHS staff in Wales. The advent of the Covid-19 pandemic also adds further pressure upon NHS services in an array of ways that will foreseeably increase the risk of violence being inflicted on NHS Workers. This work is important to drive both practical and cultural change to ensure that: • the public, staff and patients are aware how seriously the NHS im Wales that the NHS have first responsibility to energise the initiative; • all NHS staff in Wales can be confident that we are taking a concerted effort to protect them from violence and aggression whilst they are at work; and • if staff are involved in any such incident they can be reassured there are clear policies and procedures in place, these will be followed robustly and effectively to support them through the process and appropriate actions will be taken against the perpetrators.	Director of Nursing, Quality and Patient Experience	Tim Harrison	NA	Chief Executives and Chief Operating Officers of Health Boards and Tusts Workforce Directors	Immediately	Green	HDdUHB has identified and made a commitment to the protection of staff by increasing resources that now include a dedicated violence and aggression (V&A) case manager. To support this agenda a V&A pack has been developed and widely used and includes the revised risk assessment. The pack also includes police escalation and processes to be considered in a flow chart, as well as incident response models that are shared with and utilised at higher risk Covid specific locations. HDdUHB is well represented at the NHS Wales Anti Violence Collaborative and promotes the obligatory response to violence in Healthcare. Posters have been displayed in prominent areas across HDdUHB. To raise the profile a dedicated section of V&A risks is included within the Managers Health and Safety Induction training. When incidents occur, support and advice, on both a personal victim level and management contact, is offered on every single reported event with a clear focus on protection and taking forward actions where appropriate. This ranges from internal code of conduct letters, anti-social behaviour (ASB) referrals, warning markers, referral for prosecution and liaison with police and the Crown Prosecution Service (CPS). All witnesses and victims are supported throughout any investigative process to court attendance and conclusion. This has not only seen positive outcomes but the staff express empowerment not to tolerate and be subjected to intimidating, violent or abusive behaviours, through the course of their work.