



**HEALTH & SAFETY ASSURANCE COMMITTEE
PWYLLGOR ANSAWDD IECHYD A DIOGELWCH**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	06 March 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Operational Maintenance Policy 144 – For Approval
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Executive Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Simon Chiffi, Head of Operations

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Health and Safety Committee is asked to approve the Operational Maintenance Policy 144 (Appendix 1). This report provides the required assurance that Policy 190 – Written Control Documentation has been adhered to in the review of the above mentioned written control document (WCD) and therefore the document is in line with legislation/regulations, available evidence base and can be implemented within the Hywel Dda University Health Board (HDdUHB).

Cefndir / Background

1. Brief summary of the WCD:

This policy clearly sets out instructions and expectations for the management of Operational Maintenance for Hywel Dda University Health Board.

2. Scope of the WCD:

This policy applies to all staff at all premises owned or occupied by Hywel Dda University Health Board

3. Reason(s) for reviewing the Policy:

This policy required updating as it had reached its three yearly review period; this has also provided an opportunity to ensure that the policy follows the new policy template and that any changes to the guidance and any supporting technical specifications are also reflected in the new document.

4. Aim(s) of the Policy:

The aim of this policy is to set out how Hywel Dda University Health Board will ensure the below -

- Safety, security and comfort of all patients, staff, and visitors of the HDdUHB.
- Planned preventive maintenance of all estate equipment and systems.
- Efficient use of resources and materials.
- Compliance with relevant regulations and standards.
- The estate is maintained in a cost-effective manner.
- Provide a proactive and preventative approach to estate maintenance.

A full review of Policy 144 has been undertaken, ensuring the document is in line with Welsh Government strategy and current legal and other requirements.

4.1 Minor changes

Updated Job Titles.

Updated to include the introduction of CAFM

Included all estates services that are tested.

Assurance

1. Equality Impact Assessment (EQiA) (Appendix 2)

A EqiA was sent to the Equality Diversity and Inclusion team and it was requested that all male and female pronouns be eliminated and replaced with gender neutral pronouns. The current Policy has only received minor Changes such as job titles and the previous EqiA form updated with the current names, dates, and job titles etc.

2. Privacy Impact Assessment: – Not Applicable for this document.

3. Evidence base:

The following reference sources have been used in the compilation of this revised Operational Maintenance Policy:

- WHTM 01-01 Decontamination
- HTM 02-01 Medical Gas Pipeline Systems
- HTM 03-01 Ventilation
- WHTM 04-01 Water Safety
- WHTM 06-01 Electrical Services
- WHTM 08-02 Specialist Services-Lifts

4. Compliance with Legislation/Regulations:

Full adherence with the content of this policy will demonstrate that as far as reasonably practicable the Health Board has complied with the necessary guidance documents such as Health and Safety Guidance (HSG) / Health Technical Memorandums (HTM) for health care purposes

4.1. Interested Parties:

The Health and Safety Committee to which this document is tabled is the owning committee for its approval. To support this approval, this policy has also been officially circulated to the members of the Operational Compliance and Site Operations Group for prior consultation.

5. Consultation:

The owning group for the revision of the Policy, the Operational Compliance and Site Operations Group, have officially signed off the revised policy on the 3 February 2023. There have been only minor amendments made to the Policy as noted.

6. Implementation:

The Policy will be made available to all staff within the Health Board via the intranet policy page.

7. Monitoring:

It is essential that continued monitoring be carried out to establish the effectiveness of this policy. The outcome of this monitoring will determine what measures are required to improve specific aspects of non-compliance or lack of adherence to the policy. Principally this will be the responsibility of the Operational Compliance & Site Operations Group. This will then be further escalated to the Health and Safety Committee when requested.

Argymhelliad / Recommendation

For the Health and Safety Committee to approve the revised Operational Maintenance Policy for Hywel Dda University Health Board for three years.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	Not Applicable
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risks have been scored and identified on the Datix system
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):	Protect Patients From Avoidable Harm From care
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018- 2019	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	The content of this policy is developed utilising expert advice, with reference to legislation and guidance documentation.
Rhestr Termau: Glossary of Terms:	Not Applicable
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:	Operational Compliance and Site Operations Group

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There are direct financial consequences associated with the content of this policy.
Ansawdd / Gofal Claf: Quality / Patient Care:	There are direct patient care consequences associated with this policy across the Hywel Dda University Health Board.
Gweithlu: Workforce:	There are direct legal responsibilities for staff (workforce) associated with this policy.
Risg: Risk:	There are a variety of related risks associated with this policy, which are individually referenced in the Datix system, complete with the necessary mitigation plans and further actions to be implemented.
Cyfreithiol: Legal:	The Hywel Dda University Health Board has specific legal responsibilities as defined by this policy.
Enw Da: Reputational:	There are potentially significant reputational and damaging consequences (claims) on the Hywel Dda University Health Board particularly where there is clear evidence of failings as a result of non-compliance with this policy.

Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	The Equality Impact Assessment for this policy has been included for information.

OPERATIONAL MAINTENANCE POLICY

Policy information

Policy number: 144

Classification:

Corporate

Supersedes:

V02

Version number:

V03

Date of Equality Impact Assessment:

09/02/2023

Approval information

Approved by:

Health and Safety Committee

Date of approval:

Enter approval date

Date made active:

Enter date made active (completion by policy team)

Review date:

Click or tap to enter a date.

Summary of document:

This policy contains the protocol and general guidance on the maintenance of HDUHB's Estate and how to request breakdown/repair work.

Scope:

This document applies to aspects of operational maintenance across the HDUHB.

To be read in conjunction with:

[145 HV/LV Electrical Policy](#)

[020 Asbestos Policy](#)

[242 Fire Safety Policy](#)

Welsh Health Technical Memorandum / Health Technical Memorandum
Health Building Note

Owning group:
Compliance and Operations Group
03/02/2023

Executive Director job title:
Andrew Carruthers - Director of Operations

Reviews and updates:
V1 – 23/10/2012
V2 – 10/03/2020
V3 – 03/02/2023

Keywords
Maintenance, Building Defects, PAT testing, breakdown, repair, portable appliance test, operational maintenance, PPM, Pre-Planned Maintenance Summary

Glossary of terms

PPM	Pre-Planned Maintenance
WHTM	Welsh Health Technical Memorandum
HBN	Health Building Note
AE	Authorising Engineers
AP	Authorised Persons
CP	Competent Person
NWSSP-SES	NHS Wales Specialist Services Partnership – Specialist Estates Services.
KPI	Key Performance Indicator
PPE/RPE	Personal Protective Equipment
CIP	Cost Improvement Plan
DOH	Department of Health
PAT	Portable Appliance Test
WAG	Welsh Assembly Government

Contents

Policy information.....1
 Classification:.....1
 Supersedes:.....1
 Version number:1

Date of Equality Impact Assessment:	1
Approval information	1
Approved by:.....	1
Date of approval:	1
Date made active:.....	1
Review date:.....	1
Enter review date (normally three years from approval date).....	1
Summary of document:.....	2
Scope:.....	2
To be read in conjunction with:	2
Patient information:.....	2
Owning group:	2
Executive Director job title:	2
Reviews and updates:	2
Keywords	2
Glossary of terms.....	2
Introduction	6
Scope	6
Aim.....	6
Main body (Free typing add titles etc).....	6
Definitions	6
Statutory maintenance.....	7
Reactive maintenance (breakdowns)	7
Planned preventative maintenance (ppm).....	8
High Risk PPM's include those that are generated specifically for High Level.....	8
General Risk PPM's consider both general statutory and non-statutory elements.	8
Specialist or service contracts	9
Emergency on-call services.....	9
Maintenance requirements	9
Records & drawings.....	10
Asset register.....	10
Procurement of maintenance	10
Maintenance funding	10

Minor works & improvements	11
Safe systems of work/permits	11
Permits to work	11
Working in mental health areas	11
Working in sterile, covid or quarantine areas	11
External contractors	11
Health & safety	12
Staff training.....	12
Monitoring performance & compliance	12
Standard key performance indicators/reports – measuring and monitoring performance:.....	12
Testing of electrical equipment.....	12
Limitations.....	13
Implementation	13
Review	13
Roles and Responsibilities	13
The Chief Executive.....	13
Executive Director of Operations	13
Director of Facilities Estates and Capital Planning	13
Head of Estates Engineering	14
Head of Estates Engineering	14
Estates Managers.....	15
Operations Compliance Team	16
Estates Officer	16
Directors and general managers	17
Help Desks	17
Tradesperson/Maintenance Assistants & Competent Persons	17
Infection Prevention & Control	17
References.....	18

Introduction

Hywel Dda University Health Board (HDUHB) recognises its legal obligations to take necessary measures in the provision of effective maintenance of buildings equipment, engineering plant, systems and services.

Key elements of this policy are:-

- Compliance with statutory requirements and British Standards
- Adherence to best practice engineering guidance (Welsh Health Technical Memorandums WHTM) & (Health Building Note HBN)
- Health and Safety at Work Act 1974
- Compliance with standards for better health
- Compliance with the Health Act 2006
- Provision of a safe environment
- Reduce hospital acquired infection
- Define the ground rules for the delivery of an effective maintenance service

The concept of providing and maintaining safe estates services carries a high statutory priority and applies across the widest range of applications. It must apply to patients, staff and general public, that is, all users of the healthcare environment. In a similar way, the duty of care in operational maintenance performance can contribute towards the overall efficiency and safety of a healthcare organisation.

Scope

This document applies to aspects of operational maintenance across the HDUHB.

Aim

This policy will:-

- Provide guidance to those responsible for the maintenance of healthcare environments.
- Assist in maintaining the value of the Estate, extending the economic life of the property and engineering systems as far as possible.
- Minimise disruption by ensuring business continuity.
- Maintain the patient environment in a manner conducive to quality clinical care.
- Ensure that buildings and all associated services operate at optimum levels of performance within design criteria in the useful life cycle.
- Ensure that robust monitoring and reporting mechanisms are in place.

This policy supports the upkeep of buildings, engineering plant and equipment by regular inspection and maintenance in line with the guidance documents (Health Technical memoranda) and other recognised guidance, legislation and standards.

Main body

Definitions

For the purpose of this document the following maintenance definitions apply:-

Statutory maintenance

This work is prescribed and is our statutory duty to undertake, failure to undertake this work would lead to non-compliance with legislation and HSE guidance.

Reactive maintenance (breakdowns)

Repair service normally requested by a user department. When faults are reported they are allocated a priority from 1: Urgent Priority 2: Medium Priority and 3: Low Priority, depending on the nature of the fault. Faults of this nature are reported through the Maintenance Helpdesk on the following numbers:-

Carmarthenshire locality	01267 235151 Ext. 2942
Ceredigion locality	01970 623131 Ext. 5770
Llanelli locality	01554 756567 Ext. 3689
Pembrokeshire locality	01437 764545 Ext. 3463

A reference number logging the fault will be given to the requester, a record of which should be retained for future use.

Breakdowns will be prioritised in the following categories, and whilst the Estates Department will at all times endeavour to achieve the response times scheduled below, these should be treated as target times and may not be achievable in every instance :-

Priority 1 – Urgent Priority / Immediate Attention (Including Emergencies) – Complete within 1 Day.

- Consequences that directly affect the quality of patient care and has the potential for further deterioration if not dealt with urgently.
- Consequences that directly affect the effectiveness of Infection control processes.
- Consequences that directly affect the ability to deliver the Health Board's primary business activities and has a potential for deterioration if not dealt with urgently.
- Consequences that directly lead to an increased risk of injury to staff, visitors or others and is likely to deteriorate if not dealt with urgently.
- Consequences that directly lead to an increased risk of damage to plant, buildings or equipment.

Priority 2 – Medium Priority / Important – Complete within 3 Days.

- Consequences that directly affect the quality of patient care (non-critical).

- Consequences that directly affect the effectiveness of Infection control processes (non-critical).
- Consequences that directly affect the ability to deliver the Health Board’s primary business activities (non-critical).
- Consequences that directly lead to an increased risk of injury to staff, visitors or others (non-critical).
- Consequences that directly lead to an increased risk of damage to plant, buildings or equipment (non-critical).

Priority 3 – Low Priority / General – Complete within 7 Days.

- Inconvenience to staff, patients, visitors or others.
- Reduced performance or failure of non-critical plant or equipment.
- Anything that does not fit the above definition of Urgent or Important.
- Minor works are not included within the breakdown prioritised works.

The implications of failure range from loss of facility to consequential damage of buildings, engineering systems and equipment. In some circumstances the failure could be detrimental to the health, safety and welfare of patients or staff. Whilst it is accepted that it is impossible to totally eliminate reactive maintenance it nevertheless should be reduced to acceptable levels via an adequate Pre-Planned Maintenance (Planned Preventative Maintenance) (PPM) system and an investment programme (backlog/statutory or infrastructure).

Planned preventative maintenance (ppm)

PPM’s Provide the most efficient and effective maintenance service in order to mitigate the risks associated with building or engineering system failure. The PPM management system includes both statutory and non-statutory maintenance categories, reducing the demand for reactive maintenance.

PPM’s are defined by two distinct categories;

High Risk PPM’s include those that are generated specifically for High Level

Statutory PPM’s and Business Critical Equipment, where failure would compromise the service significantly.

General Risk PPM’s consider both general statutory and non-statutory elements.

The operational maintenance department operate a computerised maintenance system for the management of Planned preventative Maintenance and breakdowns. The maintenance programme or plan shall be kept up to date for the management of PPM.

The plan is reviewed regularly by the Site Estates Management Team and Head of Estates Engineering and matched to HDUHB's activities and availability of resources to include gap analysis of demand versus resource availability.

Maintenance work specifications and frequencies are established for all tasks with reference to health and safety, permits to work and risk assessments which will be ongoing. Frequencies shall be varied, based on relevant risk assessment, approved codes of practice, professional judgment, local circumstances and manufacturers recommendations.

Specialist or service contracts

Some equipment or services of a complex or specialist nature will usually be covered by a service contract. This category includes both planned and reactive maintenance, however, response times for repairs may vary depending on the terms of contract typically this refers to specialist equipment such as lifts.

Emergency on-call services

All sites have access to a 24 hour call out service (via local switchboards) as scheduled above.

Call outs are for Emergency breakdowns only directly affecting patient care and or significant H&S issues. They are mutually agreed with the on call Estates Engineer.

On sites where there is an out of hours boiler man available, these individuals are contacted to assess the situation and if necessary will contact the on-call team.

Where there is no site presence out of hours, switchboard will contact the on call Estates Engineer who will make an assessment of the situation based upon the information provided.

The definition of an Emergency on-call attendance is:

- Immediate serious impairment to patient safety or welfare
- Immediate serious disruption to treatment processes
- Immediate threat to Infection Control
- Immediate serious loss of Health Board business activities.
- Immediate risk of serious injury to staff, visitors or others (Health and Safety issues).
- Immediate risk of significant damage to buildings, plant or infrastructure equipment.

Maintenance requirements

Each maintenance discipline will have its own specific documentation, such as legislation & regulations, technical guidance, manufacturers' recommendations, WHTM/HBN recommendations, codes of practice, risk assessment and good practice etc. to ensure safe, efficient and effective delivery of maintenance services across the HDUHB's assets. It is imperative that operational managers are made fully aware of current documentation available.

Records & drawings

Records and drawings shall be kept up to date. At the handover of any new development, the Estates Manager shall ensure that all statutory as-fitted information is received with log books implemented for new systems. The work must be finished to a quality and level of completion that minimises disruption through the defects liability period.

The HDUHB will only accept works with a sufficient level of quality and completion, adequate information and records with which to safely operate and maintain the facility, as determined by the Estates Maintenance Management Team.

Drawings of the existing operational maintenance infrastructure are equally important, however there is currently a known deficit for this information across the HDUHB. There has been significant progress made with the introduction of a SharePoint page this allows access to site drawings requested formally through the CAD-technicians.

Asset register

Operational asset registers and operational maintenance plans will be compiled by local management teams for all sites identifying buildings, levels, departments, major engineering plant, systems and equipment. This is to ensure that the HDUHB's assets are adequately protected and are maintained in accordance with manufactures guidelines, best practice engineering guidance and legislative requirements.

Management are also expected to actively identify any associated risks with these assets and to ensure that this is being accurately recorded on the HDUHB's DATIX system. This should include aspects such as asset age (end of life), asset failure or failure to comply with published guidance or legislation and the consequence of this risk. Local management must also clearly indicate what mitigation measures it has implemented to control the risk and what measures have been put in place to address the risk (i.e. capital bid for replacement items of infrastructure).

Local management must work closely with the property and compliance function in order to firstly identify these components so that they can be recorded and identified as a physical backlog item. Also that the compliance function can support local maintenance management with the risk scoring matrix where there are difficulties in assessing the actual risk score.

Procurement of maintenance

Maintenance work shall be carried out by in-house staff and nominated contractors. All Staff will be appropriately trained, and have the required qualification, experience and ability to undertake the specific tasks required. A contractor is the person or organisation designated by management to be procured by the HDUHB for maintenance work. It is essential to ensure that individuals employed have suitable qualifications necessary to undertake the work appropriately, safely and that detailed RAMS for all work activity have been communicated in advance of the work with the HDUHB's employing manager (person commissioning the work). All contractors must adhere to the principles clearly set out in the HDUHB's Contractor Control Policy 541.

Maintenance funding

Maintenance shall be funded from the appropriate revenue budget with separate account codes established for all categories of work. Monthly reports shall be provided (from Click view) to assess trends, accruals, commitments and expenditure against budget. The budget shall be reviewed monthly and set annually to include Cost Improvement Programmes (CIP) targets and the reporting of cost pressures.

Minor works & improvements

Minor work is a term used to define small items of work involving adaptation, alteration and new installation which are often required to support changes in procedures and work practices. This work will be carried out by either the HDUHB in-house direct works staff or nominated contractors. This work is subject to a separate process and can only be undertaken where appropriate funding is allocated by the Client Service Budget Holder. Each individual request is assessed and an estimate of cost prepared. This is presented back to the requesting directorate/departmental manager for their approval. If approved, written authorisation is provided along with a financial code on an official HDUHB Minor Works Request Form. Any work that is believed to exceed £25,000 a capital bid pro-forma must be submitted to the Capital Team.

Safe systems of work/permits

The Estates Department will operate a formal approach to using written safe systems of work, risk assessment and when and where necessary a “permit to work” system will be used. Where specific risks are identified, the appropriate manning numbers will be utilised.

Permits to work

This is an integral part of the working ethos for the operational maintenance function and supports risk reduction. Permits will be issued before commencement of work in specific circumstances, for example permits will be issued where entry is required into confined spaces, the need for hot works, medical gas isolations, fire alarm isolations and electrical isolations. These will require following appropriate notification in accordance with the risk assessments.

Working in mental health areas

It is the responsibility of the clinical staff working in these areas to advise Estates of any potential hazards or concerns regarding individual patients. Two person working will be adopted in areas where this is the case.

Working in sterile, covid or quarantine areas

It is the responsibility of the clinical staff working in these areas to advise Estates of any additional precautions deemed necessary such as “gowning up”. All protective clothing and gloves should be provided at the point of entry to a controlled area.

External contractors

There must be strict adherence to the HDUHB’s Control of Contractors Policy & Procedures when engaging contractors to undertake operational maintenance work for the HDUHB. It is vital that the engaging manager (person from the HDUHB who requests the work from the contractor) has fully liaised with the contractor before commencement of work, in order to discuss all aspects of the work to ensure that all foreseeable risks are considered, communicated and mitigated correctly.

All contractors employed must receive the operational maintenance control of contractors induction before commencement so that they are fully made aware of the HDUHB's protocols, such as site induction protocols/ site rules, notification of site attendance, scope of works, formal discussion and sign off of Risk Assessments and Method Statements, effective communications and the need to officially sign in at all times. All permits should be formally requested seven days prior to any work commencing.

Health & safety

All work will be undertaken in accordance with HDUHB's policies, DOH guidance, relevant Codes of Practice, HSE guidance and departmental Health and Safety procedures. It is imperative that the HDUHB implements appropriate measures to control and mitigate risks.

Staff training

Staff training shall be reviewed annually in conjunction with annual appraisals and a training plan produced. Training records shall be kept up to date for all staff by the Estates Manager facilitated by the Compliance Team.

Monitoring performance & compliance

The Head of Engineering Manager and the Estates Managers will regularly monitor the service for efficiency and effectiveness.

An on-going review of all service level agreements and contract arrangements will be undertaken to take account of changes in assets and legislation and to ensure equipment/plant failures shape future maintenance arrangements.

Routine checks will be made by the operational maintenance management team in respect of the requirements for safe working practices, compliance with departmental procedures and statutory compliance.

Standard key performance indicators/reports – measuring and monitoring performance:

A detailed performance report will be presented and discussed at the monthly Operational Monthly Team Meeting, chaired by the Head of Engineering.

Testing Estates Services

It is the policy of HDUHB to ensure all estate services are tested periodically or in accordance with relevant standards or guidance such as WHTM, HTM, HBN and statutory H & S legislation. This includes all electrical, water, steam, boiler, ventilation, medical gas & pipeline services, as well as any security systems, fire safety systems, and other related services. All tests must be performed by qualified personnel in accordance with applicable safety regulations and guidelines such as WHTM, HTM, HBN and statutory H & S legislation.

Limitations

This policy applies to all staff employed by the HDUHB who are party to the Operational maintenance process.

This policy compliments the WAG, DOH policies and Procedures and Principles in the Health Technical Memorandum series and does not detract from other Estates guidance.

Implementation

This policy will be implemented through the use of sufficient resources within the operational maintenance department, and also through current and future external maintenance contracts agreed.

Review

This policy will be formally reviewed every two years by the operational management team for any changes in working practices, legislation & guidance. However, there may also be situations where there is a reason to amend the policy content before the next scheduled review date.

Roles and Responsibilities

Responsibility and more specifically, the duty of care within the HDUHB rests with the Chief Executive or his nominated deputy and the executive board. The designated staff responsibilities are detailed as follows:

The Chief Executive

The Chief Executive carries ultimate responsibility for providing a well maintained environment for patient care and ensuring compliance in all areas covered by this policy document.

Executive Director of Operations

The Executive Director of Operations has delegated responsibility for the Estates, Facilities and Operational Maintenance functions, and for the overall provision of a compliant, effective and efficient service. This position fulfils the role of Designated Person for the HDUHB.

Director of Facilities Estates and Capital Planning

Is responsible for the regular review of the condition and risk of the HDUHB's Estate and Infrastructure to feed into investment programmes and discussions on the maintenance investment needed to maintain the Estate. They must also make sure that there are sufficient professional resources within the department to fulfil its obligations to support the organisation appropriately.

The Director of Facilities, Estates and Capital Planning will also disseminate this policy within their area of responsibility and to ensure it is implemented and regularly reviewed.

They must actively promote a positive Health and Safety culture throughout the department and ensure that this is embedded throughout the workforce.

Head of Estates Engineering

The Head of Estates Engineering will strategically manage the staff and resources applied to the Operational Estates Maintenance Function. They will set out the standards and quality of service to be provided, ensuring suitable levels of resource are provided to deliver the agreed level of service and monitor the quality of service provided, taking corrective action where necessary.

They must actively promote a positive Health and Safety culture throughout the department and ensure that this is embedded throughout the workforce.

The Head of Estates Engineering will also ensure that all data generated by the current Estates Maintenance Management System, is analysed to ensure key performance indicators and operational targets are achieved thus ensuring user satisfaction, cost effectiveness and efficiency of the services.

Through regular monitoring of KPI's, the Head of Estates Engineering will ensure that appropriate reactive and planned preventative regular arrangements are put in place to protect the HDUHB's and interests and assets.

Head of Estates Engineerign & Estates Managers These Estates Managers are responsible for overseeing and coordinating the activities of the assistant site operational managers based at each of the acute hospital sites.

They are also responsible for ensuring that there is sufficient resources and expertise within the operational maintenance function to adhere to this Maintenance Policy, including any subsequent operational procedures and associated Planned Preventative Maintenance activities.

They will also undertake periodic performance reviews on maintenance achievements to inform the Head of Estates Engineering and the Compliance Officer of any concerns, risks or noncompliance activity in connection with operational maintenance. As senior managers they must also actively promote a positive Health and Safety culture throughout the department and ensure that this is embedded throughout the workforce on all operational maintenance activities carried out.

Furthermore, these individuals are required to make the necessary changes to policies and working practices following any revisions in legislation and advise the operational management team of such changes.

They are also expected to work closely with key operational staff who are directly responsible for the development of task specific risk assessments and safe systems of work. The Assistant Head of Estates Engineering and operations compliance officer will periodically review and audit these and highlight any recommendations that are required.

Estates Managers

The Estates Managers (x4) are responsible, managerially and operationally for the effective delivery of maintenance services within the HDUHB's premises. They will be directly supported day to day by the Estates Officers and the Site Works Supervisors who are located at each acute site.

Collectively, they must ensure that: Maintenance Policies and Procedures are implemented across the HDUHB's premises and that they continually promote a positive Health and Safety culture throughout the workforce to control and minimise risk as far as reasonably practicable for all operational activities.

Estates Managers will oversee the day to day operational maintenance management of Estates services includes buildings, engineering, equipment, specialist maintenance and grounds & gardens with appropriate planned preventative maintenance programmes, and an operational maintenance plan

allowing regular review of maintenance activities. Due to the high risk nature of the service, they will in conjunction with their officers ensure that:

Suitable risk assessments and safe systems of work are comprehensively prepared, in place and made available for operational staff to perform their tasks safely at all times.

The same level of scrutiny applies to the appointment of contractors via the operational maintenance function. Ensuring that contractors who are employed are suitably proficient and trained to undertake work for the HDUHB. Also that they have followed all the principles & guidelines set out in the “Control of Contractors Policy”.

There is full adherence to HDUHB’s policies/procedures and where there are potential shortfalls or discrepancies, highlight these immediately to senior management staff. e.g. compliance with the control of contractors procedure, confined space policy, asbestos policy and working at height procedures etc.

- Staff are given appropriate information, instruction and training to undertake their tasks safely, and that suitable equipment and PPE is provided at all times.
- That a suitable and sufficient staff training plan is in place and reflects the needs of the staff within the operational maintenance department.
- Ensure that regular liaison with the HDUHB’s appointed Authorising Engineers at NWSSP-SES for technical advice and guidance for all operational disciplines.
- Ensure that there is effective, efficient and robust PPM systems in place to maintain the HDUHB’s assets to acceptable levels of condition, compliance and safety. Furthermore that the operational workforce staff is operating in an effective and efficient manner whilst carrying out these tasks.
- They continually promote a positive Health and Safety culture within the operational maintenance function and are actively involved with the estates Health and Safety working groups to review and improve Health and Safety controls within the department.
- Ensure that operational risks are captured and managed appropriately using the HDUHB’s DATIX risk management system.
- They are fully involved in all capital projects and will be expected to give advice and feedback on schemes that may affect the operational infrastructure.
- That maintenance teams have appropriate input to design and maintainability of all new installations.
- That maintenance teams have comprehensive operations and maintenance manuals handed over on completion of schemes.

- That appropriate training and familiarisation is provided to the in-house maintenance teams upon scheme handover.
- That they are fully aware the expectation on them to fulfil the role of Authorised Person (AP) for specialist HTM engineering services, such as AP medical gas, electricity, ventilation etc.
- Ensure that the appropriate reports are provided to the site-based Operational Delivery Meetings.
- Ensure effective control and management of operational budgets for both statutory and revenue budgets across the HDUHB.

Operations Compliance Team

The Operational Compliance Team will ensure that the HDUHB has implemented the appropriate operational policies and will advise on the effective management and control of operational risks across a range of statutory duties (e.g. Asbestos, Contractor Control Business Continuity, Confined Space and Statutory standards.)

They are required to support and advise the operational maintenance function with the development of operational policies and working practices. Also to ensure that any revisions in legislation are reflected in these policies and communicated to the various operational teams.

They are expected to support and work closely with key operational staff who are directly responsible for the development of task specific risk assessments and safe systems of work. The operations compliance Team will periodically review/audit these and highlight any recommendations that are required.

Estates Officer

The Estates Officer (based at each of the acute sites) are designated officers for a variety of operational disciplines. Whilst also supporting the Estates Managers with their duties, the positions also fulfils the role of Authorised Person (AP) for specialist engineering/building services and ensures the planned preventative maintenance (PPM) programme is coordinated, monitored and revised for all maintenance activities.

The roles will also involve close involvement with Capital Project Schemes ensuring relevant information is available to support the scheme on site. They will also be required to support with the development of operational policies and management of risk where required.

Directors and general managers

Are responsible for ensuring that arrangements are in place within their service area, to effectively maintain equipment not serviced by the Estates Department, and replace as necessary. Where medical and non-medical equipment is of a specialist nature advice should be obtained from the manufacturer.

Help Desks

Each locality Helpdesk will utilise the Estates Maintenance Management System and will receive and log all maintenance requests from across the relevant locality, issue the relevant works orders, docket and input response/action in order to complete the cycle of work.

Tradesperson/Maintenance Assistants & Competent Persons

HDUHB employs a range of Operational Staff, such as Tradesmen/Maintenance

Assistants and Competent Persons who are expected to undertake a variety of operational tasks including skilled installations and/or maintenance of specialist services. They will be directed, appointed or authorised to work by the Estates Management Team dependent upon the type of work involved. Staff will carry out repairs and planned preventative maintenance as instructed, and will provide feedback to both helpdesk and team leaders/line managers.

They must ensure that whilst carrying out any of their tasks, a suitable and sufficient assessment of risk has been conducted and a safe system of work is in place to minimise risks to health and safety for themselves and the safety of others. They must ensure that they are equipped where necessary with the appropriate, tools, work wear, PPE and RPE for all tasks that they have been asked to perform. At all times, staff must ensure that their work area is left in a safe and tidy condition and are encouraged to report any wrongdoing or inappropriate work activity / behaviour that they may encounter.

They are also expected to promote a positive health and safety management culture for themselves and to their work colleagues. All staff must adhere to the operational maintenance policies procedures in place. Any concerns with regard to condition or operational function of equipment or services must be reported to Operations Management Staff.

Infection Prevention & Control

It is the responsibility of the Infection Prevention & Control Team to provide input for all matters relating to the hospital environment, maintenance of hospital buildings and engineering systems and to work with the Estates maintenance team providing guidance and support when advice on controlling the environment is required and providing advice on risk assessments for controlling the environment decisions.

The Infection Prevention & Control Team will also be required to work with the Estates Design Projects Team to ensure appropriate action is taken by Consultants and Contractors to reduce the risk of cross infection.

References

- British Standards
- Welsh Health Technical Memorandums WHTM

- Health Technical Memorandums HTM's
- Health Building Note HBN
- Health and Safety at Work Act 1974
- Standards for better health
- Health Act 2006

SUMMARY EQUALITY IMPACT ASSESSMENT – 144 - Operational Maintenance Policy

Organisation:	Hywel Dda University Health Board
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Proposal Sponsored by:	Name:	Paul Evans
	Title:	Operations Compliance Manager
	Department:	Estates Department

Policy Title:	Water Safety Policy
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Brief Aims and Objectives of Policy:	<p>This policy will:-</p> <ul style="list-style-type: none">• Provide guidance to those responsible for the maintenance of healthcare environments.• Assist in maintaining the value of the Estate, extending the economic life of the property and engineering systems as far as possible.• Minimise disruption by ensuring business continuity.• Maintain the patient environment in a manner conducive to quality clinical care.• Ensure that buildings and all associated services operate at optimum levels of performance within design criteria in the useful life cycle.• Ensure that robust monitoring and reporting mechanisms are in place. <p>This policy supports the upkeep of buildings, engineering plant and equipment by regular inspection and maintenance in line with the guidance documents (Health Technical memoranda) and other recognised guidance, legislation and standards.</p>
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Was the decision reached to proceed to full Equality Impact Assessment?		No
	If no, please give reasons - The policy has no direct relevance to duties under the Equality Act 2010, having a neutral impact on protected groups. A trawl of similar policies in other Health Boards in the UK indicated a similar outcome.	
If no, are there any issues to be addressed?	Yes	
	Copies of the policy in alternative formats can be made available on request. Review January 2023 Policy wording amended to include Gender Inclusive Language	

Is the Policy Lawful?	Yes	The policy complies with Health and Safety legislation
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Will the Policy be adopted?	Yes	
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Are monitoring arrangements in place?	Yes	
	Yes, the policy will be subject to regular reviews to assess it's performance and implementation. Any complaints received in relation to equality, diversity and human rights received following implementation of the policy will be addressed on an individual basis and appropriate action taken.	

Who is the Lead Officer?	Name:	Andrew Carruthers
	Title:	Executive Director of Operations
	Department:	Operations
Review Date of Policy:	March 2026	

Signature of all parties:	Name	Title	Signature
	Paul Evans	Head of Estates Risk &	08/02/23

		Compliance, Estates & Facilities	
	Robert O'Connell	Compliance Manager	08/02/2023
	Alan Winter	Senior Diversity & Inclusion Officer	6/2/2023