

HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	6 May 2023
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 <u>Sefyllfa / Situation</u>

This report is presented to the Health and Safety Committee (HSC) to provide assurance 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 paper 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 (HDUHB) has in place for each WHTM, our escalation mechanisms and the WHTM governance groups in place.
- 6. Explain the systems 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. Therefore, 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

<u>Specialist Subject Areas and The Principle Leading Directorate for Assurance:</u>

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: Fire code – 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 of following this guidance including:

- ensuring critical engineering components within the portfolio of buildings are safe and fit for purpose.
- ensuring buildings are being maintained and appropriately managed to maximise efficiency and to sustain asset life.
- ensuring adherence 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, by embedding systems to monitor, track, and escalate any associated non-conformities, this provides HDUHB 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 HDUHB. For most of the specialist subject areas an independent Authorising Engineer (AE) is appointed in writing by the HDUHB 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 HDUHB to assess our level of performance and compliance.

In addition to the role of the AE, the HDUHB is also expected to appoint lead officers, for many of the specialist areas from within the HB, these are called Authorised Persons or AP's (for Water systems this is called the Responsible Person (RP)). 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 HDUHB has a range of available CP's across many of the WHTM disciplines.

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

The WHTM specialist areas are led by a selection of Directorates within HDUHB. 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, HDUHB are considered pathfinders within Wales with medical device decontamination. This is significantly reassuring.

There are currently three regional centres for decontamination with a fourth being considered by the centralisation of endoscopy into Hospital Sterilisation and Decontamination Unit (HSDU) at Bronglais 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 four Endoscopy units across the HDUHB are Joint Advisory Group (JAG) accredited as per Welsh Government (WG) directives (decontamination is also included as part of this accreditation).

The four 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 four acute sites carrying out decontamination and there is a HDUHB wide AP decontamination group that meets routinely.

The Strategic Decontamination Group is chaired by the Deputy Director of Operations, this meets periodically and escalates its business to the Quality, Safety and Experience Committee.

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. There is a detailed database of assets by age, supported by an anticipated replacement programme subject to capital availability.

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

HDUHB 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 regarding pipeline systems. There have been some recent discussions by Pharmacy within the group to widen the agenda and a decision has been made to establish a separate Pharmacy led group, which will focus specifically on other concerns such as Oxygen risks, medical gas alerts, cylinder management, use of medical gas and staff training etc. This additional group led and chaired by pharmacy is likely to commence later this summer.

Our most recent AE health board wide estates audit issued on the 28 March 2022 was categorised as providing reasonable and limited assurance for compliance and resilience. The AE issued the Health Board with six key recommendations, all of which are being carefully managed and tracked by the Compliance Team to ensure they are all addressed in a timely manner.

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

HDUHB 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 multidisciplinary team of staff across the whole of HDUHB. The most recent AE audit was issued on the 20 February 2023 (presently in draft) 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 ten individual recommendations to address to further enhance our compliance on this discipline. All of which are being carefully managed and are being tracked by the Compliance Team to ensure they are all addressed in a timely manner.

For WHTM 04 - Water Services (Led by IPC)

HDUHB has a well-established Water Safety Group (WSG) meeting quarterly, which is led by Infection, Prevention and Control colleagues and chaired by a consultant microbiologist. The most recent AE health board wide report submitted on the 14 March 2023 has indicated that HDUHB are currently providing 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 six key recommendations to further improve our level of compliance. All actions are being tracked appropriately as part of the operational compliance WHTM tracker system.

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

HDUHB has 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 sub-groups (for each region of the HDUHB) 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 HDUHB with them for complete transparency.

For WHTM 06 - Electrical Services Low and High Voltage (Led by Estates and Facilities

HDUHB 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 on the 13 February 2023 has indicated that HDUHB are currently achieving a limited level of compliance for Low Voltage systems across the HDUHB. We therefore fully acknowledge the recent eight key recommendations for LV improvements.

As for HV, the most recent AE health board wide audit was received on the 26 April 2022, this report indicated that the HDUHB are achieving a reasonable level of compliance for HV across the organisation. The AE has provided the HDUHB with five key recommendations for improvements.

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

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

The HDUHB has its own dedicated environmental department that leads on this aspect, the organisation is also accredited to ISO 14001 for environmental management. The HDUHB waste management arrangements were recently audited (February 2022 – Reasonable) by NWSSP and the recommendations contained in this audit are centrally held and tracked by the Assurance and Risk team. In addition to this a Decarbonisation Task and Finish group is established which reports to the Sustainable Resource Committee and further to Capital Sub Committee, so there are clear lines of escalation and reporting for WHTM 07.

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

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 HDUHB 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, to provide 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 HDUHB.

For Lifts, the HDUHB 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 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 2023, with HDUHB represented at this group.

For Bed Head Services and Pathology Gas

As previously highlighted, with no AE in place or safety group for special services, assurances can still therefore be obtained that as much of this guidance is discussed and covered in other safety groups such as medical gas and low voltage.

Furthermore, the design team takes great care to 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 ensure 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 HDUHB is fortunate to have recently established an Estates Compliance Team, led by a Statutory Compliance Manager and three Operational Compliance Officers. The HDUHB 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.

Some of the actions listed by the AE's require significant investment and therefore they are being appropriately risk assessed for capital prioritisation via EFAB investments and major infrastructure programme. All risks will be included within the Datix system and mitigated as appropriate.

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, which are RAG rated.

In additional to the High-Level Tracker (Appendix 1), 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 completion, 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 (Appendix 2) that reports the audits that 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.

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 the objectives.

Since the recent establishment of the fully resourced Compliance Team and the introduction of support systems/trackers and groups, the compliance arrangements are steadily improving, and systems are in place to monitor the progress. It is noted that change does take time to translate into tangible results, with an ageing estate and infrastructure, along with capital availability adding to the challenges. Additions to the operational workforce at Officer level to help drive this change has recently come online which will significantly help deliver an improved WHTM compliance standard across all sites in the near future once fully embedded.

Due to the focus work underway, the team are confident that in a 24 month period all future AE audits will be of reasonable assurance level as a minimum standard across all WHTM disciplines. A piece of work is underway to create a fully transparent management system using the Boris platform, similar to that for fire safety. This success is linked to the continuation of capital and EFAB funding to address key recommendations.

Argymhelliad / Recommendation

The Health and Safety Committee is requested to take assurance from this report and note that while there are WHTM recommendations not currently being complied with, a vast amount of work is underway as described in this report to help significantly improve the HDUHB's compliance across all WHTM's. Annual status reports can be presented to the Committee to track progress over time.

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:	-
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	 Staying Healthy Safe Care Managing Risk and Promoting Health and Safety Infection Prevention and Control (IPC) and Decontamination
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	All Quality Improvement Goals Apply Protect Patients From Avoidable Harm From Care Reduce Duplication and Eliminate Waste
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report 2018-</u> 2019	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Contained within the body of the report.
Evidence Base:	
Rhestr Termau:	Contained within the body of the report.
Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd	No consultation to date but will be shared with Quality
ymlaen llaw y Pwyllgor Ansawdd	and Safety/Governance meetings as well as County
lechyd a Diogelwch:	Partnership Forums.
Parties / Committees consulted prior	
to Health and Safety Assurance	
Committee:	

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:	No evidence gathered to indicate a negative impact on any protected group/s.
	Evidence gathered indicates a positive impact on the protected characteristics of human rights and pregnancy / maternity by providing a safer workplace.

Appendix 1.0 – High Level Tracker

Compliance Tracker:

Ensuring that the Hywel Dda University Health Board (HDUHB) fulfils its obligation to comply with the Welsh Health Technical Memorandum (WHTM).

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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
WHTM 01 Decontamination	~	~	~	*	~	~	~	~	0	*	(i) CP's Trained not appointed

1.0 Compliance Tracker – WHTM01 Decontamination (Led by Central Operations)

2.0 Compliance Tracker – HTM02-01 Medical Gases (Led By Estates and Facilities)

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 A	ctions Outstanding
HTM 02 Medical Gasses	~	~	~	~	~	~	~	4	~	~		
							Dis	scipline		Site	Audits Received from January 2021	Audit Assurance level
							N	<u>MGPS</u>		<u>GGH</u>	1	Reasonable Assurance/ Limited Assurance
							Ν	NGPS		PPH	0	-
							N	MCDS		WGH	1	Reasonable Assurance/

MGPS

MGPS

MGPS

WGH

BGH

HB Wide

1

0

1

Limited Assurance

Reasonable Assurance/

Limited Assurance

3.0 Compliance Tracker – HTM03-01 Heating and Ventilation (Led By Estates and Facilities)

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 A	ctions Outstanding
HTM 03 Heating and Ventilation	~	~	~	~		~	~	~	0		(e)PPH currently in the p awaiting AE response (i)all trained need appoin	
							Dis	scipline		Site	Audits Received from January 2021	Audit Assurance level
								Vent		GGH	0	-
								Vent		PPH	1	Reasonable assurance
								Vent		WGH	1	Limited assurance
								Vent Vent		BGH HB Wide	1 3	Reasonable assurance Reasonable assurance
							_	veni			.]	

4.0 Compliance Tracker – WHTM04-01 Water Systems (Led By IPC)

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 A	ctions Outstanding
WHTM 04 Water Systems	*	*	*	~				*			(f)BGH going for training quote is back and will ne (g) cannot be appointed (i) DRP current appointm	
							Dis	scipline		Site	Audits Received from January 2021	Audit Assurance level
								Vater		GGH	0	-
								Vater		PPH	0	-
								<u>/ater</u>		WGH	1	Limited Assurance
								Vater		BGH	0	-
							<u> </u>	<u>/ater</u>		HB Wide	2	Reasonable assurance

5.0 Compliance Tracker – HTM05-01 Fire Safety (Led By Estates and Facilities)

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.

6.0 Compliance Tracker – HTM06-01 Electrical Services – HV & LV (Led By Estates and Facilities)

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 A	Actions Outstanding
HTM 06 Electr	ical Services (H	ΙV)	✓		*	✓	0	√		~	N/A	N/A	(b) HV policy Currently in (e) we do not have APs bu have been trained but not	t rather HV managers which
HTM 06 Electr	rical Services (l	_V)	~	✓	*	~			~	~	0	Ť	addressed (f) some AP training has ex refresher training	r acute site currently being xpired and they will need 23 and will begin appointing
Discipline	Site	Audits from Ja			Audit /	Assurai	nce leve	el		Discipli	ne	Site	Audits Received from January 2021	Audit Assurance level
HV	GGH		0			-				LV		<u>GGH</u>	1	Limited Assurance
<u>HV</u>	<u>PPH</u>		1		Reaso	nable a	issuran	<u>ce</u>		LV		PPH	0	-
HV	WGH		0			-				<u>LV</u>		<u>WGH</u>	1	Limited Assurance
HV	BGH		0			-			LV BGH 1 Reasonable Assuran					
<u>HV</u>	<u>HB Wide</u>		2		<u>Reaso</u>	nable a	assuran	<u>ce</u>		LV		HB Wide	2	Limited Assurance

7.0 Compliance Tracker – HTM 07-02 Environment and Sustainability (Led By Estates and Facilities - Draft)

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	~	~	~	~	~	~	*	~	0	~	~	(i) Request capital allocation when required
HTM 07-02 Energy	~	~	~	~	~	~	~	~	*	~	~	
WHTM 07-03 Transport	~	~	~	~	~	~	~	~	*	~	~	
HTM 07-04 Water	~	~	~	~	~	~	~	~	~	~	~	
HTM 07-06 Community Pharmacies	~	~	✓	*	~	~	~	✓	✓	✓	*	

8.0 Compliance Tracker – HTM08 Specialist Services (Led By Estates and Facilities)

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	0	0	N/A	N/A	N/A	N/A	N/A	~	N/A	N/A	(a,b) no policy in place for lifts 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
HTM 08-03 Bed Head Services	0	0	N/A	N/A	N/A	N/A	N/A	~	N/A	N/A	(a,b) no policy in place for lifts

Engineering ServiceName 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			

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

		Hywel Dda University Health		
Electrical Safety	Mr Andrew Carruthers - Director of Operations	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,	andrew.carruthers2@wales.nhs.uk	Tel Nr: 01267 239699
		SA313BB		

Discipline	Site	Audits Received from January 2021	Audit Assurance level , ,	a) Recommendations issued	a) Extreme	a) High	a) Moderate	a)Low	B) Recommendations addressed	b) Extreme	b) High	b) Moderate	p)Low	C) Recommendations remain	c) Extreme	c) High	c) Moderate	c)Low	D) Recommendations date exceeded	d) Extreme	d) High	d) Moderate	d)Low
Vent	GGH	0	-																				
Vent	PPH	1	Reasonable assurance	16																			
Vent	WGH	1	Limited assurance	18																			
Vent	BGH	1	Reasonable assurance	16																			
Vent	HB Wide	3	Reasonable assurance	10																			
MGPS	<u>GGH</u>	1	Reasonable Assurance/ Limited Assurance	37	1	2	8	26	6	0	0	2	4	30	1	2	6	21	1	0	0	0	1
MGPS	РРН	0	-																				
MGPS	WGH	1	Reasonable Assurance/ Limited Assurance	6	0	3	3	0	6	0	3	3	0	0	0	0	0	0	0	0	0	0	0
MGPS	BGH	0	-																				
MGPS	HB Wide	1	Reasonable Assurance/ Limited Assurance	6																			
Water	GGH	0	-																				
Water	PPH	0	-																				
<u>Water</u>	<u>WGH</u>	1	Limited Assurance	36																			
Water	BGH	0	-																				
Water	HB Wide	2	Reasonable assurance	6																			
LV	<u>GGH</u>	1	Limited Assurance	25	0	2	8	15	2	0	0	1	1	22	0	1	7	14	1	0	1	0	0
LV	PPH	0	-																				
<u>LV</u>	<u>WGH</u>	1	Limited Assurance	21	0 0	7	2	12	17	0	6	10	1	3	-	1	_	-	1	0	0	0	1
LV	<u>BGH</u>	1	Reasonable Assurance		0	1	7	1	5	0	0	4	1	4	0	1	3	0	0	0	0	0	0
LV	HB Wide	2	Limited Assurance	8																			
HV	GGH	0	-																				
HV	PPH	1	Reasonable assurance	5	1	0	2	2	3	0	0	1	2	1	1	0	0	0	1	0	0	1	. 0
HV	WGH	0	-																				
HV	BGH	0	-																				
HV	HB Wide	2	Reasonable assurance	5																			