

MINUTES OF THE Health and Safety Committee MEETING

Date of Meeting: **9:30 AM, Tuesday 12 November 2024**
Venue: **Microsoft Teams Meeting/ Ystwyth Boardroom**

Present:

Ann Murphy	Independent Board Member – Trade Union (Chair)
Adam Springthorpe	Health & Safety Manager
Bethan Lewis	Interim Assistant Director of Public Health
Jonathan Arthur	Deputy Director of Health Sciences
Olwen Morgan	Assistant Director of Nursing
Andrew Carruthers	Chief Operating Officer
Chantal Patel	Independent Board Member - University
Charlotte Wilmshurst	Assistant Director of Assurance and Risk
Delyth Raynsford	Independent Board Member - Community
Eleanor Marks	HUHB Vice Chair
Iwan Thomas	Independent Board Member – Third Sector
James Severs	Executive Director of Allied Health Professions and Health Science
Rhodri Evans	Independent Board Member – Local Authority
Sharon Daniel	Interim Executive Director of Nursing, Quality & Patient Experience
Simon Chiffi	Head of Operations
Tim Harrison	Head of Health, Safety and Security

In Attendance:

Stephen Williams	Financial Management Graduate Trainee (Observing)
Marilize Preez	Improvement and Transformation Lead (Observing)
Ruth Poynting	Committee Services Officer (Minutes)

Apologies:

Amanda Glanville	Assistant Director of People Development
Anthony Dean	Estates
Ardiana Gjini	Executive Director of Public Health
Rob Elliott	Director of Estates, Facilities and Capital Management
Joanne Wilson	Director of Corporate Governance/Board Secretary

Minutes Ref.	Item	Action
HSC(24)88	Welcome and Apologies Ms Ann Murphy welcomed the Committee to the meeting and apologies for absence were noted as above.	
HSC(24)89	Declarations of Interest There were no declarations of interest.	

HSC(24)90

Minutes of Previous Meeting Held on 10 September 2024

The minutes of the meeting held on 10 September 2024 were APPROVED as an accurate record, with corrections of Mr James Severs name to 'Mr Severs' instead of 'Mr James' throughout, and a correction of Mr Severs' job title to 'Executive Director of Allied Health Professions and Health Science'.

Decision: The minutes of the Health and Safety Committee meeting on 10 September 2024 were approved as a correct record of proceedings.

HSC(24)91

Matters Arising and Table of Actions from Meeting held on 10 September 2024

HSC(24)76, To submit a report on health and safety training compliance to Committee, and HSC(24)83, To bring an updated report on Bariatric Compliance to Committee, have been added to the HSC workplan for update in January. The timescale on the table of actions was updated.

Decision: The Health and Safety Committee noted the Table of Actions from the meeting held on 10 September 2024 and received updates on any outstanding actions.

HSC(24)92

HSC Self-Assessment: 6-Month Outcome Report

Ms Charlotte Wilmshurst provided an update on the status of the actions that arose from the Committee self-assessment earlier in the year. A number of actions have been completed, and four actions remain outstanding. The outstanding items include the development of the Health and Safety dashboard and the use of Civica to provide patient feedback on the environment they are being treated in.

The report for the self-assessment for this year will be presented to the Committee in January.

Ms Delyth Raynsford raised concern around the timescale for the development of a health and safety dashboard and queried whether the deadline of March 2025 is possible when this is dependent on capacity.

Mr Severs assured that a health and safety team has been assigned to assess the individual metrics. However, progress also relies on the capacity of the Information Technology (IT) department as they will transfer data from old databases on to the new system. An update is expected in January 2025.

In response to a query from Ms Chantal Patel Ms Wilmshurst stated that the reporting template for committees is being standardised in response to the findings of the committee self-assessment, alongside the work on the Integrated Impact Assessment form.

Decision: The Committee received assurance from the progress made against the actions being undertaken to improve its effectiveness.

HSC(42)93

Health and Safety Committee and Sub-Committee Terms of Reference

Ms Wilmshurst explained that the Health and Safety Sub-Committee terms of reference have been presented following a review of the Health and Safety governance arrangements reported at the last meeting.

These terms of reference are also planned to be reviewed in six months' time as operational governance is being reviewed.

Ms Murphy queried the number of people required for the subcommittee to be quorate and raised the possibility of combining areas of responsibility across individuals or to receive some reports by exception.

The group agreed that the final core membership will be approved with a Chair's action.

JS/AM

Mr Severs stated that a business meeting will need to take place to agree the chair for this group, nominate a vice-chair, and plan the direction for the Health and Safety Sub-Committee.

In this business meeting additional consideration will be needed around the following:

- Whether the Head of Legal Services should be changed to the Head of Risk and Assurance.
- Whether the Director of Public Health should be a core member.
- Whether Emergency Preparedness, Resilience and Response (EPRR) representation is needed.

The Health and Safety Committee terms of reference have been updated to reflect the change in the lead executive and the reporting arrangements.

One additional amendment was requested to remove the Assistant Medical Director as part of the core membership.

CSO

A further review of Committee Terms of Reference is currently taking place.

Ms Murphy questioned the chairing arrangement of the Trade Union Health and Safety group. This is expected to be chaired by Helen Williams, Chair of the Trade Union Health and Safety Group in Pembrokeshire.

Decision: The Committee **NOTED** the:

- Health and Safety Sub-Committee Terms of Reference.

The Committee **APPROVED** the:

- Health and Safety Committee's Terms of Reference for onward ratification by the Board on 28 November 2024.

HSC(24)94

Operational Risks Assigned to HSC

The group discussed the operational risks that are assigned to the HSC. There are seven total risks including three risks new to the committee.

Risk 1567 – Risk of harm and unauthorised access to premises and facilities due to inadequate security measures has reduced in score from twenty to twelve.

In response to a query from Ms Patel Mr Andrew Carruthers stated that challenges related to Capital availability are determined by funding availability and the size of the scheme. There is no fixed timeline for receiving funding from Welsh Government (WG) and this forms part of a wider discussion.

Mr Simon Chiffi assured that risks are managed operationally with additional staff resources and more frequent audits.

Risks such as low voltage (LV) infrastructure are being mitigated by identifying external companies that would be available at short notice to address an instant failure.

Additionally, a Computer Aided Design (CAD) Officer is now in place to maintain the schematic drawings.

Tracking is in place of the timeline of applying for funding and the documentation that has been sent to WG.

Ms Wilmshurst noted that it is key that this committee takes assurance of the mitigating factors in place in absence of funding.

Estates and Facilities Advisory Board (EFAB) funding has been awarded for three years in total. EFAB 3 will start shortly.

Applications will be made for funding to address major infrastructure elements in a more expedient way.

Ms Raynsford raised concerns around Risk 1263 – Risk to patient safety due to ongoing issues with vermin (pigeons) at Worthybush General Hospital (WGH). Mr Chiffi assured that the temporary kitchen in WGH has now been decommissioned, and it is hoped that this will improve the situation. Additional remedial actions such as the installation of netting, the removal of shrubbery, deep cleans and regular inspections have also been put in place. Capital bids have been put in for machinery and equipment.

Ms Bethan Lewis raised concerns around the state of the Bro Cerwyn building in Haverfordwest. As there is concern around the security of the building, vermin and the state of the environment Tim Harrison provided feedback, stating that a user group has been set up which has proven useful for communicating with staff. A detailed risk assessment is being created.

It was agreed that this could be discussed as part of the remit of the Health and Safety Sub-Committee.

Ms Marks raised concern around the lifts in BGH and GGH. These are no longer being reported the HSC as risks but there is disruption which has an impact on staff morale.

Mr Carruthers assured that lift repair forms part of the major infrastructure bid to WG. Funding has been approved but is yet to be received. Ms Marks suggested improved communication with

staff around the status of repairs could help alleviate their concerns.

Decision: The Health and Safety Committee:

- REVIEWED and SCRUTINISED the risks included within this report to seek ASSURANCE that all relevant controls and mitigating actions are in place; and
- DISCUSSED whether the planned action will be implemented within stated timescales and will reduce the risk further and/ or mitigate the impact, should the risk materialise.

HSC(24)95

HEALTH AND SAFETY UPDATE REPORT

Mr Harrison introduced the report, thanking Mr Adam Springthorpe and team for creating the papers.

One item in the update report has been escalated from the Trade Union to the Water Safety group around the decommissioning of water coolers primarily in BGH. A response from the Water Safety Group is included in the report, including rationale for the decision.

In response to a query from Ms Marks Mr Chiffi confirmed that water systems in lesser used areas are managed with engineering controls such as regular flushing.

Electrical Awareness Safety training has been proposed to the Mandatory Training Group who have requested more information on how the training would impact the number of incidents before agreeing the course can become mandatory.

The Health, Safety and Security Team is also considering the creation of a dedicated electrical intranet page to highlight the risk posed by electricity and electrical equipment to HDdUHB staff.

Seven Minute Briefings on manual handling took place in quarter three of 2024-2025. In response to a point raised by Mr Iwan Thomas Mr Harrison answered that the seven-minute briefings are also discussed by ward managers in handovers and in meetings meaning the information is shared farther than the 473 members of staff who have accessed the information independently.

Decision: The Health & Safety Committee:

RECEIVED ASSURANCE

- That the HSS Team and Subject Matter Experts are exploring other means of highlighting the risk posed by electricity and electrical equipment to HDdUHB staff.
- That the HSS Team has shared information on both security and manual handling via their seven-minute briefs.
- That concerns raised via Trade Union Representatives have been acknowledged and suitable answers sought to address them.

NOTED:

- That the proposed Electrical Safety Awareness training was not approved by the Mandatory Training Group.

HSC(24)96

RIDDOR: 6-Monthly Update Report

Mr Springthorpe highlighted that the number of incidents reported under RIDDOR in the first six months of 2024-25 are fairly consistent with the previous year.

Manual handling is the leading cause of incidents for this year, which is different to previous years. Deep dives are taking place to determine whether there is a pattern in cases.

Incident numbers are lower in WGH, BGH and PPH relative to the size of these sites.

Mr Springthorpe informed the group of an all-Wales exercise being worked on and offered to share the findings of this to an upcoming HSC meeting.

A report covering the full year is expected in May.

Every incident is reviewed. This is reliant on managers providing timely feedback which means communication in Quality and Safety meetings is key.

Decision: The Health & Safety Committee:

RECIEVED ASSURANCE

- That the Health Board is operating in compliance with the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 2013 (RIDDOR).
- That areas have been identified where improvements can be made which will be raised at directorate Governance / Quality and Safety meetings.

HSC(24)97

Estates Low Voltage (LV) Electricity Compliance Update Report

Mr Chiffi introduced the update report as a six-month update and drew the committee's attention to the assessment section.

86% of the high-risk recommendations and 71% of all audit-related recommendations have been closed.

The risk relating to the availability of up-to-date schematics will be mitigated as there are now two CAD officers in post. As site managers have good knowledge of the sites this risk is currently classed as medium.

The funding process for the Major Infrastructure programme started two years ago. As part of this programme the aging electrical infrastructure will be addressed as a well-known and well-articulated issue.

Mitigations for the aging electrical infrastructure remain a challenge. However, review has taken place of electrical services available across the country that could attend in the case of failure

and generators are in place which can provide power for twenty-four to forty-eight hours.

This is an issue also faced by other Health Boards.

PPH is considered to be the HDdUHB site with the highest risk. Mr Chiffi explained that prices were drawn up for this site two to three years ago of around £7m to address the issues.

Forward planning is included in the design process for all projects to ensure longevity of the service and mitigate future risk.

Ms Marks requested that an update is brought to the Committee around the electrical infrastructure risks. **SC**

WGH received an additional LV audit. The outcome of this audit is low risk and resources are available to address these risks in a short timeframe.

HDdUHB is in the process of transferring to the Audit Management and Tracking (AMAT) system which will enable better tracking of audit recommendations.

Mr Carruthers stated that the purpose of this work is to engage Shared Services and WG to mitigate risk. A paper is being created to support ongoing conversations with WG around the condition of the Estate and the lack of support for a new hospital so far.

Decision: The Health and Safety Committee:

- RECEIVED ASSURANCE that since the previous Estates Low Voltage (LV) Electricity Compliance report a number of recommendations, particularly those high risk in nature have been completed.
- NOTED that the remaining medium and high risk outstanding relate to major infrastructure works and electrical schematics. This progress is evidenced in the recent submission of the AE audit by NWSSP-SES.

HSC(24)98

Fire Safety Audit System (Boris) Update Report

HDdUHB has transitioned over to the Boris system over the past twelve months.

Previous meetings raised concern over whether the system is fit for purpose and the duplication of fire risk assessments in paper and electronic format. Mr Chiffi informed the Committee that this has now been resolved.

HDdUHB and the Boris developers have produced a risk dashboard which is now being used by all Fire Safety Groups.

Mr Chiffi gave an overview of the Extreme Estates Risks tabled in the report highlighting that there has been a significant reduction in the number of risks from around nine hundred in previous reports to around four hundred.

Items in the 'Risk Managed by Site Ops' section are limited by availability of HDdUHB resources. When this is resolved these items will move into the 'Risk Requires Funding' category.

It is key that site-based teams are able to interpret the actions and risks raised by the individual risk assessments. Information is now available to inform staff, and staff are available to support site managers on a day-to-day basis.

In response to a query from Ms Raynsford Mr Chiffi clarified that this work extends to community settings and managed practices as well as secondary care hospital settings. There does not appear to be a significant difference in the number of risks between the different settings however there are some differences in the types of risk.

Mr Carruthers noted that it is key that the Committee is assured of the quality and completeness of risk assessments. Further discussion is needed around how this can be achieved. Fire Safety Advisors routinely rotate which areas they complete fire risk assessments in to compare and ensure the assessments are completed to the same standard.

Increased compliance arrangements are expected from Mid and West Wales Fire and Rescue Service (MAWWFRS) over the next twelve months. A meeting will take place 13 November where it is expected that two further requirements will be raised.

Mr Chiffi provided the following as an example of the **extreme** risks raised by fire risk assessments:

- In the Phase 1 and 2 fire projects in WGH and GGH there is horizontal fire evacuation separation. In these areas there are old holes left by contractors and previous work that mean the thirty to sixty minute fire resistant partition is damaged.

The following is an example of a **high** risk:

- Where ironmongery has been replaced on fire resistant doors this may impact the fire safety of the doors.

The Committee agreed that an update on the Boris system will be brought to HSC every six months with additional updates raised through the HSC Sub Committee and brought to HSC by exception.

Decision: The Health and Safety Committee:

- RECEIVED ASSURANCE from the Fire Safety Audit System Report (Boris) that a system is now in place to manage and escalate fire safety risks from fire risk assessments.
- DISCUSSED the format and frequency of ongoing reporting at this committee.

HSC(24)99

Occupational Health Report (Needlestick Injuries)

Mr Harrison explained that this report details the process to manage sharps incidents and how HDdUHB can learn from them as well as the Health Board's compliance with Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.

Departments involved in these processes include Occupational Health, Emergency departments, Health and Safety, Infection control and the Procurement Specialist Nurse.

A number of incidents are highlighted in the paper which also presents an ongoing trend from previous years of higher numbers of incidents at different times of the year.

Ms Daniels queried whether the reporting of sharps incidents has been raised with the Once for Wales Concerns Management Team. Mr Harrison confirmed that work has taken place over the past two years which has changed how incidents are reported. A checklist has been implemented in HDdUHB for sharps incidents which has not yet been made compulsory. On an All-Wales basis HDdUHB are represented at the Health and Safety Management group and the Datix group.

Ms Daniels added that it may be useful to see the number of opportunities for incidents given the high number of sharps used across the Health Board. Safety devices are being used in some areas across the Health Board. This could be extended further.

The severity of incidents is difficult to quantify due to the multiple factors involved and reporting is dependent on the risk assessment. More work may be needed on the quality of incident investigation.

Additionally, an increase in the number of incidents has been noticed in January and August. Further investigation may be needed to determine what the cause is of this.

Ms Marks suggested that benchmarking may be beneficial to determine how HDdUHB is performing compared to other Health Boards.

Mr Severs advised that there is some work needed to reconvene the Sharps Safety group. There is a review taking place on the structure of committees. It is hoped that this will help maintain oversight and improve connection between the different committees. Mr Jonathan Arthur suggested that staff groups such as Medics and Nurses could be tabulated to help target the approach.

The Committee were not assured by the report and would like to advise the Board that additional work is needed to provide assurance that Sharps safety is being managed effectively.

Decision: The Health and Safety Committee DID NOT RECEIVE ASSURANCE on the status of Sharps Safety across the HDdUHB and agreed that additional work is needed to provide assurance.

Mr Chiffi directed attention to Section 2 of the report and explained that some disciplines are required by Shared Services to have an Approved Person (AP) or Responsible Person (RP) appointed by the Authorised Engineer.

Each discipline also has Competent Persons (CP) who are appointed by the AP/RP.

Each Health Board can only have one AP or RP covering two disciplines. If additional requirements are put in place for APs for Fire and Lifts will impact this as limited resources mean multiple staff already cover multiple disciplines. This is not a statutory mandate but has the potential to become mandatory in future.

The update report also demonstrates positive progress due to the amount of investment put into the Estates compliance team over recent years.

Challenges impacting progress include the limited budget allocated for training. The Compliance team are working with the Financial Control Group to expediate the training procurement process and gain better efficiency with training packages.

Mr Chiffi noted the compliance tracker in the appendix of the update report which demonstrates a good level of compliance with the WHTM.

There are currently no APs in place for High Voltage (HV) however there are HV managers. This is due to the appointment process as staff have been trained but not yet appointed. The situation for Decontamination services is similar with staff already trained but not yet appointed.

The Estates department continue to provide input to other groups in areas that they support but do not have direct responsibility for.

Mr Chiffi clarified that 'bedhead services' referred to in the update report is a term meaning Lift services.

Decision: The Health and Safety Committee is requested to RECEIVED ASSURANCE from the Estates and Facilities Welsh Health Technical Memorandum's (WHTM's) – Governance Arrangements Report, noting the challenges and the improvements across the WHTM audit recommendations.

HSC(24)101

H&S Internal Audit Report

Deferred to the January meeting as awaiting publication of the Internal Audit Report.

HSC(24)102

Maintaining traffic flow outside PPH

Health and Safety concerns were raised in the previous meeting around the unexpected arrival of roadworks, including traffic lights, outside the entrance to PPH. Additionally people protesting the

temporary overnight closure of PPH Minor Injuries Unit (MIU) were in close proximity of the same road.

Protestors have now left the PPH site, and the control group has been stood down. A steering group remains in place to develop options for the MIU.

Ms Marks noted continuing concern as there is a large volume of traffic on this road at peak times. There is one point of entry to the PPH site which is also in proximity of a primary school, care home and links to the M4 motorway.

Conversation has taken place with Carmarthenshire County Council however a response has not been received on the timeline for the removal of the traffic lights.

The group discussed whether this issue sits under the HSC remit or Quality and Safety before agreeing that this affects both the quality of the delivery of service and has the potential to impact health and safety.

The risk assessment will need to be revisited as the protestors are no longer on site. The Ambulance service will also need to be engaged to discuss access for emergency vehicles.

The group agreed to **advise** the Board of concerns around traffic control outside PPH.

Decision: The Committee DID NOT RECEIVE ASSURANCE from the current remedial actions related to the Prince Philip Hospital – Temporary Traffic Control Issues. Concerns about traffic control and Emergency and Staff access to PPH will be raised to the Board.

HSC(24)103

HSC Workplan

The Committee noted the HSC Workplan and made no further comments.

Decision: The Health and Safety Committee NOTED the Committee Workplan.

HSC(24)104

ANY OTHER BUSINESS

No items were raised.

HSC(24)105

MATTERS FOR ESCALATION TO BOARD

The HSC Committee wish to ADVISE Board of:

- Ongoing concerns from the **Occupational Health Report (Needlestick Injuries)** (Item HSC(24)99)
- Health and Safety concerns due to traffic flow outside PPH (Item HSC(24)102)

The updated HSC Terms of Reference will also be tabulated for approval by Board.