

## DRAFT MINUTES OF The Health and Safety Committee MEETING

Date of Meeting: **Tuesday 07 May 2024**  
 Venue: **Microsoft Teams Meeting; Ystwyth Board Room**

Present: Ms Ann Murphy, Independent Member (Committee Chair)  
 Mrs Delyth Raynsford, Independent Member (Committee Vice-Chair)  
 Ms Eleanor Marks, Vice Chair to the Health Board  
 Mr Iwan Thomas, Independent Member  
 Mr Rhodri Evans, Independent Member

In Attendance: Dr Ardiana Gjini, Director of Public Health  
 Mr James Severs, Executive Director of Therapies and Health Science  
 Mrs Joanne Wilson, Director of Corporate Governance and Board Secretary  
 Sharon Daniel, Interim Director of Nursing, Quality and Patient Experience  
 Ms Karen Ryan, Head of Occupational Health  
 Mr Tim Harrison, Head of Health, Safety and Security  
 Mr Rob Elliott, Director of Estates, Facilities and Capital Management  
 Mr Anthony Dean, Staff-Side Representative  
 Mr Simon Chiffi, Head of Operations  
 Ms Urvisha Perez, Audit Wales  
 Mr Adam Springthorpe, Health and Safety Manager  
 Ms Terri Shaw, Senior Environmental Officer  
 Mr Andrew Carruthers, Director of Operations  
 Ms Sam Hussell, Head of Emergency Planning

Minutes Ref.	Item	Action
	<b>GOVERNANCE</b>	
HSC (24) 33	<b>Welcome and apologies</b>  Ms Ann Murphy welcomes all to the meeting and requested that reports are taken as read and if presenters can pull out the key highlights for the Committee to consider.	
HSC (24) 34	<b>Declarations of Interest</b>  There were no declarations of interest	
HSC (24) 35	<b>Minutes of the previous meeting held on 4 March 2024</b>  The minutes of the previous meeting were approved as an accurate record.	

HSC (24) 36 **Matters Arising and Table of Actions from Meeting held on 04 March 2024**

**HSC(23)37:** Mr Harrison provided an update that the violence and aggression posters have been drafted and there are some minor tweaks to make before publication. Mr Harrison shared the posters during the meeting and positive feedback on the bilingual messaging was received by Mrs Delyth Raynsford.

In response to a query from Mrs Raynsford on whether the posters will be shared at community settings and via social media, Mr Tim Harrison advised that he will be linking in with the Director of Communications on next steps and Mrs Daniel will get steer from operational groups on where these will be best placed across the Health Board.

HSC (24) 37 **Health and Safety Annual Report**

The Committee received the Health and Safety Annual Report 2023/24. The Chair passed on a special thanks to Mr Andrew Carruthers, Mr Tim Harrison and the operational teams for the hard work undertaken during the year with fire safety developments and keeping patients as safe as possible during the Reinforced Aerated Autoclave Concrete major incident.

**Decision:** The Committee endorsed the Annual Report 2023/24.

HSC (24) 38 **Corporate Risks Assigned to Health and Safety Committee**

The Committee received the Corporate Risk Report with the four corporate risks assigned to the Committee.

Members noted that risk 1328 will be discussed in detail during the In Committee meeting.

**Decision:** The Health and Safety Committee the Health & Safety Committee received assurance that all identified controls are in place and working effectively. The Committee received assurance that all planned actions will be implemented within stated timescales and will reduce the risk further and/or mitigate the impact if the risk materialises subject to further discussion at In Committee relating to risk 1328.

## **HEALTH AND SAFETY UPDATES**

HSC (24) 39 **Health and Safety Update Report**

Mr Tim Harrison presented the key highlights from the Health and Safety Update Report including the actions undertaken to mitigate the risks relating to cable management for medical devices on beds. Members noted that electrical safety audits are being carried out and training for staff on electrical safety awareness is being organised.

Mr Harrison advised that the verbal feedback inspections undertaken by the Health and Safety Executive (HSE) regarding RAAC and asbestos have been positive. Mrs Sharon Daniel enquired whether a date has been provided for the full report which Mr Harrison could not confirm. Mr Harrison agreed to contact the HSE to ask for a timeline and will share this at the next Committee meeting.

TH

Referring to the electrical safety awareness training, Ms Eleanor Marks asked when this will be arranged and who will be required to undertake the training. In response, Mr Harrison advised that the work is being taken forward via the training management group and would recommend this for all staff if they use electrical appliances. Mr Harrison advised that the training session is informative and will be a one off session and linked to the Electronic Staff Record.

Mr James Severs enquired whether there is a process to inform ward managers and timelines to respond in place for local safety notices (LSN). In response Mr Harrison advised that the LSN'S are issues by the Health and Safety team in response to potential incidents and is local to Hywel Dda. The LSN's are issued to managers directly from the team swiftly if necessary and in collaboration with other departments such as Clinical Engineering for immediate action.

Mr Anthony Dean fed back staff concerns regarding the use of Dif X cleaning agent, with feedback received at the Trade Union Health and Safety Group that a member of staff who had received training twice on how to use the product continues to suffer from watering eyes and nose bleeds. Discussions are underway with the Infection, Prevention and Control Team to explore the reported issues and Mrs Daniel suggested a report is forward planned for the July meeting. Mrs Delyth Raynsford will welcome feedback and enquired whether other Health Boards across Wales who use the Dif X cleaning agent have experience similar issues which can be explored. Ms Karen Ryan commented that if staff have experienced injuries from the use of Dif X cleaning agent, managers should undertake an occupational therapy referral.

TH

Mrs Raynsford noted the internal audit undertaken for the cable management for medical devices in mattresses on wards has taken place for regular users of these devices and suggested that it may be more beneficial to undertake audits for less frequent users. Mrs Raynsford also enquired how many of these devices are in community settings. Mr Harrison commented on reflection that the main reason the audits were carried out on the particular wards is because they have the higher number of devices on site, and could not confirm the number of beds at community settings. It was noted that going forward replacement beds will have built in cable management although not all wards have been issued with these yet. Ms Morgan provided further detail on the unannounced audit checks and

work with staff on cable management and added that this is also being discussed at the Senior Nurse Management team.

In response to a request for assurance that the issues relating to rats across the four sites are being addressed as quickly as possible, Mr Harrison advised that addressing these challenges is a priority for the Estates and Facilities team who have commissioned private contractors. Mr Harrison advised that a more detailed report on the concerns raised at the Trade Union Health and Safety Group will be provided at the July meeting.

TH

Members agreed to advise Board Members of the steps to address issues raised by the Trade Union Health and Safety Group including rats issues and concerns regarding Dif X cleaning agent. The Committee agreed to provide assurance that Suitable steps to manage cable management risks associated with medical devices on beds are being taken on Health Board sites, including Electrical Safety Awareness training and continued electrical safety audits.

It was highlighted by Members that the Health and Safety Committee governance structure requires strengthening, a further discussion will take place between the Director of Therapies and Health Science and Director of Corporate Governance to revise the current reporting arrangements ahead of the next meeting.

JS/ JW

**Decision:** The Committee received assurance that:

- The inspections undertaken by the Health and Safety Executive (HSE) regarding RAAC and asbestos appear to have gone well and findings will be presented at the next meeting);
- That suitable steps to manage cable management risks associated with medical devices on beds are being taken, including Electrical Safety Awareness training and continued electrical safety audits.
- That steps are being taken to resolve issues raised by the Trade Union Representatives and a report will be shared at the next meeting.

HSC (24) 40

### **Fire Safety Management Update**

Mr Rob Elliot presented the Fire Safety Management Update report and provided the key highlights including an update on Phase 2 fire safety work at Worthybush Hospital and Glangwili Hospital.

Members received an update on the fire safety compliance across the Health Board, noting that the Level 3 fire safety training (Fire

Response Team members) has dropped since the last report. This has now been escalated to the Head of Operational Services. Mr Elliot advised that Level 1 training remains steady and Level 2 has increased slightly. Mr Elliot noted a special thank you to Mr Carruthers and the team on promoting training across the Directorates.

Mr Severs asked for clarity on the sort of roles required for the level 4 training in the organisation, and enquired whether a training needs analysis should take place. Mr Robert Elliot advised that the intention is for Level 4 trained staff to be embedded within operational and clinical teams.

The Committee remained concerned regarding the information and follow up of actions contained within the fire risk assessments. Mr Robert Elliot advised that the Committee will receive a detailed report on the fire risk assessments which have been transferred to the new Boris system in July 2024, this will include an overview of the process, the risks (number and level), actions, timescales and responsible managers.

**RE**

**Decision:** The Committee noted and received assurance from the content of the report and the work achieved to strengthen fire safety compliance. It was agreed that a detailed report on risk assessment would be scheduled for the next meeting.

HSC (24) 41

### **Estates Management Safety Review Report**

Mr Rob Elliot verbally updated the Committee that following a number of traffic related incidents on Health Board sites where cars have caused injury or damage Health Board property, a high-level assurance paper has been requested and will be presented to the Committee in July 2024 relating to matters such as traffic management, car parking and signage and provide a targeted action plan to address risks.

**RE**

Mrs Daniel recognised the amount of work required to undertake this review and whether the development of an action plan for the next meeting will be feasible. In response Mr Elliot reiterated that it will be a high-level strategic report and there are improved systems in place which can support the scoping work including drone technology.

**Decision:** The Committee noted the update.

HSC (24) 42

### **Reinforced Autoclaved Aerated Concrete (RAAC) Update Report**

Mr Rob Elliot presented the update report relating to RAAC noting that work is progressing well and according to the programme. The planned works for 2023/2024 have been successfully completed and the 2024/25 programme is now commencing. Mr Elliot advised that the early inspections indicate no deteriorating

RAAC planks so far. Mr Elliot added that senior Management in the Estates team have recently met with a Health & Safety Executive (HSE) inspector at WGH who have undertaken a review of how have approached the RAAC challenge. A significant amount of information has been supplied to the HSE and all questions fully responded to. A further update will be provided to this Committee when any responses are received from the HSE.

RE

Mr Severs felt it would be helpful for a meeting with Mr Elliot to discuss the action plan in more detail including risks and mitigations, and Mr Elliot advised that at the moment the programme is on plan which is a credit to the Estates team and Managers at Withybush Hospital.

**Decision:** The Committee:

- **NOTED** the successful completion of the 2023/24 programme of works.
- **NOTED** the ongoing surveys of Reinforced Autoclaved Aerated Concrete Planks areas in the future and the expectation of further deterioration and further investment being necessary.
- **NOTED** that further updates will be presented at future Health and Safety Committee meetings

HSC (24) 43

### **Estates Low Voltage (LV) Electricity Compliance Update**

Mr Simon Chiffi presented an update report on electricity compliance for low voltage items across Estates, and the progress of the recommendations from the Authorising Engineers (AE) audits.

Mr James Severs sought clarity on the update on page 3 of the report which states 'For the remaining 45% of actions, we forecast 30% will be complete within the next 3-6 months, and within a 12-month period we will have addressed 40% of actions.' In response Mr Andrew Carruthers advised that 95% complete within 12 months means approximately 85 recommendations will have been actioned in 12 months time, against a total of 90. The 5 that remain are more complex and costly.

Mr Chiffi advised that progress on the recommendations from the Authorising Engineers (AE) audits should be completed within the next six months and the Committee requested an update report in November 2024 noting the expectation that these outstanding actions will have been implemented within this timeframe.

SC

**Decision:** Limited assurance was received on the progress of recommendations and an update report was requested for November 2024.

HSC (24) 44

### **CONTEST 6-Month Update Report**

Mr Tim Harrison presented the CONTEST six month update report and highlighted the latest developments in respect of Martyn's Law, which will require owners and operators of venues and public spaces to put in place measures to keep the public safe from potential terrorist attacks. Mr Harrison advised the Committee that indication has been received that that NHS hospitals and premises used for the provision of health care will be a qualifying activity for this Bill to apply.

Mrs Daniel enquired whether an implementation date has been provided for the Bill yet and Mr Harrison advised that this has not yet been confirmed.

**Decision:** The Committee noted the update however assurance was not received on the Health Board's preparedness for the implementation of Martyn's Law and it was agreed that an update report would be shared at the next meeting.

**TH**

HSC (24) 45

### **WHTM (Welsh Health Technical Memorandums) 6-Monthly Update Report**

Mr Simon Chiffi presented a report which provides the 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).

Cllr Evans drew attention to an overdue WHTM in Appendix 2 of the report which states that an operational procedure manual should be prepared for all high voltage documentation and requested a progress update. In response Mr Chiffi advised that where a WHTM is behind schedule the tracker needs to be updated and apologised for this omission.

**SC**

Mrs Daniel enquired whether there is a benchmarking or a comparator for WHTM 01 Decontamination for other WHTMS and in response Mr Chiffi confirmed that work is underway to develop benchmarking with national shared partnership services.

Ms Eleanor Marks sought clarity on the health and safety risks for the Health Board if WHTM's are not complied with and requested this comes through more clearly for the next report in six months time.

**SC**

**Decision:** The Committee agreed to advise Board that the WHTM (WHTMS) require further improvement work however noted the vast amount of work underway.

## HEALTH AND SAFETY REGULATIONS

HSC (24) 46

### RIDDOR 6-Monthly Update Report

Mr Adam Springthorpe presented the key highlights of the RIDDOR six monthly update report.

Cllr Evans noted that Bronglais Hospital have a lower number of reported RIDDOR incidents across the Health Board and asked what steps will be taken to address this. Mr Springthorpe advised that this will be raised via the Directorate Quality and Safety Group meeting. Mr Springthorpe added that the Health and Safety team are proactive in attending wards to meet with staff and share a helpful guidance document and RIDDOR flow chart.

Mrs Raynsford raised concern regarding a significant decrease in compliance since last year's reporting within Scheduled Care and Mental Health and Learning Disabilities and enquired whether this is being investigated in more detail. In response, Mr Springthorpe agreed however added that the numbers are generally low in these areas. Targeted work has taken place with Mental Health and Learning Disabilities however Mr Springthorpe noted the figures have not improved following these meetings therefore this will be picked up directly with the Directorate. Mrs Daniel proposed that this is picked up through the revised operational governance structure at the IQFPD meeting to ensure these discussions are taking place on a wider scale.

Ms Eleanor Marks raised concern regarding the upward trend for violence and aggression, manual handling and trips and falls related reported incidents, and enquired whether there are cultural issues and requirement for a leadership role to improve quality for staff in these areas. Ms Marks also proposed that these incidents are also picked up via the IQFPD meetings. In agreement, Mrs Daniel added that while it is positive in terms of improvements in the reporting culture it is a priority to address the growing trend in terms of incidents.

**Decision:** The Committee received assurance from this report that the Health Board is operating in compliance with the RIDDOR regulations.

## POLICIES AND PROCEDURES FOR APPROVAL

HSC (24) 47

### Policy 258: Waste Management Policy

Terri Shaw presented Policy 258 Waste Management Policy for approval.

Mrs Sharon Daniel highlighted that the policies are incredibly large



documents and whether a summary document with the key principles could be included with key matters for awareness, and a **TS/CJ** link to further detail if needed.

**Decision:** The Committee APPROVED the policy.

HSC (24) 48

**Policy 403: Water Safety Policy**

The Committee received the Water Safety Policy noting minor revision to the responsibilities section and legionella reporting process.

**Decision:** The Committee APPROVED the policy for 3 years.

HSC (24) 49

**Policy 1155: Critical Threat Level Response Framework**

**Decision:** The Committee received and APPROVED the extension for the Policy.

**MATTERS FOR ESCALATION TO BOARD**

Contained within the Health and Safety Update report to Board.

**DATE AND TIME OF NEXT MEETING**

Tuesday 9 July 2024, 9.30-11.30am

**Date and Time of Future Meetings**

Tuesday 10 September 2024, 9.30am-11.30am

Tuesday 12 November 2024, 9.30am-11.30am

Tuesday 14 January 2025, 9.30am-11.30am

Tuesday 4 March 2025, 9.30am-11.30am