

**APPROVED MINUTES OF THE HEALTH AND SAFETY
COMMITTEE MEETING/ COFNODION IECHYD A DIOGELWCH
CYFARFOD PWYLLGOR**

Date of Meeting: **09:30, Tuesday 10 September 2024**
Venue: **Ystwyth Boardroom and Microsoft Teams Meeting**

Present: Ms Ann Murphy, Independent Member (Committee Chair)
Ms Eleanor Marks, Vice Chair to the Health Board
Iwan Thomas (Hywel Dda UHB - Independent Board Member)

In Attendance: Mr James Severs, Executive Director of Allied Health Professions and Health Science
Mr Adam Springthorpe, Health & Safety Manager
Ms Bethan Lewis, Interim Assistant Director of Public Health
Ms Cathie Steele, Acting Assistant Director of Nursing, Assurance and Safeguarding
Dr Jonathan Arthur, Deputy Director of Health Science
Mr Anthony Dean, Staff-Side Representative
Mr Keith Jones, General Manager
Mr Simon Chiffi, Head of Operations
Ms Charlotte Wilmshurst, Assistant Director of Assurance and Risk
Ms Karen Ryan, Head of Occupational Health
Ms Jeni Bryant, Manual Handling Coordinator
Mr Jason Wood, Major Capital Development Manager, Estates
Ms Claire Evans, Committee Services Officer (minutes)

| Minutes Ref. | Item | Action |
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GOVERNANCE

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| HSC(24) 69 | Welcome and apologies | |
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The Chair, Ms Ann Murphy welcomed all to the meeting.

Apologies for absence were received from:

- Mrs Delyth Raynsford, Independent Member (Committee Vice-Chair)
- Cllr Rhodri Evans, Independent Member
- Ms Chantal Patel, Independent Member
- Mr Andrew Carruthers, Chief Operating Officer
- Dr Ardiana Gjini, Executive Director of Public Health
- Mr Rob Elliott, Director of Estates, Facilities and Capital Management
- Mrs Joanne Wilson, Director of Corporate Governance/Board Secretary
- Mrs Sharon Daniel, Interim Director of Nursing, Quality and Patient Experience
- Mr Tim Harrison, Head of Health, Safety and Security

- Frances Howells, Head of Infection Prevention

HSC(24) 70

Declarations of Interest

There were no declarations of interest.

HSC(24) 71

Minutes of Previous Meeting held on 09 July 2024

The minutes of the previous meeting were approved as an accurate record, with the correction of Dr Jonathan Arthur's job title to "Deputy Director of Health Science".

HSC(24) 72

Matters Arising and Table of Actions from Meeting held on 09 July 2024

An update was provided on the Table of Actions from the meeting held on 09 July 2024, with confirmation received that all actions were complete.

HSC(24) 73

Corporate Risks Assigned to HSC

Security Risk 1328 has now been closed and replaced with Risk 1860: Management of Violence and Aggression Risks, and Risk 1861: Security Management Infrastructure and Security Management systems. Due to the sensitive nature of these risks, further discussion took place In-Committee.

Decision: The Health & Safety Committee:

- TOOK ASSURANCE that all identified controls are in place and working effectively.
- TOOK 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.
- CHALLENGED where assurances are inadequate.

HSC(24) 74

Health and Safety Governance Review

Mr James Severs introduced the Health and Safety Governance Review Report which addresses the challenges faced in providing appropriate assurances to the Health and Safety Committee and to Board.

A review of the reporting structure has taken place in order to identify suitable reporting mechanisms outside of the Committee where work being undertaken, and any issues within the Health Board can then be reported/escalated to the Committee.

A new Health and Safety Sub-Committee will be created to provide this line of reporting. Several groups will feed into the Sub-Committee, including some groups currently reporting to the Quality, Safety & Experience Committee.

A draft term of reference (ToR) was submitted to the Committee. Mr Adam Springthorpe highlighted that neither he nor Mr Tim Harrison had not been included in the membership list of the ToR.

Mr Severs informed the Committee that a final version of the ToR would be drafted and agreed by the Health & Safety Sub-Committee and brought to Committee for approval in November.

Ms Bethan Lewis highlighted that when referring to the Emergency Planning withing the ToR, the correct terminology should be 'emergency preparedness, resilience and response', as it not only encapsulates planning.

Decision: The Health & Safety Committee:

- CONSIDERED and APPROVED the revised Health and Safety governance arrangements proposed within Hywel Dda University Health Board (HDdUHB).

HEALTH AND SAFETY UPDATES

HSC(24) 75

Staff/Patient Story - DEFERRED

This item was deferred to a future meeting.

HSC(24) 76

Health and Safety Update Report

Mr Springthorpe introduced the Health and Safety Report which included an update on progress demonstrated towards compliance with the Control of Vibration at Work Regulations 2005 and the Work at Height Regulations 2005.

Mr Springthorpe has liaised with the Head of Culture and Workforce Experience regarding concerns raised by Trade Unions relating to mechanisms being in place for dealing with allegations of bullying and/or harassment in the Health Board. A representative from the Workforce team will also be invited to attend a Trade Union Group meeting in order to discuss concerns.

A further concern by Trade Union members related to incident location coding on Datix outlined that there are a number of user guides for using Datix available for staff to use.

Following a query from the Chair on the term 'toolbox talk' training, it was explained that a short training guide was available for use during team meetings to provide basic guidance for infrequent ladder users who do not require full training.

Mr Severs asked whether staff who require training, such as control of vibration or working from height, are monitored to ensure training is completed. He asked whether the Health Board has a list of legislation requirements that is aligned to staff

members' work mandate and training requirements to ensure compliance.

Mr Springthorpe responded that information is not available centrally. He explained that teams who are high users of such equipment, for example the Estates team, have their own full training needs analysis. However, there is nothing similar in place for the wider workforce.

Mr Severs suggested that under the new governance review, the Facilities and Estates team could undertake this as a piece of work to ensure compliance and provide assurance to the Committee.

It was agreed to provide a report on training compliance to Committee during Quarter 4 of 2024/2025. SC

Responding to Ms Charlotte Wilmshurst's query on whether the Working at Height Working Group referred to in the report would form part of the new governance structure, Mr Springthorpe commented that it was not an official group and was intended as only a Task and Finish Group.

Mr Severs recommended reviewing the operational governance and how it feeds into the Committee structure. This could be addressed by the new Health and Safety Sub-Committee.

Decision: The Health & Safety Committee:
TOOK ASSURANCE

- That positive progress has been demonstrated towards compliance with the Control of Vibration at Work Regulations 2005 and the Work at Height Regulations 2005.
- That concerns raised via Trade Union Representatives have been listened to and relayed to the appropriate teams for due consideration.

HSC(24) 77

Fire Management Update Report

Mr Jason Wood presented an overview of the Fire Safety Management Update Report.

A business case for Phase 2 of the fire safety work programme in Withybush Hospital (WGH) is currently being drafted. Discussions have taken place with Welsh Government and the NHS Wales Shared Services Partnership - Specialist Estates Services (NWSSP) regarding how to procure Phase 2.

Completion for Phase 1 work at Glangwili Hospital (GGH) has now been extended further, from 31 July 2024 to 31 January 2025.

Phase 2 work in GGH will follow the same procurement route as WGH.

A programme business case for Bronglais Hospital was submitted 12-18 months ago, however, due to changes in procurement and the scope of the work it is likely it will require refreshing over the course of the next few months and resubmitting to Welsh Government. The initial cost included within the business case was approximately £32m, however it is expected that that will decrease significantly based on the revised scope of work.

Prince Philip and South Pembrokeshire Hospitals have received Estate Funding Advisory Board (EFAB) funding, and work is currently underway to address some of the deficiencies identified at those sites.

It was acknowledged that Phase 1 work underway in GGH is causing some disruption, particularly in terms of noise. Staff are being advised of work via Senior Operational Liaison Officer, Laura Owens.

Members discussed ways to inform outpatients of possible disruption ahead of their visits to the sites, such as including a message in appointment letters and text messages. **Mr Keith Jones agreed to speak with his team to explore the practicalities/ possibilities of including that message in patient communications.**

KJ

Decision: The Health and Safety Committee:

- ACKNOWLEDGED and TOOK ASSURANCE from the content of this report and the work achieved to strengthen Fire Safety Compliance.
- NOTED that further updates will be presented at future Health & Safety Committee meetings.

HSC(24) 78

Fire Safety Training Update Report

Mr Simon Chiffi introduced a report on fire safety training arrangements and compliance within the Health Board. The report provides a detailed overview of the current situation with a breakdown of each level of training.

As of 14 August 2024, both Level 1 and Level 3 figures across the organisation has increased and remains above the Mid and West Wales Fire and Rescue Service target of 85%. However, we fall short of this target for Level 2 and 3 for sites where we have been served Fire Enforcement Notices. Work still needs to be done to ensure this target is met.

In order to reach the required numbers of staff trained at Level 4 and 5 it is hoped that these courses could be made mandatory for certain staff (bands 7 and above) through discussions with colleagues in the workforce team.

Mr Severs commented that he felt the report provided more assurance than previous reports and found the inclusion of a breakdown of training levels helpful. Consideration on how each

acute site can improve their compliance for training Levels 1, 2 and 3, and the appropriate route to obtain the Health Board's position on making training Levels 4 and 5 mandatory should be included. It was agreed that **Mr Chiffi would liaise with the Assistant Director of People Development regarding making these mandatory, and for discussion at the Strategic People Planning and Education Group (SPPEG).**

SC

Mr Chiffi offered a suggestion that he could liaise with the Communications and Engagement Director regarding ways to communicate to staff and public about the positive work undertaken with the fire and rescue service, and the investment made to improve fire safety within the Health Board.

Decision: The Health and Safety Committee:

- ACKNOWLEDGED and TOOK ASSURANCE from this report that the arrangements we have in place for fire safety training are robust and effective.
- NOTED the suggested changes we are proposing to strengthen both L4 and L5 training categories.

HSC(24) 79

Fire Safety Audit System (Boris) Update Report

Mr Chiffi introduced a report initial reporting information made available by the new Boris system.

Mr Chiffi outlined that there have been concerns and challenges in relation to the system. Although the update reported a positive position, the system is currently behind with the dashboard information. Fire risk assessments have been duplicated on the system, which has resulted in the number of risks and actions doubling. Mr Chiffi and colleague Paul Evans are working closely with the system developers to reconcile this issue.

Mr Severs commented that it was disappointing that the Health Board has commissioned a tool which continues to not work properly. He requested a discussion with Mr Chiffi regarding the contract for the system. Ms Severs queried when would the system be fully working.

Mr Chiffi responded that the system was endorsed by NWWSP-SES as a market leader, and the expected it to be fully running by the next Health and Safety Committee meeting in November.

Mr Severs stated that he would work with Mr Chiffi in relation to improvements to reports submitted to the Committee, in terms of improvement to assurance provided.

An update would be brought to the November Committee meeting on the Boris system to outline whether the system is fully working.

SC

Decision: The Health and Safety Committee was UNABLE to TAKE ASSURANCE from the report that a system is now in place

to manage and escalate fire safety risks from fire risk assessments, as the system was not working due to technical issues.

HSC(24) 80

RAAC Update / RAAC Amber review plan, including review of Primary Care premises

Mr Chiffi presented an update on work to manage the ongoing risks of Reinforced Autoclave Aerated Concrete (RAAC) at Health Board sites.

A large amount of work has been undertaken at Withybush Hospital (WGH) and the delivery programme for 2024/2025 continues. Work will commence this month to decommission the existing temporary kitchen at WGH and move back to the main kitchen.

The Health and Safety Executive (HSE) provided a positive report following their visit. This was shared with the Committee.

Ms Marks commented that she had visited WGH the day before and was very impressed with the areas where work has been completed.

Mr Jones highlighted that all work achieved had been a joint effort between the Estates and Clinical Teams.

Mr Severs suggested scheduling a meeting with himself, Mr Chiffi and the Estates team to thank them on behalf of the Committee.

Mr Chiffi assured the Committee that an asbestos specialist Robin Smith has drafted an action plan for dealing with asbestos issues (which was outlined in the letter from HSE).

The Chair added that the Bronze Group would write individual letters to staff involved in the RAAC work within the next month or two to thank them.

Decision: The Health and Safety Committee:

- NOTED the support funding from Welsh Government for the 2023/24 and 2024/25 Financial Years and the delivery to programme of these works.
- NOTED the operational control measures established to monitor and manage RAAC on an ongoing basis.
- NOTED that further updates will be presented at future Health and Safety Committee meetings.

HSC(24) 81

Diff X Cleaning Agent Assurance Update Report

Mr Springthorpe presented an update report on the use of the Diff X Cleaning Agent product.

He outlined that as part of the four-step plan to improve education around the new product, Consultant Practitioner Infection

Prevention (Tracey Gauci) has been attending all Professional Nursing Forums within the Health Board to inform staff about the new product.

Outstanding training within GGH and BGH was due to either long term sickness or maternity leave. Therefore, in real terms, 100% of staff in work have attended training. Unfortunately, WGH was behind with 75% of staff trained, although some of that figure may be due to absences. Some staff who attended training early in the process are now being retrained.

A meeting with Trade Unions and Ms Gauci took place, however several members were unavailable. Therefore, Ms Gauci agreed to attend a further meeting on 15 October.

It was highlighted that only one extra incident has been added to the Datix system since July. It is unclear if there have been any further issues, if so, they have not been reported via Datix

Mr Severs noted the importance of being data driven rather than narrative driven within reports. He asked whether there was a correlation between incidents and training. He also outlined the need to evidence that training is taking place in WGH.

Mr Chiffi responded that he holds four to six-weekly conversations with members of the domestic, catering facilities, and other teams from WGH and GGH, and has advised that any issues relating to Diff-X are reported on Datix immediately.

It was agreed that further updates on Diff-X use will be part of business-as-usual reporting within the Control of Substances Hazardous to Health (COSHH) 6-monthly updates.

Decision: The Health and Safety Committee TOOK ASSURANCE that the four-step plan introduced in July is progressing to improve education around the new product and to continue to encourage the reporting of adverse events to allow for suitable and sufficient investigation into causation.

HSC(24) 82

Occupational Health Report (Needlestick Injuries) - DEFERRED

This report was deferred to the November Committee as it was not made available prior to the current meeting.

HEALTH AND SAFETY REGULATIONS

HSC(24) 83

Bariatric Compliance (Manual Handling Operations Regulations 1992) Update

Ms Jeni Bryant introduced a report providing an update on the Health Board's compliance with the Manual Handling Operations

Regulations 1992, specifically in relation to people with higher body weights (historically known as bariatric patients).

Since the previous report to Committee, actions 3 and 4 in the action plan have been completed. It was noted that target dates for actions 1 and 2 (marked as amber) in the action plan were incorrect and would be amended from April 2024.

Mr Severs commented that he would expect all Healthcare staff to have appropriate knowledge, skills and experience for safe moving and handling. There is a need to consider whether staff have the skills required and whether their training requires further consideration. This would then allow Ms Bryant, as an expert in her field, to undertake the assurance and compliance through audit. He suggested discussing this further outside of the meeting. Mr Severs would be happy to work with Mr Springthorpe and Mr Harrison to support Ms Bryant with that work.

Ms Bryant commented that while some staff may have appropriate training, issues can arise such as waiting for the appropriate equipment to be delivered. **Ms Bryant agreed that she would liaise with Mr Springthorpe and Mr Harrison regarding training requirements for staff, and also to liaise with the manual handling team to consider incorporating bariatric care into current manual handling training.**

JB

Mr Springthorpe added that resources available for guidance to staff, on the manual handling website, have improved greatly. He advised that having an additional audit resource to Ms Bryant could potentially save money, as there could be issues of not using bariatric equipment efficiently. Investment now could be an example of spend and save.

An updated report would be brought to the January 2025 Committee meeting, to include evidential data on regulations compliance in order to provide assurance to Committee.

JB

Decision: The Health and Safety Committee was UNABLE to TAKE ASSURANCE from the progress made to date to reach compliance against the Manual Handling Operations Regulations 1992 (MHOR), specifically in relation to people with higher body weights, due to a lack of evidence within the report to demonstrate compliance.

POLICIES AND PROCEDURES FOR APPROVAL

HSC(24) 84

010 Health and Safety Policy

An updated health and safety policy was brought to Committee for approval. There were no significant changes to the policy.

Decision: The Health and Safety Committee APPROVED the updated policy (010) – Health and Safety Policy.

HSC(24) 85 **ANY OTHER BUSINESS**

No other business was discussed.

HSC(24) 86 **MATTERS FOR ESCALATION TO BOARD**

All matters for escalation to the Board were discussed within the agenda items and will be highlighted within the Committee update report to the Board.

HSC(24) 87 **DATE AND TIME OF NEXT MEETING** - Tuesday 14 January 2025, 9.30am -11.30am

Date and Time of Future Meetings

Tuesday 4 March 2025, 9.30am -11.30am