

APPROVED MINUTES OF THE HEALTH & SAFETY ASSURANCE COMMITTEE COFNODION CYMERADWYO O PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

Date and Time of Meeting:	2.15pm, 2 nd November 2020
Venue:	Boardroom, Ystwyth Building, St. David's Park, Carmarthen/ MS Teams

Present:	Mrs Judith Hardisty, HDdUHB Vice Chair (Committee Chair) (VC) Ms Ann Murphy, Independent Member (Committee Vice-Chair) (VC) Mr Mike Lewis, Independent Member (VC) Mrs Delyth Raynsford, Independent Member (VC) Mr Owen Burt, Independent Member (VC) Mr Simon Hancock, Independent Member (VC)
In Attendance:	Mrs Mandy Rayani, Director of Nursing, Quality & Patient Experience Mr Andrew Carruthers, Director of Operations (VC) Mrs Joanne Wilson, Board Secretary (VC) Ms Ann Taylor-Griffiths, RCN/Joint Chair HDdUHB Staff Partnership Forum/Chair of Ceredigion County Partnership Forum (VC) Mr Rob Elliott, Director of Estates, Facilities and Capital Management (VC) Mr Tim Harrison, Head of Health, Safety and Security (VC) Ms Karen Richardson, Corporate & Partnership Governance Officer (Minutes)

	INTRODUCTIONS AND APOLOGIES FOR ABSENCE	Action
HSAC (20)45	The Chair, Mrs Judith Hardisty welcomed all to the meeting.	
	Apologies for absence were received from. <ul style="list-style-type: none"> Ms Alison Shakeshaft, Director of Therapies and Health Science 	

HSAC (20)46	DECLARATIONS OF INTERESTS	
	No declarations of interests were made.	

HSAC (20)47	MINUTES AND MATTERS ARISING FROM THE MEETING HELD ON 7TH SEPTEMBER 2020	
	RESOLVED - that the minutes of the meeting of the Health & Safety Assurance Committee (HSAC) held on 7 th September 2020 be approved as a correct record.	

HSAC (20)48	TABLE OF ACTIONS FROM THE MEETING HELD ON 7TH SEPTEMBER 2020	
	An update was provided on the Table of Actions from the meeting held on 7 th September 2020, with confirmation received that all actions were complete, with the following noted: <ul style="list-style-type: none"> HSAC (20)33 Violence and Aggression (V&A) Update – with regard to the Prevention and Management of Violence and Aggression (PAMOVA) 	

	<p>training, Mrs Mandy Rayani advised that training models are being explored, and confirmed that a meeting had taken place the previous week with the Director of Finance to discuss funding options to progress this. However, since this meeting, a vacancy has arisen within the Health & Safety Team, and it has therefore been agreed to undertake a training needs analysis before agreeing an appropriate way forward. For assurance purposes, the preferred option will be presented to a future HSAC meeting.</p>	TH
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HSAC (20)49	HEALTH AND SAFETY EXECUTIVE ENFORCEMENT ACTION UPDATE	
	<p>Mrs Rayani presented the Health and Safety Executive (HSE) Enforcement Action Update report. For Members assurance, it was confirmed that each action is discussed in detail at the regular Control Group meetings, with the group taking a cautious approach in agreeing to close them.</p> <p>Mr Tim Harrison advised that whilst the HSE have extended the compliance dates, there are a number of Improvement Notices and Material Breaches due for completion by 27th November 2020 and 29th January 2021.</p> <p>In response to a query from Cllr. Simon Hancock relating to the action plans, Mr Harrison advised that correspondence has been issued to the HSE to request a further meeting and confirmed that the team would request that the HSE review these at their next meeting.</p> <p>Given the subject matter involved, Cllr. Hancock anticipated that an Equality Impact Assessment (EqIA) would have been required to accompany the report. Mrs Rayani understood that given the breadth of the report, an EqIA screening would be implicit within each policy rather than aligned to the HSE actions, however agreed to confirm that, where appropriate, these have been completed.</p> <p>Whilst welcoming the positive progress made to date, Mr Owen Burt enquired whether the team is confident that the actions would be completed by the revised deadlines. Mr Harrison responded that the team has a degree of confidence that these deadlines will be achieved. It was noted that since writing the report, a number of actions relating to <i>IN4 - Moving & Handling of Health Records in Witherby General Hospital (WGH)</i> could now be noted as green. In addition, the action regarding the stair lift to transport health records would be completed, once the lift is adapted to hold a basket for their transportation. Mr Harrison provided further clarity on action <i>IN5 - Moving & Handling of Laundry at GGH</i>, in regard to risk assessments. Whilst risk assessments have previously been undertaken, the HSE requested a review of these utilising the Rapid Entire Body Assessment (REBA) tool which is approved by the HSE, and Mr Harrison confirmed that these should be completed by 13th November 2020.</p> <p>Mr Rob Elliot added that there are now adequate plastic cages in the system for use by laundry staff and that steel ones are only used by exception.</p>	MR

	<p>In relation to the action for boxes to carry medical records, Mrs Hardisty suggested that ensuring an adequate supply should be undertaken by individual managers. In agreeing, Mr Elliott confirmed that a Task and Finish Group had been established to confirm their requirements, and that going forward this responsibility should sit with the department and not the estates directorate.</p> <p>Mrs Joanne Wilson requested confirmation that the revised dates match the audit tracker to ensure that the Health Board is tracking the actions correctly. Mr Harrison undertook to confirm that this is the case and provide an update to the risk and assurance team within the next week.</p> <p>In response to a number of queries relating to <i>IN3 - V&A in WGH A&E</i>, Members noted that:</p> <ul style="list-style-type: none"> the target date has been set as 2021 due to the previously noted completion of a PAMOVA training needs analysis. Whilst good progress has been made, until this is completed, it is not possible to confirm the date in the action plan. examples of the different and inappropriate forms of V&A experienced by staff in A&E during the COVID-19 pandemic were highlighted. For assurance purposes, Members noted that in the absence of face to face V&A training, online training is supporting staff in these areas. enhanced support for staff including the Portering team has been provided by the H&S team, however it is recognised that more training is required for front line staff. there may be a requirement to issue a press release to the public reminding them that V&A against Health Board staff will not be tolerated. <p>In response to an observation from Mr Mike Lewis relating to the mismatch of figures contained within the tables on page 2 of the report, Mrs Rayani proposed that given the progress that has been made since writing the report, the table should be updated and reissued to Members. It was further proposed that the progress should be noted within the HSAC update report to Board, in order to provide further assurance regarding the progress made to date.</p> <p>In summary, Mrs Hardisty welcomed the progress made to date, and thanked Mrs Rayani and the Health, Safety and Security Team for their continued work towards compliance with the notices served by the HSE.</p> <p>The Committee RECEIVED ASSURANCE from the Health and Safety Executive Enforcement Action Update that the necessary work is being undertaken towards compliance with the notices served against the Heath Board by the Health and Safety Executive.</p>	<p>TH</p> <p>TH</p> <p>KR</p>
<p>HSAC (20)50</p>	<p>HEALTH AND SAFETY REPORT</p> <p>Mr Harrison presented the Health and Safety Report outlining the activity of the team during the previous 6 months, advising that the recent additional capacity had served to progress the requirement to undertake environmental audits in all departments.</p>	

It was noted that following each audit, an Estates and a Service Management action report is prepared, outlining any key themes identified with predetermined timeframes for completion. Further work has included a review of Sharps Incidences during the previous 12 months, to understand the rationale for these by Directorate. A significant project during the next few months will be the roll out of the Skyguard devices for lone workers.

In response to a query from Ms Ann Taylor-Griffiths in relation to the recent reduction in V&A incidences, Mr Harrison advised that whilst this may be due to lower attendances at hospital sites due to COVID-19, the data will be reviewed to establish any trends. Mr Burt commented that bar graphs would enable a clearer interpretation of the data for Members. It was noted a revised report would be produced for the next meeting.

In response to a query from Mr Lewis, Mr Harrison confirmed that regular meetings take place with Heads of Departments to discuss progress relating to outstanding actions. However, it is recognised that some actions relate to infrastructure and as such are outside of their control. Mrs Rayani commented that the work of the Control Group is fostering a change of culture across the organisation and that managers are starting to take ownership of their actions to progress. However, it should be recognised that cultural changes take time to become embedded.

Referring to the additional resources within the Heath, Safety and Security Team, Cllr. Hancock enquired as to the practical support staff are receiving following these appointments. Mrs Rayani advised that previously there had been only one case manager across the Health Board to provide support to staff following a V&A incident; this has improved with the additional staff in place. Further to this, engagement with the police has improved, and where incidents proceed to a prosecution, staff will be offered additional support by the case manager. Mr Harrison added that from a practical perspective, the presence of the team at ward level is increasing confidence for staff that support is available.

Given the increased workload of community staff during COVID-19, Ms Taylor-Griffiths enquired whether this cohort of staff would be included in the roll out of Skyguard devices. In response, Mr Harrison confirmed that the issue of the devices would be undertaken on a risk assessment basis and that for assurance purposes, Primary Care and community staff would be included.

Members noted the key themes identified following the environmental audits of departments, in particular the challenges relating to infrastructure. Members further recognised that funding constraints may inhibit progress, however accepted that HSAC are not in a position to provide a resolution.

In summary, Mrs Hardisty welcomed the report, which provides a level of confidence that an increased number of staff will report incidents in the knowledge that adequate support is now available to take the complaint forward.

The Health and Safety Assurance Committee **RECEIVED ASSURANCE** from the work undertaken by the Health and Safety Team, as outlined within the Health and Safety Report.

HSAC (20)51	UPDATE ON FIRE ENFORCEMENT NOTICES AND LETTERS OF FIRE SAFETY MATTERS AT WITHYBUSH GENERAL HOSPITAL (WGH) AND GLANGWILI GENERAL HOSPITAL (GGH)	
	<p>Members received an update on progress relating to the Fire Enforcement Notices and Letters of Fire Safety Matters at Withybush General Hospital (WGH) and Glangwili General Hospital (GGH). Mr Rob Elliott advised that a productive meeting between the Health Board, Welsh Government and the Mid and West Wales Fire & Rescue Service (MWWFRS) took place on 2nd October 2020. During the meeting, new timelines were agreed in principle as outlined within the report, however due to MWWFRS workforce challenges, correspondence to this effect is still awaited. Following a phone call earlier in the day (02.11.2020), MWWFRS has confirmed that the new notices are now being prepared, and the Health Board should receive these by the end of the week.</p> <p>Mrs Hardisty thanked the team for the progress made to date and proposed that for assurance purposes, once the correspondence is received from the MWWFRS, it should be shared with Members and with a request that Mr Elliot fully updates the relevant sections of the audit tracker with the risk and assurance team</p>	RE
	<p>The Committee NOTED:</p> <ul style="list-style-type: none"> the current progress against the Fire Enforcement Notices and Letters of Fire Safety Matters outlined within the report. the revision to all Enforcement Notices/Letters of Fire Safety Matters expected from MWWFRS. 	
HSAC (20)52	FIRE SAFETY AUDIT SYSTEM REPORT 2019/20	
	<p>Mr Andrew Carruthers presented the Fire Safety Audit System Report 2019/20, advising that all NHS Boards in Wales are mandated by Welsh Government (WG) to submit an annual fire audit. However due to COVID-19, this year's submission has been delayed. The audit provides WG with an overview of each Health Board's current position and identifies areas for improvement.</p> <p>In response to a query raised by Mrs Hardisty around the definition of 'in-patient facilities', Mr Elliott clarified that when the audit states in-patient facilities, this will include the whole of the site and not only the patient bedded area, in addition to 25% of all other areas.</p> <p>Referring to the '25% of all other areas', Mr Burt enquired whether WG provide guidance on which areas to include within the audit. Mr Elliott responded that it is a decision for each Health Board which areas to include, and for assurance purposes confirmed that a different area is chosen each year.</p> <p>Whilst recognising that this process is outside of the control of the Health Board, Mrs Wilson commented that the outcome does not align to a number of the findings within the Fire Safety Governance Review and proposed Mrs Charlotte Beare discuss this matter with the Director of Estates, Facilities and Capital Management outside of the Committee</p>	CB/RE

	meeting. Mrs Hardisty echoed Mrs Wilson comments, suggesting that this process does not provide HSAC with an assurance on fire safety following the review.	
	Health & Safety Assurance Committee NOTED the update on the Fire Safety Audit System Report 2019/20.	

HSAC (20)53	RISK 813 - FIRE SAFETY MANAGEMENT	
	<p>Mr Andrew Carruthers presented Risk 813 - Fire Safety Management Report, outlining the ongoing fire safety challenges and the investment plans which have now been established. Mr Carruthers advised that discussions have also taken place at Executive Team meetings to agree routine actions in order to mitigate the risk going forward.</p> <p>Mr Elliott advised that the report provides the background to the risk and the mitigations taken given the lack of available resources and the age and condition of the Health Board's estate. The lack of fire safety ownership at local hospital management and operational levels has been recognised, and in order to mitigate this, the team involved has increased engagement with on-site visits, which has increased departments understanding of their responsibilities to manage their own area. Mr Elliott confirmed that whilst discussions have taken place regarding a reduction in the current risk score of 15, it has been agreed that once the capital schemes have been completed, this may be possible.</p> <p>Members acknowledged the link between this risk report and the previous Fire Safety Audit System Report.</p> <p>Mrs Hardisty proposed that once the Board to Floor (Patient Safety) WalkRound Visits are resumed, background information on the specific areas should be provided to Independent Members (IMs). This information would assist IMs when querying Health and Safety and Fire Safety management during their visits. In response, Mrs Rayani confirmed that this is being progressed by the Head of Quality and Governance to ensure that IMs receive a briefing relating to a specific clinical or non-clinical area ahead of their visit. This could also include outstanding actions from external regulators.</p> <p>Given that a risk score of 15 is significant, Mrs Wilson advised that for the Board to accept this score, it will require an assurance on when it is likely to reduce and details of the mitigations that will enable this to occur. Mrs Wilson suggested that a review be undertaken once the new management training has been completed. Although, £850,000 of discretionary funding has been spent to close a number of the enforcement notices, Mr Elliott advised that the team has been cautious in reducing the risk given the additional work that is required. Echoing the comments of Mr Elliott, Mr Carruthers added that whilst WG has offered to provide funding to progress works, this is still awaited. Mr Carruthers suggested a number of ways to articulate this within the risk:</p> <ul style="list-style-type: none"> • to include a date by when these mitigations will reduce the risk; or, • to include a statement that until all work has been completed, the Board will have to accept this risk. 	

	<p>Mrs Hardisty suggested that whilst WG may not provide the funding required, whatever funding is received should be referenced within the risk. In response, Mr Carruthers agreed to review the risk, taking into account the comments from Members.</p>	AC
	<p>The Health & Safety Assurance Committee NOTED:</p> <ul style="list-style-type: none"> • the background to Risk No: 813 and how it has materialised. • the three specific factors that constitute this risk. • the amount of work and mitigation plans already successfully embedded. • the remaining mitigation actions that are now being introduced. 	
HSAC (20)54	<p>RISK 718 - FAILURE TO UNDERTAKE PROACTIVE HEALTH AND SAFETY MANAGEMENT</p> <p>Mrs Rayani presented Risk 718 - Failure to Undertake Proactive Health and Safety Management Report, noting that the risk has been de-escalated following an increase of staff within the Health and Safety Team. These new appointments have enabled the team to take a more proactive approach to health and safety management.</p> <p>Mr Harrison, welcomed the additional resources progressed by the Director of Estates, Facilities and Capital Management which provides additional assurance to the Board.</p> <p>Mrs Hardisty welcomed the report and acknowledged the work undertaken by the team in order to reduce the risk score.</p>	
	<p>The Health and Safety Assurance Committee ACKNOWLEDGED the work undertaken to date relating to Risk 718 -Failure to Undertake Proactive Health and Safety Management and RECEIVED ASSURANCE that compliance dates are being met.</p>	
HSAC (20)55	<p>273 – MANUAL HANDLING POLICY AND 649 – WORKPLACE, SLIPS, TRIPS AND FALLS POLICY</p> <p>Mrs Rayani presented the Manual Handling and Workplace, Slips, Trips and Falls Policies for HSAC approval, advising that both policies have been updated following consultation, where required.</p> <p>Referring to Policy 273 – Manual Handling, Ms Taylor-Griffiths noted the omission of the date of the Equality Impact Assessment (EqIA) within the table on page 1 of the policy document.</p> <p>With the inclusion of the above amendment, Members approved both policies for publication and implementation.</p>	AS
	<p>The Health and Safety Assurance Committee</p> <ul style="list-style-type: none"> • RECEIVED ASSURANCE that the Written Control Documentation Policy (policy number 190) has been adhered to in the development of the Manual Handling and Workplace, Slips, Trips and Falls Policies, and that the documents are therefore in line with legislation/regulations, available evidence base and can be implemented within the Health Board. 	

	<ul style="list-style-type: none"> • RATIFIED the policies for publication and implementation. 	
HSAC (20)56	HSAC WORKPLAN 2020/21	
	<p>The Committee received the Health & Safety Assurance Committee work plan for 2020/21 for information.</p> <p>Mrs Rayani advised that a meeting is due to take place on 10th November 2020 to discuss both the workplan and the schedule of meetings until the end of the financial year. Following the meeting, a revised schedule and work plan would be shared with Members.</p>	KR
	The Committee NOTED the Health & Safety Assurance Committee work plan for 2020/21.	
HSAC (20)57	ANY OTHER BUSINESS	
	No other business was discussed.	
HSAC (20)58	REFLECTIVE SUMMARY	
	<p>Mrs Rayani highlighted the following from discussion at the meeting:</p> <ul style="list-style-type: none"> • Members were assured by the improvements made to both Health & Safety and Fire Safety. • Members accepted that additional work is required for Risk 813, however noted the significant progress made to date. • Members welcomed the de-escalation of Risk 718. • Members noted that staff engagement is supporting improvements related to the Health & Safety portfolio. 	
HSAC (20)59	DATE & TIME OF NEXT MEETING	
	16th December 2020.	