

# Hospital Site Lockdown Capability

## Operational Risk 652

# Situation

There is a risk

- In failing to regulate access and egress at hospital sites in the event of an emergency situation.
- That persons and services could be exposed to increased dangers with the potential for catastrophic consequences.
- Non-compliance with CONTEST Cymru - duty to ensure site security at public accessible locations.

# Situation

This is caused by the:

- Lack of ability to lockdown sites with an automated system at all critical access/ egress points.
- Lack of a dedicated Security Guard provision or identified existing personnel to operate the access control systems in the event of an emergency.

# Risks and Mitigation

- Access Control is already installed at certain wards/departments. Each having the capability of being locked down in the event of an emergency.
- Major Incident plans are in place but do not currently identify individuals to operate access control systems.
- Staff wearing ID badges at all times across sites.
- Hospital sites have learned from restricted access arrangements developed as part of COVID-19 response.

# Recommendation

- For each hospital site to review its Major Incident Plans to reflect the need to identify individuals who can operate access control systems efficiently.
- Review of site security will be undertaken to reflect the CONTEST Cymru duty as well as other drivers including anti-violence collaborative and 'Smoke Free' legislative compliance.

## Legionella Update

# Situation

The Health Board does not routinely test for Legionella in its water systems, as recommended in WHTM 04-01 Part B.

This decision has been made as there are sufficient recommended control mechanisms in place whereby the risk of Legionella harbouring in the water systems is controlled to avoid an outbreak.

# Risks and Mitigation from Water Safety

- There is an approved Water Safety Policy.
- Water Safety Group holds the risk assessment for Legionella in water.
- Currently all high risk patients admitted for Critical Care in the Health Board are routinely tested for Legionella.
- Routine storage, flow and return temperature checks are undertaken, as well as maintenance to storage calorifiers and sentinel taps testing as part of Pre-Planned Maintenance (PPM).
- Areas where there is no or low use of water use 'Run off Logs' as a Legionella Prevention measure.
- Shower heads are cleaned and replaced on a quarterly basis through PPM, or if there is a drop in temperature
- Removal of redundant pipework, as able to do so.
- Labelling and lagging of hot/ cold pipework.
- Legionella water testing is undertaken if;
  - A patient is suspected positive and the likely source is thought to be the hospital.
  - There is a drop or failure to maintain water temperature.
  - On commissioning of new buildings/refurbishments/ connection of temporary units.

# Risks and Mitigation from Ventilation Systems

- Identified as a risk on the Risk Register - Risk 423
- Periodic ductwork cleaning is being undertaken on a selection of systems, based on **priority**.
- Periodic air sampling of critical systems, such as theatre and the Intensive Therapy Unit (ITU), etc.
- Pre-planned maintenance (PPM) is in place and regular site inspections are being undertaken by operational staff.
- Approved Health Board ventilation policy is in place.
- A full asset register has been developed for all ductwork air conditioning (AC) systems and a planned periodic cleaning and testing programme is in place, based on priority level.

# Recommendation

- Development of CAD schematics for all sites.
- Audit of Legionella run-off logs for low water usage areas.
- If any control measures fail:
  - Undertake a further Risk Assessment of the individual circumstances.
  - Undertaken by the site Responsible Person
  - If deemed a significant risk, Legionella sampling will be undertaken in that area.