



## HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	14 May 2020
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Health and Safety Executive Enforcement Action Update
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Mandy Rayani, Director of Nursing, Quality and Patient Experience
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Tim Harrison, Head of Health, Safety and Security

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This paper is presented to the inaugural Health and Safety Assurance Committee in order to provide an update on the continuing work towards compliance with the notices served against the Health Board by the Health and Safety Executive (HSE) in October 2019. The Health Board received 8 Improvement Notices and 13 Material Breaches, all with a compliance date of 1<sup>st</sup> May 2020. Due to the ongoing COVID-19 situation, an extension to the deadline was sought and has been granted, initially until July 2020, though this may potentially be further extended as the situation develops.

The Health Board will be required to confirm the action taken on each notice / contravention by the compliance date. If we do not take this action, further enforcement action will be considered. As the Health and Safety at Work Act is a criminal legal statute, prosecution could result by non-compliance.

This paper outlines the work undertaken so far and the key work still to be undertaken.

#### Cefndir / Background

As part of a National programme of inspections for 2019/20 the HSE attended Hywel Dda University Health Board (HDUHB) between 2<sup>nd</sup> and 11<sup>th</sup> July 2019 with the targeted intention of examining the management arrangements for violence and aggression, musculoskeletal disorders (MSDs) and asbestos. The four Inspectors visited clinical and non-clinical areas across the Health Board, both in the acute and the community setting and met with individual employees, managers and trade union / health and safety representatives.

The Improvement Notices and Material Breaches received can be summarised as follows:

- Violence and Aggression, Inc. Lone Working – 2 Improvement Notices and 9 Material Breaches
- Moving and Handling – 4 Improvement Notices and 1 Material Breach
- Incident Investigation – 1 Improvement Notice
- Sharps – 1 Improvement Notice
- LOLER – (Lifting Equipment Examination) – 1 Material Breach
- Control of Contractors – 1 Material Breach

- Control of Substances Hazardous to Health Regulations (COSHH) in Mortuary – 1 Material Breach

The three key work areas were identified as Violence and Aggression, Moving and Handling and Incident Investigation. These three topics each have their own dedicated Executive-led Control Group whilst the other notices are being addressed locally via Task and Finish Groups.

### Asesiad / Assessment

The Health Board has provided the HSE with an action plan for the three key work areas that evidences the progress made to date towards compliance. Some of the key elements are outlined below:

#### **Violence and Aggression (V&A) / Lone Working**

In February 2020, a dedicated Violence & Aggression Case Manager was appointed and all incidents of violence and aggression are automatically referred to them. All incidents are now assessed and support and advice triggered on each incident. This resulted in a change regarding the notifications being reviewed from level 3 (short term harm) down to level 1 (no harm incidents) in order that all incidents are scrutinised by the Health and Safety Team offering better support to staff.

Improved links with local authority and Dyfed Powys Police (Community Safety) have been established in order that individuals and their threat level are discussed through anti-social behaviour reporting improving information sharing and intelligence between agencies.

All V & A data is now held on a database in order to identify higher risk areas and trends that provides the ability to predict risk and propose measures to reduce the risk of V& A month by month.

The HSE identified that the Prevention and Management of Violence & Aggression (PAMOVA) team have developed a 2-day course 'Prevention and management of behaviours that challenge in Older Adults', which includes safe holding and would be of great help to many wards and departments including porters. This element of the compliance is our greatest challenge as a training needs analysis has highlighted a significant number of staff requiring this training. As well as targeting priority clinical areas the PAMOVA team is scheduling additional training sessions into their prospectus for 2020/21 to attempt to meet the training demand.

The HSE identified a number of concerns relating to lone working and these along with actions taken are covered in a separate report on the agenda.

#### **Moving & Handling (M&H)**

In terms of Health Records, risk assessments have commenced on all M&H activities and actions have been completed to reduce the risk of M&H injuries. These include the introduction of smaller transportation boxes, purchase of trolleys used to move records and installation of a mechanical aid to eliminate the need to carry records up/down stairs in the Withybush General Hospital (WGH) storage facility. The introduction of the smaller boxes is now being extended to include transportation of mail.

In the Glangwili General Hospital (GGH) laundry, measures have been taken to reduce the risk of impaired vision from overfilled laundry cages and to reduce the risk of musculo-skeletal injury from both overfilled laundry cages and overfilled laundry bags. Many of the measures have been achieved by procuring the right equipment for the task, however the overfilling of bags presents an educational challenge and an ongoing requirement for compliance.

A number of physical M&H issues were identified in Bronglais General Hospital (BGH) Theatres: The hazard posed by the floor mounted stopping bars has been eliminated by their removal. A solution to the hazard posed by the heavy double theatre fire doors has been identified for contractors to complete by installing timed hold-open devices.

It was also identified that specialist training was required for theatre staff for safely placing patients in the prone position which is currently being rolled out Health Board wide by the Manual handling team.

### **Incident Investigation**

A critical review of the incident investigation process has been undertaken. Actions have been taken to improve automated incident feedback mechanisms. The Health and Safety (H&S) and Quality Safety teams are exploring methods of sharing learning from Incident investigation.

A critical path analysis has been completed for the Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR) Regulations, which highlighted issues with the staff incident reporting process and has already resulted in the development of some guidance materials for both Line Managers / Datix investigators and Datix Final Approvers. In addition to the guidance, a training mapping exercise is underway to establish whether an additional course is required for incident investigation.

Work has commenced to improve the provision of and availability of H&S statistics, including RIDDOR, to all managers to inform meetings and support the process of embedding safety culture within directorates. A RIDDOR module has been designed and developed within Datix to capture all future incidents notified to the HSE. A Health and Safety Quality Dashboard will be developed which will be able to quickly review H&S incident data and data from the new RIDDOR module.

The Health Board is contributing to the development stage of the new Datix system, 'Datix Cloud IQ' as part of the Once for Wales Concerns Management System, the incident module of which will be rolled-out across Wales in April 2021 (subject to COVID-19).

### **Argymhelliad / Recommendation**

For the Committee to take assurance from this paper that the necessary work is being undertaken towards compliance with the notices served against the Health Board by the Health and Safety Executive.

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.8 Ensure there is a process of review of findings of safety management system audits and seek assurance that corrective actions are put in place.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	2.1 Managing Risk and Promoting Health and Safety
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Focus On What Matters To Patients, Service users, Their Families and Carers, and Our Staff

Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

### Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	Improvement Notices
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:	Executive Control Group Task & Finish Groups

### Effaith: (rhaid cwblhau) Impact: (must be completed)

Ariannol / Gwerth am Arian: Financial / Service:	There is an immediate financial impact in relation to the Fee for Intervention costs that HSE have ordered. £40k In addition Manual Handling equipment £70k
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	N/A
Risg: Risk:	Detailed action plan produced highlighting the mitigation of these identified risks.
Cyfreithiol: Legal:	Breaches of Health and Safety at Work Act 1974 potential for fines if not complied with within specified timescale.
Enw Da: Reputational:	Potential for political or media interest if compliance or further enforcement action is served.
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	<ul style="list-style-type: none"> <li>• Has EqIA screening been undertaken? No</li> <li>• Has a full EqIA been undertaken? No</li> </ul>