



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

<b>DYDDIAD Y CYFARFOD:</b> <b>DATE OF MEETING:</b>	22 June 2020
<b>TEITL YR ADRODDIAD:</b> <b>TITLE OF REPORT:</b>	Health & Safety and Emergency Planning Sub-Committee Annual Report 2018/19
<b>CYFARWYDDWR ARWEINIOL:</b> <b>LEAD DIRECTOR:</b>	Mandy Rayani, Executive Director of Nursing, Quality and Patient Experience
<b>SWYDDOG ADRODD:</b> <b>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)**

Ar Gyfer Trafodaeth/For Discussion

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

The purpose of this paper is to present the Health & Safety and Emergency Planning Sub-Committee Annual Report 2019/20 to the Health and Safety Assurance Committee. The report aims to provide information in respect of the work that has been undertaken within the Health Board during the previous financial year.

#### Cefndir / Background

The Annual Report specifically provides information on key issues considered by the Sub-Committee during 2019/20, together with key achievements and unexpected challenges particularly in relation to a comprehensive Health and Safety Executive Inspection, Fire Safety enforcement and more recently the health and safety implications of the COVID-19 Pandemic.

During 2019/20, the Health & Safety and Emergency Planning Sub-Committee met on the following dates:

- 14<sup>th</sup> May 2019
- 17<sup>th</sup> July 2019
- 10<sup>th</sup> September 2019
- 5<sup>th</sup> November 2019
- 23<sup>rd</sup> January 2020
- 10<sup>th</sup> March 2020

Over the reporting period, groups reporting to the Health & Safety and Emergency Planning Sub-Committee included:

- Fire Safety Group
- Water Safety Group
- Medical Gasses Group

Following the Health and Safety Executive (HSE) Inspection in July 2019, the following additional Groups also reported into this Sub-Committee.

- Violence and Aggression

- Manual Handling
- Lifting Equipment Management
- Sharps Safety/Needle Stick Injuries
- Control of Contractors

## **Asesiad / Assessment**

### **Sub-Committee Terms of Reference and Principal Duties**

In discharging its duties, the Health & Safety and Emergency Planning Sub-Committee has undertaken work during 2019/20 against areas of responsibility including the following:

- North Road Clinic Health and Safety Concerns
- Review of Health and Safety conditions within Community Premises
- Respiratory fit testing programme
- Violent and Aggressive Patient Warning Marker Procedure
- Prevent Duty
- Serious Organised Crime Profile
- Estates and Facilities Health Technical Memorandum (HTM) Compliance
- HSE enforcement action
- Fire Safety enforcement action
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)

### **North Road Clinic Health and Safety Concerns**

The Sub-Committee monitored the positive progress made to the working environment at North Road Clinic, Aberystwyth. Considerable environmental changes were made to the clinic to improve the health and safety of staff. This included improvements to the ventilation, patient waiting areas, mains drainage, storage of medical notes and general décor improvements. The Health Board successfully defended a civil court case brought against the Board by a retired Ophthalmic Consultant who had at one time worked in the North Road Clinic, which linked to the environmental conditions

### **Community Premises Audits**

The Sub-Committee monitored progress and completion of the health and safety audits undertaken at all Health Board owned community premises. This involved the production of improvement plans for each of the premises that identified both Estates and local management recommendations.

### **Respiratory fit testing programme**

The Health and Safety Manager introduced a programme of providing respiratory fit testing training to staff to become fit testers in order to perform tests on their own departmental staff. This was primarily to protect staff from the common flu virus. A positive benefit of this work was realised in February 2020 when over 224 staff had been trained which enabled the Health Board to be better equipped in preparation for COVID-19.

### **Violent Patient Warning Marker Procedure**

During 2019, work to develop a Health Board procedure to improve the way in which violence and aggression information sharing was undertaken, resulting in an approved procedure being introduced in July 2019.

### **Prevent strategy**

In relation to the Government's strategy on Counter Terrorism, the Health Board's Security Manager continued to represent the Health Board at the three Local Authority CONTEST and Channel Panel meetings as well as the Regional CONTEST Board during 2019/20.

Improvements included introducing formal referral arrangements to the Local Authority Channel Panels, which are now embedded within the Health Boards existing safeguarding arrangements, and the Safeguarding Team continued to contribute to the Channel Panel meetings throughout 2019/20.

Both the Local and Regional CONTEST Board discusses serious and organised crime matters. As part of this extended agenda, the Health Board has been requested to provide data linked to Serious Organised Crime topics including gangs or drug networks, child sexual exploitation, child criminal exploitation and human trafficking or modern slavery. This data sharing has aided and improved Serious Organised Crime Profiles held for each county.

### **Estates and Facilities Health Technical Memorandum (HTM) Compliance**

The Sub-Committee was provided with assurance against HTM disciplines, for example, medical gas pipeline systems, ventilation systems, water services, fire safety and electricity services, all of which are governed by HTM best practice engineering guidance documents. The assurance was presented by way of a dashboard depicting in month positions to assess the number of risks remaining to be addressed, followed by a month by month tracker to assess when all actions would be addressed/closed.

### **HSE enforcement action**

As part of a national programme of inspections for 2019/20, the HSE attended Hywel Dda University Health Board (HDdUHB) 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 Sub-Committee oversaw the monitoring of actions completed by the individual Control Groups as detailed earlier in this report.

### **Fire Safety Compliance**

Throughout 2019/20 Fire Safety, compliance issues have been reported to the Sub-Committee including the following issues: Fire safety training compliance, Fire risk assessments.

During 2019/20, the Fire Safety Management team has increased its workforce resource with the provision of a dedicated Head of Fire Management together with an additional two Fire Safety Advisors. This enables there to be a dedicated Fire Safety Advisor to be present on each of the acute hospital sites. The Advisors also have responsibility for fire safety in Community Hospitals and other properties as appropriate, together with other fire safety related matters such as fire safety training.

### **Fire Safety enforcement action**

The Mid and West Wales Fire & Rescue Service visited both Withybush General Hospital and Glangwili General Hospital to undertake Inspections on Fire Safety. A number of Enforcement Notices and Letters of Fire Safety were served against the Health Board in relation to Withybush General Hospital. In addition, on 17th April 2020, Glangwili General Hospital received a Fire Enforcement Notice.

## Emergency Planning Element - Brexit

Throughout 2019/20, the Emergency Planning remit of the Sub-Committee was fully committed to co-ordinating the Health Boards preparation plans in relation to exiting Europe and the implications for the organisation.

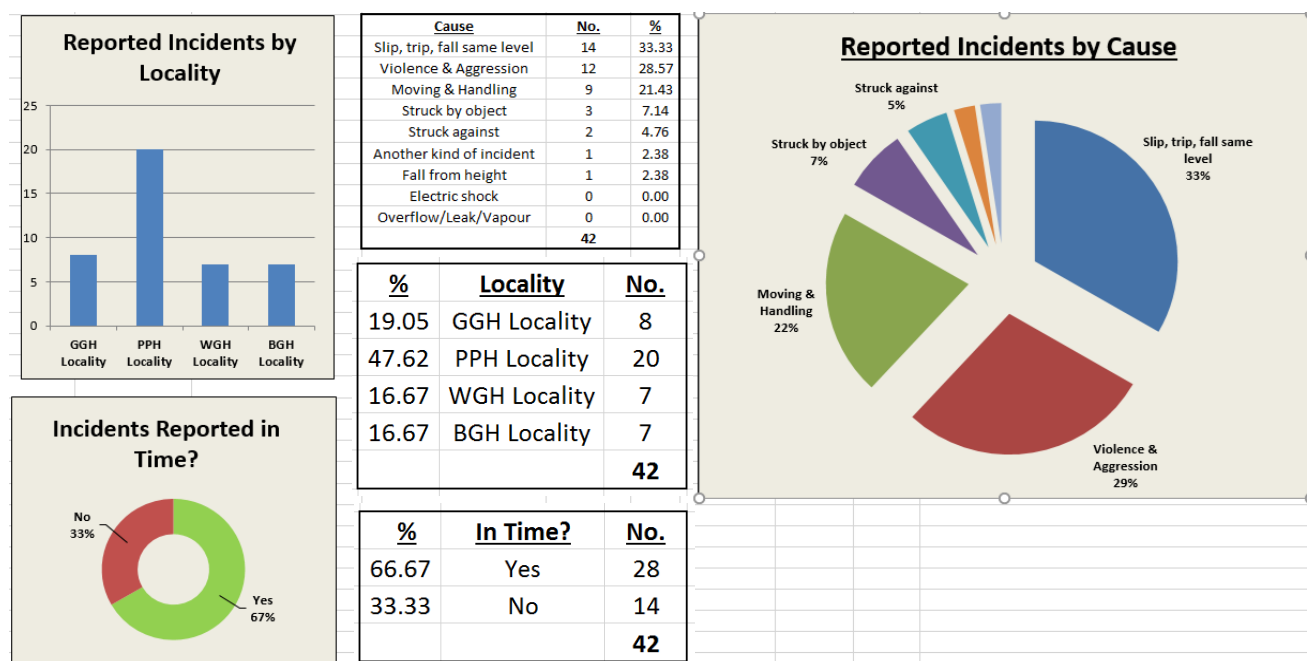
Managed through the Brexit Steering Group, HDdUHB continued to meet and maintain the required enhanced level of preparedness.

## Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)

The Sub-Committee received regular reports on the number and type of RIDDOR notifications made to the HSE.

During 2019/20 there were 42 incidents in total reported to the HSE including 14 slip, trip fall, 11 violence and aggression and 9 moving and handling incidents.

## Rolling Totals & Percentages for 2019-20



## Key Risks discussed/reported at the Sub-Committee

The main focus of discussion and scrutiny during 2019/20 has been related to both Fire and Health and Safety enforcement actions. The Fire Safety enforcement was undertaken with little advance notice whereas the HSE inspection provided the Health Board with a two month period where a considerable amount of work was undertaken to prepare for the inspection and thanks to some key individuals the inspection schedule was well managed.

In addition to the formal Improvement Notices issued, the HSE identified a lack of resource for the Health, Safety and Security Team, having only three members of staff employed. This had also been noted by the Sub-Committee during the 2019/20 period.

## Violence and Aggression Training - "Behaviours that Challenge in Older Adults"

Discussions throughout 2019/20 noted the benefits from ward staff who had received this training. Training needs analysis has also identified that this training is required with over 1,000 employees indicating it would have a positive impact on how they manage certain situations where ordinarily they would call for portering assistance. This is being taken forward by the Violence and Aggression Control Group.

### **Fire Safety Inspection**

The Sub-Committee was advised of four concerns raised by the Mid & West Wales Fire & Rescue Service (MWWFRS), 2 Enforcement Notices and 2 Letters of Fire Safety Action. Plans are in place for the four concerns, with a number of actions now completed. In discussion with the MWWFRS and Welsh Government (WG), a business case is being developed and will be submitted to WG setting out the Health Board's proposal for a phased plan. However, patient disruption and closure of services and possible decant will need to be taken into consideration.

### **Conveyance of Mental Health Patients**

This followed a number of safety concerns expressed by staff working within the Gorwellion Resource Centre, Aberystwyth. This was also identified during the HSE inspection process and actions are being monitored by the Violence and Aggression Control Group. A number of short, medium and long term solutions have been established during 2019/20 that focus on documentation, training, use of vehicles and changes in service.

### **Health, Safety & Security Team Resource**

During 2019/20, the team has increased its workforce resource with the provision of a dedicated Violence and Aggression Case Manager together with two additional Health and Safety Advisors. This effectively has doubled the size of the team which has already enabled improvements in support for staff involved in violence and aggression incidents, continuation of proactive Health and Safety audits as well as compliance with outstanding Internal Audit recommendations first identified in 2016.

Prior to the end of the 2019/20 financial year, it was proposed that the Health, Safety & Security Team transfer from the Estates and Facilities Directorate to the Nursing Quality and Patient Experience structure. This was officially completed in April 2020.

### **Argymhelliad / Recommendation**

To receive the Health & Safety and Emergency Planning Sub-Committee Annual Report 2019/20.

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

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

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.11 Ensure production of an annual report of the Health Board's safety management systems to measure effectiveness, performance and provide assurance to the Board of compliance.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability 2.1 Managing Risk and Promoting Health and Safety  1.1 Health Promotion, Protection and Improvement 2.9 Medical Devices, Equipment and Diagnostic Systems

Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Protect Patients From Avoidable Harm From care
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 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:	Agendas, papers and minutes of the Health & Safety and Emergency Planning Sub-Committee meetings 2018/19
Rhestr Termiau: Glossary of Terms:	Included 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:	Health & Safety and Emergency Planning Sub-Committee Chair/Lead Director

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	A sound system of internal control, as evidenced in the Health & Safety and Emergency Planning Sub-Committee's Annual Report, will assist with ensuring financial control, and the safeguard of public funds.
Ansawdd / Gofal Claf: Quality / Patient Care:	Delivery of a robust and effective Health, Safety and Emergency Planning provision for the HDUHB has a direct impact on the quality of services provided by the UHB.
Gweithlu: Workforce:	Delivery of a robust and effective Health, Safety and Emergency Planning provision for the HDdUHB has a direct impact on the welfare and safety of its staff.

<b>Risg: Risk:</b>	Wherever possible mitigation plans are developed to minimise risk. Failure to manage these challenges effectively will impact on staff and patient safety and possibly lead to enforcement action.
<b>Cyfreithiol: Legal:</b>	The UHB has a responsibility to comply with the Health and Safety at Work Act, Fire Regulatory Reform Order.
<b>Enw Da: Reputational:</b>	The outcome of the above has a direct bearing on the reputational status of the HDdUHB.
<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	At this stage no formal EqIA has been undertaken