

HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	06 July 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Health and Safety Executive Enforcement Action Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Tim Harrison, Head of Health, Safety and Security Adam Springthorpe, Health and Safety Manager

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 Health and Safety Assurance Committee (HSAC) in order to provide an update on the continuing work towards compliance with the enforcement notices served against the Health Board by the Health and Safety Executive (HSE) in October 2019, and to expand upon the six papers presented to the Committee over the past 18 months. This paper therefore summarises the developments since the previous Committee meeting.

Cefndir / Background

The HSE Principal Inspectors delivered their feedback on all Improvement Notices and Material Breaches in a meeting held on 24th February 2021, which was then followed by a letter dated 19th March 2021 formalising the discussions previously held.

The letter confirmed that four of the Improvement Notices had been fully complied with and acknowledged that there had been good progress towards all of them. The letter also confirmed that the HSE were confident that the remaining work on all of the material breaches was being completed without the need for any further HSE scrutiny.

However, further work is required on the four remaining Improvement Notices to achieve full compliance and the letter confirmed agreed time extensions for each of these. The letter also detailed additional actions required in order to reach a satisfactory level of compliance for each outstanding notice. A summary of the current position can be found below:

Improvement Notices	Status
IN2 - Management of Manual Handling	New compliance date - 25th June 2021
IN6 - Incident Investigation	New compliance date - 24th September 2021
IN7 - Manual Handling in Theatres, Bronglais	New compliance date - 25th June 2021
IN8 - Needlestick Management	New compliance date - 24th September 2021

A new Executive-led Control Group has been established to oversee the work on the final four remaining Improvement Notices, beneath which sits the Sharps / Needlestick Injuries Task and Finish Group, which is led by the Assistant Director of Operational Nursing and Quality.

Asesiad / Assessment

As the HSE has already received all of the Health Board's evidence to date, new Action Plans have been developed to specifically track the additional work on the remaining Improvement Notices. Based on the HSEs outlined additional actions required in order to reach a satisfactory level of compliance, a great deal of additional work has been undertaken on each of the outstanding notices, the key points of which are outlined below:

IN2 – Management of Manual Handling:

- Management Standards for Manual Handling have been created in line with the Manual Handling Policy;
- A standards checklist has been devised for all managers to self-monitor their performance against their responsibilities as outlined in the Management Standards. The checklist is called the Workplace Manual Handling Monitoring Form;
- The above is in the process of being presented to each of the Quality and Safety / Governance Groups and has been circulated widely via the Department's 7 Minute Briefing. Good examples of the form working in practice have been received;
- An audit tool has been devised which will be used to independently audit a department's compliance against their responsibilities, as outlined in the Manual Handling Policy / Management Standards. Findings of these independent audits will be fed back directly to the service(s) in order to inform continuing improvements. Findings will also be used to inform the relevant Quality and Safety / Governance Groups.

IN6 – Incident Investigation:

- The Director of Nursing, Quality and Patient Experience has backed a drive to emphasise the importance of suitable and sufficient incident investigations and ensuring that all open incidents are investigated appropriately;
- The staff incident guidance sheets have been updated to include guidance on immediate, underlying and root causes;
- Audits of completed staff incident Datix reports have commenced.

IN7 – Manual Handling in Theatres, Bronglais:

- The Theatre Department has now introduced a Manual Handling Theatre Specific Individual Safer Handling Training Record;
- Up-to-date risk assessments have been undertaken / reviewed covering all Theatre manual handling activities;
- Safe Systems of Work (SSoWs) have been developed for the more complex manual handling techniques required in Theatres;
- A Theatres Learning and Development Hub has been created on a Microsoft Teams Channel. The Hub will eventually allow all Theatres staff across the UHB to access and/or share risk assessments and any control measures identified;
- Additional Theatre-specific training sessions have been delivered.

IN8 – Needlestick Management:

- A Sharps Injury Investigation Checklist has been devised which is to be used following all sharps injuries acquired from dirty or unknown origin sharps/needles;
- The Sharps Injury Investigation Checklist is pro-actively being sent out whenever an incident involving a dirty or unknown origin sharp/needle occurs;
- The Safer Sharps Group is overseeing work to improve compliance across the Health Board and will take measures to replace (where possible) safety sharps for non-safety type devices.

At the time of writing this paper, the Health, Safety & Security Department had just finalised the Action Plans for IN2 and IN7 and submitted them to the HSE ahead of the compliance date of 25th June 2021.

The Head of Health, Safety & Security and the Health and Safety Manager are meeting with the HM Inspector of Health and Safety via Microsoft Teams on 23rd June 2021, and the HM Inspector has informed the Health Board that she intends to visit Prince Philip Hospital on 25th June 2021 to look at compliance with IN2 in practice.

The HSE has also indicated that it intends to return to Theatres in Bronglais General Hospital to witness the developments towards IN7 in person, although formal arrangements are yet to be confirmed.

Argymhelliad / Recommendation

For the Committee to take assurance from the Health and Safety Executive Enforcement Action Update report 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:	N/A
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: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	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 Material Breaches

Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partïon / 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 a growing financial impact in relation to the Fee for Intervention costs that HSE charge for their services.
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	N/A
Risg: Risk:	Detailed action plans 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"> • Has EqIA screening been undertaken? See below. • Has a full EqIA been undertaken? Full EqIAs have been undertaken for both the V&A Policy and the M&H Policy under which the HSE work is focused.