

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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	06 July 2021
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Health and Safety Regulations: Personal Protective Equipment Regulations 1992
<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 & 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 report is presented to the Health and Safety Assurance Committee (H&SAC) to provide assurance against a number of key Health and Safety regulations.

Personal Protective Equipment (PPE) has featured significantly in the response to the COVID-19 pandemic, therefore this report covers compliance against the Personal Protective Equipment Regulations 1992.

The legislative requirement is set out, together with an assessment of how HDdUHB performs against each regulation, within the combined Background and Assessment sections below, with an appropriate RAG rating applied against each.

##### Cefndir / Background and Asesiad / Assessment

The PPE Regulations were first introduced in 1992 as part of a group of regulations known as the '6 Pack'. These include:

- Management of Health and Safety At Work Regulations 1999
- Manual Handling Operations Regulations 1992
- The Health and Safety (Display Screen Equipment) Regulations 1992
- Workplace (Health, Safety, and Welfare) Regulations 1992
- Provision and Use of Work Equipment Regulations 1998
- Personal Protective Equipment (PPE) Regulations 1992

In this context, Personal Protective Equipment means any equipment (including articles of clothing) that is to be held or worn by a person at work in order to protect them from one or more risks. It included additions or accessories designed to meet this objective.

## Employer duties

- Employers have a duty to provide suitable PPE to employees if the risk is not adequately controlled by other means. PPE should therefore be considered as the last resort to protect against risks.

*PPE is provided where there is an identified risk and the residual risk remains after implementing control measures and safe systems of work. The hierarchy of risk is explained during the Health and Safety Induction for Managers training course. The Health Board is actively and visibly using the hierarchy of risk, by substituting equipment and substances for safer alternatives, employing local extraction systems and screens (engineering controls), safe systems of work (written policies and procedures), and PPE.*

- Exemptions from the PPE Regulations 1992 do not apply if other Regulations require PPE to be used in those circumstances

*Other Regulations such as the Control of Substances Hazardous to Health Regulations 2002, Control of Noise at Work Regulations 2005, etc. are considered when selecting control measures and PPE.*

- The PPE must be suitable for the risk, the conditions where the risk occurs, and the period for which it is worn. An assessment must be made to ensure that the PPE is suitable.

*Directorate risk registers positively demonstrate that risk assessments are being undertaken on a regular basis and are recorded in various ways.*

*In consideration of airborne virus transmission, PPE has been identified according to the risks of the tasks performed. Aerosol generating procedures (AGPs) have been identified in national guidance, and also identified by professional bodies in medical specialities. Employees have been trained in the correct use of PPE for AGPs and non-AGPs. Signage is employed to indicate the correct use of PPE.*

- The PPE takes into account the state of health of the wearer.

*The state of health of employees is considered upon employment by Occupational Health (or upon any changes in health that they are informed of). This determines the type of work or tasks that are suitable for the staff member, and any additional/specific PPE requirements e.g. the use of powered air purifying respirators (PAPRs) for staff who cannot be fit tested. Adverse reactions to Fluid Resistant Surgical Masks (Type IIR masks) have been reported previously. These reports have been followed up by Occupational Health, Procurement, and Health & Safety to ensure the supply of alternative suitable products to affected staff.*

- The PPE must be capable of fitting the wearer correctly.

*Fluid Resistant Surgical Masks (Type IIR) are most commonly worn when not performing AGPs. Where appropriate, "ear saver" devices are available to employees who wear head coverings, find the masks are too large, or experience irritation.*

*FFP3 and half-mask respirators are subjected to Quantitative Face Fit Testing by suitably trained staff. The Health and Safety team (H&S) and Infection Prevention and Control (IP&C) team have trained around 400 staff to perform this test. Over 40 fit test-trained staff are now trained as half-mask trainers. Staff who cannot be fit tested or have failed the fit test on all available masks are offered Powered Air Purifying Respirators which do not require a face fit test. Over 40 staff are Powered Air Purifying Respirator (PAPR) trainers.*

- When necessary to ensure hygiene, the employer is required to issue PPE for use only by the individual.

*Most PPE used in the HB are single-use disposable items therefore are only used by an individual for sessional use or with an individual patient, and not shared with others.*

*Re-usable PPE such as safety glasses, visors, protective clothing, helmets, and respirators are assigned to a specific user, suitably marked with the person's name, and not shared. This is consistent with current Infection Prevention and Control guidance.*

*In situations where protective clothing (such as outdoor coats) are shared, this is performed under limited circumstances and guided by IP&C*

- Where there is one or more risks that requires employees to simultaneously wear more than one item of PPE, these must be compatible and continue to be effective against the risk in question.

*Healthcare staff are required to wear many items of PPE. They receive training in the donning and doffing of the PPE in the correct order. For example, contaminated gloves are doffed first, and respirators are doffed near the end of the process to maintain wearer protection.*

- PPE must be maintained, cleaned, and replaced as appropriate. Checks must be made before use to ensure it is in a suitable condition. This should also be documented where appropriate.

*Re-usable PPE is used in the HB. In the case of re-usable Respiratory Protective Equipment, staff are trained in cleaning and maintenance. Cleaning instructions have been given to protect the user and to protect the PPE from damage. Pre-use checks, post-use cleaning, and periodic deep cleaning are performed. These are recorded monthly (half masks) and daily (Powered Air Purifying Respirators).*

- Accommodation is provided for supplied PPE when not in use.

*PPE is generally suitably stored, such as in the original packaging to ensure protection and identification. Users of re-usable Respiratory Protective Equipment are trained in the suitable storage of their equipment.*

- Employers must provide suitable Information, Training, Instruction, and Supervision.

*Healthcare staff are trained in Donning (putting on) and Doffing (taking off) PPE, and supervised by their Line Managers. This training and associated signage is*

*delivered in an accessible form. Staff are trained in the risks that the PPE is intended to protect them from, and to maintain PPE in an effective condition.*

- Agency workers: The agency has a duty to ensure correct PPE is provided to its employees, although in practice may not provide the PPE in the place of work.

*In practice, the HB provides all necessary PPE and fulfils the requirements of the Regulations.*

- Non-Employees: The regulations only provide for the protection of non-employees who are trainees and work placement students. However, the Health and Safety at Work etc. Act 1974 (Section 3) requires employers to protect non-employees who may be affected by the work, so far as is reasonably practicable.

*Contractors working on our sites receive induction training prior to starting work. Patients and visitors who do not have a suitable face covering are provided with face masks upon entry to hospital main entrances. There is additional PPE available at entrances to wards that currently accept visitors and at Outpatients departments.*

- PPE supplied by the Health Board must be CE marked.

*This is actioned by Procurement when adding PPE items to the Oracle ordering catalogue. Items of PPE identified for consideration of purchase that are not CE marked items have been highlighted by Procurement, and alternatives sought with support from Health and Safety.*

- Employers need to make available means for employees to report loss or defects with PPE, and ensure work does not recommence until rectified.

*Staff can report defects to their Line Manager (e.g. Ward Sister, Supervisor). Staff have access to the Datix system.*

## **Employee duties**

- Employees must use PPE in accordance with their Information, Training, Instruction, and Supervision. They must take reasonable care of their PPE, return it to suitable storage (where appropriate),

*This is subject to appropriate supervision by Line Managers.*

- Employees have access to the Datix reporting system for highlighting PPE concerns or person-specific issues such as adverse reactions, and can report to their Line Manager.

*Datix reports have been made detailing adverse reactions. Batch numbers of masks are recorded to allow comparison with other Datix entries. These have been followed up by Occupational Health, Procurement, and Health and Safety.*

## Argymhelliad / Recommendation

The Health and Safety Assurance Committee is requested to take assurance from this report that the fundamental elements of the Personal Protective Equipment Regulations 1992 are being complied with within HDdUHB.

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

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

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers contractors etc.
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):	1. Staying Healthy 2. Safe Care 2.1 Managing Risk and Promoting Health and Safety 2.4 Infection Prevention and Control (IPC) and Decontamination
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	All Quality Improvement Goals Apply
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:	Contained within the body of the report.
Rhestr Termiau: 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:	No consultation to date but will be shared with Quality and Safety/Governance meetings as well as County Partnership Forums.

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	There may be financial implications if the issues identified require monetary rectification.
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	Protects both employees and patients.
<b>Gweithlu:</b> <b>Workforce:</b>	Potential for adverse future staffing impacts if this legislation is not complied with as it relates to employee safety.
<b>Risg:</b> <b>Risk:</b>	Risk to health and safety management.
<b>Cyfreithiol:</b> <b>Legal:</b>	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
<b>Enw Da:</b> <b>Reputational:</b>	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
<b>Gyfrinachedd:</b> <b>Privacy:</b>	Not Applicable
<b>Cydraddoldeb:</b> <b>Equality:</b>	Has EqIA screening been undertaken? No