



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 Environmental Audit Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Tim Harrison, Head of Health, Safety & Security

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This report is being brought to the Health and Safety Assurance Committee (H&SAC) in order to provide assurance that proactive health and safety audits are being carried out in compliance with the Management of Health and Safety at Work Regulations (MHSAW) 1999.

Regulation 5 of MHSAW requires 'Every employer to make arrangements as are appropriate, for the effective planning, organisation, control, monitoring and review of the preventive and protective measures.'

The purpose of the workplace built environment audit and the 6 monthly reviews of workplace safety is to evidence that monitoring of health and safety management is being carried out and therefore compliance against the above legislation.

Cefndir / Background

Historically, Hywel Dda University Health Board (HDdUHB) has been unable to undertake a suitable and sufficient review of every workplace due to an under-resourcing of the Health, Safety and Security team. However, since March 2020, the team has experienced an uplift in resourcing allowing for the development and implementation of the workplace built environment audit programme.

During the Covid-19 pandemic, the audit program has had to be curtailed to reflect the accessibility of departments and community premises. As a result, there have been 93 audits and 33 follow up visits completed to date.

Asesiad / Assessment

To ensure that all departments are audited within a 3 year rolling programme, 131 audits per annum are required (3 audits and 3 follow ups per week). As the audit programme develops, this number may change as departments in close proximity or with the same manager may be merged into one.

All audit reports are submitted to department managers and/or Estates, with an action plan which requires returning to the Health and Safety Adviser within 2 weeks of receipt, identifying intended actions to mitigate risks. In addition to this, all audits which have identified actions are followed up 3-6 months after the initial report is submitted to ensure that urgent and short-term actions have been taken to reduce the risks identified.

The audits have identified 317 individual prioritised actions to date.

Departmental Action Plans

Currently the returning of action plans by departments is not always being completed.

In addition to the 3 yearly audits, all managers are required to complete 6 monthly reviews of the workplace using the 'Workplace Health and Safety Checklist'. This ensures that managers take ownership of issues locally before they become an imminent danger to staff or visitors. These are reviewed as part of the audit.

Current trends identified

Lack of staff welfare facilities including insufficient changing rooms (and lockers) and rest areas.

Deteriorating internal flooring often on floor joints and in high traffic areas.

Lack of vegetation control including ivy climbing on/or penetrating buildings, blocked guttering and drainage, excessive leaves on footpaths.

Next Steps

For Directorate Quality and Safety meetings to formally report on progress with regard to the identified actions arising from the audits and to provide assurance to this Committee at a later date.

Argymhelliad / Recommendation

The Health & Safety Assurance Committee is requested to take note of the work of the Health and Safety Team in relation to the number of audits completed.

For the Committee to seek future assurance from the Operations Directorate that the actions identified are being managed.

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. |
| 3.5 | Provide assurance that robust and effective safety management systems are in place operationally to deliver the Health Board's health, safety and security objectives and fulfil its statutory duties. |

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	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives

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.

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There may be financial implications if the issues identified require monetary rectification.
Ansawdd / Gofal Claf: Quality / Patient Care:	Potential for adverse quality/or patient care if this legislation is not complied with as it relates equally to employees as well as others including patient care.
Gweithlu: Workforce:	Potential for adverse future staffing impacts if this legislation is not complied with as it relates to employee safety
Risg: Risk:	Risk to health and safety management

Cyfreithiol: Legal:	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation
Enw Da: Reputational:	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Has EqIA screening been undertaken? No