

Enw'r Pwyllgor / Name of Committee	Health and Safety Committee (HSC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Mrs Judith Hardisty, UHB Vice-Chair
Cyfnod Adrodd/ Reporting Period:	Meeting held on 12 th September 2022
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Self Assessment Questionnaire: The Committee agreed to defer the distribution of the questionnaire to Members until clarity was sought on whether the format and style can/has been revised, as per previous feedback provided that the content is lengthy. • Health and Safety Update: The Committee received an update on the activities of the Health and Safety Team for the period July 2022 to September 2022. The report focused on learning opportunities from the Cwm Taf Morgannwg University Health Board prosecution following non-compliance with a Health and Safety Improvement Notice, plus-size patient clinical pathways, Manual handling and Prevention and Management of Violence and Aggression, (PAMOVA)/Reducing Restrictive Practice (RRP). <p>The Head of Health, Safety and Fire at Cwm Taf University Health Board (CTUHB) has been invited to attend an upcoming Listening and Learning Sub Committee to discuss learning outcomes from the prosecution of CTUHB following the death of a vulnerable patient in 2021. Members received assurance from the Health Board's current Health and Safety Improvement Notice monitoring process, which is overseen by the Quality and Assurance team, who ensure evidence is received prior to confirming compliance.</p> <p>Members noted the backlog of staff requiring patient Manual Handling training. This relates to foundation training of clinical staff including Healthcare Support Workers nurses and midwives. The Manual Handling and Workforce Team are working to implement a number of solutions to support the team, such as revising the induction-training programme to ensure that staff are attending training specifically for their roles, weekly touchpoint meetings with the Learning and Development Team to confirm trainer scheduling and exploring initiatives to improve non-attendance. Members also received assurance from a number of additional manual handling training dates that have been scheduled for 2022. In response to a query regarding the impact on start dates for staff, Members noted a range of measures undertaken to avoid delays in start dates, including risk assessments for roles.</p> <p>The Committee noted the update provided on a response from Dyfed Powys Police to a Health Board Member of staff who was assaulted at a Mental Health facility, with the conveyed stance that <i>'unless any assault is serious by definition, there is no benefit or public interest in pursuing a criminal investigation against a person who is receiving treatment in a secure mental health facility.'</i> With regard to a meeting scheduled with Senior Officers to challenge this response – as this statement does not comply with the joint NHS Wales, Police and Crown Prosecution Service's Obligatory Response to Violence in Healthcare Guidance – the Chair of HSC requested the date of the meeting and outcome to be fed back to the Committee.</p>	

- **Fire Safety Audit System Report:** The Committee received the Annual NHS Wales Shared Services Partnership, Specialist Estates Services Fire Audit which was submitted on 9th August 2022. The report indicated an improved position in relation to fire risk assessments across a number of sites and provided progress on the major investment in Glangwili and Prince Philip Hospitals on Phase 1 works, a Fire Safety Governance Review and the updated Fire Safety Policy.

Live fire risk assessments are now being undertaken via the Boris system with a full update provided to the Fire Safety Group on 6th June 2022. All fire risk assessments will transfer to the new Boris system over the next 12 months.

- **Fire Safety Update Report:** The Committee noted progress of the phased works underway at WGH, with the Fire Extension Notice for advance works lifted following the improvements carried out. The request for an extension to the current programme to March 2023 from the Supply Chain Partner has been approved following full scrutiny and in conjunction with Mid and West Wales Fire and Rescue Service (MWWFRS) and the programme now has a revised completion date of February 2023. The Committee received an update on the ongoing management discussions to progress the decant ward for the Phase 2 works at WGH and received assurance that the team is working hard to ensure that any delay will not impact the commencement of work.

With regard to the Phase 1 works and the remaining horizontal escape routes at GGH, the previously forecast completion date of April 2023 remains in place, however, this will be closely monitored and reviewed as the project progresses.

An audit of the Fire Safety Policy and compliance has been undertaken, and progress of the developed action plan will be reported through the Fire Safety Group (FSG) and the Health and Safety Committee (HSC) where appropriate.

The Committee received an update on Letters of Fire Safety Matters (LoFSM) received by the Health Board (HB), relating to Tregaron Hospital, GGH and Bronglais Hospital and received assurance on the progress to address the LoFSM in collaboration with MWWFRS. MWWFRS has revised their LoFSM programme to align with the HB's forward work programme.

With regard to the Health Board's Fire Safety Training compliance detailed within the report, Members noted that improvements in compliance are still required and that operational discussions are taking place to increase the team leads' support for staff to prioritise fire safety training.

- **Health and Safety Regulations: Estates Low Voltage and High Voltage Electricity Compliance:** The Committee noted that the HB has introduced a range of measures to support compliance with the regulations and minimise risk as part of the diverse property portfolio. However, there are a number of key recommendations to carry out as part of the authorised engineer audits. Members received assurance that each recommendation has been assigned to a specific staff lead and timelines for completion agreed. All recommendations are being carefully tracked by the Estates Compliance Team, using a RAG-rated tracker system. The Committee agreed that an update report in 6 months' time will be beneficial and that this will be included as part of

the HSC forward work programme, and that an update to the Datix register would be discussed with the Head of Assurance and Risk.

- **Corporate Risks Assigned to HSC:** The Committee received an update on the corporate risks assigned to HSC, noting the inclusion of a new risk: 1433 - Inability to maintain routine and emergency services in the event of a severe pandemic event. Ms Alison Shakeshaft informed the Committee that the new risk had been discussed at length at the Executive Risk Meeting and it was felt that in light of the current pressures following the COVID-19 pandemic, there is a risk to maintain services should there be a similar outbreak. Members received assurance from the learning and control measures in place following the COVID-19 pandemic.
- **Operational Risks Assigned to HSC:** The Committee received an update on the operational risks assigned to HSC and noted that the Director of Operations and Director of Nursing, Quality and Patient Experience will be meeting with the Operations team to review Risk 222: Exposure to asbestos through contact with asbestos containing materials (ACMs). Clarity was sought by the Committee on whether the sites involved in this risk include General Practices and the Deputy Director of Operations undertook to clarify.
- **Policies and Procedures for Approval:**
 - **Procedure 1069: Assessment And Management Of Environmental Ligature Risk:** The Committee approved Procedure 1069 as per the paper presented.
 - **A Request for an Extension of Estates Policies:** The Committee approved the request for extensions for the review of the following policies:
 - 403 – Water Safety Policy - 05 March 2022
 - 020 – Asbestos Policy - 28 May 2022
 - 393 – Confined Space Policy - 17 July 2022
 - 442 – Severe Weather Gritting Policy - 17 July 2022
 - 144 - Operational Maintenance Policy - 14 September 2022
 - **Policy 843: Reducing Restrictive Practice:** The Committee approved Policy 843 as per the paper presented.
 - **Procedure 463: Display Screen Equipment And Workstation Assessment:** The Committee approved Procedure 463, with clarity sought on whether the supplier should be stipulated.

Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:

- Members were pleased to note the positive developments in working arrangements with the MWWFRS, with the recent establishment of a Fire Compliance Team which has notably improved the dialogue between the organisations in fire safety matters.

Risgiau Allweddol a Materion Pryder / Key Risks and Issues/ Matters of Concern:

None

**Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /
Planned Committee Business for the Next Reporting Period:**

Adrodd yn y Dyfodol / Future Reporting:

In addition to the items scheduled to be reviewed as part of the Committee's work programme, following up progress of the various actions identified above will be undertaken.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

14th November 2022