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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	2nd December 2019	Agenda Item	2.1
Report Title	Exception Report for SBUHB Health and Safety Risk Register		
Report Author	Dr Laurie Higgs, Head of Health and Safety		
Report Sponsor	Gareth Howells, Director of Nursing		
Presented by	Gareth Howells, Director of Nursing		
Freedom of Information	Open		
Purpose of the Report	This paper informs the Health and Safety Committee of progress and other matters relating to the management of key Health, Safety and fire risks		
Key Issues	Monitoring of progress of key Swansea Bay University Health Board (SBUHB) Health, Safety and Fire risks		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
		✓	
Recommendations	Members are asked to Receive the report		

1. INTRODUCTION

This paper informs the Health and Safety Committee of progress and other matters relating to the management of key Health, Safety and fire risks. The high level risk register is attached as **Appendix 1** to this report.

2. BACKGROUND

Board level knowledge and scrutiny of key risks is good governance. Further development of the SBUHB risk register has been made following a recent Health and Safety Executive (HSE) inspection of the organisation. Further risks are recorded aligned to the reorganisation of the Health Board.

3. GOVERNANCE AND RISK ISSUES

Failure to effectively manage health and safety risk can have significant legal, moral and financial implications. These include increased sickness and absence, management of resources, equipment and premises and the potential risk of legal action both statutory and for compensation.

4. FINANCIAL IMPLICATIONS

There are no direct financial implications from this report although the management of a wide range of risks and compliance with standards may require investment by the Health Board.

5. RECOMMENDATIONS

Members are asked to receive the report

Governance and Assurance										
Link to corporate objectives	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
	✓		✓		✓		✓			
Link to Health and Care Standards	Staying Healthy	Safe Care	Effective Care	Dignified Care	Timely Care	Individual Care	Staff and Resources			
	✓	✓								
Quality, Safety and Patient Experience										
Improved safety for staff, patients, visitors and contractors.										
Financial Implications										
Failure to effectively manage health and safety risk can have significant legal, moral and financial implications. These include increased sickness and absence, management of resources, equipment and premises and the potential risk of legal action both statutory and for compensation.										
Legal Implications (including equality and diversity assessment)										
Potential breach of UK Health and Safety law										
Staffing Implications										
Increased sickness and absence										
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)										
None										
Report History		None								
Appendices		Appendix 1 - Swansea Bay Health Board Health and Safety Risk Register Review December 2019								

APPENDIX 1

Swansea Bay Health Board Health and Safety Risk Register Review December 2019

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 1	<p><u>Health and Safety Resources</u></p> <ul style="list-style-type: none"> • Insufficient resources to support Units etc. to discharge their duties including training, audit etc. • Resources to manage HSE and Fire Safety enforcement duties insufficient • Severely limited availability of staff with specific competencies to meet demand e.g. COSHH • Staff retirements (imminent and proposed) and other staff matters will further impact on resources with time lag for replacement e.g. Violence and Aggression lead, Manual Handling Trainer and Training Coordinator • 	15	20	↑	↓	December 2019	<ul style="list-style-type: none"> • HSE work further affecting limited capacity • Clerical staff taking on additional responsibilities and being developed to support departmental work e.g. incident review and case management • Increased demand to support units including incident and data analysis further impacting on resources

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 2	<p><u>Health and Safety Executive (HSE) Improvement notices</u></p> <ul style="list-style-type: none"> • 6 improvement notices for manual handling and violence and aggression complied • 2 improvement notices manual handling and violence and aggression) extended. • 1 improvement notice for Tonna Hospital regarding lone working and traffic management complied with • 1 notice regarding the consistency management of incident reporting and learning lessons extended • Additional two notices for Estates electrical safety issued October 2019 • HSE further review December 2019 	16	16	→	↑	Dec 2019	<ul style="list-style-type: none"> • HSE Enforcement group has developed action plan • Regular reporting of progress to SWUHB Board H&S Comm. and Operational H&S Group • H&S Staff working closely with units to update risk assessments, training needs analysis, training delivery etc. • Revised governance procedure issued across Health Board • Investment approved for Tonna • Regular incident reports provided to all levels of the Health Board

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 4	<p><u>RIDDOR (Reporting of Injuries, diseases and Dangerous Occurrence Regulations)</u></p> <ul style="list-style-type: none"> • Some incidents occurring in Units not reported to HSE within legal timescales • Poor investigation and learning lessons (across all incident types) 	16	12	↓	↑	Mar 2020	<ul style="list-style-type: none"> • H&S Staff responsible for reporting to HSE but reliant on timely reporting by Units e.g. staff absence • RIDDOR procedure issued to Units and discussed in Unit H&S Groups Governance • Regular RIDDOR reports continue to be provided to Operational H&S Groups and Unit H&S Groups • Clerical Unit in H&S assisting in the regular monitoring of incidents • Updated incident reporting policy being reviewed

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 5	<p><u>Cladding at Singleton Hospital</u></p> <ul style="list-style-type: none"> • Current cladding does not meet fire safety standards • Potential risk of spread of fire across south face of building 	15	15	➔	➔	Dec 2019	<ul style="list-style-type: none"> • Regular review by HSE working group • Cladding Side panels being removed currently • Awaiting funding for full removal of south facing cladding • Ward specific fire safety procedures implemented • Significant fire in Ward 12 in April 2019 tested procedures and generally satisfactory but lessons learnt. • Reduction in number of active Fire Wardens in wards identified and new training programme being instigated

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 6	<p><u>Management of Alerts, roles and responsibilities, governance</u></p> <ul style="list-style-type: none"> Assurance systems for action taken need to be improved with closure of action taken and better monitoring 	8	6	↓	↑	Sept 2019	<ul style="list-style-type: none"> Governance report for Medical Device Alerts produced for all operational Health and Safety Groups Requirement to review include in Unit governance arrangements

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 7	<p><u>Effective Arrangements for the Management of COSHH (Control of Substances Hazardous to Health)</u></p> <ul style="list-style-type: none"> Limited assurance report from Internal Audit in areas of consistency of risk assessment processes, monitoring etc. 	16	12	↓	→	Dec 2019	<ul style="list-style-type: none"> Risk rating reviewed Updated COSHH procedure developed No central resource to support units, train staff etc.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 8	<p><u>Effective Arrangements for the Radon Gas Sampling)</u></p> <ul style="list-style-type: none"> No resources for programme of monitoring of Radon gas exposure risk across Health Board 	6	6	→	→	Dec 2019	<ul style="list-style-type: none"> Procedure developed and costings available to implement full Health board programme Confirm funding

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 9	<p><u>Lone Workers</u></p> <ul style="list-style-type: none"> Review the effectiveness of lone worker arrangements Compliance with HSE inspection of Health Board 	12	12	→	→	Dec 2019	<ul style="list-style-type: none"> Updated lone worker policy submitted to Operations Health and Safety group for approval (includes updated risk assessment preform) Review of lone worker protection arrangements being undertaken in Primary Care and Community Unit Review of lone worker arrangements in Tonna hospital implemented Review of lone worker arrangements for porter staff in Singleton implemented.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 10	<p><u>Management of Display Screen Equipment (VDU)</u></p> <ul style="list-style-type: none"> Arrangements in place for risk assessment and special risk assessment No training system in place 	6	6	→	→	Jun 2019	<ul style="list-style-type: none"> No progress.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 11	<p><u>Management of Health and Safety in Units</u></p> <ul style="list-style-type: none"> Inconsistent approach in Units regarding management of and monitoring of health and safety performance Some committees inactive or with poor management representation 	16	15	→	↑	Sept 2019	<ul style="list-style-type: none"> Update governance structures identified All Service Delivery Units now have an active Health and Safety group but will need to align to new governance procedure.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 12	Health and Safety Internal Audit Report <ul style="list-style-type: none"> Reasonable assurance gained in December 2018 review 	8	8	→	↑	Sept 2019	<ul style="list-style-type: none"> Update governance structures identified All Service Delivery Units now have an active Health and Safety group but will need to align to new governance procedure.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 13	Fire Safety <ul style="list-style-type: none"> Limited assurance report for fire safety primarily concerned regarding the monitoring and control of risk arising from Fire risk assessments 	16	16	→	→	Sept 2019	<ul style="list-style-type: none"> Consideration is being made to using the DATIX risk module to monitor compliance. This will require the agreement of the DATIX User group.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at December 2019
H&S 14	Hoist and other equipment falling out of manufacturer's support <ul style="list-style-type: none"> As equipment becomes older spare parts not available for repair etc. 	12	6	↓	↑	Sept 2019	<ul style="list-style-type: none"> £700K Replacement programme completed in 2018-19 Further review of manual handling equipment inventory required e.g. bath hoists for possible inclusion on 2019-20 capital programme