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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	02 December 2019	Agenda Item	2.6
Report Title	COSHH Update		
Report Author	Mark Parsons, Interim Assistant Director of Health & Safety Jacqui Maunder, Interim Head of Compliance		
Report Sponsor	Gareth Howells, Director of Nursing and Patient Experience		
Presented by	Darren Griffiths, Associate Director of Performance		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide the Health and Safety Committee with an update on the processes in place to manage the Control of Substances Hazardous to Health (COSHH) effectively.		
Key Issues	<p>The COSHH internal audit identified that:</p> <ul style="list-style-type: none"> • There was a need for an overarching Health Board wide procedure relating to COSHH, • There was inconsistency across the departments reviewed in the approach to risk assessment and the management of COSHH, • Roles and responsibilities were not clearly defined for the role of Head of Health and Safety, the Health and Safety Committee and associated departmental managers and governance arrangements, • There was a need for periodic monitoring or auditing for Health and Safety (COSHH) compliance, • There was a need to measure and record risk assessments and ensure that a process was in place to escalate risks to the health & safety risk register. • There was inconsistency in incident reporting and the sharing of lessons learnt. 		
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	<p>Members are asked to :</p> <ul style="list-style-type: none"> • NOTE the report 		

CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) UPDATE

1. INTRODUCTION

The purpose of this report is to provide the Health and Safety Committee with an update on the processes in place to manage the Control of Substances Hazardous to Health (COSHH) effectively.

2. BACKGROUND

2.1 Internal Audit 2018/19

As part of the internal audit plan which was commissioned in order to evaluate the processes and procedures that support the management and control of substances hazardous to health (COSHH), within the University Health Board a limited assurance assessment rating was received by internal audit in relation to COSHH in 2018-2019.

COSHH legislation requires employers to control substances hazardous to health and prevent/reduce their exposure to employees, contractors or other people.

The audit considered (from an estates perspective), the adequacy of the Health Boards management arrangements and associated processes to identify, risk, and assess and implement control measures in compliance with the regulations (i.e. how control was assured through the Estate). The audit did not include an audit of clinical practices e.g. control of biological materials, nor prescribed medicines, and included audited controls relating to more general substances (e.g. disinfecting materials) as operated by staff throughout the Health Board.

The scope and objectives of the audit was to determine the adequacy and operational compliance with systems and procedures operated by the Health Board, taking account of relevant NHS and other supporting regulatory and procedural requirements, as appropriate. The internal audit assessment focussed on Governance, Monitoring and Reporting, Risk Management, Control Measures and Feedback and Lessons Learnt.

2.2 Internal Audit Findings

Some positives were identified during the internal audit assessment, however four out of the five areas targeted achieved only a "limited assurance" assessment rating and one achieving reasonable assurance, as outlined in the table below:

Area	Priority	Internal Audit Assessment Rating	Comments
Governance: 1. Ensure job descriptions, committee remits and procedures appropriately define COSHH responsibilities and accountabilities.	M	Limited Assurance	1. Plans are in place to review JD's and governance structures for COSHH and will include roles and responsibilities of

Area	Priority	Internal Audit Assessment Rating	Comments
<p>2. Health Board wide COSHH Policy/Procedure to be developed.</p> <p>3. All department/directorate COSHH procedures to be aligned with the HB wide policy/procedure.</p>	<p>H</p> <p>M</p>		<p>COSHH champions.</p> <p>2. COSHH procedure now in place</p> <p>3. Plans are in place to review governance structures for COSHH and will be aligned to HB wide procedure</p>
<p>Monitoring and Reporting:</p> <p>4. Operation of COSHH systems to be audited and reported in accordance with the requirements outlined in the annual Health and Safety report.</p> <p>5. COSHH monitoring and reporting arrangements will be defined with HB procedural requirements.</p> <p>6. Periodic reporting to demonstrate appropriate coverage including testing of the built environment and monitoring equipment.</p>	<p>H</p> <p>H</p> <p>M</p>	<p>Limited Assurance</p>	<p>4. This has been included in the updated action plan for COSHH, with a targeted date May 2020.</p> <p>5. Included in procedure</p> <p>6. Periodic testing will be undertaken when identified by risk assessment</p>
<p>Risk Management – Risk Assessment:</p> <p>7. The HB COSHH Policy/Procedure will specify management and reporting requirements</p> <p>8. Key Department COSHH risk issues will inform the HB Health & Safety risk register.</p>	<p>M</p> <p>H</p>	<p>Limited Assurance</p>	<p>7. The procedure stipulates this is to be recorded on Datix This will be recorded on Datix</p> <p>8. The Health Surveillance Group will consider COSHH risk issues and inform the H&S Ops group, who</p>

Area	Priority	Internal Audit Assessment Rating	Comments
			monitor the H&S RR
Control Measures: 9. Risk assessments and work specifications for contractors will include area specific notification of potential exposure to hazardous substances in accordance with Health & Safety regulations. 10. Training: Management will implement systems by which they are assured that appropriate COSHH training is available.	L M	Reasonable Assurance	9. The Control of contractors policy specifies the requirement for Method statements and risk assessments for works being undertaken 10. A H&S specific training programme for COSHH is targeted for March 2020
Feedback and Lessons Learnt: 11. HB to review the consistency of the approaches applied across departments / risk areas 12. Best practice to be shared between departments as part of the on-going audit and oversight by central management.	H M	Limited Assurance	11. Plans are in place to review governance structures for COSHH and will be aligned to HB wide procedure 12. The Health Surveillance group will review and share good practice with the H&S Ops group and H&S newsletter

The 12 recommendations outlined consisted of five high priority level recommendations, six medium priority level recommendations and one a low priority level recommendation.

3. GOVERNANCE & RISK

Health and Safety (COSHH) governance is as important as any other aspect of governance. It is a fundamental part of an organisation's overall risk management function which is a key responsibility of all directors, managers and staff. The governance structure for Health and Safety was refreshed and approved earlier this year and is being embedded into the five units and their committee/group structures, this will enable greater scrutiny moving forward.

A review of the current health and safety policies has been undertaken with a revised SBUHB health and safety policy and procedure review and development flow chart now implemented, this will assist the HB to ensure that policies/procedures are developed and updated regularly as required to ensure effective governance.

The COSHH procedure has been reviewed and submitted to the Health and Safety Operational Group for review and approval. The group did not suggest any amendments to the updated document and the document be uploaded on to the policy section and health and safety section of the staff intranet, and will also be communicated through the H&S newsletter. The updated COSHH is presented at **Appendix 1** for information/approval.

Within the NHS generally COSHH risks have reduced by the substitution of substances to less harmful products and technology. However, this does not reduce the legal requirements under COSHH to carry out suitable and sufficient assessments of the risks, this must be done by a competent person.

On 9 October 2019 a Health Surveillance meeting was convened to review current processes in place for health surveillance in relation to substances covered under COSHH. It was agreed that this group should meet quarterly over the next 12 months as there were a number of issues that require action. Initial action was to collate all substances from the various departments to understand the range of products used. So a HB wide COSHH database is being compiled to fully understand what products are being used and where.

The draft database headings include:

Ref No:	Product	Manufacturer	Where used & Techniques	Risks	EH40 Exposure Limits (8hrs unless otherwise)	Risk Assessment	Local Rules/ Controls	Revision No:	Owner	Active Date	Review Date
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4. NEXT STEPS

There are a number of actions to be taken to ensure the HB has appropriate COSHH arrangements in place, which are outlined in the table below:

Action	Target Date
Full review of COSHH arrangements	May 2020
Complete COSHH database	March 2020
Review current COSHH risk assessments and update (Develop generic RA where applicable)	May 2020
Undertake COSHH risk assessments by product where identified	May 2020
Review current levels of COSHH assessors	Feb 2020
Identify COSHH assessors for each department	March 2020
Review training requirements (initial and recurring)	March 2020
Benchmark with other NHS HB/Trusts	March 2020

Progress and delivery will be driven through the Health Surveillance Group and update reports will be given to each Service Delivery unit, periodically to the Health and Safety Operational Group, and exception reports will be presented to the Health and Safety Committee.

A further update on progress will be provided to the Health and Safety Committee in March 2020.

5. FINANCIAL

There will be financial resource implications to implement the initial training, with a recurring cost for refresher training that is recommended to be two yearly. Adequate time to facilitate staff undertaking the training is also required.

6. RECOMMENDATION

Members are asked to:

- **NOTE** the report

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>Following the final internal audit report 2018-2019 a review has been undertaken to address the limited assurance assessment areas highlighted in the report. A Health Board wide COSHH procedure has been developed and approved. An initial Health Surveillance Group meeting has taken place and will be the focus group covering COSHH to ensure effective systems, cooperation and ownership of health and safety at all levels are in place to building a positive, safe and healthy environment.</p>		
Financial Implications		
<p>There are financial implications to be able to implement and maintain the training required to meet the Health Board's legal requirements.</p>		
Legal Implications (including equality and diversity assessment)		
<p>Swansea Bay University Health Board (SBUHB) is committed to providing and maintaining a safe and healthy work place and to provide suitable resources, information, training and supervision on health and safety to all members of staff, patients Contractors and visitors to comply with the legislative and regulatory framework on health and safety which includes:</p> <ul style="list-style-type: none"> • The Health & Safety at Work Act 1974 • Management of Health and Safety at Work Regulations 1999 • Manual Handling Operations Regulations 1992 • The Electricity at Work Regulations 1989 		
Staffing Implications		
<p>Staff will be briefed on the developments through health and safety meetings/forums or other groups as determined necessary ensure that health and safety (COSHH) is discussed, monitored and acted upon. A report on the longer term health and safety staffing and resource requirements is being reviewed.</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The Act requires the Health Board to think more about the long term, how we work better with people and communities and each other, look to prevent problems and take a more joined up approach with partners. There will be long term risks that will</p>		

affect both the delivery of services, therefore, it is important that you use these five ways of working (Long Term Thinking, Prevention, Integration, Collaboration and Involvement) and the wellbeing goals identified in the Act in order to frame what risks the Health Board may be subject to in the short, medium and long term. This will enable The Health Board to take the necessary steps to ensure risks are well managed now and in the future.

Report History	-
Appendices	Appendix 1 – COSHH Procedure

Appendix 1. COSHH Procedure



COSHH
procedure_advice_risk