



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



| | | | |
|-------------------------------|---|--------------------|------------|
| Meeting Date | 01 April 2021 | Agenda Item | 3.1 |
| Report Title | Health and Safety Arrangements for Support / Hotel Services | | |
| Report Author | Joanne Jones, Head of Support Services | | |
| Report Sponsor | Craigie Wilson, Deputy Chief Operating Officer | | |
| Presented by | Joanne Jones, Head of Support Services | | |
| Freedom of Information | Open | | |
| Purpose of the Report | <p>To provide the Health and Safety Committee with an update on the Hotel/Support Services management of Health and Safety.</p> <p>The report also provides a summary of key issues, risks and the plans to address them.</p> | | |
| Key Issues | <p>The Support / Hotel Services Department is a diverse department comprising many departments including domestic, portering, catering, caretaking, security, accommodation, car parking, switchboard, linen and laundry, all have different Health and Safety issues and potential risks.</p> <p>The services are provided on all Health Board premises and therefore linking in and understanding each site's Health and Safety policies and procedures is vital.</p> <p>The key issues for 2021/22 include:</p> <ul style="list-style-type: none"> • Implementing the additional domestic hours for National Standards of Cleanliness (NSoC) • Implementing the Covid-19 Environmental Cleanliness Standards • Completing the mobilisation of the car parking contract on 9 sites • Reviewing services as lockdown restrictions change and services return to "normal" • Reviewing incidents and preparing a support services work plan for 2021 and 2022 • Encouraging managers and staff to undertake PADR's • Encouraging managers and staff to undertake mandatory/statutory training | | |

| Specific Action Required (please choose one only) | Information | Discussion | Assurance | Approval |
|--|---|--------------------------|-------------------------------------|--------------------------|
| | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Recommendations | Members are asked to: <ul style="list-style-type: none"> • Note the content of the report | | | |

SUPPORT SERVICES HEALTH AND SAFETY ASSURANCE REPORT

1. INTRODUCTION

This report outlines the Health and Safety reporting and assurance arrangements within Support / Hotel Services.

The Support / Hotel Services Department is diverse comprising of many departments including domestic, portering, catering, caretaking, security, accommodation, car parking, switchboard, linen and laundry, which all have different Health and Safety components and risks.

The services are provided on all Health Board sites and the departments range from the largest, Morriston Hospital Domestic Department, which has approximately 180 WTE (220 head count) to the 0.2 WTE (1 head count) in Pontarddulais Health Centre with a lone worker providing a caretaking service.

2. BACKGROUND

2.1 General

The current Health and Safety reporting and governance consists of:

- An operational (Hotel/Support Services) Health and Safety meeting is held every 3 months on each acute site. The meeting is chaired by a site Support / Hotel Services Manager - The notes of the meetings are shared with the Deputy Head of Support Services who presents the "exceptions" at the Support Services Management Board.(SSMB)
- Governance issues for Support / Hotel Services are dealt with on a monthly basis at the SSMB - A Governance report details for example the number and nature of incidents that have occurred that month and any new risks that need to be discussed.
- A Support / Hotel Services management representative attends all of the acute sites Health and Safety Committee meetings - The Head of Support Services also attends the Health Board Health and Safety Operational and Health and Safety Corporate Meetings.

2.2 Statistics / Performance

Mandatory Training Compliance at March 2021:

Overall compliance for Support/Hotel Services, as recorded on ESR, is at 64.8% as at March 2021

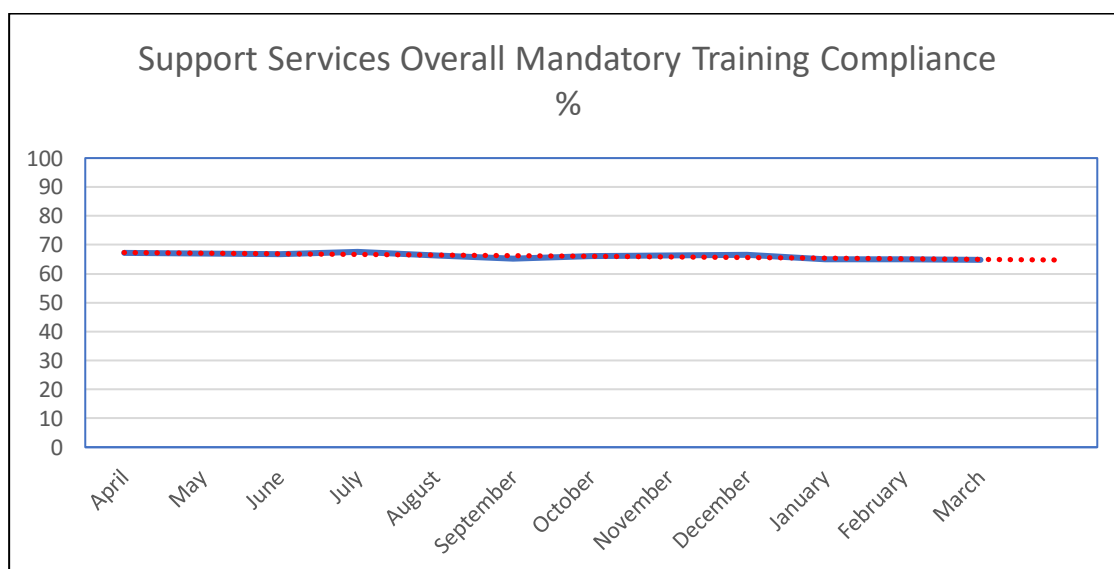
| Competence | Compliance % |
|---|---------------------|
| NHS CSTF Equality, Diversity and Human Rights - 3 Years | 63.74 |
| NHS CSTF Fire Safety - 2 Years | 61.31 |
| NHS CSTF Health, Safety and Welfare - 3 Years | 69.35 |
| NHS CSTF Infection Prevention and Control - Level 1 - 3 Years | 64.39 |
| NHS CSTF Information Governance (Wales) - 2 Years | 49.35 |
| NHS CSTF Moving and Handling - Level 1 - 2 Years | 55.14 |
| NHS CSTF Resuscitation - Level 1 - 3 Years | 64.30 |
| NHS CSTF Safeguarding Adults - Level 1 - 3 Years | 63.74 |
| NHS CSTF Safeguarding Children - Level 1 - 3 Years | 63.74 |
| NHS CSTF Violence and Aggression (Wales) - Module A | 68.69 |
| NHS MAND Dementia Awareness - No Renewal | 71.50 |
| NHS MAND Social Services and Well Being Act Wales Awareness (2014) | 87.85 |
| NHS MAND Violence Against Women, Domestic Abuse and Sexual Violence | 58.60 |
| Grand Total | 64.80 |

Overall compliance by department detailed below

| Department | Compliance % |
|---|---------------------|
| 130 P201 Cimla Catering | 19.23 |
| 130 P207 Llwyneryr Domestics | 94.87 |
| 130 P213 NPTH Catering | 90.56 |
| 130 P214 NPTH Community Domestics | 44.76 |
| 130 P216 NPTH Hotel Services Management | 100.00 |
| 130 P217 NPTH Housekeeping | 72.05 |
| 130 P218 NPT Laundry & Linen | 82.69 |
| 130 P220 NPTH Porterage & Security | 95.77 |
| 130 P234 Tonna Hotel Services | 69.68 |
| 130 P600 Singleton Catering | 86.26 |
| 130 P602 Cefn Coed Catering | 64.29 |
| 130 P603 Morryston Catering | 83.53 |
| 130 P610 Community Domestics | 17.31 |
| 130 P611 Singleton Domestics | 89.62 |

| | |
|---|---------------------|
| 130 P612 Morriston Domestics | 17.22 |
| Department | Compliance % |
| 130 P613 West Domestics Management | 92.31 |
| 130 P620 Facilities Management | 33.90 |
| 130 P623 West Income Generation | 81.73 |
| 130 P624 Singleton Newsagent | 100.00 |
| 130 P627 Morriston Car Parking | 100.00 |
| 130 P640 Gorseinon Hotel Services | 61.54 |
| 130 P641 PTRC | 75.90 |
| 130 P641 Other Mental Health Hotel Services | 100.00 |
| 130 P643 Cefn Coed Hotel Services | 64.55 |
| 130 P652 Singleton Laundry and Linen | 94.87 |
| 130 P653 Morriston Laundry & Linen | 94.87 |
| 130 P654 Central Laundry | 87.73 |
| 130 P660 Singleton Porters | 88.97 |
| 130 P661 Morriston Porters | 62.56 |
| 130 P662 West Portering Management Team | 82.05 |
| 130 P663 Cefn Coed Porters | 61.54 |
| 130 P671 Morriston Security | 65.81 |
| 130 P680 West & Community Telephonists | 76.30 |
| Grand Total | 64.80 |

Overall compliance has slipped slightly over the course of the Pandemic, as shown on the chart below. (April 2020 to March 2021)



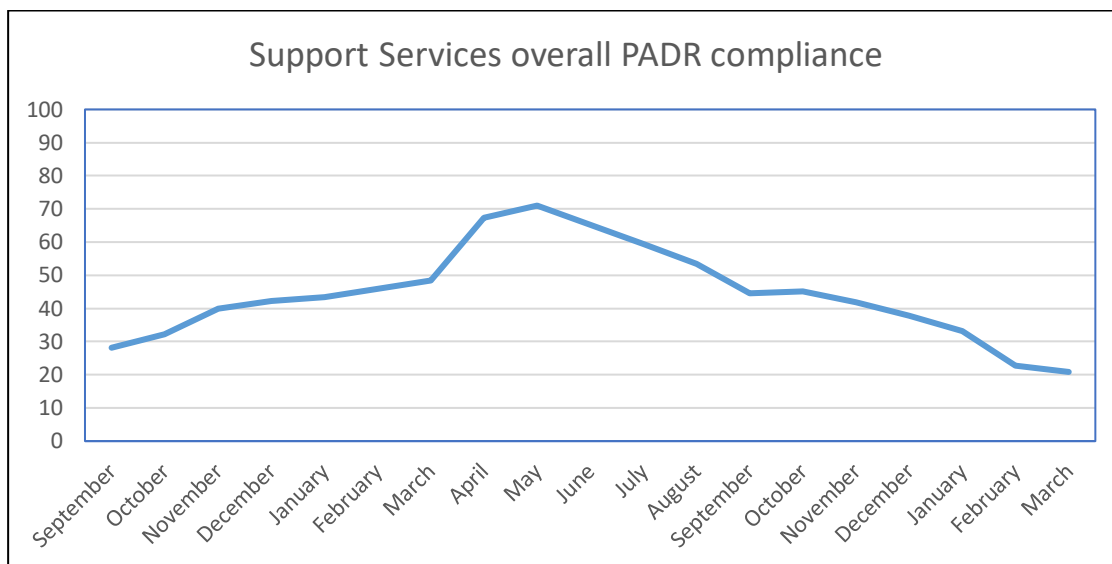
Each departmental manager has been given an individual improvement target to reach full compliance.

PADR compliance is at March 2021

Overall PADR compliance for Support Services is 20.85%, compliance by department is shown in the table below.

| Dept | Compliance% |
|---|--------------|
| 130 P201 Cimla Catering | 0.00 |
| 130 P207 Llwyneryr Domestic | 0.00 |
| 130 P213 NPTH Catering | 9.52 |
| 130 P214 NPTH Community Domestic | 0.00 |
| 130 P216 NPTH Hotel Services Management | 0.00 |
| 130 P217 NPTH Housekeeping | 44.55 |
| 130 P218 NPT Laundry & Linen | 0.00 |
| 130 P220 NPTH Porter & Security | 0.00 |
| 130 P234 Tonna Hotel Services | 0.00 |
| 130 P600 Singleton Catering | 1.98 |
| 130 P602 Cefn Coed Catering | 0.00 |
| 130 P603 Morryston Catering | 57.14 |
| 130 P610 Community Domestic | 0.00 |
| 130 P611 Singleton Domestic | 55.20 |
| 130 P612 Morryston Domestic | 0.00 |
| 130 P613 West Domestic Management | 0.00 |
| 130 P620 Facilities Management | 7.41 |
| 130 P624 Singleton Newsagent | 0.00 |
| 130 P625 Singleton Car Parks | 0.00 |
| 130 P627 Morryston Car Parking | 0.00 |
| 130 P629 Morryston Accommodation | 0.00 |
| 130 P640 Gorseinon Hotel Services | 0.00 |
| 130 P641 PTRC | 100.00 |
| 130 P643 Cefn Coed Hotel Services | 0.00 |
| 130 P652 Singleton Laundry and Linen | 0.00 |
| 130 P653 Morryston Laundry & Linen | 0.00 |
| 130 P654 Central Laundry | 2.38 |
| 130 P660 Singleton Porters | 33.96 |
| 130 P661 Morryston Porters | 31.86 |
| 130 P662 West Porter Management Team | 0.00 |
| 130 P663 Cefn Coed Porters | 0.00 |
| 130 P671 Morryston Security | 0.00 |
| 130 P680 West & Community Telephonists | 13.04 |
| Grand Total | 20.85 |

After a period of improvement in 19/20, PADR compliance across Support Services has declined significantly over the last year, as shown on the chart below. As with Statutory training compliance, all departmental line managers have been given individual improvement targets over the coming months

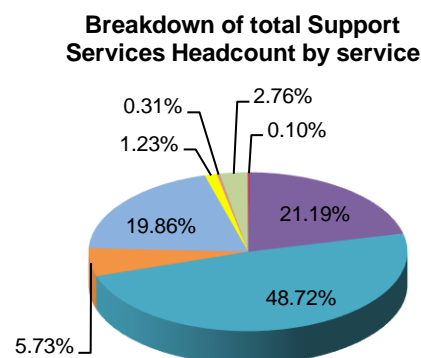
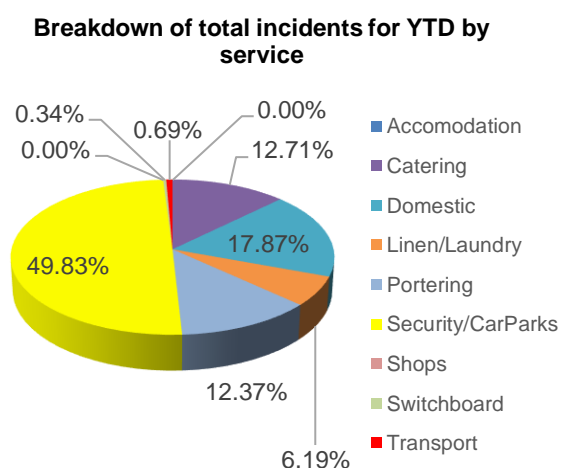


Incidents

Summary of Incidents by service for April 2020 to February 2021 is shown in the table below.

| Service | Apr | May | June | July | Aug | Sept | Oct | Nov | Dec | Jan | Feb |
|---------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Accommodation | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Car Parks | 1 | 0 | 1 | 0 | 0 | 8 | 7 | 2 | 3 | 0 | 2 |
| Catering | 3 | 6 | 3 | 5 | 0 | 2 | 3 | 5 | 2 | 2 | 7 |
| Domestic | 9 | 3 | 3 | 6 | 5 | 7 | 6 | 2 | 5 | 3 | 4 |
| Laundry/Linen | 0 | 0 | 2 | 0 | 1 | 3 | 5 | 2 | 0 | 1 | 4 |
| Portering | 8 | 2 | 2 | 4 | 4 | 1 | 5 | 1 | 1 | 3 | 5 |
| Security | 7 | 3 | 16 | 21 | 21 | 7 | 9 | 2 | 11 | 7 | 13 |
| Shops | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Switchboard | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Transport | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 28 | 14 | 27 | 37 | 32 | 29 | 35 | 14 | 22 | 16 | 35 |

The charts below show %age of Incidents by service, and Support Services total WTE by service



Summary of Incidents by type for April 2020 to February 2021 is shown in the table below.

| Incident type (Tier 1) | No. |
|--|------------|
| Accidents/Falls | 92 |
| Administrative Processes (Excluding Documentation) | 1 |
| Behaviour | 4 |
| Behaviour (Including Violence and Aggression) | 105 |
| Blood/Plasma Products | 6 |
| Communication | 4 |
| Diagnostic Processes/Procedures | 1 |
| Exposure to Environmental Hazards | 6 |
| Fires, Fire Alarms and Fire Procedures | 2 |
| Infection Control Incident | 3 |
| Infection/Infestation | 3 |
| Medical Devices, Equipment, Supplies | 3 |
| Nutrition Food/Meals from Kitchen | 1 |
| Patient Accidents/Falls | 2 |
| Property | 21 |
| Security of Organisation's Property, Data and Buildings | 16 |
| Service Disruptions (environment, infrastructure, human resources) | 18 |
| Therapeutic Processes/Procedures | 1 |
| Grand Total | 289 |

The largest number of incidents is related to the security staff in Morriston ED. There is often no harm arising as a result of these incidents, they are recorded so that activity can be monitored.

3. GOVERNANCE AND RISK ISSUES

3.1 Health and Safety Risks on Risk Register

There are currently 8 risks relating to Health and Safety on the departmental risk register, these are monitored through the Support Services Management Board (SSMB). These are as follows:

| Title | Site | Department | Risk (in brief) | Risk rating |
|-------|-----------|------------|---|-------------|
| CCTV | Morriston | Security | Most of the CCTV upgrade has been undertaken. A final review needs to take place to ensure all areas are covered. | 9 |

| | | | | |
|--------------------------------------|-----------|-------------|---|----|
| Security cover SAU | Singleton | Security | Temporary staff have been allocated to the site to cover building, staff protection and car parking security. | 9 |
| Car parking | Singleton | Car parking | Too few spaces leading to V&A incidents against staff 66 new spaces are due to be introduced April 2021. | 20 |
| Mandatory training | All sites | All depts. | Training at 64.8% compliance | 15 |
| Slips / trips / falls | All sites | All depts. | Slips and trips by patients staff and visitors due to water, liquids spillages | 9 |
| Cleaning hours in Morriston Hospital | Morriston | Domestic | Funding has recently been allocated. Recruitment is taking place. Hours need to be employed/used on the site. | 9 |
| Availability of glide sheets | Morriston | Portering | Glide sheets need to be available in each ward/ 12 departments for lateral patient movement. | 12 |
| Allergens | All sites | Catering | Compliance with legislation and statutory regulations | |

3.2 Governance

A monthly report is shared with the SSMB detailing the Health and Safety position. The following 5 points highlights the issues considered: -

- Governance and management
- Risks
- Mandatory and statutory training
- Incidents
- Current issues

3.2.1 Governance and management

The department has had to update its reporting arrangements to reflect the units they are based in, as they are extricable linked. The governance arrangements are working reasonably well but further work is still required to ensure that each of the site hotel/support services meetings take place on a regular basis.

The meetings are not as successful as envisaged because the catering concerns are for example so different to the car parking concerns that there is little consistency between departments.

Secondly, many of the issues are raised with department heads or at the unit site meeting so duplication often takes place, as often this is regarded as a further tier of meetings.

Staff side like the opportunity to feedback and discuss their concern at a local level. Concerns should only be escalated if not resolved at the local level.

3.2.2 Risks

There are 8 health and safety risks and actions are being considered to minimise the risk in each case.

| Title | Update on actions taken | Date (by when action is expected) |
|--------------------------------------|--|-----------------------------------|
| CCTV | A report on the current CCTV has been undertaken by an external security company. A final review is required to ensure coverage at the site has been achieved | 1.6.21 |
| Security cover SAU | A report is being prepared which will highlight the cost of security provision in Singleton SAU Increased training is already being offered to Singleton portering staff to limit any risk. Temporary security is in place | 1.7.21 |
| Car parking | Alternative car parking options are being considered | ongoing |
| Mandatory training | Training compliance is increasing a few percentage points each month as a result of changing working arrangements | 1.9.21 |
| Slips / trips / falls | A digital monitoring system is being considered to ensure the areas is routinely checked | 1.9.21 |
| Cleaning hours in Morriston Hospital | Funding has been allocated | 1.4.21 |
| Availability of glide sheets | Situation is being monitored and patients not moves if appropriate equipment is not in place | 1.6.21 |
| Allergens | An action plan is in place | 1.9.21 |

3.2.3 Mandatory and statutory training

Mandatory training compliance is currently 64.80%

Some of the barriers to achieving the mandatory training target include the literacy skills, password retention, difficulty of accessing ESR training and time away from a task orientated role.

The number of temporary and bank staff that have been employed since March 2020 has also had an effect on the position

3.2.4 Incidents

Incidents are considered and trends analysed by the senior management team. Ordinarily the health and safety work plan for the following year is determined by the incidents. However, that is was not the case in 2019/20 because of the HSE improvement notice or in 2020/21 due to COVID, which took precedence. However, this trend analysis will take place for 2021/22

3.2.5 Current issues for 2021/22:

- Implementing the additional domestic hours for National Standards of Cleanliness (NSoC)
- Implementing the Covid-19 Environmental Cleanliness Standards
- Completing the mobilisation of the car parking contract on 9 sites
- Reviewing services as lockdown restrictions change and services return to “normal”
- Reviewing incidents and preparing a support services work plan for 2021 and 2022
- Encouraging managers and staff to undertake PADR's
- Encouraging managers and staff to undertake mandatory/statutory training

4. FINANCIAL IMPLICATIONS

Due to COVID funding streams have been complicated in 2020. Further work is required to consider security requirements on each site and understand the new normal as a result of the lockdown changes.

5. RECOMMENDATION

Members are asked to:

- **Note** the content of 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 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 checked="" type="checkbox"/> |
| | Excellent Staff | <input checked="" 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 type="checkbox"/> |
| | Effective Care | <input type="checkbox"/> |
| | Dignified Care | <input type="checkbox"/> |
| | Timely Care | <input type="checkbox"/> |
| | Individual Care | <input type="checkbox"/> |
| | Staff and Resources | <input checked="" type="checkbox"/> |
| Quality, Safety and Patient Experience | | |
| <p>Health and Safety is a core value to which managers and staff at all levels in the organisation have key roles to play. It is recognised that there are vital links to partners such as trade unions colleagues, by working closely with them to support good standards of safety for all.</p> <p>Patients, families and staff require safe facilities within the Health Board in which to provide the required care which should add to a positive patient, family and staff experience.</p> | | |
| Financial Implications | | |
| <p>No additional funding for the general Health and Safety issues is required as it is already budgeted (required and relevant staff already working for the Health Board), although additional resources may be required to provide enhanced security cover.</p> | | |
| Legal Implications (including equality and diversity assessment) | | |
| <p>The development of effective an Health and Safety Policy is a key requirement of the Health and Safety at Work Act 1974 (HASAWA)</p> | | |
| Staffing Implications | | |
| <p>Adequate staffing levels within all services is essential to maintain good health and safety practices.</p> | | |

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| Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015) | |
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| Long term – acting now by managing and identifying Health and Safety risks protects staff and patients. | |
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| Integration – The Health and Safety Group may meet with Local Authority staff for some environmental issues. | |
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| Involvement – of staff and experts will support and engage staff who feel valued and valued staff who are happy have improved patient outcomes. | |
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| Collaboration – the Health and Safety Group will work collaboratively engaging with all to improve the health and safety and well-being of those who work and use our services. | |
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| Report History | No previous report history to this committee. |
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| Appendices | none |
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