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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	Thursday, 24 th April	Agenda Item	3.1
Report Title	Planning for the Health Board Health and Safety Improvement Plan 2019-20		
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 Safety Committee of elements that should be included in the Health Board Health and Safety Improvement Plan 2019-20		
Key Issues	Planning for the reorganisation of the Health board, emerging risks and the better governance of health and safety.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			✓
Recommendations	Members are asked to : <ul style="list-style-type: none"> • NOTE the report 		

PLANNING FOR THE HEALTH BOARD

HEALTH AND SAFETY IMPROVEMENT PLAN 2019-20

1. INTRODUCTION

Health and Safety Executive guidance places a duty on the Health Board to effectively manage health and safety. Recognising weaknesses and developing actions to address those areas of concern demonstrates good governance.

2. PROGRESS AND MATTERS ARISING

2.1 Introduction

For the last three years the Health board has developed and implemented an annual Health and Safety Improvement Plan. The plan was developed from a number of sources of intelligence and information such as risk assessments, incident and claims management experience, learning lessons and horizon scanning; the latter include where review of other NHS organisations are made and lessons learnt.

Health and safety improvement plans also included actions identified in the draft health and safety management system being developed in Wales and largely followed those standards. This plan will shortly be approved for use in all Health Boards in Wales.

Key drivers in the plans were to set a pathway for improving the management of health, safety and fire. Corporate development such as reviews of policy and improvements in governance and particularly the work of the existing ABMU Health and Safety committee were given high priority.

The responsibility to effectively manage health, safety and fire at Unit and other areas such as Estates and Support Services were recognised in plans. The principle that the plan would enable them to self-manage significant elements of their own risk and demonstrate good governance and leadership were considered critical to delivering good health and safety management across the Health Board. Flexibility was given in the plan for Units etc. to develop actions based upon their particular risk profile and priorities.

The Health and Safety Improvement plans were also designed following Internal Audit reviews regarding compliance and to demonstrate improved governance. The plans would also assist Units to demonstrate good governance if inspected by the Health and Safety Executive (HSE)

Health and Safety Improvement Plan 2018-19 Performance Review

2.2 Summary

The 2018-19 plan has been partially implemented but in many areas progress has been limited or in some cases absent. Reasons for this are discussed later but

include resources to deliver outcomes from reviews of policy and procedure and potentially a plan that was over ambitious.

Prior to the recent Health and Safety Executive (HSE) review of the Health Board in November 2018 review it was identified that that the current plan required a significant review including consideration of identifying better delivery milestones rather than broad targets. The HSE report and associated improvement notices will likely to result in the 2019-20 plan being more focussed on these compliance issues but using them as a vehicle to drive better governance into the health board.

2.3 Corporate Health and Safety Matters

- The development of the ABMU Health and Safety Committee has provided a significant improvement in leadership and communication with the Health Board. In addition it has eliminated the long chain of sub committees that managed health and safety reports with a clearer route to the board of key health and safety messages
- The Health and Safety team provided significant support for the functioning and work of the Operational Health and Safety Committee. There was an overreliance on the Head of Health and Safety Manager to develop virtually all the papers for the committee.
- Significant support was given to Units to support their work. This included providing advice and support, statistical analysis, etc.
- The HSE inspections across ABMU in 2019 have diverted resources from the implementing elements of the plan
- The Shared Service Partnership fire safety database system is not fit for purpose. Particularly in the areas of the management of fire safety risk assessment outcomes separate databases are held to assist in the management of fire safety that require significant resources to manage the large range of data successfully
- The DATIX incident reporting system continues to require significant input by the Health and Safety team to permit accurate and meaningful reports for monitoring purposes. Typically 16,000 incidents were reviewed in a calendar year and where necessary recoded. This approach does permit intelligence to be provide to the Operational Health and Safety Committee, Unit Committees (where available) and in general areas such as the annual Health and Safety report
- New procedures developed did not have resources behind them to rollout any training required etc.
- Resources that were used in Units for monitoring purposes at ward and departmental level were insufficient to give a full picture of the Unit performance. Furthermore audit and other reports made to line managers were not used or collated effectively and frequently in the unit to permit a larger picture to be seen.

2.4 Unit Health and Safety Management

The 2019 -20 plan placed heavy reliance on Units to deliver a number of health and safety improvements.

The plan was affected by a number of factors including

- There is a lack of resource at Unit level to develop, implement and to monitor health, safety and fire improvements and performance. This resource does not necessarily need significant technical health and safety expertise but should project manage actions etc.
- Units generally failed to develop and to own their local Health and Safety plans
- Support continues to be available from the limited resources of the corporate Health and Safety team such as working with Units in areas such as reviews of ward and departmental training needs analysis.
- The lack of effective health, safety and fire governance arrangements in Units (e.g. limited numbers of active and effective Health and Safety Committees) means that many targets set for them have not been achieved
- Facilities management is generally poorly developed with lack of understanding of roles and responsibilities such as site management roles and responsibilities. HSE identified for one site no active site management
- Resources at ward and departmental level needed to develop and review local arrangements may be insufficient or focus is given to matters other than health and safety. There will need to be consideration in the new plan as to how health and safety can be effectively managed and supported without losing the need for good leadership from line management

3. HEALTH AND SAFETY IMPROVEMENT PLAN MONITORING

Progress is recorded below using the RAG principles. Where yellow is used this means limited progress and red means no or very limited progress.

4. RECOMMENDATION

The ABMU Health and Safety Committee is requested to note the current position and recommendations made

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 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		None								

ABMU Health and Safety Plan 2018-19

1.	Target	To have health and safety owned and effectively managed at all levels of the Health Board
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Leadership & Accountability					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop the ABMU Board level Health and Safety Committee (ABMU H&S Comm.)	HSM1	New Committee formed and operating	Change of Board Health and Safety lead to be reflected in TOR etc.	Board	Completed
Review roles and responsibilities of Operational Health and Safety Committee (Ops H&S Comm.)	HSM2	Improvements made in attendance by Units etc.	Further review required following HSE Inspection report e.g. monitoring and review	Dir Nursing	Completed
Develop, maintain and review progress against ABMU Health and Safety plan 2018-19	HSM1 HSM2	Last review undertaken by Operational Health and Safety committee in September 2018. Recent meetings focussed on forthcoming HSE inspections and initial outcomes.	Further review required following HSE Inspection report e.g. monitoring and review	Ops H&S Group	Completed

Leadership & Accountability (cont.)

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Units to develop effective systems to manage health and safety	HSM2	Units operating at different H&S governance standards	Units need to demonstrate leadership and management of key risks including facilities risks etc.	Units/ Estates/ Support Services	Include in 2019-20 plan
Units to develop maintain and review progress against Unit Health and Safety plan 2018-19 as it applies to their areas of control etc.	HSM2	Most Units do not have a current plan	Units need to demonstrate leadership and management of key risks including facilities risks etc.	Units/ Estates/ Support Services	Include in 2019-20 plan
Develop Health and Safety arrangements in management areas of ABMU	HSM5	Management areas other than Units may not have health and safety management arrangements	Review due to ABMU reorganisation and HSE Review	TBC	TBC
Further development of required ABMU-wide Health and Safety Policies or Procedures	COSHH1	Control Of Substances Hazardous to Health (COSHH) Procedure updated 2018	Rollout and support for managers in high/medium risk areas Further review of H&S resources to support system	Head of Health and Safety	Completed
	VDU1	Display Screen Equipment (DSE) Procedure not reviewed Limited resources to support managers and staff	Policy review	Head of Health and Safety	Not completed

Competent People

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review current arrangements for the identification of, delivery, recording monitoring etc of H&S training and competencies	Trng1	Current electronic systems (ESR) may not adequately identify staff's individual training needs with outputs etc. inaccurate	Develop ward and departmental training needs analysis and confirm ESR system fit for purpose	Ops H&S Comm.	December 2018
Review training and competency arrangements in principle areas of health and safety risk to ensure that they are effective	Trng1	Confirm effectiveness of training and competency systems in managing key risks	Paper to Operational Health and Safety committee	Ops H&S Comm. Units	December 2018
Training systems appropriate to their areas are owned and managed by ward and departmental managers	Trng2	Confirm effectiveness of training and competency systems in managing key risks	Paper to Operational Health and Safety committee	Units	December 2018

Compliance Assurance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Periodic thematic reviews of health and safety risk topics at ABMU level	HSM 1	Programme of reviews linked to work of the Health and Safety Committee to include:-	Included in Annual Health and Safety Plan	Head of Health and Safety	Completed
		Health and Safety Annual Report	Reviewed by Operational and ABMU Health and safety Committee	Head of Health and Safety	Completed
		Reporting and Investigation of health, safety and fire incidents	No report made to Operational Health and Safety committee	Head of Health and Safety	January 2019
		Lone workers		Head of H&	January 2019
		Training and Competency systems	Full review required	Head of H&	December 2018
		Safer Sharps	Review prior to potential HSE inspection	Head of H&	March 2018
		Fire Safety (link to Fire Safety audit)	Reviewed by Operational and ABMU Health and safety Committee	Head of H&	Completed
Units to assure themselves of the effectiveness of control measures for their risks	HSM2	Limited assurance. Further development and support required for governance in units	Units developing governance arrangements	Units	December 2018
Regular monitoring of unit health and safety plans	HSM1 HSM2	Limited assurance. Generally no plans in place	Units developing governance arrangements	Units	December 2018

Risk Management					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop, maintain and review H&S risk register for areas of control etc.	HSM1 HSM2	Risk register developed and forms part of agenda of ABMU and Ops H&S Committees. Risk registers may not be subject to regular scrutiny e.g. Unit H&S Committees	<ul style="list-style-type: none"> Ensure consistent approach across ABMU 	Ops H&S Comm. Unit H&S Committee	Include in 2019-20 H&S Plan

Learning From Events					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review incident reporting procedure	IR1	<ul style="list-style-type: none"> No current ABMU procedure Previous procedure covers all risk areas DATIX procedure only Scoping exercise ongoing 	<ul style="list-style-type: none"> Devise update procedure 	Dir Nursing	Include in 2019-20 H&S Plan
Monitor and review H&S incidents	IR1	<ul style="list-style-type: none"> Standing agenda item for Ops H&S Committee May not be reviewed consistently across Unit Health and Safety Committees 	<ul style="list-style-type: none"> Determine governance arrangements and resources to monitor 	Unit H&S Comm. Ops H&S Comm. ABMU H&S Comm.	Include in 2019-20 H&S Plan
Sample quality of investigation of H&S incidents including lessons learnt, action taken etc.	IR1	<ul style="list-style-type: none"> Unclear of quality of investigations Failure to learn lessons, implement corrective action etc 	<ul style="list-style-type: none"> Determine governance arrangements and resources to monitor 	Ops H&S Comm.	December 2018

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review of significant incidents in ABMU and Units	IR1	<ul style="list-style-type: none"> Key incidents taken to Operational Health and Safety and Unit Health and Safety committees as appropriate 	<ul style="list-style-type: none"> Review following HSE Improvement Notice 	Ops H&S Comm.	Completed
Review of significant incidents affecting NHS Wales	IR1	<ul style="list-style-type: none"> Key incidents taken to Operational Health and Safety and Unit Health and Safety committees as appropriate 	<ul style="list-style-type: none"> Review following HSE Improvement Notice 	Ops H&S Comm.	Completed
Review of HSE Improvement notices etc	EX1	<ul style="list-style-type: none"> Ongoing reviews at ABMU and Operational Health and Safety Committees 	<ul style="list-style-type: none"> Review following HSE Improvement Notice 	Ops H&S Comm.	Completed
Review of significant Fire safety correspondence etc	Ext1	<ul style="list-style-type: none"> Ongoing reviews at ABMU and Operational Health and Safety Committees 	<ul style="list-style-type: none"> Review following HSE Improvement Notice 	Ops H&S Comm.	Completed
Review of claims management experience for health and safety	Ext1	<ul style="list-style-type: none"> Not undertaken 	<ul style="list-style-type: none"> Review in next Operational Health and Safety Committee 	Ops H&S Comm.	December 2018

Occupational Health

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop Health surveillance sub-group	OH1	<ul style="list-style-type: none"> Group meetings held and action plan developed 	<ul style="list-style-type: none"> Further review to consider Learning from HSE Inspection etc. 	Occ Health/ H&S	Completed

Asset Management					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Improve the use of risk assessments to inform capital programmes etc.	HSM1 HSM2	<ul style="list-style-type: none"> Fire Safety database developed and will be used to inform fire safety investment etc. Health and Safety Committee approved manual handling equipment programme 	<ul style="list-style-type: none"> Include in work of all Health and Safety committees 	Fire safety group Op H&S Group	Include in 2019-20 H&S Plan

Managing Contractors					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Support HSE strategy to improve SME management	Ext1	<ul style="list-style-type: none"> Updated contractor management policy developed 	<ul style="list-style-type: none"> Publish on Intranet. 	Ops H&S group	December 2018

Communications					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review membership of ABMU Ops H&S Comm. to include non-Service Delivery Unit representation	HSM1 HSM2 HSM5	<ul style="list-style-type: none"> Certain management areas of ABMU not represented at Ops H&S Committee 	<ul style="list-style-type: none"> Identify key attendees, roles and responsibilities 	Head of Health and Safety	Not completed
Develop appropriate Health and Safety communication and consultation arrangements in Service Delivery Units	HSM1 HSM5	<ul style="list-style-type: none"> Not all committees active. Others developing etc. 	<ul style="list-style-type: none"> Ensure consistency of approach 	Head of Health and Safety	Include in 2019-20 H&S Plan

Emergency Preparedness

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Where necessary (e.g. from risk assessments) have in place appropriate emergency procedures e.g. for spillages, UVc shutdown etc.	HSM1 FR1 MH1 VA1	<ul style="list-style-type: none"> Fire safety evacuation etc. plans in place in many areas but poor monitoring and review Spillage procedure linked to Standard Operating Procedures etc. 	<ul style="list-style-type: none"> Staff and other can effectively manage local emergencies 	Units	March 2019
Review first aid provision	MH1 MH2	<ul style="list-style-type: none"> Reviewed by Ops Health and Safety committee 	<ul style="list-style-type: none"> Publish procedure 	Ops H&S Group	Completed

Measuring Performance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Identify, maintain and use Key Performance Indicators for ABMU Operational H&S Committee	Perf1 Perf2 Perf3	<ul style="list-style-type: none"> Key indicators in place but further review required following HSE inspection 	<ul style="list-style-type: none"> Monitor by Health and Safety Committee. Include key outcomes in updated H&S Plan 	Ops H&S Group	May 2018

2.	Target	To have fire safety owned and effectively managed at all levels of the Health Board
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Leadership & Accountability
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Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
All management areas to demonstrate the effective management of fire safety	F1	<ul style="list-style-type: none"> Unit Health and Safety Committees developing but no consistency on reporting etc. for fire 	<ul style="list-style-type: none"> Review main site fire plans as part of annual fire safety audit 	Units	December 2018
Develop key management actions that demonstrate the management of fire at ward and departmental level	F1	<ul style="list-style-type: none"> Fire wardens trained but limited monitoring of their activities, numbers active in post etc. Poor incident investigation etc. of false alarms 	<ul style="list-style-type: none"> Develop key actions for 2019-20 Fire Safety Plan 	Units	December 2018
Review resources, roles and responsibilities etc to deliver fire safety policy effectively	F!	<ul style="list-style-type: none"> Some sites do not have an identified fire safety lead Lack of leadership in fire safety 	<ul style="list-style-type: none"> Develop key actions for 2019-20 Fire Safety Plan 	Units	December 2018

Competent People

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review arrangements to ensure clear policy regarding fire safety training and maintenance of competencies	F2	<ul style="list-style-type: none"> • Training is frequently generic and does not reference local evacuation plans etc • Training does not test necessary competencies have been achieved etc. • Resource limit ability to enhance training and/or place additional responsibility on wards and departments 	<ul style="list-style-type: none"> • Develop key actions for 2019-20 Fire Safety Plan 	Head of Health and Safety	November 2018

Compliance Assurance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Improve the level of fire safety matters reviewed and managed at Service and Management level	F1	<ul style="list-style-type: none"> • Some Committees not meeting or low priority to fire safety matters 	<ul style="list-style-type: none"> • Develop key actions for 2019-20 Fire Safety Plan 	Units	December 2018
Improve the action taken following fire safety risk assessments	F1 F8	<ul style="list-style-type: none"> • New database developed and work being undertaken to roll out into Estates departments to manage their risks. • Being used to follow-up ward and departmental action but initial trials resulted in no or poor response. 	<ul style="list-style-type: none"> • Further rollout • Monitor by Fire safety Group and Unit H&S Committees 	Ops H&S Group Units	December 2018

Risk Management					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Maintain ABMU fire safety risk register	F1	<ul style="list-style-type: none"> included in ABMU Health and Safety risk register etc. 	<ul style="list-style-type: none"> Effective management of fire safety risks 	Ops H&S Group	Completed
Units to understand the key fire safety risks affecting their activities	F1	<ul style="list-style-type: none"> Singleton has highest risk Fire risk registers in units to be developed further 	<ul style="list-style-type: none"> Current governance structures in Units require further development e.g. ownership and monitoring 	Units	December 2018

Learning From Events					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Improve the reporting and investigation of fire safety incidents with all events recorded effectively	IR1 F9	<ul style="list-style-type: none"> Two systems for reporting Poor reporting systems and lack of effective investigation. False alarms frequently do not result in opportunities to learn lessons 	<ul style="list-style-type: none"> Ongoing all Wales review of Shared Service System Determine use and implement full reporting using DATIX system 	Ops H&S Group	December 2018

Asset Management					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop plans for fire safety capital investment and other necessary improvements	F8 F10	<ul style="list-style-type: none"> Fire safety group developing coordination arrangements with Capital etc. 	<ul style="list-style-type: none"> Use fire safety risk assessment database more efficiently to inform decision making 	Fire Safety Group	December 2018

Asset Management (cont.)

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Conduct (rolling) review of fire safety compartmentation (including above ceiling) across main sites	F10	<ul style="list-style-type: none"> Capital has been invested in some areas to undertake the work but significant additional resource required 	<ul style="list-style-type: none"> Identify capital etc. resource stream 	Fire Safety Group	TBC (Resources)
Conduct (rolling) review of fire safety cause and effect systems across main sites	F8	<ul style="list-style-type: none"> Capital has been invested in some areas to undertake the work but significant additional resource required 	<ul style="list-style-type: none"> Identify capital etc. resource stream 	Fire Safety Group	TBC (Resources)

Emergency Preparedness

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Confirm all properties have an effective fire emergency plan	F4 F7	<ul style="list-style-type: none"> Reviewed as part of fire risk assessment but insufficient resources to review all properties 	<ul style="list-style-type: none"> Review resources etc. 	Units	December 2018
Confirm all wards and departments have effective fire evacuation plans	F4 F7	<ul style="list-style-type: none"> Reviewed as part of fire risk assessment but insufficient resources to review all properties 	<ul style="list-style-type: none"> Review resources etc. 	Units	March 2018

Emergency Preparedness

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review wards and departments where bed or other evacuation methods are difficult due to design or other feature in the area	F4 F7	<ul style="list-style-type: none"> Identified by fire risk assessments in wards and departments Singleton review completed and action taken 	<ul style="list-style-type: none"> Confirm for all wards and departments 	Units	March 2018
Conduct fire drills to test effectiveness of general site arrangements etc.	F4 F7	<ul style="list-style-type: none"> Operational H&S Committee has agreed a fire drill standard Limited number of fire drills held 	<ul style="list-style-type: none"> Review fire Safety resources etc. 	Head of Health and Safety/ Units	March 2018

Measuring Performance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Fire Safety Audit	F1	<ul style="list-style-type: none"> Fire safety audit completed for 2017-18 completed 	<ul style="list-style-type: none"> Review of fire Safety audit for 2018-19 for May 2019 submission 	Head of Health and Safety	Completed
Develop capacity in Units etc to review their fire safety performance	F1 F3	<ul style="list-style-type: none"> No effective systems in place. 	<ul style="list-style-type: none"> Review resources and support required 	Units	March 2019

3.	Target	To have manual handling owned and effectively managed at all levels of the Health Board
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Review resources to deliver policy effectively

Leadership & Accountability					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Imbed the management of manual handling into all levels of the Health Board	HSM1	<ul style="list-style-type: none"> Management units may not be able to demonstrate effective management of manual handling 	<ul style="list-style-type: none"> Review following HSE inspection 	Units	March 2019

Competent People					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Improve the management of manual handling at ward and departmental level	HSM1	<ul style="list-style-type: none"> Periodic review of staff competencies but limited rollout of systems to measure ward etc performance 	<ul style="list-style-type: none"> Review following HSE inspection 	Units	March 2019

Risk Management					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Maintain and review manual handling risk register	HSM1	<ul style="list-style-type: none"> Manual handling risk included in ABMU risk register Action taken for hoist replacement Limited records held in Units 	<ul style="list-style-type: none"> Use data etc. at all levels of the Health Board 	Ops H&S Comm Units	March 2019

Compliance Assurance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop systems to review ward and dept manual handling performance	MH3	<ul style="list-style-type: none"> Management Units rely on training performance for assurance 	<ul style="list-style-type: none"> Programme of independent assessments feeding into governance at all levels of ABMU to be developed 	Ops H&S Comm Units	March 2019

Learning From Events

Principal Actions	Risk Register	Current Position	Key Outcomes	By Whom	Target/ Key milestones KPI
Maintain continuous review and effectively investigate manual handling incidents etc at all levels of ABMU	IR1	<ul style="list-style-type: none"> Regular reports submitted to Ops H&S Committee Units need to adopt a similar consistent approach 	<ul style="list-style-type: none"> Learning lessons Taking corrective action 	Ops H&S Comm Units	March 2019

Occupational Health

Principal Actions	Risk Register	Current Position	Key Outcomes	By Whom	Target/ Key milestones KPI
Maintain continuous review of incidents and ill health associated with MSD	IR1	<ul style="list-style-type: none"> Review required to confirm roles and responsibilities etc 	<ul style="list-style-type: none"> Enhanced management of MSDs 	Ops H&S Comm Units	March 2019

Asset Management					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Replacement programme for hoists and other manual handling equipment	MH2	<ul style="list-style-type: none"> • Hoist fleet partially upgraded in spring 2018 • Further capital funding provided and equipment procurement progressing 	<ul style="list-style-type: none"> • Deploy new equipment 	Head of Nursing	March 2019

Measuring Performance					
Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop system to assure that manual Handling arrangements effective and implemented manual handling equipment	HSM1	<ul style="list-style-type: none"> • Limited formal systems except for use of Metrix training records for manual handling in clinical areas • Ward cultural audits in lace but limited resources 	<ul style="list-style-type: none"> • Annual cultural review and feedback to management units 	Ops H&S Group	March 2019

4.	Target	To have Violence and Aggression owned and effectively managed at all levels of the Health Board
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Leadership & Accountability

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Link violence and aggression into the work of the Service Delivery Unit Health and Safety /Governance Committee	HSM1	<ul style="list-style-type: none"> No consistent approach across ABMU 	Management units own and manage violence and aggression	Units	December 2018

Competent People

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Improve staff safety when managing patients where aggression may be related to medical or clinical issues in general hospitals	VA2	<ul style="list-style-type: none"> Large numbers of incidents Complex risk management issue also linked to dementia care etc 	<ul style="list-style-type: none"> Further review following HSE inspection Update risk assessments Effective risk focussed training and competency systems 	Ops H&S Group Units	February 2019
Produce training needs analysis for each ward and department to confirm training pathway	VA1	<ul style="list-style-type: none"> Some areas have formal training needs analysis but not consistent approach across ABMU 	<ul style="list-style-type: none"> Update risk assessments Effective risk focussed training and competency systems 	Units	February 2019

Compliance Assurance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Annual Thematic report to ABMU Health and Safety Committee	HSM1	<ul style="list-style-type: none"> Key risk in ABMU Thematic report to Ops H&S in 2017 Further report 2018 	<ul style="list-style-type: none"> Assurance and action planning 	Head of Health and Safety	December 2018
Where required units to undertake review of violence and aggression arrangements and controls	HSM1	<ul style="list-style-type: none"> Key risk in ABMU Units need to satisfy themselves that their arrangements are effective 	<ul style="list-style-type: none"> Assurance and action planning 	Units	March 2019

Risk Management

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Understand risks, control measures and training needs for individual staff groups and associated patient groups	HSM1	<ul style="list-style-type: none"> Reasonable progress made but need to consistently review and document principle findings of the risk assessments 	<ul style="list-style-type: none"> Update risk assessments 	Units	March 2019

Learning From Events

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Maintain continuous review and effectively investigate and manage all V&A Incidents	IR1	<ul style="list-style-type: none"> HSE reporting poor compliance and investigation in place 	<ul style="list-style-type: none"> Review management of incident reporting, quality, use of data etc. 	Units	March 2019

Emergency Preparedness

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review lone worker arrangements	VA3	<ul style="list-style-type: none"> Unclear if all areas know who are lone workers and the necessary protective arrangements 	<ul style="list-style-type: none"> Updated risk assessments Assurance given on effectiveness of system 	Units	March 2019

Measuring Performance

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Annual Thematic report	HSM1	<ul style="list-style-type: none"> Not all areas fully aware of their violence and aggression performance 	<ul style="list-style-type: none"> Report to operational Health and Safety committee including findings from HSE report 	Ops H&S Group	December 2018

5.	Target	To have COSHH owned and effectively managed at all levels of the Health Board
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Leadership and Accountability

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop COSHH Procedure for ABMU	COSHH1	<ul style="list-style-type: none"> Procedure updated October 2018 	<ul style="list-style-type: none"> Roll out of procedure and support for managers Review resource implications etc. 	Head of Health and Safety	Completed

Competent People

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Determine training requirements for groups of staff	COSHH1	<ul style="list-style-type: none"> Internal audit report indicates that for sample areas staff aware of procedures 	<ul style="list-style-type: none"> Risk assess and document 	Head of Health and Safety	October 2018
Deliver appropriate training and information systems	COSHH1	<ul style="list-style-type: none"> No corporate training provided 	<ul style="list-style-type: none"> Review resources and systems to deliver training 	Head of Health and Safety	December 2018

Learning From Events

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review all chemical safety and biological safety incidents	COSHH1	<ul style="list-style-type: none"> Generally good for actual injuries but may not include learning lessons from near misses etc. 	<ul style="list-style-type: none"> Improve quality of investigations 	Ops H&S Group Units	December 2018

Occupational Health

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Develop new health surveillance arrangements for ABMU	COSHH1	<ul style="list-style-type: none">Occupational Health and Health and Safety group has commenced review but not complete	<ul style="list-style-type: none">Document risk assessmentImplement key actions	Occ Health Group	December 2018

6.	Target	To have Display Screen Equipment safety owned and effectively managed at all levels of the Health Board
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Leadership & Accountability

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Review and revise ABMU procedure	VDU1	<ul style="list-style-type: none"> No documented procedure but support available 	<ul style="list-style-type: none"> Develop procedure 	Head of Health and Safety	December 2018

Competent People

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Managers to understand the safety arrangements for display screen equipment	VDU1	No documented procedure but support available	<ul style="list-style-type: none"> Develop procedure 	Head of Health and Safety	December 2018
Staff to understand the safety arrangements for display screen equipment	VDU1	<ul style="list-style-type: none"> Training system no longer supported in ABMU IT system No training in place 	<ul style="list-style-type: none"> Provide appropriate online system 	Head of Health and Safety	December 2018

Risk Management

Principal Actions	Risk Register	Current Position	Further Action	By Whom	Target/ Key milestones KPI
Identify staff to whom Policy applies	VDU1	<ul style="list-style-type: none"> Equipment generally safe Support available for complex situations e.g. staff with injuries that affect VDU work 	<ul style="list-style-type: none"> Develop procedure 	Head of Health and Safety	December 2018