# Service Groups' Highlight Report for Health and Safety Committee

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| **Meeting Date:** | 05.04.2022 |
| **Service Group:** | NPT & Singleton Service Group |
| **Author:** | Melanie Collins (Singleton) and Susan Jones (NPT) – Divisional Managers, Hospital Operations |
| **Sponsor:** | Jan Worthing - Service Group Director, NPTSSG |
| **Presenter:** | Lesley Jenkins - Nurse Group Director NPTSSG |

## Summary of Health and Safety key issues since last report to the Committee (Reporting period:      to    )

The purpose of this report is to update the SBUHB Health & Safety Committee on the business discussions of;

Neath Port Talbot and Singleton Hospital sites.

## Challenges, Risks, Mitigation and Action being taken relating to Health and Safety issues noted above (what, by when, by who and expected impact)

**Singleton Hospital**

Issues on site:

- Cladding –Phase 2 decanting of the last part of the even no west ward block .Staffing remains problematic with ward areas split. .Decanting of odd numbers commencing in August, meetings to progress re bone marrow transplant unit.
- Staff shortages – Front door (SAU) recruitment process successful .Only 1.75 wte vacancy band 5 retention key to success and move to Morriston. Unscheduled care position remains average .However flow issues continue due to clinically optimised position/ flow issues.
- Acute service redesign work continues.
- DSU modular surgery building delivered

**NPTH**

Issues on site;

- Mental Health – extra work has been carried out all around security and H&S from NPTH. A review has been undertaken of out of hours, locking down areas, especially around unoccupied areas on site, where doors are open and should be locked and looking at where more security can be put in place.
- SHE inspection – an adhoc inspection was carried out by the PFI Partners last week where they identified a few areas around blocking fire alarms, and some damage from deliveries. Actions have been completed by some service areas but will think about continuing with our partners going forward when it is safe to do so on site.

- Some challenges moving patients from the front door to an acute site for care we cannot deliver. This is within our new risks for MIU.

**Performance Progress to include: Statutory and Mandatory Training; PADR compliance; Serious Incidents; Staffing and Sickness Levels;**

## Statutory and Mandatory Training

### Electrical Safety Guidance
- The electrical safety group has reviewed safety guidelines on recognising damaged electrics to reduce injuries. Long term plan – to arrange mandatory training on electrical health and safety with a competency element on ESR in the new year.

### Medical Gas
- Paul Lee from Medical Physics presented a discussion for designated officers on the back of new legislation regarding medical gas. The plan is for additional training for ward managers for compliance in line with the new legislation.

### Fire Wardens / Unit 22
- Training has commenced for teams at NPTH. There will be a drive to complete Fire Warden training a and training packs for specific areas to be compiled so that training can be undertaken.

## Mandatory Training Compliance @ 28/02/2022

| | Total Staff | Number Compliant | Number Not Compliant | Percentage Compliant | Percentage Not Compliant | Target Type | Target | Tolerance |
|---|---|---|---|---|---|---|---|---|
| Equality Diversity & Equal Rights | 212 | 176 | 36 | 83.02% | 16.98% | Local | 85% | 80% |
| Fire Safety | 212 | 182 | 30 | 85.85% | 14.15% | Local | 85% | 80% |
| Health Safety & Welfare | 212 | 182 | 30 | 85.85% | 14.15% | Local | 85% | 80% |
| Infection Prevention & control | 212 | 194 | 18 | 91.51% | 8.49% | Local | 85% | 80% |
| Information Governance | 212 | 170 | 42 | 80.19% | 19.81% | Local | 85% | 80% |
| Moving & Handling | 212 | 166 | 46 | 78.30% | 21.70% | Local | 85% | 80% |
| Resuscitation | 212 | 167 | 45 | 78.77% | 21.23% | Local | 85% | 80% |
| Safeguarding Adults | 212 | 173 | 39 | 81.60% | 18.40% | Local | 85% | 80% |
| Safeguarding Children | 212 | 168 | 44 | 79.25% | 20.75% | Local | 85% | 80% |
| Violence & Aggression | 212 | 198 | 14 | 93.40% | 6.60% | Local | 85% | 80% |
| Dementia Awareness | 212 | 198 | 14 | 93.40% | 6.60% | Local | 85% | 80% |
| Social Services & Wellbeing Act | 212 | 191 | 21 | 90.09% | 9.91% | Local | 85% | 80% |
| Violence against Women | 212 | 160 | 52 | 75.47% | 24.53% | Local | 85% | 80% |
| 1 member of staff X 13 competencies = total | 2756 | 2325 | 431 | 84.36% | 15.64% | | | |

## PADR Compliance as at 01/04.2022

| Count of Employee Number | | | Status | | | | |
|---|---|---|---|---|---|---|---|
| Org L6 | Org L8 | (blank) | Due Soon | In Date | In Date Total | Grand Total | |
| 130 Hospital Operations - Serv | 130 F204 NPTH MIU | 10 | 6 | 33 | 39 | 49 | 79.59% |
| | 130 F211 SN SAU | 29 | 4 | 14 | 18 | 47 | 38.30% |
| | 130 F350 Patient Flow | 4 | 1 | 2 | 3 | 7 | 42.86% |
| | 130 G504 NPTH Fracture Clinic | 3 | 2 | 3 | 5 | 8 | 62.50% |
| | 130 P003 NPTH Outpatients | 7 | 1 | 41 | 42 | 49 | 85.71% |
| | 130 P211 NPTH Administration | 6 | 2 | 4 | 6 | 12 | 50.00% |
| | 130 P423 SN Nursing Flow Team | 12 | | 9 | 9 | 21 | 42.86% |
| | 130 P690 SN General Admin | | 2 | 1 | 3 | 3 | 100.00% |
| | 130 P691 SN Social Work Support | | | 1 | 1 | 1 | 100.00% |
| | 130 P692 SN Outpatients Clinics | 3 | 3 | 7 | 10 | 13 | 76.92% |
| 130 Hospital Operations - Serv Total | | 74 | 21 | 115 | 136 | 210 | 64.76% |

**Please note that there is an error on the table SAU's compliance has increased to over 80% since the report was compiled.**

| Incidents at NPT | 21/22 Q1 | 21/22 Q2 | 21/22 Q3 | 21/22 Q4 | Total |
|---|---|---|---|---|---|
| Between Different Teams | 1 | 0 | 1 | 1 | 3 |
| Between Staff and Patients/Patients and staff | 0 | 1 | 0 | 1 | 2 |
| Confidentiality Breach | 0 | 0 | 1 | 0 | 1 |
| Contact/Collision with Objects (not sharps) | 0 | 1 | 0 | 1 | 2 |
| Developed in current clinical area/caseload | 1 | 1 | 0 | 2 | 4 |
| Developed prior to admission to current clinical area/caseload | 0 | 1 | 1 | 1 | 3 |
| Exposure to Hazardous Substances | 0 | 1 | 0 | 0 | 1 |
| Exposure to Unsafe Environmental Conditions | 0 | 0 | 0 | 2 | 2 |
| Handovers/Handoffs | 1 | 0 | 0 | 0 | 1 |
| Inappropriate/Aggressive Behaviour by a Patient towards an Object/Structure (Not self harm) | 1 | 0 | 0 | 0 | 1 |
| Inappropriate/Aggressive Behaviour towards Staff by a Patient | 0 | 0 | 1 | 1 | 2 |
| Missing/Lost Property | 0 | 0 | 0 | 1 | 1 |
| Monitoring/On-going Assessment of Patient Status | 1 | 0 | 0 | 0 | 1 |
| Non-invasive Treatment Processes/Procedures | 1 | 0 | 0 | 0 | 1 |
| Other Service Disruptions/ Infrastructure Incident | 0 | 0 | 0 | 1 | 1 |
| Physical Diagnostic Assessment/Evaluation/Examination | 0 | 0 | 0 | 2 | 2 |
| Radiological/Imaging Investigations/Interpretations | 0 | 1 | 1 | 0 | 2 |
| Safeguarding/Protection | 0 | 0 | 0 | 1 | 1 |
| Self-harming Behaviour | 0 | 1 | 0 | 0 | 1 |
| Slip/Trip or Fall | 0 | 0 | 1 | 0 | 1 |
| Transfers/Transitions | 0 | 1 | 1 | 1 | 3 |
| Transportation | 0 | 3 | 3 | 0 | 6 |
| Unconsented or Unauthorised use | 1 | 0 | 0 | 0 | 1 |
| Utility/Infrastructure Failures/Disruptions ( Excluding Fire Alarm Systems) | 1 | 0 | 0 | 0 | 1 |
| Total | 8 | 11 | 10 | 15 | 44 |

**Hospital Operations**
**Absence Management - In month sickness rate % February 2022**

| | Nov-21 | Dec-21 | Jan-22 | Cumulative % Abs Rate (FTE) | Target |
|---|---|---|---|---|---|
| 130 F204 NPTH MIU | 3.02% | 4.38% | 9.89% | 8.29% | 5.08% |
| 130 F211 SN SAU | 15.04% | 10.94% | 5.57% | 10.16% | 5.08% |
| 130 F350 Patient Flow | 18.65% | 21.11% | 15.08% | 8.08% | 5.08% |
| 130 G504 NPTH Fracture Clinic | 0.00% | 17.99% | 2.77% | 18.91% | 5.08% |
| 130 P003 NPTH Outpatients | 9.75% | 11.97% | 14.52% | 13.01% | 5.08% |
| 130 P211 NPTH Administration | 1.24% | 5.42% | 3.49% | 1.17% | 5.08% |
| 130 P423 SN Nursing Flow Team | 3.56% | 4.61% | 3.29% | 4.50% | 5.08% |
| 130 P690 SN General Admin | 0.00% | 2.65% | 34.48% | 4.16% | 5.08% |
| 130 P691 SN Social Work Support | 0.00% | 3.23% | 13.25% | 18.10% | 5.08% |
| 130 P692 SN Outpatients Clinics | 10.22% | 10.15% | 11.98% | 14.23% | 5.08% |
| **130 Hospital Operations - Serv Total** | 8.37% | 9.16% | 9.15% | 9.76% | 5.08% |

Health and Safety Committee – Tuesday, 5th April 2022

## Governance and Risk Issues to include risks relating to Health and Safety on the risk register

### H+S and EPRR

The major Incident plans and the Business Continuity Plan for both Singelton and Neath Port Talbot sites have been reviewed and updated.

Business Continuity exercises have been planned for each site.

### Singleton

- Security on the Singleton site out of hours and weekends continues
- cladding works – resulting in decanting of three areas Singleton 45 beds, ward 7 now housing half of ward 4 half of ward 8. .Have handed over 8a.Next area to be handed over is 6a end of March.
- Acute service redesign work is moving forward. Potential delays in Enfys works could result in a delay in the acute medical transfer until Sept 22
- Organisational change policy beginning of April 2022
- Approved capital planning monies for robot replacement pharmacy Singleton
- Meeting with capital planning /architect to be scheduled for redesign of services Singleton
- OPD modernisation work being scoped..
- Small compound sited by Chemo Day Unit for Lanec machine installation
- Unscheduled care demand remains unchanged. Rising clinically optimised position ranging from 50-70 25%care homes remain closed .Huge staffing deficits in local authority care/brokerage. Surge beds open due to poor discharge bed profile.
- Covid demand steady WD16 remains covid ward. SAU admission for covid pts
- New security measures for mortuary
- Singleton outpatients having new fire doors work commencing 24th Jan 22
- Review of all business continuity plans to ensure robustness.
- DSU- modular surgery building being delivered Saturday 19th March
- Visits to the new Enfys in Morriston can be booked from 21st March.
- Two week period of system reset Wednesday 2nd March –Wednesday 16th March evaluation outcomes to follow.

### Neath

- NPTH – Fire stopping works - ongoing likely completion March 2022
- Hospital Wide Evacuation document to be developed and exercised.
- Business Continuity Plans site wide continue to be updated and communicated to all areas.
- Phase 2 of the Anti Ligaure works is due to commence in ward F in March 2022.
- New security measures for mortuary are being progressed

A Service Group Health + Safety and EPRR meeting is now established led by a Divisional Manager for Hospital Operations.

The daily safety huddle invite at both sites includes all divisional managers, deputy heads of nursing and matrons as well as therapy colleagues and pharmacy colleagues.

A Hospital Operations Division Q,S & R meeting has been established led by a Divisional Manager for Hospital Operations. A separate MIU Q,S & R meeting is also held.

## COVID-19 Health and Safety Issues (PPE, social distancing, visiting)

- Covid demand steady Ward 16 in Singleton a remain a Covid ward. SAU is the admission for Covid patients
- Both sites continue to follow the Health Board's policies regarding the wearing of PPE, social distancing rules and visiting policies.

## Current issues for 2021-2022 for the Attention of the Committee

Clinically Optimised patients on both sites are continuing to be a strain on patient flow across the sites with issues including patients requiring packages of care, transfers to care homes or social worker allocation.

## Recommendations

Members are asked to: Note paper