



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

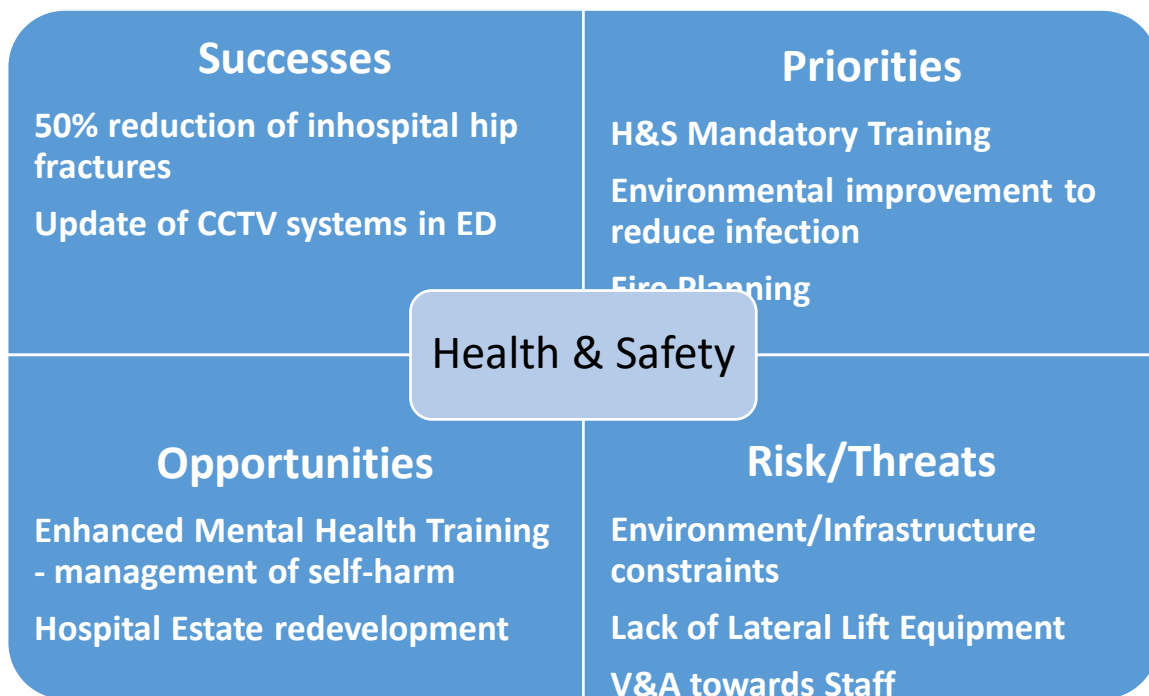


Meeting Date	05 April 2022		Agenda Item	1.2
Report Title	Morrison Service Group: Health & Safety Assurance Report			
Report Author	Suzanne Holloway-Head of Quality and Safety, Morrison SG			
Report Sponsor	Alison Gallagher, Interim Associate Director EC&HO			
Presented by				
Freedom of Information	Open			
Purpose of the Report	To provide the Health Board's Health & Safety Committee with an assurance report on health & safety outcomes, challenges and risks in relation to Morrison Hospital. Setting out improvement actions for 2022/2023			
Key Issues	The report will cover the following key issues: <ul style="list-style-type: none"> • Health & Safety Assurance • Patient Health & Safety linked to Health Board Quality Priorities • Staff Incidents • Health & Safety Mandatory Training Performance • Service Group based Health & Safety Risks 			
Specific Action Required <i>(please choose one only)</i>	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"> • Recognise the changes in place and proposed in relation to the governance structure for health & safety issues and risks at Morrison Hospital in order to provide assurance to the Health Board. • Note current outcomes, Issues and risks identified within this paper in respect of health & safety and the work undertaken in order to mitigate risk and improve safety both for patients and staff. 			

Morrison Service Group Health & Safety Report

1. INTRODUCTION

To provide the Health Board's Health & Safety Committee with an update report on health & safety outcomes, issues and risks at Morrison Hospital. The SPORT table below outlines key successes, priorities, opportunities and risk/treats



2. BACKGROUND

2.1 Health & Safety Business Assurance at Morrison Hospital

The Morrison Health, Safety and Environmental (HS&E) Group is a sub-group of the Morrison Service Group Management Board and provides operational focus with regards to all site based health & safety issues, providing a formal quarterly exception report. The strategic and operational leadership for the HS&E Group sits within the Hospital Operations Division of Morrison Service Group.

In establishing the HS&E Group, consideration has been given to the need to develop stronger operational relationships with both the Estates and the Facilities Departments (based at Morrison Hospital). This group aims to ensure that there are clear lines of communication and that joint decision-making and risk assessment are undertaken on a routine basis.

This meeting is chaired by the Divisional Service Manager for Emergency Care and Hospital Operations and has been in place in this current format since February 2019.

2.2 Health & Safety Improvement Notice Risk

Morrison Service Group currently has no outstanding improvement notices issued on behalf of the Health & Safety Executive.

3. PATIENT SAFETY

The following patient safety issues have been identified by the Health Board as part of their key quality priorities; each have an overlap into the delivery of national/local standards within health & safety.

3.1 Falls Prevention

Morrison currently has an inpatient falls rate of **5.2 inpatient falls per 1000 beddays** (Feb 2022), which is within the nationally accepted standard. In addition, the number of in-hospital fractured hips have been **reduced by 50%** over the past year. (*This rate places Morrison within the nationally accepted standard of 6.63 inpatient falls per 1000 beddays*).

Information relating to in patient falls indicates a clear link to patients with COVID-19 and an increase in inpatient fall events.

There is an increasing need to utilise lateral lift equipment in line with Health Board Policy.

Key Focus 2022

Patient engagement where possible to ensure they make informed decisions about their mobility, when in hospital.

Procure equipment and train additional staff in the use of lateral lifting equipment.

3.2 Preventable Pressure Damage

COVID-19 has driven a change in the presentation of pressure related injury, particularly via emergency pathways. Patients are presenting in a poorer general condition, have had long periods of isolation and/or a reduction in access to primary care services over a prolonged period.

Of particular concern are patients who are presenting via ambulance services who have had a “long-lay” at home, which makes them at very high risk of pressure damage, during the admission process.

Key Focus 2022

Active engagement with WAST to reduce risk to patients of pressure related injury whilst waiting to be off-loaded from ambulance vehicles.

3.3 Healthcare Acquired Infection

Healthcare acquired infection trends and outcomes in relation to Welsh Government reduction targets have been reported and monitored via the Health Board’s Infection Prevention and Control Committee.

Mortality rates associated to COVID-19 Nosocomial Infections have been actively collected and contemporaneously reported to Public Health Wales (Death within 28 days of a positive COVID-19 infection), has been in place since September 2020.

Since that time **553 patients** have passed away within 28 days (as at 21/03/2022), based on an initial assessment it is likely that **136 patients** acquired their COVID-19 infection whilst in hospital.

Key Focus 2022

Transfer of service based nosocomial mortality review work into dedicated corporate resource to support planned complex review of all patients identified as being subject to nosocomial COVID-19 infection.

3.4 Suicide Prevention

During an unannounced review of the Emergency Department by HIW in January 2020 issues in relation to potential ligature point within the Department.

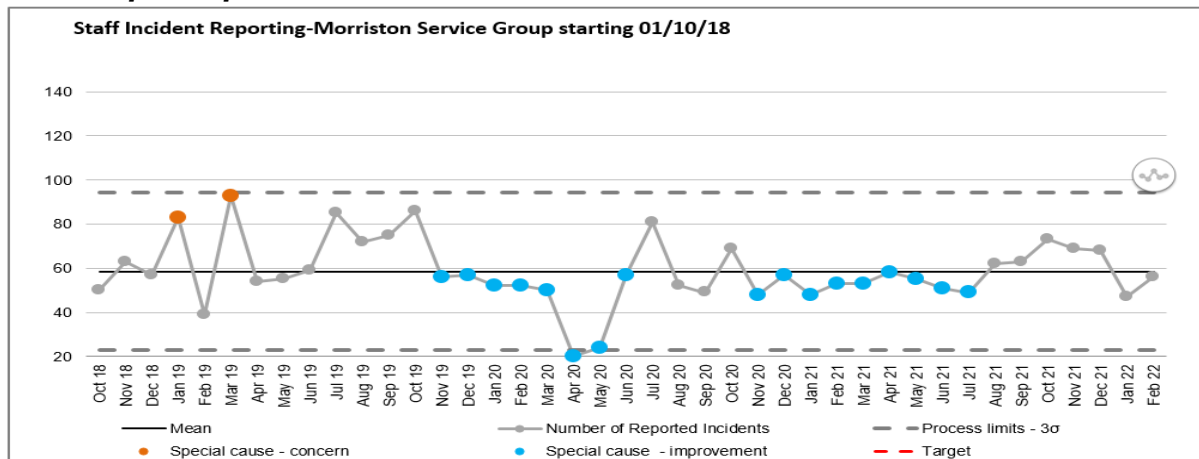
Supported by the corporate H&S Team the review and remedial work required within the Emergency was undertaken. However, in addition, accepting that this issue could be a risk across the hospital estate, extended work has been undertaken within a number of clinical areas to assess and reduce risk in relation to ligature points.

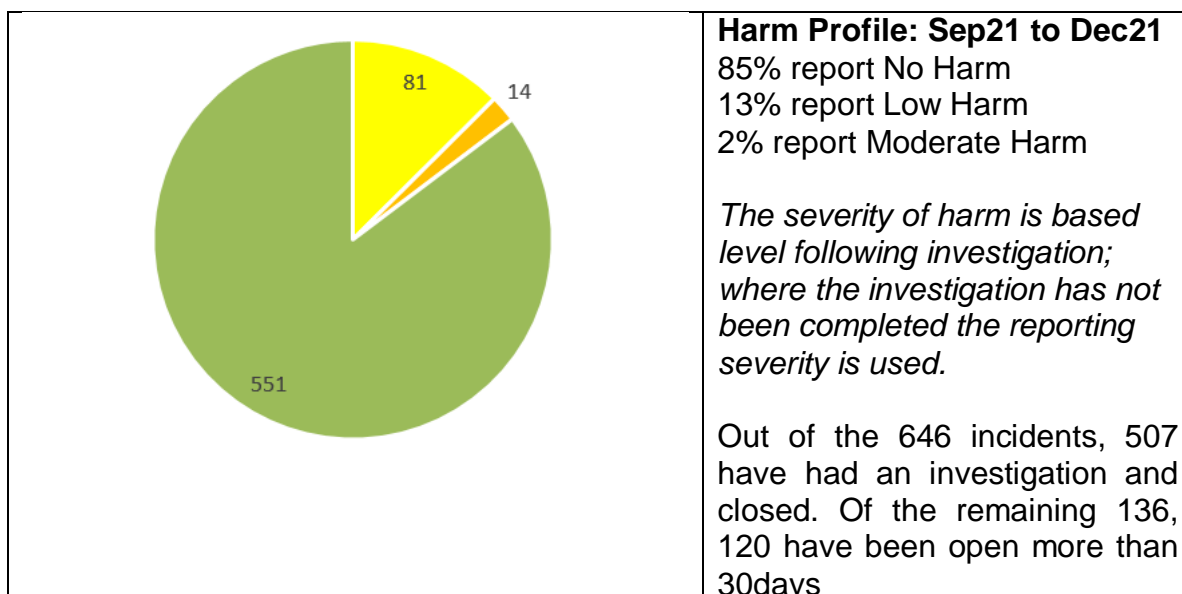
Key Focus 2022

Completion of the assessment and remedial work for ligature points
 Roll-out of bespoke training for staff who encounter patients who are verbalising intention for self-harm

4. STAFF SAFETY

4.1 Update position





Significant/Severe Harm

Staff incident reporting is stable at approximately 60 incidents per month. There were no incidents of severe (red) harm reported in the 11 months April 2021 to February 2022.

Of the 18 incidents which reported significant (amber) harm: 7 related to behaviour (V&A) toward staff by a patient or visitor, 4 related to in work accidents (contact with sharps, manual handling), 2 related to occupational infection and 1 related to communication.

57% of all reported Staff incidents are linked to inappropriate/aggressive behaviours toward staff members

Key Focus 2022

Reduction in staff incidents related to poor behaviour
 Zero tolerance for incidents reporting poor behaviour between staff members

5. MANDATORY TRAINING COMPLIANCE

The table below demonstrates Morriston Service Group performance against key mandatory training indicators to support the health & safety agenda.

	Jan 2021	Jan 2022
Fire Safety Training	68.1%	69.9%
Health Safety and Welfare	81.6%	75.2%
Moving and Handling (Level 1)	64.5%	66.4%
Violence & Aggression	81.1%	83.1%

6. HEALTH & SAFETY: RISKS

The Morriston Service Group Risk Register currently has 18 risks linked to health & safety of which 3 are 16 or above:

- Risk to Emergency Dept staff as a result of patient behaviour (V&A) (16)
- Inpatient Falls Risk on medical wards (16)
- Occupational Acquired Infection (COVID-19) within the Emergency Department (16)

The above risk scores are supported by evidence based prevalence and all 3 have clear monitoring and improvement in place.

Key Focus 2022

All senior staff to undertake Risk Management Training (Level2)
 Link Hospital Estate/Infrastructure from Estates RR into Service Group RR
 Fire Planning - Morriston's current plan is out of date and needs revision in light of redevelopments

7. UPDATE ON REPLACEMENT FLOORING MORRISTON HOSPITAL

The Health Board have received WG funding to replace the corridor flooring on all floors on the Morriston site. A sum of £410k has enabled replacement flooring and new bumper protection rails to the ground floor only. Work is scheduled for completion by 31st March however due to contractor staff COVID absence this is expected to be rolled into the first week of April 2022. Fire doors have also been replaced on the ground floor of the hospital and this work is complete.

8. RECOMMENDATION

- **Recognise** the changes in place and proposed in relation to the governance structure for health & safety issues and risks at Morriston Hospital in order to provide assurance to the Health Board.
- **Note** current outcomes, Issues and risks identified within this paper in respect of health & safety and the work undertaken in order to mitigate risk and improve safety both for patients and staff.

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 checked="" 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 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 checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
Assurance in regards to both people who visit and use our hospital and the staff that work at the hospital are safe whilst on site.		
Financial Implications		
The above exception report does not require any additional financial resources.		
Legal Implications (including equality and diversity assessment)		
All legal considerations have been reviewed and noted within the report.		
Staffing Implications		
None identified.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
The committee are asked to note the focus on prevention and co-production with patients and staff in achieving positive outcomes.		
Report History	None.	
Appendices	None	