



MINUTES OF THE OPERATIONAL HEALTH AND SAFETY GROUP MEETING

Held on Tuesday 2nd October 2018
Board Room
Baglan HQ

Present

Laurie Higgs (LH)	Head of Health & Safety (Chair)	Strategy
Susan Jones (SJ)	Head of Operations	NPT SDU
Suzanne Holloway (SuH)	Head of Quality and Safety	MGH SDU
Malcolm Lerwell	Site Manager	POW SDU
Eve Jeffery	Assistant Head of Operations	Mental Health/LD
Huw George	Risk Adviser,	Patient Feedback Team
Nigel Hill (NH)	Trade Union Representative	UNISON
Steve Davies (SD)	Trade Union Representative	UNITE
David Murphy (DM)	Deputy Head of Health & Safety	Strategy

Apologies

Darren Griffiths (DG)	Assistant Director of Strategy	Strategy
Joe Hale (JH)	Trade Union Representative	UNISON
Maria Stolzenberg	Head of Risk and Assurance	Nursing
Debra Rees (DR)	Quality and Safety Manager	PC/Comm SDU
Matthew Fisher (MF)	Site Operational Manager	SGH SDU
Des Keighan (DK)	Assistant Director of Strategy (Estates)	Estates
Joanne Jones (JJ)	Head of Support Services	Planning
Elaine Grant (EG)	Secretary	Planning

Part A – Standing Items

		Action
H&S 2018 036	<u>Minutes of Last Meeting</u> The minutes of the meeting on Friday 4 th May 2018 were accepted and approved as a true record of the meeting.	
H&S 2018 037	<u>Matters Arising/Action List</u>	
H&S 2017 058 Evacuation sheets <u>Open</u>	Training has commenced for ward staff in Central Ward Block Singleton. Manual Handling coaches to train on bed evacuation sheets. Decontamination procedure agreed for bed evacuation sheets	SGH Unit
H&S 2017 061 Capital funding <u>Open</u>	£215k used for hoist replacement from 2018-19 monies. Remaining hoists will require bid to discretionary capital.	DG

H&S 2017 062 Fire representation SSP <u>Open</u>	No recent Fire Safety Group meetings	LH
H&S 2017 065 COSHH procedure <u>Open</u>	Agenda item	LH
H&S 2018 003 H&S Improvement Plan <u>Closed</u>	H&S plan in place	
H&S 2018 009 H&S Policy Review <u>Open</u>	Arrangements being developed to include ABMU-wide policies in H&S Policy	LH
H&S 2018 10 Fire reporting arrangements <u>Open</u>	Agenda item	LH
H&S 2018 021 KPIs to include fire safety <u>Open</u>	Further review 2019	LH
H&S 2018 022 Review risk register <u>Open</u>	Agenda item	LH
H&S 2018 028 Radon gas <u>Open</u>	Develop business case etc.	DK
H&S 2018 30 Hoist replacement programme <u>Open</u>	Agenda item Replace H&S 2017 061 Capital funding	LH
H&S 2018 31 ESR Review <u>Open</u>	Review training recording system for ABMU	DG
H&S 2018 34 Thermal comfort <u>Closed</u>	Advice issued to Health Board	

		Action
H&S 038	<p><u>Feedback ABMU Health and Safety Committee</u></p> <p>LH briefed the group on the outcome of the ABMU Health and Safety Committee meeting held in August 2018. LH informed the group that the Committee had a clear interest on the management of health and safety in Units and are seeking assurance on this matter. At the last meeting the Singleton Unit gave a review on progress with the management of cladding in the central ward block at the hospital.</p> <p>SuH noted that recent advice given from the committee to the Units required the reporting of patient incidents including patient falls and pressure sores. LH stated that he would seek advice on the matter and to report back to the group.</p>	LH
H&S 039	<p><u>Review of Risk Register</u></p> <p>Due to the non-availability of the Head of Risk and Assurance this item was deferred. LH will meet with HG to review the health and safety risks held on the ABMU DATIX risk register.</p>	LH/MS
H&S 040	<p><u>Incident Reports Q 2 2018</u></p> <p>The group reviewed the incident rates and trends for Q2. SuH asked whether patient safety events are included in the report and LH confirmed that clinical incidents were excluded and similarly patient fall incidents were not reported. These incidents are currently dealt with by separate groups such as the patient falls group and committees that report to the Quality and Safety Committee. The group expressed concern that there was a need for further clarification as to reporting arrangements and the roles of both the Quality and Safety Committee and ABMU Health and Safety Committee in patient incident management, reports and analysis.</p> <p>The group noted that the report classed trends where there were no significant change in incidents numbers reported as green. The group suggested that they must give focus to the analysis of high rate incidents to confirm if there any opportunities to improve systems. It was suggested that high-rates of incident reporting was a positive indicator of health and safety performance as low injury outcome incidents were being captured. SuH stated that for some incidents such as visitor to staff assaults we should adopt a zero tolerance approach.</p> <p>The group noted that where incident rates had increased and ward and department specific reports were made there were no corresponding incidents in those areas for the previous quarter. ML confirmed that this was due to no incident occurring in the previous quarter. LH stated that one of the aims of the report was to develop an understanding why rates were changing and Units would be able to identify specific areas where rates were increasing and reasons why. This data could be used for Unit Health and Safety group reviews. EJ noted that the increase of violence and aggression in the PICU at POWH was associated with a single patient.</p> <p>LH agreed that a report be produced for the next group meeting to review the content and quality of the report and make recommendations on how it can be effectively used in levels of the Health Board.</p>	LH

<p>H&S 041</p>	<p><u>RIDDOR (July-August 2018)</u></p> <p>The group reviewed the near miss that occurred in Llansamalet laundry (DATIX reference 85885). A member of Estates staff received injuries when a machine that was being worked was restarted by Laundry staff. The group requested that Estates and Support Services report back on arrangements for protecting staff in these circumstances including permits to work, isolation of equipment and cooperation and coordination between the two services.</p>	<p>DK/JJ</p>
<p>H&S 2018 042</p>	<p><u>Reports from Enforcing/Inspecting Authorities/</u></p> <p>HSE</p> <p>The group reviewed the current position regarding HSE inspections and action in the Health Board</p> <ol style="list-style-type: none"> 1. SJ and SuH expressed concern that there still was no resolution regarding decontamination systems with both HPV and UVc suspended. Very significant costs have been experienced commissioning contractors to undertake the work. LH confirmed that both systems were voluntarily withdrawn by the Health Board. The strategy was to reintroduce UVc first and there were no safety issues with HSE regarding this matter 2. ML reported on a recent meeting with HSE to review arrangements in A&E at Princess of Wales Hospital (POWH). Action taken to train staff, introduce CCTV, review role and resources of security staff and control access arrangements. SE satisfied with progress. SuH and LH noted that there were now two training systems in A&E departments in ABMU with A&E staff trained in restraint at POWH. SuH requested that ML share good practice with her for Morriston Hospital (MGH) 3. Reports have been made to the HSE regarding the lift incident and Scabies outbreak at Princess of Wales Hospital (POWH). ABMU awaiting HSE response 4. HSE have visited MGH regarding clinical waste cupboard and had no concerns. 	
<p>H&S 043</p>	<p>Reports from Sub Committees</p> <p>Sharps</p> <p>LH reported that following a review by the Safer Sharps group the current device for the management of insulin pens would continue. This decision was based upon the complexity of other safety engineered devices available on the market. The Safer Sharps group had also reviewed usage of the current device and had identified rate of purchasing of the safety device to be low. A training programme will be implemented to retrain staff on the correct use of the safety engineered product. SuH asked who had represented the unit and LH confirmed that Diabetes Specialist Nurses had been consulted on the decision.</p> <p>Other Reports</p> <p>Reports for Fire safety, , Asbestos, Water safety, Security, Medical Gas Safety and Low Voltage Electricity were not available for the meeting</p>	

Part B – Work Planned Topics

		Action
H&S 2018 044	<p><u>Update to Hoist Replacement Programme 2018</u></p> <p>LH confirmed that the £215k available in the 2018-19 capital programme had been used and equipment deployed primarily to Princess of Wales and Neath Port Talbot Hospitals. There is a remaining shortfall of £90k and a separate bid has been made for this capital. Consequently the £215k was utilised on a risk-based approach.</p>	DG
H&S 2018 045	<p><u>Thematic Review Manual Handling</u></p> <p>The group reviewed the ABMU arrangements for manual handling.</p> <p>SuH noted the incident and claims management data and commented that with the large numbers of manual handling activities in the Health Board these figure were at an acceptable level of risk. A recent claim had been successfully defended that considered matters such as the training and information received by the plaintiff and size of the load alleged to have caused injury.</p> <p>SJ commented that the risk of patient falls and staff being injured whilst controlling any fall was difficult to prevent. Risk assessments are made on the risk of patient falls but these cannot prevent all incidents. LH confirmed that the management of a falling patient was included in the standard 2-day patient handling training programme (Passport).</p> <p>SD asked whether sickness and absence figures were included in the report. LH replied that on ESR there is a separate code for sickness associated with work related accidents but this does not then break down the code into specific accident types.</p> <p>Training performance was reported as 85%. LH confirmed that this figure is based on nursing metrix returns</p> <p>LH confirmed that this report would now be submitted to the AMU Health and Safety Committee</p>	LH
H&S 2018 046	<p><u>Fire Risk Assessment Monitoring</u></p> <p>SuH noted a concern regarding the lack of effective maintenance of fire alarm systems in Morrision where the fire alarm system was offline for a weekend. It was agreed that this was a matter for review by the fire Safety Group but LH informed the group that the Fire Safety Group had not meet for a period of time and needs reinvigorating.</p> <p>LH informed the group that to improve the monitoring of action following fire risk assessments centralised monitoring was to be introduced. This data will be available for Operational Health and Safety group along with Unit Health and Safety groups.</p>	
H&S 2018 047	<p><u>COSHH Procedure and Risk Assessment</u></p> <p>LH discussed the approach recommended to the Operational Health and Safety Group of giving high focus to higher risk substances. Other substances of lower risk such as detergents etc. used in certain areas would require a simpler approach of controlling risk by good hygiene, following manufacturer's instructions and security of the products. The procedure included guidance for managers on best practice to control the risks and COSHH specific risk assessments forms and example of completed form for a low risk</p>	

	environment. Comments back to LH in three weeks	Ops H&S Group
H&S 2018 048	<u>Health and Safety Plan Status Update</u> Due to time constraints this was deferred to the next meeting.	
H&S 2018 049	<u>Review Internal Audit Action Plan for Health and Safety</u> The group noted the content of the internal audit report. LH informed the group that a further follow-up review was imminent and would be advised to the Group as soon as possible	LH

Part C – Other Business

H&S 2018 050	<u>Consultation on Anti-Violence Collaborative Document</u> The Group was made aware of the update of the previous Memorandum of Understanding that recorded the relationship between the NHS s, Police and Crown prosecution in Wales. LH noted that there was a possible risk that the ABMU Case Managers would be required to adopt a semi-police role in respect of interviewing staff. However, the primary focus of the Case Manager would continue to be preventative and giving advice and support to Units etc.	Action
H&S 2018 051	<u>WG EFA 2018 005: Assessment of Ligature Points</u> The group discussed the risks present in acute hospitals from ligature points. It was agreed that there may be risks associated with the entry points to hospital services such as Accident and Emergency and Acute Medical Admissions Units. SJ stated that some sites such as Neath Port Talbot would have a mixture of mental health wards with high standards of anti-ligature fittings but then general areas such as the atrium that presented a risk of patients climbing and jumping. Agreed that LH would seek further clarification on health and safety matters affecting clinical areas in acute settings.	LH
H&S 2018 052	<u>AOB</u> SD reported that prescription safety spectacles were no longer being provided in Estates. Estates to report back to group. SD stated that the Asbestos register was now not available for Estates staff to consult as no longer available on Z drive. This was due to awaiting new IT system to be installed. Estates to report back to group HG reported that HIW had recently visited Neath Port Talbot Hospital and noted inadequate arrangements for Potable Appliance Testing (PAT). SJ reported that the hospital had not been tested but the complaint was largely addressed at medical electronic equipment. Other hospitals have been subject to PAT testing and SJ will contact DK to make the arrangements for testing at NPTH.	SJ/DK

H&S 2018 052	<u>Date and Time of Next Meeting</u> To be confirmed. Need to review current arrangements and coordinate with ABMU Health and Safety Committee dates	
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Action Log: Health and Safety Group October 2018

Open

Minute Reference	Action	By Whom	Action Status
H&S 2017 058	Evacuation SGH	SGH Unit	Further review of equipment for Oxygen cylinder management
H&S 2017 062	Fire representation SSP	LH	Awaiting next group meeting
H&S 2018 009	Health and safety policy review	LH Units etc.	Under review
H&S 2018 010	Review fire training reporting arrangements	Fire Safety Group	Review use of ESR etc.
H&S 2018 016	Meeting arrangements	LH	Review against ABMU H&S Group
H&S 2018 021	Review H&S Plan	LH	To include fire safety risk assessments
H&S 2018 022	Risk Profile	LH/MS	Review DATIX etc.
H&S 2018 028	Radon gas monitoring	DK	Review arrangements and funding
H&S 2018 030	Hoist replacement programme	DG/LH	Funding etc.
H&S 2018 031	ESR review	Ops H&S Group	See H&S 2018 010
H&S 2018 038	Role of ABMU H&S Committee for patient fall accidents etc.	LH	Clarification required
H&S 2018 039	Review of risk register	LH/MS	Defer to next meeting
H&S 2018 040	Review KPI for incidents	LH	Confirm current content etc.
H&S 2018 041	Llansamelt RIDDOR	DK/JJ	Review safety procedures
H&S 2018 044	Hoist replacement	DG	Seek funding fry remaining £90k
H&S 2018 045	Thematic Review Manual Handling	LH	Submit to ABMU H&S Comm.
H&S 2018 047	COSHH procedure	Ops H&S	Comments for approval
H&S 2018 049	Updated report for Internal Audit H&S	LH	Provide to Ops H&S Comm
H&S 2018 051	Ligature Points	LH	Strategy for acute hospitals
H&S 2018 051	PAT testing	DK?SJ	Confirmation of arrangements at NPTH

Closed

Minute Reference	Action	By Whom	Action Status
H&S 2017 061	Capital funding	DG	Transfer to H&S 2018 044
H&S 2018 003	Action Plan 2018-19 Review Unit, Estates and Facilities H&S arrangements	Ops H&S	Plan in place

H&S 2018 034	Thermal comfort	LH	Information to ABMU intranet