

Swansea Bay University Health Board

Unconfirmed  
**Minutes of the Meeting of the Health and Safety Committee**  
**1<sup>st</sup> September 2020 via Microsoft Teams**

**Present**

Maggie Berry Independent Member (in the chair)  
Jackie Davies Independent Member  
Tom Crick Independent Member

**In Attendance:**

Leah Joseph Corporate Governance Officer  
Mark Parsons Assistant Director of Health and Safety  
Kathryn Jones Interim Director of Workforce and Organisational Development  
Laurie Higgs Head of Health and Safety  
Liz Stauber Head of Corporate Governance  
Mark Madams Unit Nurse Director, Morriston Hospital (from minute 75/20 to )  
Hazel Lloyd Head of Patient Experience (to minute 78/20)  
Craigie Wilson Deputy Chief Operating Officer (to minute 79/20)  
Hilary Dover Director of Primary and Community Services (from minute 85/20 to 86/20)  
Debra Rees Quality and Safety Manager, Primary and Community Services (from minute 85/20 to 86/20)  
David Roberts Service Director, Mental Health and Learning Disabilities (minute 87/20)

Minute No.		Action
70/20	<b>APOLOGIES</b>	
	Apologies for absence were received from: Des Keighan, Assistant Director of Operations; Chris White, Chief Operating Officer/ Director of Therapies and Health Science; Christine Williams, Interim Director of Nursing and Patient Experience; Pam Wenger, Director of Corporate Governance; Joanne Jones, Head of Support Services.	
71/20	<b>WELCOME / INTRODUCTORY REMARKS</b>	
	The chair welcomed everyone to the meeting.	
72/20	<b>DECLARATION OF INTERESTS</b>	

	There were no declarations of interest.	
<b>73/20</b>	<b>MINUTES OF THE PREVIOUS MEETING</b>	
	The minutes of the meetings held on 13 <sup>th</sup> July 2020 were <b>received</b> and <b>confirmed</b> as a true and accurate record.	
<b>74/20</b>	<b>MATTERS ARISING</b>	
	<p>i. <u>132/19 Caswell Clinic</u></p> <p>Maggie Berry queried whether the personal alarm system has been fitted. Mark Parsons advised that he is awaiting a response and requested that this action remains on the action log.</p> <p>ii. <u>14/20 Six facet review of backlog maintenance</u></p> <p>Mark Parsons advised that the Assistant Director of Operations has flagged this item to the Capital team for it to be included in next year's budget. Maggie Berry highlighted the importance of this being on next year's budget and the update will be included in September's board report for this committee.</p> <p>iii. <u>Electrical testing at Gorseinon Hospital</u></p> <p>Maggie Berry queried whether the electrical testing at Gorseinon Hospital had been completed. Mark Parsons will raise this with the estates team. Maggie Berry requested that this item is reinstated as incomplete on the action log.</p>	<b>MP</b>
<b>Resolved:</b>	<ul style="list-style-type: none"> <li>- Electrical testing at Gorseinon Hospital to be reinstated on the action log.</li> <li>- Caswell Clinic to be reinstated on the action log</li> </ul>	<b>LS</b>
		<b>LS</b>
<b>75/20</b>	<b>ACTION LOG</b>	
	<p>i. <u>136/19 Control of Substances Hazardous to Health Regulations (COSHH)</u></p> <p>Maggie Berry requested an update report on COSHH at December's committee.</p> <p>ii. <u>35/20 Health and Safety COVID-19 Newsletter</u></p> <p>Mark Parsons advised that there has been a delay producing the</p>	<b>MP</b>

	<p>newsletter and queried if committee members would be happy if it was presented in a Microsoft Word format. Committee members agreed with the format change. Mark Parsons advised that he would chase the medical illustration team over the next 7 days and if he does not receive the newsletter, he will update the format accordingly and circulate to the Senior Leadership Team in September.</p> <p>iii. <u>05/20 Occupational Health Presentation</u></p> <p>Kathryn Jones advised that to date the presentation has not been through the Executive Board. Maggie Berry suggested that the presentation is refreshed following COVID-19 activity and changes with a view of it going through the Executive Board in the new year.</p>	KJ
	The action log was <b>received</b> and <b>noted</b> .	
<b>76/20</b>	<b>COMMITTEE WORK PROGRAMME 2020-21</b>	
	The committee's work programme for 2020-21 was <b>received</b> and <b>noted</b> .	
<b>77/20</b>	<b>HEALTH AND SAFETY PLAN UPDATES</b>	
	<p>A report providing an update on the Health and Safety plan was <b>received</b>.</p> <p>In discussing the report, the following points were raised:</p> <p>Jackie Davies complimented the term 'ownership' detailed within the documents and found the plan easy to understand.</p> <p>Maggie Berry queried how the plan and its progress will be monitored. Mark Parsons advised that it is monitored via the Health and Safety Operational Group, and any items for concern would be highlighted within its report.</p>	
<b>Resolved</b>	The report was <b>noted</b> .	
<b>78/20</b>	<b>HEALTH AND SAFETY RISK REGISTER</b>	
	<p>A report providing an update on the Health and Safety risk register was <b>received</b>.</p> <p>In introducing the report, Hazel Lloyd highlighted the following points:</p> <ul style="list-style-type: none"> <li>- The risks that are currently assigned to the Health and Safety Committee are Health and Safety Infrastructure; Fire Safety</li> </ul>	

	<p>Compliance; and Environment of Premises;</p> <ul style="list-style-type: none"> <li>- This report provided the opportunity for committee members to consider whether any operational Health and Safety risks covered should be considered for inclusion onto the Health Board Risk Register (HBRR) or whether any existing HBRR entries require updating.</li> </ul> <p>In discussing the report, the following points were raised:</p> <p>Jackie Davies highlighted that Cladding at Singleton Hospital should be raised at December's Health and Safety In-committee meeting. Mark Parsons advised that he met with the Fire and Rescue Service to discuss the cladding plans. The outcome was positive and the Fire and Rescue Service have been invited to walk through the site prior and throughout the works taking place.</p> <p>Maggie Berry noted that there are numerous COSSH issues, with fire risks and manual handling being a part of this.</p> <p>Hazel Lloyd queried whether operational risks that have a target of 12 and above need to be removed from the Health and Safety Risk Register, and added to the Health Board Risk Register. The committee members agreed with her suggestion.</p> <p>Maggie Berry queried whether the environment risk needs to remain high on the Health and Safety Risk Register even though the risk has reduced. Hazel Lloyd will discuss with the Assistant Director of Operations</p> <p>Jackie Davies queried whether the quality of the Personal Protective Equipment (PPE) is a concern. Mark Parsons confirmed that quality is not an issue for the health board as the Surgical Material Testing Laboratory (SMTL) check the validity of certificates and also test the equipment if required.</p> <p>Maggie Berry requested that the report has a summary on the risks that score 20 or above. Hazel Lloyd confirmed that she would provide this within the report going forward.</p>	<p>HL</p> <p>HL</p> <p>HL</p>
<p><b>Resolved:</b></p>	<ul style="list-style-type: none"> <li>- Operational risks with a target of 12 and above to be included in the Health Board Risk Register.</li> <li>- Discussion re environment risk score with Assistant Director of Operations.</li> <li>- A summary on the risks that score 20 or above be included in future covering reports.</li> <li>- The report was <b>noted</b>.</li> </ul>	<p>HL</p> <p>HL</p> <p>HL</p>

79/20	<p><b>RESTARTING DELIVERY SERVICES IN A PHYSICALLY DISTANCING ENVIRONMENT</b></p>	
	<p>A report providing an update restarting delivery services in a physically distancing environment was received.</p> <p>In introducing the report, Craige Wilson highlighted the following points:</p> <ul style="list-style-type: none"> <li>– The Physical Distancing Work Cell has been involved in a number of areas of work which is aimed at ensuring the HB are complying with the Regulations and guidance;</li> <li>– COVID-19 Guidance For Bed-Spacing in Healthcare Settings’ was issued on 26<sup>th</sup> June 2020;</li> <li>– As a result of risks assessments reviewed corporately, and in light of the Operational guidance from Welsh Government, it was agreed that the Health Board needed to maintain a focus in this area and therefore a Physical Distancing cell was established;</li> <li>– Primary Care and Community are reviewing physical distancing within General Practitioner settings;</li> <li>– Communications surrounding physical distance awareness and the badge campaign have been circulated;</li> <li>– The financial implication is £18k, however this is expected to increase due to the direct complications following the guidance and guidelines.</li> </ul> <p>In discussing the report, the following points were raised:</p> <p>Mark Parsons advised that he is a part of the Physical Distancing Work Cell and the measures that have already been put in place have been good, and Consultants on the wards have willingly engaged with the changes. He highlighted that issues have been identified in respect of bed spacing, however raised the importance of a consistent approach so that staff are aware of the required distances on all sites. Mark Parsons also detailed that the work cell are procuring a number of clear curtains that the infection prevention control team have agreed, and stated that the feedback from patients in relation to the measures already in place have been positive.</p> <p>Jackie Davies requested assurance that surge beds will not be utilised throughout this social distancing period. Craige Wilson advised that surge beds will not be used.</p> <p>Jackie Davies queried the current position of the homeworking policy. Kathryn Jones advised that this should be referred to the Workforce and OD Committee for an update to be received, and added that the policy</p>	<p><b>KJ</b></p>

	<p>had already been updated and approved.</p> <p>Mark Madams advised that Murrison Hospital has not yet reduced any beds to date, however risk assessments have taken place and only the measurements have been reviewed. He stated that there were two separate measurements that were previously provided which had caused confusion. Infection Control risks have been highlighted in respect of cleaning the clear curtains and also falls have triggered as a possible risk, and a graded response on each of the risks is required on the wards prior to beds being formally moved.</p> <p>Maggie Berry queried if there is a timescale to remove the beds. Mark Parsons advised that re-measuring is required on sites and then a review will need to take place with each Delivery Unit. He also highlighted that a holistic approach is needed when removing beds. Mark Madams stated that the overall decision should go through the Executives before beds are removed.</p> <p>Maggie Berry queried how the long term effectiveness is measured. Craig Wilson advised that local outbreaks of COVID-19 would be a measure, and currently there are no cases across the sites. Mark Madams highlighted that robust isolation into cubicles would be impacting, along with correct PPE usage.</p> <p>Jackie Davies raised concerns that staff could be faced with hostility when discussing social distancing measures with patients, and as such a consistent message to patients is needed. Mark Madams advised that there is an established visiting policy for each of the delivery units, and pre-arranged visiting and also click and collect is on offer for patient laundry which the Patient Advice and Liaison Service manage.</p>	
<b>Resolved:</b>	<ul style="list-style-type: none"> <li>- Homeworking policy to be referred to Workforce and OD Committee.</li> <li>- The report was <b>noted</b>.</li> </ul>	<b>KJ</b>
<b>80/20</b>	<b>MORRISTON HOSPITAL REPORT AND ACTION PLAN FOLLOWING HEALTHCARE INSPECTORATE WALES (HIW) VISIT</b>	
	<p>A report providing an update restarting delivery services in a physically distancing environment was received.</p> <p>In introducing the report, Mark Madams highlighted the following points:</p> <ul style="list-style-type: none"> <li>- This is an update report following HIW's unannounced 3 day and 1 night inspection of Murrison Hospital's Emergency Department (ED) and Acute Medical Admissions Unit between the period 27<sup>th</sup> to 29th January 2020;</li> </ul>	

- HIW also inspected hospital operations, site meetings, medially fit for discharge meeting, ward board rounds and daily executive led conference calls;
- There were some patient safety concerns raised to the Unit Medical Director on the first morning of the inspection requiring immediate action which were completed;
- These were in relation to the care of patients delayed in ambulances outside the ED and the checking of resuscitation equipment. These were actioned and assurance provided immediately during the inspection;
- The activity following the COVID-19 pandemic changed the size, scope and function of the site with a clean and dirty function being established;
- Learning has been shared via the Quality and Safety Governance Group;
- COSSH remains a theme and the environment quality is challenging due to lack of storage facilities;
- Work is still needed as off-loading patients from ambulances remained an issue over the August 2020 bank holiday weekend;
- All resuscitation trollies have been replaced with lockable systems;
- There are issues with adopting a different culture and a health board approach is needed.

In discussing the report, the following points were raised:

Jackie Davies commented that the pandemic has given opportunities for the health board to think differently and work in a better way. Mark Madams stated there have been a number of positive and negative changes, but the way the staff have adapted their efforts and provided support and training has been recognised.

Kathryn Jones queried if the culture issues had improved or worsened since the pandemic. Mark Madams advised that although the culture remains an issue, there have been changes within the IPC team which has increased support. He added that there are many IPC issues across sites, and the front door issues are not solely affected by the front door. As an integrated care organisation the focus begins from the patient's front door. He highlighted the importance of providing the correct signage with the appropriate options for patients.

Maggie Berry queried whether lessons are being learnt across the health board as another HIW visit could be conducted at any time on any of its sites. Mark Madams highlighted that a pilot Matron spot checklist has

	<p>been implemented within all areas in each delivery unit which has been developed in a peer review fashion and is completed on a monthly basis. This is a work in progress and is being monitored.</p> <p>Maggie Berry noted that estates issues have been reported, which included ligature and flooring. Mark Madams informed committee members that there are significant flooring issues, the roof above the Intensive Therapy Unit is leaking and as a result 5 beds were lost over the weekend due to flooding. The work to replace the roof will cost approximately £1 million pounds. There are also ligature litigation issues, and there have been a few attempted suicides recently. He added that Mark Parsons had been instrumental to risk assess the actions required, but currently there are no dates for the estates work and a programme needs to be developed.</p>	
<b>Resolved:</b>	The report was <b>noted</b> .	
<b>81/20</b>	<b>SITE RESPONSIBILITY</b>	
	<p>A spreadsheet providing an update on site responsibility was <b>received</b>.</p> <p>Mark Parsons advised that 95% of the document was completed, the full and final document is expected at December's committee.</p>	<b>MP</b>
<b>Resolved:</b>	<ul style="list-style-type: none"> <li>- The final completed document to be brought to December's committee.</li> <li>- The spreadsheet was <b>noted</b>.</li> </ul>	<b>MP</b>
<b>82/20</b>	<b>CHANGE IN AGENDA ORDER</b>	
	The agenda order be changed and items 4.1 be taken next, with 4.2 and 5.1 following.	
<b>83/20</b>	<b>TERMS OF REFERENCE</b>	
	<p>The committee terms of reference was <b>received</b>.</p> <p>In discussing the item, the following points were raised:</p> <p>Maggie Berry highlighted that the Health and Safety Committee does not have a Vice Chair, and this would be discussed and decided upon at the next Independent Member's meeting.</p>	



<b>Resolved:</b>	The terms of reference were <b>approved</b> .	
<b>84/20</b>	<b>HEALTH AND SAFETY COMMITTEE ANNUAL REPORT</b>	
<b>Resolved:</b>	The committee's annual report was <b>received</b> and <b>approved</b> .	
<b>85/20</b>	<b>KEY ISSUES: HEALTH AND SAFETY OPERATIONAL GROUP</b>	
	<p>A report providing an update on Health and Safety Operational Group was <b>received</b>.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> <li>– The COVID-19 risk assessments are in place to support returning services;</li> <li>– There is an increased amount of people on the sites, and it is growing;</li> <li>– Cladding still remains as one of the main risks to the Singleton Hospital site. Phase two covering the front elevation removal and replacement work, with initial enabling works scheduled to commence in Quarter 3/Quarter 4, however this will depend on the requirements to comply with COVID-19 regulations;</li> <li>– General improvement in closure of Medical Device Alerts but further improvement required with some units.</li> <li>– The Health and Safety Operational Group approved the Fire Policy, the Medical Sharps Policy and the Fleet Transport Policy.</li> </ul>	
<b>Resolved:</b>	<ul style="list-style-type: none"> <li>– Fire Policy was <b>endorsed</b>.</li> <li>– Medical Sharps Policy was <b>endorsed</b>.</li> <li>– Fleet Transport Policy was <b>endorsed</b>.</li> <li>– The report was <b>noted</b>.</li> </ul>	
<b>86/20</b>	<b>DELIVERY UNIT: PRIMARY CARE AND COMMUNITY SERVICES</b>	
	<p>A delivery unit report providing an update on Primary Care and Community Services was <b>received</b>.</p> <p>In introducing the report, Hilary Dover highlighted the following points:</p> <ul style="list-style-type: none"> <li>– A total of 12 incidents relating to sharps injuries were reported between the period of 1<sup>st</sup> August 2019 to 31<sup>st</sup> July 2020, and 3 incidents remain under investigation;</li> </ul>	

	<ul style="list-style-type: none"> <li>- There are 7 Environment, Estates and Infrastructure risks on the Unit Risk Register, and 4 of these relate to Sexual Health Clinic Estates;</li> <li>- Two major achievements occurred during this reporting period regarding improved Primary Care facilities thanks to funding provided by the Welsh Government.</li> </ul> <p>In discussing the item, the following points were raised:</p> <p>Maggie Berry noted that motor vehicle accidents were the highest reported incidents in the top 5 incidents. Hilary Dover advised that this was due to minor bumps and issues due to the community staff having to use their cars around the health board area.</p> <p>Maggie Berry highlighted the importance of site responsibility within Primary Care and Community Services. Hilary Dover advised that a discussion with Mark Parsons regarding the correct allocation is needed.</p> <p>Debra Rees advised that in relation to social distancing, all services within shared areas are being reviewed as part of the work. Mark Parsons stated that he has been involved in many discussions regarding shared areas.</p> <p>Maggie Berry thanked Hilary Dover and wished her well with her retirement.</p>	
<b>Resolved:</b>	The report was <b>noted</b> .	
<b>87/20</b>	<b>DELIVERY UNIT: MENTAL HEALTH AND LEARNING DISABILITIES</b>	
	<p>A delivery unit report providing an update on Mental Health and Learning Disabilities was <b>received</b>.</p> <p>In introducing the report, David Roberts highlighted the following points:</p> <ul style="list-style-type: none"> <li>- The Acute Adult Wards and assessment suite at Cefn Coed Hospital remain in part of the old hospital building and the environment is unsuitable for a modern mental health inpatient service. The wards have been refurbished but communal space and sanitary accommodation is inadequate. A formal Capital Project Board has now been established to take forward the Business Case for the re-provision of accommodation for the Acute Adult Inpatient service;</li> <li>- Rowan House is a residential unit based in Cardiff providing an admission and assessment facility for the Cardiff population but operated by the Health Board. The physical maintenance of the</li> </ul>	

	<p>unit and its grounds is shared between the Estates Departments of Cardiff and Vale Health Board and Cwm Taf Morgannwg University Health Board. The Unit is physically isolated since the closure of the neighbouring Park View Health Centre and it is increasingly difficult to agree improvement works within the building and its grounds. Non-recurring monies were used in 2018/19 to purchase furniture and new beds for the Unit and the resolution of works required in the unit are currently being escalated. A recent change has been made to the management arrangements with Service Managers now being organised into geographical hubs. This will increase management presence and visibility in Mental Health and Learning Disability Units.</p> <ul style="list-style-type: none"> <li>– Due to a gap in service provision for inpatient Child and Adolescent Mental Health Services (CAMHS), all Health Boards are required to provide an emergency inpatient bed for a CAMHS patients aged 16-18 years. The designated bed in the Health Board is in Ward F at Neath Port Talbot Hospital which is an acute adult mental health ward. This is considered an unsuitable environment for patients in this age group. Options are being review, however there is a commissioning gap which does need to be filled.</li> </ul> <p>In discussing the item, the following points were raised:</p> <p>Jackie Davies highlighted the need to reinforce the argument of a suitable environment being located for CAMHS patients and added that it is an unacceptable situation. David Roberts advised that this was a Wales-wide problem.</p> <p>Maggie Berry appreciated the clear governance chart within the report, however she had concerns relating to the risks and safety security. David Roberts advised that 90% of HIW Cefn Coed actions related to the environment as the building is approximately 100 years old.</p>	
88/20	<b>ITEMS TO REFER TO OTHER COMMITTEES</b>	
	Homeworking policy to be referred to the Workforce and OD Committee.	<b>KJ</b>
89/20	<b>ANY OTHER BUSINESS</b>	
	There was no further business and the meeting was closed.	
90/20	<b>DATE OF NEXT BOARD MEETING</b>	

	The next scheduled committee meeting is 1 <sup>st</sup> December 2020.	
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