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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	01 December 2020	Agenda Item	2.3
Report Title	Inspections & Audit updates		
Report Author	Mark Parsons, Assistant Director of Health & Safety		
Report Sponsor	Christine Williams, Interim Director of Nursing & Patient Experience		
Presented by	Mark Parsons, Assistant Director of Health & Safety		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide the Health and Safety Committee with an update on the progress following receipt of internal, external inspections and audits.		
Key Issues	<p>The internal health & safety audit carried in 2019/20 identified that:</p> <ul style="list-style-type: none"> • Health & Safety governance structure was not clearly outlined • Identification of specialist areas i.e. estates disciplines, • No clear KPI's identified • Membership did not cover all areas (WOD) not included • No specific work plan to review specific areas – Fire/COSHH etc. • Policies not regularly reviewed • Regular review of Terms of Reference not undertaken • There was inconsistency in reviewing H&S risk register • No regular review, update of internal audit reports <p>The internal fire audit brief 2020/21 identified that:</p> <ul style="list-style-type: none"> • No clear identification of fire risk assessments for anticipated completion dates • Identification of works completed, not fully documented or not available during audit • No documented evidence of communication between corporate committees/groups and service director committees/groups relating to fire • No process to complete sign off of works identified in fire risk assessment • Fire advisors to attend appropriate committees/groups, • Mechanism to provide assurance to the H&S committee 		

	Singleton Hospital Cladding removal & Replacement			
	<ul style="list-style-type: none"> • Prepare and submit full business • Outline mobilisation schedule • Schedule and agree ward closures (decant) • Outline phased programme of works for cladding removal 			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	Members are asked to : <ul style="list-style-type: none"> • NOTE the report 			

INSPECTION AND AUDIT UPDATE

1. INTRODUCTION

The purpose of this report is to provide the Health and Safety Committee with an update on the progress following receipt of internal, external inspections and audits.

2. BACKGROUND

2.1 Internal Audit 2018/19 & 20/21

As part of the internal audit plan which was commissioned in order to evaluate the processes and procedures that support the management of health & safety, within the University Health Board a limited assurance assessment rating was received by internal audit in relation to health & safety in 2019-2020.

A fire safety audit brief 2020/21 has been shared with the health board outlining key findings from previous reports as well as the scope for the 2020/21 audit.

2.2 Internal Audit Findings

There was recognition of the works being undertaken to address the HSE improvement notices and that resources quite rightly were focussed to enable the health board to comply with the notices. A number of key areas were identified:

- There is a need to strengthen reporting from specialist groups, including those operating within estates
- The health & safety committee programme did not have specific areas to review in the committee planner,
- Health & Safety governance structure,
- H&S Operational group membership to be reviewed,
- Regular review of Terms of Reference not undertaken,
- There was inconsistency in reviewing H&S risk register
- No regular review, update of internal audit reports

2.3 Internal Audit Brief Outline Findings

The audit will focus on the effective mechanisms operated to provide management with appropriate assurance in relation to performance of required duties and the effectiveness of management information and control systems; appropriate actions; by sample testing compliance with regulations and following up on previous agreed actions identified below:

- No clear identification of fire risk assessments for anticipated completion dates
- Identification of works completed, not fully documented or not available during audit
- No documented evidence of communication between corporate committees/groups and service director committees/groups relating to fire
- No process to complete sign off of works identified in fire risk assessment
- Fire advisors to attend appropriate committees/groups

- Mechanism to provide assurance to the H&S committee

2.4 Singleton Hospital Cladding Replacement

Following the initial consultancy and investigatory works undertaken by Arup in late 2017/early 2018, an options appraisal was completed by Arup and issued in March 2019. The purpose of the initial options appraisal was to identify feasible options and supporting cost estimates for removing and replacing the cladding systems and associated work.

The works have progressed in a phased approach with the removal of the cladding from the flank walls (Phase 1) completed in December 2019. Internal audit have subsequently undertaken a review of the programme, and issued their final report to the Health Board on the 10th July 2020. The Health Board received a 'Reasonable Assurance' rating on the programme.

The removal and replacement of the cladding on the main façade and replacement of the cladding on the flank walls (Phase 2) is currently nearing completion of the Full Business Case. Enabling works to provide increased car parking capacity to offset parking losses due to contractor site set up during the work is included within Phase 2 and a request for early funding has been submitted to the Welsh Government.

3. PROGRESS

3.1 Health & Safety

A full review of the audit actions has been undertaken and updated with the only area not fully covered being the H&S KPIs, this is being reviewed to ensure the KPI's are meaningful and currently looking at a two tier approach:

- Tier 1 – set targets for undertaking audits
- Tier 2 – actions identified and completion of actions to be able to close off the actions.

This will be reviewed at the H&S Ops group and reported to the H&S committee once agreed, this is targeted for Q4.

Actions	Comments
Review health & safety governance structure	New H&S governance structures agreed and in place
Identification of specialist areas i.e. estates disciplines	Forward planners incorporate specialist areas to review in place
Review of terms of reference	Further review of ToR have been undertaken following HB structure changes to capture changes to groups from units. This will be submitted to the H&S Ops group in February 2021
Membership did not cover all areas (WOD) not included	H&S Ops group membership reviewed with improved attendance
No specific work plan to review specific areas – Fire/COSHH etc.	Identified in forward planners with deep dives for specific areas/topics in place

Policies not regularly reviewed	Regular agenda item in H&S Ops group and reported through to H&S committee in place
Regular review of Terms of Reference not undertaken,	Scheduled in committee/group forward planners
There was inconsistency in reviewing H&S risk register	Risk register regularly reviewed at H&S Ops group and H7S committee
No regular review, update of internal audit reports	Now included in committee/group meetings
No clear KPI's identified	Currently working through meaningful KPI's

3.2 Fire

Actions	Comments
No clear identification of fire risk assessments for anticipated completion dates	This is in relation to the NWSSP electronic system and needs to be changed nationally. Local systems in place to identify and monitor.
Identification of works completed, not fully documented or not available during audit	Local systems put in place in addition to using estates works booking system 'Planet' to monitor works completed
No documented evidence of communication between corporate committees/groups and service director committees/groups relating to fire	H&S governance structure enables communications in to and from the respective groups/committees, with estates related sub committees reporting through to H&S Ops group, all service groups attend
No process to complete sign off of works identified in fire risk assessment	This will be monitored through the fire safety group and reported through to H&S Ops group
Fire advisors to attend appropriate committees/groups	Fire advisors will attend appropriate groups/committees

Further information is expected from NWSSP as they are currently reviewing the information/evidence collated by the HB for Singleton Hospital. Once the report is received, any actions identified will be acted upon.

The same is being prepared for Morriston Hospital and once completed this will be shared with NWSSP specialist estates (fire) to review and feedback.

3.3 Singleton Scaffolding Project

- Full business case submission completed expected approval December 2020
- Instruction to proceed and mobilisation November/December 2020
- Commencement of site preparation December 2020
- Main works commencement (erect scaffolding) January 2021
- Decant of wards to enable works end January/February 2021

- Phase 1 scheduled completion October 2021
- Phase 2 scheduled completion June 2022
- Phase 3 scheduled completion January 2023
- Phase 4 (final phase) scheduled completion August 2023

The above schedules may change given the current position of COVID-19.

5. NEXT STEPS

There are further actions to be taken to ensure the HB continue to develop and improve health & safety and fire arrangements and the action plans will be monitored through the H&S Ops group and H&S committee.

Singleton cladding replacement programme is regularly monitored through singleton cladding project board meetings.

5. FINANCIAL

There are no financial implication of the paper, however, to implement the actions identify will incur additional costs.

6. RECOMMENDATION

Members are asked to:

- **NOTE** the report

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 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 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 type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>Following the final health & safety internal audit report 2019-2020 and the fire internal audit brief 2020/21 a review has been undertaken to address the health & safety limited assurance assessment areas highlighted in the report and the previous actions from the fire audit brief to ensure there are effective systems, cooperation and ownership of health and safety at all levels are in place to building a positive, safe and healthy environment.</p>		
Financial Implications		
<p>There are no financial implication of the paper, however, to implement the actions identify will incur additional costs.</p>		
Legal Implications (including equality and diversity assessment)		
<p>Swansea Bay University Health Board (SBUHB) is committed to providing and maintaining a safe and healthy work place and to provide suitable resources, information, training and supervision on health and safety to all members of staff, patients Contractors and visitors to comply with the legislative and regulatory framework on health and safety which includes:</p> <ul style="list-style-type: none"> • The Health & Safety at Work Act 1974 • Management of Health and Safety at Work Regulations 1999 • The Regulatory Reform (Fire Safety) Order 2005 		
Staffing Implications		
<p>Staff will be briefed on the developments through health and safety meetings/forums or other groups as determined necessary to ensure that health and safety is discussed, monitored and acted upon. A report on the longer term health and safety staffing and resource requirements is being reviewed.</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The Act requires the Health Board to think more about the long term, how we work better with people and communities and each other, look to prevent problems and take a more joined up approach with partners. There will be long term risks that will affect both the delivery of services, therefore, it is important that you use these five</p>		

ways of working (Long Term Thinking, Prevention, Integration, Collaboration and Involvement) and the wellbeing goals identified in the Act in order to frame what risks the Health Board may be subject to in the short, medium and long term. This will enable The Health Board to take the necessary steps to ensure risks are well managed now and in the future.

Report History	
Appendices	None.