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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	01 December 2020	Agenda Item	2.4
Report Title	Health & Safety Risk Register Report		
Report Author	Jacqui Evans, Interim Assistant Head Risk & Assurance		
Report Sponsor	Pam Wenger, Director of Corporate Governance		
Presented by	Jacqui Evans, Interim Assistant Head Risk & Assurance		
Freedom of Information	Open		
Purpose of the Report	<p>The purpose of this report is to:</p> <ul style="list-style-type: none"> • Inform the Health & Safety Committee of the risks from the Health Board Risk Register (HBRR) assigned to the Health & Safety Committee and; • Report the underpinning operational health & safety risks and actions being taken to minimise the risks. 		
Key Issues	<ul style="list-style-type: none"> • The updated risk register was presented to the Audit Committee on the 12 November 2020, and to the Board on the 26 November 2020, • In October 2020 each Executive Director was requested to review the risk score in light of the new escalation and intervention arrangements balanced with the significant ongoing risks relating to the second, and potentially third wave of the covid 19 pandemic, • The Executive Team reviewed and approved the updated HBRR on the 11 November 2020, • The HBRR contains three risks assigned to the Health & Safety Committee: <ul style="list-style-type: none"> ○ 13 Environment of Premises ○ 41 – Fire Safety Compliance ○ 64 – Health & Safety infrastructure, • In recognition that Covid-19 is a significant “issue” for the Health Board, a specific covid 19 risk register has been introduced, which is overseen by the Covid-19 Gold meetings with the risks being reviewed and updated on a weekly basis. 		
Specific Action Required (please choose one only)	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the updates to the Health Board Risk Register relating to risks assigned to the Health & Safety Committee, and the further changes being made in recognition of the changing risks facing the Health Board and the uncertainty in terms of modelling required as a result of the current 2nd wave of Covid-19, and the risk of a potential 3rd wave, 		

	<ul style="list-style-type: none"> • DISCUSS the risks assigned to the Health & Safety Committee and endorse the mitigating action being taken to manage the risks.
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HEALTH & SAFETY RISK REGISTER (HBRR) REPORT

1. INTRODUCTION

The purpose of this report is to:

- inform the Health & Safety Committee of the risks from the Health Board Risk Register (HBRR) assigned to the Committee and;
- Report the underpinning operational health & safety risks and actions being taken to minimise the risks.

2. BACKGROUND

2.1 Health Board Risk Register (HBRR)

Swansea Bay University Health Board (SBUHB) is committed to providing safe and effective, high quality healthcare. We mandate a culture and environment, which minimises and actively seeks to reduce risk and promotes the health, safety and well-being of patients, staff, visitors and the general public.

All staff have a responsibility for promoting risk management, adhering to SBUHB policies and have a personal responsibility for patients' safety as well as their own and colleague's health and safety. SBUHB encourages staff to take ownership of their responsibilities through a two-way communication process, with appropriate training and support, to identify and manage risk.

The Health Board Risk Register (HBRR) is intended to summarise the key 'live' extreme risks facing the Health Board and the actions being taken to mitigate them.

Each Health Board risk has a lead Executive Director who is responsible for ensuring there are mechanisms in place for identifying, managing and alerting the Board to significant risks within their areas of responsibility through regular, timely and accurate reports to the Senior Leadership Team/Executive Team, relevant Board Committees and the Board.

The HBRR is presented at **Appendix 1** for information.

2.2 Covid 19 Risk Register

The Covid-19 pandemic, also known as the coronavirus pandemic, is an ongoing pandemic of coronavirus disease 2019 (Covid-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The Covid-19 outbreak has had a huge impact on core NHS services. In order to free up enough capacity to deal with the initial peak of the pandemic, the NHS was forced to shut down or significantly reduce many areas of non-COVID care during April, May and June 2020. This, combined with fewer patients seeking care during lockdown, means that there has been a significant drop in elective procedures, urgent cancer referrals, first cancer treatments and outpatient appointments.

The Health Board is in unprecedented times, and the evolving Covid-19 situation poses some practical challenges in terms of board governance, transaction execution and statutory compliance commitments. As they focus on business continuity and crisis management, directors must be in a position to make effective and swift boardroom decisions. Boards remain accountable at times of national crisis and it is important they are seen to be doing the right thing¹ (Good Governance Institute, 2020) and the rationale behind key decisions is transparent. In the context of Covid-19 the strategic governance of the organisation has to be agile. There also needs to be clarity on 'changed' roles and responsibilities, decision making, communication and record keeping. Whilst substantial amounts of management time will be focussed on ensuring that the Health Boards response is coordinated and effective, there is a risk that quality governance and oversight may not be as robust as the resource/capacity of our staff is stretched in an unprecedented way which is changing on a daily basis.

In addition, the Minister of Health and Social Services announced on 13th March 2020, a framework of actions, within which local health and social care providers could make decisions to ensure that preparations could be made in a planned and measured way for managing Covid-19 and included:

- Suspending non-urgent outpatient appointments and ensure urgent appointments are prioritised;
- Suspending non-urgent surgical admissions and procedures (whilst ensuring access for emergency and urgent surgery);
- Prioritising the use of Non-Emergency Patient Transport Service to focus on hospital discharge and ambulance emergency response;
- Expediting discharge of vulnerable patients from acute and community hospitals;
- Relaxing targets and monitoring arrangements across the health and care system;
- Minimising regulation requirements for health and care settings;
- Fast tracking placements to care homes by suspending the current protocol which give to right to a choice of home;
- Permission to cancel internal and professional events, including study leave, to free up staff for preparations;
- Relaxation of contract and monitoring arrangements for GPs and primary care practitioners; and
- Suspending NHS emergency service and health volunteer support to mass gatherings and events.

The focus is now on re-establishing essential services in line with the NHS Wales Covid-19 Operating Framework. Covid-19 business decisions are made against the backdrop of quickly-changing circumstances on the ground, and the Covid-19 risk register offers an essential framework for informing those choices. The risk register accomplishes this by keeping the spotlight on operational changes and offering a structured method to identify and mitigate the derivative risks.

The Covid 19 risk register is presented at **Appendix 2** for information.

¹ <https://www.good-governance.org.uk/blog-post/boards-remain-accountable/>

3. MANAGEMENT OF HEALTH & SAFETY RISKS

3.1 HBRR Health & Safety Risks

There are three risks from the HBRR that are assigned to the Health & Safety Committee which are outlined in table 1 below:

Table 1 – HBRR Risk Assigned to the Health & Safety Committee

Risk	Risk Score
HBRR13 – Environment of Premises	12
HBRR41 – Fire Safety Compliance	12
HBRR64 – Health & Safety Infrastructure	20

The Committee is requested to accept the three HBRR entry risks, subject to any changes, to oversee, scrutinise and challenge in terms of actions being taken to minimise the risks and ensure the agenda is set to cover these areas of risks to enable reporting to the Board.

3.2 Operational Health & Safety Risks

Each Service Group and Directorate hold their own risk registers, which outline the operational risks facing each Service Group/directorate.

Any Operational risks relating to health and safety are monitored by the health & safety team, and any health & safety related risks that may need to be escalated for inclusion on the HBRR are brought to the attention of the risk management group and the Health & safety committee for consideration.

The graph in Figure 1, and table 2 below outline the operational risks by Service Group/Directorate and risk category.

Figure 1 – Operational Risks by Service Group/Directorate and Risk Category

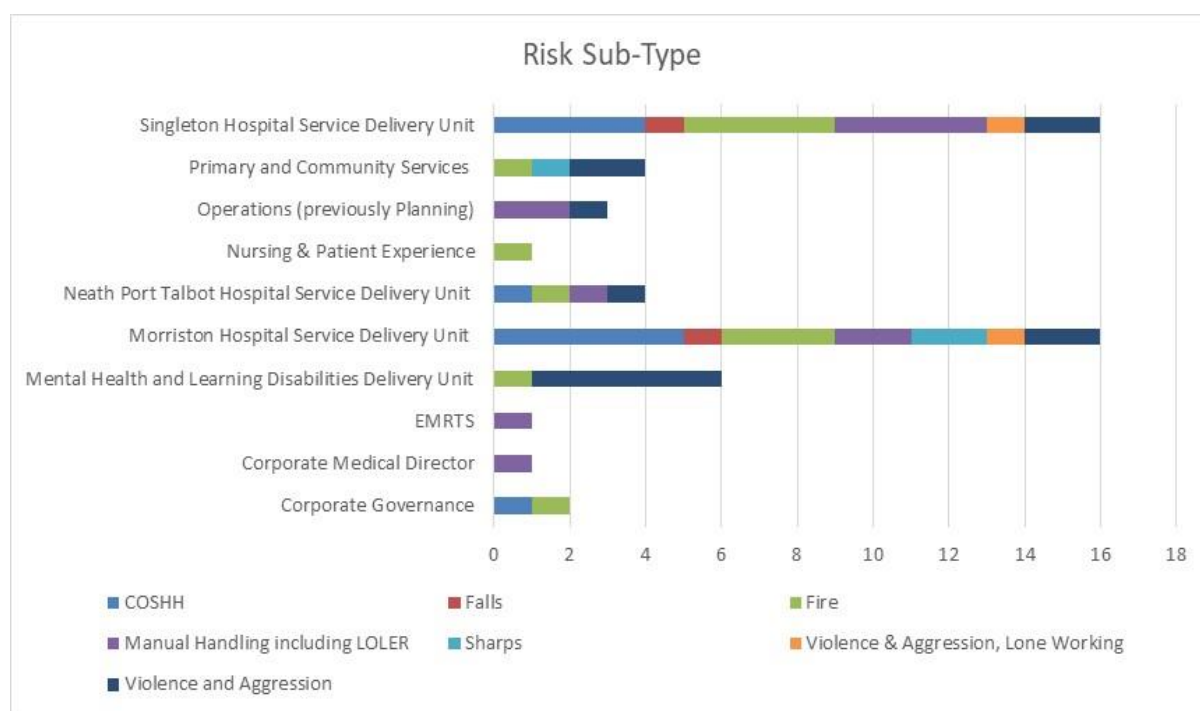


Table 2 - Operational Risks by Service Group/Directorate and Risk Category

	COSHH	Falls	Fire	Manual Handling including LOLER	Sharps	Violence & Aggression, Lone Working	Violence and Aggression	Grand Total
Morrison Hospital Service Delivery Unit	5	1	3	2	2	1	2	16
Singleton Hospital Service Delivery Unit	4	1	4	4		1	2	16
Mental Health and Learning Disabilities Delivery Unit			1				5	6
Neath Port Talbot Hospital Service Delivery Unit	1		1	1			1	4
Primary and Community Services			1		1		2	4
Operations (previously Planning)				2			1	3
Corporate Governance	1		1					2
Corporate Medical Director				1				1
EMRTS				1				1
Nursing & Patient Experience			1					1
Grand Total	11	2	12	11	3	2	13	54

All risks are required to be entered on RL Datix in the Risk Register module to allow linking of operational risks to HBRR entries.

As at November 2020, the largest number of operational risks are recorded for the Singleton/NPT Service group. The top 4 health & safety risk reporting categories relate to the categories outlined in Table 3 below:

Table 3 – Top 4 Health & Safety Risk Categories

H&S Risk Category	Number of Incidents
Violence & Aggression (V&A)	13
Fire	12
Manual Handling	11
Controls of Substances Hazardous to Health (COSHH)	11

4. GOVERNANCE & RISK

4.1 Escalation & Intervention Arrangements

The Welsh Government written statement published on the 7 October 2020 advised that SBUHB been de-escalated from targeted intervention status to ‘enhanced monitoring’ status², as it had demonstrated that it had a clearer understanding of its finances and the required actions, there has been a clearer approach to performance, and an improvement in some of the measures under consideration, including cancer and infections. Whilst this, is indicative of positive progress, the written statement also stated that concerns remained that unscheduled care and waiting times needed to see sustained improvement in performance.

Therefore, in October 2020 each Executive Director was requested to review the risk score in light of the new escalation and intervention arrangements balanced with the significant ongoing risks relating to the second, and potentially third wave of the covid 19 pandemic.

² Written Statement: Escalation and Intervention Arrangements, 7 October 2020 <https://gov.wales/written-statement-escalation-and-intervention-arrangements-2>

The updated risk register was presented to the Audit Committee on the 12 November 2020 and to the Board on the 26 November 2020.

4.2 Updated Risk Management Policy & Terms of Reference

4.2.1 Risk Management Policy

To ensure effective governance the Risk Management policy has been updated to incorporate the internal audit recommendations made in April 2020. The updates include:

- Reference to the responsibility of the Senior Leadership Team (SLT),
- consistent language and terminology between the body of the policy (6.5.5.) and Appendix 2, in terms of arrangements for the escalation of risk,
- updated membership list, to include the attendance of two representatives from the Service Delivery Units (SDU's),
- a process for reporting "nil returns",
- include specific terms of reference for the risk scrutiny panel,
- makes a clearer reference to the Board Assurance Framework (BAF),
- reference to the "Simple Guide to Risk Management".

The updated risk management policy was endorsed by the Risk Management Group meeting 21 October 2020 and approved by the Executive Team 11 November 2020.

4.2.2 Risk Management Group Terms of Reference (TOR)

For completeness the Risk Management Group's (RMGs) terms of reference (TOR) have also been reviewed in tandem with the risk management policy. The updates include:

- Reference to the responsibility of the Senior Leadership Team (SLT);
- a process for reporting "nil returns",
- a description of the relationship between the RMG and the Risk Scrutiny panel,
- Specific terms of reference for the risk scrutiny panel, including role and delivery of the panel, the membership of the panel comprising of internal and external members and reference to devising an annual forward plan of business.

The updated TOR were endorsed by the Risk Management Group meeting 21 October 2020 and approved by the Executive Team 11 November 2020.

5. FINANCIAL IMPLICATIONS

There are financial implications to minimising the risks entered on the HBRR in relation to significant revenue implication around strengthening resources in the Health Board, Units and in Departments. Capital monies will also be required in relation to supporting the improvements required to improve and further detail is provided in the individual entry on the HBRR.

6. RECOMMENDATION

Members are asked to:

- **NOTE** the updates to the Health Board Risk Register relating to risks assigned to the Health & Safety Committee, and the further changes being made in recognition of the changing risks facing the Health Board and the uncertainty in

terms of modelling required as a result of the current 2nd wave of Covid-19, and the risk of a potential 3rd wave,

- **DISCUSS** the risks assigned to the Health & Safety Committee and endorse the mitigating action being taken to manage the risks.

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 checked="" 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 checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" 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 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>Ensuring the organisation has robust risk management arrangements in place that ensure organisational risks are captured, assessed and mitigating actions are taken, is a key requisite to ensuring the quality, safety & experience of patients receiving care and staff working in the UHB. Patients are potentially exposed to health and safety risks. Systems to manage those risks must be patient centred; as an example understanding each patients trigger for violence and aggression will protect both staff and patients.</p>		
Financial Implications		
<p>The risks outlined within this report have resource implications which are being addressed by the respective Executive Director leads and taken into consideration as part of the Board's risk management processes.</p>		
Legal Implications (including equality and diversity assessment)		
<p>It is essential that the Board has robust arrangements in place to assess, capture and mitigate risks faced by the organisation, as failure to do so could have legal implications for the UHB. Health and safety law compliance, avoidance or mitigation of claims, effective use of staff and training resources etc.</p>		
Staffing Implications		
<p>All staff have a responsibility for promoting risk management, adhering to SBUHB policies and have a personal responsibility for patients' safety as well as their own and colleague's health and safety. Executive Directors/Unit Directors are requested to review their existing operational risks on Datix Risk Module to ensure SBUHB has an accurate and up to date risk profile.</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The HBRR and the Covid 19 risk register sets out the framework for how SBUHB will make an assessment of existing and future emerging risks, and how it will plan to manage and prepare for those risks.</p>		
Report History	<ul style="list-style-type: none"> • 1 September 2020 – Health & Safety Committee • 21 October 2020 - Risk Management Group • 11 November 2020 - Executive Team • 12 November 2020 - Audit Committee 	

	<ul style="list-style-type: none">• 26 November 2020 – Health Board
Appendices	<ul style="list-style-type: none">• Appendix 1 – Health Board Risk Register; and• Appendix 2 - Covid-19 High level Risk Register.