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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>05 July 2022</b>	<b>Agenda Item</b>	<b>3.2</b>
<b>Report Title</b>	<b>Inspections &amp; Audit updates</b>		
<b>Report Author</b>	Mark Parsons, Assistant Director of Health & Safety		
<b>Report Sponsor</b>	Darren Griffiths, Director of Finance & Performance		
<b>Presented by</b>	Mark Parsons, Assistant Director of Health & Safety		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide the Health and Safety Committee with an update on the progress following receipt of internal and external inspections and audits.		
<b>Key Issues</b>	<p><b>Health &amp; Safety Executive</b></p> <ul style="list-style-type: none"> <li>Outline of areas where improvement notices were issued and actions taken to close the notices</li> </ul> <p><b>Fire &amp; Rescue Services</b></p> <ul style="list-style-type: none"> <li>No audits or inspections to report</li> </ul> <p><b>The internal health &amp; safety audit carried in 2019/20 identified that:</b></p> <ul style="list-style-type: none"> <li>Health &amp; Safety governance structure was not clearly outlined</li> <li>Identification of specialist areas i.e. estates disciplines,</li> <li>No clear KPI's identified</li> <li>Membership did not cover all areas (WOD) not included</li> <li>No specific work plan to review specific areas – Fire/COSHH etc.</li> <li>Policies not regularly reviewed</li> <li>Regular review of Terms of Reference not undertaken</li> <li>There was inconsistency in reviewing H&amp;S risk register</li> <li>No regular review, update of internal audit reports</li> </ul> <p><b>The internal fire audit brief 2020/21 identified that:</b></p> <ul style="list-style-type: none"> <li>No clear identification of fire risk assessments for anticipated completion dates</li> <li>Identification of works completed, not fully documented or not available during audit</li> <li>No documented evidence of communication between corporate committees/groups and service director committees/groups relating to fire</li> <li>No process to complete sign off of works identified in fire risk assessment</li> <li>Fire advisors to attend appropriate committees/groups,</li> </ul>		

	<ul style="list-style-type: none"> <li>• Mechanism to provide assurance to the H&amp;S committee</li> </ul> <p><b>Estates Assurance Audit</b></p> <ul style="list-style-type: none"> <li>• Financial Safeguarding – SFI/SO’s to be reviewed</li> <li>• Control of Contractors – inductions/monitoring/insurance</li> <li>• Control of Substances Hazardous to Health – Database/ adoption of guidance across the HB</li> <li>• Backlog maintenance – linked to estates strategy and maintenance</li> <li>• Policies (H&amp;S and Fire) – to be updated to reflect appropriate changes</li> <li>• Disability Discrimination Arrangements – access to services – conduct survey</li> <li>• Water Safety – Requirement to increase number of authorised persons – water safety training – review water safety risks – legionella sampling</li> <li>• Fire Safety – Development of strategy to address fire issues</li> </ul>			
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	☒	☐	☒	☐
<b>Recommendations</b>	Members are asked to : <ul style="list-style-type: none"> <li>• <b>NOTE</b> the report and the progress made</li> </ul>			

## **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 and/or external inspections and audits.

### **2. BACKGROUND**

#### **2.1 HSE inspections (External audits)**

The Health Board (HB) was visited/inspected by the HSE and covered specifically violence & aggression and manual handling, initially this resulted in SBUHB receiving nine improvement notices in February 2019. Further inspections resulted in another being issued in July 2019 and another two that were estates related in October 2019. The HB also received a notice of contravention (NOC) following HSE visit to Singleton cancer/radiology department. Action plans were developed and followed until the last of the notices were closed in Q4 2020.

During the pandemic the HSE inspected in December 2020, this resulted in the HB receiving a notice of contravention (NOC) under the Health and Safety at Work etc., Act 1974. Following this action plans were developed, worked through with evidence produced for the NOC to be closed.

For the period 2021/22 and 2022/23, there has been no HSE activity within SBUHB.

#### **2.2 Internal Audit 2018/19 - 20/21 & 21/22**

As part of the internal audit plan which was commissioned in order to evaluate the processes and procedures that support the management in a number of areas within the University Health Board, these included:

- Health & Safety (SBU-1920-006) – Outcome of limited assurance
- Fire Safety Management ((SSU ABM 2021 09) – Outcome of limited assurance
- Estates Assurance (SSU SBUHB 2122 04) – Outcome of reasonable assurance

#### **2.3 Internal Audit Findings**

##### **2.3.1 Health & Safety (SBU-1920-006)**

Internal audit acknowledge that there has been a sustained and necessary focus of the organisation's resources on addressing the Health & Safety Executive Improvement notices. The limited resources in place to address health & safety have been reported during the year within the risk register and prioritisation to address the requirements of these notices is appropriate. Progress against these has been reported to the Health & Safety Committee in some detail. Additionally, improvements have been made to the arrangements to engage with Units via the Health & Safety Operational Group (HSOG) in a more consistent way.

Particular focus was given to specialist subject areas such as estates disciplines and key areas such as COSHH that were not consistent or provide assurance. The report also

highlighted the lack of progress of actions identified in previous audits, however, it was acknowledged the challenge with H&S resources.

There were 17 recommendations, one high, 11 medium and 5 low, 7 of which were around design of systems and controls and 10 covering operation of systems and control.

### 2.3.2 Fire Safety Management (SSU ABM 2021 09)

Key finding from the audit again highlighted the slow progress against previous audit actions, some of which included sites transferred to CTMUHB as part of the boundary changes. There were 8 outstanding actions from previous audits, three high, three medium and four low risks, a further five recommendations were identified during this audit, three high and two medium risks.

### 2.3.3 Estates Assurance (SSU SBUHB 2122 04)

The audit review sought to provide SBUHB with assurance that appropriate and timely action has been taken in respect of previously agreed estates assurance audit recommendations contained within the following reports:

- Estates follow up (issued April 2021 – Limited Assurance) containing the following reports:
  - Financial Safeguarding (issued November 2019 – Limited Assurance)
  - Control of contractors (issued March 2020 – Limited Assurance)
  - Control of Substances Hazardous to Health (issued February 2019 – Limited Assurance)
  - Backlog maintenance (issued October 2017 – Reasonable Assurance) and
  - Health & Safety – Primary Care Estate (issued March 2017 – Reasonable Assurance)
- Fire Safety (issued April 2021 – Limited Assurance)
- Water Safety (issued June 2021 – Limited Assurance)

There were 56 recommendations, 21 high, 34 medium and one low risk identified. It was noted that 57% of actions from previous reviews closed, with 17 remained to be addressed.

## 2.4 **External Audits/Inspections**

During the last 12 months, there have been no external audits/inspections carried out by the enforcing authorities.

## 3. **PROGRESS**

### 3.1 Health & Safety (SBU-1920-006)

From the audits actions plans were developed and worked through to address the 17 recommendation identified in the audit, out of these all with the exception of one have been addressed. The only one outstanding is the H&S page on the intranet being updated as information is outdated. Request have been made to close the page down as no one in the H&S team can access the page. A new section will be developed once the new HB intranet is launched.

All H&S audits/action plans are monitored through the H&S operational group and reports submitted to the H&S committee.

### 3.2 Fire Safety Management (SSU ABM 2021 09)

A fire action plan was developed following the audit, clearly identifying the 17 recommendations outlined from the audit, excellent progress has been made with all with the exception of compartmentation drawings to be updated as due to the pandemic, it was not possible to survey the fire compartmentation areas, however, some basic compartmentation drawing have been completed with the support of NWSSP-SES (fire) team.

In Q4 2021/22 a fire survey was completed for Morriston and Singleton hospitals following a procurement process, with the reports from the surveys expected to be completed in Q1 2022/23 from which the compartmentation lines will be identified and provide information to update the compartment drawings, this will address the outstanding action.

All fire audits and action plans are monitored through the HB Fire Safety Group.

### **3.3 Estates Assurance (SSU SBUHB 2122 04)**

Joint action plans were developed by estates and health and safety to address the recommendations outlined. The action plan is regularly reviewed to ensure actions are being followed and implemented.

NWSSP audit have undertaken a follow up audit with a final report issued on 22 June 2022, recognising the significant improvement from the previous reporting periods, enabling a move from limited assurance to reasonable assurance. The audit areas where the most progress has been made in addressing the agreed recommendations is Financial Safeguarding, Control of Substances Hazardous to Health, Fire Safety and Water Safety. Two of the high recommendation have reduced to low following actions being partially implemented.

There are 12 recommendations that remain open and the teams are actively working together to address these, a number of which are linked to the 6 FACET survey that has just been completed and it is expected that a number of the remaining actions will be recommended to close.

Estates audits/action plans are monitored through designated specialist groups where applicable and the H&S operational group and reports submitted to the H&S committee.

## **4. NEXT STEPS**

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

NWSSP audit will be undertaking a health and safety audit during Q1/Q2, the scope of the audit has been agreed with the Director of Finance & Performance and the Assistant Director of Health & Safety who will be working closely with the audit team. Once completed the draft audit findings will be submitted to the H&S committee.

## **5. FINANCIAL**

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

## **6. RECOMMENDATION**

Members are asked to:

- **NOTE** the report and the progress made

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> <i>(please choose)</i>	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	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"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	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"/>
<b>Health and Care Standards</b>		
<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"/>
<b>Quality, Safety and Patient Experience</b>		
<p>Following the various audits a review has been undertaken to address the health &amp; 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, water safety, estates and fire at all levels are in place to building a positive, safe and healthy environment.</p>		
<b>Financial Implications</b>		
<p>There are no financial implication of the paper, however, to implement the actions identify will incur additional costs.</p>		
<b>Legal Implications (including equality and diversity assessment)</b>		
<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"> <li>• The Health &amp; Safety at Work Act 1974</li> <li>• Management of Health and Safety at Work Regulations 1999</li> <li>• The Regulatory Reform (Fire Safety) Order 2005</li> </ul>		
<b>Staffing Implications</b>		
<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>		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
<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 ways of working (Long Term Thinking, Prevention, Integration, Collaboration and</p>		

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.

<b>Report History</b>	Routine report to Health and Safety Committee
<b>Appendices</b>	none