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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	03 June 2019	Agenda Item	2.2
Report Title	Health and Safety Risk Register		
Report Author	Dr Laurie Higgs, Head of Health and Safety Jacqui Maunder, Interim Head of Compliance		
Report Sponsor	Gareth Howells, Director of Nursing and Patient Experience		
Presented by	Dr Laurie Higgs, Head of Health and Safety		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is for the Committee to receive, review and discuss the health and safety risk register and consider whether the recorded risks are appropriately assigned. This Risk Register has been reviewed and refreshed since it was last considered by the Health and Safety Committee in April 2019.		
Key Issues	<p>The purpose of this report is to provide:</p> <ul style="list-style-type: none"> • the updated Health and Safety specific Risk Register • In Quarter 3, 2018/19, the overarching Health Board Risk Register (HBRR) was significantly reviewed and a new format agreed by the Board. • The Health and Safety Risk Register has been reviewed and is now more closely aligned to the HBRR and includes assessment ratings for individual risks. • As at end of May 2019 there are 14 health and safety related risks 		
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	<p>Members are asked to :</p> <ul style="list-style-type: none"> • NOTE the risk register and the actions being taken to minimise the risk • DISCUSS the updated health and safety risk register, which reflects changes suggested by the Committee at its April 2019 meeting • APPROVE the updated health and safety risk register. 		

HEALTH AND SAFETY RISK REGISTER

1. INTRODUCTION

The purpose of this report is for the Committee to receive, review and discuss the Health and Safety Risk Register and consider whether the recorded risks are appropriately assigned. This Risk Register has been reviewed and refreshed since it was last considered by the Health and Safety Committee in April 2019.

2. BACKGROUND

The Health and Safety Risk Register (H&SRR) is intended to summarise the key 'live' extreme health and safety related risks facing the Health Board and the actions being taken to mitigate them. It is also important to note that the Health and Safety Operational Group, is appropriately sighted and involved in the development of the H&SRR, providing updates, including reports on mitigating actions.

All health and safety risks have a lead Executive Director to ensure appropriate review, scrutiny and where relevant updating. Each Director is responsible for the ownership of the risk(s) and the reporting of the actions in place to manage/control and/or mitigate the risks.

The Health and Safety Committee last considered the Health and safety risk register at its meeting on the 25 April 2019 and requested that the risks, scoring and template be reviewed to provide assurance to the Committee that health and safety related risks were being effectively managed and monitored.

2.1 Health And Safety Risk Register – May 2019

In Quarter 3, 2018/19, the overarching Health Board Risk Register (HBRR) was significantly reviewed and a new format agreed by the Board.

Following on from the Health & Safety Committee 25th April 2019, the Health and Safety team have reviewed the health and safety Risk Register and the document is now more closely aligned to the HBRR and includes assessment ratings for individual risks. The updated risk register is presented at **Appendix 1** for approval.

In updating the Health and safety risk register the following changes have been undertaken:

- The risk register template now aligns with the overarching Health Board risk register and provides monitoring information to track progress in managing individual risks
- Amalgamated risk – the original “Health and Safety Resources” risk has been amalgamated with the “Fire Safety Resources Risk” to become - H&S1 **Health, Safety and Fire Staff Resources**.
- Amalgamated risk – the original “Progress with Fire Safety Risk Assessments” has been amalgamated with the “**Fire Safety Group**” risk to become - H&S13 Fire Safety.
- The narrative on monthly progress has been updated
- Each risk has been given a unique reference number (URN) for ease of reference

As at end of May 2019 there are 14 health and safety related risks which fall into the following categories:

Extreme (rated 15-25)	High (rated 8-12)
7	7

Each individual operational unit has its own site specific risk register and health and safety related risks are brought to the attention of the Health and Safety Operational group who will consider if the risk needs to be included on the health and safety risk register.

Going forward a summary of any changes to individual risks will be summarised in this section of the report.

3. GOVERNANCE AND RISK ISSUES

The Health Board's risk management arrangements are in place to ensure risks are assessed and mitigating actions taken to improve the quality, safety and experience of patients and where appropriate escalation arrangements are in place to inform the Board via its key sub-committees.

There is a significant risk to the service if robust risk based assessment arrangements are not in place. Good governance arrangements, including effective risk management help to ensure the effective use of resources.

There may be an adverse effect on the organisation if arrangements are not in place to manage and mitigate risks.

Performance Assessment and monitoring of risks within the Health Board is undertaken within individual Directorates/ Departments. The extreme / high organisational risks will be monitored by the Executive Team / Board and through the relevant Sub-Committee(s) of the Board.

4. FINANCIAL IMPLICATIONS

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 IMTP processes.

5. RECOMMENDATION

Members are asked to:

- **NOTE** the risk register and the actions being taken to minimise the risk
- **DISCUSS** the updated health and safety risk register, which reflects changes suggested by the Committee at its April 2019 meeting
- **APPROVE** the updated health and safety risk register.

Governance and Assurance		
Link to Enabling Objectives	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"/>

<i>(please choose)</i>	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		
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.		
Financial Implications		
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 IMTP processes.		
Legal Implications (including equality and diversity assessment)		
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.		
Staffing Implications		
Staff will be briefed on health and safety developments through managerial meetings, staff meetings and health and safety alerts and bulletins.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
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 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	Health and Safety Committee 25 April 2019	
Appendices	Appendix 1 – Health and Safety Risk Register – May 2019	



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HEALTH & SAFETY RISK REGISTER

MAY 2019



Health and Safety Risk Register Dashboard

Health and Safety Committee – Monday 3rd June

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S1	<p>Health, Safety and Fire Staff Resources (2 x risks amalgamated)</p> <ul style="list-style-type: none"> As a consequence of the Bridged Boundary change it has been identified that there are insufficient resources to effectively manage fire safety in the new SBUHB. 4 x members of staff from the health, safety and fire team transferred to Cwm Taf Morgannwg UHB 1 April 2019 as part of the transfer Staff previously deployed in Port Talbot and remaining parts of Swansea Bay Health Board are currently not resourced in the new structure Pending retirement of one Fire Safety leaves only one active Fire Safety Adviser Long term sickness of clerical resource Need to improve the governance of fire risk assessments 	15	15	↑	↑	Oct 2019	<ul style="list-style-type: none"> The new Interim Assistant Director of Health & Safety appointed in April 2019 will work with the Head of Health and Safety to review the staffing structure and map to business requirements Any urgent staffing requirements will be met through interim recruitment measures to ensure effective resource to satisfy compliance requirements The new appointed Interim Head of Compliance appointed in April 2019 has begun a review of the governance arrangements surrounding h&s reporting

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
Original Risk amalgamated with H&S1	Health and Safety Resources <i>It has identified that there are insufficient resources to effectively manage fire safety in the organisation</i>	15	N/A				

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S2	<p>Health and Safety Executive (HSE) Inspection Notices</p> <ul style="list-style-type: none"> • 9 X HSE Improvement notices received for ABMUHB in November 2019 concerning the management of health and Safety, violence & aggression and manual handling across several sites • Management of health and safety at ward and department level requires review, support and guidance • Training and awareness will be a key enabler to strengthening and improving compliance • Improved risk management systems and regular scrutiny need to be strengthened • Incident reporting and investigation ineffective and not consistent 	16	16	→	↑	Sept 2019	<ul style="list-style-type: none"> • HSE Improvement Notice Working Group established in April 2019 to provide the necessary management and objective judgement to ensure the Health Board addresses the issues raised by the Health and Safety Executive (HSE) within HS notices, and operates within the Health and Safety at Work Act 1974 and all associated regulations and guidance. • The HSE Notice group meets fortnightly and reports to the Health & Safety Operational group. • A detailed H&S improvement action plan which includes specific actions for training, staffing, governance and communications • Executive team meeting with HSE regularly

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S3	<p>Water Safety Management</p> <ul style="list-style-type: none"> In 2018-2019 a limited assurance assessment rating was received from internal audit for Estates Assurance: Safe Water Management (ABM-1819-S09) The overall objective of this audit was to evaluate the associated processes and procedures that support safe water management across the estate. The audit assessed compliance with relevant legislation and guidance to manage and minimise the risks to health including clinical risks, microbial and chemical contamination and changes to the water system. There was also emphasis on related staff competencies and implementation of water hygiene awareness training. 	8	8	→	→	Oct 2019	<ul style="list-style-type: none"> The Estates team have developed a comprehensive action plan to focus on the areas of weakness identified which is monitored by the Water group at its monthly meeting. Progress is reported to the Health & Safety Operational Group. A follow up audit is scheduled for 2019-2020.

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S4	<p>RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013)</p> <ul style="list-style-type: none"> • Potential failure to achieve legal duties in some case for timely reporting RIDDOR incidents • Poor investigation and learning lessons (across all investigations) • RIDDOR puts duties on employers, and people in control of work premises (the Responsible Person) to report certain serious workplace accidents, occupational diseases and specified dangerous occurrences (near misses). 	16	16	→	→	Mar 2020	<ul style="list-style-type: none"> • The new Interim Assistant Director of Health & Safety appointed in April 2019 will work with the Head of Health and Safety to review RIDDOR reporting processes and incidents reported and central governance for monitoring the system.

H&S5	<p>Cladding Work at Singleton Hospital</p> <ul style="list-style-type: none"> Operational action taken to improve fire prevention and evacuation strategies including training of staff, evacuation procedures, equipment provision etc. Awaiting financial support for cladding removal from Central ward block 	15	15	→	↑	<p>July 2019</p> <ul style="list-style-type: none"> HSE Notice Group Working Group established in April 2019 to provide the necessary management and objective judgement to ensure the Health Board addresses the issues raised by the Health and Safety Executive (HSE) within HS notices, and to oversee the management of cladding removal. The HSE Notice group meets fortnightly and the Assistant Director of Strategy – Capital is leading the work and reports to the Chief Operating Officer (COO) Meeting held with Kier construction 8 May 2019 to agree tender schedule and plan of works. Phase 2 involving Arrup engineers will be complete by end of June 2019. Welsh Government have confirmed they will assist with funding. Communication strategy being developed to avoid confusion with Grenfell inquiry.
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Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S6	<p>Management of Alerts, roles and responsibilities, governance</p> <p>Assurance systems for action taken need to be improved with closure of action taken and better monitoring</p>	8	8	→	→	Aug 2019	<ul style="list-style-type: none"> The new Interim Assistant Director of Health & Safety appointed in April 2019 will work with the Head of Health and Safety to review health and safety processes and structures HSE Notice Group Working Group established in April 2019 to provide the necessary management and objective judgement to ensure the Health Board addresses the issues raised by the Health and Safety Executive (HSE) within HS notices, this will include reviewing governance and reporting structures for h&s matters.

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S7	<p>Effective arrangements for the management of COSHH</p> <ul style="list-style-type: none"> In 2018-2019 a limited assurance rating was received from internal audit in relation to Estates Assurance: Control of Substances Hazardous to Health (COSHH)(ABM-1819-S12) The audit considered (from an Estates perspective), the adequacy of the COSHH management arrangements and associated processes to identify, risk assess and implement control measures in compliance with regulations (i.e. how control was assured throughout the Estate). This audit did not consider clinical practices e.g. control of biological material, nor prescribed medicines, but audited controls relating to more general substances (e.g. disinfecting materials) as operated by officers throughout UHB, and to consider how the Board was appropriately assured 	16	16	→	↑	May 2019	<ul style="list-style-type: none"> Plans in place to introduce a Control of Substances Hazardous to Health (COSHH) procedure providing clear guidance on processes and procedures to follow including undertaking risk assessments Plans in place to undertake a review of the existing COSHH training provision arrangements and ensure that all relevant staff received COSHH training and that training compliance is monitored through the H&s operational group

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S8	Radon gas sampling <ul style="list-style-type: none"> Review arrangements for radon gas sampling 	6	6	→	→	Jul 2019	<ul style="list-style-type: none"> Action plan being developed to develop effective programme Develop funding and management arrangements etc.
H&S9	Lone Workers <ul style="list-style-type: none"> Review the effectiveness of lone worker protection, risk assessments etc. 	12	12	→	↑	May 2019	<ul style="list-style-type: none"> Plans in place to review the Lone worker policy and ensure that it includes clear guidance and a risk assessment template to safeguard lone workers To be presented to the Health and Safety Committee July

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S10	Management of VDU safety <ul style="list-style-type: none"> • Systems in place but review needed to confirm they are fit for purpose • No VDU procedure 	6	6	→	→	Jun 2019	<ul style="list-style-type: none"> • Plans in place to review the DSE procedure and ensure that it provides clear guidance on undertaking DSE assessments, to include mobile workers. • Ensure that there is a clear DSE risk assessment/checklist in place for DSE assessors to undertake consistent workplace assessments

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S11	Management of Health and Safety in Units <ul style="list-style-type: none"> Morrison and Primary Care/Community Units reforming Health and Safety Committee Review of arrangements required for Port Talbot/Neath, Mental Health/Learning disabilities and Singleton Units to include lessons learnt from HSE inspection 	16	16	↓	→	Sep 2019	<ul style="list-style-type: none"> The new Interim Assistant Director of Health & Safety appointed in April 2019 will work with the Head of Health and Safety to review health and safety processes and structures HSE Notice Group Working Group established in April 2019 to provide the necessary management and objective judgement to ensure the Health Board addresses the issues raised by the Health and Safety Executive (HSE) within HS notices, this will include reviewing governance and reporting structures for h&s matters.
H&S 12	Health and Safety internal Audit Report <ul style="list-style-type: none"> A limited assurance assessment rating was received from internal audit in relation to health and safety (1718-009) in January 2018. 	8	8	→	→	Sep 2019	<ul style="list-style-type: none"> Further review to be undertaken The new Interim Assistant Director of Health & Safety appointed in April 2019 will work with the Head of Health and Safety to review health and safety processes and structures

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S13	Fire Safety <ul style="list-style-type: none"> A limited assurance assessment rating was received from internal audit in relation to Fire Safety (Follow up) in 2018-2019. Group reformed (Estates and Health and Safety only) and develop[ping control and review strategies to include better monitoring, risk management, development of capital programmes, resource review etc. An isolated fire incident occurred at Singleton Hospital 1 April 2019 Review of fire safety risk assessments undertaken across sites to be undertaken 	16	16	→	→	Jul 2019	<ul style="list-style-type: none"> a Health and Safety meeting was scheduled at Singleton Hospital on the 7 May 2019, to discuss operational health and safety issues following the recent fire. The group noted that the Multi-agency de-brief held on 25 April 2019 involving Mid and West Wales Fire & Rescue Service (MAWWFRS) had gone well the newly appointed Fire Safety Advisor visit sites to undertake risk assessments
Amalgamated With H&S13	Progress with Fire Safety Risk Assessments Majority of patient care areas have updated risk assessments	42	42				

Risk Ref	Description of risk identified	Initial Score	Current Score	Trend	Controls	Target	Progress as at May 2019
H&S14	Hoists and other equipment falling out of manufacturer's support <ul style="list-style-type: none"> Replacement programme for hoists and other manual handling equipment 	12	12	→	→	Jun 2019	<ul style="list-style-type: none"> Hoist replacement programme of £470 being completed The new Interim Assistant Director of Health & Safety appointed in April 2019 will work with the Head of Health and Safety to review health and safety processes and structures Following on from the review undertaken in 2018-2019 review progress in developing and implementing the programme for hoists and other manual handling equipment

Risk Score Calculation

For each risk identified, the LIKELIHOOD & CONSEQUENCE mechanism will be utilised. Essentially this examines each of the risks and attempts to assess the likelihood of the event occurring (PROBABILITY) and the effect it could have on the Health Board (IMPACT). This process ensures that the Health Board will be focusing on those risks which require immediate attention rather than spending time on areas which are, relatively, a lower priority.

Risk Matrix	LIKELIHOOD (*)				
	1 - Rare	2 - Unlikely	3 - Possible	4 - Probable	5 - Expected
1 - Negligible	1	2	3	4	5
2 - Minor	2	4	6	8	10
3 - Moderate	3	6	9	12	15
4 - Major	4	8	12	16	20
5 - Catastrophic	5	10	15	20	25