

Swansea Bay University Health Board
Unconfirmed Minutes of the Health and Safety Committee
held on 2nd December 2019 in the Millennium Room, Health Board HQ

Present:

Maggie Berry Independent Member (in the chair)
 Jackie Davies Independent Member
 Martyn Waygood Interim Vice Chair

In Attendance:

Laurie Higgs Head of Health and Safety
 Des Keighan Assistant Director of Operations (Estates)
 Gareth Howells Director of Nursing and Patient Experience (minute 124/19 to 144/19)
 Joanne Jones Head of Hotel Services
 Jacqui Maunder Interim Head of Compliance
 Leah Joseph Corporate Governance Officer
 Mark Parsons Assistant Director of Health and Safety
 Darren Griffiths Associate Director of Performance (minute 124/19 to 145/19)
 Pam Wenger Director of Corporate Governance
 Craig Wilson Deputy Chief Operating Officer
 Joanne Waters Matron for Quality Improvement Infection Prevention Control
 Kathryn Jones Assistant Director Workforce and OD Staff Experience (from minute 113/19 to 141/19)
 Paul Dunning Professional Head of Staff Health & Wellbeing (minute 138/19 to 140/19)
 Debbie Rees-Adams Consultant Clinical Psychologist (minute 138/19 to 140/19)
 Suzanne Holloway Head of Quality and Safety, Morriston (minute 140/19)
 Simon Davies Assistant Director Strategy – Capital (minute 145/19)

Minute	Item	Action
124/19	WELCOME AND INTRODUCTIONS	
	Maggie Berry welcomed everyone to the meeting.	
125/19	APOLOGIES FOR ABSENCE	
	Apologies for absence were received from Keith Reid, Interim Director of Public Health, Reena Owen, Independent Member, Hazel Robinson, Director of Workforce and Organisational Development.	
126/19	DECLARATIONS OF INTEREST	
	Martyn Waygood declared an interested within the item titled 'Radon Gas Report' in regards to the Murton Green Clinic.	

127/19	MINUTES OF THE PREVIOUS MEETING	
	The minutes of the meetings held on 2nd September 2019 was received and confirmed as a true and accurate record.	
128/19	MATTERS ARISING	
	<p>(i) <u>36/19 Matters Arising and 102/19 Matters Arising</u></p> <p>Des Keighan advised that discussions with Welsh Government were continuing in relation to the monies needed for the five facet review of backlog maintenance, however it needed to be funded through revenue rather than capital. He added that costs would total £225k. A paper providing an update is to be brought to March's Health and Safety Committee. The paper will include the need for a five facet review, the breakdown of costs and identify the areas requiring urgent improvements.</p> <p>(ii) <u>Fire Safety Arrangements</u></p> <p>Mark Parsons confirmed that the most recent fire drill at SBU Head Quarters was in September 2019 and drills take place every six months. It was suggested that this item is discussed at Health and Safety Operational Group and an update is brought back to Committee in March.</p> <p>(iii) <u>102/19 Estates and Facilities PADR Compliance</u></p> <p>Joanne Jones confirmed that there have been slow improvements in respect of estates and facilities PADR compliance. Pam Wenger highlighted that an update has been provided to the Workforce and OD Committee and a further update will be going to January's Audit Committee. This action can now be closed at Health and Safety Committee.</p> <p>(iv) <u>Deadline for papers</u></p> <p>Pam Wenger advised that in order to strengthen standards of good governance, only written reports will be accepted for assurance going forward. Jackie Davies added that written papers are invaluable when contrasting and comparing papers. Maggie Berry advised that the organiser for this committee will issue two reminders (six weeks and two weeks) prior to the committee. If papers are not received by the deadline, they will be marked on the agenda as not received. Pam Wenger offered to run a short session for authors of papers to assist with writing reports for committee level, with the possibility of the session being shared with other committees.</p> <p>(v) <u>Health and Safety Newsletter</u></p>	<p>DK</p> <p>MP</p> <p>PW</p>

	<p>The next newsletter is due December 2019. Christmas and winter safety, infection control and sharps are items that will feature in the newsletter. The final draft is with the medical illustration team.</p> <p>(vi) <u>110/19 Operational Group Key Issues</u></p> <p>Maggie Berry queried if the managing contractors policy is being adhered to. Mark Parsons confirmed that an audit is due to be completed. The update of this audit will initially go through the Health and Safety Operational Group and then an update will be brought to March's committee.</p> <p>(vii) <u>113/19 Clinical Waste</u></p> <p>Des Keighan confirmed that the national clinical waste issue has improved in England, however Wales remain on notice.</p>	MP
129/19	ACTION LOG	
	<p>The action log was received and noted with the following points raised:</p> <p>(i) <u>Action Point 2 – Site Responsibility</u></p> <p>Mark Parsons to circulate the spreadsheet once all sites have been allocated to individuals.</p>	MP
130/19	COMMITTEE WORK PROGRAMME 2019-20	
	The committee's work programme for 2019-20 was received and noted .	
131/19	HEALTH AND SAFETY RISK REGISTER	
	<p>The health and safety risk register was received.</p> <p>In introducing the report, Laurie Higgs highlighted the following points:</p> <ul style="list-style-type: none"> - Imminent and proposed staff retirements remain a high; - COSHH work is ongoing as there is limited assurance in the report from internal audit in areas of consistency with risk assessment processes. <p>In discussing the report, the following points were raised:</p> <p>Martyn Waygood raised his concerns regarding succession planning and suggested the matter is reported to the Workforce and OD Committee. He added that the reference to lack of resource to train staff is not acceptable. Jackie Davies added that a future proofing plan needs to be in place.</p>	

	<p>Pam Wenger highlighted that the report does not give assurance about minimising the level of risk and is therefore not robust enough. The committee requires an update addressing the HSE notifications.</p> <p>Gareth Howells commented that the Health Board Executives should be informed of the resource complications. The Committee agreed that the retirement future proofing issue should be reviewed at Workforce and OD.</p> <p>Maggie Berry advised that paper storage should be shown as a Health and Safety risk. Pam Wenger commented that the corporate risk register needs to align with the health and safety risk register.</p> <p>Gareth Howells requested support be provided to the Health and Safety team to update the narrative for the H&S risk register.</p>	<p>LH</p> <p>PW</p>
<p>Resolved:</p>	<ul style="list-style-type: none"> - The report be noted. - A report is brought to March’s Committee with a detailed explanation of how the HSE notifications have been managed and how the level of risk has been minimised. - Revised version of the health and safety risk register to be on the March 2020 agenda. 	<p>LH</p> <p>PW</p>
<p>132/19</p>	<p>HEALTH AND SAFETY OPERATIONAL GROUP KEY ISSUES REPORT</p>	
	<p>The health and safety operational group report was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> - Attendance at the recent Health and Safety Operational Group was high and reports were received on time. <p>In discussing the report, the following points were raised:</p> <p>Jackie Davies queried if Caswell Clinic’s alarm system is reliable as the report states the security system no longer meets the security needs of staff. The estate of Caswell Clinic is the responsibility of CTMUHB, however the responsibility of its staff is the responsibility of SBUHB. Gareth Howells confirmed he will check the signed memorandum and confirm whether the responsibility for the alarm system lies with SBUHB.</p> <p>Mark Parsons confirmed that he would provide an asbestos update regarding the controlled process in place within March’s operational key issues report.</p> <p>Mark Parsons confirmed that quotes for two cameras have been received in respect of the CCTV at Cimla Hospital. The range of the camera view has been requested and the funding has been identified. Awaiting a response from the companies regarding the range.</p>	<p>GH</p> <p>MP</p>

<p>Resolved:</p>	<ul style="list-style-type: none"> - Gareth Howells to confirm whether the responsibility for the alarm system lies with SBUHB. - An asbestos update regarding the controlled process in place be provided within March's operational key issues report. - The report and Health and Safety Operational Group agenda be noted. - The Health and Safety action plan (appendix 1) be endorsed. - The Health and Safety Policy (appendix 2) be endorsed. - The Low Voltage Systems Management & Operational Policy (appendix 3) be endorsed. - The Medical Gas Pipeline Systems Policy (appendix 4) be endorsed. 	<p>GH</p> <p>MP</p>
<p>133/19</p>	<p>HSE INSPECTION UPDATE</p>	
	<p>A report outlining the HSE inspection update was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> - Nine Health & Safety Executive (HSE) Improvement notices were received in February 2019 relating to violence & aggression, manual handling and the reporting and investigating of Health and Safety incidents. A further notice was received in July relating to violence and aggression. - Two improvement notices were received in October 2019 relating to low voltage electricity and authorised persons to manage electrical systems. A notice of charge had been received for medical physics, however the requirements had been adhered to, just waiting for confirmation from the HSE. <p>In discussing the report, the following points were raised:</p> <p>Darren Griffiths advised that the improvement notice group has been extended to February 2020, with a view to closing it down after this period. He advised that the committee would be informed once the group has formally been closed down.</p> <p>Martyn Waygood recognised the positive outcomes from the work completed when he attended the most recent HSE meeting. He advised that the progress was positive and the team has demonstrated that they are getting processes right.</p>	

	Maggie Berry highlighted that the introduction of the Health and Safety Newsletter is good and welcomed confirmation of funding that is now in place for the Assistant Director of Health and Safety.	
Resolved:	<ul style="list-style-type: none"> - The draft Health & Safety Strategy Plan be endorsed. - The report be noted. 	
134/19	FIRE SERVICE NOTIFICATION	
	<p>A verbal update was provided in relation to a Fire Safety Notification being received. In introducing this item, Mark Parsons raised the following points:</p> <ul style="list-style-type: none"> - Overview of the fire enforcement notice received for Dan-Y-Bont. All the work detailed in the notice has been completed and therefore no further action has been taken by the Fire and Rescue Service (FRS). - There was a communication issue when correspondence was not delivered to the correct team from the FRS, however this has now been resolved. 	
Resolved:	<ul style="list-style-type: none"> - The report be noted. 	
135/19	LOCKDOWN PROCEDURE	
	<p>A report outlining the lockdown procedure was received.</p> <p>In introducing the report, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> - The procedure needs to be updated to reflect 'Swansea Bay University Health Board'. - Delivery Units have developed their own lockdown procedure using this document. - The updated procedure was to be taken to the Health and Safety Operational Group. 	DK
Resolved:	<ul style="list-style-type: none"> - The updated lockdown procedure to be taken to the Health and Safety Operational Group. - The report be noted. 	DK
136/19	COSHH UPDATE	

	<p>A report outlining the COSHH update was received.</p> <p>In introducing the report, Gareth Howells highlighted the following points:</p> <ul style="list-style-type: none"> - The update received from internal audit provided a limited assurance assessment rating as there was an inconsistency of how the control of substances hazardous to health (COSHH) was managed over the sites and also where responsibility lies for the management on each site. - The expected timescales will now go into 2020, and therefore will require updating. <p>In discussing the report, the following points were raised:</p> <p>Mark Parsons confirmed that progress has been made and a COSHH database and procedure is now in place. The first Health Surveillance Group meeting has taken place which was well attended. The COSHH database will be taken forward at the next meeting.</p> <p>Pam Wenger recommended that Mark Parsons discusses updating the timescales with the Head of Accounting to amend the audit recommendation.</p> <p>An update be brought to June 2020 Committee and the work programme be updated.</p>	<p>MP</p> <p>MP</p> <p>MP</p>
<p>Resolved:</p>	<ul style="list-style-type: none"> - Mark Parsons to discuss updating the timescales with the Head of Accounting. - An update be brought to June 2020 Committee. - The work programme be updated. - The report be noted. 	<p>MP</p> <p>MP</p> <p>LJ</p>
<p>137/19</p>	<p>WATER SAFETY PLAN UPDATE</p>	
	<p>A report outlining the water safety plan update was received.</p> <p>In introducing the report, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> - The water safety policy (appendix 2) requires updating. - The flushing of taps policy is available online. There is an ongoing challenge for the water safety group in respect of flushing in clinical areas and outpatient departments. - There is no requirement to test for legionella, however 70 samples were taken at Singleton Hospital. Traces of legionella will be found as it is in the water, however processes are in place for when it is found in large quantities. 	

	<p>In discussing the report, the following points were raised:</p> <p>Pam Wenger queried if the expected timescale for completion of flushing is correct as the date is December 2020. Des Keighan advised that he will review and update in readiness for the next Audit Committee as he did not think this timescale was correct.</p>	DK
Resolved:	<ul style="list-style-type: none"> - The report be noted. - Des Keighan to review and update the expected timescales in the risk register. 	DK
138/19	FOOD SAFETY REPORT	
	<p>A report outlining the food safety report was received.</p> <p>In introducing the report, Joanne Jones highlighted the following points:</p> <ul style="list-style-type: none"> - All SBUHB sites have scored ratings either 4 or 5 from the Environmental Health Officers; - The average cost per meal across the health board is £2.81, an increase of £0.22 per meal. - Food wastage across the Health Board for 2017/18 at 6.05%, was above the Welsh Government target of 5%. - Key risks are catering infrastructure, training for nursing staff, commercial competition, procurement, discretionary capital and statutory and mandatory training. - Patient feedback is averaging between good and excellent. <p>In discussing the report, the following points were raised:</p> <p>Martyn Waygood requested that the gross catering costs is reviewed as he views them to be incorrect. Jo Jones confirmed she would undertake the review. Martyn Waygood queried what the statutory and mandatory training realistic target is. Jo Jones advised that the target is 90% to 100% by March 2020.</p> <p>Jackie Davies reflected on a recent visit to Singleton catering department. She advised that investment is needed to support the infrastructure of the department. Jo Jones commented that £800k is required for both Morriston and Singleton Hospitals, with immediate flooring issues for Morriston Hospital expected to cost in the region of £150k.</p> <p>Maggie Berry suggested that the Executive team review the subsidy for non-patient costs. She queried why Morriston have two commercial outlets on site, when 'Mwy Na' is already in place.</p>	JJ

	<p>Jo Jones informed the committee that recently the in-house team have been awarded the management of Singleton's catering outlets and this could be a positive step going forward. A trial is beginning on 1st April 2020 which will focus on healthy eating at Singleton Hospital. Des Keighan added that Morrision have 12 years remaining with their external commercial outlet contracts.</p> <p>Maggie Berry informed the committee that Mark Parsons has a background in discretionary capital funding for general health and safety issues, and this should be further discussed as an option.</p>	
Resolved:	<ul style="list-style-type: none"> - The report be noted. - Jo Jones to review the gross catering costs. 	JJ
139/19	INTERNAL AND EXTERNAL INSPECTIONS	
	A report outlining the internal and external inspections was received .	
Resolved:	The report be noted .	
140/19	OCCUPATIONAL HEALTH PRESENTATION	
	<p>Maggie Berry welcomed Paul Dunning and Debbie Rees-Adams to the meeting.</p> <p>A presentation outlining the occupational health and wellbeing support that is available to staff relating to stress and violence and aggression was received.</p> <p>The following points were highlighted by Paul Dunning and Debbie Rees-Adams:</p> <ul style="list-style-type: none"> - Wellbeing Champions commenced in October 2016 with approximately 350 staff involved in total. - The SBUHB vaccination programme has benefited from charitable funds and has been promoted under the style of a 'Game of Thrones' campaign. - A 'Clearer Space Group' has been set up for early intervention for trauma and is a resource offering support to address the unwanted effects of traumatic or upsetting events which are between 1-3 months old. It can be a one off session (1 hour) or 2 sessions (1 hour and 1.5 hours) to work through disturbing aspects of a job role, thereby preventing stress accumulating. 	

	<ul style="list-style-type: none"> - There have been 16 participants to date and 13 out of 16 met a screening diagnosis of PTSD at assessment. <p>In discussing the report, the following points were raised:</p> <p>Jackie Davies thought the 'Clearer Space Group' sounded fantastic.</p> <p>Gareth Howells reflected that the staff are operating in an abnormal way and this needs to frame our reality. He is keen to promote this and added that it is okay not to be okay. Paul Dunning added that the culture needs to be recreated and the message needs to be changed.</p> <p>Martyn Waygood thanked Paul Dunning and Debbie Rees-Adams for the presentation and stated that the resources need to be in place in order to future proof the process.</p> <p>Pam Wenger thanked the team for keeping our staff well in work. She will support this case when it goes to the Executive team over the next few weeks. Pam Wenger suggested that the team review case studies outside of Wales for good examples.</p> <p>Maggie Berry suggested that the presentation also goes to the Board.</p>	
<p>Resolved:</p>	<p>The presentation was noted.</p>	
<p>141/19</p>	<p>HEALTH AND SAFETY COMMITTEE TERMS OF REFERENCE</p>	
	<p>A report outlining the proposed amendments to the Health and Safety Terms of Reference was received.</p> <p>In introducing the report, Pam Wenger confirmed that some suggested attendee changes have been proposed, however this will be discussed in a separate meeting outside of this committee with Trade Union colleagues to discuss the options available. Subject to the amendments, the changes will be taken through to Board.</p> <p>In discussing the terms of reference, the following points were raised:</p> <p>Mark Parsons advised that the terminology and context of the word "committee" need to be understood. The additional level of Board assurance is provided by the Health and Safety Operational Group, which the Trade Unions attend. Pam Wenger added that the Trade Unions also attend the delivery units' health and safety groups.</p> <p>Darren Griffiths confirmed that he has received communication from Trade Unions and he is working with Pam Wenger to clarify the roles for governance routes.</p>	
<p>Resolved:</p>	<p>The report and terms of reference was noted.</p>	

142/19	RADON GAS REPORT	
	<p>A report outlining the radon gas report was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> - All monitoring recommendations have commenced and the detectors in headquarters will be in place for 3 months from December 2019. <p>In discussing the terms of reference, the following points were raised:</p> <p>Martyn Waygood declared an interest in relation to the Murton Clinic.</p> <p>Laurie advised of potential capital costs for radon increased ventilation in the future. Mark Parsons confirmed he will lead the ongoing management of radon monitoring.</p>	
Resolved:	The report was noted .	
143/19	PERSONAL PROTECTIVE EQUIPMENT	
	<p>The personal protective equipment (PPE) report was received.</p> <p>In introducing the report, Joanne Walters highlighted the following points:</p> <ul style="list-style-type: none"> - Welsh Government (WG) commission biannual All Wales endoscopy decontamination surveys. The audit for the health board took place during the third quarter 2018/19. - It was highlighted that there were variable, and in some areas, unacceptable practices relating to PPE usage throughout the Health Board. - It was recommended that, during procedures when contact of clothing/ exposed skin with blood/body fluids, secretions or excretions is anticipated, long-sleeve gowns and gloves should be worn. If the activity is likely to generate splashes or sprays of blood/body fluids, secretions or excretions, visors should also be worn. - An audit programme is being put in place to standardise monitoring the use of PPE. 	
Resolved:	The report was noted .	
144/19	REVIEW OF SERVICE DELIVERY: MORRISTON HOSPITAL	

Maggie Berry welcomed Suzanne Holloway to the meeting who was in attendance for Deb Lewis. The service delivery report for Morriston Hospital was **received**.

In introducing the report, Suzanne Holloway highlighted the following points:

- The consistency of the health and safety reporting structure has improved and now reports to the health and safety operational group.
- The Unit's Health and Safety group has had a name change to Morriston Environment and Support Services Group. The group are now meeting every six months instead of monthly.
- Inpatient falls are reviewed on a monthly basis. 1400 staff at Morriston have received falls training following the new falls policy launched in September 2019.
- Sharps incidents are on the increase, however the Senior Matron in ICU is reinforcing training around sharps.
- Following a desktop review on staff violence and aggression incidents, it was highlighted that there are higher physical assaults than verbal assaults which could account for staff tolerating verbal abuse, instead of reporting it. The team are working with staff from the emergency department (ED) to ask general questions to ensure the staff feel safe in the workplace. This is a work in progress.
- A robust working document is required for the Morriston Fire Plan, and this is being revisited.
- A current risk within ED is patients at risk from other patients. The Quality and Safety forum meet on a monthly basis with colleagues from ED and estates are also involved for clear links to be in place to be able to support.

In discussing the terms of reference, the following points were raised:

Darren Griffiths was pleased to see the use of data within the report, but queried if the unit has the right level of data. Suzanne Holloway confirmed that Datix is heavily used and she creates many of the reports herself.

Laurie Higgs added that staff members from health and safety are in Morriston on a daily basis. He stated that work is ongoing in respect of violence and aggression towards staff, and the focus is on patients with limited capacity.

Jackie Davies voiced concerns in regards to the name change of the group and added that the name change is not consistent across the health board. Suzanne Holloway advised that attendance was poor when it was titled the Health and Safety meeting, and attendance at the environmental

	<p>and support services group meeting is high. The Terms of Reference is explicit when detailing that the meeting is health and safety focused.</p> <p>Maggie Berry requested that the decision of the name is decided operationally and that an update is brought back to March's meeting.</p>	MP
Resolved:	<ul style="list-style-type: none"> - The report was noted. - An update of the name change to be included in the update form the operational group. 	MP
145/19	REVIEW OF SERVICE DELIVERY UNIT: HEAD QUARTERS	
	<p>A verbal update as to the Health and Safety arrangements at Head Quarters was received.</p> <p>In discussing this item, the following points were raised:</p> <p>Mark Parsons confirmed that the Terms of Reference for the Health and Safety Operational Group for the site have been updated and Pam Wenger is the lead for the premises. The Head of Corporate Governance will chair the meetings.</p> <p>Pam Wenger confirmed that a written report will come to March's committee.</p>	PW
Resolved:	<ul style="list-style-type: none"> - A written report on the Health and Safety Operational Group at Head Quarters be provided, to include the individuals identified for walk arounds. - The verbal update was noted. 	PW
146/19	ITEMS TO REFER TO OTHER COMMITTEES	
	<ul style="list-style-type: none"> - Fire safety arrangements and managing contractors audit to go through the Health and Safety Operational Group. - Retirement resource future proofing to be taken through Workforce and Organisational Development - Occupational Health Presentation to be taken through Board Development. - The Health and Safety Committee Terms of Reference to go through Health Board. - Discretionary capital funding for health and safety general issues to be referred to the Executive team. 	

147/19	ANY OTHER BUSINESS	
	There were no items discussed.	
148/19	DATE OF NEXT MEETING	
	The next scheduled meeting was 3 rd March 2020.	