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Health Board



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|--|---|--------------------------|-------------------------------------|
| Meeting Date | 03 March 2020 | Agenda Item | 3.1 |
| Report Title | Neath Port Talbot Delivery Unit Health and Safety Committee Report | | |
| Report Author | Susan Jones, Head of Operational Services | | |
| Report Sponsor | Brian Owens, Service Director | | |
| Presented by | Brian Owens, Service Director | | |
| Freedom of Information | Open | | |
| Purpose of the Report | To provide the Health and safety Committee with an overview of Neath Port Talbot Hospital's systems for managing health and safety and to provide a summary of key issues, risks and plans to address them. | | |
| Key Issues | <p>Neath Port Talbot Delivery Unit comprises of a mixture of community and in patient services across all Health Board sites, therefore the management of Health and Safety poses a series of unique challenges.</p> <p>The Unit has in place, an established Health and Safety Group, working to an annual delivery plan. The group is chaired by the Head of Operational Services and reports directly to the Unit Management and Delivery Board.</p> | | |
| Specific Action Required <i>(please choose one only)</i> | Information | Discussion | Assurance |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Recommendations | <p>Members are asked to:</p> <ul style="list-style-type: none"> NOTE THE REPORT | | |

NEATH PORT TALBOT DELIVERY UNIT HEALTH AND SAFETY ASSURANCE REPORT

1. INTRODUCTION

This report is to provide the Health and Safety Committee with an overview of Neath Port Talbot Hospital's systems for managing health and safety and to offer assurance of our compliance with health and safety matters affecting staff, patients and visitors using our services.

During Quarters 2 and 3, Neath Port Talbot Hospital's medical bed base increased from 104 medical beds up to 136 (depending on surgical activity requiring an inpatient bed). This change in bed base demonstrates a 26% increase in medical patients on site which should be recognised in the context of Health and Safety issues identified on site.

2. BACKGROUND AND ASSURANCE

Performance 2019/20 (Q1,2,3)

- **Mandatory training compliance @ 31st January 2020**

| Competence Name | Assignment Count | Required | Achieved | Compliance % |
|---|------------------|----------|----------|--------------|
| NHS CSTF Equality, Diversity and Human Rights - 3 Years | 1229 | 1229 | 1127 | 91.70% |
| NHS CSTF Fire Safety - 2 Years | 1229 | 1229 | 1079 | 87.79% |
| NHS CSTF Health, Safety and Welfare - 3 Years | 1229 | 1229 | 1110 | 90.32% |
| NHS CSTF Infection Prevention and Control - Level 1 - 3 Years | 1229 | 1229 | 1123 | 91.38% |
| NHS CSTF Information Governance (Wales) - 2 Years | 1229 | 1229 | 1115 | 90.72% |
| NHS CSTF Moving and Handling - Level 1 - 2 Years | 1229 | 1229 | 1064 | 86.57% |
| NHS CSTF Resuscitation - Level 1 - 3 Years | 1229 | 1229 | 1032 | 83.97% |
| NHS CSTF Safeguarding Adults - Level 1 - 3 Years | 1229 | 1229 | 1077 | 87.63% |
| NHS CSTF Safeguarding Children - Level 1 - 3 Years | 1229 | 1229 | 1084 | 88.20% |
| NHS CSTF Violence and Aggression (Wales) - Module A - No Specified Renewal | 1229 | 1229 | 1131 | 92.03% |
| NHS MAND Dementia Awareness - No Renewal | 1229 | 1229 | 1143 | 93.00% |
| NHS MAND Social Services and Well Being Act Wales Awareness (2014) - No Specified Renewal | 1229 | 1229 | 1159 | 94.30% |
| NHS MAND Violence Against Women, Domestic Abuse and Sexual Violence - 3 Years | 1229 | 1229 | 1095 | 89.10% |

- **Annual work plan**

Neath Port Talbot Hospital has an annual Health and Safety work plan that incorporates the key elements of Health and Safety management and feeds into the Delivery Unit Health and Safety meeting.

- **Violence and aggression**

There were 107 incidents of violence and aggression towards staff during the Q1,2 and 3 compared to 62 during the same period in the previous year. There are higher rates of violence and aggression within our general medical wards (C and D), where our cognitively impaired patients are cared for.

During Quarters 2 and 3, via staff consultation, a remodelled area for care has been developed on Ward C to provide an enhanced environment for the care of patients with a cognitive impairment and ongoing medical needs.

In addition, the bespoke V+A training programme, that was originally developed within the Neuro Rehab Unit, continues to be implemented within all the medical inpatient areas. This training is undertaken by a Neuro Rehab Clinical Nurse Specialist and has been supported by the Health and Safety Team. Over 120 staff across Neath Port Talbot site have received this bespoke 2 day training course, which equates to Level 3 Violence and Aggression training. The training focusses on Positive Behavioural Support and Management techniques.

Lessons learned from V+A incidents include effective support from EMI colleagues in patient management and the impact of staff behaviour when dealing with cognitively challenged patients.

Staff who have been impacted on by a violence and aggression incident receive a wellbeing being letter from the Senior Nursing team.

- **Fire**

An annual Health and Safety plan includes fire evacuation exercises. Through the course of the year these exercises are undertaken both in and out of hours, within wards and departments and in admin and clerical areas. The Health Board fire officer is in attendance at most of the exercises and the local fire brigade will sometimes participate. Each exercise ends with a debrief session for staff as well as learning shared at the Delivery unit Health and Safety Group.

A fire risk assessment review group is held quarterly between the Health Board and PFI partners with an action log maintained. The Health Board fire officer is in attendance.

- **Manual Handling**

Manual handling incidents do not feature within our Datix register. The delivery unit have an ongoing assessment of the manual handling equipment in place by the ward and department leads.

- **Falls**

There were 91 Patient falls resulting in harm during Q1-3 compared to 97 for the same period last year.

- There were 6 falls incidents reported as SIs during the period. All 6 SI incidents have been robustly scrutinised and reported as unavoidable.

All patients who fall more than once have a root cause analysis investigation undertaken to establish whether there are underlying causes for the falls. Furthermore, all falls resulting in significant harm are presented to a peer scrutiny group to establish if there are failures requiring mitigation.

Since April 2019 the Neath Port Talbot Delivery Unit has hosted the Health Board wide falls reduction work-stream and have commenced the development of innovative ways to reduce falls resulting in harm in the context of promoting safe mobilisation.

- **Sharps injuries**

There have been 8 sharps related incidents for staff members in Q1-3 compared to 3 in the same period the previous year. These incidents include

- an injury to a staff member from a razor whilst shaving a patient
- theatre x4 incidents – 2 incidents related to opening ampules
- Phlebotomy – issue with needle sheath – reported to the company

- **RIDDOR reportable incidents**

There has been 1 RIDDOR reportable incident in Q1 - 3 relating to a back injury to a member of staff. This is a reduction of 5 compared to the same period last year.

Learning from the incidents includes

- Keeping the patient calm
- Recalling salient training

Neath Port Talbot is a diverse unit with a broad portfolio. Our Health and Safety Group membership reflects the range of services within the unit. In addition all areas within the hospital site are encouraged to attend the Unit Health and Safety Group to explore themes and trends arising from incidents occurring across our services and encourages shared learning.

- **Unit Health and Safety Risks**

There are currently 4 risks relating to Health and Safety on the unit risk register, these are monitored through our Quality, Safety and Improvement Group, these are as follows:-

| ID | Ref | Handler | Executive Lead | Title | Opened | Risk Type | Risk level (initial) | Risk level (current) | Risk level (Target) |
|------|-------------------------------|-------------------|---------------------------------------|-------------------------------------|------------|-------------------|----------------------|----------------------|---------------------|
| 494 | NPTH/SC/UHWNitrogen | Paul Knaggs | | Transporting of liquid nitrogen WFI | 07/05/2015 | Health and Safety | High Risk | Significant | Significant |
| 1134 | NPTH/SC/ViolenceandAggression | Mrs Sharron Price | Jenkins, Lesley - Unit Nurse Director | Violence and Aggression | 27/01/2017 | Health and Safety | Significant | Significant | Moderate Risk |
| 1501 | NPTH/SC/FireComp | Mrs Susan Jones | | Breach in fire compartmentalisation | 15/02/2018 | Health and Safety | Moderate Risk | Moderate Risk | Low Risk |
| 1535 | NPTH/SC/DecontaminationMIU | Mr Kevin Randall | Jenkins, Lesley - Unit Nurse Director | Contamination MIU NPTH | 10/04/2018 | Health and Safety | Moderate Risk | Moderate Risk | Low Risk |

3. GOVERNANCE AND ASSURANCE

Assurance systems

- **Reporting systems**
Monthly Delivery Unit Health and Safety Group
Attendance at the Health Board Health and Safety Committee
Risk register review
- **Unannounced audits**
Monthly Health and Safety activities including name badge audits and fire evacuation are undertaken. In addition, on a quarterly basis, there are general H+S walkabouts with both Health Board and PFI colleagues involved.

4. FINANCIAL IMPLICATIONS

None

5. RECOMMENDATION

Members are asked to:

NOTE the report