



# Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg University Health Board



Meeting Date	4th March 20	19	Agenda Item	4.2		
Report Title	Exception Report for ABMU Health and Safety Risk Register					
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Presented by	Dr Laurie Hig	gs, Head of Hea	Ith and Safety			
Freedom of Information	Open					
Purpose of the	This paper informs the Health Board of progress and					
Report	other matters relating to the management of key Health, Safety and fire risks					
Key Issues	Monitoring of progress of key ABMU Health, Safety and Fire risks					
Specific Action	Information	Discussion	Assurance	Approval		
Required (please ✓ one only)			<b>√</b>			
Recommendations	Members are asked to :         • NOTE the risk register and the actions taken to minimise the risk					

#### **EXCEPTION REPORT FOR ABMU HEALTH AND SAFETY RISK REGISTER**

#### 1. INTRODUCTION

Board level knowledge and scrutiny of key risks is good governance. Further development of the ABMU risk register has been made following a recent Health and Safety inspection of the organisation. Further risks are recorded aligned to the reorganisation of the Health Board.

#### 2. EXCEPTION REPORT FOR ABMU HEALTH AND SAFETY RISK: PROFILE

#### 2.1 Current Risks: Increase in Risk

Risk Area	Risk Rating	Current Position	Recommendation(s)			
Fire safety Resources	15	<ul> <li>It has identified that there are insufficient resources to effectively manage fire safety in the organisation.</li> <li>Additional risk has been created by the Cwm Taff reorganisation and the transfer of resource (loss of one Fire Safety Adviser)</li> <li>Staff previously deployed in Port Talbot and remaining parts of Swansea Bay Health Board are currently not resourced in the new structure</li> <li>Pending retirement of one Fire Safety leaves only one active Fire Safety Adviser</li> <li>Long term sickness of clerical resource</li> <li>Need to improve the governance of fire risk assessments</li> </ul>	<ul> <li>Fill pending vacancy</li> <li>Review governance requirements</li> <li>Review role of Health and Safety department to support Units etc.</li> </ul>			
Health and Safety Resources	15	It has identified that there are insufficient resources to effectively manage fire safety in the organisation	<ul> <li>Review governance requirements</li> <li>Review role of Health and Safety department to support Units etc.</li> </ul>			
Health and Safety Executive Inspections	16 (TBC)	<ul> <li>10 Improvement notices for ABMU from HSE November 2019 review</li> <li>Unclear whether role of H&amp;S team is to police the organisation</li> <li>Management of health and safety at ward and department level requires support and revitalisation</li> <li>Management training</li> <li>Improved risk management systems and regular scrutiny</li> <li>Incident reporting and investigation ineffective</li> </ul>	Develop comprehensive action plan and deliver			
Water Safety management	TBC	Internal audit report limited assurance	Develop comprehensive action plan and deliver			
RIDDOR Reporting	TBC	<ul> <li>Potential failure to achieve legal duties in some case for timely reporting</li> <li>Poor investigation and learning lessons (across all investigations)</li> </ul>	Provide training and information for staff			

	Review requirement for
	better central governance of
	system

## 2.2 Current Risks: Limited or no recent progress

Risk Area	Risk Rating	Current Position	Recommendation(s)			
Singleton Cladding	15	<ul> <li>Operational action taken to improve fire prevention and evacuation strategies including training of staff, evacuation procedures, equipment provision etc.</li> <li>Awaiting financial support for cladding removal from Central ward block</li> </ul>	<ul> <li>Maintain current level of operational protection</li> <li>Test procedure by conducting a fire drill</li> <li>Obtain finances to remove cladding</li> </ul>			
Management of Alerts, roles and responsibilities, governance	8	Assurance systems for action taken need to be improved with closure of action taken and better monitoring	Further develop governance arrangements in Units and Board level			
Effective arrangements for the management of COSHH	10	<ul> <li>New ABMU procedure developed</li> <li>Limited assurance for Internal Audit report for governance arrangements</li> <li>Insufficient corporate resource</li> </ul>	Rollout of procedure and testing			
Arrangements for the management of Radon gas sampling	6	•	•			
Review of effectiveness of lone worker protection, risk assessments etc.	12	No review undertaken	To be included in Swansea Bay H&S Improvement plan 2019-20 and work of Unit Health and Safety Committees			
Effective arrangements for the management of VDU safety	6	<ul> <li>Systems in place but review needed to confirm they are fit for purpose</li> <li>No VDU procedure</li> </ul>	Include in Health and Safety Improvement plan 2019-20			

# 4.3 Current Risks: Improving

Risk Area	Risk Rating	Current Position	Recommendation(s)
Management of Health and Safety in Units	16	<ul> <li>Morriston and Primary         Care/Community Units reforming         Health and Safety Committee</li> <li>Review of arrangements required for         Port Talbot/Neath, Mental         Health/Learning disabilities and         Singleton Units to include lessons         learnt from HSE inspection</li> </ul>	<ul> <li>Incorporate better facilities/security management into work of the committee</li> <li>Management units to clearly demonstrate key Health and safety behaviours/leadership etc.</li> </ul>

		Princess of Wales Health and Safety committee inactive	
Health and Safety internal Audit Report	ТВС	Adequate assurance achieved	Further review following     HSE Improvement notices
Fire Safety Group	TBC	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.	<ul> <li>Improve scrutiny etc. of Fire Safety Group</li> <li>Develop better fire safety governance in Units</li> </ul>
Progress with Fire Safety Risk Assessments	12	Majority of patient care areas have updated risk assessments	Review resource requirements     Ensure effective management of individual actions following risk assessments
Hoists and other equipment falling out of manufacturer's support	12	Hoist replacement programme of £470 being completed	Further equipment review 2019-20

### **5 RECOMMENDATIONS**

Members are asked to:

• NOTE the risk register and the actions taken to minimise the risk

Governance and Assurance										
Link to corporate objectives	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
	<b>√</b>		<b>✓</b>		<b>√</b>	D: ::: 1	<b>√</b>	T		
Link to Health	Staying Healthy	Saf Car		Effective Care		Dignified Care	Timely Care	Indivi Care		Staff and Resources
and Care	√ Incarring	<b>√</b>	<u> </u>	Oarc		Oaic	Oaic	Oaic		resources
Standards Quality, Safety	and Deti			<u> </u>						
Improved safety for staff, patients, visitors and contractors.  Financial Implications  Failure to effectively manage health and safety risk can have significant legal, moral and financial implications. These include increased sickness and absence, management of resources, equipment and premises and the potential risk of legal action both statutory and for compensation.  Legal Implications (including equality and diversity assessment)										
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Potential breach of UK Health and Safety law										
Staffing Implications										
Increased sickness and absence										
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)										
None										

None

None

Report History

Appendices