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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	05 October 2021	Agenda Item	2.1
Report Title	Health & Safety Risk Register (HBRR) Report		
Report Author	Neil Thomas, Assistant Head of Risk & Assurance		
Report Sponsor	Pam Wenger, Director of Corporate Governance		
Presented by	Hazel Lloyd, Head of Patient Experience, Risk & Legal Services		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to inform the Health & Safety Committee of the risks within the Health Board Risk Register (HBRR) assigned to the Health & Safety Committee; and to report the underpinning operational health & safety risks and actions being taken to minimise them.		
Key Issues	<ul style="list-style-type: none"> • The Health & Safety Committee last considered the HBRR on 1st July 2021. • The Register was revised further and received by the Management Board and Board later that month. This report reflects the health & safety entries in the risk register received by the Board on 29th July, with updates provided by lead managers for allocated risks subsequently. • The Director of Nursing & Patient Experience, supported by the Director of Corporate Governance, has met individually with each of her Executive Director colleagues to discuss the Health Board risks and action being taken to mitigate them. • Additionally, the Risk Management Group met in August 2021 and reviewed the top 5 risks for the health board. Feedback was included in its highlight report to the Management Board in September. • Action is currently underway to review risk entries to inform the next iteration of the risk register scheduled for review by the Management Board in October. • The HBRR contains three risks assigned to the Health & Safety Committee. An extract of the HBRR appended to this paper includes these risks: <ul style="list-style-type: none"> ○ 13 – Environment of Premises ○ 41 – Fire Safety Compliance ○ 64 – Health & Safety infrastructure, Additionally, the extract includes one risk assigned to another Committee for oversight, presented to this Committee for information following its discussion at the last meeting (risk reference 36: Storage of Paper Records). • The Covid-19 Gold Command risk register has been updated and risks associated with the longer term risk of Covid-19 recovery reviewed, and where appropriate transferred for inclusion in the overall Health Board Risk Register. The Covid-19 risk register has not been included as there are no 		

	operational risks assessed to be at or above the health board's current appetite score of 20 or above.			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the updates to the Health Board Risk Register risks assigned to the Committee; • DISCUSS the risks assigned to the Health & Safety Committee and endorse the action being taken to manage the risks. 			

HEALTH & SAFETY RISK REGISTER (HBRR) REPORT

1. INTRODUCTION

The purpose of this report is to inform the Health & Safety Committee of the risks from the Health Board Risk Register (HBRR) assigned to the Health & Safety Committee; and to report the underpinning operational health & safety risks and actions being taken to minimise the risks.

2. BACKGROUND

2.1 Risk Management Framework

The Audit Committee is responsible for overseeing the overall operation of the risk management framework and providing assurance the Board in that respect. While this is the case, individual risks have been assigned to other Board committees for more detailed scrutiny and assurance, with the intention that committee work programmes be aligned so that progress made to address key risks is reviewed in depth. Regular HBRR update reports are submitted to the Health Board and the committees of the Board to support this.

Executive Directors are responsible for managing risk within their area of responsibility.

Risk Register management is supported by a Risk Management Group (RMG) which is responsible for overseeing the operational management of risk, ensuring local systems and processes are in place and are operating effectively to ensure appropriate reporting and escalation. The Group meets quarterly and it last met in May 2021.

Additionally, a Risk Scrutiny Panel meets monthly, and is responsible for moderating new risks and escalated risks to the Health Board Risk Register (HBRR) and Board Assurance Framework (BAF), engaging and advising Executive Directors as appropriate regarding the escalation and de-escalation of risks.

2.2 Risk Appetite

Risk appetite and tolerance set out how risk and reward are to be balanced, as well as providing clarification on the level of risk the Board is prepared to accept.

Prior to the Covid-19 Pandemic, the Board's risk appetite required action should be taken as a priority to address risks scored at 16 and above. There is a low tolerance to taking risk where it would have a high impact on the quality and safety of care being delivered to patients.

Following the onset of the Covid-19 pandemic, members of the Board agreed that the risk appetite score would increase to 20 and above for an initial period of 3 months. The risk appetite of 20 and above has remained in place since the start of the pandemic. These arrangements are reviewed regularly by the Executive Team, Audit Committee and the Board.

2.3 Health Board Risk Register (HBRR)

The Health Board Risk Register (HBRR) is intended to summarise the key 'live' extreme risks facing the Health Board and the actions being taken to mitigate them.

Each Health Board risk has a lead Executive Director who is responsible for ensuring there are mechanisms in place for identifying, managing and alerting the Board to significant risks within their areas of responsibility through regular, timely and accurate reports to the Management Board/Executive Team, relevant Board Committees and the Board.

2.4 Covid-19 Risk Register

In recognition that Covid-19 is an 'issue' which the health board is managing, a separate risk register was established to capture the key risks associated with managing the response to the Pandemic. Risks on this register are overseen by Gold Command and reviewed weekly.

As part of the review undertaken at Gold Command longer term risks associated with Covid recovery have been considered for transfer into the overall Health Board Risk Register where appropriate (the Health Board Risk Register has been updated to reflect these). The Covid-19 risk register has not been included as there are no operational risks assessed to be at or above the health board's current appetite score of 20 or above.

3. MANAGEMENT OF HEALTH & SAFETY RISKS

3.1 HBRR Health & Safety Risks

Since the HBRR was received by the Health & Safety Committee in June 2021, Executive Directors have been reviewing and refreshing register entries, with a particular focus on actions and timescales assigned to address risks.

The Register was revised further and received by the Management Board and Board later that month. This report reflects the health & safety entries in the risk register received by the Board on 29th July, with updates provided by lead managers for these risks subsequently.

The Director of Nursing & Patient Experience, supported by the Director of Corporate Governance, has met individually with Executive Director colleagues to discuss the Health Board risks exceeding the Board's appetite and action being taken to mitigate them.

Additionally, the Risk Management Group met in August 2021 and reviewed the top 5 risks for the health board. Feedback was included in the group's highlight report to the Management Board in September 2021.

Action is currently underway to review risk entries to inform the next iteration of the risk register scheduled for review by the Management Board in October.

There are no new risks assigned to the Health & Safety Committee since the last meeting. There are three risks from the HBRR that are assigned to the Health & Safety Committee for oversight. An extract of the HBRR containing risks assigned to the Health & Safety Committee for oversight, and those for information, is presented at **Appendix 1**.

Table 1 below highlights updates to these risks made following the last meeting.

Table 1 – HBRR Risks Assigned to the Health & Safety Committee

Risk	Exec Lead	Current Rating	Target Rating	Change
13 - Environment of Premises Failure to meet statutory health and safety requirements. (841)	Chief Operating Officer/Director of Strategy	12	12	→
Update This risk register entry had been reviewed and partially refreshed by the outgoing Chief Operating Officer. Supporting information was provided by the corporate Risk & Assurance team to support further review. Following his departure, the risk has been discussed with the Interim Chief Operating Officer and further information is being forwarded to support re-assessment of the risk for future iterations of the register.				

Risk	Exec Lead	Current Rating	Target Rating	Change
41 - Fire Safety Regulation Compliance Fire Safety notice received from the Fire Authority – MH&LD Unit. Uncertain position in regard to the appropriateness of the cladding applied to Singleton Hospital in particular (as a high rise block) in respect of its compliance.re safety regulations. (1567)	Director of Nursing and Patient Experience	16	9	→
Update The main façade (cladding) to the tower block will be replaced with fully compliant cladding on a phased programme. The scaffolding for phase1 & 2 was completed in March 2021, with actual removal works commenced in April 2021. The target programme completion date is November 2023. The risk will be managed throughout the programme with regular site visits and project meetings.				

Risk	Exec Lead	Current Rating	Target Rating	Change
64 - Health and Safety Infrastructure Insufficient resource and capacity of the health, safety and fire function to maintain legislative and regulatory compliance. (2159)	Director of Nursing and Patient Experience	25	12	→

Update

Agreement to advertise 2 fire safety officer posts in September 2021. There is no change to the current risk score as resources remain a challenge pending decision for funding in line with the business case resources submission.

Additionally, at the last meeting the Committee asked that the potential fire risk presented by the storage of paper records be reflected within the text of HBRR *Risk 36: Paper Record Storage*. This risk has been reviewed and updated by the Director of Digital.

The Committee is requested to ensure that its agenda enables the scrutiny and challenge of actions being taken to address the risks, and supports the reporting of assurance to the Board accordingly.

3.2 Operational Health & Safety Risks

Each Service Group and Directorate hold risk registers that outline their operational risks. Any operational risks relating to health & safety are monitored by the health & safety team, and any health & safety related risks that may need to be escalated for inclusion on the HBRR are brought to the attention of the Risk Management Group or Risk Scrutiny Panel, and the Health & Safety Committee for consideration.

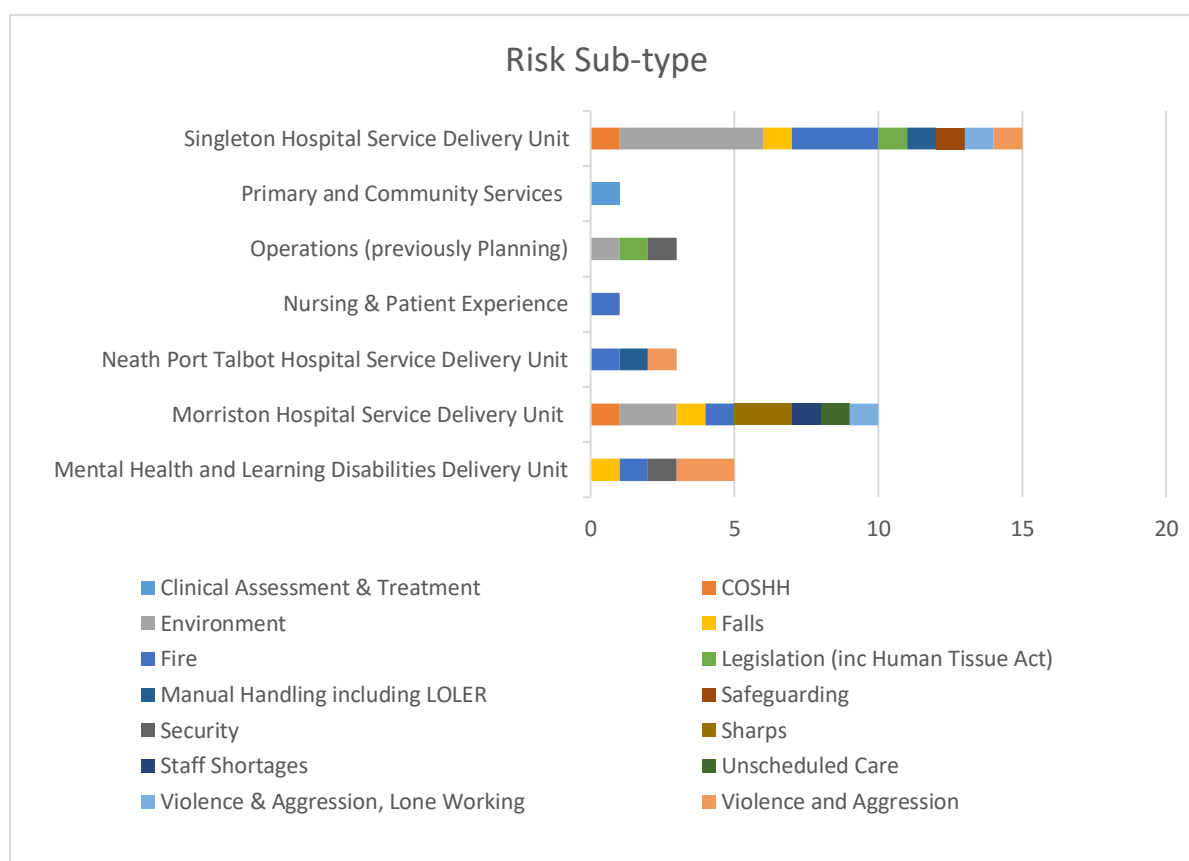
Figures 1 and 2 below summarise the operational risks by Service Group / Directorate and risk category.

Figure 1 - Operational Risks by Service Group/Directorate and Risk Category

	Operational Risks by Service Group/Directorate and Risk Category														Grand Total
	Clinical Assessment & Treatment	COSHH	Environment	Falls	Fire	Legislation (inc Human Tissue Act)	Manual Handling (including LOLER)	Safeguarding	Security	Sharps	Staff Shortages	Unscheduled Care	Violence & Aggression	Violence and Aggression	Grand Total
Mental Health and Learning Disabilities Delivery Unit				1	1				1					2	5
Morrison Hospital Service Delivery Unit		1	2	1	1					2	1	1	1		10
Neath Port Talbot Hospital Service Delivery Unit					1		1							1	3
Nursing & Patient Experience					1										1
Operations (previously Planning)			1			1		1							3
Primary and Community Services	1														1
Singleton Hospital Service Delivery Unit		1	5	1	3	1	1	1					1	1	15
Grand Total	1	2	8	3	7	2	2	1	2	2	1	1	2	4	38

As at September 2021, the greatest number of operational risks recorded by service groups and marked for associated with the Health & Safety Committee belong to the Singleton/NPT Service Group.

Figure 2 – Operational Risks by Service Group/Directorate and Risk Category



The top 4 health & safety risk reporting categories across all service groups and directorates are listed in Figure 3 below:

Figure 3 – Top 4 Health & Safety Risk Categories

H&S Risk Category	Number of Risks
Environment	8
Fire	7
Violence & Aggression	6
Falls	3

3.3 Risk Training Workshops

The corporate Risk & Assurance team have commenced the delivery of risk training workshops to groups of clinical and management leads within service groups. The training has commenced in Singleton/NPT service group will continue across others and will extend to corporate directorates. The workshops shared good practice on risk articulation and documentation, and presented an opportunity for participants to scrutinise current entries against good practice criteria.

3.4 Covid-19 Gold Risk Register

As noted earlier, following review undertaken at Gold Command longer term risks associated with Covid recovery have been transferred into the overall Health Board Risk Register where appropriate. The Covid-19 risk register has not been included with this paper as there are no operational risks assessed to be at or above the health board’s current appetite score of 20 or above.

4. GOVERNANCE & RISK

4.1 Risk Appetite & Tolerance Levels

As noted earlier, members of the Board agreed that the risk appetite, whilst dealing with Covid-19, would increase to 20 and above for an initial period of 3 months. These arrangements have been reviewed regularly by the Executive Team, Audit Committee and the Board, but the appetite has not changed since and remains at 20 currently.

5. FINANCIAL IMPLICATIONS

There are financial implications to minimising the risks entered on the HBRR in relation to significant revenue implication around strengthening resources in the Health Board, Service Groups and Departments. Capital monies may also be required in relation to supporting the improvements required to improve and where this is the case further detail is provided in the individual entries on the HBRR.

6. RECOMMENDATION

Members are asked to:

- **NOTE** the updates to the Health Board Risk Register relating to the Health & safety Committee, and Covid-19 Gold Command risk register;
- **DISCUSS** the risks assigned to the Health & Safety Committee and endorse the action being taken to manage the risks.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	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 checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" 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 checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input checked="" 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		
<p>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. Patients are potentially exposed to health and safety risks. Systems to manage those risks must be patient centred; as an example understanding each patients trigger for violence and aggression will protect both staff and patients.</p>		
Financial Implications		
<p>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 risk management processes.</p>		
Legal Implications (including equality and diversity assessment)		
<p>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. Health and safety law compliance, avoidance or mitigation of claims, effective use of staff and training resources etc.</p>		
Staffing Implications		
<p>All staff have a responsibility for promoting risk management, adhering to SBUHB policies and have a personal responsibility for patients' safety as well as their own and colleague's health and safety. Executive Directors/Unit Directors are requested to review their existing operational risks on Datix Risk Module to ensure SBUHB has an accurate and up to date risk profile.</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The HBRR and the Covid 19 risk register sets out the framework for how SBUHB will make an assessment of existing and future emerging risks, and how it will plan to manage and prepare for those risks.</p>		
Report History	N/A	
Appendices	Appendix 1 – Health Board Risk Register extract	