



Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>01 September 2021</b>	<b>Agenda Item</b>													
<b>Report Title</b>	<b>Water Management Assurance Update</b>														
<b>Report Author</b>	<b>Des Keighan, Assistant Director of Operations – Estates</b>														
<b>Report Sponsor</b>	<b>Craige Wilson, Deputy Chief Operating Officer</b>														
<b>Presented by</b>	<b>Des Keighan , Assistant Director of Operations – Estates</b>														
<b>Freedom of Information</b>	Choose an item.														
<b>Purpose of the Report</b>	Following Internal Audit’s Review of Water Management within the Health Board, this paper sets out to give an update on the steps that have been taken to address the issues identified within the review.														
<b>Key Issues</b>	<p>Following Internal Audit’s Review of Safe Water Management within the Health Board. The report sets out to provide assurance to the Health &amp; Safety Committee that progress has been made in addressing these recommendations.</p> <p>Within the report the following risks are highlighted</p> <table border="1"> <thead> <tr> <th>Priority</th> <th>High</th> <th>Medium</th> <th>Low</th> </tr> </thead> <tbody> <tr> <td>At time of Audit</td> <td>2</td> <td>9</td> <td>-</td> </tr> <tr> <td>Update</td> <td>1</td> <td>4</td> <td>-</td> </tr> </tbody> </table> <p>Whilst we have addressed some of the recommendations progress on the outstanding issues are ongoing and detailed on the following pages is an update on what actions have been taken to date. It should be noted that two further recommendations should be completed following the September Water Management Sub Committee, with the three remaining recommendations on track as detailed below to be progressed by the end of October.</p> <p><b>Recommendation 1</b></p>			Priority	High	Medium	Low	At time of Audit	2	9	-	Update	1	4	-
Priority	High	Medium	Low												
At time of Audit	2	9	-												
Update	1	4	-												

	<p>The updated Water Safety Policy should be formally ratified by the Health &amp; Safety Committee and published online.</p> <p><b>Complete:</b> The policy was approved at the July H&amp;S Committee meeting and am awaiting to release on intranet</p> <p><b>Recommendation 2:</b> Water Safety Management Committee attendance from nominated members should continue to be reviewed, with escalation where necessary.</p> <p><b>Complete:</b> The Director of Nursing has written to Service Units seeking representation from the Units. This will be monitored going forward.</p> <p><b>Recommendation 3a:</b> The Water Safety Policy and Plan should reflect the role and responsibilities of Hotel Services in flushing activities;</p> <p><b>Complete:</b> The Water Safety Plan has been updated as the live procedure. The Policy will not be changed at this time, as it recognises the need for flushing with the Water Safety Plan stating how this will be achieved.</p> <p><b>Recommendation 3b:</b> Where responsibility for flushing infrequently used outlets undertaken by Hotel Services following a request from e.g. Estates/Capital Planning (i.e. outside the routine daily Hotel Services cleaning regime), this should be formally documented, and a schedule maintained of responsible areas.</p> <p><b>Complete:</b> An electronic register has been established within the Hotel Services shared electronic filing system, on which requests will be recorded by Domestic Managers when received e.g. Capital Planning. Communication will be requested via email from now on to ensure the specifics of the request (location, dates etc.) can be retained alongside the register itself.</p> <p><b>Recommendation 4a:</b> Management should establish a mechanism for obtaining assurance of flushing compliance from the key parties of Hotel Services and Ward staff</p>
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	<p><b>Action:</b> This will be discussed by WSG to consider - this will be achieved by 20<sup>th</sup> September 2021 or one month after the next WSG.</p> <p><b>Recommendation 4b:</b> Flushing should be a standing agenda item at the Water Safety Management Committee and the Health &amp; Safety Operational Sub-Group (Water), including the reporting of compliance information.</p> <p><b>Complete:</b> This is now an agenda item on both the Sub and Main Water Groups.</p> <p><b>Recommendation 5a:</b> Standardised Estates performance reports should be included in the agenda pack for the Water Safety Management Committee, submitted in advance of each meeting;</p> <p><b>Complete:</b> These were presented at the 19<sup>th</sup> August 2021 Health Board Water Management Committee and were sent out in advance of the meeting through Teams.</p> <p><b>Recommendation 5b:</b> Estates performance reports should include information regarding the risk profile of missed PPMs (e.g. by category of asset / site etc.).</p> <p><b>Complete:</b> this was included in the report presented at the 19<sup>th</sup> August 2021 Health Board Water Management Committee.</p> <p><b>Recommendation 6:</b> The Water Safety Management Committee should monitor progress towards implementation of recommendations made by NWSSP: SES and Internal Audit</p> <p><b>Action:</b> Whilst progress against the NWSSP:SES Internal Audit, items were not specifically recorded as such they were listed within the action log. However, they are an agenda item at the Water Safety Management Sub Group meeting on the 20<sup>th</sup> September.</p> <p><b>Recommendation 7:</b> Paperwork associated with the appointment of Responsible / Authorised Persons should be centrally retained.</p>
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	<p><b>Complete:</b> Paper work around the appointment of AP's is held in the COO's offices.</p> <p><b>Recommendation 8a:</b> Training should be updated for relevant staff as soon as possible, COVID restrictions permitting.</p> <p><b>Action:</b> Whilst AP's have been updated we still need to arrange CP training and this will be updated as soon as possible.</p> <p><b>Recommendation 8b:</b> Training requirements and compliance should be captured in a training matrix, for all staff with water safety responsibilities (including Estates and Departmental / Ward staff</p> <p><b>Action:</b> The detail of training is to be incorporated within the water safety plan to be agreed at 20<sup>th</sup> September Sub Group meeting.</p> <p><b>Recommendation 9a:</b> Water safety risks captured in DATIX should be routinely reported to and reviewed by the Water Safety Management Committee as a standing agenda item.</p> <p><b>Action:</b> This is now an agenda item on the Water Sub Group meeting on the 20<sup>th</sup> September.</p> <p><b>Recommendation 9b:</b> Management should resolve the current DATIX usability issues to ensure water-related Estates risks can be accurately captured, monitored and reported</p> <p><b>Action:</b> The Estates element of DATIX has not yet gone "live". The Corporate Governance Department are arranging for a review of the Estates Risks which have been entered into DATIX. These risk are due to go to the 16<sup>th</sup> October Risk Scrutiny Panel for review and then they will be accessible once approved to go onto the DATIX system.</p> <p><b>Recommendation 10:</b></p>
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	<p>Risk assessments should be undertaken as soon as possible. The resulting action plans should include:</p> <ul style="list-style-type: none"> <li>• Risk prioritisation of required actions; and</li> <li>• Identification and allocation of required funding.</li> <li>• Routine reporting of progress should be presented to the Water Safety Management Committee</li> </ul> <p><b>Action:</b> The Health Board has tendered for the completion of water risk assessments, however the award of the contract was delayed due to the fact that following assessment the preferred bidder was more expensive. A paper detailing why the Committee felt the contract should be awarded to the preferred bidder was provided, following which we sought clarification from the companies about aspects of their tenders. However the advice from Procurement was that we could not appoint the preferred bidder as we needed greater clarity on the criteria for the award. We have redrafted the specification and this has gone through the tendering process again and we have re-shortlisted and the tender assessment is scheduled for the 24th September.</p> <p><b>Recommendation 12: From previous report.</b> A Service Level Agreement / Contract for Water Testing should be appropriately concluded.</p> <p><b>Compete:</b> Arrangements have been confirmed with Carmarthen PHLS to undertake the legionella testing and are currently out to tender for the collection of samples.</p>			
<p><b>Specific Action Required</b> <i>(please choose one only)</i></p>	<p><b>Information</b></p>	<p><b>Discussion</b></p>	<p><b>Assurance</b></p>	<p><b>Approval</b></p>
<p><b>Recommendations</b></p>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE/Endorse</b></li> </ul> <p>Items for information will not be allocated time for consideration within the Board/Committee meeting.</p>			

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> <i>(please choose)</i>	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>	
<b>Health and Care Standards</b>		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
Water management is covered by the health and safety executives L8 approved code of practice and is a statutory requirement ensuring we have safe water systems is of paramount importance.		
<b>Financial Implications</b>		
Changes in legislation mean there is a greater requirement to test and monitor water systems. The Department has highlighted the fact that it does not have sufficient staff to undertake all the checks in accordance with the new guidance however this has been placed on our risk register and discussions are ongoing with the director to try to secure additional funding to support water management within the health board.		
<b>Legal Implications (including equality and diversity assessment)</b>		
There is a legal requirement to ensure we have effective water management systems in place. The health board is aware there is room for improvement and is working to ensure it has effective systems in place.		
<b>Staffing Implications</b>		
A separate paper is being developed by the department reference the staffing requirements for the department moving forward.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
The provision of safe water supplies is fundamental in the prevention of illness in patients and staff alike.		
<b>Report History</b>		
<b>Appendices</b>		