

## Swansea Bay University Health Board

### Unconfirmed

## Minutes of the Meeting of the Health and Safety Committee 5<sup>th</sup> July 2022 via Microsoft Teams

### Present

Maggie Berry	Independent Member (in the chair)
Tom Crick	Independent Member
Jackie Davies	Independent Member

### In Attendance

Mark Parsons	Assistant Director of Health and Safety
Des Keighan	Assistant Director of Operations - Estates
Hazel Lloyd	Acting Director of Corporate Governance
Darren Griffiths	Director of Finance and Performance
Joanne Jones	Head of Support Services
Jonathan Jones	NWSSP (observing)
Leah Joseph	Corporate Governance Manager

Minute No.		Action
50/22	<b>WELCOME / INTRODUCTORY REMARKS AND APOLOGIES</b>	
	The chair welcomed everyone to the meeting. Apologies for absence were received from Debbie Eyitayo, Director of Workforce and OD.	
51/22	<b>DECLARATION OF INTERESTS</b>	
	There were no declarations of interest.	
52/22	<b>MINUTES OF THE PREVIOUS MEETING</b>	
	The minutes of the meetings held on 5 <sup>th</sup> April 2022 were <b>received</b> and <b>confirmed</b> as a true and accurate record subject to the following amendments: <ul style="list-style-type: none"> <li>i. <u>27/22 Service Group Highlight Report: Neath Port Talbot and Singleton Service group</u>  '<i>Physical</i> personal equipment' be changed to '<i>personal</i> protective</li> </ul>	

	<p>equipment’.</p> <p>ii. <u>31/22 Service Group Highlight Report: Morryston Hospital</u></p> <p>‘The Health Board received Welsh Government funding to replace the corridor flooring on all floors <i>at the Morryston site.</i>’</p> <p>To</p> <p>‘The Health Board received Welsh Government funding to replace the corridor flooring on all floors <i>at various sites.</i>’</p> <p>iii. <u>36/22 COVID-19 Health and Safety issues</u></p> <p>‘HSE carried out visits and a notice of <i>charge</i> was received.’</p> <p>To</p> <p>‘HSE carried out visits and a notice of <i>contravention</i> was received’.</p>	
<b>53/22</b>	<b>MATTERS ARISING</b>	
	<p>i. <u>Caswell Clinic Alarm and CCTV Systems</u></p> <p>Mark Parsons advised that the CCTV risk that was previously closed needed to be reopened and placed back onto the action log as a risk remained in place surrounding the CCTV system. He advised that the alarm system business case requires further work and documentation was being updated to reflect that the CCTV upgrade works are required as full coverage of car parks is not included. CCTV will remain on Morryston Hospital’s risk register. The personal safety alarm original quote had expired and a new quote was being obtained prior to progressing and approval.</p> <p>Jackie Davies queried whether the CCTV systems were recording footage. Mark Parsons confirmed he would check and confirm to Jackie Davies outside of the meeting.</p>	<p><b>DG</b></p> <p><b>MP</b></p>
<b>54/22</b>	i. <b>ACTION LOG</b>	
	<p>The action log was <b>received</b>.</p> <p><u>22/21 and 79/21 Face-to-face training for Executives and Independent Members for training on institution of occupational safety and health (IOSH) and Health and Safety Infrastructure training</u></p> <p>Mark Parsons advised that training had been arranged for 14<sup>th</sup> September 2022 and 16<sup>th</sup> September 2022. Calendar invites have been sent out and an external facilitator will complete the training on both</p>	

	<p>days. Hazel Lloyd advised that Service Group Directors had been included in the invitations.</p> <p>ii. <u>13/22 Site Responsibility</u></p> <p>Mark Parsons advised that he had received an update from Mental Health and Learning Disabilities (MHL) Service and a plan have been agreed with colleagues from Primary and Community Therapies Service. There was an expectation that the plans would be approved by October's Health and Safety Committee.</p> <p>iii. <u>38/22 Smoking Legislation</u></p> <p>Mark Parsons contacted Local Authorities last week via email and was awaiting a response surrounding Local Authority enforcement of smoking legislation.</p>	
<b>55/22</b>	<b>HEALTH AND SAFETY WORK PROGRAMME</b>	
<b>Resolved:</b>	The Health and Safety Committee work programme was <b>received</b> and <b>noted</b> .	
<b>56/22</b>	<b>SERVICE GROUP HIGHLIGHT REPORT: FACILITIES AND HOTEL SERVICES HIGHLIGHT REPORT</b>	
	<p>The facilities and hotel services highlight report from a health and safety perspective was <b>received</b>.</p> <p>In introducing the report, Joanne Jones highlighted the following points:</p> <ul style="list-style-type: none"> <li>– There were five key health and safety issues affecting support services: <ul style="list-style-type: none"> <li>o Roof above Morriston Hospital catering department – Issues have now been resolved following assistance from the estates department, and the roof is no longer leaking.</li> <li>o Poor response to fire and intruder alarms – This remains an ongoing risk for unmanned buildings and responsibility of buildings out of hours was important. Work remains ongoing.</li> <li>o Review of Health Board security arrangements due to car bomb attack in Liverpool.</li> <li>o Review of security services on the Singleton Hospital site - A review has taken place and the temporary security service ceased on 31<sup>st</sup> May 2022.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>o Issues that arose out of the deep dives' requested by the Health and Safety Operational Group - The deep dives if completed properly provide an opportunity to reflect on an important health and safety topic.</li> <li>- Personal Appraisal Development Review (PADR) performance has increased from 20.85% to 42% and group PADR's were ongoing to increase compliance rates;</li> <li>- The statutory and mandatory training compliance rate has increased from 64% to 77% in comparison to last year;</li> <li>- Sickness rate was 11.98% which is too high and above the Welsh Government average;</li> <li>- There are eight health and safety risks and actions are being considered to mitigate risk. Current issues for 2022/23 were included in the report for noting.</li> </ul> <p>In discussing the item, the following points were raised:</p> <p>Jackie Davies acknowledged the progress made in statutory and mandatory performance and PADR compliance.</p> <p>Mark Parsons queried whether CCTV works in the emergency department had been clarified with the capital team. Joanne Jones advised that emergency works were completed due to the environmental challenges; however a five year plan was in place to manage the remainder of the works.</p> <p>Darren Griffiths welcomed feedback following group PADR's as if successful it could be rolled out across areas within the Health Board. Joanne Jones advised that the roll-out was going well, however staff were given the opportunity to raise issues individually if appropriate.</p> <p>Maggie Berry was concerned around the minimised security staffing at the Singleton Hospital site. Joanne Jones advised that staff members are only able to record incidents via Datix. The previous cover was changed to night cover and the review period was from 1<sup>st</sup> April 2022 to 1<sup>st</sup> May 2022, however reminders have been sent to staff to record incidents on Datix. She noted that in May 2022, there were six incidents reported in one month and some incidents did not require security guard presence. There was a need for the service to predict when security presence was required on an ad-hoc basis which would incur additional costs via utilisation of vacancy staff. The team is continuing to liaise with Swansea University and Swansea City Council.</p> <p>Maggie Berry thanked Joanne Jones for the comprehensive report.</p>	
<b>Resolved:</b>	The report be <b>noted</b> .	

57/22	<b>SERVICE GROUP HIGHLIGHT REPORT: ESTATES SERVICES</b>	
	<p>The estates services highlight report from a health and safety perspective was <b>received</b>.</p> <p>In introducing the report, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> <li>– There are a number of workforce issues at Morriston Hospital and the process to appointment a new estates manager remains ongoing;</li> <li>– The department has continued to improve on statutory and mandatory training compliance with overall compliance moving to 70.44% and PADR compliance at 53%. Work is ongoing to improve performance in this area including group PADR's;</li> <li>– In March the overall sickness level was 11.48%. 4.81% for long-term sickness and 6.78% for short term sickness. Action plans are in place for the long term sickness cases and concluding some of these will reduce long term sickness figures;</li> <li>– The Medical Gas Committee has set up a task and finish group to review and update the Medical Gas Pipeline System Operational Policy and procedures. The first draft is being prepared for the next meeting;</li> <li>– The Health Board has commissioned the completion of a review of its fire compartmentation on the Morriston Hospital and Singleton Hospital sites, and it is intended that the work will then be used as a specification to commission repairs on fire compartmentation;</li> <li>– The Health Board has been issued with the draft Water Management Risk Assessment, which is now being reviewed for accuracy. From this Swansea Bay University Health Board (SBUHB) will develop an action plan to address the high and significant risks identified;</li> <li>– SBUHB's Water Management Group has been refreshed under the chair of the Director of Performance and Finance. The meeting scheduled 1<sup>st</sup> July 2022 had been postponed;</li> <li>– SBUHB is reforming the Security Management Group to act as a focal point for security management issues across the Health Board. The group is proposed to be a sub-group of the Health and Safety Operational Group. The Director of Performance and Finance and written to the South Wales Police for their nominated person to attend the meetings and the process remains ongoing;</li> <li>– There have been issues for departments trying to recruit into</li> </ul>	

	<p>vacancies and this was mainly due to salaries offered by the Health Board are lower than market rates. He is working with the Director of Performance and Finance to develop new roles within the department.</p> <p>In discussing the item, the following points were raised:</p> <p>Jackie Davies was concerned by the comments relating to difficulties to fill vacancies due to pay as the agenda for change dictates the salaries within SBUHB. Des Keighan advise that multi-skilled roles were being reviewed which would be new roles for the Health Board, but noted that the recent number of candidates for the officer roles were lower than previous years.</p> <p>Mark Parsons observed that in future it would be helpful to have competency included within the training figures, and noted that multi-skilled roles have been previously used and proved successful within NHS England. Des Keighan advised that SBUHB was engaging Gower College for multi-skilling; however authorised person roles remained a concern as a band five was unable to act as authorised person which was problematic.</p> <p>Mark Parsons queried whether succession planning was ongoing for staff who were due to retire within the next few years, and stated that long-term planning was important. Des Keighan advised that there were a few members of staff who were due to retire shortly and there was no robust plan in place. He noted that training had been offered to internal members of staff as part of the succession plan; however the internal talent pool had been exhausted. Darren Griffiths advised committee members that SBUHB was not just out of step with the industry, but to some extent other Health Boards too and Des Keighan’s work was critical in this area. Mark Parsons stated that he was happy to support the ongoing work. Maggie Berry suggested that the issues be referred to Workforce and OD Committee to discuss what other Health Boards were doing around proactive recruitment and retention and competitive salaries in the private sector.</p> <p>Maggie Berry queried the timeframe for the medical gas training package to support designated nursing and medical officers, and designated porters. Des Keighan advised that the Head of Health and Safety had led the development of the package which had been adopted on an all-Wales basis, and training was being rolled out to colleagues.</p>	<b>MB</b>
<b>Resolved:</b>	<ul style="list-style-type: none"> <li>– Issues around competitive salaries in the public sector and what other Health Boards were doing around proactive recruitment and retention be referred to Workforce and OD In-Committee.</li> <li>– The report was <b>noted</b>.</li> </ul>	<b>MB</b>

58/22	<b>HEALTH AND SAFETY RISK REGISTER</b>	
	<p>A report providing an update on the Health and Safety risk register was <b>received</b>.</p> <p>In introducing the report, Hazel Lloyd highlighted the following points:</p> <ul style="list-style-type: none"> <li>– The Health Board Risk Register (HBRR) was last presented to the Board in March 2022, and since then risks have been subject to executive review and update, and revised HBRR was received by Management Board in June 2022;</li> <li>– The risks currently assigned to the Health and Safety Committee are health and safety infrastructure; fire safety compliance; and environment of premises;</li> <li>– Two risks are assigned to the Health and Safety Committee for oversight: storage of paper records and partnership working.</li> </ul> <p>In discussing the report, the following points were raised:</p> <p>Mark Parsons queried whether the risk related to partnership working could be reviewed as personal protective equipment issues had not been raised for some time. Hazel Lloyd advised that she could ask the risk owner to review the risk.</p> <p>Mark Parsons highlighted that the primary care and therapies service governance arrangements had completed in May with a new terms of reference and agenda template agreed, and that an internal audit was being undertaken on this work.</p> <p>Mark Parsons advised that in relation to risk numbered 64, the timescale that applications remained open had been extended to increase returns of applications.</p> <p>Mark Parsons advised that the fire risk had a completion date of February 2024, and this was in conjunction with the expected end date of cladding works at Singleton Hospital. He noted that it would be difficult to complete the fire compartmentation work within the current timescale. Hazel Lloyd agreed to discuss the matter outside of the meeting to extend the timescale passed October 2022. Darren Griffiths advised that the team were at the start of the journey for trajectory of improvement to reduce the risks from 20, and workforce challenges remained to enable the risks to be decreased.</p>	
<b>Resolved:</b>	Updates to the Health Board Risk Register risks assigned to the Committee were <b>noted</b> .	



59/22	<b>RECENT INSPECTIONS AND AUDITS</b>	
	<p>A report on recent inspections and audits was <b>received</b>.</p> <p>In introducing the update, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> <li>– No formal inspections have been carried out from 2021 to present day, and the majority of actions detailed with the action plans have been completed;</li> <li>– Estates assurance is now scored as ‘reasonable assurance’ which is positive and the team are working with internal audit on their review of the primary care and therapies service.</li> </ul> <p>In discussing the item, the following points were raised:</p> <p>Jackie Davies highlighted that issues that had arisen from risks could be linked to the areas that remain under resourced. Mark Parsons advised that work was ongoing for two health and safety advisors at band six level, with one role already out to advert. He noted that there was a review underway to look at dual roles to incorporate both fire and health and safety. Darren Griffiths highlighted that four additional people would be working in the department once appointments made, and modernisation of roles was important for future recruitment.</p>	
<b>Resolved:</b>	The report be <b>noted</b> .	
60/22	<b>PROGRESS REPORT ON THE SIX FACET REVIEW OF BACKLOG MAINTENANCE</b>	
	<p>A progress report on the six facet review of backlog maintenance was <b>received</b>.</p> <p>In introducing the update, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> <li>– The bulk of reports have been received, with two reports outstanding;</li> <li>– Long-term solutions surrounding issues at Morrison Hospital site are under review for planned decanting programme to assist the estates update;</li> <li>– A deep dive on service utilisation was ongoing to highlight how space was being used within primary and community and therapies service sites.</li> </ul> <p>In discussing the report, the following points were raised:</p> <p>Maggie Berry queried the report mechanism in place for good</p>	



	<p>governance. Des Keighan advised that reports were taken through an estates utilisation group for scrutiny. Maggie Berry requested that an update report was brought back to October's Health and Safety Committee with more detail surrounding progress.</p> <p>Mark Parsons detailed that it was positive SBUHB had a six facet survey, and the capital programme was in place to help increase compliance. He highlighted that SBUHB needed to be mindful that the three centres of excellence implementation needed to be completed prior to space being allocated as it could be subject to change.</p> <p>Des Keighan advised that a 20% rolling programme per year was in place which would continue as an annual exercise with costs being updated per year.</p>	<b>DK</b>
<b>Resolved</b>	<ul style="list-style-type: none"> <li>– Progress report on the six facet review of backlog maintenance be brought to October's Health and Safety Committee.</li> <li>– The report was <b>noted</b>.</li> </ul>	<b>DK</b>
<b>61/22</b>	<b>TENDER FOR WATER RISK ASSESSMENTS</b>	
	<p>A report the tender for water risk assessments was <b>received</b>.</p> <p>In introducing the update, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> <li>– Audits have been undertaken by an independent assessor which provides detailed analysis of the risks associated with water management, from which the Health Board is able to identify and address the high risk issues;</li> <li>– The risk assessments have been taking place since December 2021 and the Health Board is in receipt of draft reports for each of its properties which are being reviewed for accuracy;</li> <li>– The water safety plan is a live document and this is being reviewed by the auditors for completeness;</li> <li>– The costs of the review was £55k plus VAT;</li> <li>– The water risk assessments action plan is due to be brought back to October's Health and Safety Committee.</li> </ul>	<b>DK</b>
<b>Resolved:</b>	<ul style="list-style-type: none"> <li>– Water risk assessments action plan be taken through October's Health and Safety Committee.</li> <li>– The report be <b>noted</b>.</li> </ul>	<b>DK</b>

62/22	<b>FIRE DOOR COMPLIANCE REPORT</b>	
	<p>An update report on fire door compliance was <b>received</b>.</p> <p>In introducing the update, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> <li>– There is a legal requirement to inspect fire doors every six months, with programmes in place for each of the sites from which any defects are identified and updated on to the respective systems operated by the estates function. Risk assessments are 100%, with estates completing twice yearly checks and fire officers also completing checks;</li> <li>– Awaiting confirmation of fire compartmentation survey to confirm location of fire compartmentation lines including fire doors. Once reviewed, this will enable a capital programme can be developed;</li> <li>– Next steps included fire compartmentation to establish actions and works required and to update the fire door inspection schedule based on the updated fire compartmentation drawings.</li> </ul> <p>In discussing the item, the following points were raised:</p> <p>Des Keighan advised that one of the officers was targeting collation of the work and Des Keighan would discuss target areas with Mark Parsons outside of the committee meeting.</p> <p>Maggie Berry commented that she had good assurance from the report.</p>	
<b>Resolved:</b>	The report be <b>noted</b> .	
63/22	<b>HEALTH AND SAFETY COMMITTEE TERMS OF REFERENCE</b>	
	<p>The Health and Safety Committee terms of reference was <b>received</b>.</p> <p>In discussing the item, Mark Parsons suggested that <i>'field hospital'</i> be removed from the document in light of the premises being decommissioned. Hazel Lloyd agreed that the words be removed from the terms of reference.</p>	
<b>Resolved:</b>	The terms of reference be <b>approved</b> subject to the removal of <i>'field hospital'</i> .	
64/22	<b>HEALTH AND SAFETY OPERATIONAL GROUP KEY ISSUES REPORT</b>	

A key issues report on Health and Safety Operational Group was **received**.

In introducing the report, Mark Parsons highlighted the following points:

- Neath Port Talbot and Singleton Service Group statutory and mandatory figures were good against the Welsh Government target of 85% and systems were in place to increase compliance further. There has been an increase in violence and aggression incidents overall at the site;
- Issues remain similar compared to the last report to committee. The statutory and mandatory training compliance rates were all below the Welsh Government target of 85%;
- There was no report received from primary community and therapies service;
- There were 238 report incidents to staff members within the mental health and learning disabilities service group. The Caswell Clinic risk surrounding alarm and CCTV systems remain open, however the Llynfi training facility risks have been closed;
- New ways of working are being introduced at headquarters, with a blended approach and directorates/teams managing their dedicated areas;
- A task and finish group was in place for health and safety alerts, and no alerts were received in June;
- The high voltage policy and the new and expectant mother's procedure policy had not been embedded for information, so he undertook to circulate the documents outside of the meeting.

In discussing the item, the following points were raised:

Hazel Lloyd suggested that a chair's action is taken for the policies and for independent members to report back by the end of July with comments.

Maggie Berry felt positive that areas were learning from each other via deep dives, but queried the home working assessment deep dive timescale. Mark Parsons advised that the deep dive was due to be discussed at the next health and safety operational group for timescales.

Maggie Berry found the report a good overview and interesting. She queried further detail around the MHLTD severe incidents. Mark Parsons undertook to confirm the detail to Maggie Berry outside of the committee meeting. Maggie Berry suggested that in future, the report includes an anonymised summary of the severe harm incidents.

MP

HL

DG

<b>Resolved:</b>	<ul style="list-style-type: none"> <li>– The high voltage policy and the new and expectant mother’s procedure policy be circulated to committee members with a deadline. A Chair’s Action process be applied for the policies.</li> <li>– Further detail surrounding the incidents that caused severe harm to staff in MHLD Service Group.</li> <li>– The report was <b>noted</b>.</li> </ul>	<b>MP/ HL</b>  <b>DG</b>
<b>65/22</b>	<b>ITEMS TO REFER TO OTHER COMMITTEES</b>	
<b>Resolved:</b>	<p>i. <u>Referral to Workforce and OD Committee (57/22)</u></p> <p>Issues around competitive salaries in the public sector and what other Health Boards were doing around proactive recruitment and retention be referred to Workforce and OD In-Committee.</p>	
<b>66/22</b>	<b>ANY OTHER BUSINESS</b>	
<b>Resolved:</b>	There were no items raised and the meeting was closed.	
<b>67/22</b>	<b>DATE OF NEXT COMMITTEE MEETING</b>	
	The next scheduled meeting is 4 <sup>th</sup> October 2022.	