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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	04 October 2022	Agenda Item	3.1
Report Title	Health & Safety Risk Register (HBRR) Report		
Report Author	Neil Thomas, Assistant Head of Risk & Assurance		
Report Sponsor	Hazel Lloyd, Interim Director of Corporate Governance		
Presented by	Neil Thomas, Assistant Head of Risk & Assurance		
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. The report also includes an analysis of the operational risks associated with the Health & Safety Committee as recorded within service group & directorate risk registers.		
Key Issues	<ul style="list-style-type: none"> • The Health Board Risk Register extract was last presented to the Committee in July 2022. Since then risks have been subject to Executive review and update. • No new risks have been added and there has been no change to the levels of risk assigned to the Health & Safety Committee. Three risks have been assigned to the Health & Safety Committee for oversight: <ul style="list-style-type: none"> ○ 13 – Environment of Premises ○ 41 – Fire Safety Compliance ○ 64 – Health & Safety infrastructure • Additionally, there are two risks that are assigned to other Committees for oversight, but which are presented to this Committee for information: <ul style="list-style-type: none"> ○ 36 – Storage of Paper Records ○ 76 – Partnership Working 		
Specific Action Required (please choose one only)	Information	Discussion	Assurance
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE the update on Health Board Risk Register (HBRR) risks assigned to the Health & Safety Committee and actions taken to mitigate them. • CONSIDER any additional information required to support the Committee’s scrutiny of risks and mitigations, and its provision of assurance to the Board regarding the same. 		

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. The report also includes an analysis of the operational risks associated with the Health & Safety Committee recorded within service group & directorate risk registers.

2. BACKGROUND

2.1 Risk Management Framework

The Audit Committee is responsible for reviewing the establishment and maintenance of an effective system of risk management and providing assurance to 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. The intention is that committee work programmes are aligned so that progress made to address key risks is reviewed in depth. Regular HBRR update reports are submitted to the Board and the committees of the Board to support this.

Executive Directors are responsible for managing risk within their area of responsibility. The Management Board, chaired by the Chief Executive, oversees the overall operation of the risk management framework and the management of risks within the health board risk register.

Risk Register management is supported by a Risk Management Group (RMG) which meets quarterly and 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 last met in June 2022.

Additionally, a Risk Scrutiny Panel is responsible for ensuring there is an appropriate and robust risk management system in place and working throughout the organisation. It is responsible for moderating new risks and risks escalated to the Health Board Risk Register (HBRR) and Board Assurance Framework (BAF) and recommending and advising the Management Board on the escalation and de-escalation of risks. The Panel last met in August 2022.

2.2 Risk Appetite

Risk appetite and tolerance provide clarification on the level of risk the Board is prepared to accept.

Prior to the Covid-19 Pandemic, the Board's risk appetite required that 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 level 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. In accordance with Board wishes, a more nuanced approach to the expression of risk appetite is being developed.

2.3 Health Board Risk Register (HBRR)

The Health Board Risk Register (HBRR) is intended to summarise the greatest organisational 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.

3. MANAGEMENT OF HEALTH & SAFETY RISKS

3.1 Action to Update the HBRR

Health Board risk register entries are circulated to lead Executive Directors monthly for review and updated where required. A consolidated, updated register is circulated to the Executive Team for agreement and final version issued. The Final July 2022 HBRR provides the data on which this report is based – the relevant risk extracts are attached at **Appendix 1**. Key changes made in the most recent monthly update are highlighted in red font.

3.2 HBRR Health & Safety Risks

Three risks have been assigned to the Health & Safety Committee for oversight. Additionally, there are two risks that are assigned to other Committees for oversight, but which are presented to this Committee for information.

No new risks have been added and there has been no change to the levels of risk assigned to the Health & Safety Committee.

The tables below highlight management updates made to these risks following the last meeting:

Risk 13 (Datix ref 841)	Exec Lead	Current Rating	Target Rating	Change
Environment of Premises Risk relates to compliance in terms of appropriate accommodation in line with Health and Safety Regulations.	Director of Finance & Performance	12	12	→
Update Actions have been refreshed as follows: <ul style="list-style-type: none"> • Six facet survey findings will be presented to estates utilisation group (31/08/22). • Estates strategy has been developed and a draft will be received at the estates utilisation group (31/08/22). • Members of the estates, health and safety and capital planning team will meet in September 2022 to bring together estates risks, the 6 facet survey and the strategy to develop a prioritised plan of action for the estate (31/10/2022). 				

Risk 41 (Datix ref 1567)	Exec Lead	Current Rating	Target Rating	Change
<p><u>Fire Safety Regulation Compliance</u> 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 with fire safety regulations.</p>	Director of Finance & Performance	16	9	→
<p>Update The risk remains unchanged, but target dates refreshed:</p> <ul style="list-style-type: none"> • Change in fire evacuation plans and alarm and detection cause and effect (01/11/2023) • Replacing the existing cladding and insulation with alternative specifications and inserting 30-minute fire cavity barriers where appropriate (28/02/2024) 				

Risk 64 (Datix ref 2159)	Exec Lead	Current Rating	Target Rating	Change
<p><u>Health and Safety Infrastructure</u> Insufficient resource and capacity of the health, safety and fire function to maintain legislative and regulatory compliance for the workforce and for the sites across SBUHB.</p>	Director of Finance & Performance	25	12	→
<p>Update Health and safety structure review to be presented to the H&S Committee when funding has been agreed. The Target date has been adjusted to reflect this (30/09/2022).</p> <p>Advisors for H&S and Manual handling going the TRAC (electronic recruitment system) appointment process, with appointees expected to commence in Q3/4 dependant on notice period. As soon as appointees come in to post the risk will be adjusted.</p>				

The Committee should 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.

Additionally, there are two risks allocated for scrutiny to other Committees, but included within the risk register extract for information of the Health & Safety Committee due to the relevance of elements of the risks:

HBRR Ref	Risk Detail	Current Risk Score	Assuring Committee
36	<p>Paper Record Storage</p> <p>Lack of a single electronic record means there is greater reliance on the provision of the paper record. If we fail to provide adequate storage facilities for paper records, then this will impact on the availability of patient records at the point of care. Quality of the paper record may also be reduced if there is poor records management in some wards. There is an increased fire risk where medical records are stored outside of the medical record libraries.</p>	16	Audit
76	<p>Partnership Working</p> <p>There are some remaining tensions between the Health Board and some trade union partners within SBUHB particularly in response to the supply of PPE which has the potential to create unrest in the workforce and hamper an effective response to COVID-19.</p> <p><i>The Director of Workforce & OD has confirmed that this is no longer a risk and approved is closure within the next version of the HBRR.</i></p>	10	W&OD

3.2 Operational Health & Safety Risks

Operational risks relating to health & safety within Service Groups and Directorates should be recorded within their operational risk registers. Services can escalate health & safety risks for consideration for inclusion on the HBRR via the Risk Scrutiny Panel, Risk Management Group or directly via discussion with Executive Directors.

The tables below summarise the operational risks by Service Group / Directorate and risk category.

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

Row Labels	COSHH	Environment	Falls	Fire	Legislation	Manual Handling	Safeguarding	Security	Sharps	Staff Shortages	V&A and Lone Working	Violence and Aggression	Grand Total
Mental Health and Learning Disabilities			1	1				1				4	7
Morrison Hospital Service Group	4	2	1	1		1			2	1	1	4	17
Neath Port Talbot & Singleton	2	4	1	5	1	5	1				1	2	22
Primary Community & Therapies				1					1			2	4
EMRTS						1							1
Nursing & Patient Experience				1									1
Operations (previously Planning)		1		1	1			1				1	5
Grand Total	6	7	3	10	2	7	1	2	3	1	2	13	57

There is a small increase in the net number of risks open since the previous report (56 were reported in July 2022).

The top 5 health & safety risk themes remain the same as follows:

Figure 2 – Top 5 Health & Safety Risk Categories¹

H&S Risk Category	Number of Risks
Violence & Aggression	15
Fire	10
Environment	7
Manual Handling	7
COSHH	6

4. GOVERNANCE & RISK

4.1 Risk Appetite & Tolerance Levels

As noted earlier, the current risk appetite, as endorsed by the Board in November 2021 indicates that risks assessed at a threshold score of 20 or above should be addressed as a priority, and there is a low tolerance to risks with a high impact on the quality and safety of staff and patient care.

Following discussion at Board, further work has been done to develop a more nuanced approach to risk appetite and proposals will be subject to Board consideration shortly.

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 update on Health Board Risk Register (HBRR) risks assigned to the Health & Safety Committee and actions taken to mitigate them.
- **CONSIDER** any additional information required to support the Committee's scrutiny of risks and mitigations, and its provision of assurance to the Board regarding the same.

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 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	