

Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	September 2	019	Agenda Item	2.1					
Report Title	Exception Report for ABMU Health and Safety Risk Register								
Report Author	Dr Laurie Hig	gs, Head of Hea	Ith and Safety						
Report Sponsor	Gareth Howe	lls, Director of N	ursing						
Presented by	Gareth Howe	lls, Director of N	ursing						
Freedom of Information	Open								
Purpose of the Report	This paper informs the Health Board of progress and other matters relating to the management of key Health, Safety and fire risks								
Key Issues		progress of key	ABMU Health, S	Safety and					
Specific Action	Information	Discussion	Assurance	Approval					
Required		×							
(please ✓ one only)									
Recommendations	Members are asked to Receive								

2. BACKGROUND

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 Executive (HSE) inspection of the organisation. Further risks are recorded aligned to the reorganisation of the Health Board.

3. GOVERNANCE AND RISK ISSUES

Governance an	d Assura	ance	;							
Link to corporate objectives	Promotin and enab healthie communit	ling er	exc pa outc expe and	vering ellent tient comes, erience access			Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
	✓		~		~		✓			A 1
Link to Health	Staying Healthy	Saf Car		Effectiv Care	/e	Dignified Care	Timely Care	Indivi Care	dual	Staff and Resources
and Care			e	Cale		Cale	Cale	Care		Resources
Standards	and Deff		-							
Quality, Safety			-							
Improved safety	for staff,	pati	ents,	visitors	and	a contracto	rs.			
Financial Implic	ations									
Failure to effective		200	hoalt	h and a	ofot	hy rick con	hava sia	nifica	nt loo	al moral
and financial imp										ai, morai
management of										of logal
action both statu						ennises and	i ile poi	entia	1154 0	Ji leyal
	nory and		Jointo	ensalio	11.					
Legal Implication	one (incl	udin		uality	and	divorsity	accoccr	nont)		
Potential breach	•						1335331	nenty		
		San	lanu	Salety						
Staffing Implica	ations									
Increased sickne		bse	nce							
Long Term Imp				na the	imn	act of the	Well-be	eina o	f Fut	ure
Generations (W				ing ino	P			jing c	11 41	
None										
	story None									
Report History	N	one								

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 1	 Health and Safety Resources Insufficient resources to support Units etc. to discharge their duties including training, audit etc. Resources to manage HSE and Fire Safety enforcement duties insufficient Severely limited availability of staff with specific competencies to meet demand e.g. COSHH Staff retirements (imminent and proposed) and other staff matters will further impact on resources with time lag for replacement e.g. Violence and Aggression lead Transfer of some of the limited resource to Cwm Taff Health Board (TUPE) 	15	20		₽	December 2019	 HSE work further affecting limited capacity Clerical staff taking on additional responsibilities and being developed to support departmental work e.g. incident review and case management Increase demand to support units further increasing demand on resources

Swansea Bay Health Board Health and Safety Risk Register Review September 2019

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 2	 Health and Safety Executive (HSE) Improvement notices 8 improvement notices regarding manual handling and violence and aggression across a number of areas 1 notice regarding the consistency management of incident reporting and learning lessons Additional notice issued in June 2019 for Tonna Hospital regarding lone working and traffic management HSE review in September 2019 	16	16	-		Sept 2019	 HSE Enforcement group has developed action plan Regular reporting of progress to SWUHB Board H&S Comm. and Operational H&S Group H&S Staff working closely with units to update risk assessments, training needs analysis, training delivery etc. Revised governance procedure issued across Health Board Investment approved for Tonna Regular incident reports provided to all levels of the Health Board

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 4	 <u>RIDDOR (Reporting of Injuries, diseases and Dangerous Occurrence Regulations)</u> Some incidents occurring in Units not reported to HSE within legal timescales Poor investigation and learning lessons (across all incidents) 	16	12	₽		Mar 2020	 H&S Staff responsible for reporting to HSE but reliant on timely reporting by Units e.g. staff absence RIDDOR procedure issued to Units and discussed in Unit H&S Groups Governance arrangements reviewed and Regular RIDDOR reports continue to be provided to Operational H&S Groups and Unit H&S Groups Clerical Unit in H&S assisting in the regular monitoring of incidents Updated incident reporting policy being reviewed

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 5	 Cladding at Singleton Hospital Current cladding does not meet fire safety standards Potential risk of spread of fire across south face of building 	15	15			Dec 2019	 Regular review by HSE working group Cladding Side panels being removed currently Awaiting funding for full removal of south facing cladding Ward specific fire safety procedures implemented Significant fire in Ward 12 in April 2019 tested procedures and generally satisfactory but lessons learnt. Reduction in number of active Fire Wardens in wards identified and new training programme being instigated

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 6	 Management of Alerts, roles and responsibilities, governance Assurance systems for action taken need to be improved with closure of action taken and better monitoring 	8	6	₽		Sept 2019	 Governance report for Medical Device Alerts produced for all operational Health and Safety Groups Requirement to review include in Unit governance arrangements

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 7	 Effective Arrangements for the Management of COSHH (Control of Substances Hazardous to Health) Limited assurance report from Internal Audit in areas of consistency of risk assessment processes, monitoring etc. 	16	12	₽	-	Dec 2019	 Risk rating reviewed Updated COSHH procedure developed No central resource to support units, train staff etc.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 8	 Effective Arrangements for the Radon Gas Sampling) No resources for programme of monitoring of Radon gas exposure risk across Health Board 	6	6	-	-	Dec 2019	 Procedure developed and costings available to implement full Health board programme Confirm funding

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 9	 Lone Workers Review the effectiveness of lone worker arrangements Compliance with HSE inspection of Health Board 	12	12	-	-	Dec 2019	 Updated lone worker policy submitted to Operations Health and Safety group for approval (includes updated risk assessment preform) Review of lone worker protection arrangements being undertaken in Primary Care and Community Unit Review of lone worker arrangements in Tonna hospital implemented Review of lone worker arrangements for porter staff in Singleton implemented.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S	Management of Display Screen Equipment (VDU) • Arrangements in place for risk assessment	6	6			Jun 2019	No progress.
10	 No training system in place 			F			

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 11	 Management of Health and Safety in Units Inconsistent approach in Units regarding management of and monitoring of health and safety performance Some committees inactive or with poor management representation 	16	15	➡	1	Sept 2019	 Update governance structures identified All Service Delivery Units now have an active Health and Safety group but will need to align to new governance procedure.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 12	 Health and Safety Internal Audit Report Reasonable assurance gained in December 2018 review 	8	8	-	1	Sept 2019	 Update governance structures identified All Service Delivery Units now have an active Health and Safety group but will need to align to new governance procedure.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 13	 Fire Safety Limited assurance report for fire safety primarily concerned regarding the monitoring and control of risk arising from Fire risk assessments 	16	16	•	-	Sept 2019	 Consideration is being made to using the DATIX risk module to monitor compliance. This wil rquire the agreement of the DATIX User group.

Risk ref.	Description of Risk Identified	Initial Score	Current Score	Trend	Controls	Target	Progress at September 2019
H&S 14	 Hoist and other equipment falling out of manufacturer's support As equipment becomes older spare parts not available for repair etc. 	12	6	₽	1	Sept 2019	 £700K Replacement programme completed in 2018-19 Further review of manual handling equipment inventory required e.g. bath hoists for possible inclusion on 2019-20 capital programme