

Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board

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Meeting Date	02 Septembe	r 2019	Agenda It	em 2	2.3	
Report Title	water manage	ement assu	rance update			
Report Author	Des Keighan assistant director of operations – estates					
Report Sponsor	Chris white chief operating officer					
Presented by	Des Keighan assistant director of operations – estates					
Freedom of	Open					
Information						
Purpose of the Report	Following Internal Audit's review of water management within the health board. This paper sets out to give assurance as to the measures in place the steps that been taken to address the issues identified within the review.					
Key Issues	Following Internal Audits review of safe water management within the health board. The report sets out to provide assurance to the Health and Safety committee that progress has been made in addressing these recommendations. The report goes on to flag other areas of concern associated with water management. Within the report it highlighted the following risks by category,					
	Priority	High	Medium	Low		
	At time of Audit	8	5	1		
	Update	4	1	0		
	Detailed below is an update on the progress made on the recommendations that have yet to be closed down <b>Recommendation 5</b> Committees with responsibilities for water safety oversight should: <i>a) ensure that appropriate / periodic advisory support has been</i> <i>obtained from a micro-biologist;</i> Update: a Microbiologist is a named member of the water management group however the					

demands on the availability mean they are not always available to attend.

b) The Water Safety Group should:

*i. meet quarterly in accordance with the Water Safety Policy;* update: Meeting have been scheduled for the financial year ii. *ensure required attendance (particularly by key members) unless a bona fide reason has been provided. Requirements should be reiterated to all members to ensure appropriateness of governance and be monitored and feed into the appraisal process to ensure individual accountability. (O)* update: Every effort is being made to improve attendance but this is still a work in progress.

## **Recommendation 6**

The scope of management reports should be reviewed, including: - achievement of test / re-test targets - achievement of scheduled water related maintenance; - exceptional data (e.g. repeat failures / problematic outlets and tasks); and - hand-over certificates. (D). Update: The format of the report was an agenda item at the last water management group meeting it was agreed to look at what reports are in use in other Health Boards in Wales and these are due to be discussed and hopefully a format agreed at the next water management group scheduled for September.

## **Recommendation 10**

A full review should be undertaken of the ZetaSafe system to: a) ensure accuracy and consistency of data within the ZetaSafe system across sites (e.g. outlets with no data, and unacknowledged results); Update: A review of the Morriston Zeta safe system has been undertaken and is nearing completion. Once complete Zetasafe will implement consistent rules within the soft wear.

b) ensure that all (and only) relevant assets are included within ZetaSafe (including new builds, and removal of disposed assets); and. Update: These will be updated on an ongoing basis noting that this will be an ongoing process.

c) confirm appropriate operation of system coverage and test selection (setting of system parameters etc.) informed by the new infrastructure risk assessments. (D) Update: A review of the Morriston Zetasafe system has been undertaken and is nearing completion. Once complete Zetasafe will implement consistent rules within the software to ensure parameters are set in accordance with water safety plan.

## **Recommendation 11**

Legionella sampling should be completed in accordance with the approved Water Safety Plan and/or risk assessments. produced to determine the testing requirements. (O) Update: The water safety plan has been updated to reflect our desire to move to regular testing for legionella and a new approach for approach was agreed in principle through the water safety group and the water safety plan amended accordingly. However, and still struggling to engage contractors to undertake the testing as PHLS are unable to provide the service.

## Recommendation 12

A service level agreement / contract for water testing should be appropriately concluded. (O) Update: whilst we have now agreed a SLA for general water testing with PHLS this currently only provides for general water testing but with only limited legionella testing.

Overall we are making progress however there are still some areas of concern. As highlighted by internal audits review, attendance at the water safety group is still an area of concern discussions are ongoing with the director of nursing and chief operating officer on how this can be influenced and improved.

## Water Risk Assessments

The health board engage the specialist contractor to undertake the water management risk assessments. Whilst there are completed water risk assessments for all the health boards properties there is concern about the robustness of the reports. The health board are therefore proposing to retender the updating of the water risk assessments.

# Legionella testing

Within the report it was highlighted the need to increase the Legionella testing however, changes in the Welsh health technical memorandum for water safety has increased some of the frequencies of maintenance required on water management systems. The Department has already logged on its risk register the fact that doesn't have sufficient staff to support all this testing.

## Appointment of RP & AP's

Whilst AP and RP's have undertaken water management update training. Some are still waiting for their formal interviews with the Authorising Engineer for Water from Shared Services however this had been delayed due to changes in the operating procedures which had to be agreed at the water management subgroup.

## Drawings

There's a number of areas within the health board that we don't have adequate service drawings in particular the new HVS and CAB at Morriston hospital however this is being pursued by Capital colleagues however, this is subject to the contractual problems the health board has had with regards these developments. Other areas of the Health Board also need

	Updated service drawings however we are trying to identify funding to support this. Water Management Issues: There are a number of sites within the Health Board specifically Morriston and Cefn Coed where we have clear water management issues, due to the lay out, age or use of the site. However, these are being addressed as the Health Board rationalises its estate. The flushing of infrequently used outlets: It was the responsibility of Ward & Department managers to ensure that they ensure that outlets that are infrequently used are flushed on a daily basis. However, we were unable to demonstrate that this was being completed therefor the water management group has agreed that this will be carried out as part of Hotel services cleaning regime on ward areas.				
Specific Action Required	Information	Discussion	Assurance	Appro val	
(please choose one only)					
Recommendations	Members are asked to: • NOTE/ENDORSE <u>Items for information will not be allocated time</u> <u>for consideration within the Board/Committee</u> <u>meeting.</u>				

#### **Governance and Assurance** Supporting better health and wellbeing by actively promoting and Link to empowering people to live well in resilient communities Enabling Partnerships for Improving Health and Wellbeing **Objectives** Co-Production and Health Literacy (please choose) Digitally Enabled Health and Wellbeing Deliver better care through excellent health and care services achieving the outcomes that matter most to people Best Value Outcomes and High Quality Care $\boxtimes$ Partnerships for Care $\square$ **Excellent Staff** $\boxtimes$ **Digitally Enabled Care** Outstanding Research, Innovation, Education and Learning **Health and Care Standards** (please choose) Staying Healthy Safe Care Effective Care **Dignified Care** Timely Care Individual Care Staff and Resources

# **Quality, Safety and Patient Experience**

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.

# **Financial Implications**

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.

# Legal Implications (including equality and diversity assessment)

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.

# **Staffing Implications**

A separate paper is being developed by the department reference the staffing requirements for the department moving forward.

# Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

The provision of safe water supplies is fundamental in the prevention of illness in patients and staff alike

# Report History

Appendices	