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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>02 September 2019</b>	<b>Agenda Item</b>	<b>2.4</b>
<b>Report Title</b>	<b>Health and Safety Improvement Plan 2019-2020 Update</b>		
<b>Report Author</b>	Dr Laurie Higgs, Head of Health and Safety		
<b>Report Sponsor</b>	Gareth Howells, Director of Nursing and Patient Experience		
<b>Presented by</b>	Dr Laurie Higgs, Head of Health and Safety		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide the Committee with an update on progress with the 2019/2020 Health and Safety Improvement Plan.		
<b>Key Issues</b>	<ul style="list-style-type: none"> <li>The new Health and Safety Improvement plan for 2019/20 is presented at <b>Appendix 1</b> and includes actions from the 2018/19 plan, and actions received from regulatory audits.</li> <li>In some areas there is a lack of resource to fully implement the plan</li> </ul>		
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	Members are asked to : <ul style="list-style-type: none"> <li><b>Review</b> the Health and Safety Improvement plan for 2019/20</li> </ul>		

# **HEALTH AND SAFETY IMPROVEMENT PLAN CLOSURE OF 2018-2019 PLAN AND NEW HEALTH AND SAFETY IMPROVEMENT PLAN 2019-2020**

## **1. INTRODUCTION**

The purpose of this report is to provide the Committee with an update on the 2019-20 Health and Safety Improvement plan

## **2. BACKGROUND**

Swansea Bay University Health Board (SBUHB) aspires to continuously improve its Health and Safety performance. Being able to demonstrate this commitment and effectively monitor progress requires a structured Health & Safety Improvement Plan.

For the last three years the health board has developed and implemented an annual Health and Safety (H&S) Improvement Plan. The plan was developed from a number of sources of intelligence and information such as risk assessments, incident and claims management experience, learning lessons from incidents/claims and horizon scanning; the latter include where review of other NHS organisations are made and lessons learnt.

The Health and safety improvement plans include actions identified in the draft NHS Wales health and safety management system which is being developed by the NHS Wales health and safety group which will shortly be approved for use in all Health Boards in Wales.

A key driver within the H&S plans is to set a pathway for improving the management of health, safety and fire. Corporate development such as reviews of policy and improvements in governance and particularly the work of the existing SBUHB Health and Safety committee have been given a high priority.

The responsibility to effectively manage health, safety and fire at unit and other areas such as Estates and Support Services has been recognised in the plans. The principle that the improvement plans would enable sites to self-manage significant elements of their own risk and demonstrate good governance and leadership were considered critical to delivering good health and safety management across the Health Board. Flexibility was given in the plan for Units etc. to develop actions based upon their particular risk profile and priorities.

The Health and Safety Improvement plans were also designed following feedback from Internal Audit reviews and from regulatory inspections to strengthen compliance and to demonstrate improved governance.

## **3. GOVERNANCE AND RISK ISSUES**

Health and Safety Executive (HSE) guidance places a duty on the Health Board to effectively manage health and safety. Recognising weaknesses and developing appropriate actions to address those areas of concern demonstrates good governance.

The new Health and Safety Improvement plan for 2019/20 includes actions from the 2018/19 plan, and actions received from regulatory audits.

The SBUHB Health and Safety plan will use include information held in the SBUHB Health and Safety Risk Profile. This will identify key health and safety issues and for 2019/20 it continues to identify effective management of health and safety as a key risk to be managed. In accordance with the SBUHB Risk Management Strategy, Service Delivery Units will also need to manage risks that are applicable to their areas of control.

Monitoring of the plan and overall SBUHB performance will be based upon a number of indicators including Key Performance Indicators (KPI), thematic reviews, periodic audits etc.

The plan will be regularly monitored by the Health and Safety Committee, the Health and Safety Operational Group and Service Delivery Unit Health and Safety groups.

#### **4. FINANCIAL IMPLICATIONS**

Any financial implications arising from the improvement plan will be considered on an individual basis.

#### **5. RECOMMENDATION**

Members are asked to:

**Review progress** with the Health and Safety Improvement plan for 2019/20

<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 checked="" 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 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 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"/>
<b>Quality, Safety and Patient Experience</b>		
<p>Ensuring the organisation has robust health, safety and 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 &amp; experience of patients receiving care and staff working in the UHB. The plan aims to strengthen and improve quality, safety and patient experience.</p>		
<b>Financial Implications</b>		
<p>Any financial implications arising from the improvement plan will be considered on an individual basis. Failure to effectively manage health and safety can have significant legal, moral and financial implications. These include increased sickness and absence, management of resources, equipment and premises and the potential risk of legal action both statutory and for compensation.</p>		
<b>Legal Implications (including equality and diversity assessment)</b>		
<p>SBUHB is committed to providing and maintaining a safe and healthy work place and to provide suitable resources, information, training and supervision on health and safety to all members of staff, patients Contractors and visitors to comply with the legislative and regulatory framework on health and safety.</p>		
<b>Staffing Implications</b>		
<p>Staff will be briefed on health and safety developments through managerial meetings, staff meetings and health and safety alerts and bulletins.</p>		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
<p>The Act requires the Health Board to think more about the long term, how we work better with people and communities and each other, look to prevent problems and take a more joined up approach with partners. There will be long term risks that will affect both the delivery of services, therefore, it is important that you use these five ways of working (Long Term Thinking, Prevention, Integration, Collaboration and Involvement) and the wellbeing goals identified in the Act in order to frame what risks</p>		

the Health Board may be subject to in the short, medium and long term. This will enable The Health Board to take the necessary steps to ensure risks are well managed now and in the future.

**Report History**




Planning for the Health Board Health and Safety Improvement Plan 2019-20, Health and Safety Committee  
25 April 2019





**Appendices**


Appendix 1 – Health and Safety Improvement Plan 2019-2020



## Update to Swansea Bay University Health Board Health and Safety plan 2019-20

1	Target	To have Health and Safety owned and effectively managed at all levels of the Health Board
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Leadership and Accountability						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.1	<b>HSE Improvement Notices</b> Further to the HSE notices issued in February 2019, review develop and strengthen arrangements for the management of violence and aggression, manual handling and incident reporting	Sept 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Dedicated Health and Safety Improvement Group formed that has developed action plan and is monitoring progress towards compliance</li> <li>Health Board working closely with HSE to have clarity on their expectations and to maintain good working relationships</li> </ul>	H&S 2	
1.2	<b>Health and Safety Policies</b> Review relevant health and safety policies so that they are fit for purpose, up to date and provide clear guidance for managers and staff to follow	Sept 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Policy or procedure reviews undertaken for Violence and Aggression, Lone Working and Ligature</li> <li>Estates Policies reviewed including Asbestos, Water Management and Low Voltage electricity</li> <li>Policies taken to September Operational Health and Safety Group for approval then Board Health and Safety Committee for final approval</li> </ul>	H&S 1	
1.3	<b>Health and Safety Governance Structures</b> Review existing governance arrangements for Health and Safety to include TOR, attendance and function of Operational Health and Safety Group	July 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Review undertaken</li> <li>Relevant documents agreed for use in Health Board</li> </ul>	H&S11	


Leadership and Accountability (continued)						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.4	<p><b>Health and Safety management In Service Delivery Units, Estates and Support Services</b></p> <p>Develop effective governance arrangements and reporting to the Operational Health and Safety Group</p>	Sept 2019	Unit Directors	<ul style="list-style-type: none"> <li>• Governance procedure developed an agreed by Operational Health and Safety Group</li> <li>• Current roll out of system across Health Board</li> <li>• Active Health and Safety groups in all Units but need to develop consistent approach to governance</li> <li>• Some units do not attend Operational Health and Safety group regularly</li> <li>• Skills and support for Units need to be reviewed</li> </ul>	H&S11	
1.5	<p><b>Health and Safety Risk Register</b></p> <p>Review the Health and Safety risk register and to develop revised risk register that more closely aligns with the new overarching risk register</p>	July 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• Risk register reviewed and updated</li> <li>• Unit registers that focus on their local risks are not regularly reviewed by their Health and Safety groups with many risks long-standing on those registers</li> </ul>	All	
1.6	<p><b>Estates Management</b></p> <p>Review roles and responsibilities for the management of all sites and to identify key officers with responsibility for overall health and safety arrangements</p>	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• Tonna review completed</li> <li>• Other areas still require review</li> </ul>	H&S1	
1.7	<p><b>Security</b></p> <p>Review existing security management arrangements for all sites and to identify key officers with responsibility for security including management of CCTV</p>	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• Included within current HSE review for Morriston, Singleton, Tonna and Cefn Coed Hospitals</li> <li>• All other sites have not been reviewed and</li> </ul>	H&S1	



Leadership and Accountability (continued)						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.8	<b>Health and Safety Structure</b> Review corporate resources for the management of health, safety and fire to ensure that they are fit for purpose	Sept9	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Initial review undertaken</li> <li>Review of some roles in the department to expand their duties</li> <li>Action to be taken to manage further reduction in resource due to pending retirement</li> </ul>	H&S2	





Competent People						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.9	<b>Statutory and Mandatory Training (Core Skills Framework)</b> Develop a strategy and competency pathways for health and safety related topics in the NHS Wales Core Skills Framework on ESR	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Training needs analysis completed for violence and aggression and manual handling</li> <li>Further work required to define pathways for fire safety competencies and the effectiveness of NHS Wales Core Skills Framework</li> <li>Board level review currently being undertaken by Director Workforce and OD</li> </ul>	H&S2	
1.10	<b>Health and Safety Role Related Training</b> Undertake a review key competencies for staff to be effective and safe in their tasks and roles and responsibilities	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Training needs analysis completed for violence and aggression and manual handling</li> <li>Further review required in areas of fire, COSHH and management training</li> </ul>	H&S2	







Compliance Assurance						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.11	<b>Health and Safety Dashboard</b> Review current arrangements for the delivery, recording and monitoring etc. of health and safety training and competencies	January 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Revised and included in the governance documents issued to units and Operational Health and Safety group</li> </ul>	H&S2	
1.12	<b>Legislative and Regulatory Inspections</b> Ensure that all formal reports received from regulatory bodies relating to health and safety are correctly managed and relevant issues address as required to ensure compliance	March 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Health and Safety Committee, Operational Health and Safety Group and Unit Groups appraised of HSE Improvement notices</li> <li>Further work required around management of fire notices</li> </ul>	H&S2	
1.13	<b>Deep Dive – Key Risks</b> Develop a programme of deep dive sessions to review key health and safety risk topics with initial report to be received by the Operational Health and Safety Group	October 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Included within revised governance arrangements for Operational Health and Safety Group and Unit Health and Safety Groups</li> <li>Some initial work undertaken in Units but full programme requires development</li> </ul>	H&S2	
1.14	<b>Unit Health and Safety Improvement Plans</b> Further develop Unit Health and Safety Improvement Plans	December 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Included within revised governance arrangements for Operational Health and Safety Group and Unit Health and Safety Groups</li> <li>Limited number of formal plans in units</li> </ul>	H&S 11	



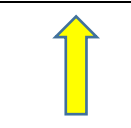
Compliance Assurance (continued)						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.15	<b>DES Assessments</b> Ensure that a regular plan is in place for undertaking DSE risk assessment across the Health Board	December 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Limited Health and Safety resource available primarily focussed on high risk assessments</li> </ul>	H&S2	



Risk Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.16	<b>Health and Safety Risks Registers</b> Review the Health and Safety risk register and develop reviewed register that is more closely aligned to the overarching Board risk register Ensure that a regular plan is in place for undertaking DSE risk assessment across the Health Board	December 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Risk register reviewed and updated</li> </ul>	H&S2	
1.17	<b>Unit Health and Safety Risk Registers</b> Review the risk registers used by Units and develop new arrangements to monitor those risks	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Unit registers that focus on their local risks are not regularly reviewed by their Health and Safety groups with many risks long-standing on those registers</li> </ul>	H&S11	


Learning from Events						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.18	<b>Incident Reporting policy</b> Review the Incident Reporting Policy and associated procedure and guidance to ensure that they are up to date and clearly define the roles of manager and staff	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Policy currently being reviewed by Operational Health and safety Group</li> </ul>	H&S2 H&S4	
1.19	<b>Incident Reporting Analysis</b> Undertake routine analysis of health and safety incidents and near misses	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Regular reports continue to be submitted to the Operational and Unit Health and Safety groups showing trends and hotspots etc.</li> </ul>	H&S2 H&S4	
1.20	<b>Incident Reporting and Investigation</b> Sample quality of investigation of H&S incidents including learning lessons, action taken etc.	March 2020	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>RIDDOR reports produced for Operational Health and Safety group includes lessons learnt etc. and quality of investigation</li> <li>Key lesson learnt included in Unit reports</li> <li>H&amp;S resource strengthened to review incidents of violence and aggression</li> </ul>	H&S2 H&S4	
1.21	<b>Lessons Learnt from Claims</b> Share lessons learnt from claims management experience	March 2020	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Previously included in topic related audits sent to Operational Health and Safety group for review</li> <li>Copy of Shared Services partnership claims management report made available to Operational Health and Safety Group</li> </ul>	H&S2 H&S4	

Asset Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.22	<b>Electrical Equipment Asset Management</b> Undertake a review of electrical equipment management	March 2020	Units	<ul style="list-style-type: none"> <li>Ongoing review of safety with dynamic air mattresses</li> <li>Updated procedure for PAT testing</li> <li>No progress at Unit Health and Safety Groups</li> </ul>	H&S2	
1.23	<b>Equipment Risk Assessments</b> Improve the use of risk assessments in the management of capital programmes	March 2020	All	<ul style="list-style-type: none"> <li>Manual Handling replacement programme completed in April 2019 but further work to identify potential placement of other equipment</li> </ul>	H&S2	
1.24	<b>Electrical Safety Testing</b> Further review of dynamic air mattress systems to reduce the risk of electric shock	March 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Arrangements agreed with units and rollout of system ongoing</li> </ul>	H&S2	





Managing Contractors						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.25	<b>Contractor Management</b> Ensure contractors management is effective at all levels of the organisation	March 2020	Dir Nursing and Patient Experience/ Operations/ Strategy/ Units	<ul style="list-style-type: none"> <li>Contractor policy review and waiting approval from the Operational Health and Safety Group</li> <li>Likely to be an area of HSE interest following prosecution of Cardiff and Vale HB</li> </ul>	H&S2	



Communications						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.26	<b>Health and Safety Operational Group</b> Review the governance framework for the Operational Health and Safety group	October 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Completed</li> </ul>	H&S2	
1.27	<b>Health and Safety Intranet</b> Review the Health and Safety related content to ensure it is up to date, relevant and user friendly	December 2019	Head of Health and Safety	<ul style="list-style-type: none"> <li>No progress and remaining member of staff with necessary skills has left the Health Board</li> </ul>	H&S2	
1.28	<b>Health and Safety Newsletter</b> Introduce a quarterly newsletter to publicise key health and safety message	July 2019	Head of Health and Safety	<ul style="list-style-type: none"> <li>First draft agreed and awaiting publication</li> </ul>	H&S2	


Emergency Preparedness						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.22	<b>Health and Safety Emergency Procedures</b> Where necessary have in place appropriate emergency procedures e.g. fire, spillage	March 2020	Units	<ul style="list-style-type: none"> <li>Some reviews of fire emergency procedures undertaken</li> </ul>	H&S2	
1.23	<b>Review first aid provision</b>	March 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Reviewed 2019 and confirmed generally effective arrangements but further review required for complexity</li> </ul>	H&S2	


Measuring performance						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
1.22	<b>Key Performance Indicators</b> Identify, maintain and use key performance indicators (KPI) for Operational Health and Safety Group	March 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Review to be undertaken</li> </ul>	H&S2	


<b>2</b>	<b>Target</b>	<b>To have Fire Safety owned and effectively managed at all levels of the Health Board</b>
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Leadership and Accountability						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.1	<b>Fire Safety Management Systems</b> Review fire safety management and necessary resources to effectively manage fire safety	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Confirmed fire resources inadequate but awaiting full review of Health and Safety structure and resources</li> </ul>	H&S13	
2.2	<b>Fire Wardens</b> Ensure that there are sufficient and active fire wardens to assist in the management of fire safety	September 2019	Units	<ul style="list-style-type: none"> <li>Further review of Singleton recently undertaken</li> <li>Unclear in other areas of scope and numbers of fire Wardens</li> </ul>	H&S13	
2.3	<b>Health and Safety Operational Group</b> All management areas to demonstrate effective management of fire safety	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Forms part of revised governance arrangements but full implementation now required</li> </ul>	H&S13	
2.4	<b>Health and Safety Unit Groups</b> Demonstrate key actions to demonstrate fire safety being managed		Units	<ul style="list-style-type: none"> <li>Forms part of revised governance arrangements but full implementation now required</li> </ul>	H&S13	


Competent People						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.5	<b>Fire Safety Training : all Staff</b> Review arrangements to ensure a clear policy of fire training and maintenance of competencies	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Review not undertaken and competency pathways not developed</li> </ul>	H&S13	
2.6	<b>Competencies of Managers</b> Review key skills for managers to effectively control fire safety and provide training and support as required	March 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Review not undertaken and competency pathways not developed</li> </ul>	H&S13	

Compliance Assurance						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.7	<b>Fire Risk Assessments</b> Improve the action taken following fire risk assessments	December 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Being undertaken to use DATIX system to improve monitoring</li> <li>Reports provided to Units regarding fire risk assessments undertaken</li> </ul>	H&S13	



Risk Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.8	<b>Fire Safety Risk Register</b> Maintain fire safety risk register and review as necessary	October 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Singleton cladding included in Corprote risk register</li> <li>Other fire safety risk to form part of the Operational Health and Safety/Fire Safety Group risk register</li> </ul>	H&S5	



Risk Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.9	<b>Fire Safety Incidents Lessons Learnt</b> Improve the reporting of fire safety incidents and lessons learnt etc.	December 2019	Dir Nursing and Patient Experience/ Fire Safety Group/ Units	<ul style="list-style-type: none"> <li>Generally fire safety incidents investigated by Fire Safety Advisers with limited involvement of Unit staff</li> </ul>	H&S2 H&S4	

Asset Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.10	<b>Fire Safety Capital Programme</b> Develop action plan for fire safety investment	March 2020	Dir. Strategy/ Fire Safety Group	<ul style="list-style-type: none"> <li>Approval given for part removal of Singleton cladding</li> <li>Capital monies allocated for specific project work such as review of compartmentation</li> </ul>	H&S 5	
2.11	<b>Fire Safety Compartmentation</b> Conduct rolling review of fire safety compartmentation across Health Board	March 2020	Dir. Operations/ Fire Safety Group	<ul style="list-style-type: none"> <li>Programme ongoing at Singleton hospital</li> </ul>		
2.12	<b>Fire Safety Cause and Affect</b> Conduct rolling review of fire safety cause and affect across the health board	March 2020	Dir. Operations/ Fire Safety Group	<ul style="list-style-type: none"> <li>Resources allocated and some work being undertaken</li> </ul>		



Emergency Preparedness						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.13	<b>Fire Safety Site Plans</b> Confirm all sites have management plan for site	September 2019	Units	<ul style="list-style-type: none"> <li>Forms part of governance structure for Units but limited number of reviews undertaken primarily on main sites</li> <li></li> </ul>		





Emergency Preparedness (continued)						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.14	<b>Fire Evacuation Plans</b> Confirm all wards and departments have a fire emergency plan	September 2019	Units	<ul style="list-style-type: none"> <li>Will form part of revised governance structure for Units but currently limited monitoring in place at Unit level</li> <li>Reviewed as part of fire risk assessment system</li> </ul>		
2.15	<b>Singleton Fire</b> Learn key messages from fire emergency in April 22019	September 2019	Dir. Operations/ Fire Safety Group	<ul style="list-style-type: none"> <li>Full review undertaken</li> <li>Reported to Operational Health and Safety group and Unit Health and Safety Groups</li> </ul>		


Measuring Performance						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
2.16	<b>Fire Safety Key Performance indicators (KPI)</b> Develop capacity at corporate level to monitor fire safety performance	December 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Awaiting review of Health and Safety resources etc.</li> </ul>	H&S 1	
2.17	<b>Local Fire Safety Audits</b> Incorporate enhanced monitoring of smaller properties into Fire Safety audit	December 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Current fire safety audit, due to resources, only focuses on larger properties and does not fully consider the full SWUHB estate.</li> <li>Awaiting review of Health and Safety resources etc.</li> </ul>	H&S 1	



<b>3</b>	<b>Target</b>	<b>To have Manual Handling owned and effectively managed at all levels of the Health Board</b>
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<b>Leadership and Accountability</b>						
	<b>Recommendation</b>	<b>Timescale</b>	<b>Lead Executive</b>	<b>Current Position</b>	<b>Risk Reference</b>	<b>Status</b>
3.1	<b>Resources and Capacity</b> Review resources and capacity to ensure fit for purpose	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Review to be undertaken</li> </ul>	H&S 1	
3.2	<b>Integration of Manual Handling Management</b> Embed the management of manual handling at all levels of the Health Board	November 2019	Units	<ul style="list-style-type: none"> <li>Revised governance structure will require regular review of manual handling</li> <li>Regular incident reports provided to Units</li> </ul>	H&S 1 H&S 2	

<b>Competent People</b>						
	<b>Recommendation</b>	<b>Timescale</b>	<b>Lead Executive</b>	<b>Current Position</b>	<b>Risk Reference</b>	<b>Status</b>
3.3	<b>Manual Handling Training</b> Full review of manual handling training and competency systems	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Current review being undertaken as part of HSE inspection and management of improvement notices</li> </ul>	H&S 1 H&S 2	



<b>Risk Management</b>						
	<b>Recommendation</b>	<b>Timescale</b>	<b>Lead Executive</b>	<b>Current Position</b>	<b>Risk Reference</b>	<b>Status</b>
3.4	<b>Manual Handling Risk Register</b> Maintain risk register and monitor by Unit, Operational Health and Safety Group	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Hoists already reviewed</li> <li>To be included in governance work of relevant Health and Safety groups</li> </ul>	H&S 1 H&S 14	




Compliance Assurance						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
3.5	<b>Manual Handling performance</b> Review arrangements and resources to formally monitor key performance indicators	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• Significant monitoring in place by Manual Handling Coaches</li> <li>• Monitoring at H&amp;S group level largely limited to incident statistics</li> <li>• Limited corporate H&amp;S resources to monitor wards and departments</li> </ul>	H&S 1 H&S 2	




Learning from Events						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
3.6	<b>Manual Handling Incidents</b> Maintain continuous review of incidents	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• Regular reports provided to Operational and Unit H&amp;S groups</li> <li>• RIDDOR reports scrutinised by Operational H&amp;S group</li> </ul>	H&S 2 H&S 4	
3.7	<b>Occupational Health</b> Maintain continuous review of incidents associated with musculoskeletal disorders	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• Resources available to support investigations and risk assessments</li> <li>• Bespoke training systems in place to minimise key areas of MSDs</li> </ul>	H&S 14	


Asset Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
3.8	<b>Manual Handling Equipment</b> Complete annual review of equipment	December 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>• 2018-19 programme completed and implemented</li> </ul>		




4	Target	To have Violence and Aggression owned and effectively managed at all levels of the Health Board
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Leadership and Accountability						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
4.1	<b>Policy</b> Review policy	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Currently awaiting final approval from Operational Health and Safety Group</li> </ul>	H&S 1	
4.2	<b>Integration of Violence and Aggression Management into Units</b> Embed the management of violence and aggression at all levels of the Health Board	September 2019	Units	<ul style="list-style-type: none"> <li>Revised governance structure will require regular review</li> <li>Regular incident reports provided to Units</li> </ul>	H&S 1 H&S 2	

Competent People						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
4.3	<b>Training</b> Full review of training and competency systems	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Current review being undertaken as part of HSE inspection and management of improvement notices</li> </ul>	H&S 1 H&S 2	
4.4	<b>Restraint Training and Systems</b> Review restraint arrangements in Mental Health and learning Disability Unit	March 2020	Unit	<ul style="list-style-type: none"> <li>Review being undertaken</li> </ul>	H&S 1 H&S 2	
4.5	<b>Training Needs Analysis</b> Review and agree with units	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Completed at Unit and ward/ departmental level for wards and key departments</li> </ul>	H&S 1 H&S 2	


Compliance Assurance						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
4.6	<b>Violence and Aggression Performance</b> Operational Health and Safety Group to maintain constant review	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Monitoring limited to incident statistics and lessons learnt</li> </ul>	H&S 1 H&S 2	
4.7	<b>Violence and Aggression Unit Performance</b> Operational Health and Safety Group to maintain constant review	September 2019	Units	<ul style="list-style-type: none"> <li>Monitoring limited to incident statistics and lessons learnt</li> </ul>	H&S 1 H&S 2	
4.8	<b>Violence and Aggression internal Review</b> Develop internal reviews and Annual thematic Review to Operational Health and Safety Group	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Monitoring limited to incident statistics and lessons learnt</li> </ul>	H&S 1 H&S 2	


Risk Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
4.9	<b>Risk Register</b> Understand risks and control measures for individual staff groups	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Training needs analysis completed at Unit and ward/ departmental level for wards and key departments</li> </ul>	H&S 1 H&S 2	

Learning from Events						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
410	<b>Lessons learnt</b> Maintain regular review by Operational Health and Safety Group	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Regular reports provided to Operational and Unit H&amp;S groups</li> <li>RIDDOR reports scrutinised by Operational H&amp;S group</li> </ul>	H&S 2 H&S 4	
4.11	<b>Lessons learnt</b> Maintain regular review by Units	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Regular reports provided to units</li> </ul>	H&S2	
4.12	<b>Case Management</b> Review resources for effective case management	November 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Initial review undertaken</li> <li>Review of some roles in the department to expand their duties</li> <li>Action to be taken to manage further reduction in resource due to pending retirement</li> </ul>	H&S2	


Emergency Preparedness						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
4.13	<b>Lone Worker Policy</b> Review policy/procedure	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>Awaiting final approval from ops H&amp;S group</li> </ul>	H&S 1 H&S 2	
4.14	<b>Clinical information Systems</b> Review information systems	March 2020	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>NHS systems frequently incompatible</li> <li>Potential role for Case Manager to support</li> </ul>	H&S 1 H&S 2	


<b>5</b>	<b>Target</b>	<b>To have COSHH owned and effectively managed at all levels of the Health Board</b>
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<b>Leadership and Accountability</b>						
	<b>Recommendation</b>	<b>Timescale</b>	<b>Lead Executive</b>	<b>Current Position</b>	<b>Risk Reference</b>	<b>Status</b>
5.1	<b>Policy</b> Review policy	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>COSHH procedure reviewed and currently awaiting approval by Ops H&amp;S group</li> </ul>	H&S 1	


<b>Competent People</b>						
	<b>Recommendation</b>	<b>Timescale</b>	<b>Lead Executive</b>	<b>Current Position</b>	<b>Risk Reference</b>	<b>Status</b>
5.2	<b>Training</b> Full review of training and competency systems required	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>No resources to take this work forward</li> </ul>	H&S 1 H&S 2	





Risk Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
5.3	<b>Risk Assessments</b> Undertake full range of COSHH assessments	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>No resources to take this work forward</li> </ul>	H&S 1 H&S 2	

Learning from Events						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
5.4	<b>Lessons learnt</b> Review all relevant incidents	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>Regular reports provided to Operational and Unit H&amp;S groups</li> <li>RIDDOR reports scrutinised by Operational H&amp;S group</li> </ul>	H&S 2 H&S 4	

6	Target	To have Display Screen Equipment (DES) owned and effectively managed at all levels of the Health Board
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Leadership and Accountability						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
6.1	<b>DSE Procedure Review</b>	September 2019	Dir Nursing and Patient Experience	<ul style="list-style-type: none"> <li>No progress</li> </ul>	H&S 1	

Competent People						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
6.2	<b>Training</b> Managers to understand safety arrangements for equipment etc.	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>No resources to take this work forward</li> </ul>	H&S 1 H&S 2	

Risk Management						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
6.3	<b>Risk Assessments</b> Undertake audit of range of DES assessments in Health board	September 2019	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>No resources to take this work forward</li> </ul>	H&S 1 H&S 2	

Learning from Events						
	Recommendation	Timescale	Lead Executive	Current Position	Risk Reference	Status
6.4	<b>Lessons learnt</b> Review all relevant incidents to be undertaken	March 2020	Dir Nursing and Patient Experience/ Units	<ul style="list-style-type: none"> <li>No incidents reported</li> </ul>	H&S 2	