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Health Board



# Health and Safety Committee Annual Report 2019-20

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## **Chair's Foreword**

The Health & Safety Committee has had a busy year culminating in focussed work to address nine immediate enforcement notices from the Health & Safety Executive, to progress the action plan to completeness, whilst continuing the Committee's regular work programme. The actions relating to the notifications were formally completed in February 2020. The Committee agreed publication of a Health and Safety Newsletter for staff, publishing two during this year and a third in July 2020 focussing on Health and Safety issues of the pandemic.

In March 2020, the Health Board faced unprecedented circumstances in light of the COVID-19 pandemic, and as such the Health and Safety Committee's main focusses were to address the personal protective equipment (PPE) issues and the social distancing requirements following Welsh Government advice. There are many other important factors in relation to COVID-19; however members are mindful that 'usual business' and COVID-19 need to have a level of equality at the committee. This will remain the case as we progress into 2020-21.

## 1. Introduction

The board-level Health and Safety Committee was established in April 2019. Prior to this, the arrangements in place considered the operational detail as opposed to governance and scrutiny.

The purpose of the Health and Safety Committee is to:

*“Advise and assure the board and the accountable officer on whether effective arrangements are in place to ensure organisational wide compliance of the health board’s health and safety policy, approve and monitor delivery against the health and safety priority action plan and ensure compliance with the relevant standards for health services in Wales.*

*“This will be achieved by encouraging strong leadership in health and safety, championing the importance of a common sense approach to motivate focus on core aims distinguishing between real and trivial issues.”*

During 2019-20, the committee met its responsibility by fulfilling its role as outlined in its terms of reference, and through the delivery of its work programme. The annual report summarises this.

## 2. Committee Structure

The membership of the committee during 2019-20 comprised:

### Independent Members

- Maggie Berry, independent member (chair);
- Martyn Waygood, independent member
- Jackie Davies, independent member;
- Reena Owen, independent member.

### Executive Directors

- Gareth Howells, Director of Nursing and Patient Experience (lead executive)
- Chris White, Chief Operating Officer/Director of Therapies and Health Science;
- Hazel Robinson, Director of Workforce and Organisational Development (OD);
- Keith Reid, Director of Public Health (from October 2019)
- Sandra Husbands, Director of Public Health (to October 2019)

Meetings were also attended by Pam Wenger, Director of Corporate Governance, as well as Joanne Jones, Head of Support Services, Laurie Higgs, Head of Health and Safety, Des Keighan, Assistant Director of Strategy (estates) and Staffside representatives Nigel Hill, Dominic Jewitt and Steve Davies.

Committee support in terms of the circulation of the meeting papers and minute taking was undertaken by the corporate governance function to ensure continuity with other board committees. The secretary to the committee was Leah Joseph, corporate governance officer.

The terms of reference required the committee to meet four times a year and this was achieved.

### **3. Reports Received**

At the June 2019 committee meeting, the work plan for the rest of the year and terms of reference were agreed. Following this meeting, the work plan was used to develop a structured agenda for subsequent ones, at which the following reports were received:

- **Unit Reports**

Each delivery unit is invited to the Health and Safety Committee across a rolling 18-month programme to outline its health and safety targets and plans to improve. The reports are not limited to service units, as included within the programme are facilities and estates, as well as the corporate function. Guidelines were developed with the chair of the committee early in its tenure to advise units what was required of their reports and these are at appendix one for information. During 2019-20, updates were received from:

- Singleton Hospital;
- Morriston Hospital;
- Neath Port Talbot Hospital;
- Headquarters;
- Mental Health and Learning Disabilities;
- Hotel and Support Services;

- **Health and Safety Annual Report 2018-19**

In September 2019, the committee considered a draft version of the health and safety annual report which outlined the progress against plan for the year. This had been established in response to an internal audit and was the fourth iteration after 2016-17, 2017-18 and 2018-19.

- **Internal Audit Reports**

Members received audit reports outlining the findings of the following reviews:

- 3 Health and Safety Executive (HSE) Improvement notices issued in February 2019;
- Meeting the requirements of the 2 new HSE Improvement notices for the management of estates electrical safety and resources for Authorised Persons (AP) for the management of specific estates risk;
- Re-inspection of Singleton Hospital by the mid and West Wales Fire and Rescue service;
- Review of the fire safety compartmentation in areas subject to building work such as Ward 12;
- The formal South Wales Fire and Rescue service notice for the Dan-Y-Bont bungalows.

Assurance was provided that action plans were to be developed to address the recommendations in the report and updates would be provided as to the findings of future follow-ups.

- **Health and Safety Risk Register**

The health and safety risk register was a standing item on the committee's agenda and was received at each meeting, which provided members with an opportunity to scrutinise the highest scoring risks, but also to suggest ways in which the register could be developed to provide further assurance.

- **Health and Safety Newsletters**

The Committee agreed publication of a Health and Safety Newsletter for staff, publishing two during this year and a third in July 2020 focussing on Health and Safety issues of the pandemic

- **Key Issues Operational Group Report**

The previous health and safety committee was refreshed as an operational group and forms part of the committee's sub-structure. This has been developed further for 2019-20 with a key issues report submitted summarising the discussions.

- **Health and Safety Plan 2018-19 Status Updates**

Regular reports were received by the committee as to progress against the health and safety plan for 2018-19. It was agreed that a formal 'close down' of this plan was needed in early 2019-20 and any outstanding issues would be carried forward to the new plan.

- **Planning for Health and Safety Plan 2018-19**

The committee was kept sighted on the work to develop an improvement plan for 2018-19, which was received for consideration in March 2019, but subsequently deferred to April 2019.

- **Health and Safety Improvement Plan Closure of 2018-2019 plan and new Health and Safety Improvement Plan 2019-2020**

In June 2019, the committee received a report which focused on the 2018-19 plan and detailing the new 2019-20 plan.

- **Radon Gas Monitoring Review**

A written report was received advising that following a discussion at the operational group, monies had been agreed for the estates facility to complete the radon gas monitoring review over a three-year programme. Regular updates were provided as to the work to determine the priority orders.

- **Review of Fire Safety at Singleton Hospital**

Members were kept apprised of the work in relation to fire safety at Singleton Hospital. Assurance was provided that plans were in place should a fire occur to ensure the safety of patients and staff.

- **Control of Substances Hazardous to Health Position (COSHH)**

A report providing an update in relation to COSHH was received and noted, with no significant issues raised.

- **Current Policy Review**

A report detailing the planning for the reorganisation of the Health board, the

emerging risks and good governance of health and safety.

- **Future Governance Arrangements**

A report provided an update to the Committee on the review of the governance structure in relation to the management of health and safety within the health board. Following the review a number of proposals have been put in place to strengthen and develop health and safety governance which were outlined within this report.

- **Personal Injury Files**

The Legal and Risk Services (LARS) in the NHS Wales Shared Services Partnership (NWSSP) published a 6 monthly summary report of successful personal injury defences, lessons learned from incidents, a summary of case results and file reviews which is shared with NHS Wales. Following this, a summary of case results and file reviews were shared with NHS Wales and a specific breakdown of personal injury claim reviews for the health board were presented.

- **Health and Safety Modules**

A report was received which updated the Health and Safety Committee of training arrangements for staff. The report advised of risks, financial implications and governance issues.

- **Water Safety Management Update**

At December's committee a report was received following an internal audit. The report included legionella sampling, the appointment of competent person for responsibility and advisory support from micro-biologists. The item is also being monitored by the Audit Committee.

- **HSE Inspection Update**

A report was received which outlined the Health & Safety Executive (HSE) inspection visits that took place on the 16<sup>th</sup>, 17<sup>th</sup>, 18<sup>th</sup> & 20<sup>th</sup> September 2019. Additional visits also took place on 10 and 30<sup>th</sup> October 2019, specifically for the estates and radiology departments. The HSE Improvement Working Group was set up to oversee progress against the recommendations following the inspection visits. The HSE Improvement Working Group will continue to oversee the progress against the processes implemented as part of the HSE notices improvement plan and embedded into the organisation.

- **Lockdown Procedure**

The lockdown procedure report provided guidance for units on how to deal with security incidents that necessitate locking down a room, areas or departments within the health board.

- **Food Safety Report**

A report was received at December's committee which highlighted a range of indicators used for monitoring and benchmarking the Health Boards Catering Services. This included actual and potential risks, set improvement objectives and outline planned developments within the service.

- **Personal Protective Equipment (PPE)**

A report was received in December 2019 which detailed the revised Health Board standard for PPE requirements for decontamination areas across Swansea Bay University Health Board.

#### **4. In-Committee Session**

In addition to the public sessions of the committee, some of the meetings had private sessions during which legal, sensitive or commercially sensitive issues were discussed. These included updates with regard to the cladding at Singleton Hospital and general HSE visits, in addition to the violence and aggression and manual handling specific inspection.

#### **5. Conclusion**

This report demonstrates that the committee fulfilled its responsibilities through the reports it had received during the year from various services and sources.



### Units' attendances at the Health and Safety Committee

Each delivery unit is invited to the Health and Safety Committee once a year to outline its health and safety targets and plans to improve in the coming months.

Units are asked to include details of any risk register entries which score more than 16 and the actions in place to mitigate these risks. The governance structures the units have in place to manage health and safety also need to be detailed.

In addition, the report should include performance against and actions to improve:

- Falls;
- Pressure ulcers;
- Sharps injuries.

As well as:

- Relevant mandatory training
- Violence and aggression;
- Lone workers (where relevant).

Units are asked to address the following within the report:

- What do you consider to be the three wards/clinical areas which give you the greatest cause for concern? Why? What actions are you taking to address these concerns? When do you expect an improvement and how will this manifest itself?
- What do you consider to be the three wards/clinical areas which give you the greatest level of assurance? Why? What actions are you taking to spread the good practice you have identified in these areas?

The report is to be submitted to the corporate governance team for circulation at least 10 days in advance of the meeting. Please do not embed documents or appendices; these needed to be attached separately.

No more than three people (including at least the service director, unit medical director **or** unit nursing director) should attend the meeting to present the report, which should be assumed as read and you'll have **five minutes** in which to highlight key points. After this, those in attendance will have an opportunity to ask questions.

**Presentations will only be accepted in exceptional circumstances.** And as such, must be agreed with the meeting chair in advance, via the corporate governance team, and provided alongside the report for attendees to consider prior to the meeting. It is not acceptable to arrive at a meeting and expect to present slides without such agreement.