ABM University LHB Unconfirmed Minutes of the Health and Safety Committee held on 7th August 2018 in the Board Meeting Room, Health Board HQ

Present:

Martyn Waygood	Independent Member (in the chair)
Maggie Berry	Independent Member
In Attendance:	
Siân Harrop-Griffiths	Director of Strategy
Steve Davies	Staffside
Nigel Hill	Staffside
Darren Griffiths	Assistant Director of Strategy (Planning and Performance)
Laurie Higgs	Head of Health and Safety
Des Keighan	Assistant Director of Strategy (Estates)
Hazel Robinson	Director of Workforce and Organisational Development (OD)
Chris Morrell	Director of Therapies and Health Science
Pam Wenger	Director of Corporate Governance
Paula O'Connor	Head of Internal Audit (until minute 22/18)
Joanne Jones	Head of Support Services
Liz Stauber	Committee Services Manager
Jan Worthing	Service Director, Singleton Services Delivery Unit ((until minute 19/18)
Matthew Fisher	Singleton Site Manager (until minute 19/18)

Minute Item

Action

11/18 WELCOME AND INTRODUCTIONS

Martyn Waygood welcomed everyone to the meeting, in particular Joanne Jones, Chris Morrell, Nigel Hill and Hazel Robinson who had recently joined the committee, as well as Paula O'Connor who was observing.

12/18 APOLOGIES FOR ABSENCE

Apologies for absence were received from Tyrone Lewis, ABM Community Health Council; Sandra Husbands, Director of Public Health and Jackie Davies, Independent Member.

13/18 DECLARATIONS OF INTEREST

There were no declarations of interest.

14/18 MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 20th April 2018 were **received** and **confirmed** as a true and accurate record.

15/18 MATTERS ARISING

There were no matters arising.

16/18 ACTION LOG

The action log was **received** and **noted**.

17/18 CHANGE IN AGENDA ORDER

Resolved: The agenda order be changed and item 3a be taken next.

18/18 REVIEW OF SERVICE DELIVERY UNIT: SINGLETON

Jan Worthing and Matthew Fisher were welcomed to the meeting.

A report providing an update on health and safety matters at Singleton Service Delivery Unit was **received**.

In introducing the report, Jan Worthing highlighted the following points:

- A health and safety committee had been established at the point of the unit's inception but had been restarted in December 2017 following a hiatus as a result of a senior manager retirement;
- The unit's risk register was kept up-to-date and it also had a health and safety framework;
- Work was ongoing with colleagues internally and externally to ensure adequate plans were in place in relation to cladding. This included the completion of significant amounts of training;

In discussing the report, the following points were raised:

Chris Morrell stated that the unit managed medical physics and queried whether radon was included on its risk register. Jan Worthing confirmed that it was, noting that the unit had representation on the other units' management groups and communications in relation to radon safety were relayed in this way. Darren Griffiths added that the committee was to receive a report on radon at its next meeting.

Maggie Berry commented that the way in which the unit had presented its report had been pleasing. She queried whether the other units would also be attending meetings to provide updates. Darren Griffiths confirmed that they would and this would also include hotel services and estates.

Maggie Berry sought clarity as to whether the Chief Executive signed all the units' health and safety plans as the organisation's responsible officer. Darren Griffiths advised that an overarching, mid-level health and safety plan was established for the organisation, from which the units identified elements relevant to their services to include within their own plans as delegated responsibilities.

Martyn Waygood queried the input of the fire brigade into the unit's fire safety plans. Laurie Higgs responded that there had been close working between the two organisations which included ensuring all of the local crews were familiar with the hospital layout. Matthew Fisher added that a multi-disciplinary approach had been taken to ensure the safety of patients in the event of a fire. Darren Griffiths stated that there was also an agreement with local brigades that a second appliance would be sent in an incident.

Hazel Robinson noted the action cards appended to the report, stating they were helpful for staff. She queried as to whether they had been shared and understood. Matthew Fisher advised that they had been circulated to fire wardens, who were located on every ward, as well as ward sisters. Laurie Higgs added that they were tailored to each individual area to provide specific evacuation plans.

Martyn Waygood highlighted a number of incomplete areas within the evacuation policy. Matthew Fisher advised that it was currently in draft and would be agreed by the unit's management group in September 2018.

Siân Harrop-Griffiths stated that the unit's work in relation to fire safety was exemplary and queried its other risks and priorities. Jan Worthing responded that the number of falls reported was reducing as a result of dedicating an area to patients at high risk of falling and allocating a healthcare support worker to provide support, as well as the purchase of hi-lo beds through charitable funds. She added that the unit was in a good position in relation to sharps and pressure ulcer performance was improving.

Matthew Fisher advised that the unit did not have a security team so found it challenging to respond to incidents, particularly relating to violence and aggression. Jan Worthing added that it was recognised that there was a gap and this also applied to the environment. Martyn Waygood stated that the committee would note this as an issue as violence and aggression was one which needed to be taken seriously in order to show support for staff.

Steve Davies queried as to who provided fire safety training. Matthew Fisher responded that education leads facilitated the sessions and there were sufficient numbers of staff trained to deal with a situation should one arise.

Hazel Robinson stated it would be interesting to see details of violence

and aggression incidents reported. Jan Worthing advised that a report was received by the unit's quality and safety group, but it was only as good as the data reported, as not all incidents were logged.

Hazel Robinson commented that a proper analysis of staff training requirements was required to determine what was actually needed in order to identify how it should be delivered and how to address the issues of releasing staff.

Pam Wenger stated that it was difficult to determine the unit's level of risk and how it was managed, adding that future reports from the units should identify risks which scored more than 15 on the risk register and mitigating actions. Darren Griffiths undertook to develop guidelines for units' future reports.

- Resolved: The report be noted.
 - Darren Griffiths to develop guidelines for units' future reports.

DG

19/18 HEALTH AND SAFETY ANNUAL REPORT

The health and safety annual report for 2017-18 was received.

In introducing the report, Darren Griffiths highlighted the following points:

- The need to establish an annual report for the service was identified during an internal audit, resulting in the production of reports in 2016-17 and 2017-18;
- The report was a reflection of the delivery of the health and safety annual plan;
- The organisation had a significant number of risk assessments and the corporate team was spending time with and providing support to the units;
- The use of data was improving;
- Risk areas had been identified including cladding and hoists, the latter of which had been escalated by the health and safety operational group resulting in funding being allocated;
- There was more work to be done in relation to learning from incidents;
- Eight fires had occurred during the year and had been managed well;
- While the sharps position was adequate, work was to be undertaken to determine a more appropriate product to use;
- Occupational health now had membership on the operational group;

- Throughout the year the fire system had been replaced at scale.

In discussing the report, the following points were raised:

Nigel Hill noted within the table of violence and aggression incidents, there was no provision for recording incidents of employee against employee. Laurie Higgs responded that these were covered by the dignity at work policy and were therefore not reported in the health and safety annual report. Martyn Waygood commented that it was important that any violence against staff was reported to ensure they received the necessary support. Des Keighan stated that the health board was proactive in relation to violence and aggression training, particularly diffusing situations. Hazel Robinson advised that it would be useful to share such information with the partnership forum.

Nigel Hill stated that lone working was a significant area for health and safety and should be on the committee's agenda. Martyn Waygood concurred, adding that there was no specific policy for lone workers to adhere to in terms of technology and this was an area which the health board should be considering.

Chris Morrell commented that it would be useful to have further details of trends with regard to violence and aggression incidents.

Maggie Berry queried whether the corporate headquarters of the health board was included within the unit structure for health and safety as a 'seventh' unit. Darren Griffiths advised that for the purpose of the health and safety committee structure, there were eight units; the normal six plus estates and hotel services. Siân Harrop-Griffiths commented that there was a difference between having a plan for a building and a function, and the majority of services provided within headquarters corporately were also provided elsewhere in the organisation. She added that there was not a plan for every facility owned by the health board. Paula O'Connor stated that each unit had a risk register which included health and safety risks, and should a particular risk appear on several registers, it would be included within the corporate risk register.

Martyn Waygood advised that he had some points he wished to discuss with Darren Griffiths and undertook to do this outside of the meeting.

Martyn Waygood noted the number of unwanted fire signals and queried if there was a risk of a reduced service from the fire brigade. Laurie Higgs responded that the majority of these calls originated from Cefn Coed Hospital and as such, the fire system had been replaced but all incidents were investigated for learning.

Paula O'Connor stated that this year's annual report was significantly more detailed than the inaugural one. She added that if the report was to provide assurance to the committee, it needed to include a governance structure, as well as reference against the health and care standards.

MW

	Pam Wenger commented that the health board was required to receive the annual report on an annual basis and suggested that a revised version be received by the committee for approval at the next meeting. This was agreed.	DG
Resolved:	- The report be noted.	
	 Martyn Waygood to provide comments on the annual report to Darren Griffiths outside of the committee. 	MW
	 A revised version of the report be received at the next meeting for approval. 	SHG
20/18	CHANGE IN AGENDA ORDER	
Resolved:	The agenda order be changed and item 3b be taken next.	
21/18	INTERNAL AUDIT FIRE SAFETY	
	A report detailing the findings of an internal audit of fire safety was received.	
	In introducing the report, Darren Griffiths highlighted the following points:	
	 The management response had been agreed and a method to capture progress was being developed as some recommendations covered other planning areas such as estates or capital; 	
	- There was also a requirement to complete a national audit;	
	 A further discussion was to take place with the operational group as well as the NHS Wales Shared Services Partnership for a more rounded debate. 	
	In discussing the report, Paula O'Connor advised that a follow-up would be undertake to ensure the issues raised had been addressed, as well as a follow-up of the general health and safety audit. Martyn Waygood queried as to when the follow-ups would be received by the committee. Darren Griffiths responded that it was hoped that they would be ready for the next meeting.	
Resolved:	The report be noted.	
22/18	HEALTH AND SAFETY COMMITTEE WORK PLAN	

The work plan for the Health and Safety Committee was received and

approved, with the caveat that the initial review of the Bridgend transition **DG** be brought forward.

Resolved: The report be **noted.**

23/18 RISK REGISTER

The health and safety risk register was received.

In introducing the report, Darren Griffiths highlighted the following points:

- The health and safety operational group oversaw the management of the risk register;
- It was proposed to add three additional risks; one relating to potential significant fines for organisations with ineffective health and safety management; cladding and management of radon gas;
- It was also proposed to reduce the rating of equipment falling out of manufacturers' support but further reinvestment would be required.

In discussing the report, the following points were raised:

Pam Wenger noted that for some of the entries, the risk score in Datix and the score for the risk profile differed, adding that they should be the same. Darren Griffiths concurred, adding that the service was working to address this.

Pam Wenger highlighted one entry which was scored at 25, which was the highest score, adding that the associated actions required strengthening. She queried as to whether they had gone through a scrutiny process. Darren Griffiths advised that the current score was too high for that entry and needed to be reviewed, and this was the case for several others. Pam Wenger stated that this emphasised the need for the organisation to have a risk management process in order to accept and mitigate risks. She undertook to discuss the risk register further with Darren Griffiths.

Maggie Berry advised that she had concerns as to the number of risks relating to the management structure, as the delivery units were no longer new and should have robust health and safety systems in place. She added that several years ago as part of the healthcare standards scrutiny process, the units had give assurance that they would establish health and safety committees, so it was disappointing that not all had done this. Siân Harrop-Griffiths concurred, adding that there had been significant discussions with the units in relation to establishing health and safety structures. She stated that this needed to be addressed as part of the units' reports to the committee.

Chris Morrell queried as to how the committee gained assurance regarding lone working and violence and aggression for hosted staff across all sites.

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Laurie Higgs responded that it referred back to each of the risk profiles for the units, as well as those of hosted agencies. He added that the health board worked with other organisations to train their staff working on ABMU sites.

Des Keighan advised that there was no lead for site management for a number of community properties, particularly if occupancy was shared. Joanne Jones added that prior to the establishment of the units, each of the smaller sites had a site manager within an acute site, but now the Primary Care and Community Services Unit superseded some of these arrangements and there was no 'natural' building owner. Siân Harrop-Griffiths stated that the accountability was with the Primary Care and Community Services Unit in these instances and this needed to be reinforced.

Nigel Hill referenced the number of volunteers working within the organisation who also had a responsibility to health and safety.

Hazel Robinson stated that it would be useful for the entries to highlight whether it was a unit which had responsibility or the corporate team. Darren Griffiths advised that upon the establishment of the units, they had been encouraged to make local health and safety arrangements, and while some had made these standalone, others had incorporated them into their quality and safety system. He added that some arrangements were more robust than others and the corporate team provided support where possible.

Pam Wenger informed the committee that a risk management group had been established, which included representatives from the units, at which there had been significant discussions.

Martyn Waygood referenced the data within the annual report relating to violence and aggression incidents, adding that it would be useful to cross-reference this with lone workers as an understanding was needed as to the support they required.

Resolved: - The report be **noted.**

 Pam Wenger and Darren Griffiths to discuss further the risk register.

24/18 HEALTH AND SAFTEY GROUP OPERATIONAL MINUTES

The minutes of the July 2018 health and safety operational group were **received.**

In discussing the minutes, Nigel Hill advised that during the operational group meeting, he had raised the issue of hot weather as some staff found working conditions 'intolerable' He added that they had been seeking a

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policy and wondered whether it could be included within the extreme weather policy. Joanne Jones advised that this was being considered with the emergency planning officer. Darren Griffiths suggested that it be reflected on the risk register with Joanne Jones's response. This was agreed.

Resolved: - The report be **noted.**

- The hot weather be included within the risk register together with the discussed mitigating actions.

25/18 HEALTH AND SAFETY GROUP WORK PLAN

The work plan for the health and safety group was received and noted.

26/18 WORKFORCE RISKS

A verbal report in relation to workforce risks was received.

In introducing the report, Hazel Robinson advised that she had written a report for the Audit and Workforce and OD committees outlining her early reflections of workforce risks upon joining the organisation and some of these would align with health and safety.

In discussing the report, Nigel Hill queried as to whether the partnership forum would receive the report. Hazel Robinson responded that it required refinement but she would be happy to share it once finished. Pam Wenger added that the Audit Committee had agreed that the risks, actions and scrutiny needed to be outlined first before it could be considered elsewhere.

Resolved: The report be **noted.**

27/18 ANY OTHER BUSINESS

There was no further business and the meeting was closed.

28/18 DATE OF NEXT MEETING

The next scheduled meeting was noted to be 24th September 2018.