

Swansea Bay University Health Board

Unconfirmed

Minutes of the Meeting of the Health and Safety Committee 1st April 2021 via Microsoft Teams

Present

Maggie Berry	Independent Member (in the chair)
Tom Crick	Independent Member
Jackie Davies	Independent Member (from minute 22/21)

In Attendance

Rab McEwan	Interim Chief Operating Officer
Leah Joseph	Corporate Governance Officer
Mark Parsons	Assistant Director of Health and Safety
Christine Williams	Interim Director of Nursing and Patient Experience
Joanne Jones	Head of Support Services
Laurie Higgs	Head of Health and Safety
Hazel Lloyd	Head of Patient Experience (minute 26/21 to 27/21)
Joanne Gubbings	Assistant Director of Workforce and OD
Des Keighan	Assistant Director of Operations – Estates (to minute 20/21)

Minute No.		Action
13/21	APOLOGIES	
	Apologies for absence were received from: Kathryn Jones, Interim Director of Workforce and Organisational Development; Pam Wenger, Director of Corporate Governance; Simon Davies, Assistant Director of Strategy – Capital.	
14/21	WELCOME / INTRODUCTORY REMARKS	
	The chair welcomed everyone to the meeting.	
15/21	DECLARATION OF INTERESTS	
	There were no declarations of interest.	
16/21	MINUTES OF THE PREVIOUS MEETING	

	<p>The minutes of the meetings held on 1st December 2020 were received and confirmed as a true and accurate record, except to note the following typographical errors:</p> <p><u>99/20 Control of Substances Hazardous to Health Regulations</u></p> <p>Mark Parsons highlighted that Control of Substances Hazardous to Health Regulations should be shortened to 'COSHH' and not 'COSSH'.</p> <p><u>99/20 Control of Substances Hazardous to Health Regulations</u></p> <p>Mark Parsons advised that the 'Accountable Person' should be amended to 'Authorised Person'.</p>	
17/21	MATTERS ARISING	
	<p>i. <u>102/20 Service Drawings</u></p> <p>Des Keighan advised that the paper drawings have been received which now need to be transferred into electronic format.</p>	
18/21	ACTION LOG	
	<p>i. <u>51/20 Electrical Testing at Gorseinon Hospital</u></p> <p>Mark Parsons advised that the works have been completed and the action can be removed from the action log.</p> <p>ii. <u>95/20 Morriston Hospital flooring</u></p> <p>Maggie Berry requested that the action remains on the action log until the works have begun.</p> <p>iii. <u>99/20 Water and ice machines</u></p> <p>Mark Parsons advised that Singleton Hospital have 12 plumbed machines and 9 bottled machines. Des Keighan noted that at a recent water meeting it was agreed that a standard operating procedure was needed with the involvement from the infection, prevention and control team for clear guidance and an audit system. Maggie Berry requested a verbal update at July's Health and Safety Committee, with a formal report to follow in October 2021.</p> <p>iv. <u>102/20 Tender for water risk assessments</u></p> <p>Des Keighan advised that the tender evaluation would be carried out on 9th April 2021 which will be a substantial task. Maggie Berry requested an update report in July 2021.</p>	<p>MP</p> <p>MP</p>

Resolved:	The action log was received and noted .	
19/21	CHANGE IN AGENDA ORDER	
	The agenda order be changed and items 2.4 be taken next, with 2.1 following.	
20/21	DISCRETIONARY CAPITAL PROGRAMME/ SIX FACET REVIEW OF BACKLOG MAINTENANCE	
	<p>A joint report on the discretionary capital programme and the concerns surrounding the six facet review of backlog maintenance from a Health and Safety perspective was received.</p> <p>In introducing the report, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> – The position of the estates backlog maintenance is currently managed via desktop review with the last property appraisal taking place in 2009; – Swansea Bay University Health Board (SBUHB) is not in a position to provide detailed information of how the development of business cases could affect the backlog maintenance risks; – The backlog maintenance costs 2019/20 were reported as at £25.6m in the high significant risk categories, out of a total backlog of £67.5m; – Whilst Estates manages their revenue position to prioritise urgent maintenance works, discretionary capital funding is relied heavily upon each year which is always over committed but still ensures the presentation of a balanced plan; – There is a need to provide decant capacity to undertake any deep cleaning of the existing estate and accommodate any ward refurbishment or refresh works on the Morriston Hospital site. Currently Morriston Hospital does not have an up to date condition survey to support strategic decisions. <p>In discussing the item, the following points were raised:</p> <p>Maggie Berry noted that the committee had advocated the review of backlog maintenance since 2019. Tom Crick thanked the team for the collaborative report, but commented that the situation was sobering. He highlighted that the finance figures are large. He queried what would be a comfortable range and how does SBUHB compare to other health boards. Des Keighan advised that most health boards are in similar</p>	

	<p>positions and SBUHB are trying to address the risks whilst the team are completing capital works across sites. Des Keighan suggested that an improved position would see only one or two major risks captured on the backlog maintenance risks list.</p> <p>Tom Crick noted that positive decarbonisation works have been undertaken which should reap long-term benefits. Des Keighan advised that the prioritisation of risks is key along with teams collaborating to pursue other streams of funding, but decanting remains the biggest problem for estates. Welsh Government did not take some of SBUHB's priorities forward under the £15m project bid, and the funding for the six facet survey has not yet been agreed.</p> <p>Mark Parsons queried if Morriston Hospital, Singleton Hospital and Neath Port Talbot Hospital could be prioritised to enable more potential funding in 2021, with Primary Care Community Services and Mental Health Learning Disabilities being funded next year. Des Keighan advised that this had been raised with the Interim Director of Finance, however the funding allocation position was yet unknown. He had previously suggested the same approach to separate the units, but a response on funding remains outstanding.</p> <p>Maggie Berry noted that the six facet survey and decanting facilities were essential for the estates background and suggested that the service focuses on Morriston Hospital, Singleton Hospital and Neath Port Talbot Hospital.</p>	
Resolved:	<ul style="list-style-type: none"> – The capital bids submitted to Welsh Government for targeted funding for backlog maintenance and environmental improvements, and the limited funding available within the 2021/22 discretionary capital programme were noted. – The identified backlog maintenance works highlighted in the report and the resources section of Admin Control were noted. – The requirement for revenue funding of the six facet survey and condition appraisal work together, recognising that there will be additional resources required to manage statutory compliance requirements were noted. 	
21/21	HEALTH AND SAFETY PLAN UPDATES	
	<p>A verbal update on the Health and Safety plan was received.</p> <p>In introducing the update, Mark Parsons highlighted that the newsletter had been added to the plan.</p> <p>In discussing the update, Maggie Berry requested an update report in</p>	

	October.	MP
Resolved	<ul style="list-style-type: none"> – An update report be received in October 2021. – The verbal update was noted. 	MP
22/21	HEALTH AND SAFETY INFRASTRUCTURE	
	<p>A verbal update on regarding the Health and Safety Infrastructure was received.</p> <p>In introducing the update, Mark Parsons highlighted that face-to-face training for Executives and Independent Members would be more appropriate than online training.</p> <p>In discussing the update, the following points were raised:</p> <p>Christine Williams advised that the infrastructure work is comprehensive and concerns around fires should be escalated to the Health and Safety Operational Group.</p> <p>Tom Crick agreed with the face-to-face element for training rather than an online facility.</p>	
Resolved:	The update was noted .	
23/21	CHANGE IN AGENDA ORDER	
	The agenda order be changed and items 2.5 be taken next, with 2.6, 3.1 and 2.3 following.	
24/21	FIRE DOOR DEEP DIVE	
	<p>An update report on the use of fire doors following deep dive was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> – There is a high percentage of overdue risk assessments and this is being reviewed to ensure compliance levels remain on target; – SBUHB has invested in temporary resources to address the overdue fire risk assessments and progression has been positive over the month of March 2021, with action plan in place to complete by end of July 2021; 	

	<p>In discussing the item, the following points were raised:</p> <p>Maggie Berry requested a verbal update at July's Health and Safety Committee. Tom Crick was surprised by the fire door replacement application of £500,000.00.</p>	MP
Resolved:	<ul style="list-style-type: none"> – A verbal update be provided at July's Health and Safety Committee. – The report was noted. 	MP
25/21	IMPLEMENTATION OF SMOKING LEGISLATION	
	<p>A report on the implementation of smoking legislation was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> – The Local Authorities are enforcing the legislation across sites following the implementation of the Public Health (Wales) Act 2017 and the Smoke-free Premises and Vehicles (Wales) Regulations 2020 that came into force on 1st March 2021; – The position overall is good and a task and finish group is in place to discuss the concerns and issues surrounding the implementation; – A monitoring system is needed, with other Health Board's choosing a tannoy system. <p>In discussing the item, the following points were raised:</p> <p>Christine Williams advised that concerns surrounding implementation of smoking cessation are violence and aggression towards staff and fire hazards and have been highlighted to the task and finish group. Mark Parsons informed committee members that following meetings, it had been agreed that if staff felt intimidated by another person when challenging smoking on sites, they were to withdraw from the discussion.</p> <p>Maggie Berry queried if SBUHB were connecting with Local Authority enforcement teams. Joanne Jones advised that discussions are in progress however training for the approach is needed.</p> <p>Mark Parsons advised that the current policy includes vaping machines, however there is no certainty that this section of the policy would be included as part of the strategy plan. This issue remained in discussion with the task and finish group.</p> <p>Rab McEwan highlighted that staff need to have an appropriate contact for a brief intervention approach that could include a discussion on stopping smoking that would enable a managing mechanism. He</p>	

	<p>commented that the approach could evidence that SBUHB are taking action following the legislation, and would give an idea of the number of people who SBUHB is working with from a smoking perspective.</p> <p>Joanne Jones advised that staff at Singleton Hospital are smoking under a bus shelter outside of the hospital grounds on a main road. This is not a suitable place for staff to be smoking and this needs to be worked through for a solution.</p>	
Resolved:	The report was noted .	
26/21	FACILITIES AND SUPPORT SERVICES REPORT	
	<p>A report on Facilities and Support Services was received.</p> <p>In introducing the report, Joanne Jones highlighted the following points:</p> <ul style="list-style-type: none"> – Overall compliance for Support/Hotel Services, as recorded on electronic staff record (ESR) is at 64.8% as at March 2021; – Each departmental manager has been given an individual improvement target to reach full compliance; – There have been 400 new starters within support services and facilities; – Overall Personal Appraisal Development Review (PADR) compliance for Support Services is 20.85%; – From April 2020 to February 2021, there have been 289 incidents, mostly recorded is related to security staff in Morriston Hospital's Emergency Department; – The risk titled 'cleaning hours in Morriston Hospital' is due to be removed from the risk register as funding had recently been allocated and recruitment is taking place. <p>In discussing the item, the following points were raised:</p> <p>Jackie Davies queried if the turnover is large considering the 400 new starters. Joanne Jones advised that the retention rate is almost always in the 10% range, and turnover has been high in the past year due to COVID recruitment in the field hospitals and temporary roles.</p> <p>Jackie Davies highlighted that barriers achieving statutory and mandatory training targets included difficulty in accessing ESR training. Joanne Jones advised that once a programme has ended the percentage of compliance decreases immediately. There does need to be a work-through surrounding the timings of training colleagues whose roles are not computer based. Maggie Berry requested a verbal update</p>	JJ

	<p>on PADR and statutory and mandatory training rates in July's Health and Safety Committee.</p> <p>Mark Parsons found the availability of glide sheets surprising. Joanne Jones agreed to discuss with Mark Parsons outside of the committee. Joanne Jones highlighted that there had been a lot of discretionary capital funding input into the kitchens for water leakage and floor repair and replacement.</p> <p>Maggie Berry queried the difference in statutory and mandatory compliance rates between Singleton Hospital and Morriston Hospital's domestic departments. Joanne Jones advised that Singleton Hospital had a superb trainer who led the training initiative. She added that Morriston Hospital is the most infectious site which needed additional cleaning hours, but there have been additional cleaning hours allocated to Morriston Hospital, therefore the benefits should be fruitful soon.</p>	
Resolved:	<ul style="list-style-type: none"> – A verbal update on PADR and statutory and mandatory training rates be received in July's Health and Safety Committee. – The report was noted. 	JJ
27/21	HEALTH AND SAFETY RISK REGISTER	
	<p>A report providing an update on the Health and Safety risk register was received.</p> <p>In introducing the report, Hazel Lloyd highlighted the following points:</p> <ul style="list-style-type: none"> – The risks that are currently assigned to the Health and Safety Committee are Health and Safety Infrastructure; Fire Safety Compliance; and Environment of Premises; – There are a total of 23 risks on the Covid-19 Gold Command Risk Register, 5 have been closed and 4 new risks have been added since November 2020; – The report is evolving following the development of a scrutiny panel; – The Chief Executive is personally reviewing all risks on the risk register rated 20 and above; – The lead Executive is reviewing the Environment of Premises risk to establish if the current rating is appropriate. <p>In discussing the report, the following points were raised:</p> <p>Mark Parsons advised that the Health and Safety Infrastructure risk rating has increased to 25. Hazel Lloyd will update the risk register</p>	HL

	<p>accordingly.</p> <p>Jackie Davies queried why risk 62, Sustainable Corporate Services had been de-escalated from 20 to 1. Hazel Lloyd advised that Chief Executive felt that the appointments were now in place and the risk could be de-escalated, however the review of this risk is ongoing.</p> <p>Maggie Berry highlighted that suitable dialogue surrounding fire risks should be included in risk 36, Storage of Paper Records. Hazel Lloyd will link with Mark Parsons for the appropriate narrative.</p> <p>Hazel Lloyd advised that she is planning to meet with the Director of Public Health surrounding the planning of possible risks for the health board on COVID and nosocomial transmissions.</p> <p>Mark Parsons advised that personal protective equipment (PPE) is showing as 15; however, SBUHB's PPE is in a good position for a potential third wave of COVID-19. Currently, the health board is not in a position to decrease the rating lower than 15.</p>	HL
Resolved:	<ul style="list-style-type: none"> – Environment of Premises risk on the risk register to reflect the rating of 25. – Appropriate fire risk dialogue for risk 36, Storage of Paper Records be added to the risk register. – The updates to the Health Board Risk Register were noted. – The updates to the COVID-19 Gold Command risk register were noted. 	HL HL
28/21	HEALTH AND SAFETY OPERATIONAL GROUP	
	<p>A key issues report on Health and Safety Operational Group was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> – There have been a number of changes within the service groups; – Following a deep dive into violence and aggression, the actions are being undertaken; – The PPE stocks are at good levels; – There is work ongoing to reduce the number of corridors being blocked by beds; – Health and Safety Executive (HSE) visited Morriston Hospital on 10th December 2020 to undertake inspections relating to COVID-19. HSE reviewed clinical and non-clinical areas, with verbal 	

	<p>feedback provided on the day and this was followed up in writing in the form of a notice of contravention. SBUHB are currently progressing through the actions identified;</p> <ul style="list-style-type: none"> – The terms of reference for the Health and Safety Operational Group have been included for endorsement. <p>In discussing the item, the following points were raised:</p> <p>Maggie Berry queried if scaffolding at Singleton Hospital is now in place. Mark Parsons confirmed that scaffolding was erected on 6th March 2021.</p> <p>Maggie Berry queried whether laundry services had transferred to NHS Shared Services Partnership. Joanne Jones advised that the laundry service transferred on 1st April 2021 and staff were generally positive about the transfer. The linen rooms and distribution of linen will remain with SBUHB.</p> <p>Maggie Berry noted that corridors are still being blocked by beds. Mark Parsons advised that the position is better but work still needs to be done. Joanne Jones highlighted that a new bed store had been delivered and porters are moving beds out of corridors and into this facility. She noted that there was no electricity or heating which creates health and safety issues at night when porters collect beds from the store. Mark Parsons advised that he would visit the store today.</p> <p>Mark Parsons advised that attendance at the Health and Safety Operational Group was good, with the possibility of an additional union representative joining the group membership.</p>	
Resolved:	<ul style="list-style-type: none"> – The Health & Safety Operational Group Terms of Reference were endorsed. – The report was noted. 	
29/21	HEALTH AND SAFETY NEWSLETTER	
	<p>A verbal update on the Health and Safety Newsletter was received.</p> <p>Mark Parsons advised that he will work with Laurie Higgs in the next couple of months to develop the newsletter. Maggie Berry suggested that the newsletter is added to the Health and Safety Operational Group agenda for content discussions that will be relevant to staff.</p>	
Resolved:	The verbal update was noted .	
30/21	ITEMS TO REFER TO OTHER COMMITTEES	

Resolved:	There were no items raised to refer to other committees.	
31/21	ANY OTHER BUSINESS	
Resolved:	There were no items raised under any other business.	
32/21	DATE OF NEXT COMMITTEE MEETING	
	The next scheduled meeting is 1 st July 2021.	