

**CONFIRMED MINUTES OF THE HEALTH AND SAFETY COMMITTEE HELD ON 9<sup>TH</sup> JULY  
NANT FAWR 2, GROUND FLOOR, WOODLANDS HOUSE, MAES-Y-COED**

**Present:**

Michael Imperato	MI	Independent Member – Legal (Chair)
Akmal Hanuk	AH	Independent Member – Community
Dawn Ward	DW	Independent Member – Trade Union

**In attendance:**

Janice Aspinall	JA	Staff Safety Representative
Charles Dalton	CD	Head of Health and Safety
Martin Driscoll	MD	Director of Workforce and OD
Geoff Walsh	GW	Director of Capital, Estates and Facilities

**Secretariat:**

Rachael Daniel	RD	Health and Safety Adviser
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**Apologies:**

Carol Evans	CE	Assistant Director of Patient Safety and Quality
Nicola Foreman	NF	Director of Corporate Governance
Fiona Kinghorn	FK	Director of Public Health

**Observer:**

Laurie Higgs	LH	Swansea Bay University Health Board
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<b>HSC: 19/07/001</b>	<b>WELCOME AND INTRODUCTIONS</b>	<b>ACTION</b>
	The Chair welcomed everyone to the meeting.	
	<b>APOLOGIES FOR ABSENCE</b>	
	Apologies for absence were noted.	
	<b>DECLARATIONS OF INTEREST</b>	
	The Chair invited Committee Members to declare any interest in the proceedings included in the agenda. None were declared.	
	<b>MINUTES OF PREVIOUS MEETING</b>	
	The minutes of the Health and Safety Committee held on the 9 April 2019 were reviewed.	
	<b>The Committee resolved – that:</b>	
	The Committee approved the minutes of the meeting held on 9 April 2019.	
	<b>COMMITTEE ACTION LOG</b>	
	The Committee reviewed the action log from the meeting held on the 9 <sup>th</sup> April 2019.	

HSC: 19/036 – Enforcement Agencies Correspondence Report: The Head of Health and Safety advised the contractor fall legal case would be heard in Court on the 15<sup>th</sup> - 16<sup>th</sup> July 2019.

**The Committee resolved – that:**

The outcome of the case would be brought to the October meeting.

CD

HSC:  
19/07/006

**PRESENTATION – STRUCTURE AND PROCESS FOR STAFF HEALTH AND SAFETY TRAINING**

The Director of Workforce and OD informed the Committee the presentation would be deferred to the October meeting.

HSC:  
19/07/007

**HEALTH AND SAFETY ANNUAL REPORT**

The Head of Health and Safety presented the Annual Report to the Committee and highlighted the following key issues:

- A notable reduction in the number of lost time (RIDDOR) incidents, down from 118 to 99.
- An 8% reduction in the number of all staff reported events.
- Staff reported incidents show that violence and aggression accounts for 59% of all events and shows a small rise of 3% from 2018/19.
- A positive trend in the reduction of manual handling incidents with the overall number for 2018/19 16% lower than the previous year. Equally data shows that the 5 year average for all manual handling incidents represent a significant improvement of being 38% lower than the previous 5 years and lost time events being 26% lower.
- The reporting of sharps injuries is the lowest recorded to date at 255 being 8% lower than 2017/18. Furthermore since the introduction of the safer sharps initiative 5 years ago, data demonstrates an average reduction of 29% over the pre safer sharps period.
- Mandatory training of health and safety has significantly improved with 4 clinical boards achieving the 85% target and a further 3 being above 80%.
- Tutor led training compliance for both manual handling and violence and aggression is well below requirement and a review is being progressed with an aim to enhance competence.
- The number of prosecutions for assaults on staff significantly increased during the year from 52 to 81. This effectively equates to a successful conviction every four and a half days of the year and the ten year average is still significantly greater than one successful conviction per year.
- The lone worker devices continued to be highly valued by staff with average usage being at 70% and devices in great demand.
- Control of Substances Hazardous to Health (COSHH) compliance increased from 62% in 2017/18 to 82% in 2018/19.
- Corporate recruitment of an Adviser to enhance contractor control for non-estate activities.

- High degree of contractor control maintained throughout 2018/19, reduction in the number of non-compliance issues identified with the new advisory category introduced.
- Notably consistently high Environmental Health star ratings of food preparation areas and restaurants was achieved during the period.

The Chair thanked Mr Dalton for his presentation.

**The Committee resolved that:**

The Annual Report be noted.

**HSC:  
19/07/008**

**PEDESTRAIN ACCESS STRATEGY**

The Director of Capital, Estates and Facilities provided the Committee with an update following the last meeting. As previously reported there are three high risk areas and in order to prioritise these a Task and Finish Group was being established. The key aims of this group will be to identify the cause of the risk and develop tangible cost effective solutions to mitigate the risk to an agreed practical level. Mr Walsh also advised a programme of works had been developed for the group.

The Independent Member – Trade Union queried whether there would be any engagement with the public. Mr Walsh advised the aim is to move traffic off site but at present there is an abuse of parking by staff and students and a behavioural change is required. The Independent Member – Community queried whether there had been any campaigns to raise awareness with these groups. Mr Walsh stated the Chief Executive is very active in promoting the Park and Ride Facilities but their needs to be a change in staff attitudes to parking on site.

The Chair offered his congratulations to Mr Walsh and his team for moving this issue forward.

**The Committee resolved that:**

- (a) the report be noted.
- (b) an update of the Task and Finish Group Programme of Works be provided to the October meeting.

**GW**

**HSC:  
19/07/009**

**PROACT AUDIT SURVEY PROGRESS**

The Head of Health and Safety informed the Committee the Operational Health and Safety Group will review the status of the survey results and the action plan would then be brought to the Committee for assurance.

**The Committee resolved that:**

- (a) the report be noted.
- (b) the action plan be brought to a future meeting.

HSC:  
19/07/010

## HSE INSPECTION OF VIOLENCE AND AGGRESSION AND MUSCULOSKELETAL DISORDERS IN HEALTHCARE 2018-19

The Head of Health and Safety informed the Committee as previously reported the inspection was anticipated during the third financial quarter. Mr Dalton also informed the Committee Hywel Da Health Board had also been inspected during the first week of July and the inspection had been undertaken by 4 Inspectors over 4 days, and had now been expanded to include Asbestos Management. A meeting was taking place with Hywel Da at the end of the month to learn from their experience.

Mr Dalton stated he was concerned the Risk Management Policy and Procedure were currently out of date and this had been raised with the Director of Corporate Governance. He proposed that a Health and Safety Risk Assessment Procedure be developed and presented to the September meeting of the Operational Health and Safety Group for approval, this was endorsed by the Committee.

CD

The Chair welcomed Mr Laurie Higgs, Head of Health and Safety for Swansea Bay University Health Board to the meeting and invited his observations from the inspection undertaken at Swansea Bay. Mr Higgs advised in addition to the general ward areas and accident and emergency they also visited the mortuary and operating theatres. He informed the Committee the Health Board had received 4 Improvement Notices relating to the management of manual handling risks to staff within the operating theatres, accident and emergency department and porters, 4 related to violence and aggression management in the accident and emergency department and porters and 1 related to inadequate arrangements to report and investigate incidents to ensure lessons learnt.

The Independent Member – Community thanked Mr Higgs for attending as it was good to share experiences.

Mr Imperato requested a progress report for the next meeting, Mr Dalton added a table top assessment against the knowns would also be undertaken.

CD

### **The Committee resolved that:**

- (a) the report be noted.
- (b) a progress report be presented to the October meeting.
- (c) a table top assessment be undertaken prior to the next meeting.

HSC:  
19/07/011

## ENFORCEMENT AGENCIES REPORT

The Head of Health and Safety informed the Committee of one new item in relation to a needle stick injury from a known BBV+ source which had been reported to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR) Regulations whereby the HSE had requested further information. This information had been provided to the HSE and based off this no further action was to be taken.

Mr Dalton also advised the Committee the case in relation to the Contractor Fall would be heard in Court on the 14/15<sup>th</sup> July 2019.

**The Committee resolved that:**

- (a) the report be noted.
- (b) the outcome of the Contractor Fall case be brought to the October meeting.
- (c) agreed that appropriate actions were being pursued to address the issues raised.

**HSC:  
19/07/012**

**FIRE ENFORCEMENT AND MANAGEMENT COMPLIANCE  
REPORT**

The Director of Capital, Estates and Facilities informed the Committee unwanted fire alarms had reduced in University Hospital of Wales (UHW) by 22% and training compliance had increased to 70%.

Mr Walsh also highlighted the 2 significant fires which had occurred since the last meeting.

The first was at Lansdowne Hospital which had been a deliberate act. The second was on Ward C5 whereby a patient set themselves on fire lighting a match whilst on oxygen, this incident could have been a lot worse were it not for the actions of the staff on duty at the time and in particular the security staff, the staff have been commended for their actions on the day. A full debrief of this incident was being co-ordinated by Huw Williams, Emergency Preparedness Manager.

The Independent Member - Community advised there was increased assurances since the last meeting, he queried whether there would be an investigation in to the C5 incident. Mr Walsh advised there was an on-going criminal investigation and also as mentioned the internal debrief. The debrief included all staff who were involved in the incident on the day and the findings of the debrief would be presented to the Board, he also added there were some lessons to be learnt from the incident.

Mr Hanuk added he would like these types of incidents to be part of the training course.

Mr Walsh also raised his concerns in relation to the fire at Lansdowne Hospital as potentially the ducts in the building could have been accessed, as a result enhanced security was being put in place. He added Whitchurch Hospital was also a concern as there were too many access points, again the security had been enhanced with 3 dog handlers on a 24/7 basis at a cost of approximately £35k per month.

The Independent Member – Trade Union commended the Work undertaken by Mr Walsh with the Fire Service.

**The Committee resolved that:**

- (a) the report be noted.

**HSC:  
19/07/013**

**HEALTH AND SAFETY ASSURANCE SCHEDULE AND PRIORITY IMPROVEMENT PLAN 2019/20**

The Head of Health and Safety informed the Committee a lot of the actions were operational in nature and would be monitored through the Operational Health and Safety Group.

Mr Dalton brought one item to the attention of the Committee, he advised evacuation chair training was currently being reviewed and looking at whether a response team would be more appropriate as opposed to training a vast number of nursing and clinical staff.

**The Committee resolved that:**

- (a) the report be noted.
- (b) agreed that appropriate actions are being taken to address the issues raised.

**HSC:  
19/07/014**

**ENVIRONMENTAL HEALTH INSPECTION OF ALL AROMA COFFEE OUTLETS, UNIVERSITY HOSPITAL OF WALES (UHW) ON 25<sup>TH</sup> APRIL 2019**

The Director of Capital, Estates and Facilities informed the Committee whilst a score of 3 is generally satisfactory as a Service Board the standard has been set at 4 and above. He was concerned at the type of mistakes identified in the inspection and he requires internal assurances. The inspections were becoming onerous and he was seeking to take on a qualified individual to manage food hygiene across the Health Board.

On a positive note Mr Walsh advised that the outlets in UHL had scored 5 since the UHW inspection.

The Committee resolved that:

- (a) the report be noted and the remedial actions taken.

**HSC:  
19/07/015**

**UPDATED HEALTH AND SAFETY RELATED POLICIES SCHEDULE**

The Health and Safety Adviser informed the Committee the Department was looking to reduce the overall number of policies to have a small suite of policies with procedures feeding from these.

The Independent Member – Trade Union requested staff representatives be involved in the process.

**The Committee resolved that:**

- (a) the updated schedule be noted.

**HSC:  
19/07/016**

**CONTRACTOR CONTROL POLICY**

The Health and Safety Adviser informed the Committee the Policy approval was being deferred until after the outcome of the court case

in July so that any actions could be incorporated into the Policy. The Policy would then be presented to the October meeting.

**GW**

The Director of Capital, Estates and Facilities informed the Committee Internal Audit would be undertaking a review of contractor control.

**The Committee resolved that:**

- (a) the Policy would be deferred to the October meeting so that the outcome of the court case could be incorporated as appropriate.

**HSC:  
19/07/017**

**WORK PROGRAMME 2019/20**

The Executive Director of Workforce and OD informed the Committee the Work plan had been updated.

**The Committee resolved that:**

- (a) the Work Plan for 2019/20 be approved.

**HSC:  
19/07/018**

**OPERATIONAL HEALTH AND SAFETY GROUP**

**The Committee resolved that:**

- (a) the minutes of the Operational Health and Safety Group held in February 2019 be RATIFIED.

**HSC:  
19/07/019**

**FIRE SAFETY GROUP**

**The Committee resolved that:**

- (a) the minutes of the Fire Safety Group held in March 2019 be RATIFIED.

**HSC:  
19/07/020**

**HEALTH AND SAFETY PRIORITY IMPROVEMENT PLAN – DETAILED**

**The Committee resolved that:**

- (a) the plan be NOTED.

**HSC:  
19/07/021**

**ENVIRONMENTAL HEALTH INSPECTION OF CENTRAL FOOD PRODUCTION UNIT, UNIVERSITY HOSPITAL OF WALES ON 25<sup>TH</sup> MARCH 2019**

**The Committee resolved that:**

- (a) the report be NOTED.

**HSC:  
19/07/022**

**DATE OF THE NEXT MEETING OF THE COMMITTEE**

Tuesday 8<sup>th</sup> October at 9.00am, Woodlands House, Heath, Cardiff, CF14 4TT