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Public Health
Wales

Name of Meeting
Quality, Safety and
Improvement Committee
Date of Meeting
18th May 2022
5.3a

Health and Safety Report

Executive lead:	Huw George, Deputy Chief Executive / Executive Director of Operations and Finance
Author:	Chris Orr, Head of Estates and Health and Safety Neil Desmond, Compliance Lead
Approval/Scrutiny route:	Health and Safety Group (Circulated 28 April 2022)

Purpose

This report provides an update on the health and safety performance for the period of 01 January 2022 – 31 March 2022.

The report is split into two sections. Section one of this report provides an update on the health and safety performance for the period of 01 January 2022 – 31 March 2022. Section two (page 11) of the report provides an update on the workplace measures that have been undertaken across the organisation in response to the legislation and regulations imposed on us as a result of the COVID-19.

Recommendation:

APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
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The Quality, Safety and Improvement Committee is asked to:

- **Receive assurance** that appropriate measures are in place to monitor compliance and to address areas identified for improvement.

Link to Public Health Wales [Strategic Plan](#)

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities.

This report contributes to the following:

Strategic Priority	Choose an item.All organisational priorities
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Strategic Priority	
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Strategic Priority	
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Summary impact analysis

Equality and Health Impact Assessment	Internal report only
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Risk and Assurance	The paper details the health and safety risks on Directorate and divisional risk registers and also includes safety alert notifications. It additionally outlines where gaps have been identified, control measures are being implemented to address issues identified.
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Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes Theme 2 - Safe Care
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Financial implications	None identified
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People implications	There are no implications for workforce / staff identified
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1. Introduction and Purpose

1.1 The purpose of section one of this report is to provide an update on the health and safety activities and performance for the period 01 January 2022 – 31 March 2022. The key areas of compliance includes;

- Health and safety incidents reported and lessons learnt under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)
- Health and safety premise inspection audits
- Health and safety statutory/mandatory training
- Health and safety Corporate Risk Register
- Notifications and alerts
- Health and safety policies and procedures

The report also provides an update on the specific measures and actions that have been completed or are planned in relation to ensure our estate is compliant with the various legislation and regulations as a result of COVID-19 following the previous update provided in the quarter one report.

Due to the focus over the last 12 months being on Covid-19, for 2021/22 we will not be producing an annual report. Throughout the year, the Committee have received an additional section detail the specific work that was been undertaken across the estate to reduce the risk of Covid-19 transmission and providing a summary of all the quarterly reports would add no additional value. An annual report will be produced for 2022/23.

2. Background

In order for the Health and Safety Group to discharge its responsibilities, it needs to receive assurance that the organisation is effectively managing health and safety. This includes details of any concerns, areas of non-compliance, outstanding actions from relevant health and safety action plans and controls and mitigations are in place.

The Health and Safety Group receives this assurance via this report and exception reports received from the various Directorates/Divisions through the respective Health and Safety leads.

3. Key Highlights

3.1 No RIDDORs was reported during Quarter 4 (01 January 2022 – 31 March 2022). Further details can be found on page 5.

3.2 Due to the organisation's response to COVID-19, no health and safety audits have been undertaken within the specified timeframe.

However we have undertaken a COVID workplace preparedness risk assessment of the workplace and subsequently established compliance monitoring processes. These have been continuing during quarter 4.

3.3 There are 18 properties within the organisation’s estate portfolio where the responsibility to undertake statutory duties is that of the organisation. These duties include:

- Fire Risk Assessment
- Water Management (Legionella) Risk Assessments
- Electrical Inspection Condition Report (EICR)
- Asbestos survey/re-inspection
- Gas Safety Certification

Currently we are falling short of the 100% compliance target in relation to Asbestos Re-Inspection. Further detail is provided at Section 6 on page 7.

3.4 All health and safety alerts and notifications received within the reporting period have been reviewed and addressed, with appropriate actions taken where required.

4. Health and Safety Incident Reporting

4.1 Statistics on incident records per directorate

All staff are required to report incidents using the Datix system in accordance with the organisation’s policies and procedures. Incidents are monitored to help identify trends, to ensure investigations are undertaken and are concluded identifying the incident cause and any lessons learnt.

From 01 January 2022 – 31 March 2022, the total number of reported health and safety incidents is provided with a breakdown by directorate shown in Table 1.

Table1. Reported health and safety incidents by Division

Division	No of incidents
Estates and Health & Safety	2
Integrated Governance	1
Microbiology	35
Screening Division	9
Total	47

All incidents relating to health and safety are notified to the relevant Health and Safety Managers and are followed up. Any learning is captured and shared to prevent reoccurrence.

These incidents are classified under the following categories-

Table 2. Reported health and safety incidents by category

Category	No of incidents
Contact	3
Exposure/Spillage of Chemical/Micro-organism /Hazardous Substances	23
Fire Incident	1
Fire Safety Equipment/System Fault or Failure	2
Infection Control Incident	3
Manual Handling	1
Sharps (Including Needlestick)	4
Slip/Trip/Fall	6
Violence and Aggression	4
Total	47

Note- where no incidents are reported against a category, these have been omitted from the table above.

5.0 RIDDORs

No RIDDORs have been reported to the Health and Safety Executive during quarter four.

For the RIDDORs previously reported, the latest updates have been included below.

- RIDDOR incident requiring investigation at UHW site. Ankle fracture sustained by staff member whilst on lunch break. Local conditions appear to have contributed to incident (retained surface water due to blocked drainage system) and storm conditions on site. The site of the accident was in an open area. There has been no feedback from HSE.
- RIDDOR investigation re concussion injury concluded. SBAR available. HSE feedback indicates investigation closed.
- RIDDOR investigation re RTC incident at IP5 concluded. Recommendations being taken forward by landlords have all been completed. HSE indicates investigation closed.

6.0 Estates Compliance

Over the reporting period 01 January 2022 – 31 March 2022 the monitoring and scheduling of compliance has continued to be maintained. Compliance levels for the five key areas, at sites where the organisation has a statutory responsibility for, are shown below.

There are 18 properties within the organisation's estate portfolio where the responsibility to undertake statutory duties is that of the organisation. These duties include:

- Fire Risk Assessment - 100% compliant
- Asbestos survey/re-inspection – 93% compliant
- Electrical Inspection Condition Report (EICR) - 100% compliant
- Gas Safety Certification – 100% compliant
- Water Management (Legionella) Risk Assessments - 100% compliant

Further details are set out below in relation to asbestos re-inspection.

Asbestos; one re-inspection remains outstanding at BTW Cardiff. This is as a consequence of service pressures, but it is anticipated that the re-inspection will be completed by the end April 2022.

The established six year rolling programme of compliance checks continues to be adhered to as far as practicable, so as to ensure inspections and testing are undertaken at appropriate intervals at all sites. Updates will continue to be provided to the group on a quarterly basis providing assurance on compliance.

Compliance information is also required to be collated for sites at which we have staff based and for which landlords or host organisations have responsibility for. An e-assurance document has been developed for host organisations to complete and will allow for assurance reporting re compliance for host sites – this additional reporting will be reflected in Q1 2022.

7.0 Health and Safety Statutory/Mandatory Training

All staff are required to complete a number of statutory and mandatory modules. All directorates are expected as a minimum to attain Welsh Government All Wales compliance target of 85%, with an organisational target of 95%.

The key health and safety statutory/mandatory modules are:

- Fire Safety
- Health, Safety and Welfare
- Moving and Handling Level 1
- Violence and Aggression A

The organisations compliance status as of for quarter 4 is shown in the table below. There have been small increases in compliance across Health and Safety training, Manual Handling and Violence and Aggression training however a small decreases in Fire Safety since the last quarter. All four statutory and mandatory training areas remain short of the Public Health Wales target of 95% however Health and Safety and Violence and Aggression training are however meeting the Welsh Government target of 85%.

Table 2: Health and safety training compliance by Directorate (data as of end of March 2022)

Directorate	Fire Safety %	Health and Safety %	Manual Handling %	Violence & Aggression %
Corporate Directorate	65.38%	88.46%	80.77%	69.23%
Covid 19 Directorate	84.38%	94.79%	87.50%	85.42%
Health & Wellbeing Directorate	84.21%	90.09%	81.73%	96.28%
Hosted Directorate	87.34%	94.30%	89.87%	92.41%
Knowledge Directorate	90.29%	95.15%	91.26%	98.06%
NHS Quality Improvement Directorate	89.29%	92.86%	92.86%	98.81%
Operations and Finance Directorate	89.84%	92.19%	93.75%	98.44%
People & OD Directorate	69.23%	92.31%	79.49%	87.18%
HPSS Directorate	75.47%	87.74%	77.10%	93.05%
Quality Nursing & Allied Profs Directorate	94.44%	94.44%	88.89%	100.00%
SPRs Directorate	100.00%	94.12%	100.00%	100.00%
WHO CC	98.18%	96.36%	96.36%	100.00%
Overall	80.96%	90.29%	82.47%	93.51%

Welsh Government target 85%; Public Health Wales target 95%

8.0 Risk Registers

There are a number of open Health and Safety Risks across the organisation. These are held on Directorate and Divisional Risk Registers. The risks are reviewed by the respective Directorates and by the Divisional Senior Management Team meetings at monthly meetings.

The table below summarises the number of health and safety risks currently managed at a Directorate and Divisional level. Please note this covers all

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new risks reported since the previous report up until 13 April 2022. Since the last report, three risks have been closed following review. Of the 15 open risks, there is one new risk reported since the last health and safety report. Details of these risks are included below-

Number of open Health and Safety Risks	17
Number of meeting target risk score	1 (ID- 987)
Number of risks not meeting target risk score	16 (ID- 978, 980, 720, 1108, 1152, 1169, 1240, 1199, 1201, 1238, 1241, 1248, 1267, 1345)
New risks since last Health and Safety Report	1345

For risks not meeting the target risk score, the Estates and Health and Safety Team continue to work with Health and Safety Leads across the organisation to ensure actions are being undertaken to mitigate the risk down to meet the agreed target score. Work is ongoing with the Chief Risk Officer to explore alternative and improved ways to communicate risks and provide assurance on the action that is being undertaken.

New risk updates:

Risk ID 1345- Microbiology- There is a risk that staff will experience dry eyes/mucous membranes (leading to local irritation/infection) due to dry air/low humidity in the lab (currently at 30-40%). Currently affecting 3-4 staff members (see DATIX 19413). This could lead to additional and longer term staff absences.

Health Board estates investigating and further advice sought from health board H&S colleagues. Staff have been referred to Occupational Health.

Control measures:

- Staff encouraged to take regular breaks
- Staff wearing glasses instead of contact lenses
- advice from OH received – currently being implemented

Actions: Advice has been sought from Health Board Health and Safety and currently awaiting a response. This will be implemented upon receipt.

9.0 Alerts and Notifications

The organisation receives a number of alerts under the headings:

- Safety Action Bulletins (SAB)
- Medical Device Alerts (MDA)
- Drug Alerts (DA)
- Chief Medical Officer Alerts (CMO)
- High Voltage Hazard Alerts (HVHA)
- Estates and Facilities Alerts (EFA)

All of these alerts are managed by the Quality, Nursing and Allied Professionals Directorate and a report submitted to the Quality and Safety Committee for information.

The organisation also receives a number of notifications under the headings:

- Specialist Estates Service Notifications (SESN)
- Publication Notices (PN)

These notifications are sent out directly from NHS Wales Shared Services Specialist Estates Service as Specialist Estates Service Notifications (SESN) and Publication Notices (PN) to the Estates, Safety and Facilities Division. For the reporting period, a total five have been received and are detailed in Table 3.

Table 3. Specialist Estates Service Notifications received.

Date Received	SESN No. / PN No.	SESN Description	Action
03/01/22	SESN 22-01	Fire Safety Audit System\SESN 22-01	No Action Required –m PHW exempt from reporting
05/01/22	SESN 22-02	Reinforced Autoclaved Aerated Concrete (RAAC)	Estates reviewed for the identification of properties within the scope of the alert and structural engineer engaged to review construction. Further advice sought for NWSPP re sites where PHW are hosted.
22/01/22	SESN 22/03	Electrical Resilience Survey 2021	Resilience proforma completed for return to NWSPP
16/03/22	SESN 22-04	NHS Estate in Wales - Fire Statistics Report	Circulated to PHW Health & Safety

		Fire Incidents And Unwanted Fire Signals 2021	Group members for information
17/03/22	SESN 22-05	2023 Rating Revaluation	Nomination of estates & Finance representative provided to support revaluation exercise

10.0 Summary

The organisation has a number of processes in place for maintaining and monitoring health and safety compliances so that assurance can be provided and any gaps identified with the appropriate actions required.

In light of the risks of Covid-19 transmission we have taken independent health and safety advice, completed risk assessments and reviewed these and addressed actions to ensure our workplaces are Covid safe and continue to monitor compliance and adjust to ensure compliance with regulations. Regular spot checks are taking place and Health and Safety leads are regularly visiting buildings across the estate to address staff concerns and implement actions as necessary. In light of the easing of restrictions, we are in the process of reviewing the remaining restrictions in Public Health Wales.

Incidents and RIDDOR's are actively managed, with lessons learned identified and shared. Audit schedules are in place, undertaken and results acted upon to ensure gaps in process are resolved. Risk registers have been reviewed with issues identified and actions outlined to mitigate risks.

Processes are in place to monitor policy and procedure reviews and/or development. There are also systems in place to action alerts and notifications as appropriate for the organisation.

The Group is asked to:

- **Note** the report; and
- **Receive assurance** that appropriate actions are being undertaken to address issues raised in this report

Section 2- Additional workplace safety measures

Since the *Health Protection (Coronavirus Restrictions) (Wales) Regulations 2020* came into force in Wales on 07 April 2020, Public Health Wales has been working across its estate to ensure compliance and maintain the safety of staff and service users. Following announcements by Welsh Government on the easing of restrictions on 28 March 2022 and 15 April 2022, Public Health Wales has interpreted the guidance to continue to ensure the safety of staff and service users.

This section also includes specific updates from Screening and Microbiology.

Further Covid-19 actions undertaken since previous update

Since the previous update, the Estates and Health and Health and Safety Team, in conjunction with Infection Prevention and Control Leads and Health and Safety Managers, have continued to put in place measures in line with guidance to ensure the safety of our staff and service users. Details of these actions have been included below.

Changes within the workplace

Since the start of the pandemic, the Estates and Health and Safety team, working alongside the Lead for Infection Prevention and Control and service leads have implemented a number of measures to ensure the safety of both staff and service users. These measures were informed by workplace risk assessments that were undertaken by an independent Health and Safety consultant and actions arising from the risk assessments have been implemented.

Following the relaxation of the Covid-19 restrictions in March and April 2022, Public Health Wales has reviewed the guidance and communication has been issued to all staff ([Welcoming you back to our workplaces \(sharepoint.com\)](#)) following discussions between the Executive Team, Health Protection, Infection Prevention and Control leads and Health and Safety. To support staff to feel safe and return to the workplace to work and collaborate the following changes were agreed:

- Social distancing will reduce to 1m in patient and public facing settings.
- Social distancing will reduce to 1m in office / non patient and public facing settings.
- Face coverings in clinical settings will remain mandatory.
- Face coverings should also be worn in all other settings, unless you are at your desk, as per the current guidance.

- Asymptomatic staff are no longer asked to 'flow as you go' before attending workplaces.
- Lateral flow testing remains available for those with symptoms, and we ask that you self-isolate if positive, as per Welsh Government advice.

These restrictions remain over and above those of other organisations, however due to the high numbers of Covid-19 community transmission, it was felt this was a proportionate approach and measures such as social distancing will continue to be reviewed. Any further changes will then be communicated to staff as required.

With the relaxing of restrictions, in person training will now recommence across our sites and measures such as one way systems and room capacities will be reviewed in line with the new guidance.

It is likely over the coming weeks, restrictions will be eased further, supporting the return of staff to the workplaces and the 'Work how it works best' pilot

Compliance monitoring- Business are still required to undertake risk assessments to reduce to the risk of infection to staff and service users. These are currently being updated to reflect the changes in the guidance. As a result, compliance monitoring has been a key element of ensuring our premises remain safe for staff and service users. This has continued across the estate through our Health and Safety leads and will continue to be reviewed until further requirements are relaxed.

Our estate across Public Health Wales continues to be sparsely populated resulting in good compliance adherence across the estate. As regulations are lifted, we will continue to emphasise the requirement to follow the guidelines and we will be communicating with staff on the importance of following the local arrangements.

Staff working from home- Due to previous restrictions, all staff that are not, as part of their role, required to be on a specific site have been encouraged through Directorates / Divisions to work from home in line with the Welsh Government guidance. This is to reduce the risk of spreading infection and ensure that those who do need to be in the workplace remain as safe as possible. A large proportion of staff have been enabled and continue to be supported to work from home and guidance has been provided to managers and employees through the staff bulletins and internet pages which also includes guidance on home working, setting up IT equipment and using skype. Microsoft Teams, One Drive and other O365 packages have also been rolled out across the organisation providing another communication tool for staff. Going forward we are expecting that now restrictions have eased more staff using our workplaces and through the 'Work How it works best' pilot, staff we be able to discuss there

preferred ways of working with their line manager that intend to meet the needs of both individuals and their teams. Whilst we transition to these new ways of working, the Estates and Health and Safety Division will continue to review the impact on our estate including how it is being used and our equipment requirements to continue to support staff.

Since the start of the pandemic, the Estates and Health and Safety Team have been working closely with the Information Management and Technology (IM&T) Division to support requests for equipment to enable working from home. As at 19 April 2022, 2081 pieces of equipment have been loaned to staff. This includes requests for provision of a monitor, key board, mouse, head sets and chair following review of a completed DSE assessment.

Additional training for staff

To ensure staff can continue to work safely whilst at home we have procured additional online training to ensure staff are aware of how to set up their work environments and we have revised the Display Screen Equipment assessment process that is incorporated into the training.

Currently 37% of staff have completed the training (an increase of 2%) from figures reported previously following the roll out in January 2022. It should be noted this includes all staff, some of which, due to the nature of their roles are not able to work from home. Compliance with this training will be a key element of 'Working how it works best' pilot.

Covid-19 and Influenza Vaccinations

Influenza surveillance

Influenza vaccine season ended on 31 March 2022. Low levels of circulating flu in the community. Uptake sits at 46.2% for all staff and 43.8% for frontline staff. A staff questionnaire has been shared to help evaluate the season and inform next years.

COVID Vaccine surveillance (as at 04 April 2022)

2258 current PHW employees have been given at least their 1st dose (94%) and 93% fully vaccinated. Of the frontline workers, 96% have been given at least their 1st dose and 95% fully vaccinated. 4% remain unvaccinated. 85% of workforce including 85% frontline workers have received the Booster.

Screening update

Services have reduced to 1m social distancing and risk assessments have been updated to reflect the changes across the Screening sites.

Microbiology update

The following actions are currently being progressed within Microbiology:

- Three RIDDORS have been reported from Microbiology in the last 12 months. These have been progressed to ensure lessons learned and any recommendations have been implemented by Microbiology. Details are included in the main report on page 5.
- A site visit has taken place at Bangor to determine required specification of replacement autoclave. A Statement of Need to be developed and progressed through Capital Planning Group, working alongside Estates and Health and Safety.
- The Singleton Containment Level 3 laboratory failed its annual sealability test resulting in closure of the service for 6-7 weeks whilst remedial work was undertaken. The remedial work undertaken by external contractors was to install a new ceiling and change the location of services to the room. During this time period the service was supported by UHW and Carmarthen laboratories. The Health and Safety team invested a large amount of time both supporting and controlling this work for the site and retesting the room before external testing was applied. In response to this service failure the Health and Safety team has hired positive pressure testing equipment to allow in-house testing in anticipation of the external contractor testing for assurance and pre-emptive remedial works. It should be noted that the failure of the Singleton containment level 3 room was substantial. This indicates a shift in the room's structure. At the time the outer building cladding was being removed and replaced and this may have had an impact due to the room's location. The room was not completely sealed as a result of the remedial work but has been sealed to suit the requirements of a fumigation. This has led to specific requirements should a fumigation be required such as evacuation of certain aspects of the building and updated monitoring of the fumigant.
- Efficacy testing of the network of containment level 3 rooms has been commissioned and is due to start week commencing April 15th in co-ordination with the sealability testing schedule.
- Training and competency sign off of super users to support competency in high risk areas.
- Recruitment commenced of replacement for Regional Health and Safety Lead for the S.E Region (Cardiff).