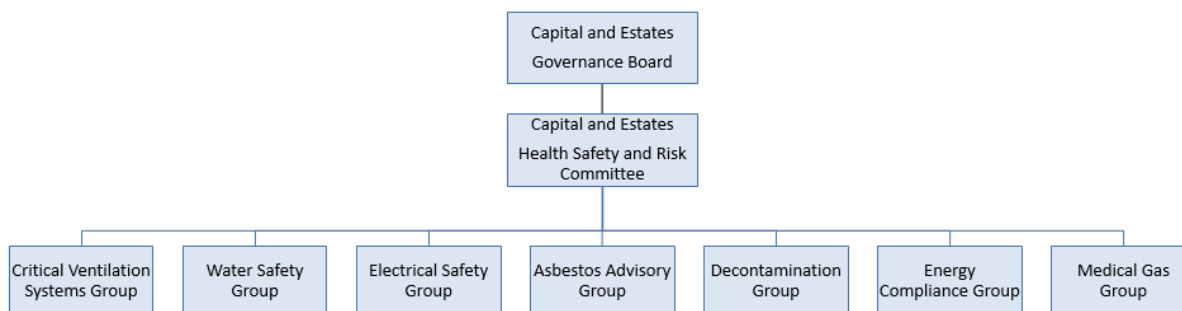


1 ESTATES AND CAPITAL GOVERNANCE ARRANGEMENTS

Estates and Capital governance groups meet on a quarterly basis and are set out with the following reporting structure:



Within Estates, responsibility for governance lies with the Assistant Director of Capital and Estates and the Senior Management team. A number of staff are employed specifically to support the compliance agenda.

Clear responsibilities and accountabilities for certain aspects of the estates function are set out in a series of Health Technical Memoranda (HTM) and include roles for 'Designated/Responsible Persons', 'Authorised Engineers (AE)', 'Authorised Persons (AP)' and 'Competent Persons'. A full list of the people currently fulfilling the AE and AP roles is available on request.

The governance and compliance agenda for both Capital and Estates matters is monitored and audited via the Capital and Estates Governance Board.

1.1 **The Estates and Capital Governance Board** is chaired by the Assistant Director of Planning (Capital and Estates) and receives S-Bar reports covering the following areas of business for discussion and direction:

- A report from the Chair of the Estates and Capital Health, Safety and Risk group covering moderate and high level risks from the following sub-groups: Decontamination, Medical Gas (MGPS) Safety, Heating and Ventilation, Water Safety, Electrical Safety, Health and Safety, Asbestos, COSHH, Capital Team Report, Fire Report and any other viable risks.
- Receive a summary of action plan compliance from the Shared Services Wales WHTM audit reports for CTMUHB.
- Receive a report on the performance of statutory and mandatory planned preventative maintenance and helpdesk requirements.
- To receive and discuss the WHTM required training matrix (Annex C) and the directorate required training matrix (Annex B).
- To receive the schedule of Estates and Capital governance meetings.
- To receive Estates and Capital policies for approval.
- To receive an update on audits and legislation.

Moderate and high level risks and queries from the Estates and Capital Governance Board feeds the Integrated Governance Quarterly Exception Report which is circulated to Executive level.

1.2 The Capital and Estates Health Safety and Risk Group

The Capital and Estates Health, Safety and Risk Group is established to provide an operational forum to address areas of health, safety, risk management and areas of concern surrounding both the Capital and Estates departments. The group is chaired by the Head of Estates and is attended and represented by the following groups of staff: Estates Operational Maintenance Managers; Health and Safety Coordinator; Head of Assets, Governance and Technical Services; Senior Fire Officer; Estates Officers; Operational Supervisors; Compliance Manager; Facilities and Estates Compliance Manager; Capital Team Project Manager; Estates Administration and Staff Representatives.

The group receives S-Bar format reports from the Chairs of the following Estates Governance sub-groups to highlight any moderate or high level risks or concerns discussed at those groups: The Critical Ventilation Systems Compliance group; Asbestos Advisory group; Medical Gases Advisory group; Electrical Safety group and the Water Safety Group.

The group is also formed to discuss and escalate the following areas of operation; Safe Systems of Work - Operational procedures, DATIX risk registers & risk reports, Capital & Estates adverse incidents and statistics, lessons learned and sharing issues, non-patient safety incident risks & claims report, safety action bulletins SABS, Staff Side issues & concerns and to review progress against the Estates Compliance Score Card report summaries; to ensure where reasonably practical that the HTM guidelines and Shared Services audit recommendations are implemented in respect of critical ventilation systems throughout the health board.

The Chair of the Capital and Estates Health, Safety and Risk group produces a quarterly S-Bar report of high level risks and issues, which is reported to the Capital and Estates Governance Board.

1.3 Asbestos Advisory group

The Asbestos Advisory Group is constituted to manage and monitor asbestos issues within the Health Board's premises in order to comply with the control of Asbestos Regulations 2012. The group is chaired by the Estates Compliance Manager for Asbestos and meets on a quarterly basis. The group is attended by the following: Head of Assets, Governance and Technical Services; Head of Estates; Operational Estates Managers; Capital Team Project Manager; Head of Operational Health Safety & Fire; Head of IT; Head of Data Networking; Primary Care Manager; Facilities and Estates Compliance Manager; Estates Administration and Staff Side Representatives.

The group is also formed to discuss and escalate the following: to review the asbestos management plan (AMP) and associated procedures; to review the implementation of safe systems of work and permit to work system; to keep up to date with statutory and mandatory asbestos related legislation; to ensure that the asbestos risk registers are current; to develop asbestos related emergency response systems; to ensure that all asbestos containing materials are inspected by a competent person at intervals determined by the risk assessment; to ensure

that staff are informed of the hazards associated with asbestos; to review progress against the Estates asbestos compliance score card report; to ensure that all relevant staff receive appropriate training and to ensure that there is an adequate flow of information throughout the Directorate.

Adherence of the group is monitored internally by an annual audit of the Asbestos Compliance Score Card system and reported to the Asbestos Advisory group and by summary the Estates Health Safety and Risk group on a quarterly basis. Moderate and high level risks identified by this audit are published and managed via the DATIX Risk system.

External assurance is provided by way of external audit to ISO14001 Environmental Standard and a rolling programme of inspections for asbestos containing materials ACM which is updated into the MICAD asbestos register for review by internal staff and contractors.

The group Chair is responsible for preparing S-Bar format reports for submission to the Estates Health Safety and Risk group, from which any moderate or high level issues are escalated through the Estates Governance Board via the Integrated Governance Quarterly Exception Report. The Head of Health and Safety reports to the Quality Safety and Risk Committee.

1.4 Critical Ventilation Systems Compliance Group

The Critical Ventilation Systems Compliance Group has been constituted to oversee the management of Critical ventilation systems throughout the Health Board.

The group is chaired by the Head of Estates and the membership includes the following: Shared Services Authorising Engineer; Cardiology representative; Critical Ventilation Authorised Persons; Endoscopy representative; Facilities and Estates Compliance Manager; Head of Assets Governance and Technical Services; Senior Projects Manager (PCH); Head of Midwifery; Head of Operational Health Safety and Fire; HSDU Manager; IPCC Lead/Senior Nurse; IPC Doctor/Consultant Microbiologist; Pathology specialist representative; Pharmacy representative (Aseptic Suite); Radiology representative; Operational Estates Managers; Senior Theatre Nurses; Administrator.

The duties of the group include: updating and reviewing the ventilation policy and relevant procedures; reviewing all audit reports on Health Board critical ventilation systems and related building fabrics undertaken by Shared Services or other consultants on regular intervals; to ensure that action plans are formulated and acted upon to address any shortcomings identified following audits; to review planned preventative maintenance tasks; reviewing and mitigating against risks associated with the provision, installation and use of ventilation systems serving critical areas; to ensure risk assessments for critical ventilation systems are current and recorded on the DATIX risk management system; to review and advise on critical ventilation related training requirements; to review progress against the Estates ventilation compliance score card report; to ensure where reasonably

practical that the HTM guidelines and Shared Services audit recommendations are implemented in respect of critical ventilation systems throughout the health board.

Adherence of the group is monitored internally by an annual audit of the Critical Ventilation Compliance Score Card system and reported to the Critical Ventilation group and in summary to the Estates Health Safety and Risk group on a quarterly basis. Moderate and high level risks identified by this audit are published and managed via the DATIX Risk system.

Annual verification audits are carried out to Health Board critical ventilation plants by Shared Services Wales Specialist Engineers to HTM-03 standards, with recommendations actioned and reported through the Critical Ventilation Compliance group with a summary of recommendations submitted to the Estates Health Safety and Risk group.

The group Chair is responsible for preparing S-Bar format reports for submission to the Estates Health Safety and Risk group, from which any moderate or high level issues are escalated through the Estates Governance Board via the Integrated Governance Quarterly Exception Report.

1.5 Electrical Safety group

The HV/LV Advisory Group has been constituted to manage and monitor all aspects of Electrical Safety throughout the Health Board premises in order to ensure compliance with the Electricity at Work Regulations and relevant Hospital Technical Memorandum (HTM). The 2017 version of HTM06-01 now supports this process and the HV/LV advisory group is formally called the Electrical Safety Group (ESG)

The group is chaired by the Head of Estates and the membership includes the following: Head of Assets Governance and Technical Services; Shared Services Wales Appointed Authorising Engineers; Appointed Authorised Persons; Prince Charles Hospital Refurbishment Programme Director; Capital Team Project Manager; Head of Operational Health Safety and Fire; Head of IT Infrastructure; Administration; and Staff Representatives.

Objectives for the group include: reviewing relevant policies and procedures; develop and review the management plan, including the implementation of safe systems of work; keep up to date with statutory and mandatory legislation; ensure that the risk assessments are current; develop systems for emergency work; identify electrical safety issues; ensure that there is an adequate information throughout the Health Board; ensure staff receive appropriate training; and assess all aspects of electrical safety and resilience required for the safe development and operation of health care premises; to review progress against the Estates High and Low Voltage Compliance Score Card report; to ensure where reasonably practical that the HTM guidelines and Shared Services audit recommendations are implemented in respect of critical ventilation systems throughout the health board.

Adherence to the electrical safety policy is monitored internally by an annual audit of the Estates Low Voltage and High Voltage Compliance Score Card system and reported to the electrical safety group and in summary to the Estates Health Safety

and Risk group on a quarterly basis. Moderate and high level risks identified by this audit are published and managed via the DATIX Risk system.

External audits of high and low voltage electrical systems are carried out every three years by Shared Services Wales Authorising Engineers to HTM-07 standards, with recommendations actioned and reported through the Electrical Safety Group with a summary of recommendations submitted to the Estates Health Safety and Risk group.

The group Chair is responsible for preparing S-Bar format reports for submission to the Estates Health Safety and Risk group, from which any moderate or high level issues are escalated through the Estates Governance Board via the Integrated Governance Quarterly Exception Report.

1.6 Medical Gases Advisory group

The Medical Gases Advisory Group has been constituted to oversee the management of Medical Gases throughout the Health Board premises in order to ensure compliance with the relevant Hospital Technical Memorandum HTM-02 for Medical Gas Pipeline Systems. The group is chaired by the Head of Assets Governance and Technical Services and the membership includes the following: Shared Services Specialist Advisor for Medical Gas Pipeline Systems (AE); Head of Estates; Authorised Persons for MGPS; Clinical Engineering representative; Facilities and Estates Compliance Manager; Medical Devices Trainer, Clinical Engineering; Capital Team Project Manager; Pharmacy representative; Nursing representative; Medical representative; Portering/Facilities representative; Dental representative; Pathology representative; Head of Operational Health Safety and Fire; Administration.

The group is responsible for updating and reviewing the medical gas policy, for reviewing and mitigating against risks associated with the provision installation and use of medical gas pipeline systems; to raise awareness of issues around the procurement, storage and use of medical gases; to review progress against the Estates Medical Gas Compliance Score Card report; to ensure where reasonably practical that the HTM guidelines and Shared Services audit recommendations are implemented in respect of medical gas systems throughout the health board.

Adherence of the group is monitored internally by an annual audit of the Medical Gas Compliance Score Card system and reported to the Medical Gases Advisory group and by summary to the Estates Health Safety and Risk group on a quarterly basis. Moderate and high level risks identified by this audit are published and managed via the DATIX Risk system.

External audits of medical gas pipeline systems are carried out every two years by Shared Services Wales Authorising Engineers to HTM-02 standards, with recommendations actioned and reported through the Medical Gases Advisory group with a summary of recommendations submitted to the Estates Health Safety and Risk group.

The group Chair is responsible for preparing S-Bar format reports for submission to the Estates Health Safety and Risk group, from which any moderate or high

level issues are escalated through the Estates Governance Board via the Integrated Governance Quarterly Exception Report.

1.7 Water Safety Group

The Water Safety Group (WSG) has been constituted to manage and monitor potential Legionella (also other water borne Bacteria) and Water Quality issues within Health Board premises in order to ensure compliance with WHTM 04-01 and L8-The Approved Code of Practice for Legionella Control and other relevant guidance. The group is chaired by the Head of Estates and the membership includes the following: Facilities and Estates Compliance Manager; Head of Health Safety and Fire; Consultant Microbiologist; Operational Maintenance Managers; Authorising Engineer for Water Safety; Capital Planning representative; Infection Prevention Control (IPC) Nurse; Senior Nurse representative; Nurse representative for Augmented Care; Aquatherapy Lead; Sterile Services Manager; Facilities Manager; IPC Support Officer; Primary Care representative; Estates Maintenance Staff; Localities representative.

The group is responsible for overseeing compliance to WHTM-04-01 and L8 to ensure effective ownership for all water quality management for all users, to determine the particular vulnerabilities of anyone at risk; to ensure the water safety plan (WSP) is kept under review including risk assessments and other associated documentation; to ensure all tasks indicated by the Water Safety Risk Assessments and other associated guidance are implemented; to keep up to date with statutory and mandatory legislation and training; to review progress against the Estates Legionella compliance score card report; to ensure where reasonably practical that the HTM guidelines and Shared Services audit recommendations are implemented in respect of critical ventilation systems throughout the health board.

Adherence of the group is monitored internally by an annual audit of the Water Safety Compliance Score Card system and reported to the Water Safety group and by summary the Estates Health Safety and Risk group on a quarterly basis. Moderate and high level risks identified by this audit are published and managed via the DATIX Risk system. The Water Safety Group is also responsible for commissioning independent water safety risk assessments (WRAs) for all properties together with the management of recommendations and risks from those assessments.

The group Chair is responsible for preparing S-Bar format reports for submission to the Estates Health Safety and Risk group, from which any moderate or high level issues are escalated through the Estates Governance Board via the Integrated Governance Quarterly Exception Report. The Chair reports to the Infection Prevention and Control Committee meeting (IPCCM) which reports to the Quality Safety and Risk Committee.

1.8 Decontamination Committee

The Decontamination committee meets quarterly has is constituted to ensure that the Health Board meets its obligation to ensure a structured approach to the

decontamination and safe use of medical devices prior to use and that risks associated with decontamination facilities and processes are adequately managed. The committee is chaired by the Acting Operational Lead for Decontamination (Estates Service Project Manager) and is attended by the following: the Authorising Engineer for Decontamination; Lead Infection Prevention and Control (IPC) Nurse; Consultant Microbiologist/IPC Doctor; Head of Estates; Operational Estates Managers; HSDU Manager; CSSD Production Manager; Theatre Managers; Superintendent Radiographer for Ultrasound; the Head of Cardio Pulmonary Diagnostics; Head of Nursing PCH; Head of Nursing RGH; Endoscopy Sister PCH; Endoscopy Sister RGH; Health and Safety Advisor; Senior Nurse for Medicine; Facilities and Estates Compliance Manager and the Head of Clinical Engineering.

Objectives for the group include the provision of strategic direction across the organisation for the promotion of safe and effective decontamination methods; implementation of a Health Board wide decontamination policy; monitoring compliance of facilities, equipment, staffing and training with the relevant legislation, standards and guidance e.g. WHTM 01-06, through external and/or internal audits against standards, including development and monitoring of action plans; establishment of Task and Finish groups to look at various issues including endoscopy and bench top sterilizers; identification of and action towards resolving areas of non-compliance or risk in relation to decontamination; ensuring that there are robust training programmes available to staff who engage in decontamination functions both inside and outside HSDU/CSSD; advising on the purchase of new equipment for decontamination such as washer-disinfectors and AER's; advising on decontamination requirements as part of the purchasing process for new medical or surgical equipment; to review progress against the Estates Decontamination Compliance Score Card report; to ensure where reasonably practical that the HTM guidelines and Shared Services audit recommendations are implemented in respect of decontamination systems throughout the health board.

The Committee reports to the Health Board's Infection Prevention and Control Committee and also link with the Clinical Governance Committee where appropriate. The Decontamination Committee Chair also provides a quarterly brief to the Head of Estates regarding Estates related decontamination issues and risks.

1.9 Energy Compliance group

The Energy Compliance Group has been constituted to manage and monitor all aspects of energy management throughout the Health Board in order to ensure compliance with the energy and water reduction targets agreed within the Health Boards Environmental Management System ISO14001.

The group is chaired by the Energy and Carbon Project Manager and meets on a quarterly basis. The group is attended by the following members: ISO14001 Environmental Manager; Non Exec Director; Head of Assets Governance and Technical Services; Facilities and Estates Compliance Manager; Environmental Management Advisor NHS Wales SSP; Operational Maintenance Managers; Administration; and Staff Representatives.

Objectives for the group include: To review energy management policies and procedures; to develop and review the implementation of energy, carbon and water conservation schemes; to keep up to date with the latest statutory and mandatory legislation and targets; to review progress against the Estates Energy and Carbon Compliance Score card report; to ensure where reasonably practical that the ISO14001 guidelines and Shared Services audit recommendations are implemented in respect of carbon emissions from Health Board properties; and to ensure there's adequate flow of information throughout the Health Board with staff receiving the appropriate training and awareness.

Adherence to the energy policy is monitored internally by an annual audit of the Energy and Carbon Compliance Score Card system and reported to the Energy Compliance Group and in summary to the Estates Health Safety and Risk group on a quarterly basis. Annual external audits for energy compliance include an external audit by Shared Services Wales on compliance with the carbon reduction credits (CRC) scheme; annual audit for compliance with ISO14001 by an independent external auditor; data is published every year for the Health Boards energy consumption, costs and carbon emissions into the Shared Services Wales estates and facilities performance management (EFPMS) system; and an annual external audit by Shared Services Wales of the environmental sustainability statement which is also published annually as part of the Health Board's annual report. Adherence to budget is managed through the Estates and Capital Financial meetings and through the Estates Corporate Business meetings.

The group Chair is responsible for preparing compliance reports for submission to the ISO14001 Environmental Management Steering group and the Estates Health Safety and Risk group; with energy performance against budget reported monthly through the Estates Senior Management Team meetings and Estates Finance meetings, with budget performance escalated through the Estates Corporate Business Meetings (CBMs).