



AGENDA ITEM

2.2.4

AUDIT & RISK COMMITTEE

CTMUHB ISO14001 EXTERNAL AUDIT REPORT

Date of meeting

17/08/2021

FOI Status

Open/Public

If closed please indicate reason

Not Applicable - Public Report

Prepared by

David Williams, Facilities Governance & Compliance Manager

Presented by

Russell Hoare, Assistant Director OSS (Facilities)

Approving Executive Sponsor

Chief Operating Officer

Report purpose

FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals

Date

Outcome

N/A

ACRONYMS

EMS

Environmental Management System

CTMUHB

Cwm Taf Morgannwg University Health Board

1. SITUATION/BACKGROUND

- 1.1 ISO 14001:2015 is the international environmental standard that specifies requirements for controlling those aspects of an organisation that have a significant impact on the environment, through an effective Environmental Management System (EMS). It is a requirement of Welsh Government that all Health Boards in Wales are accredited to ISO 14001:2015. The accreditation is on a three



year cycle with surveillance audits every year for Cwm Taf Morgannwg University Health Board (CTMUHB) to ensure that we maintain compliance.

- 1.2 In July 2021, CTMUHB had its final surveillance audit of the three year cycle. Following completion of the audit, CTMUHB has successfully retained the ISO 14001:2015 accreditation for all healthcare sites, with two minor non-conformities raised.
- 1.3 The attached ISO14001 external audit report and accompanying cover report highlight this result and provide further details of the audit findings for the committee to note.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 Following completion of the audit, CTMUHB has successfully retained the ISO 14001:2015 accreditation for all healthcare sites, with two minor non-conformities raised. Details of these minor non-conformities, together with actions, target dates and progress to mitigate are provided below.

Source	Type	Summary of Non Conformance	Action	Responsibility	Target Date	Closed Date	Status	Progress to mitigate
Ext Audit	Minor	7.5 - EMS Document Control Log. The EMS Document control log has not been maintained in full. Log is currently at Version 5 for the OCP (Operating Control Procedures) and the Operating Control. Procedure is at Version 7 verified by log entry and hard copy procedure. Documented information required by the environmental management system shall be controlled to ensure control of changes.	Review Document Control Log and update to correct version if applicable	Governance & Compliance Manager	04/07/2022 (By next external audit)		Partially closed	<u>Immediate Action</u> - Document Control Log reviewed and OCP version corrected during audit - Completed. <u>Follow-Up Action</u> - Undertake an internal audit of the Document Log to ensure all document versions are included and referenced correctly - Ongoing. (DW/RE 19/07/2021)
Ext Audit	Minor	8.1 - Operational Control, Prince Charles Hospital. During the Site Tour of external areas and Waste containers it was observed that litter and an unmarked plastic bottle containing fluid next to a surface water drain had not been cleared up. Unused paint pots were also observed not locked away in external lock up, stacked on the top of the lock up.	Maintain Schedule of litter picking activities as per PPM	Estates / Facilities / MCV ILG	04/07/2022 (By next external audit)		Partially closed	<u>Immediate Action</u> - Additional litter pick requested and undertaken during the audit - Completed. - Unmarked plastic bottle checked and liquid was water used by the waste team to wash hands. Estates Manager at PCH has agreed to install a hand sanitation station next to the temporary waste hold at PCH - Ongoing. - Used paint pots have been removed and disposed of, unused paint pots have now been locked away in the external lock-up. Also PCH Facilities / Estates corridor has



								<p>been cleared of unused equipment during audit - Completed.</p> <p><u>Follow-Up Action</u></p> <p>- Maintain Schedule of litter picking activities as per PPM and ensure that the PPM incorporates all required areas on sites - Ongoing.</p> <p>- Look at potential of implementing a site inspection log that managers can use to note any issues and then raise via Estates and Facilities Help Desks - Ongoing.</p> <p>(DW/RE 19/07/2021)</p>
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2.2 Notable high points by the auditor at the audit de-brief were:

- 2.2.1 Continued very good performance and monitoring in energy and carbon reduction, sustainable travel and waste (recycling, clinical, food etc.).
- 2.2.2 The organisation has demonstrated awareness of all compliance and applicable legislation and have arrangements in place to monitor any amendments.
- 2.2.3 Raised once again that the teamwork and approach to EMS processes very good and ISO14001:2015 was found to be well embedded within the organisation at all levels.
- 2.2.4 Great to see the Sustainability agenda being taken forward at CTMUHB from an Executive level.
- 2.2.5 Internal Communications methods are in place and effective, and where they are received from interested parties they are reported, reviewed and investigated. Actions identified are suitably addressed and actioned within defined timescales.
- 2.2.6 Praise given to the environmental initiatives that have been implemented by CTMUHB (e.g. Continued roll-out of LED lighting, continued progress with EV fleet vehicle installation, grounds and gardens biodiversity initiatives such as 'no-mow areas', Central Production Unit and minimising food waste etc.). Recommended that this good work should be communicated more through the organisation communication streams where possible.
- 2.2.7 Good contractor control, maintenance and record keeping practices from Estates regarding FGas, boiler, legionella, air handling units etc.
- 2.2.8 Overall, staff provided tremendous support to the audit process, from acute sites to the smallest of health centre premises audited.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 It is a requirement of Welsh Government for all Health Boards in Wales to achieve ISO14001:2015 accreditation for Environmental Management. The accreditation is on a three year cycle with surveillance audits every year for CTMUHB to ensure that we maintain compliance.



- 3.2 CTMUHB is one of the largest employers within the local area. In delivering our role as a health care provider we acknowledge our responsibility to maintain a high level of environmental performance, to conform to our compliance obligations and to set and fulfil our environmental objectives with an emphasis on continual improvement.
- 3.3 All staff and in particular all managers at all levels must be aware of and fully support our environmental responsibilities.
- 3.4 CTMUHB has successfully retained the ISO 14001:2015 accreditation for all healthcare sites, with two minor non-conformities raised to action and close by the next external audit (scheduled for July 2022). Details of these minor-non-conformities are included above.
- 3.5 By maintaining our certification to the ISO 14001:2015 environmental standard we can demonstrate and reaffirm the Health Board's commitment to minimise the impact of our activities upon the environment.
- 3.6 For more information visit the CTMUHB Environmental Hub on Sharepoint at <http://ctuhb-intranet/dir/Facilities/Env/layouts/15/start.aspx#/default.aspx>

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	Report notifies the committee of ISO14001 audit result only, no EIA required.
Legal implications / impact	Yes (Include further detail below)



	It is a requirement of Welsh Government that all Health Boards in Wales are accredited to ISO 14001:2015.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Ensure sustainability in all that we do, economically, environmentally and socially

5. RECOMMENDATION

- 5.1 The committee is requested to **NOTE** the result of the ISO14001:2015 audit and the findings within the accompanying audit report.