

AGENDA ITEM 5.2

QUALITY & SAFETY COMMITTEE

HIGHLIGHT REPORT FROM THE CHAIR OF THE HEALTH, SAFETY & FIRE SUB COMMITTEE

DATE OF MEETING	16 March 2023
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
PREPARED BY	Emma Walters, Corporate Governance Manager
PRESENTED BY	Dilys Jouvenat, Independent Member
EXECUTIVE SPONSOR APPROVED	Hywel Daniel, Executive Director for People

REPORT PURPOSE	FOR NOTING
	1 011 110 12110

ACRONYMS

None Identified.

1. INTRODUCTION

- 1.1 This report had been prepared to provide the Committee with details of the key issues considered by the Health, Safety & Fire Sub Committee at its meeting on 7 March 2023.
- 1.2 Key highlights from the meeting are reported in section 3.

2. PURPOSE OF THE HEALTH, SAFETY & FIRE SUB COMMITTEE

2.1 The purpose of this Sub-Committee is to:



- Advise and assure the Board and the Accountable officer on whether effective arrangements are in place to ensure organisational wide compliance of the Health Board's health and safety policy, monitor delivery against the health and Safety priority action plan and ensure compliance with the relevant standards for Health Services in Wales.
- This will be achieved by encouraging strong leadership in health and safety, championing the importance of a common sense approach to motivate focus on core aims distinguishing between real and trivial issues.

Where appropriate, the committee will advise the Board (through the Quality & Safety Committee) and the accountable officer on where and how, its health and safety management may be strengthened and developed further.

3. HIGHLIGHT REPORT

ALERT /	 The Fire Safety Report was received. Concerns were expressed regarding the low levels of compliance being achieved in relation to staff attending fire safety training sessions which presented a risk to the organisation Members noted that out of an available 4,290 spaces that had been made available between September 2022 – December 2022, only 1,100 of these spaces were taken up; Under the 'Any Other Business' section of the agenda concerns were raised in relation to the placement of patient beds in areas of wards not officially
ESCALATE	designated for patient care. Such instances were
	understood to have arisen due to the very challenging bed
	capacity issues being faced by CTM hospitals. The need for
	assurances around the establishment of robust clinical and
	operational risk assessments and corresponding action
	plans to mitigate the issues these unofficial bed areas were
	creating was felt to be a key issue along with the ability of
	staff to maintain their safety and the safety and dignity of
	their patients under such circumstances. As a result the
	Chair of the Health Safety & Fire Sub Committee suggested



	that these issues be escalated to the Quality & Safety Committee and this was agreed
ADVISE	 The Action Log was received and discussed. Members noted that arrangements had now been put into place for Care Group representation at all future meetings. It was noted that both Deputy Chief Operating Officers would be representing Care Groups at meetings moving forwards; The Head of Health, Safety & Fire Report was received. Members requested that further work was undertaken to strengthen responses provided against some of the risks identified in the report and noted that concerns remained in relation to Datix reporting issues and staff compliance against statutory and mandatory training requirements; The Health, Safety & Fire Performance report was received. Discussion was held in relation to the difficulties some staff were experiencing in relation to the difficulties some staff were experiencing in relation to updating their compliance against fire safety training on ESR which may be having a negative impact on compliance and it was noted that the Director for People would action the request to share a How To guide with Care Groups outlining how this task could be completed; The Organisational Risk Register report was received. Members noted that in relation to Risk 3993 - Fire Enforcement Notice at Princess of Wales Hospital, the meeting to discuss options for decanting that was to have taken place in January 2023 had been postponed by Welsh Government. Whilst it was accepted that the content of the Risk Register update reflected the position to January 2023, some of the risks items required updates as the current status set out in the report predated January 2023. It was noted that the Risk Register was updated on a bi-monthly basis and risk owners would continue to be asked to ensure timely updates were submitted in a timely manner. The Health Surveillance Programme Background Report was received. Members noted that the Maternity Services Team had been asked to undertake environmental monitoring in relation to the use of Nitrous Oxide and discussions were be
ADVISE	 against statutory and mandatory training requirements; The Health, Safety & Fire Performance report was received. Discussion was held in relation to the difficulties some staff were experiencing in relation to updating their compliance against fire safety training on ESR which may be having a negative impact on compliance and it was noted that the Director for People would action the request to share a How To guide with Care Groups outlining how this task could be completed; The Organisational Risk Register report was received. Members noted that in relation to Risk 3993 - Fire Enforcement Notice at Princess of Wales Hospital, the meeting to discuss options for decanting that was to have taken place in January 2023 had been postponed by Welsh Government. Whilst it was accepted that the content of the Risk Register update reflected the position to January 2023, some of the risks items required updates as the current status set out in the report predated January 2023. It was noted that the Risk Register was updated on a bi-monthly basis and risk owners would continue to be asked to ensure timely updates were submitted in a timely manner. The Health Surveillance Programme Background Report was received. Members noted that the Maternity Services Team had been asked to undertake environmental monitoring in relation to the use of Nitrous Oxide and discussions were being held with the Medical Gas and Pharmacy Teams regarding reducing the usage of Nitrous



ASSURE	 A report on Estates Safety & Compliance Report – Medical Gas Pipelines System Compliance was received. Members welcomed the work that had been undertaken to address the recommendations which was borne out by the attainment of a 'reasonable assurance' rating.; The Internal Audit Follow Up Review – Fire Safety Arrangements report was received. Members welcomed the progress that had been made to address the majority of recommendations and noted that a 'reasonable assurance' rating had been allocated to this area;
INFORM	 The minutes of the meeting held on the 12 October 2022 were received and approved; The Forward Work Programme for 2023 was received and approved; The Health, Safety & Fire Sub Committee Terms of Reference were ENDORSED for Quality & Safety Committee APPROVAL
APPENDICES	NOT APPLICABLE

4. **RECOMMENDATION**

- 4.1 The Quality & Safety Committee is asked to:
 - **NOTE** the report;
 - **APPROVE** the Terms of Reference for the Health, Safety & Fire Sub Committee.