



QUALITY & SAFETY COMMITTEE

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

DATE OF MEETING	24 May 2022
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

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 5 May 2022.
- 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 and fire safety policy, approve and monitor delivery against the Health, Safety and Fire 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 / ESCALATE	<ul style="list-style-type: none"> • A verbal update was provided in relation to the current position regarding the Health & Safety Executive Review into the incident that occurred at Maesteg Hospital. Members were advised that they will be appraised of a more detailed update outside the meeting and if timings align at the In Committee of the Quality & Safety Committee.
ADVISE	<ul style="list-style-type: none"> • The Head of Health, Safety & Fire Report was received. Members noted that a Five Year Equipment Replacement Plan and Business Case was in the process of being developed which would need to be considered alongside other capital projects that had been put forward. Members noted that if the Business Case was not approved in light of the current financial position, equipment would continue to be regularly inspected by staff who would notify the provider of any repairs that needed to be undertaken; • The Health & Safety Performance Report – Themes and Trends was received. It was noted that the Chief Operating Officer was keen to undertake a review of incident



rates and reporting culture given the high levels of variation identified within the report;

- The **Fire Safety Report** was received. In relation to the current Fire Enforcement Notice at Princess of Wales Hospital, Members noted that Welsh Government had paused the Capital Programme in relation to Princess of Wales Theatres as a result of the costs associated with the programme. It was suggested that a future In Committee discussion would need to be held on this matter to discuss the implications of this in greater detail;
- The **Organisational Risk Register** report was received. Members noted that the Head of Health and Safety has further updated the assigned H&S related risks in readiness for the May iteration of the Organisational Risk Register being finalised. The Chief Operating Officer advised that he will be meeting with the Assistant Director of Governance & Risk and Integrated Locality Group colleagues to discuss and review the current risk scoring and risk mitigations captured in the Organisational Risk Register.
- The **Bridgend Integrated Locality Group (ILG) Health, Safety & Fire Report** was received. Members noted that the Sunnyside Wellbeing Hub development had been delayed by 18 months and noted that a number of risk assessments had been undertaken on a number of community sites that would have closed and relocated their activity into the Sunnyside Development. One community site was a particular area of concern which would be discussed further by the Executive Team. Members noted that the Director of Digital was supporting the ILG in relation to the Digitisation of Records;
- The **Rhondda Taf Ely ILG Health, Safety & Fire report** was received. Concern was expressed in relation to the levels of Violence & Aggression incidents that had been reported at Royal Glamorgan Hospital. Concern was also expressed in relation to the water egress issues that is being experienced at Dewi Sant Hospital which was taking some time to address;
- The **Merthyr & Cynon ILG Health, Safety & Fire report** was received. It was noted that staff within the Outpatient and Emergency Departments continued to work in challenging environments as a result of the work on the Ground and First Floor project which is having an adverse

	<p>effect of staff health and wellbeing. Assurance was provided that Senior Leadership presence was in place on the site to provide staff with additional support.</p> <p>In relation to compliance with statutory and mandatory training, the Chief Operating Officer and Executive Director for People agreed to meet to discuss alternative ways to improve access to training.</p> <ul style="list-style-type: none"> • A verbal update was provided in relation to Primary Care. Members noted that the Team were in the process of developing a fire action plan and water action plan;
ASSURE	<ul style="list-style-type: none"> • The Internal Audit Review into Fire Safety Management Progress Report was received. Members welcomed the progress that had been made to date; • The Estates Safety & Compliance report was received. The report focused on low voltage and high voltage electrical compliance across sites. Members welcomed the reasonable assurance rating that had been given
INFORM	N/A
APPENDICES	NOT APPLICABLE

4. RECOMMENDATION

4.1 The Quality & Safety Committee is asked to:

- **NOTE** the report.