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Cardiff and Vale  
University Health Board

**CONFIRMED MINUTES OF THE HEALTH AND SAFETY COMMITTEE HELD  
AT 9.30am ON 25 APRIL 2017 IN THE CORPORATE MEETING ROOM, HQ,  
UNIVERSITY HOSPITAL OF WALES (UHW)**

**Present:**

**Martyn Waygood**  
Stuart Egan

**Independent Member – Legal (Chair)**  
Independent Member – Trade Union/Health and  
Safety Staff Lead

**In attendance:**

Charles Dalton  
Fiona Jenkins

Head of Health and Safety  
Director of Therapies and Health Sciences (from  
agenda item 17/034)

Fiona Kinghorn  
Catherine Salter  
Geoff Walsh  
Peter Welsh

Interim Director of Public Health  
Staff Representative (RCN)  
Director of Capital, Estates and Facilities  
Director of Corporate Governance

**Apologies:**

Carol Evans  
Claire Radley

Assistant Director of Patient Safety and Quality  
Assistant Director of Organisational Development

**Secretariat:**

Rachael Daniel

Health and Safety Adviser

**PART 1**

**HSC: 17/027**

**WELCOME AND INTRODUCTIONS**

The Chair welcomed all present to the meeting. Mr Waygood referred to the number of members who were absent from the meeting and the number of apologies not received.

The Director of Corporate Governance informed the Committee that although Mr Egan now attended the Committee in his capacity as Staff Representative Lead his Health Board role as Independent Member – Trade Union enabled the Committee to be quorate and subsequently be able to approve the Policies on the agenda.

**HSC: 17/028**

**DECLARATIONS OF INTEREST**

The Chair invited Committee Members to declare any interest in the proceedings included in the agenda. None were declared.



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## **HSC: 17/029          MINUTES OF PREVIOUS MEETING**

The minutes of the Health and Safety Committee held on the 24 January 2017 were **APPROVED** and **ACCEPTED** as a true record.

The Interim Director of Public Health referred to page 12 of the minutes and noted it was reported at the time as purchasing cigarettes but in fact should be purchasing e-cigarettes.

## **HSC: 17/030          UPDATED ACTION LOG**

The Committee **RECEIVED** the Updated Action Log from the previous meeting. The following updates were provided:

- HSC: 16/030 – the Director of Capital, Estates and Facilities informed the Committee it was not strictly a ‘permit to work’ that was being trialled as ultimately there would be too many to effectively manage, so a ‘permit to access’ had been introduced which covered a multitude of issues. Mr Walsh advised problems were still occurring with Contractors who abused the system and a number of yellow and red cards had been issued. He added problems were further exacerbated by contractors who were not under the control of the Estates Department and subsequently any schemes will now have to come through him for signing off.

The Interim Director of Public Health queried whether guidance could be issued to Clinical Boards, the Health and Safety Adviser confirmed guidance had already been produced and issued following the Operational Health and Safety Group meeting in March and had also been raised at the Clinical Board’s Health and Safety Group meetings.

The Trade Union Representative - RCN queried whether the Training for Managers Course would include the Contractor Control Policy, the Head of Health and Safety confirmed it would.

The Independent Member – Trade Union queried whether any other Health Boards were experiencing similar problems, Mr Walsh advised no other Health Board had an estate similar to ours so was difficult to benchmark against. He added it was disappointing that a number of breaches were through our own staff not managing the contractors correctly. Mrs Kinghorn requested whether a trend analysis on the number of yellow and red cards issued could be brought to the next meeting, Mr Walsh confirmed this could be produced.

### **ACTION – Mr G Walsh**

- HSC: 16/051 – the Head of Health and Safety informed the Committee 63 hoists that were either obsolete or in poor condition were being replaced following a capital investment of £400k and thanked Mr Walsh for his assistance in taking this forward.

- HSC: 17/006 – the Chair informed the Committee the Assistant Director of Organisational Development had requested clarification on what assurances the Committee required in respect of the Employee Wellbeing Service.

Mr Waygood clarified concern was expressed at the last meeting that the external service was ceasing and as a result whether the same level of accessibility to services would still be available to staff and that they would still receive continued support.

- HSC: 17/013 – the Head of Health and Safety informed the Committee each Clinical Board had been written to advising devices would not be removed unless risk assessments had been completed and identified suitable alternative arrangements were in place. Mr Dalton highlighted compliance usage was currently at 70%.

The Independent Member – Trade Union informed the Committee the devices were not classed as personal protective equipment under the Regulations, however staff side are clear if the risk assessment states a device is required then staff must use them. This was endorsed by the Committee.

#### **HSC: 17/031                    CORPORATE RISK ASSURANCE FRAMEWORK DOCUMENT (CRAF)**

The Director of Corporate Governance informed the Committee the status of the CRAF had not changed since the last meeting. Mr Welsh advised a Risk Management Development Day was being held on Thursday 27<sup>th</sup> April which would look at how risk was managed within the Health Board. The outcomes from the day would be reported to the May Board meeting.

Mr Welsh queried the current status of passenger lifts across the Health Board, the Director of Capital, Estates and Facilities advised the position had improved however the risk rating related to the age and condition of the lifts and a replacement programme was required. Mr Walsh added the All Wales maintenance and servicing contract was currently being reviewed.

The Corporate Risk Assurance Framework Document was **RECEIVED** and **NOTED** by the Committee

#### **HSC: 17/032                    ENFORCEMENT AGENCIES CORRESPONDENCE REPORT**

The Head of Health and Safety informed the Committee one new issue had arisen since the last meeting. Mr Dalton advised an incident occurred when a contractor's van was reversing out of the old Emergency Admissions Road and struck a member of staff walking to the Medical Physics building resulting in a fracture of the elbow and nose. The incident was reported to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and

Dangerous Occurrences Regulation (RIDDOR) and the Health Board was contacted by the HSE for further information.

The incident was fully investigated and remedial actions identified, this was then shared with the HSE. Whilst the HSE confirmed the proposed remedial actions were suitable and sufficient and closed the incident on the basis of the work being completed, they did highlight that the Health Board did not have a plan that considered pedestrian safety. It was agreed an overall strategy would be developed by the Head of Health and Safety and the Director of Capital, Estates and Facilities.

### **ACTION – Mr C Dalton and Mr G Walsh**

The Independent Member – Trade Union thanked Mr Walsh and his team for installing the new beacons on the pedestrian crossings in University Hospital Llandough.

Mr Dalton advised the legionella incident had now been closed and the enforcement notice rescinded.

Mr Dalton also suggested that as no further correspondence had been received from the HSE in respect of passenger lifts that this issue would no longer be included in the report, this was **ENDORSED** by the Committee.

The report was **RECEIVED** and the Committee **AGREED** that appropriate actions were being pursued to address the issues raised.

**ASSURANCE** was provided by:

- The continued investigations, actions and monitoring referred to within the report.

### **HSC: 17/033          FIRE SAFETY ANNUAL REPORT**

This item was deferred to the July meeting.

### **HSC: 17/034          FIRE SAFETY MANAGEMENT AND ENFORCEMENT REPORT**

The Director of Capital, Estates and Facilities highlighted to the Committee one enforcement notice for Whitchurch Hospital was still in force and would not be rescinded until the site was closed.

The Independent Member – Trade Union advised of an issue that was being continually raised on workplace inspections. Mr Egan stated fire doors were being wedged open and when challenged staff advised that they had been informed by the Fire Officer that as long as the room was occupied at the time this was acceptable. Mr Egan's concern was that staff representatives would not be aware of this and a clear steer from the Fire Officers was required.

The Trade Union Representative – RCN added it was agreed at the Operational Health and Safety Group meeting that a one page guidance would be developed that would be shared with the Clinical Boards and staff representatives. Mr Walsh agreed this would be helpful and would progress with the Senior Fire Safety Adviser.

### **ACTION – Mr G Walsh**

The Chair expressed his concern at the low compliance for fire safety training and whether this should be brought to the attention of the Board. Mr Egan added a combination of methods to deliver the training was required and further thought needed to be given on how this could be achieved. The Head of Health and Safety suggested this was taken to both the Fire Safety Group and the Deputy Fire Safety Managers Group so that a strategic plan to improve compliance could be developed. This was **AGREED** by the Committee with feedback at the next meeting.

### **ACTION – Mr C Dalton**

The report was **CONSIDERED** by the Committee in relation to the on-going work to meet the requirements of fire enforcement compliance.

**ASSURANCE** was provided:

- that identified fire enforcement compliance and safety were being appropriately managed.

### **HSC: 17/035                      HEALTH AND SAFETY EXECUTIVE PRIORITY ACTION PLAN EXCEPTION REPORT**

The Head of Health and Safety informed the Committee two new red areas had been added to the plan, these were in relation to:

- Development of a Manager’s Training Course.
- Monitoring Schedule

The Independent Member – Trade Union informed the Committee the Health and Safety Executive were focusing on three key areas, these being Stress, Musculoskeletal (MSKs) and Occupational Lung Disease and queried whether the Health Board should also be considering HSE prioritised areas. The Trade Union Representative – RCN confirmed the Maximising Attendance Group was also focusing on Stress and (MSKs) via multi disciplinary teams.

The Interim Director of Public Health added assurances was required from the Health and Wellbeing Group that policies were up-to-date and the issues being addressed. The Health and Safety Adviser stated the Management of Stress and Mental Health Wellbeing in the Workplace Policy was to be presented to the July Committee meeting as it was due for renew and the Chair of the Health and Wellbeing Group was also a member of this Committee.

The exception report was **RECEIVED** and **CONSIDERED** by the Committee.

**REASONABLE ASSURANCE** was provided by:

- the demonstration of progress against each strategic area and highlighting further actions required within set timescales.

**HSC: 17/036            MANAGEMENT OF VIOLENCE AND AGGRESSION  
POLICY**

The Head of Health and Safety informed the Committee this was a review of a current Policy to which minor changes had been made. Mr Dalton added the Policy had been consulted upon via the intranet consultation pages and the Operational Health and Safety Group.

The Independent Member – Trade Union referred to the Equality and Health Impact Assessment (EHIA) and suggested verbal abuse of the ethnic minority was not being fully considered. Mr Dalton added the incident reporting data did not suggest this was an issue but would re-visit the EHIA.

The Policy was **APPROVED** by the Committee

**HSC: 17/037            LONE WORKER POLICY**

The Head of Health and Safety informed the Committee this was a review of a current Policy to which minor changes had been made. Mr Dalton added the Policy had been consulted upon via the intranet consultation pages and the Operational Health and Safety Group.

The Policy was **APPROVED** by the Committee.

**HSC: 17/038            MINIMAL MANUAL HANDLING POLICY**

The Head of Health and Safety informed the Committee this was a review of a current Policy to which minor changes had been made. Mr Dalton added the Policy had been consulted upon via the intranet consultation pages and the Operational Health and Safety Group.

The Policy was **APPROVED** by the Committee

**HSC: 17/039            WASTE MANAGEMENT POLICY**

The Director of Capital, Estates and Facilities informed the Committee this was a review of a current Policy to which minor changes had been made. Mr Walsh added the Policy had been consulted upon via the intranet consultation pages and the Operational Health and Safety Group.

The Interim Director of Public Health noted a very comprehensive EHIA had been completed.

The Policy was **APPROVED** by the Committee

**HSC: 17/040          WATER SAFETY POLICY**

The Director of Capital, Estates and Facilities informed the Committee the Water Safety Policy superseded the previous Control of Legionella Policy as a broader policy was required. Mr Walsh advised the Policy had been agreed by the Water Safety Group and had been consulted upon via the intranet consultation pages and the Operational Health and Safety Group. The Policy had also been viewed by the Health and Safety Executive who were satisfied with its content.

It was also suggested that the Chair of the Water Safety Group should be a member of the Health and Safety Committee. This was **AGREED**.

**ACTION – Miss R Daniel**

The Policy was **APPROVED** by the Committee

**PART 2**

**HSC: 17/041          COMMITTEE WORK PROGRAMME FOR 2017/18**

The Work Programme was **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/042          REGULATORY REVIEW AND TRACKING REPORT**

The report was **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/043          HEALTH AND SAFETY EXECUTIVE PRIORITY  
ACTION PLAN (DETAILED)**

The full Priority Action Plan was **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/044          WASTE MANAGEMENT COMPLIANCE REPORT**

This item was deferred to the July meeting.

**HSC: 17/045          ENVIRONMENTAL HEALTH REPORT OF ST DAVIDS  
HOSPITAL OF WALES ON 17<sup>TH</sup> JANUARY 2017**

The report was **RECEIVED** and **NOTED** for information by the Committee. It was noted that a hygiene rating score of 4 had been achieved.

**HSC: 17/046          ENVIRONMENTAL HEALTH REPORT OF CENTRAL  
FOOD PRODUCTION UNIT (CFPU), UNIVERSITY  
HOSPITAL OF WALES ON 10<sup>TH</sup> MARCH 2017**

The report was **RECEIVED** and **NOTED** for information by the Committee. It was noted that a hygiene rating score of 5 had been achieved.

**HSC: 17/047 ENVIRONMENTAL HEALTH REPORT OF BARRY HOSPITAL ON 21<sup>ST</sup> FEBRUARY 2017**

This item was deferred to the July meeting.

**HSC: 17/048 OPERATIONAL HEALTH AND SAFETY GROUP MEETING OF DECEMBER 2016**

The minutes were **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/049 FIRE SAFETY GROUP MINUTES OF DECEMBER 2016**

The minutes were **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/050 SECURITY AND PERSONAL SAFETY STRATEGY GROUP MINUTES OF NOVEMBER 2016**

The minutes were **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/051 HEALTH AND SAFETY RELATED POLICIES SCHEDULE**

The schedule was **RECEIVED** and **NOTED** for information by the Committee.

**HSC: 17/052 REVIEW OF THE MEETING AND ITEMS TO BRING TO THE ATTENTION OF THE BOARD OR OTHER COMMITTEES**

There were no items to bring to the attention of the Board.

**ACTION – Mr M Waygood**

**HSC: 17/053 DATE AND TIME OF NEXT MEETING**

The next meeting will be held at 9.30am on Tuesday 18 July 2017 in the Corporate Meeting Room, HQ, University Hospital of Wales.

Signed .....

Date .....