

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
THURSDAY 26 JULY 2018

Title:	ANNUAL HEALTH AND SAFETY REPORT
Responsible Director:	David Burbridge, Director of Corporate Affairs
Contact:	Adam Aucutt, Health And Safety Manager x 13662

Purpose:	This report provides evidence of the level of compliance with the management of health and safety for the period 1 st April 2017 to 31 st March 2018	
Confidentiality Level & Reason:	None	
Annual Plan Ref:	2.4.b. Identify regulatory requirements and undertake a gap analysis of reporting. 2.4.c. Develop and implement plans to ensure that all regulatory and compliance requirements are accounted for within the Trust's governance framework.	
Key Issues Summary:	<p>Compliance against key requirements the Trust's Health And Safety Policy remains robust, with all areas covered by a nominated manager and a risk register.</p> <p>The focus for the health and safety team over the reporting period has been:</p> <ul style="list-style-type: none"> ▪ Continued support to operational colleagues in providing health and safety training, advice, inspection and audit; ▪ ensuring compliance with Trust Health And Safety Policy; ▪ Increased support to investigating managers and handlers in order to improve learning from incidents; ▪ Provision of a Quarterly Health And Safety Report, enabling Divisions to accurately report compliance with health and safety audit/inspection regimes and to provide learning from incidents which can be shared Trustwide. The reports capture comprehensive health and safety data providing increased oversight, transparency and control 	
Recommendations:	The Board of Directors is asked to: RECEIVE the report and associated actions.	
Approved by:	David Burbridge, Director of Corporate Affairs	17 July 2018

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HEALTH AND SAFETY REPORT

PRESENTED BY DIRECTOR OF CORPORATE AFFAIRS

1 Introduction

Throughout the period, the Health And Safety Team have continued to utilise the skill-mix and capacity to focus on priority health and safety areas. Oversight has been provided by the Deputy Director of Corporate Affairs, Legal & Risk who, with the Director of Corporate Affairs, continues to monitor RIDDOR incidents and general compliance with internal and statutory requirements

Where health and safety arrangements at QE and HGS are aligned, Trustwide information has been provided. Where there is minimal divergence between arrangements, information has been provided by site. Where no comparable information is available the narrative reflects this

2 Compliance with Health and Safety Policy

2.1 Appointment of Nominated Managers

163 nominated managers have been appointed to manage health and safety arrangements within the 173 wards/areas identified at QE; some nominated managers cover more than one ward/area, ensuring 100% coverage.

2.2 Mandatory Managing Risks Course

Completion of the Managing Risks course is mandatory for nominated managers at QE. Of the 163 nominated managers, 149 have completed the Managing Risks course which is the highest number on record and training compliance is 91%. In addition to nominated managers, 122 other employees also completed the Managing Risks course during the reporting period. More than 1,000 employees ($n=1,138$) have completed Managing Risks training since its introduction although some of these employees have since left the Trust

At HGS, the health and safety training programme, developed and facilitated by the team does not currently form part of the mandatory training set. The programme includes: Managers health and safety responsibilities (short awareness course); Risk Assessment Workshops; Security awareness sessions; Participation in the delivery of PREVENT training; COSHH (Control of Substances Hazardous to Health) risk assessment workshops; Safety Champion workshops and; DSE (Display Screen Equipment) risk assessment workshops. In addition to the programmes advertised, the team have facilitated health and safety sessions on the Health Care Assistant induction programme on a regular basis throughout

the year; routinely facilitated a health, safety and security awareness lecture on the Student Nurse Induction programme; participated in the Volunteers Induction programme; presented to the local RCN groups on both safety and security

At HGS, Conflict Resolution Training (both initial course and refresher course) became part of the mandatory training set in 2016 and has been delivered via both online moodle packages and face-to-face sessions which continue to be delivered by the team

At HGS, training figures are incorporated into the report presented to the Trust Health and Safety Group.

At HGS, completion of mandatory health and safety training awareness Moodle session at HGS stands at 91%. Conflict Resolution is mandatory and the figure stands at 84%.

2.3 Risk Registers

163 of the 173 identified wards/areas at QE are covered by a local risk register. Risk register status is confirmed by two methods: six-monthly checks carried out by the Risk And Compliance teams and also during workplace health and safety audit visits/inspections on a rolling three year cycle

2.4 Health And Safety Audits of Wards/Departments

The Health And Safety Team completed 206 health and safety audits/inspections during the reporting period, which exceeds the performance indicators set out in the Trust Health And Safety Policy. As this report combines information from QE and HGS no comparable information is available for previous periods

The performance of the Health And Safety Team is expected to continue to improve throughout 2018/19 consisting of: -

2.4.1 Health and safety audit

Formal health and safety audits are conducted with the nominated manager and review: -

- a) Proactive risk management, such as completion of legally required risk assessments and maintenance of risk registers
- b) Reactive risk management, such as learning from incidents
- c) Local management systems such as communication, competency, supervision, training and information; administration; degree of integration of risk management into operations and processes for escalation of risk
- d) Implementation of controls, assessed by sample employee interview, inspection and observation

2.4.2 Inspections

At HGS, formal health and safety environmental inspections take place on a rolling 18 month cycle. The team visit areas to carry out environmental

assessments and support in the completion of work place assessments for individuals as requested.

2.4.3 Divisional inspections

Divisional health and safety inspections are performed by Directors Of Operations (DOps)/Senior Managers on a rolling two-year cycle. 73 inspections were completed at QE during 2016/18 which is an increase of 25 on the previous period and the highest number on record

2.4.4 Themed inspections

Themed inspections at QE focused on preventing inoculation injury and slips/trips. Wards/Areas that reported three or more inoculation injuries or slips/trips during 2016/17 were prioritised for inspection. Other themed inspections included: general walkarounds (hazard spotting); wheelchair access inspections; patient safety observations; medical gas management inspections; electrical equipment safety inspections and; environment inspections including, thermal comfort, noise surveys, light surveys etc

2.4.5 Other workplace visits

A range of visits are routinely carried out Trustwide to support wards/areas including incident investigation, risk assessment reviews, advisory visits, promotional campaigns, workplace assessments and to provide support and advice to staff and managers with specific issues or in response to specific incidents

At HGS, Members of the team have utilised a variety of forums to raise the profile of health and safety, which include:-

- Actively participating in a wide range of operational safety groups, in clinical and non clinical directorates
- Representation at the Trust Safety Group
- As requested, by the project design teams, attending project group meetings to ensure that safety and security risk management is incorporated at the planning stages
- Working with managers to address specific safety hazard/risk issues identified pro-actively, via local health and safety visits, or as a result of incidents.
- Utilising informal discussions to provide advice to resolve local issues
- Responding to requests via telephone or email to problem solve in a timely manner.
- Responding to safety concerns raised during training sessions

2.4.6 Staff Side inspections

No workplace health and safety inspections were completed by Staff Side Health And Safety Representatives during the reporting period

2.4.7 Joint Estates Risk Management Group inspections

A joint Health And Safety Team, Estates, ENGIE inspection was completed during the reporting period and further joint inspections are scheduled

throughout 2018/19.

At HGS, the team continue to support and work together with the Estates/Facilities functions and attend the Estates Statutory Compliance Monthly meeting.

2.4.7 Health and safety self-assessments

Wards/Areas are required to provide self-assessments regarding both environmental and management of health and safety compliance. During 2017/18, 366 completed self-assessments were documented at HGS

2.4.8 Quarterly Health and Safety Inspections

At HGS, all areas are requested to complete quarterly health and safety inspections and return them to their divisional health and safety lead and the health and safety team. During 2017/18, 379 inspections were returned to the team. These are reviewed by the health and safety team and any issues monitored and followed up as necessary.

2.4.9 Safety Alerts –

At HGS, the team co-ordinate the Safety Alerts for the Trust. A total of **29** new alerts were received during Quarter 4. At the end of March 2018, there were **3** alerts which remain open but within the deadline for completion. There were no alerts open past the deadline for completion. A total of 126 for the year were received.

Reference	Issue date	Alert title	Lead	Deadline
MDA 2018/001	19/01/2018	Pacemakers and CRT-P - oversensing of minute ventilation sensor signal leading to risk of syncope and pre-syncope	Medical device/Cardiology	12/07/18
NHS/PSA/D /2017/006	9/11/2017	Confirming removal of flushing lines and cannulae after procedures	Surgery/Anaesthetics leading/Patient Safety Team – further update awaited	9/8/2018
MDA 2018/10	29/03/2018	All T34 ambulatory syringe pumps - risk of unintended pump shutdown and delay to treatment	Medical Device	25/06/18

Alerts received in Quarters 2017/2018

Quarter 1 2017/2018	36
Quarter 2 2017/2018	31
Quarter 3 2017/2018	30
Quarter 4 2017/2018	29

2.5 Health, Safety and Environment Committee (Committee)

The Committee at QE, chaired by the Director of Corporate Affairs, met on four occasions during the reporting period and each Division provided a quarterly

report of health and safety compliance and activity. All Divisions have health and safety as a standing agenda item on their Divisional Consultative Committees (DCCs) and Divisional Clinical Quality Groups (DCQGs) with members of the Health And Safety Team in attendance. Regular reports to committee included security, occupational health and estates. The table below confirms attendance by the DOPs (or Deputy Directors) for all of the Trust's Divisions: -

Operational Attendance	May 2017	August 2017	November 2017	February 2018
Corporate Division	X	✓	✓	X
Division A	X	✓	✓	✓
Division B	✓	✓	✓	✓
Division C	✓	X	X	✓
Division D	X	✓	✓	X

At HGS, the Health And Safety Group, chaired by the Director of Corporate Affairs, met 5 times: May 17, July 17, Sept 18, Nov 17 and Jan 2018.

3 Incidents

3.1 Reports to Health And Safety Executive (HSE)

The Trust reported 100 incidents to the Health And Safety Executive (HSE) in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) during the reporting period

All reportable incidents at QE are forwarded to the Director of Corporate Affairs, Deputy Director of Corporate Affairs, Legal and Risk, and the appropriate DOP. In addition, actions following RIDDOR reportable incidents are also reported in Divisional reports to Committee which monitors compliance.

3.2 External audits and visits by the HSE

The HSE visited the Trust on three occasions during the reporting period: -

- a) Following a visit in July 2017, the Trust was issued with a notice of contravention in October 2017 for material breaches under The Control of Substances Hazardous to Health Regulations 2002 (as amended), Regulation 11 9 (b). This was in relation to: the review of the Trust wide risk assessments and; submission of RIDDORs compliant with legislative timelines
- b) Following a visit in April 2018 by a HM Specialist Occupational Health Inspector to investigate the RIDDOR report with a gentleman who has been diagnosed with an upper limb disorder De Quervins working in the labs at BHH. Information and an investigation into the RIDDOR has been completed and following discussion with the Principal Inspector there will be no further action taken by the HSE.
- c) Following the HSE visit to the Trust on 15 January 2018 regarding a RIDDOR report in relation to occupational dermatitis with a catering employee over at Good Hope Hospital.

HM Specialist Inspector, has contacted the Trust and stated that the Trust has satisfied the HSE with the level of response to the incident and is satisfied with the rectification plan that has been implemented and continues to be implemented, therefore no further intervention from the HSE is required.

- d) Following a visit in February 2018, the Trust was issued with an Improvement Notice in May 2018 for material breaches under the Health and Safety At Work Act 1974, Regulation 2 and Workplace (Health, Safety and Welfare), Regulations 4 and 17. This was in relation to a road traffic collision

The HSE continue to investigate/enquire about individual RIDDOR reports and additional information is provided upon request

3.3 Incidents – Most Reported

The categories of health and safety incidents will be aligned across the Trust in 2018/19. The most frequently reported at QE are inoculation injuries (*n*=310), slips/trips (*n*=137) and impact incidents (*n*=106). The Health and Safety Team have introduced named advisors to lead on each incident category.

At HGS, 775 incidents were reported under the general health and safety category in 2017/2018. The most frequently reported incidents were slips trips and fall (*n*=238), followed by impact against stationery object (*n*=123) and struck by moving object/machinery/equipment (*n*=107). Throughout HGS there are Health And Safety Champions who are a point of contact for staff in relation to advice and guidance. HGS health and safety advisors follow up all health and safety incidents and carry out further investigations where necessary.

Inoculation injuries are recorded under the Occupational Health category via Datix and not through the general health and safety category. Figures below are for the year 2017/2018.

	Clean needle /scalpel /other sharp instrument injury	Scratch or bite injury	Splashes	Used needle /scalpel /other sharp instrument injury	Total
Occupational Health	37	22	43	183	285
Total	37	22	43	183	285

Both the QEH and the HGS team following the completed restructure will work together to provide a comprehensive health and safety service for all sites. The work of the team over the next 12 months will be aligned and strengthened with new initiatives to ensure health and safety compliance trust wide is continued.

4. Recommendation

The Board Of Directors is requested to receive this report and associated actions.

David Burbridge
Director of Corporate Affairs