# UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST BOARD OF DIRECTORS TUESDAY 18 JULY 2017

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 <sup>st</sup> April 2016 to 31 <sup>st</sup> March 2017		
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:	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.		
	The focus for the health and safety team over the reporting period has been:		
	<ul> <li>Continued support to operational colleagues in providing health and safety training, advice, inspection and audit;</li> </ul>		
	<ul> <li>Preparation for external visits (as required) including HSE inspection;</li> </ul>		
	<ul> <li>Ensuring compliance with Trust Health And Safety Policy;</li> </ul>		
	<ul> <li>Increased support to investigating managers and handlers in order to improve learning from incidents;</li> </ul>		
	<ul> <li>Chairmanship of the Sharps Action Group to oversee improvements in preventing inoculation injuries;</li> </ul>		
	<ul> <li>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</li> </ul>		

	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 07/07/2017		

#### UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

# **BOARD OF DIRECTORS TUESDAY 18 JULY 2017**

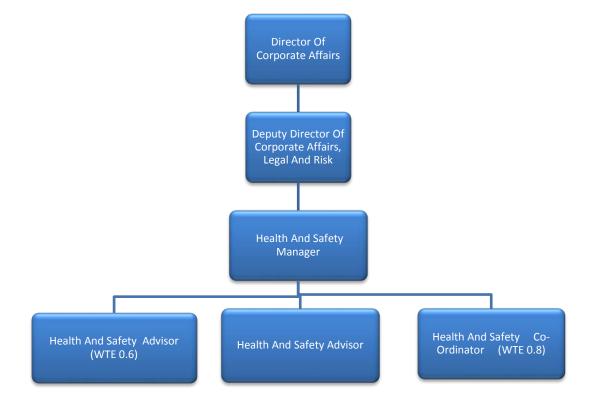
#### HEALTH AND SAFETY REPORT

# PRESENTED BY DIRECTOR OF CORPORATE AFFAIRS

# 1 Introduction

During the reporting period, a recruitment exercise was completed and a Health And Safety Manager was appointed to post in May 2016. Recruitment to both the vacant Health And Safety Advisor posts (WTE 1.6) was completed in October 2016. Throughout the period, the Health And Safety Team (H&S Team) have continued to utilise the skill-mix and capacity of the team 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



# 2 Compliance with Health and Safety Policy

# 2.1 <u>Appointment of Nominated Managers</u>

152 nominated managers have been appointed to manage health and safety compliance within the 167 wards/areas identified in the Trust; some nominated managers cover more than one ward/department, ensuring 100% coverage

# 2.2 Mandatory Managing Risks Course

Completion of the Managing Risks course is mandatory for nominated managers. Of the 152 nominated managers, 140 have completed the Managing Risks course, and training compliance is 92%. In addition to nominated managers, 71 other staff also completed the Managing Risks course during the reporting period which means that more than 1,000 staff have now received health and safety training although some of these staff have since left the Trust

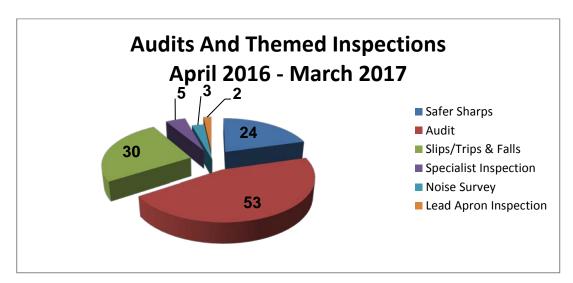
The Managing Risks course is scheduled monthly throughout the year except August and December and is available to all staff with health and safety responsibilities. The H&S Team have undertaken a review of course content and a revised course was introduced providing an improved training programme compliant with the Trust Health And Safety Policy

# 2.3 Risk Registers

All 167 identified wards/areas 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 an ad hoc basis

# 2.4 Health And Safety Audits of Wards/Departments

The H&S Team completed 117 health and safety audits/inspections during the reporting period, which exceeds the performance indicators set out in the Trust Health And Safety Policy. This is an increase of 39 on the previous year (2015/16) and is the highest number of completed audits/inspections on record: -



The performance of the H&S Team was affected by vacancies within the team during the first six months of the reporting period and is expected to continue to improve throughout 2017/18 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
- 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 staff interview, inspection and observation

# 2.4.2 <u>Divisional inspections</u>

Divisional health and safety audits/inspections are performed by Directors Of Operations (DOps) on a rolling two-year programme. 48 inspections were completed during 2015/17

# 2.4.3 Themed inspections

Themed inspections focused on preventing inoculation injury and slips/trips. Every ward/area that reported three or more inoculation injuries or slips/trips during 2015/16 was inspected during the reporting period. Other themed inspections included: general walkarounds (hazard spotting); specialist chair inspections; equipment assessments; lead aprons inspections; storage inspections and; noise surveys

# 2.4.4 Other workplace visits

A range of visits are routinely carried out to support wards/areas including incident investigation, risk assessment reviews and advisory visits and to provide support to nominated managers with specific issues or in response to specific incidents

# 2.4.5 Staff Side inspections

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

# 2.4.6 Joint Estates Risk Management Group inspections

Two joint Health And Safety Team, Estates, ENGIE inspections were completed during the reporting period and further joint inspections are scheduled throughout 2017/18

# 2.5 Health, Safety and Environment Committee (Committee)

The Committee, 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 H&S Team attending these meetings. Regular reports to committee covered security, sharps and Estates. The table below confirms attendance by the DOps (or Deputy Directors) for all of the Trust's Divisions: -

Operational Attendance	May 2016	September 2016	November 2016	February 2017
Corporate Division	X	X	X	✓
Division A	✓	✓	✓	✓
Division B	✓	✓	✓	✓
Division C	✓	✓	✓	✓
Division D	✓	✓	X	✓

#### 3 Incidents

# 3.1 Reports to Health & Safety Executive (HSE)

The H&S Team have maintained the increased resource put into supporting learning from all health and safety incidents, including reportable incidents. The Health And Safety Co-Ordinator continues to instigate and support local management investigation/preventive measures on a daily and weekly basis, within the DATIX system

The Trust reported 25 incidents to the Health And Safety Executive (HSE) in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). This is the lowest figure on record and compares with 35 RIDDOR incidents in 2015/16, 32 RIDDOR incidents in 2014/15, 39 in 2013/2014 and 62 in 2012/2013

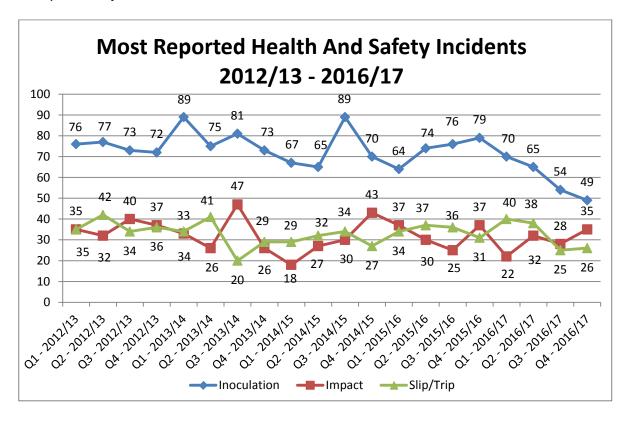
RIDDOR reportable incidents continue to be closely monitored within DATIX and any trends identified for action. All reportable incidents are forwarded to the Director of Corporate Affairs, Deputy Director of Corporate Affairs, Legal and Risk, and the appropriate DOp. In addition, actions following RIDDOR reportable incidents are also reported in Divisional reports to Committee which monitors compliance

# 3.2 External Audits/visits by the (HSE)

The HSE made one visit to the Trust, on 6<sup>th</sup> May 2016, following a diagnosis of occupational asthma of an employee. No formal action was taken against the Trust and no recommendations or advice was issued by the HSE

# 3.3 <u>Incidents – Most Reported</u>

The categories of health and safety incident most frequently reported are inoculation injuries, impact incidents and slips/trips. The number of reported inoculation incidents has reduced significantly since the introduction of safer



# 3.3.1 Actions: Inoculation

The Sharps Action Group (SAG) was set-up as a short-life, task and finish working group in May 2015 to: monitor and evaluate divisional and local initiatives to reduce the number of inoculation incidents; share best practice; improve data quality; review the information available (via DATIX); implement staff engagement initiatives to benchmark levels of understanding and; review training provision. The SAG also led on compliance with the Health And Safety (Sharps Instruments In Healthcare) Regulations 2013 and the introduction of safer sharps throughout the Trust

All inoculation incidents were reviewed by the Health And Safety Team and contact made with the investigating managers/handler regarding investigations where appropriate

# 3.3.2 Actions: Impact

Impact incidents include the subcategories; struck against something e.g. furniture, fittings etc; struck by moving/flying object and; struck by moving vehicle. All impact incidents were reviewed by the H&S Team and contact made with the investigating managers/handler regarding investigations where appropriate

# 3.3.3 Actions: Slips/Trips

Slips/Trips are considered a priority for the Health And Safety Team and inspections, 30 in total, were completed throughout the reporting period. All inspections were reported to the Divisional Senior Managers including the DOp and Associate Directors Of Nursing (ADNs)

All slips, trips and falls incidents were reviewed by the Health And Safety Team and contact made with the investigating managers/handler regarding investigations where appropriate

# 4. Trust Stress Steering Group

Since May 2016, the Human Resources Department has been responsible for the Trust Stress Steering Group (SSG). The SSG did not sit during the reporting period and is currently being reorganised with a scheduled reintroduction early in 2017/18. The Trust Prevention And Management Of Stress At Work Policy is currently under review

#### 5. Recommendation

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

David Burbridge
Director of Corporate Affairs