

Board of Directors (in Public)

Item 6.3

Subject: Health & Safety Assurance Report
Date of Meeting: 3rd July 2018
Prepared by: Helen Martin, Risk and Safety Lead
Presented by: Mark Jackson, Director of Research and Innovation / Chief Risk Officer
Purpose of Report: Note

BAF Ref	Impact on BAF
1.1	Assurance that the Trust is compliant with Health and Safety legislation

1. Executive Summary

Liverpool Heart and Chest Hospital (LHCH) has long established Health and Safety arrangements and a comprehensive policy which is supported and monitored by the Health and Safety Committee. In 2017/18, the Trust:

- Delivered an above target compliance with Health & Safety staff training
- Maintained a programme of proactive audits which highlighted only low level improvements that could be dealt with effectively with Departments
- Saw a reduction in RIDDOR reportable incidents; those which occurred were all unrelated so no systemic issues were identified
- Improved compliance with the nationally directed security standards; rates of non-compliance reduced from 26.5% to 3.6%
- Received significant assurance from an external review of its Health & Safety policy

This report further describes our systems and processes of assurance.

The Board of Directors should be assured that Health and Safety is proactively managed and there are no issues of major concern.

2. Background

The Health and Safety policy at LHCH is constructed so as to comply with the requirements as laid down by the HSWA (1974).

It clearly states the roles and responsibilities for all levels of staff from the Chief Executive to all employees and the function of the Health and Safety Committee.

It makes specific reference to those further regulations for which risk assessment is

required, including but not exclusive to Control of Substances Hazardous to Health (COSHH), Display Screen Equipment (DSE), Fire Safety and Personal Protective Equipment (PPE) .

It places explicit emphasis on the responsibilities of employers in regards to risk assessment, control and monitoring of risk and the review of preventative and protective measures.

3. Health & Safety Assurance

Statutory Health and Safety requirements

Leadership of H&S at LHCH is clearly set out in the H&S policy commencing with a policy statement by the Chief Executive. The statement provides a clear message of the importance of health and safety within LHCH and emphasis is placed upon the expectation that all staff will adhere to and comply with the policy's content.

Roles and responsibilities of those charged with leading H&S are clearly set out and provide specificity for the discharge of their duties.

These include the roles of but not limited to the Director of Research and Innovation (Executive Board Lead for H&S), the Divisional Heads of Operations, Ward and Department Managers and the Risk and Safety Lead.

Competent advice for other specialties with links to H&S, such as Occupational Health, Estates Management, Infection Control, Manual Handling, Radiation Protection Advisors, control of contractors and visitors to the site and Security are referred to within the policy and are available to all staff.

H&S is communicated to staff via mandatory and induction training, bulletins and alerts and risk assessments by managers. Currently 96% of staff are in date for H&S training which is over target (95%).

Ward and Department Managers have attended an H&S refresher training session delivered by an external consultant. The session covered H&S legislation, corporate manslaughter and general responsibilities for managers regarding H&S. Of the managers invited, 62% attended. More training is being planned.

H&S Committee

The H&S Committee is chaired by the Director of Research and Innovation. Membership of the committee is multidisciplinary incorporating staff from the clinical and non-clinical divisions, trade unions and those with specific competencies and responsibilities pertaining to H&S.

The Committee meets quarterly and is responsible for setting the strategic direction for H&S and providing an oversight of the work carried out as per H&S policy.

The work of the H&S Committee is monitored by the Risk and Corporate Governance Committee.

Internal Assurance

Proactive

A proactive approach to H&S is taken with annual inspections carried out in all areas across the Trust by the Risk and Safety Lead. The results of these inspections are reported to the Managers of the areas and the H&S committee receives an annual summary report. Managers contact the Risk & Safety Lead to advise when the issues have been actioned. Issues identified are low level and are dealt with in the department. Any issue identified which, on risk assessment would score >10 would be escalated to the Divisional Head of Operations and the H&S Committee. The inspections are in addition to specific risk assessments undertaken as necessary.

The Trust has an active membership of Institute of Occupational Safety and Health (IOSH) and Merseyside Occupational Health and Safety Group (aligned to Royal Society for the Prevention of Accidents (Rospa). This allows networking with other H&S experts, Health and Safety Executive (HSE) and access to specific H&S advice.

Reactive

H&S incidents that affect members of staff are followed up with a visit/phone call to the member of staff by the Risk and Safety Lead, who will offer advice, support and guidance as necessary.

H&S incidents that affect members of the public are followed up with a phone call to discuss the incident if contact details are available.

Investigations are carried out by either the Manager of the area or the Risk and Safety Lead, with actions being put in place to manage the issues as necessary. Any incident that meets the criteria for RIDDOR (Reporting of Injuries, Diseases or Dangerous Occurrences Regulations) is reported via the Risk Team to the HSE. In 2016 there were nine RIDDORs reported compared to four reported in 2017. All incidents were low level and unrelated.

External Assurance

For 2017/18, there are two means of external assurance:

- Under the NHS Standard Contract for 2017-2018 all organisations providing NHS services must put in place and maintain appropriate anti-crime arrangements. NHS Protect has developed a national strategy and a series of security standards for providers, which follow a risk based approach to providing a safe and secure environment for patients, staff and visitors and to protecting NHS property and assets.

Of the 28 standards, the Trust has self-assessed 96.4% green, 3.6% amber and 0% red. This is an improvement from 2016/17: 74.5% green, 19.5% amber and 0% red. A workplan managed by the Trust Local Security Management Specialist is in place to address and improved standards assessed as amber. This includes improving our lockdown procedure and review of security related

incidents together with the imposition of appropriate and measured sanctions against patients and visitors who violate security.

- A H&S review was undertaken by the MIAA which gave Significant Assurance for the H&S processes and H&S policy for the organisation. Minor areas for development were recommended which include risk assessment training and the introduction of an action log following inspections; both actions have now been implemented. This action plan has undergone regular review at the H&S committee.

4. Conclusion

LHCH has a well-established H&S leadership underpinned by a clear and well organised policy. The policy is supported by a multidisciplinary Committee structured to develop and monitor H&S standards set out as required by the HSWA (1974).

All staff are aware of and have knowledge of the policy due to training requirements within the Trust.

Proactive inspections provide an oversight of areas, with management of emerging issues at an early stage. Reactive management of incidents provides support to staff and learning opportunities.

5. Recommendations

The Board of Directors are requested to review the paper and gain assurance of compliance with statutory Health and Safety requirements from the contents herein.