

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**  
**BOARD OF DIRECTORS**  
**THURSDAY 23 JULY 2014**

<b>Title:</b>	<b>ANNUAL HEALTH &amp; SAFETY REPORT</b>
<b>Responsible Director:</b>	David Burbridge, Director of Corporate Affairs
<b>Contact:</b>	Adam Aucutt, Quality & Compliance Officer - Health & Safety, x 13662

<b>Purpose:</b>	This report provides evidence of the level of compliance with the management of Health & Safety for the period 1 <sup>st</sup> April 2014 to 31 <sup>st</sup> March 2015
<b>Confidentiality Level &amp; Reason:</b>	None
<b>Annual Plan Ref:</b>	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.
<b>Key Issues Summary:</b>	<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"> <li>▪ Continued support to operational colleagues in providing health and safety advice, inspection and audit;</li> <li>▪ Preparation for external visits (as required) including CQC inspections;</li> <li>▪ Ensuring compliance with Trust Health &amp; Safety Policy;</li> <li>▪ Increased support to investigating managers and handlers in order to improve learning from incidents;</li> <li>▪ Improved standards in preventing inoculation injuries which has led to the assimilation of the specialist task and finish group into the quarterly health and safety committee structure to ensure greater engagement of Divisions in continuing the work.</li> <li>▪ Introduction of an improved Quarterly Health &amp; Safety report format, enabling Divisions to accurately report compliance</li> </ul>

	<p>with Health &amp; Safety audit/inspection regimes and to provide learning from incidents which can be shared Trustwide. The reports capture a wider range of health &amp; safety data than previously, providing increased oversight, transparency and control</p> <ul style="list-style-type: none"> <li>▪ The number of RIDDOR reportable incidents continues to decrease although active reporting is encouraged.</li> </ul>		
<b>Recommendations:</b>	<p>The Board of Directors is asked to:</p> <p><b>RECEIVE</b> the report and associated actions.</p>		
<b>Approved by:</b>	<table border="1"> <tr> <td>David Burbridge, Director of Corporate Affairs</td> <td>14 July 2014</td> </tr> </table>	David Burbridge, Director of Corporate Affairs	14 July 2014
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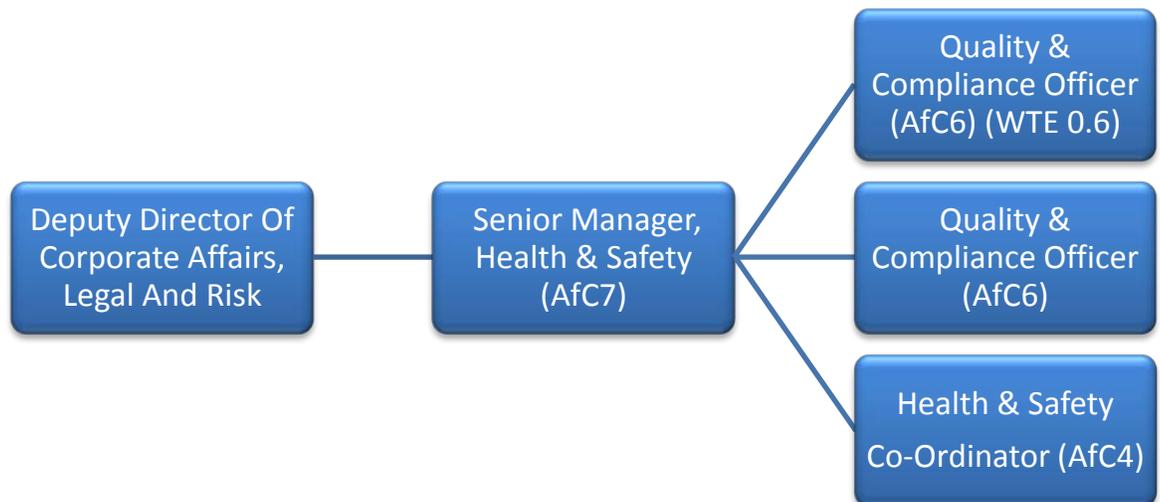
## **HEALTH & SAFETY REPORT**

**PRESENTED BY DIRECTOR OF CORPORATE AFFAIRS**

### **1 Introduction**

During the reporting period, a restructuring exercise of the Health & Safety Team (H&S Team) was completed as shown below. Recruitment to the new Quality and Compliance Officer posts was completed in September 2014 and the recruitment exercise for the Health and Safety Manager (Team leader) is nearing completion. Throughout the restructuring and recruitment process, the H&S Team have continued to utilise the skill-mix and capacity of the team to focus on priority health and safety areas.

Since December 2014 immediate line management has been provided by the Deputy Director of Corporate Affairs, Legal & Risk who, with the Director of Corporate Affairs, continues to monitor RIDDOR incidents, general compliance with internal and statutory requirements. This has been in place pending the recruitment of the Senior Manager, Health & Safety.



## 2 Compliance with Health and Safety Policy

### 2.1 Appointment of Nominated Managers

138 nominated managers have been appointed to manage Health & Safety compliance within the 162 departments/units/wards 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 135 Nominated Health & Safety Managers, 127 have completed the "Managing Risks" course, and training compliance stands at 94%, which is an improvement from the previous year (88%) and the highest compliance level on record.

The Managing Risks course is scheduled monthly throughout the year and is available to all staff with health and safety responsibilities. The H&S Team are currently undertaking a review of course content with the aim of providing an improved training programme during 2015/2016, with the involvement of the Senior Manager, once recruited.

### 2.3 Risk Registers

All 162 identified departments/wards are covered by a local risk register; risk register status is confirmed by two methods: six-monthly checks carried out by the Risk & Compliance teams and also during workplace health and safety audit visits/inspections on an ad hoc basis.

### 2.4 Health & Safety Audits of Wards/Departments

In addition to the 84 Divisional audits/inspections completed during 2013/15 (para 2.4.2), the H&S Team completed a total of 37 health & safety audits/inspections within the reporting period, which is an increase of 20 on the previous year (2013/14). The capacity of the H&S Team was affected by vacancies within the team both at the commencement of the reporting period (two vacant Quality And Compliance Officer posts from April 2014 to September 2014) and at the end of the reporting period (vacant Senior Manager post from December 2014 to March 2015). The performance of the H&S Team is expected to continue to improve and no less than 60 audits/inspections will be performed throughout 2015/16 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 staff interview, inspection and observation.

#### 2.4.2 Divisional audits/inspections

Divisional health and safety audits/inspections are performed by Directors Of Operations (DOps) on a rolling two-year programme with the support of the H&S Team as appropriate. 84 audits/inspections have been completed during 2013/15.

#### 2.4.3 Themed inspections

Themed inspections have focused on preventing inoculation injury and, working-at-height. Every ward/area that reported three or more inoculation injuries during 2013/14 was inspected during the reporting period and the number of reported inoculation incidents throughout the Trust has reduced for the first time in five years.

#### 2.4.4 Other workplace visits

A range of visits are routinely carried out to support wards/areas including incident investigation, risk assessment, hazard spotting or advisory visits and to provide support to Nominated Managers with specific issues or in response to specific incidents. During the reporting period a review of the Service Yard was completed including an analysis/audit of the health and safety management of the department and hazard identification. Recommendations were made and an action plan implemented which is monitored by the H&S Team.

### 2.5 Health, Safety and Environment Committee

The THSEC, chaired by the Deputy Director of Corporate Affairs, Legal and Risk met on four occasions during the reporting period and each Division provided a quarterly report of health and safety compliance and activity to the committee. 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, workplace stress and Estates. The table below confirms attendance by the executive Directors of Operations (or Deputy Directors) for all of the Trust's Divisions:

<b>Operational Attendance</b>	<b>June 2014</b>	<b>October 2014</b>	<b>November 2014</b>	<b>February 2015</b>
Corporate Division	✓	✓	X	✓
Division A	✓	✓	✓	X
Division B	✓	✓	✓	✓
Division C	✓	✓	✓	✓
Division D	✓	X	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 & Safety incidents, including RIDDOR-reportable incidents; the Health & Safety Coordinator continues to instigate and support local management investigation/preventive measures on a daily and weekly basis, within the DATIX system.

The Trust reported 30 incidents to the Health & Safety Executive (HSE) in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). This compares with 39 RIDDOR incidents in 2013/2014 and 62 in 2012/2013. 47% of these were inoculation incidents. The H&S Team are currently working with those reporting inoculation incidents to improve the quality of the reporting, moving the focus from consequent actions to a more detailed analysis of the root cause of each incident so that actions can be identified as to training needs or equipment issues as appropriate.

The reduction in work-related absences reported is due to changes in the RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (the requirement to report over-three-day (O3D) injuries was replaced with over-seven-day (O7D) injuries); changes in managing sickness absence may also have had an impact on the figures: The H&S Team will continue to review this data to determine if this is a continuing trend.

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, Associate Director of Corporate Affairs, Legal and Risk, appropriate Director of Operations and the Chair of the Staff Side Health & Safety Committee. In addition, actions following RIDDOR reportable incidents are also reported in Divisional reports to THSEC which monitors compliance.

#### 3.2 External Audits/visits by the (HSE)

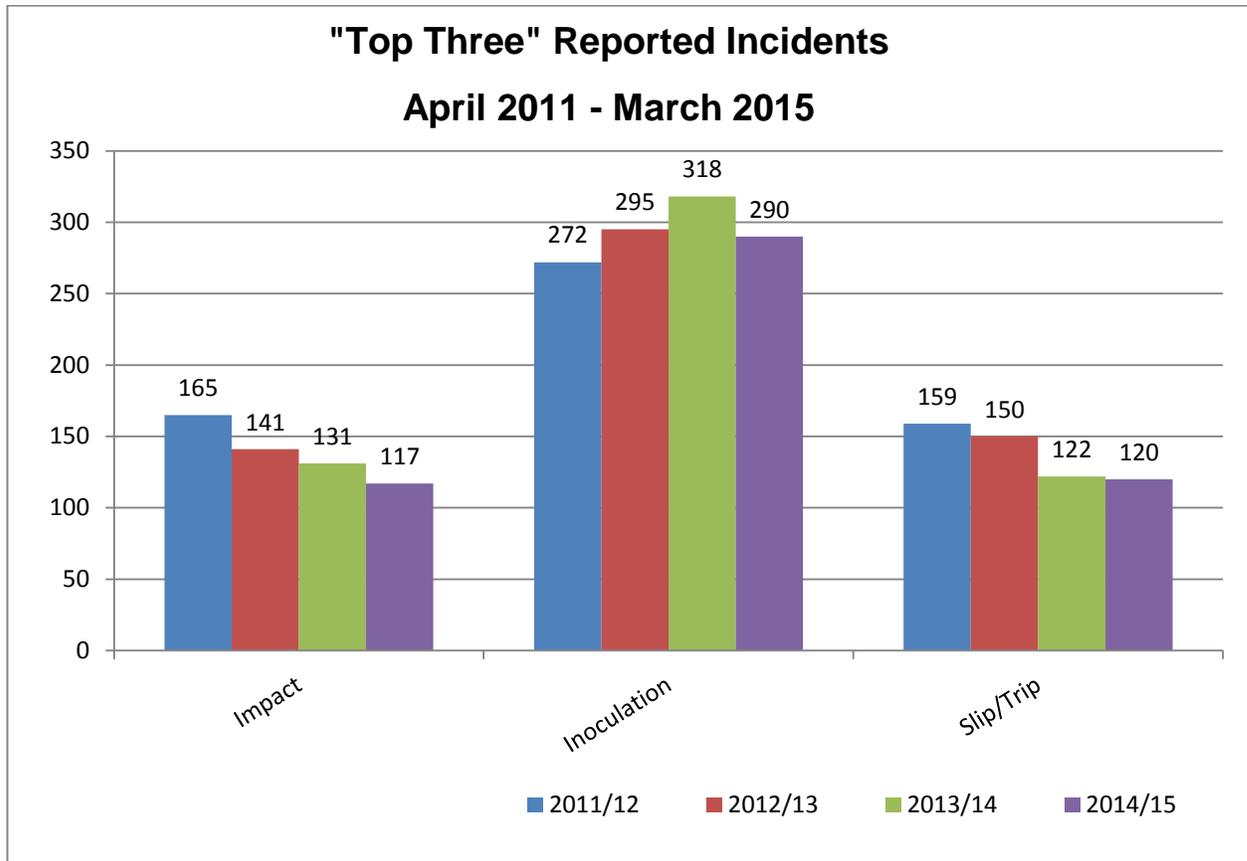
There were two HSE visits to the Trust during the reporting period, one of which was a follow-up visit on 29th April 2014 following a previous inspection of the Critical Care Unit on 17th December 2013. The HSE Inspector commented on the very positive response by the H&S Team and the Division A Management Team to the original inspection and indicated that the action taken by the Trust would be used by the HSE as a model for benchmarking and inspection.

The other HSE visit was a planned routine visit to Pathology (28th January 2015). No areas of concern were raised by the inspector

#### 3.3 Incidents – Most Reported

The figure below shows that the three most frequently reported health and safety incidents were inoculation injuries, impact incidents and, slips/trips. The number of

health and safety incidents reported in each of these categories has reduced and this reflects the overall reduction in health and safety incidents recorded on DATIX which has dropped for the first time since 2009/10. This has coincided with improving standards for preventing inoculation injuries (including themed inspections), providing more support for investigating managers/handlers and, the introduction of comprehensive quarterly health and safety reports.



### 3.3.1 Actions: Inoculation

The Sharps Advisory Group (SAG) was set-up as a short-life, task and finish working group to lead on and oversee the implementation of Trust inoculation injury prevention strategy in line with UK and European legal requirements. This was achieved in October 2014 and the SAG was reincorporated into the THSEC. Some of the successes of the SAG included: the introduction of safer cannulas; introduction of safer devices for collecting blood samples; mandating the use of face protection for some clinical tasks identified as higher risk of inoculation injury from splashes; increased monitoring of practice, with Directors of Operations, Senior Nursing staff and the H&S Team carrying out both planned and unannounced inspections and; the introduction of a Trust Procedure For Preventing Inoculation Injury.

### 3.3.2 Actions: Impact

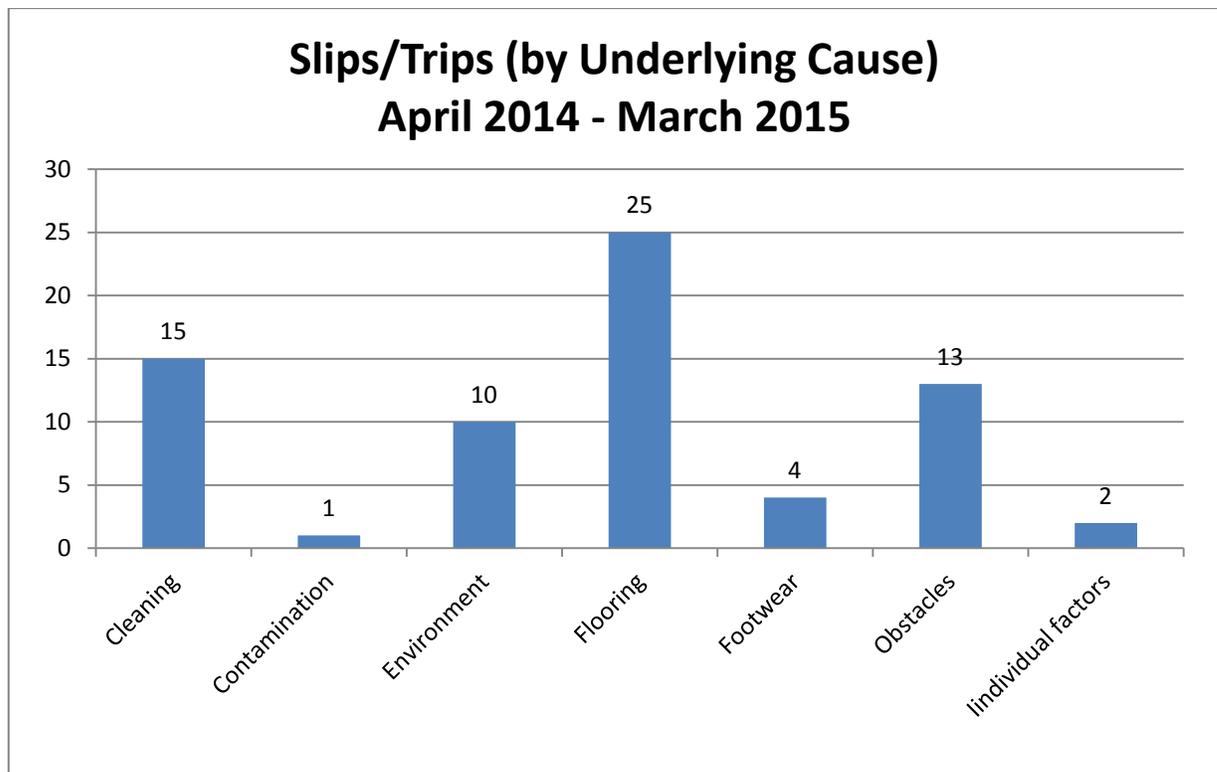
The number of impact incidents reported has reduced for the fifth consecutive year and is now at the lowest level since DATIX was

introduced. 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 and Falls

During 2013/14, the Trust was assessed as compliant at Level 2 against NHSLA Core Standard 4.3 for Slips/Trips. No recommendations were made by the assessors but DATIX was improved to sub-categorise slips/trips by contributory factors: cleaning; contamination; environment; flooring; footwear; obstacles and; individual human factors.

As this is the first full reporting period of slips/trips by contributory factor, no comparisons are available. 58% (n=70) of the 120 slips/trips recorded on DATIX were sub-categorised by contributory factor.



## 4. **Trust Stress Steering Group**

Following the departure of the Senior Manager - Health & Safety in November 2014, the terms of reference for the Trust Stress Steering Group were revised. The Stress Steering Group continues to advise on and monitor implementation of the stress policy and the group receives regular reports for: information provided to staff; staff support data and; completion of stress risk assessments. In addition to its regular business, the Stress Steering Group has initiated an audit of stress risk assessments across the Trust.

## **5. Recommendation**

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

**David Burbridge**  
**Director of Corporate Affairs**