



**Health and Safety Committee's  
Summary Report to Governing Bodies  
01 April – 30 September 2017**

## 1) Introduction:

**Definitions:** (from Phoenix H&S training material- NBOSH)

**Health** - *'a state of well-being in both a physiological and psychological sense, it would include not suffering from mental fatigue, stress or noise induced deafness'*

**Safety** – *'the absence of danger or physical harm to a person, extending in the workplace to things such as equipment, materials or structures'*

**Welfare** – *'the provisions of workplace facilities that maintain the basic well-being and comfort of the worker, such as eating, washing and toilet facilities.'*

1.1 This report covers the period 1<sup>st</sup> April 2017 to 30<sup>th</sup> September 2017 for the five Clinical Commissioning Groups (CCGs) within the CWHHE Collaborative, providing an update as to where each site is with compliance with regards to Health and Safety including incidents and risk. The three main reasons for managing health and safety are:

- Moral – Employers have a duty of reasonable care towards those affected by the undertaking. Morally, it is not acceptable to put employees at risk or expect them to risk life.
- Legal – Good safety management systems help ensure compliance in law. Controlling risks effectively within the workplace prevents serious injury which reduces the likelihood of civil claims.
- Financial – an effective health and safety management system assists in avoiding costs of repair/replacing damaged plant and equipment, Effective health and safety can improve production, boost motivation and help lower staff turnover to save on cost of retraining and job advertising.

## 2) Accountability for Health and Safety:

2.1 Each staff member has responsibility for supporting a safe and healthy working environment and staff are encouraged to report issues in a variety of ways, including via formal reporting mechanisms, providing feedback at training as well as staff meetings.

2.2 The Governing Body is responsible for ensuring that the organisation complies in full with the various statutory obligations placed upon it with regards to the health, safety and well-being of staff, visitors (and so on). It needs, therefore, to be confident that effective policies, systems and practices are in place in order to achieve high standards of Health, Safety and Welfare within the CCG. To this end, the Governing Body seeks assurances from a number of sources so it can monitor and, where appropriate, challenge any element of health and safety performance within CWHHE CCGs.

2.3 A key component of this approach was the establishment of the Health and Safety Committee in April 2016. The Committee is responsible for seeking assurances on delivery and for offering an opinion to the Senior Management Team (SMT) and CCG Governing Bodies on Health and Safety compliance. A structured approach is taken at these meetings to ensure the correct assurance is being sought and that sufficient reporting measures are in place at the CCGs' premises. A key assurance mechanism is the annual H&S Plan – which is agreed by the Committee and then used to monitor progress against agreed health, safety and welfare aims and objectives.

2.4 Beneath the H&S Committee is the Building User Group (BUG) – a forum for staff representatives drawn from across the main teams and CCG sites to raise issues in relation to H&S and Building-related matters. The Group is also a channel through

which the H&S Committee can disseminate its key messages. BUG is the forum at which the detailed implementation activity of the Health and Safety Action plan is agreed and monitored.

2.5 The overarching Health and Safety Policy remains the responsibility of the Governing Body. Revisions to existing policies are considered and approved by the Health and Safety Committee, in line with its terms of reference and the CWHHE 'Policy on Polices'.

2.6 The Committee agreed at its first meeting that, whilst there are established systems and processes in place that govern and provide assurances relating to Safety issues, the picture was not so clear with regards to staff (etc) health and wellbeing. With this in mind, the Committee agreed that the key health risks faced by office-based CCG staff are:

- work-related upper limb disorders (including musculoskeletal disorders);
- visual (ie the consequences of working with computers, screens etc); and
- stress.

2.7 A key area of development is the assurance mechanisms (and supporting data) to enable corporate monitoring not only of the incidents of the three risks but also the impact of management's approach to mitigating them.

2.8 Key points arising from the Health & Safety Committee's work thus far this year are set out below.

### **3) Health and Safety Training Compliance:**

3.1 An on-going issue with the ESR system resulted in staff not being able to access the system during the first two quarters to complete their mandatory training. In order to bridge this gap and the compliance risk it posed, all staff were directed to read all the health and safety-related policies and provide assurance to their manager that they have done so.

3.2 The system became accessible again in late September.

3.3 Four health and safety training modules are mandated for all staff: fire safety, health safety and welfare, moving and handling, and Display Screen Equipment (DSE).

3.4 The Human Resources (HR) team continues to monitor and review compliance with mandatory training against the organisations' target of 100% compliance. Table 1, below, compares the training compliance figures as at end of September 2016 and September 2017 as provided by HR. Item 3.1 must be taken in consideration when analysing this data. 2017/18 is the first year that the DSE has been available and this, coupled with the unavailability of the system for the year to date, has resulted in a very low uptake at end-September – the figures are not, therefore, included in Table 1.

3.5 There is low compliance to-date across the CCGs. The issues raised in 3.1 is a significant contributor to this, although compliance is broadly comparable with last year's performance (when there were no system issues) and Hounslow CCG actual saw an improvement on the September 2016/17 position.

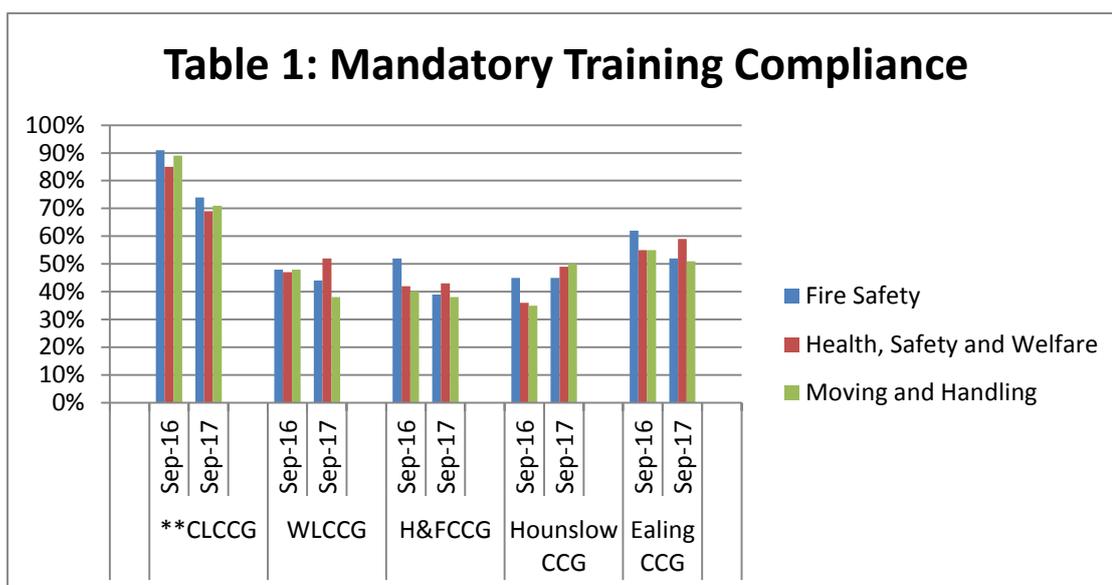


Table 1. Mandatory Training Figures

\*\*CLCCG includes Central London CCG, Strategy and Transformation and CWHHE.

3.6 The HR department will be introducing a new Electronic Staff Record (ESR) system and confirm that once implemented will become more user friendly, easy to navigate and intuitive. Assurance has been sought that the new system will be tested prior to roll out.

3.7 Clearly, achieving acceptable levels of staff mandatory training compliance is a priority for the rest of 2017 and into 2018.

#### 4) Other H&S Training:

4.1 All three CWHHE CCG sites are compliant with training requirements (where they exist) for Defibrillators, first aid and fire marshalling. All are regularly reviewed by the site leads across CWHHE CCGs to ensure compliance requirements continue to be met.

#### 5) Fire Safety:

5.1 Fire risk assessments (FRA) were conducted in November 2016 for Marylebone Road and Ealing. Hounslow's Fire Risk Assessment is not due until 2018. We are not anticipating any risks to be highlighted beyond those of general housekeeping.

5.2 Fire drills are conducted at each site every six months. No significant issues have arisen from the most recent drills held at each site.

#### 6) Premises' Risk Assessments:

6.1 Risk assessments have been conducted at all sites by NHS Property Services and the relevant Local Authorities; outputs of these assessments are now captured centrally and in the relevant local risk registers. All three sites are fully-compliant with all statutory building requirements and regulations. The current top three risks are:

- a) that we are not aware of all health risks and issues due to inconsistent data capture and reporting across the CCGs;

- b) lower than full-compliance with the mandatory training requirement resulting in low health and safety and fire awareness (mainly in the CCGs at Marylebone Road); and
- c) that we are not aware of all incidents or near misses that occur across CWHHE. Some incidents that are known are not reported in a timely way.

#### 6.2 Mitigations:

- a) development of standard reporting lines and data to H&S Committee and SMT (eg workforce reporting, staff surveys, this report etc), including development of a Health, Safety and Wellbeing Dashboard;
- b) following on from last year's push by the Chief Officer, increased drive from SMT on mandatory training compliance is having an immediate effect and plans are in place to sustain this; and
- c) more regular awareness raising (via InSite, internal communications channels) on the need to report incidents and near-misses.

### 7) Accidents and Incidents:

7.1 There have been a total of seven low risk incidents / accidents and only four near-misses reported (again, all low-risk in nature). The H&S Committee's attention on this area focusses on assuring itself that the requirement to report is well-known and the process of so doing is understood across the CCGs.

7.2 An incident occurred at MBR which saw the building being evacuated and the instigation of the business continuity plan which resulted in closing the building and sending staff home. This was managed very well with the assistance from the fire wardens. Actions identified are being addressed by the relevant staff.

7.3 There is a duty to report specified workplace incidents (RIDDOR – Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) to the Health and Safety Executive (HSE). No incidents requiring such occurred within the period of this report.

### 8) CWHHE, Priorities for the rest of 2017/18:

8.1 Work to establish a Facilities and Health and Safety structure and joint committee across all eight NWL CCGs.

8.2 Progress against the Health & Safety Action plan for 2017/2018 will continue to be monitored along with the key Health and Safety priorities at the Building User Group.

8.3 Communication: to continue to promote health and safety to ensure all staff understand their health and safety responsibilities by:

- adding H&S as a standing item on the agenda of all team meetings;
- providing all new starters AND existing staff with an H&S induction pack;
- ensuring all up-to-date health and safety information is included in the Staff Handbook; and
- completing mandatory on-line training.

8.4 Health and Safety Awareness and responsibility training for the Governing Body members held at the December Governing Body meetings at Ealing and Hounslow. This training will meet compliance under the health and safety mandatory training requirements. This will be rolled out across the remaining CWHHE CCGs enquiries will be made with the relevant leads to ensure this is captured in the next seminars.

- 8.5 Mandatory training (see 3 above); Senior managers to share data and encourage all their team/staff to complete all areas of mandatory training. Monthly Compliance figures tabled at SMT and HR Committee meetings.
- 8.6 Development of the H&S Dashboard, reviewing data trends and ensure mechanisms and processes are in place to support staff particularly work related issues;
- 8.7 Ensure appropriate health and safety policies are in place and tested with regular reviews;
- 8.8 An action from the Resilience Meetings to ascertain the bomb evacuation procedure across CWHHE.
- 8.9 To add a section to the Staff Handbook to include 'Staff Responsibility' under the Health & Safety at Works Act 1974 and to advise staff that all sites across CWHHE are non-smoking.
- 8.10 All managers to be able to monitor and review the health and safety within their departments and identify any hazards and risks to staff.