

**Item: 6.7**

<b>Report to:</b>	NHS Hull CCG Board
<b>Date of Meeting:</b>	Friday 26 November 2021
<b>Title of Report:</b>	NHS Hull CCG Health, Safety and Security Annual Report 2020/21
<b>Presented by:</b>	Deborah Lowe, Interim Director of Nursing and Quality
<b>Author:</b>	Helen Johnson, Health & Safety Advisor

**STATUS OF THE REPORT:**

To approve	<input type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input type="checkbox"/>
To note	<input checked="" type="checkbox"/>		

**PURPOSE OF REPORT:**

The purpose of the Health, Safety and Security Annual Report is to provide the NHS Hull CCG Board with assurance in respect of the current position of the organisation in relation to its Health, Safety and Security compliance and activity. In working in accordance with the legislation of the Health and Safety at Work Act 1974.

The paper provides the Board with assurance on activity and actions taken during the reporting year of 2020/21, and outlines plans and objectives year 2021/22.

**RECOMMENDATIONS:**

a That the NHS Hull CCG are asked to note the contents of the Health, Safety and Security report for 2020/21.

**REPORT EXEMPT FROM PUBLIC DISCLOSURE**      No  Yes

If yes, detail grounds for exemption

**CCG STRATEGIC OBJECTIVE** (See guidance notes on page 4)

Applicable in the delivery of all CCGs strategic objectives and business.

*Short summary as to how the report links to the CCG's strategic objectives*

The CCG has responsibilities in ensuring the Health & safety, for CCG employees, visitors and other users of the shared premises is a legal requirement

**IMPLICATIONS:** (summary of key implications, including risks, associated with the paper),

Finance	Financial support is required for training requisite staff in First Aid and Fire Warden duties in order to meet legal duties and time allocation for any staff who will undertake Trade Union duties.
HR	Health & safety, for CCG employees, visitors and other users of the shared premises is a legal requirement. All staff have been offered the opportunity to volunteer to be trained as first aiders / fire wardens / union representatives
Quality	All risk assessments and documentation associated with Health & Safety have been adapted to reflect the quality of the corporate brand.
Safety	All aspects of Health & Safety for the organisation, employees and facilities have been reviewed.

**ENGAGEMENT:**

Engagement has taken place with staff in respect of training, consultation on the contents of policies and procedures and on risk assessments in the workplace.

Engagement has taken place with the landlord and concierge service at Wilberforce Court to ensure appropriate implementation of all Health, Safety and Security related procedures, but in particular those relating to Fire Safety and Evacuation.

**LEGAL ISSUES:**

Compliance with all Health & Safety Legislation relevant to the organisation must be assured.

Consideration of all implications of action or inaction required in order to mitigate risk under Health and Safety legislation and the Corporate Manslaughter legislation.

**EQUALITY AND DIVERSITY ISSUES:** (*summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). All reports relating to new services, changes to existing services or CCG strategies / policies must have a valid EIA and will not be received by the Committee if this is not appended to the report*)

	<b>Tick relevant box</b>
An Equality Impact Analysis/Assessment is not required for this report.	X
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

### **Definitions**

<i>To approve</i>	<i>An item of business that requires the Committee to take a formal decision.</i>
<i>To endorse</i>	<i>An item of business that requires the Committee to endorse the actions taken by the CCG.</i>
<i>To ratify</i>	<i>An item of business where the Committee is required to ratify the action(s) taken on behalf of the Committee, for example, by a formal group established by the Committee.</i>
<i>To discuss</i>	<i>An item of business that requires discussion by the Committee prior to agreement of a formal resolution or a general policy steer to the executive officers.</i>
<i>To consider</i>	<i>A report containing a positional statement relating to the delivery of the CCG's functions for which the Committee has a corporate responsibility but is not explicitly required to make a decision.</i>
<i>To note</i>	<i>An item of business for which the Committee is required to give due regard to but for which there is not expected to be discussion.</i>
<i>For information</i>	<i>An item of information that is of general interest but is not of significance to the Committee's corporate or operational activities. These items will be included on a specific section on the agenda but will not be for discussion unless exceptionally Members have not been able to obtain assurance from the author outside of the meeting and the Chair has been notified of the request at least 1 hour in advance of the start of the meeting.</i>

**\*All guidance and definitions information in italics to be deleted by the author following completion of their report.**

## CCG Strategic Objectives

<b>Objective No</b>	<b>CCG Strategic Objective</b>
1	Facilitate strategic Humber-wide planning and transformation, focusing on quality outcomes and patient experience as the catalysts for clinically led change.
2	Advance at system-level the delivery of the commissioning priorities set out in the NHS Long Term Plan.
3	Support the delivery of financial strategies and actions as enablers to system-wide transformation.
4	Successfully and effectively commissioning health services to meet the reasonable health needs of the people of Hull.
5	Work in partnership with Hull City Council and others to implement a population driven approach to improving health outcomes and reduce health inequalities, targeting in particular the most disadvantaged in local communities
6	Develop an agreed out of hospital strategy for Hull, supporting local Primary Care Networks to determine models for transition to integrated provision.
7	Focus on care and services for children in Hull, improving performance against statutory responsibilities and achieve better outcomes as measured by experience and engagement.
8	Delivery of Statutory Duties
9	Maintain support for the effective local planning and response to the Coronavirus Pandemic, ensuring that positive innovations are retained, improved and generalised.

**\*All guidance and definitions information in italics to be deleted by the author following completion of their report.**

# NHS Hull CCG Annual Health, Safety and Security Report 2020/21

## 1. INTRODUCTION

- 1.1 The purpose of the Health, Safety and Security Annual Report is to provide the NHS Hull CCG Integrated Audit and Governance Committee with assurance in respect of the current position of the organisation in relation to its Health, Safety and Security compliance and activity. In working in accordance with the legislation of the Health and Safety at Work Act 1974.
- 1.2 The paper provides the committee with assurance on activity and actions taken during the reporting year of 2020/21, and outlines plans and objectives year 2021/22.
- 1.3 As acknowledged the Covid-19 pandemic has brought about a requirement for additional health and safety measures to be in place. The report therefore outlines and reports against the exceptional arrangements in place and in adhering to legislation and latest government guidance relating to the Covid-19 pandemic.

## 2. BACKGROUND

- 2.1 NHS Hull Clinical Commissioning Group (Hull CCG) has responsibilities under the Health & Safety at Work Act (1974), and associated legislation to ensure that any employees, contractors, and visitors are provided with a safe place of work, and safe systems of work.
- 2.2 In order to support this work, the CCG continues to secure the services of a qualified Health & Safety Advisor who is based within the organisation on a 0.2 WTE arrangement from City Health Care Partnership CIC.
- 2.3 Services of a Local Security Management Specialist were secured through a contract with AuditOne and their Local Security Management Specialist worked with the organisation to review security related policies and procedures. This arrangement has now ended, and the organisation seeks advice on an 'as and when required' basis.

## 3. INFORMATION

### 3.1 Health, Safety and Security Group

- 3.1.1 The Health, Safety and Security Group continues to meet on a quarterly basis, in ensuring that all required health, safety and security actions are met, and that suitable arrangements and monitoring and oversight is in place for the organisation.

The group comprises:

- Deputy Director of Quality and Clinical Governance / Lead Nurse (Chair)
- Health and Safety Advisor (Vice Chair)
- Human Resources Representative
- Estates Representative
- Fire Officer/ Fire Warden/ First Aider
- Trade Union Representative
- Local Security Management Specialist

- 3.1.2 During the reporting year, regular meetings have been achieved via MS Teams rather than face-to-face. The minutes of the meetings are shared with NHS Hull CCG Integrated Audit and Governance Committee.
- 3.1.3 All Security matters are also discussed by the group and the Local Security Management Specialist (LSMS) is sought on matters as required.
- 3.1.4 The Terms of Reference for the group were last reviewed in September 2020 and continue to ensure that the business of the group is achieved. Furthermore, that in response to the pandemic, the required environmental risk assessments and identified control measures are in place.
- 3.1.5 Policies and procedures are reviewed within the Health & Safety Group, ensuring the required uptake of statutory and mandatory health, safety, and security related training against organisational and national targets. Incident reporting data is also reviewed at each meeting as a standing item.
- 3.1.6 Standing agenda items are:
- Policy review and updating
  - Incident reviews
  - Training compliance
  - Risk assessment
  - Health, Safety and Security news and Legislation Updates
  - Health, Safety and Security Action Plan
  - Security Matters
- 3.1.7 Consultation on Health, Safety and Security matters with unions currently takes place through a local trade union representative from the GMB Trade Union. Other recognised unions are encouraged to recruit representatives to join the group.

## **3.2 Risk Assessment**

- 3.2.1 Risk assessments are the basis of all Health and Safety legislation and Security best practice guidance, in informing the required actions for the mitigating of risks. Identifying, then either removing or reducing risk is key to the safe working of all.
- 3.2.2 In response to the Covid-19 pandemic, the CCG undertook a risk assessment of the office environment. Completed in April 2020 this was informed by the national guidance document for office environments, thereafter a Covid-Secure Certificate was issued. The risk assessment concluded that a small number of minor actions were required around signage and provision of hand gel and cleaning wipes. These were addressed promptly. The risk assessment was reviewed to measure effectiveness in August 2020 and again in September 2020. There are no outstanding actions and oversight of the risk assessments for the office environment continues to be overseen by the Response and Recovery Group, reportable to the Senior Leadership Team.
- 3.2.3 All risk assessments are reviewed on an annual or bi-annual basis, but sooner if required in response to changes in legislation or in response to a reported incident. Risk assessments are held electronically and are also available in a folder in the staff area at Wilberforce Court. Staff are alerted by email and by newsletter if any changes are made to existing assessments or if new ones become available.

- 3.2.4 The focus of risk assessments during the reporting year has mainly been to ensure that staff both working from home, and those attending the office could work in a safe environment, with appropriate equipment in place.
- 3.2.5 In response to the Covid-19 pandemic all staff undertook a personal risk assessment, relating to their work and their personal circumstances and health vulnerabilities. The completion of which aligned with the Government directive to work from home wherever possible. Any issues identified relating to health and safety were addressed and recorded by managers. All risk assessments have been regularly reviewed and informed additional support measures including introducing flexible working arrangements, provision of office equipment at home, and health needs informed specialist equipment, including chairs and desks.
- 3.2.6 A full covid-secure risk assessment was undertaken on the Wilberforce Court premises to ensure that staff who could not work from home could do so safely in the office environment. A range of measures were introduced which ensured enhanced cleaning and social distancing were in place and staff were supported to work safely and effectively. Those attending the office were requested to use a desk booking system to ensure there was no breach of the risk assessment. The Fire Risk Assessment was reviewed in response to these changes.
- 3.2.7 Work on other areas of the Wilberforce Court building was halted during the pandemic, so there was no need to liaise with contractors during this period as had been necessary in the previous year.

### **3.3 Policies and Procedures**

- 3.3.1 During 2020/21 no new Health and Safety policies have been developed. All active Health and Safety policies have been reviewed and ratified however no substantial changes have been required or made.
- 3.3.2 The approvals process remains the same with all new and amended policies going through the Integrated Audit and Governance Committee for ratification.

### **3.4 Statutory & Mandatory Health, Safety and Security Related Training**

- 3.4.1 The majority of statutory and mandatory training is completed via online systems accessed via the Electronic Staff Record (ESR). Particular modules and defined refresher periods have been agreed as shown in the table below. For the period covered in this report, Humber HR managed the online training system through ESR which provided a range of different training modules at both basic and advanced levels.
- 3.4.2 Where online training is not available (COSHH, Fire Warden, Evac Chair), the Health & Safety Advisor would normally to deliver face-to-face training according to demand from new staff or those requiring a refresher. Due to the limitations imposed by the pandemic, a small number of courses took place via MS Teams in order to ensure compliance in relation to fire safety. Confirmation of completion of such courses is sent to Humber HR so that individual staff records can be manually updated.
- 3.4.3 A compliance target of 85% was agreed by the CCG for each subject (with the exception of Data Awareness which has a national target of 95%), with ongoing monitoring being undertaken by the Health & Safety Advisor on a monthly basis. Variance in compliance is accounted for by staff who are absent from the organisation on long term sick leave, maternity or sabbatical. New staff are given 12 weeks to complete all of the identified statutory and

mandatory training required for their role. This requirement remained in place throughout the pandemic.

3.4.4 Managers are notified of the compliance for their team on a monthly basis and are required to address non-compliance with any employees concerned as required.

3.4.5 The agreed training schedule can be seen below, along with the compliance rates for each subject as of 31<sup>st</sup> March 2021.

Subject	Renewal	Target	Compliance
Fire Safety Awareness	Annual	85%	81%
Infection Prevention	Every 3 Years	85%	86%
Moving and Handling	Every 3 Years	85%	84%
Safeguarding Children	Every 3 Years	85%	86%
Safeguarding Adults	Every 3 Years	85%	85%
Equality, Diversity & Human Rights	Every 3 Years	85%	80%
Data Security Awareness (IG)	Annual	95%	90%
Prevent	Every 3 Years	85%	85%
Conflict of Interest	Every 3 Years	85%	81%

### 3.5 Incident Reporting

3.5.1 There were 2 Health & Safety Incidents reported on DATIX for the year 2020/21, this was a decrease of 3 from the previous year.

- Apr-20 – Staff member sustained burn from leaking hot water bottle. This was a personal item brought into the workplace. First aid was applied and there were no lasting effects.
- Jan-21 – Breach of fire compartment by contractors on rear fire escape staircase. The matter was raised with the landlord on several occasions and was finally resolved in April 2021.

DATIX Reports	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
H&S Incidents	0	0	0	0	0	1	0	0	0	1	0	0

3.5.2 There were 2 security incidents reported on DATIX during the year 2020/21. This was 3 less than the previous year.

- Jun-20 – Patrolling Security Officer found glass entrance door to CCG area propped open and no-one on the premises. Unable to establish the reason for this. No items noted to be missing from the organisation.
- Sep-20 – staff member noted that locks on 2 under desk drawer units appeared to have been broken. Unable to establish when this happened, but no items noted to be missing.

Element	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Security Incidents	0	0	1	0	0	1	0	0	0	0	0	0



### **3.6 Fire Safety**

- 3.6.1 The organisation has a robust Fire Safety Policy and currently has 8 trained Fire Wardens who are responsible for ensuring a smooth evacuation from the building in the event of a fire as well as basic day-to-day fire safety duties.
- 3.6.2 Practice evacuations are undertaken by the building concierge twice annually in order to comply with good practice guidance. Evacuations were completed on 19<sup>th</sup> February 2021 (planned practice) and on 14<sup>th</sup> April 2021 (false alarm) The CCG keeps its own records in relation to these evacuations and all undertaken in the last 12 months have gone smoothly with no further action required. These records are discussed by the Fire Warden Group by means of a de-brief directly after the evacuation and are reviewed by the HSS Group on a quarterly basis.
- 3.6.3 The organisation has one member of staff requiring a Personal Emergency Evacuation Plan (PEEP). This was reviewed with the co-operation of the staff member concerned and was held in the Fire Folder held in the 2<sup>nd</sup> Floor reception. No changes were identified.
- 3.6.4 During the pandemic, signing-in arrangements for floor 3 were relocated to floor 2, to ensure that the receptionist on duty was aware if any staff were on the third floor in case of evacuation.

### **3.7 First Aid**

- 3.7.1 The First Aid Risk Assessment can be found in the Health & Safety information folder. No additional staff were trained during the period. The organisation currently has 7 trained first aiders which provides an adequate amount of cover for the environment on both floors of Wilberforce Court. The first aid kits are checked on a monthly basis and hold items appropriate to the activity of the CCG as identified in the risk assessment.

### **3.8 Security**

- 3.8.1 The Security Survey and Risk Assessment of Wilberforce Court areas was completed in January 2021 this concluded a low-risk rating that required no further action.

### **3.9 Communication**

- 3.9.1 Communication is key to maintaining a good Health, Safety and Security culture within an organisation. A variety of methods have been employed to ensure that staff are aware of Health & Safety matters:
- The provision of a Health, Safety & Security noticeboard in the staff rest area on the second and third floors at Wilberforce Court.
  - The circulation of all reviewed policies by staff newsletter and also placing them on the CCG website.
  - The creation of the CCG Health & Safety Information File which contains all risk assessments, building inspections etc.

- The provision of update emails to all staff following each Health, Safety and Security Group meeting.
- The circulation of a Health & Safety newsletter as and when required.

### **3.10 Priorities for 2021/22**

3.10.1 The Covid-19 pandemic has had a significant influence on Health & Safety planning for 2021/22. The priorities for the coming year therefore include:

- Reviewing the building risk assessment to ensure compliance with the government guidance, and ensuring appropriate arrangements are in place.
- The introduction of an Agile Working Policy and the associated risk assessments and actions.
- Ensuring that training compliance is maintained within organisational targets.
- Review and updating of policies in response to changing needs of the CCG and legislation and in reflecting the changes in working within Integrated Care System arrangements.
- Ensuring that any action required due to the conversion of the majority of Wilberforce Court into flats does not adversely affect the health, safety and security of those working for, or visiting the CCG.

## **4. CONCLUSION**

- 4.1. Hull CCG is compliant in delivering its responsibilities regarding Health, Safety and Security. All relevant risk assessments have been reviewed and are available to staff. Policies have been reviewed and plans are in place for formal updates in July 21. There is a good Health and Safety culture established with staff at all levels, which has been challenging during the pandemic.
- 4.2 The work carried out throughout the year ensures that there is a good foundation for compliance with Health and Safety legislation going forward.
- 4.3 Overall, Hull CCG is a low-risk environment as there is little within the work environment in the way of heavy machinery, harsh chemicals or heavy physical work. This does not mean however that the organisation should become complacent regarding its legal responsibilities and review of policies, procedures and incident reporting must be maintained.
- 4.4 The ongoing Covid-19 restrictions are likely to be in force for a further period into 2021 and will need to be regularly reviewed in ensuring the safety of staff and others. Appropriate arrangements are in place which should enable this overall positive situation to be maintained.

## **5. RECOMMENDATIONS**

It is recommended that:

The Integrated Audit and Governance Committee are asked to note the contents of the Health, Safety and Security Annual report for 2020/21.