

WESTERN ISLES NHS BOARD
HEALTH AND SAFETY COMMITTEE

Minute of Meeting

19th January 2022, 10.00-12.00
MS Teams

Members Present

Gordon Jamieson

Dana Murray

Diane Macdonald

Aaron Dawson

Jane Bain

Steven Kennedy

Alana MacPhee

Douglas MacKenzie

Fiona MacKenzie

Janice MacKay

Elizabeth Bak

Chris Ann Munro

Chief Executive (Co-Chair)

Employee Director (Co-Chair)

HR Manager

Health, Safety and Fire Lead

H&S/RCN

H&S and Fire Trainer

Chartered Society of Physiotherapy

Head of Estates

Nurse/AHP Director/COO

Head of Infection Prevention and Control

Senior Charge Nurse, OUAB

UNISON

In Attendance

Dianne Weatherston

PA to Director of HR and Workforce Development

1. WELCOME/APOLOGIES

Mr Jamieson took the chair and welcomed those present.

Apologies were noted from Shuna Mighton, Marion Campbell, Janet Miskovic, Noreen MacDonald and Ellena Macdonald.

2 Minutes of Previous Meeting

2.1 Minutes of 9th September 2021

The Minutes were approved as an accurate record

2.2 Matters Arising

No matters arising were noted

2.3 Action Points 9th September 2021

The Actions were updated as per the Log.

Action 1 - Datix Conclusion & Recommendations Tracker

This action has been on the log for a considerable amount of time. Originally, discussions took place indicating that the Single Operating Division (SOD) should operate a tracker similar to the audit tracker to monitor recommendations. Mr Jamieson asked the committee for their views on whether this is still something they want to take forward.

Ms MacKenzie noted that a Risk Review meeting took place earlier today and she learnt that HIS have a Learning Summary Template, which she has asked to be reinstated. Once this is reinstated, learnings will be more apparent and more available. Mr Jamieson doesn't recall the template. He noted that when HIS and the auditors come in again to look at Datix, they will likely ask where the actions are monitored.

Mr Dawson believes that the actions arising from an event should stay within the event. A lot of effort is put into Datix information, however there are no learning outcomes at the moment. He noted that the event should be closed and then lessons learnt created and shared with a wider audience. Mr Dawson has created a template for this. He hopes this will help reduce repeat events.

Mr Jamieson thanked Ms MacKenzie and Mr Dawson for the updates. He clarified that the remit of the HSC as an assurance committee, is to ensure that there is a system in place and that it works effectively. The system should be implemented and monitored by the operational side of the organisation. It was agreed to leave this action on the log. Ms MacKenzie and Mr Dawson will link in to take this forward.

Action 10 - Note Keeping – Storage/Fire Issue

It was highlighted that storage continues to be an issue, locally as well as nationally.

Mr Jamieson noted that minimal progress has been made in terms of scanning medical notes to make them electronic.

Mrs Munro advised that nationally there is a ban on live culling which presents a significant issue. Deceased culling is ongoing, however this is only hitting the tip of the iceberg. Mrs Munro has asked Mr MacPherson where the medical records department can expand to. Mr Jamieson noted the importance of finding options for fire safe, fit for purpose alternative storage. Mrs Munro, Mr Kennedy and Mr Dawson to look at fire safe storage options both on and off site.

Mr Dawson stated that from a fire safety perspective, the storage of the files on top of the units could potentially impact on the detectors. This was highlighted during fire risk assessment. He added that there is a high security storage container off site that may have some space for medical notes. Mr Dawson and Mrs Munro will discuss this further out-with the meeting.

Mr Jamieson asked if something could be put on top of the existing units to ensure notes aren't stored there. Mr MacKenzie advised that a timber sloping top could be installed. Mr Jamieson added that this would only be helpful if alternative storage is found.

3. DATIX EVENT REPORTS

3.1 Event Reporting

Mrs Bain took the committee through the Incident Reporting for quarter 2. She highlighted that the highest number of sharps near misses were associated with CDU as that's where the sharp was discovered, however most of those sharps originated in Theatre. Mrs MacKay is aware of this. She has discussed this with Theatre and asked them to ensure that no sharps are going through to CDU. She added that Theatre staff will be requested to go to CDU and dispose of the sharp themselves. Mrs MacKay will liaise with Ms Sangster to ensure this is highlighted to Theatre staff.

Mr Jamieson asked if a column could be added to state where the sharp has come from so possible trends can be identified. Mrs Bain will liaise with Mrs Marina MacLeod to check if a column can be added.

Decision: The update was noted.

Action: Mrs Bain to liaise with Mrs Marina MacLeod to check if a column can be added to state where the sharp has come from, so that possible trends can be identified.

4. RIDDOR REPORT 24

Mrs Bain advised that there were two RIDDORs this quarter, however only one will be reported to the committee today.

Mrs Bain referred to dementia patients on wards who have a tendency to wander. She asked if they could have a member of their family in for an extended period of time to keep an eye on them. She added that this would ease pressure on staff. Mrs MacKay advised that Ms Katherine Stewart has asked her to do a walkthrough of Medical 2 to go through some ideas. Mrs MacKay suggested rise and fall desks in the bays for staff to use when doing their writing up. She believes this would make a big difference, as staff would have a view of their patients.

Mr Jamieson noted that from the information coming forward nationally, it would appear that the nurses' station could soon be a thing of the past. New hospitals will no longer be designed with areas where people can congregate. He added that locally, we shouldn't be doing anything to expand or increase nurse station facilities in any of our hospitals.

It was noted that Datix follow-up needs to be significantly improved. Ms MacKenzie advised that discussions have taken place with the Risk team and Mrs Sullivan regarding Datix completion. Work is ongoing to ensure that events are followed up and lessons learned etc.

Mr Dawson explained that timely notification of an event is highly important, especially if there is a potential that the event could be reportable to the HSE, as this must be carried out within ten days. The initial notification of the event could be by telephone or email to the H&S Team. This would allow them to start information gathering to ascertain if the event is reportable.

Mr Dawson advised that a RIDDOR report had to be submitted late to the HSE recently due to information not being recorded on Datix. Mr Dawson is going to speak to Mrs Jamieson about issuing some comms. Ms MacKenzie asked Mr Dawson to link in with her to ensure they have a consistent approach and that information isn't duplicated. Ms MacKenzie will ask Mrs Diane Macleod to set a meeting up.

Decision: The update was noted. Ms MacKenzie and Mr Dawson to link up out-with the meeting to discuss H&S comms.

5. HEALTH AND SAFETY REPORTS

5.1 Falls Report

Mrs Bain presented the Falls Report. She noted that there were 56 falls in the quarter. 55 were patients and one was a member of staff. The staff member is RIDDOR reportable as she broke her ankle. This RIDDOR will be presented at the next HSC meeting.

Mr Dawson and Mrs Bain are meeting with Mrs Noreen MacDonald and Ms Frances Robertson next month to discuss relaunching the falls collaborative.

Decision: The update was noted.

5.2 Fire Door Audit

This item was discussed under Action Points.

6. STATUTORY & MANDATORY TRAINING

6.1 Statistics

Mrs Bain presented the report and went through some of the detail. Hopefully by mid-end of the year the reds will be amber at least. Mr Dawson noted that it's more difficult now to gather the information for the statistics as the location of some staff is changing, for example, respiratory pathways.

He added that the uptake for training is very low. The H&S team appreciate that staff are busy, however it's important that they are trained so they can safely carry out the service they are providing.

Mrs Bain commended the X-Ray department and CDU for getting their whole departments up to date with fire and moving & handling training.

Decision: The update was noted.

6.2 Updated Reporting Format

Mr Dawson noted that presenting information from three years ago isn't helpful. He would prefer to report on the here and now. Mr Jamieson asked if there is an easier way to report. Mr Dawson advised that once Turas is up and running, reporting should be easier. He added that Mr King is working on this. Mr Jamieson agrees that real time reporting would be more beneficial.

Mr Dawson suggested that in the meantime, it would be good to create NHSWI KPI's and have training as part of the KPI's. This would help to demonstrate where we are and where we want to be.

Decision: The update was noted. It was agreed that reporting should be on real time figures, rather than outdated information.

6.3 Chemical Event Management

This item wasn't discussed.

7. INTERNAL HSE INSPECTION WIH

Mr Dawson advised that he has created an Internal Health, Safety, Environmental & Assurance Audit Checklist. The main driver for creating this spreadsheet was to see where we are in relation to HSE compliance and to identify any areas requiring improvement. The intention is to conduct a full audit of WIH and Uist and Barra. Unfortunately, due to recent COVID outbreaks, the audit schedule has been delayed.

Following discussion with Ms Frances Robertson, Mrs Noreen Macdonald and Mrs Mackay, management walk-arounds will hopefully commence next week, starting in Medical 2.

Mr Dawson believes that NHSWI could be due a HSE inspection shortly.

Decision: The update was noted.

8. EXPECTANT MOTHERS RISK ASSESSMENT

Mr Dawson presented the risk assessment. This has been updated in light of COVID. He went through the amendments and asked for comments.

Mr Jamieson noted that it is important to flag up pregnant women's point of view, as there has been national media attention regarding some unvaccinated pregnant women ending up severely ill.

Mr Jamieson asked if an unvaccinated pregnant member of staff poses a risk to patients they are looking after due to the fact they are unvaccinated. Mrs MacKay stated that from an IPC perspective, the risk is to the unvaccinated member of staff rather than the patients. However, with the correct PPE, any risk should be minimal.

It was suggested that Mr Dawson and the OH nurses link in with Mrs Catherine Macdonald, Head of Midwifery in relation to this.

Decision: The amendments to the risk assessment were noted and approved.

9. STAFF GUIDANCE FOR FRONT DESK SECURITY

Mr Dawson presented the paper to the committee. This is a new staff guidance sheet which has been created detailing clear processes to follow if an event occurs.

It was noted that there are different protocols for reception staff to follow. Mr Dawson will liaise with Mrs Munro and add in some extra notes in the flow chart to state what protocols receptionist staff should follow.

Mr MacKenzie advised that an additional camera has been put in place to cover the front desk area.

Decision: The staff guidance sheet was approved on the basis that some additional notes will be added in to detail what protocols receptionist staff should follow. Mr Dawson to liaise with Mrs Munro.

10. FIRE SERVICE ATTENDANCE AT INCIDENTS

Mr Dawson explained that The Board of Scottish Fire and Rescue Service met on 16th December 2021 and approved the draft consultation document on attendance in response to automatic fire alarm activations routed through an Alarm Receiving Centre.

For buildings where there is a sleep risk (i.e. the hospitals), two appliances will attend automatically regardless of the time of day. Office buildings such as HBO may not get an automatic appliance attendance. Mr Dawson assumes that within office hours a 999 call would be expected. If an alarm is activated out-with office hours, they may deploy one appliance rather than two.

The implementation date will be delayed until April 2023 to allow for staff training on the new procedures.

Mr Dawson will meet again with the Local Fire Service at the beginning of February to ascertain what the changes will be. He will provide a further update at the next meeting.

Decision: The update was noted. Mr Dawson to provide an update at the next meeting.

11. ANY OTHER BUSINESS

Helicopter Safety Awareness

Mr Dawson is currently working with the Coastguard to provide Helicopter Safety Awareness for NHSWI staff who are escorting patients during air transfer.

An iSAR Training Database will be set up and there will be 3 administrators (the H&S Team) who will be able to provide logins for staff. There will be a 2-year refresher on the training to ensure the level of Helicopter Safety understanding is maintained going forward.

A PDF guide will be provided to those requiring the training, and this will explain the process from login to completion.

Mr Jamieson noted that this is an important piece of work to ensure that those staff who may find themselves in a situation where they have to attend air transfer of a patient are appropriately trained.

Practical Fire Drills

Mr Dawson intends to carry out more practical fire drills throughout the organisation without giving much notice. He will liaise with Mr MacKenzie and his team to take this forward.

Mr Jamieson closed the meeting and thanked all for their attendance.

DATE AND TIME OF NEXT MEETING

Date: 17th March 2022

Time: 10.00-12.00

Venue: MS Teams