MINUTE of MEETING of the HEALTH and SAFETY COMMITTEE  
Board Room, Assynt House  
17 August 2006 – 10.30 am

Present
- Ms Elaine Mead, Chief Operating Officer (Joint Chair)
- Ms Diane Fraser, RCN, New Craigs (Joint Chair)
- Mr Trevor Bell, AMICUS, Raigmore Hospital
- Ms Marilyn Davidson, FCS, Raigmore Hospital
- Mrs Anne Gent, Director of Human Resources
- Mr Alan Gowie, Clinical Area Manager, Mental Health & Learning Disabilities
- Ms Alison Hudson, Assistant General Manager, Mid Highland CHP
- Mr Dave Mellis, AEEU, Estates Department, Raigmore Hospital
- Mr Douglas Seago, Head of Facilities
- Ms Christine Temple, Community Dental Officer
- Mr Andrew Ward, General Manager, Woman and Child Health

In attendance
- Ms Mary Cocker, Head of Radiation Protection
- Mr Tony Cowan-Martin, Service Development Manager (OH and H & S)
- Mr Charlie Gunter, Health & Safety Adviser
- Ms Alison MacLean, Infection Control Nurse
- Ms Rosie McGee, Health & Safety Adviser (SSU)
- Ms Linda Rawlinson, Nurse Manager, Occupational Health
- Dr Steven Ryder, Director of OH Services
- Mr Frank Sobande, Head of Health & Safety
- Mr Ray Stewart, Employee Director
- Mr John Swatman, Head of Estates, NHS Highland
- Mrs Barbara Simpson, Board Committee Administrator

1 WELCOME AND APOLOGIES

Ms Pauline Craw, Ms Lynda Davidson, Mr Stephen Davison, Mrs Anne MacKenzie, Mrs Janette McQuiston, Ms Gill McVicar, Ms Fiona Murdoch, Dr Ken Oates, Mrs Caroline Parr and Dr Lesley Anne Smith.

2 STAFFSIDE JOINT CHAIR FOR YEAR COMMENCING 1 MAY 2006

Mr Stewart welcomed the appointment of Ms Diane Fraser as Joint Chairman for a period of two years. Miss Mead also welcomed Ms Fraser and thanks were noted for the retiring Joint Chairman, Mrs Audrey Urquhart.

The Committee:

a Noted the appointment of Ms Fraser.
3 MINUTE OF MEETING HELD ON 18 MAY 2006

Page 6, Item 5.4: change “Advisers” to Representatives.

Taking account of the foregoing, the Minute of the meeting was approved.

4 ACTION PLAN

4.1 Action Plan

An updated Action Plan from the Health & Safety Committee meeting held on 18 May 2006 had been distributed previously. Members went through each action point and noted the position. The following were highlighted:

(a) **Item 4.1 – Highlighting of the Safety Management System:** Ms Mead confirmed that the Safety Management System would be highlighted at the Corporate Team Meeting the following week.

(b) **Item 4.2 – Annual Staff Survey 2005/06:** Members noted that a report on the Survey would be on the agenda for the November meeting when Health & Safety issues would be discussed.

The Committee

a **Noted** the update on the Action Plan.

b **Noted** that the Safety Management System would be highlighted at the Corporate Team Meeting the following week.

c **Noted** that a report on the Annual Staff Survey 2005/06 would be on the agenda for the November meeting.

5 MATTERS ARISING

5.1 HSE Visits and Reports

Mr Sobande tabled the HSE Management Inspections Report Action Plan. A number of points were highlighted as follows:

(a) **Page 4, Item 10, Staff Uniforms:** Mr Sobande reported that there had been no definite progress with the review of staff uniforms on a risk assessment basis and explained that certain uniforms did not help staff to bend appropriately. Ms Mead stated that as this issue had been raised by the Health & Safety Executive (HSE) then action had to be taken. Mr Sobande advised that a general risk assessment regarding appropriate clothing was the area to focus on. Mrs Gent stated that staff should be aware of using appropriate clothing as the policy had been reviewed a number of years ago. It was important that the policy was up to date and Mrs Gent asked that Dr Lesley Anne Smith, who held such policies, should be approached to identify the appropriate one; the mechanisms for monitoring and updating it were in place.
(b) **Page 9, Item 7, Laundering Uniforms:** Ms MacLean stated that facilities for laundering uniforms were available for Belford Hospital but other areas had been put on hold at the moment. Mrs Gent added that there was a need to be clear who was leading on the uniform policy. In the past this had been Mr Nigel Hobson, Associate Nurse Director.

(c) **Page 9, Item 10, Control of Infections:** Members noted that this was a cumulative action plan. Alcohol gel and cleanliness champions were in place and the red priority could now be removed. Mrs Gent asked Mr Sobande to have a rigorous look at the plan and show when problems had been identified and incorporate any ongoing issues in Argyll & Bute CHP. Mr Stewart stated that NHS Highland had been commended by the Minister for Health, at the recent Annual Review, as the best in Scotland for reducing infection levels.

(d) **Page 12, Stress:** Mrs Gent confirmed that NHS Highland’s current practices and training schedules on the management of stress had been selected as an example of best practice and were to be shared with other NHS organisations. There were also proposals to involve NHS Highland in a future national trial and campaign. Ms Mead suggested that Mr Steven Hodges be asked to draft an article for the next Team Update.

(e) Mr Sobande confirmed that the HSE had visited New Craigs last week to discuss the pond on the Scottish Natural Heritage (SNH) site which may have been a potential area of high risk.

**The Committee:**

a. **Noted** the update.

b. **Remitted** to Mr Sobande to approach Dr Smith to identify the policy on staff uniforms and **noted** that the mechanisms for monitoring and updating were in place.

c. **Remitted** Mr Steven Hodges to draft an article for the next Team Update confirming that NHS Highland has been selected as an example of best practice on stress.

d. **Remitted** to Mrs Gent/Head of Health & Safety to have a rigorous look at the Control of Infection Action Plan, show when problems had been identified and incorporate any ongoing issues in Argyll & Bute CHP

6 **ITEMS RAISED BY HEALTH & SAFETY REPRESENTATIVES**

6.1 **Fire Alarm Update at Raigmore Hospital**

Mr Swatman reported that there were many challenges in replacing the fire alarm system at Raigmore Hospital. A group had been set up to look at these challenges and options when decanting wards. There was also an opportunity to improve the fabric of the wards while they were closed. Ms Fraser felt that it was important to have a Health & Safety Representative on the group. Mr Sobande confirmed that there was a Health & Safety Adviser on the group and that the appointment of a Health & Safety Representative would be taken forward. Mr Mellis asked for the involvement of more than one Health & Safety Representative. Mr Swatman expanded on the additional works which could be undertaken during ward closures and it was noted that these should not hinder the start of work.
Ms Fraser raised the possibility of extra pressure on community hospitals when wards were closed at Raigmore Hospital. Ms Mead stated that length of stay would be reduced appropriately and patients would not be compromised medically. With staffs’ support this process could be managed proactively and should not affect community hospitals. Ms Fraser stated that there may also be training issues if the patient journey was altered. Ms Mead reminded members that many hospitals had already undertaken this and the key to success was pre-planning.

Ms MacLeod raised issues around infection control during the ward closure period. The lack of single rooms and the increased clutter when moving patients meant that there would be less of an ability to decontaminate. Confirmation was given by Ms MacLean that an audit would be carried out over the closure period.

Mr A Ward confirmed that arrangements in Women and Child Health were well underway with good partnerships involved and staffside representatives participating throughout the whole process. A meeting had been arranged on Monday 21 August 2006 at 5.00 pm which was open to all staff and it was hoped that there would be a good turnout from the Specialist Services Unit (SSU). This meeting was seen as an opportunity for staff to be involved from an early stage and give their views.

6.2 Violence & Aggression Training

Ms Fraser asked what measures were to be put in place to curb the lack of attendance at training courses. Mr Sobande tabled a paper on Moving and Handling Training Attendances for the quarter April to June 2006 together with further information from Ms Mo Kerr, Management of V & A Adviser. Various initiatives had been tried to address training requirements including support workers on wards and a trial run of cascade training in the Theatres at Raigmore Hospital. Targeting the Skye area had been successful and a similar visit to Caithness had been scheduled for November.

Discussion followed during which Mr Sobande gave examples of non-attendance of which cancelling at the last minute was the most common reason. This made it difficult to achieve full attendance at courses as it was then too late to fill the vacant places. Mr Sobande explained that courses were sometimes overbooked to try to address the problem. Ms Mead felt that overbooking was the best way forward and added that thought would have to be given to taking training to high risks areas.

6.3 NHS Highland Smoking Policy

Mr Seago reported that feedback from Community Health Partnerships (CHPs) had shown that the Smoking Policy was working well and they were moving towards a total smoking ban on NHS premises by March 2007. A report highlighting all the issues was to go to the next Area Partnership Forum (APF). Mr Sobande raised concerns regarding how security staff would deal with the ban and how it would be policed. Mr Seago agreed that there were issues which would have to be addressed and open discussions would need to take place with patients and staff so that the Board was clear when the policy was drawn up. Ms Mead commented that Argyll & Bute CHP had already successfully implemented the Smoking Policy. During further discussion Ms Mead suggested including the policy in new starters’ job packs, Mrs Gent commented on issues around breaks for staff and Mr Cowan-Martin identified hospital residences as an area requiring clarification.

The Committee noted the position.

7 TOPIC SPECIFIC ITEMS
7.1  Presentation on Control of Substances Hazardous to Health (COSHH)

Ms McGee gave a presentation on COSHH covering its past, present and future. Members noted that NHS Highland had achieved much improvement in COSHH since it was first legislated in 1992. There was a legal duty on all employers to protect employees from hazardous substances. Since implementation, awareness had been raised and a risk assessment process had been put in place. There were areas for improvement but there were also a lot of good management examples as in the laboratories and domestic services. The need for a central database was highlighted and there was now a requirement for an outside provider to supply an effective system.

During the discussion which followed the presentation, Mr Sobande gave examples of where individuals should be monitored. Dr Ryder felt that risk assessment was the key to the problem; everything followed from that and there was a need to identify risk areas. However, it was acknowledged that the amount of time to carry out a risk assessment should not be underestimated. With regard to the establishment of a database for COSHH, Mrs Gent stated that the need for a database was only part of the problem as a strategic approach regarding the promotion of risks around COSHH was also required. Ms Mead stressed that it was important to raise the profile of COSHH now. There was a need to initiate and undertake an audit to identify key areas so that a business case for a database could then be considered. This was something which could be done now while other opportunities were being discussed.

Mr Sobande alerted members to a Collaborative Risk Assessment Workshop being held on 29 August where all were invited.

The Committee

a  Noted the presentation on COSHH.

b  Noted that it was important to raise the profile of COSHH.

c  Agreed that there was a need to undertake an audit to identify key areas so that a business case for a database could be considered.

7.2  Health & Safety Arrangements in Argyll & Bute CHP

Mr Sobande tabled a Risk and Safety reporting structure plan for Argyll & Bute CHP and took members through the various levels of reporting. Members noted that the structure was in need of updating and agreed that a representative from the Argyll & Bute CHP should attend the Health & Safety Committee.

The Committee:

a  Noted the position.

b  Noted that the Risk and Safety reporting structure plan for Argyll & Bute CHP was in need of updating.

c  Agreed that a representative from the Argyll & Bute CHP should attend the Health & Safety Committee.

7.3  Health & Safety Training

Mr Sobande updated members on the present position with Health & Safety training.
7.4 Staff Governance Action Plan  
Section E: ‘Provided with a Safe & Improved Working Environment’

Mr Cowan-Martin spoke to the Staff Governance Action Plan, Section E: ‘Provided with a Safe & Improved Working Environment’ which had been circulated previously. NHS Highland was required to review its Staff Governance Action Plans for the five sections of the annual Staff Governance Audit by the Scottish Executive Health Department (SEHD) Mr Cowan-Martin explained that each section’s Action Plan was reviewed quarterly throughout the year to monitor progress. Action Plans would continue to be updated and progress reviewed towards completing the actions described therein. Members noted the updated Action Plan which included an Action Plan to achieve NHS Highland’s sickness absence targets.

The Committee noted the updated Action Plan which included an Action Plan to achieve NHS Highland’s sickness absence targets.

8 ADVISERS REPORTS

8.1 Health & Safety

Mr Sobande spoke to the Health & Safety Summary Report for April to June 2006 which had been circulated previously. The following were highlighted:

(a) Page 2, BNA Staff, Moving & Handling and Violence & Aggression Training at New Craigs: A number of agency staff have been involved in a survey over the past few months to identify gaps in statutory training. Data given on page two of the report showed that a proportion of this workgroup were still not being trained in the statutorily required disciplines. Mr Sobande confirmed that discussions were ongoing to address this issue. Ms Mead advised that this matter should be progressed through the British Nursing Association (BNA).

Ms Fraser felt there could be risk issues relating to employed staff if agency staff were not adequately trained and raised the question of whether monitoring was undertaken to detect the types of training agency staff received. Mr Sobande replied that the type of training provided was based on TMAV (Therapeutic Management of Violence and Aggression) and confirmed that this also applied to the Argyll & Bute CHP. Ms Mead asked that names be removed from data in future.

(b) Page 3, Resource Folder: Members noted that the Resource Folder would be launched along with the Safety Management System.

(c) Page 5, Argyll & Bute CHP: Members noted that the Health & Safety Team have been working with colleagues to progress an integrated action plan. Ms Fraser felt that it would be helpful for members to have a flowchart of the Health & Safety Committee. Mrs Gent confirmed that Dr Smith could provide this and asked the Board Committee Administrator to contact Dr Smith and liaise with Ms Fraser regarding the appropriate flowchart to be sent to members.

The Committee:
a Remitted to Mr Sobande to progress discussions on agency staff training through the BNA.

b Remitted to Mr Sobande to remove names from data in future.

c Remitted to the Board Committee Administrator to contact Dr Smith and liaise with Ms Fraser regarding the appropriate flowchart to be sent to members.

8.2 Infection Control

A report on Infection Control by Mrs Linda Davidson had been circulated previously. In Mrs Davidson's absence, Ms Alison MacLeod spoke to the report highlighting the following:

(a) A recommendation that the Infection Control and Health & Safety impact of the planned programme of ward closures, as part of the fire alarm upgrade, be risk assessed.

(b) The post of Infection Control Manager had been filled by Ms Morag Greenshields who was currently based in Portree.

8.3 Estates

Mr Swatman spoke to the Estates report which was tabled. The report covered capital funding, additional revenue funding and training. Mr Swatman confirmed that arrangements were in place for the nominated officer (fire) to attend all CHP management meetings in August to update managers on arrangements in place to review and revise fire evacuation policies for all hospitals. Lawson Memorial Hospital fire policy had been revised and implemented in July.

8.4 Occupational Health

An Occupational Health Report, April to July 2006 had been circulated previously. Dr Ryder spoke to the report and expanded further on the Rehabilitation Service. Ms Mead asked that Argyll & Bute CHP be included in the next report.

The Committee remitted to Dr Ryder to include Argyll & Bute CHP in the next Occupational Health Report.

8.5 Radiation Protection

Ms Cocker spoke to the Radiation Protection Report which was tabled. Points covered were as follows:

- Mandatory provision of radiation safety advice according to the radiation legislation and guidance
- Legal non-compliances due to on-going staff difficulties
- Recent achievements and points of note

Ms Mead asked for clarification on legal non-compliances as this appeared to differ from last year's report. Ms Cocker confirmed that difficulties with resources had been highlighted previously. A business plan had been produced detailing the issues and recommending the way forward.
Ms Cocker announced that she would be leaving NHS Highland in September and confirmed the interim measures with NHS Glasgow until her post was filled. Members thanked Ms Cocker for her work with NHS Highland.

The Committee thanked Ms Cocker for her work with NHS Highland.

8.6 Clinical Governance/Risk Management

In the absence of Dr Smith and a Clinical Governance/Risk Management report, Ms Mead asked members if there were any issues that required urgent discussion. It was confirmed that there were none.

The Committee noted the Advisers’ Reports.

9 WORKING GROUP REPORTS

9.1 Workplace Hazards Advisory Group (WHAG)

The minute of meeting of the WHAG dated 21 July 2006 was circulated previously.

The Committee noted the Minute of the WHAG meeting dated 21 July 2006.

10 Any Other Previously Notified Competent Business

10.1 Incident at New Craigs

Ms Fraser confirmed that issues around security and lighting at New Craigs were to be discussed.

10.2 Window Restrictors at New Craigs

Mr Sobande reported that trials of various window restrictors at New Craigs were almost complete. A paper would be prepared showing the costings which would be presented initially to the Committee. Ms Mead reminded members that such a paper would have to go to the Management Team first for the allocation of resources to be considered.

10.3 Head of Health & Safety

Ms Mead informed members that Mr Sobande was due to leave his post of Head of Health & Safety at the beginning of October. Members noted thanks to Mr Sobande for his work and wished him well in the future.

11 Date and Venue of Next Meeting

The next meeting of the Health & Safety Committee will be held on Thursday 16 November 2006 at 10.30 am in the Board Room, Assynt House.

The meeting concluded at 12.45 pm