

DRAFT

(to be ratified at meeting on 24th November 2009)

Notes from: The Trust Health & Safety Committee

Author: Heather Churchill

Date of Committee Meeting: 22nd September 2009

Present:

Sally-Anne Baroudi	Hotel Services
Beth Beeson	Clinical Engineering - UNITE
Jackie Bracey	RCM – Family Health
Bob Browne	RCN (VICE CHAIR)
Heather Churchill	Health and Safety Manager
Chris Cobb	SOR Rep
Danny Collett	Unison Rep
Cath Edwards	EF & M
Julia Hodgett	IC&T
Keith Hollis	Diagnostic Imaging
Mark Jackson	Head of Estates, Operations
Locksley McPherson	Health and Safety Advisor
Amanda Mahon	Specialist Support (Theatres, City)
Neil Mart	Head of Organisational Risk, Quality and Safety (CHAIR)
Keith Oliver	Cancer & Associated Services
Ruth Prigg	BDA Rep
Gary Tibbs	EF & M
Jo Tomlinson	LSMS
Joy Walsh	Specialist Support (Theatres, QMC)
Hannah Weden	CSP (Physio) Rep
Sally Wright	Family Health

Apologies:

Elaine Bellamy	Infection Control
Anna Betts	Occupational Health
Kate Shepherd	University
Carol Verlander	Gentian

Key Agenda Items	Issues/Significant Points Raised	Agreements/ Actions	Lead for Actions/ Timescales
3.0 Notes from the meeting of 28th July 2009		<p>The minutes were agreed as an accurate record of the meeting.</p> <p>It was noted that this would be Keith Hollis's last meeting before his retirement. The Committee would like to thank Keith for all of his dedication and hard work in support of health and safety.</p>	

3.1 Matters arising from the notes of the meeting of 28th July not on the agenda	Door openers – as previous	It was reported that Ruth Whyard has emailed Gary Tibbs with a list of doors that she has received complaints about. Action: Gary Tibbs to review the list and draw up a proposal for addressing them.	Gary Tibbs
	Hospital Security at Night – as previous	<p>The Health & Safety Sub Group of the CIDC has allocated £70K to improve security at the City campus, especially the North Corridor.</p> <p>Lighting – a report from Estates regarding lighting will be brought to the THSC. The car park and area behind Maternity were highlighted as areas of concern. Any other areas of concern should be emailed to Neil Mart</p> <p>It was noted that the Hucknall Rd gate next to Heathfield House should be closed at night and sometimes is not. Mark Jackson said that as part of a 5 year programme, this gate may close permanently. HC to check with security.</p>	<p>Mark Jackson</p> <p>All</p> <p>Heather Churchill</p>
	Hotel Services EHO inspections	Sally-Anne Baroudi reported that ward and beverage kitchens were included as part of the annual audit across the Trust. A cleanliness audit relating to national standards was also in place. HC to ensure EHO report comes to this committee.	Heather Churchill
	No water in X-Ray sluice	This item is still outstanding.	Mark Jackson
	Lift lobbies	HC undertook spot check of lift lobby areas and found various items of equipment in all lift lobby areas surveyed. It was suggested that monthly spot checks should continue. Hotel Services would like to be involved in these checks so that the equipment can be identified and date checked. UNISON also to be involved (Danny). Other hot spots were identified (EENT Theatres, D10/11) and these will be included in the checks.	Locksley McPherson
	Presentation by Paula Ward (Learning and Organisational Development) on Values and Behaviours	Comments were fed through to Paula from the Staff side and Management Reps. Paula will be invited back to the meeting to give an update.	Heather Churchill

	Consultation	Neil reported that Stephen Fowle has picked up this and will raise it at the next available Chief Execs team meeting. This is a positive stance taken to address this issue. Several Directorates have also flagged up the need to involve the Staff Side/TU's.		
	HSE Visit – Slips, Trips and Falls	The Committee agreed to defer this item to the next meeting as there had been some problems with the testing device.	Locksley McPherson	
	Health & Safety Law Posters	Locksley reported that the posters were advertised on the bulletin and from this many areas have asked for a copy. The posters are available on corridors on health and safety notice boards. There is no change in where the posters have to be displayed. Organisations have until 2014 to update the posters.		
	Compliance Review – the way forward	Heather has written to all areas who have not returned any information. Areas of non compliance and non returns will be highlighted to the ORPPC. Heather to send the information to General Manager's and Clinical Leads of those areas that have not responded.	Heather Churchill	
	DATIX	Haydn Williams to attend the next meeting to give a presentation on DATIX.	Heather Churchill	
	Draft union Inspection Agreement	Neil stated that he has only received comments form Danny and will progress this through to approval.	Neil Mart	
	Bottled Water Dispensers	The Committee agreed that only piped systems should be used. Procurement and Estates to take action to prevent bottled systems being purchased. Mark to bring a report to the next meeting.	Procurement Estates Mark Jackson	
	Incident Reporting Policy	This is going to the Trust Board in October.		
4.0 Presentation on Mandatory Training and OLM	Margaret Marson and Gill Webster (Learning and Organisational Development) attended for this item	A review has taken place across the Trust on statutory and mandatory training and a draft policy has been developed. OLM is the only recording mechanism for training that is counted by NHSLA. As part of the policy, appendices have been developed that highlight the training that staff need to undertake. This includes all staff and role related training. E-learning packages are also		

		<p>being reviewed.</p> <p>There is sometimes a difference between the information on OLM and local training records. This may be due to the poor quality of returns at a local level and also people that are booked onto training but do not actually attend. Registers can also come in months later than when the training took place. NM enquired if Directorates and Corporate functions have submitted their training plans. Neil added that from experience, most training is back loaded to the end of the year and this causes problems for the central teams delivering the training especially when extra sessions are requested. NM stated that this is not yet in place yet. Statutory and mandatory training has to be done in work time and releasing staff can be a problem so L&OD have looked into how much time each staff group needs.</p> <p>Training on the OLM system is available from L&OD.</p> <p>The matrix is very specific on what training is required for job roles and staff groups and this should be easy to cross reference with KSF. Gill to send the matrices to the group after they have been approved. This will be a prompt to managers to ensure that the appropriate training is undertaken and is not a tick box exercise as it provides qualitative information.</p>	
5. Key Issue Reports	No items tabled		
6. Strategy, Planning and Statutory Output	No items tabled		
7. Contact with HSE/EHO	No items tabled		
8. Trust Wide Co-ordination of Health and Safety	8.1 H&S Management by Gentian	This item was deferred to the next meeting as Carol Verlander sent her apologies.	
	8.2 Accident/Incident Report	On 1 st October all data will go onto one NUH Datix system. Sharps incidents are still high and there also appears to be a discrepancy between the number of incidents reported and the number of staff attending occupational health with needlestick injuries. There is a piece of work being undertaken in the Trust regarding this issue and occupational health are asking staff to complete an incident report	

		<p>form when they attend the clinic. With the launch of the new incident reporting manuals in October there will be a drive to increase reporting and also to feed back to those who complete the forms. A Directorate will be chosen to pilot the electronic reporting system. The system also allows for notifications so that the manager will be sent an email when a form is completed. In the future other areas will be able to be notified such as Clinical Engineering and Estates. Heather asked the Committee to think about what information/reports would be useful.</p>	All
	8.3 Hand Washing & Skin Problems	Data received from occupational health regarding appointments for hand and skin problems show that the number has decreased during the year. This exercise should be continued for 12 months and an updated report will be brought to the meeting in November.	Heather Churchill
	8.4 THSC Terms of Reference	<p>Changes have been made to reflect changes in job titles and terminology. Each Directorate/Corporate function should also nominate a deputy to attend on their behalf if they cannot attend. HC to write to all Directorates in this regard. Directorates representatives are needed to ensure that the Compliance Review is undertaken so that there is no negative reporting to the ORPPC, to provide a link to feed issues back and forth between Directorates/Corporate functions and to inform consultation and service change. Staff are welcome to attend the meeting as guests if they wish. Please send any comments on the Terms of Reference to Heather by 6 October.</p>	Heather Churchill All
9. Specific Issues	9.1 Specific Issues from Trust Advisors	<p>9.1.1 Graffiti using hydrofluoric acid</p> <p>An alert has been sent out to inform staff of a new type of graffiti using hydrofluoric acid. Staff should not attempt to clear up any containers and report issues to their line managers. Please display on appropriate notice</p>	All

		boards. Thanks to Estates for bringing this to our attention.	
	9.2 Specific Issues from Directorates and Corporate Areas	<p>9.2.1 Change of ward names at City campus.</p> <p>Mark Jackson will be bringing a paper to on this issue to the next meeting. The Committee noted that this issue impacts on a number of areas/systems including DATIC and telephones.</p> <p>9.2.2 Tug licensing issues</p> <p>Jo Tomlinson informed the Committee that there had been an incident where an unlicensed vehicle had been on the road. A list of all vehicles should be sent to Davis Monks. There is also a query regarding braking systems which needs clarifying. Maintenance and user operator checks should also be considered.</p>	<p>Mark Jackson</p> <p>All</p> <p>Jo Tomlinson</p>
	9.3 Specific Issues form the Staff	<p>9.3.1 Carpet in PFI building</p> <p>The Committee discussed the varying view points regarding the carpet in EENT. It has already been removed from D floor in accordance with a risk assessment. Staff on floors A, B & C have not reported any issues to the Matron who has also said that visually impaired people like the change of texture. however, infection control advice is that there should not be any carpet in clinical areas. The risk assessment should be appropriate for all floors. NM asked if we knew the life expectancy of the carpet as this may be relevant to who picks up the cost. Costs to replace would require negotiation with the PFI company. HC to make further enquiries.</p> <p>9.3.2 Mirrors on blind corners</p> <p>The TU's raised the issue of the lack of mirrors on some blind corners and the potential for an incident to occur. In particular, this was on B Floor, surgical wards and areas near the Doctors mess. It was agreed that TU/Management Reps to forward hotspots to Heather so that a plan can be devised.</p>	<p>Heather Churchill</p> <p>All/Heather Churchill</p>
10. Policies,	10.1 Mobile Phone	A group have met to review the	

Procedures	Policy	mobile phone policy but the sticking point has been the need to balance recent Department of Health guidance with concerns regarding the effect of mobile phones on equipment. There are areas where mobile phones cannot be used including where there is certain equipment. The policy recommends a risk assessment approach. NM asked Mark Jackson to obtain details of alarm systems that could be deployed in high risk areas. Medical devices have several comments on the policy to be forwarded to Heather Churchill.	Mark Jackson Beth Beeson Heather Churchill
11.0 Updates from other Site Users/THSC Sub Committees	11.1 H&S Sub Group CIDC	The membership of this group has been strengthened with representatives from Estates and Finance. In addition to the paper, further items were agreed at the last meeting including a bath on F21, a Tissue analyser in Pathology, legionella prevention works on E17, embankment works, lighting upgrades and signing. NM reported that at the next meeting consideration will be given to the DDA audit requirements. Any bids made will need to be accompanied by risk assessments.	
12.0 Key issues from/for ORPPC		Policies – Legionella and Asbestos (Estates) Missing Persons and Hostages (Dr Dove) Same Sex Steering Group – TU rep on the group Governance Group – vehicle to raise issues at the Treatment Centre	
13.0 Agenda items for future meetings		DATIX presentation DDA Audit Clarification of Tugs issues R Jo & hoist repair	

Date and venue of next meeting
Tuesday 24th November 2009
Training Room 1, St Francis, City Campus
10.00 – 12.00