NHS

Oxford University Hospitals
NHS Foundation Trust

Cover Sheet

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Title:	**Health and Safety Quarterly Report: Jul – Sept 2023**

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Confidential:	**Yes**
Key Purpose:	**Information**

Contents

1. Executive Summary

1.1. This report provides information to the Trust Board relating to the management of health and safety at Oxford University Hospitals NHS Foundation Trust (OUH) for the period 1st July 2023 – 30th September 2023.

1.2. The Trust was successful in achieving re-certification to the prestigious ISO 45001 Standard following an audit at the Churchill Hospital (CH) in July 2023. ISO 45001 is globally recognised as the benchmark standard for Occupational Health and Safety Management Systems; to have retained last year's initial certification is a fantastic reflection of the Trust's combined efforts and focus on continual improvement.

1.3. The audit in July noted significant improvements in the Occupational Health and Safety Management System (OHSMS) compared with the certification audit in April 2022 (6 nonconformities compared to 17 in 2022). Further continual improvement of the OHSMS in progress is the delivery of actions to address the six nonconformities raised and the wider implementation of processes to meet the ISO 45001 standard in readiness for a planned audit at the John Radcliffe site.

1.4. The audit in July provided external validation for improvements in the Trust's OHSMS and clear evidence of the positive health and safety culture developing in all areas of the Trust. All teams approached to be involved with the audit, and others to fulfil general requests from the auditor, readily agreed and, due to time constraints, many more departments volunteered than were able to be seen; the areas not audited often expressing disappointment at not having the opportunity to showcase the improvements in health and safety that they have made.

1.5. The Health and Safety Team continues to support other teams and departments to align the ISO 45001 Standards with improvements in other business processes, such as: the procurement of goods and services with consideration for health and safety requirements; the management and control of external contractors on OUH premises; and collaboration with internal and external partners to identify and then to target reductions in levels of work related absence and sickness due to H&S incidents.

2. Recommendations

2.1. The Trust Board is asked to note the content of the report and the information contained in the Appendices.

2.2. There are no recommendations in this report.

3. Purpose

2.3. This report is intended to provide the Trust Board with information about Health and Safety (H&S) for the period July – September 2023.

4. Background

4.1. This report provides a summary of the most significant updates from the Health and Safety (H&S) team during the reporting period and signposts any new or emerging

risks and opportunities for these areas. A summary of key points is provided as a narrative and remaining information is contained within a table aligned to the ISO 45001 Standards (which form the framework for the Trust's Occupational Health and Safety Management System). This table illustrates the requirements of the standards and the work that has been implemented against these requirements during the reporting period.

5. **Health and Safety Team report**

5.1. The Trust's Occupational Health and Safety Management System (OHSMS) is aligned to the ISO 45001:2018 Standards, which is globally recognised as the benchmark standard for Occupational Health and Safety Management Systems and sets out the legal requirements, other requirements and the processes that a management system meeting these standards must have in place.

5.1.1. The ISO 45001 requirements are applicable across all areas of the Trust (for non-clinical processes), i.e. the scope of the OHSMS does not include clinical and medical processes involving the actual treatment of patients but within clinical areas does include:

- Provision of safe plant and equipment
- Ensuring that materials are used, handled, stored and transported safely
- Provision of information, instruction, training and supervision to enable staff to work competently and safely
- Ensuring that workplaces are safe, including safe access and egress
- Provision of facilities and arrangements for employees' welfare at work
- Ensuring that work related activities (other than clinical procedures) are risk assessed and risks are controlled
- Reporting health and safety related incidents and following Trust incident management processes
- Evaluating compliance with statutory requirements

5.2. The Trust was successful in achieving re-certification to the prestigious ISO 45001 Standard following a Surveillance Audit at the Churchill Hospital (CH) in July 2023. Only 6 nonconformities (NCRs) were raised compared to 17 NCRs for the initial Certification Audit in 2022, with the audit report highlighting significant improvements in the OHSMS:

Some significant efforts to improve the OHSMS have been made since the Certification Audit. System improvements at Divisional level (including to the Divisional OH&S Groups, appointment and training of H&S Champions, other training, migration to SharePoint for H&S information & records) are evidence of a growing maturity of the system. The OH&S Management System Manual has been revised and continues to provide a very clear summary of arrangements to users.

5.2.1. Findings from the ISO 45001 audit have been communicated to relevant interested parties, including all Divisional Health and Safety groups, to enable process improvements or contributions towards actions to address NCRs to be planned and delivered in a timely manner. The audit findings have also been

incorporated into to updates for Health and Safety training for Managers and for Health and Safety Champions.

5.2.2. Further continual improvement of the OHSMS is in progress in readiness for a planned audit at the John Radcliffe site (2024) and continued implementation of processes across all OUH sites, in line with the H&S Strategy (2020 – 2025). This work remains the focus of the Health and Safety Team and for the wide range of Health and Safety groups and forums now established in all Divisions across the Trust and through collaboration with key partners such as the PFI and Oxford University.

5.2.3. The ISO 45001 requirements have continued to provide a 'Golden Thread' across all Divisions for a coordinated approach to continual improvement of the OHSMS and integration with other business processes, including:

- Collaboration with a number of teams to seek information about numbers of health and safety related incidents resulting in sickness and absence

- Collaboration with the Occupational Health team to review arrangements for the safe use of sharps, including risk assessment and incident reporting

- Updating of the annual Health and Safety audit in response to user feedback

- Continued support to Divisional Health and Safety Groups to strengthen health and safety processes such as hazard identification, risk assessment and incident reporting / reviewing

- Development of the Workforce H&S Group to include H&S Champion representatives as well as Union representatives

- Training for managers and Health and Safety Champions

- Development of the new H&S Intranet site.

5.3. Other new or significant activity conducted by the Health and Safety team during the reporting period is summarised in Table 1 below. Table 1 shows activity aligned to ISO 45001 requirements (clauses 4 – 10 are auditable) and the 'Plan, Do, Check, Act' cycle.

Table 1: Health and Safety achievements (July – September 2023)

PLAN			
ISO 45001: 4. Context of the organisation			
4.1 Understanding the organization and its context	**4.2 Understanding the needs and expectations of workers and other interested parties**	**4.3 Determining the scope of the Occupational Health & Safety Management System (OHSMS)**	**4.4 OH&S management system**
Workplace inspections and site inspections have been increased with the involvement of a number of different inspecting groups, including: • H&S Team • Estates Team managers • Departmental H&S Champions • Trust Internal Audit (ISO 45001) forum • Assurance Team Internal Auditors • Executive tours This expansion of workplace inspections has supported increased identification of hazards with a resulting increase in reporting of defects to Estates Helpdesk. The H&S team has supported Divisional H&S groups to escalate significant hazards (that cannot be addressed promptly, e.g. by Helpdesk /Estates engineers) through relevant forums, for example the Estates Compliance Committee, to seek actions to address the hazards, or to escalate to relevant risk registers.	The H&S team has collaborated with the Trust Voluntary Services to support them with risk assessment of their activities and to support with training for carrying out local workplace inspections. In September, the H&S Team hosted a meeting for Workforce Health and Safety Representatives, attended by H&S Champions and Union Representatives. These joint representatives meetings are planned to be regular quarterly events, with Union representative meetings continuing monthly in addition.	The scope of the OHSMS is defined by the sites that are within the audit for ISO 45001 (even though the OHSMS is implemented across all sites as far as possible). The current scope is: *The Occupational Health and Safety Management System in operation at the Churchill Hospital and John Radcliffe Hospital covering the non-clinical activities.* The extension of scope to include the John Radcliffe Hospital is in line with the Health and Safety Strategy (2020 – 2025) and the planned extension for ISO 45001 certification at the JR.	The Health and Safety Management System has continued to be developed to meet the requirements of ISO 45001. Particular focus has been directed towards: • implementation of workplace inspections • implementation of internal audits • development and implementation of a new H&S Intranet site • review and updating of documentation, including risk assessments and safe systems of work • review, updating and delivery of health and safety training for managers and department Health and Safety Champions • planning to address findings of external ISO 45001 audit.
ISO 45001: 5. Leadership and worker participation			
5.1 Leadership and commitment	**5.2 OH&S policy**	**5.3 Organizational roles, responsibilities and authorities**	**5.4 Consultation and participation of workers**

The Chief Nursing Officer (CNO) and the Director of Regulatory Compliance and Assurance have provided Executive level oversight and leadership for health and safety throughout the reporting period, with both meeting regularly with the Head of Health and Safety to receive updates for actions in progress to address H&S risks and opportunities and to seek assurance regarding H&S arrangements. The Director of Regulatory Compliance and Assurance has led actions to address ISO 45001 audit findings relating to an objective to reduce H&S incidents (see section 6.2). Divisional Directors of Nursing, or their nominated deputies, continued to provide excellent leadership for health and safety in each of the Divisional health and safety groups. They have been extremely supportive to implement processes required to meet ISO 45001 Standards, particularly to ensure that the (usually monthly) workplace inspection process is being carried out by departments and to ensure required documentation is in place.	There have been no changes to the H&S Management Policy and it has continued to be implemented according to the current version. Awareness and compliance with the H&S Management Policy has been included as part of a review and update for the H&S annual audit due to be issued to departments in October.	There were no changes regarding organisational roles, responsibilities and authorities in this reporting period.	The Health and Safety Committee (HSC) continued to be very well attended and provided an important and effective forum for the consultation and participation of workers. Workforce Health and Safety Group (WHSG) meetings have continued, attended by Union representatives and by H&S Champions. Both groups have been involved with workplace inspections and raised issues around these requesting advice and support from the H&S team for how to address some findings (e.g., how to mitigate manual handling risks, and guidance for Workplace H&S Regulations relating to supply, maintenance and storage of PPE; workplace temperatures and office space). The H&S team provided advice and guidance requested and updated H&S Champions training to include these and similar topics.

ISO 45001: 6. Planning	
6.1 Actions to address risks and opportunities	**6.2 OH&S objectives and planning to achieve them**
A key process to eliminate or reduce health and safety risks is 'Hazard Identification'. During the reporting period, a number of staff from across the Trust were trained as Health and Safety Champions, bringing the total trained to almost 100. One key role of these Champions is to support department managers to carry out workplace inspections to identify workplace hazards and take action to address these.	This reporting period has seen objectives and planning to achieve these focus on the Trust strategic H&S objective to reduce H&S incidents* (resulting in moderate harm and above) to reduce by 10% year on year.

Divisional H&S Groups have continued to review H&S related risks and opportunities as standing agenda items at their monthly meetings. Where required, risks have been escalated to other relevant groups for actions to address (e.g. estates Compliance Committee) or have been escalated to relevant risk registers so that risks can be suitably mitigated and monitored whilst barriers to eliminating or further reducing risks are addressed. All departments have been requested to review and update as required all risk assessments, particularly the General Workplace Risk Assessment which captures risks associated with the work environment, work activities and any specific risks in a department.	The Director of Regulatory Compliance, working in conjunction with the Health and Safety team, produced an Action Plan for this objective, identifying Trust level initiatives and local (Divisional / departmental) initiatives that will continue to the targeted reduction. Once all local initiatives have been identified (closing date in October 2023), the plan will be implemented. Planning to address other findings from the July ISO 45001 Surveillance Audit is in place with actions in progress. *Incident reductions targeted to key categories of incidents related to: manual handling (and musculoskeletal injuries); slips, trips and falls; violence and aggression; and sharps, needle sticks and splashes.

ISO 45001: 7. Support			
7.1 Resources	**7.2 Competence**	**7.3 Awareness** **7.4 Communication**	**7.5 Documented information**
Resources currently provided to implement the Trust's OHSMS have been reviewed and are adequate at this time, and some areas have been identified that could provide some cost savings going forward. The Head of H&S will keep the Chief Nurse's Office updated on this and will include any significant amendments in future reporting.	Training to support Health and Safety Champions continued with approximately 30 staff trained during the reporting period, bringing the total to almost 100 members of staff across Divisions trained since April.	Awareness and communications for health and safety processes and requirements has been achieved in a number of ways, including: • The Health and Safety Intranet site • The Health and Safety committee • Divisional H&S groups • Workforce (Union) representatives' group • Health and Safety Champions group • Microsoft Teams Channels • Corporate Communications - Staff Bulletins • Use of VIVA Engage ('Yammer') platform for OUH email addresses	The H&S team continued development of a SharePoint based H&S Intranet site and was able to 'go live' with this on the Trust launch date (1st September) for the new Trust Intranet. The new H&S site provides improved user experience with simpler access to documentation and guidance and also enables updates and current news / items of interest to be added to the site more easily and quickly than previously.

| | | • Collaborations (e.g. PFI; Oxford University)
• and through H&S awareness sessions for groups on request. | |

DO

ISO 45001: 8. Operation

8.1 Operational planning and control	**8.2 Emergency preparedness and response**
The H&S team has continued to attend a wide range of H&S related groups to support operational planning and control of H&S related matters for departments across the Trust. including: • Trust H&S Committee • Divisional Health and Safety Groups • Estates and Facilities Health and Safety Group • Estates Compliance Committee • Estates Health Technical Memorandum Groups • PFI H&S meetings (all PFI providers at all sites) • Oxford University H&S Group • Internal Audit forum meetings • Capital Programmes meetings • Working Groups (e.g. SuWON Delivery Suites Entonox and Ventilation Group) • Clinical 'no harm' meetings, SIRI meetings and After Action Reviews • Safety Action Groups (e.g. needlesticks and sharps SAG) • Workforce H&S Group.	The Divisional H&S groups have included Service Continuity Plans (SCP) on their meeting agendas and all have requested their departments to update these as soon as possible. The Emergency Planning Officer has also been supportive to offer assistance to departments to update the SCP plans. Many plans have been tested and / or updated during recent periods of industrial action.

CHECK

ISO 45001: 9. Performance evaluation

9.1 Monitoring, measurement, analysis and performance evaluation	**9.2 Internal audit**	**9.3 Management review**
The H&S team has continued to routinely monitor and measure health and safety related incidents, reviewing some	The Workplace Inspection Checklist used for monthly inspections has been adapted by the	The requirements of the Management Review Process are set out in detail by the ISO 45001

incidents daily, to identify the need for further investigation, statutory reporting and actions to prevent recurrence. Analysis has included the effectiveness of operational controls and the need to modify or introduce new controls. For example, reviews of some manual handling activities identified a need to amend tasks (e.g. break down loads to smaller loads), to use lifting equipment where possible (e.g. trolley or powered lifting devices) and to provide refresher training for some staff. Evaluation of H&S performance has been collated from a variety of sources, including incidents, RIDDOR notifications and compliance with training requirements.	Assurance Team to develop four 'local internal audits'. These local audits have been shared with the ISO 45001 trained internal auditors in divisions. The Internal Audits have commenced in departments at both the Churchill and John Radcliffe Hospital sites. The results will be reviewed by the Internal Audit Forum once all Divisions have completed their audits.	Standards. The recent surveillance audit noted that the Management Reviews completed to date had …'*demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system'.* However, the audit noted that…' *in some cases only the system processes themselves were considered, not the outcomes. Examples include trends in nonconformity and the results of legal compliance evaluation'.* The Management Review process is in development to ensure future reviews include trends and other outcomes for H&S performance.

ACT

ISO 45001: 10. Improvement

10.1 General	10.2 Incident, nonconformity and corrective action	10.3 Continual improvement
Department managers have been supported to be more proactive in providing required information following incidents and to implement actions, including corrective actions, to address immediate and root causes. The workplace inspection process has supported improved hazard identification, especially those arising from building or environmental issues, and reporting of these for remedial actions (e.g. reporting to Estates Helpdesk).	H&S incidents reported via Ulysses have continued to be reviewed daily by the H&S team. The primary reason for H&S team review is to establish if there is a need to make a notification to the Health and Safety Executive (HSE) under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). Where incidents have required investigations, the H&S team has collaborated with all relevant parties, often Clinical Governance Risk Practitioners (CGRP) and local managers. The H&S team has collaborated closely with all relevant departments to develop an action plan to further improve the OHSMS following the ISO 45001 audit as outlined above in this report, for example to collate sources of data to report trends in H&S performance.	Continual improvement opportunities identified include: • Implement action plan to support reductions in H&S related incidents (see 6.2) • Further, ongoing development and implementation of a H&S SharePoint site • Support to all relevant departments for control of contractor processes • Support departments to consider maintenance and inspection requirements when procuring equipment.

H&S team - new and emerging risks and opportunities (July – September 2023)

5.4. Table 2 below shows risks and opportunities currently being addressed by the Health and Safety team in collaboration with relevant departments.

Table 2: H&S team - new and emerging risks and opportunities

H&S team New and emerging risks Specific issue(s)	Measurable outcome	Is this achievable?	How is this relevant?	Timescale for completion	Who needs to carry out the actions?	What evidence / success criteria is required?	Action completed and evidenced (date and details)
Audits and workplace inspections have noted that some items of electrical equipment was not in date for Portable Appliance Testing (PAT).	External audits (ISO 45001) and Internal Audits or inspections (Assurance Team, Divisional Internal Auditors and H&S team) do not identify portable electrical equipment out of date for Portable Appliance Testing (PAT).	Yes. The H&S team has supported Divisional H&S Groups to include PAT as part of workplace inspection process.	Although PAT is not a legal requirement, this is an effective means of ensuring suitable inspection of equipment provided for work purposes and could incorporate equipment used in OUH buildings.	Departments to identify own equipment requiring PAT and book inspections via Estates team. All inspected equipment to be in date for PAT.	Department managers, Supported by relevant Divisional H&S leads and Estates team / external contractors (procured by Estates team).	All relevant portable electrical equipment is in date for PAT when inspected.	
The Divisional Health and Safety Groups established in Clinical Divisions are not yet in place for Corporate Division.	A Corporate Divisional H&S Group is established.	Yes. A new H&S Committee Representative for Corporate Division recently appointed, will support with this.	There is a risk that the Health and Safety Management System is not fully implemented in Corporate Division.	Q4, 2023 – 2024 (subject to information from Assurance team and Department leads engage in project).	Corporate Division Representative, Assurance team to provide departmental information.	A Corporate Divisional H&S Group is established. Evidenced by meeting records.	

H&S team New and emerging risks Specific issue(s)	Measurable outcome	Is this achievable?	How is this relevant?	Timescale for completion	Who needs to carry out the actions?	What evidence / success criteria is required?	Action completed and evidenced (date and details)
					H&S team support.		
Low compliance for completion of the H&S Annual Audit (of Policy and Procedures).	Compliance is at least 60% (2023 – 2024).	Yes. H&S team have amended the audit so that it is more user friendly and utilised Ulysses Audit Module to automate and track actions.	The H&S audit is aligned to Health and Safety legislation and to Trust Health and Safety policy and procedures.	Revised audit to be available via Ulysses by 1st October 2023.	H&S team to revise audit content. Assurance team to establish Ulysses audit module and to upload H&S audit to this system when operational.	Revised audit issued via Ulysses audit module and completion data shows increased compliance (at least 60%).	

6. **Recommendations**

6.1. The Trust Board is asked to note the contents of the Health and Safety Team report.