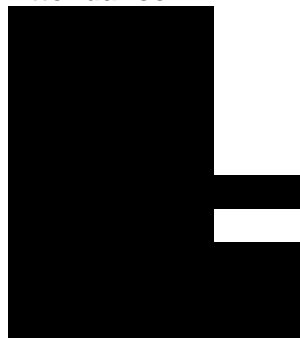


MANCHESTER UNIVERSITY NHS FOUNDATION TRUST

Group Strategic Health, Safety and Wellbeing Committee

Thursday 24 March 2022, 15:00 – 16:30hrs
Via Microsoft Teams

Attendance:



Group Director of Corporate Workforce
Commercial Director of Estates and Facilities
Group Executive Director of Workforce & Corporate Business (CHAIR)
Interim Group Director of Clinical Governance
Group Associate Director of Clinical Governance
Head of Operational Services, Employee Health and Wellbeing
Group Head of Health and Safety
Corporate Director of Nursing
PA to Group Director of Clinical Governance (MINUTES)
Staff Side Representative

1. Apologies

Apologies were received from [REDACTED].

2. Matters arising

2.1. To receive the minutes for the Group Strategic Health, Safety and Wellbeing Committee held on 14 September 2021

The Committee reviewed the minutes of the previous meeting and approved the content as an accurate record.

2.2. To review the actions of the meeting held on 14 September 2021

Health and Safety Audit across Corporate Services

■ provided an update regarding the health and safety audit process for corporate directorates. ■ plans to attend the next Corporate Directors Group meeting to gain their support in progressing the audit across Corporate Services.

Staff Psychological Wellbeing

■ advised that he is leading on a task and finish group to review the end-to-end protocols and procedures in regard to staff deaths, self-harm, and suicide risks. National guidance in regard to postvention is due to be published in June 2022, therefore the full report will be released after this time. ■ noted that learning is in place with a tightened mitigation of risks and systems are in place to report risks via Ulysses.

Workforce Recovery

■ advised that workforce recovery is being progressed through various groups across the Trust. ■ agreed to undertake a mapping exercise with ■ to ensure that all aspects of workforce recovery are being taken through the appropriate route.

Action: ■ to undertake a mapping exercise to ensure that all aspects of workforce recovery are being taken through the appropriate route.	[REDACTED]	June 2022
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2.3. Terms of Reference

The revised Terms of Reference for the Group Strategic Health, Safety and Wellbeing Committee were circulated for review. The main change is around membership to state designation, pertaining to the roles rather than named individuals, and ensure concise representation for each area. ■ confirmed that he has contacted the Hospital/MCS CEOs to ask for nominated representation and is awaiting a response.

The Committee approved the content of the terms of reference subject to confirmation of Hospital/MCS representation.

3. Group Operational Health Safety and Wellbeing Committee

3.1. To note the minutes of the Group Operational Health, Safety and Wellbeing Committee meeting held on 20 October 2021 and 15 February 2022

3.2. Escalation Report

The minutes for the Group Operational Health, Safety and Wellbeing Committee meeting held on 20 October were circulated to note. It was noted that there had been a reduction seen in incidents relating to violence and aggression during this period.

■ gave an overview of Group Operational Health, Safety and Wellbeing Committee meetings held on 15th February. There were 13 RIDDOR reports submitted to HSE in Quarter 3 2021-22. Four incidents related to slips, trips and falls and six were associated with moving and handling activities.

■
The incident has been reported under RIDDOR and is currently being investigated.

It was highlighted that MRI have not formally established health and safety arrangements. ■ agreed to write to ■ to request that a formal reporting structure is sent to ■ for clarification of their process. All others Hospitals/MCS have well-established health and safety committees in place.

Action: ■ to write to ■ to ask for clarification of the health and safety arrangements for MRI.	■	April 2022
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A paper was presented to the Committee detailing two separate investigations carried out in relation to the lightning strike at Trafford Hospital. Recommendations and lessons learned included a review of the switchboard role and communication, looking at developing a more formal process to support the fire service. Good practice identified with the evacuation being undertaken in a timely manner and teams working well together. There was evidence of good leadership and commanders.

4. Staff Wellbeing

4.1. COVID-19 Staff Risk Assessments update

■ reported that Covid 19 risk assessments are required for all staff and as prioritisation for high-risk groups. Compliance is currently high across the Trust. HR are leading the process of ensuring all new starters are risk-assessed.

■ asked about the process of risk assessments for international nurses. ■ advised that this should be undertaken as a part of their induction. ■ noted that there has been a delay due to an ESR issue, which is being reviewed.

4.2. Staff wellbeing initiatives

The Staff Wellbeing Initiatives report details progress made towards the psychological wellbeing of staff, following funding approval for a number of workstreams. ■ highlighted that there are some areas that need building on where funding has not been identified to enable work at the same level.

Mental Health First Aiders (MHFA) access is in place across the Trust. There is currently a ratio of 1:300 MHFA's in place. The Health and Wellbeing Team provide training of new instructors and supervision/support for all existing MHFA's. Each hospital will aim to co-ordinate MHFA courses to expand the service across the Trust, with close support from the Health and wellbeing Team who will oversee the instructor network. This additional resource is scheduled to be in place by May 2022.

■ advised that a paper has been taken to the Group Quality and Safety Committee to give assurance of learning from patient safety science and impact on culture. There are many opportunities across the Trust to cross work and focus on human factors, replicating good practice.

4.3. Long COVID

■ advised that an MDT approach is being taken to plan pathways for all MFT staff to access support following a positive COVID diagnosis. £149,671 of funding has been awarded for this programme to support resourcing a multi-disciplinary team required to provide the service to ensure that staff are receiving the same level of care/support as patients. For the staff identified as struggling with symptoms of Long-Covid, there is currently work underway to develop a screening questionnaire that will be completed with the staff member to help identify what support they require. The aim is to complete this with each staff member via phone call to aid engagement. Alongside the pilot, there will be ongoing work to identify other staff who may benefit from the service who have not yet been identified to ensure that modifications are made to their work where needed.

■ advised that the amount of people on modified duties due to Long-Covid is very low. She advised that people may not be aware that there is access to this funding. ■ advised that once the service is up and running, this will be widely communicated to staff on a wider scale.

4.4. Vaccination as a condition of deployment

A decision has been taken by the government to revoke regulations which made Covid vaccination a condition of deployment for all health and social care workers (subject to specific exemptions) explaining that healthcare settings should continue to consult and engage with workers to encourage staff to be vaccinated.

■ advised that we need to continue to look after the wellbeing of staff by continuing to work around both the flu vaccine and covid vaccine.

■ advised that the Trust are awaiting guidance for confirmation of boosters for staff.

5. Health and Safety Annual Report 2021

The Health and Safety Annual Report was circulated to note. The Report is structured around the health and safety management arrangements in place across the Trust.

5.1. Key messages and priorities

■ highlighted key messages and priorities taken from the Health and Safety Annual Report 2021:

- A reduction has been seen of approx.10% in reportable incidents in comparison to the previous year.
- There has been an increase of incidents relating to violence and aggression and sharps injuries. This continues to be monitored via the Operational Health, Safety and Wellbeing committee.
- There were 61 RIDDOR reportable incidents, of which 46% related to slips, trips, and falls. This has been fed-back to Estates and Facilities.
- There were 21 incidents at WTWA 21, followed by 11 in CSS and 10 at MRI.
- Training and eLearning levels of compliance are at 95%; there has been a gap in moving and handling practical training due to the way competencies have been allocated on learning hubs.
- The Health and Safety Audit was deferred due to pandemic. The audit will be carried out this year and included in the next annual report.
- HSE activity included a spot inspection of covid secure workspaces.
- The Health and Safety Team is well recruited to well embedded across the Trust.
- Policy reviews are ongoing across the Trust.
- Virtual Health and Safety Course has been established to run alongside face-to-face training. Evaluations will be brought fed back through to the Operational Health, Safety and Wellbeing Committee.
- Training needs analysis underway.

■ thanked ■ for this detailed and thorough report. He asked ■ to link in with the Communications Team to finalise the final version of the report.

Action: ■ to link-in with the Comms Team to finalise the Annual Health and Safety Report.	■	March 2022
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6. External regulation

6.1. External Enquiries Report

The External Enquiries Report was circulated to note. ■ advised that this is an important source of assurance to help us to understand the enquiries stakeholders are making, some of which relate to health and safety and RIDDOR, enabling an overarching group response to capitalise on learning.

■ Thorough investigations were carried out for both incidents and responses have been received and accepted by the CQC. Learning has been disseminated widely.

There have been no formal enquiries from HSE other than two unannounced inspections in relation to Covid.

The Committee reviewed the report and approved the content for assurance.

7. New emerging risks

7.1. Reasonable adjustment

■ summarised the paper detailing the Trust's approach to achieving consistency of standards in regard to the application of reasonable adjustments being made for employees. Whilst reasonable adjustments are required in law, there is a broader moral obligation to facilitate all staff to perform to their best in an environment that is safe. MFT

recognises the need to create clear processes that allow a consistent approach to the understanding of managers, the application, engagement, and review of reasonable adjustments that benefit the member of staff, the Trust and the patients we serve. Training will be rolled out to managers to support their understanding of their obligations to support reasonable adjustments, creating a system for consistency across the Trust. This process will be managed through the Employee Health and Wellbeing Service. It is anticipated that the new process will be delivered Summer 2022 and a further update will be brought to this Committee accordingly.

8. Policies for ratification

8.1. Health and Safety Policy Statement

The Health and Safety Policy Statement was circulated to note. The Committee reviewed the content of the report and approved.

8.2. Moving and Handling Policy

The Moving and Handling Policy was circulated to note. The Committee reviewed the content of the report and approved.

8.3. Personal Protective Equipment Policy

The personal Protective Equipment Policy was circulated to note. The Committee reviewed the content of the report and approved.

8.4. Work Equipment Policy

The Work Equipment Policy was circulated to note. The Committee reviewed the content of the report and approved.

8.5. COSHH Policy

The COSHH Policy was circulated to note. The Committee reviewed the content of the report and approved.

9. Ratified Policies circulated for information

- HSP2 Health and Safety Management Arrangements Policy
- HSP7 Safe Use of Computers, DSE and Workstations Policy
- Psychological Health at Work Policy

10. Any other business

Nil.

11. Date and time of the next meeting

The next meeting will be held on 20th June 2022 at 13.30-15.00hrs via MS Teams Meeting