

**Minutes of the meeting held on 5th March 2019
At 11am in Room 1, Cardonald Contact Centre**

The Area Health and Safety Committee are asked to approve the Minutes of the Meeting held on 25th October 2018 as an accurate record of discussions.

1. STANDING ITEMS**1.1 Attendance and Apologies****Members**

Gill McInnes	(GMc)	Head of HR Business Services (Chair)
Colin Keys	(CK)	UNISON Representative (Dial in) (Co-chair)
Kenny Woods	(KW)	UNISON Representative – Cardonald (Dial in)
Kenny Lewis	(KL)	H&S Lead HQ/Cardonald
Tony Wigram	(TW)	H&S Consultant
Elaine Ferguson	(EF)	H&S Lead Clyde
Caroline Spence	(CS)	Head of Clinical Services (on behalf of JH)
Steven O'Dea	(SO)	Service Support –East (Dial in)
Martin MacGregor	(MMac)	RCN Representative (dial in)
Chris Harrison	(CH)	Service Support Coordinator North (on behalf of GT) (dial in)
Diane Scotland	(DS)	H&S Lead East (Dial in)
John Gallagher	(JG)	H&S Representative East Unison
Derek Barron	(DB)	NSS Fire Officer
Lynne Kane	(LK)	Facilities Manager

In Attendance

Lynne Munge (LM) Minute taker

Apologies

Graham Revie	(GR)	Employee Director
Janice Houston	(JH)	Associate Director of Nursing
Fred McCosh	(FMc)	UNISON Representative - Clyde
Graham Teven	(GT)	H&S Lead North

1.2 Minutes of the previous meeting

The minutes of the previous meeting held on 25th October 2018 were approved as an accurate record of the meeting.

1.3 Health and Safety Risk Register

There is one open risk on the register. The risk is that NHS 24 may be vulnerable to service disruption and potential fire hazards due to incomplete fixed wire testing. All work and initial testing is now complete and this risk has been reduced due to the mitigation now in place. However, this risk will remain open until further scheduled testing of the untraced circuits has taken place and then reassessed.

LK advised that she is waiting on confirmation that all fixed wire testing for Scottish Ambulance Service has been completed, there are no concerns. Concerning the untraced circuits, they have been traced and due to be tested next week.

GMc asked the Committee if they were happy to wait on final confirmation before removing all content. The Committee agreed to this.

2. REGULAR UPDATES

2.1 Local Site Updates

North Contact Centre

CH provided the update for the North Contact Centre and local sites:

- There have been no accidents, incidents including abusive calls since the last meeting.
- Fire Risk assessments carried out in Orkney on 28th February, Shetland 21st February and Tayside on 25th February.
- Fire Safety walk throughs used in place of fire drills in Tayside and reintroducing them in the North centre.
- DSE is continuing, no specific concerns raised.
- Risk Assessments are all up to date. One new and expectant mother, risk assessment.
- Work place inspection in North, no issues raised. GT visited the Inverness site meeting with Scottish Ambulance estates and LK reviewed King Duncan House dual working area. NHS 24 reviewing specification. There was a water leak at the end of 2018 in Tayside. Estates team on site sorted out some of the damage caused. Due to visit the Tayside centre this week to consult with the estates team to redecorate and fix the tiling. . No issues reported in Orkney. In Shetland NHS 24 have moved to a new area. Contact has been made with estates to have NHS 24 kit moved. The

new room is unsatisfactory, GT looking at consulting with Shetland to re decorate. Lone worker assessment required.

- Annual audit – no update.
- Local meeting held in January – no new issues raised.

DB advised the Committee that the Fire Risk Assessment did not take place as planned on 25th February as he was unable to gain access at reception to the NHS 24 area. MMac said that there was a break down in communication and that he had been in contact with GT. CH to take back to GT to rearrange a new date. MMac said that the representatives were not invited to the Health & Safety audit. GMc confirmed that the dates were issued to CK who apologised for not passing them on. It was agreed that the dates would be issued via the chairs of the Committee.

TW confirmed that the Shetland worker is not formally recognised as a lone worker. A visit is planned in March/April, auditor will look at the site/facilities put in place by the health board and a lone worker assessment will be carried out.

LK confirmed that she had spoken to Shetland. The NHS 24 office had been knocked down and the new room is not up to standard. Shetland will work with NHS 24 to rehaul and change the carpet, cable issues etc. A date will be confirmed as soon as possible to have the works completed. It was agreed to add this onto the action log for updates.

East Contact Centre

DS provided the update on behalf of DS for the East Contact Centre:

- Disability Equality Scotland audit confirmed that disabled parking bays should remain free for only blue badge holders. Communication has gone out to the centre. There are concerns of a lack of parking and a few concerns were raised with regards to offsite parking. Measures put in place to help support this, personal alarms were provided and site management to allow staff to move their car. JG advised that he has been kept up to date regarding concerns from staff walking off site and night feeling vulnerable. Meeting with Partnership to find a solution.
- Following disinfection of water tank there were reports of bitter taste within the Pentland wing water coolers. The coolers were put out of order until PH readings were taken. The readings were fine and therefore not a health & safety concern.
- Fire tours are continuing in Norseman House and staff are keen to attend.
- One PEEP is currently in place.
- Fire Warden training is scheduled to take place on 4th April 2019. Names have been requested.
- Nominated Fire Officer training is also schedule for April 2019 in Norseman House. FP/SO are attending, and this has been opened out to all centres.
- Fire Risk Assessments actions are all up to date.

- A training date for DSE and Moving & Handling has been scheduled at Norseman House in May 2019.
- Annual Audit – the medical room fridge was found to be unlocked and out of date eye drops were found. An action taken from this is that Service Support will now check the fridge on a daily basis to ensure that the fridge is locked and no out of date medication stored.
- Fixed Wire Testing – further investigations scheduled for 14th March 2019. C2's and C3's completed.
- Following two readings in 2018 taken from a shower in Norseman House, water management checks have been increased as an additional measure. This includes twice weekly flushing by FES and once weekly by in house domestic. Water quality checks have also been increased. Westfield were on site on 5th February 2019 taking water samples. Readings/results will be available soon.

Clyde Contact Centre

EF provided the update for the Clyde Contact Centre and local sites:

- Since October 2018 there has been five accidents with potential harm or resulting in injury reported:
 - One RIDDOR – fall/trip at staff entrance. Attended A&E, reported a suspected fracture. Checked the following day and was bruising to soft tissue in leg. No apparent reason for the trip. Over seven-day absence as a result.
 - One fainting spell, on falling hit head on disabled toilet and passed out.
 - One employee stuck in lift, this caused anxiety and bruising to hands by gripping onto the handrails.
 - Two slips in kitchen. One caused by a loose tile, no injury sustained the other was caused by the wet floor. The member of staff sustained bruising to their leg. NSS were spoken to regarding signage.
- One abusive call reported. New log system used and dealt with locally.
- Fire Risk Assessments completed in Clyde and Ayrshire and Arran. No red flags. No access given at Lanarkshire, the visit is to be rescheduled. To discuss with DB how best to carry out the assessment in Dumfries and Galloway as NHS 24 do not have access to the site in the in hours period.
- Nine PEEPS in Clyde and one PEEP in Lanarkshire.
- Fire drill carried out in Clyde on 4th November 2018, it went well
- Fire Warden training schedule for June and September. This has been advertised on the Intranet and emails will be sent to Senior Charge Nurses and Team Managers prior to the planned dates.
- EF and CS will attend the Nominated Fire Officer training in Norseman on 11th April.

- Due to hospital expansion works there has been a change to the evacuation route for two emergency exits. Staff have been advised, the evacuation plan has been adapted and external signage is in place. No queries on this so far.
- All of the Service Support Team has undergone DSE assessors training. New staff in training has increased the volume of self-assessments allowing Service Support to put training into practice.
- Chair MOT continues however due to the age of a lot of chairs they are barely repaired before developing another fault. Regularly disposing of the worst conditioned and soiled chairs.
- A few of individual risk assessments are undergoing review due to the disabled car park being re-located and is now further away from the main hospital entrance. In the main, this is affecting staff that use wheelchairs or electric scooters. Various measures are being considered including a buddying system, Access to Work and wheelchairs can be used and are available at the hospital reception. No concerns, people are getting used to it.
- Workplace Inspections are up to date for Clyde, Lanarkshire and Ayrshire and Arran. Some minor actions for Ayrshire and Arran including a change to current lighting, supply of three large desk fans and replaced ergonomic equipment like wrist rests and mouse pads. No red flags. Next inspection will go smoother.
- There is an opportunity to add in another accessible toilet in Clydebank due to the redesign.
- Local meetings are taking place and looking to align the local Values and Wellbeing groups to deliver meaningful health campaigns throughout the year. Calendar will be disturbed once it is finalised.

Cardonald Contact Centre

KL provided the update for the HQ/Cardonald Contact Centre:

- Four abusive calls were reported in this period.
- Two incidents involving injury were reported:
 - Incident form received regarding a staff member who collapsed at work. Paramedics attended, this was a private medical issue.
 - Extensive damage caused to a car park in the car park. Reported by user to the police.
- Three near misses were reported in this period:
 - Two were Fire Alarms. One was caused by bearings grinding in the pump room due to jammed belts. There was a partial evacuation of Scottish Ambulance Service (SAS) Staff. There were no NHS 24 staff on site due to a LAN upgrade. Security guard not trained in process and SAS had no Fire Wardens on site. There is no known cause for the second alarm. NHS 24 staff evacuated but SAS did

not. SAS silenced the alarm before the Scottish Fire and Rescue Service had arrived.

- Fire Escape Blocked (SAS) just before Fire Alarm Test - New Fire Point Tested and SAS notified of issue and raised via their Health & Safety.
- Twenty-five hazards have been reported since the last meeting.
- Fire Risk Assessment was carried out on 18th January – awaiting report.
- Outstanding item from Action Plan: vending machines have been moved into the quiet room and one more is still to be picked up by the vending machine company.
- Four PEEPs are currently in place and all are up to date.
- Two fire drills carried out on 11th October and 16th December 2018.
- Fire Warden Training scheduled for 23rd April 2019.
- DSE up to date.
- Moving and handling risk assessment due this month.
- Two new and expectant mothers risk assessments closed off.
- Car park risk assessment due to LAN update.
- Humidity – waiting on plants being installed in HQ.
- Lighting – a solution has been approved. LK advised that they are waiting on equipment to be delivered, hopefully by 31st March.

Regarding the Fire Alarm issues, DB has spoken to SAS representative about the procedure of silencing the alarm. They have been advised not to do so as only the Fire service can do this. SAS have been advised for their staff to remain on essential calls and staff on non-essential calls must evacuate. The Committee discussed the best way to deal with this problem. It was agreed that DB would provide wording to go into Fire Log book ensuring that each site is aware of the out of hours process. Leads to work with DN and stakeholders.

Action: DB & H&S Leads

2.2 H&S (TU) Representatives Updates

CK advised that the audit was well received. MMac asked if the representatives could have oversight of the Health & Safety calendar. EF confirmed that this information was on the notice boards and asked if it would be required electronically too. The Committee agreed to save the calendar in a shared Health & Safety folder. It was agreed that each Lead would send a link to the representatives so that they have visibility of the calendar.

Action H&S Leads

2.3 Fire Consultant Update

DB provided the update from 1st October 2018 to 31st December 2018:

The Stornoway risk assessment was cancelled due to a broken-down ferry. This will be rescheduled though not within this financial year.

Access to the Lanarkshire centre will be rearranged and aim to conduct the risk assessment before the end of this financial year. On schedule to complete the risk assessments apart from Stornoway.

No members of staff from NHS 24 have participated in Fire Warden training during this reporting period.

There have been two fire incidents were reported in this period. One in Cardonald on 10th October 2018 – this was caused by human error; all staff were evacuated. The second incident occurred in Cardonald on 16th December 2018. The Scottish Fire and Rescue Service attended and found that the alarm had been silenced. Talks have been held with SAS and the landlord to ensure that the alarm system is not silenced until the Fire service has attended the incident.

3. ITEMS FOR APPROVAL

3.1 Health & Policy Statement

TW advised that the statement had been put forward for signature and was included with the papers for information only.

3.2 – 3.6 inclusive

TW advised that all of the above had been reviewed and no changes had been made apart from minor spelling or punctuation mistakes. Therefore, all documents have retained the same version number. TW asked the Committee if anyone had any comments or issues with the documents.

GMc asked if the new Director of Workforce could be added into the table within Appendix of the Accident, Near Miss & Hazard Reporting Policy and Guidance. MMac asked if the table could be updated with the names of all of the staff side representatives.

Action: GMc

The Committee approved these items.

3.7 Infection Control Policy

TW advised the Committee that this policy was largely unchanged.

The Committee approved this policy on the basis that paragraph on page two is amended to cover GP Practices.

3.8 Legionella Policy

MMac suggested that the staff side safety representatives were missing from the policy section four "Management Responsibilities and Requirements" and should be between 4.4 and 4.5. MMac to give wording to TW to add into the policy.

Action: MMac

The Committee agreed that members are to advise on comments by a week on Friday and then the policy will be circulated to the whole Committee for virtual approval.

Action: All

4. ITEMS FOR INFORMATION/DISCUSSION

4.1 Health & Safety Policies and Procedures Calendar

TW advised that 028 (Home Worker Risk Assessment) can be amended to show that it has been reviewed. Most policies are up to date and following this meeting, the amber should change to green.

4.2 Accident and Abusive Call Analysis

TW advised that the accident summary report is now in a different format.

The amount of accidents reported the rolling year to date has reduced. The number of near misses has increased this is due to the reporting culture. There is a consistent upward trend, which should be looked at.

There has been an increase in the amount of hazards reported. A vast amount of eye irritations has been reported. This should start to decline over the next couple of months.

Abusive calls are now reported locally. Since the last meeting five calls have been reported within HQ/Cardonald, four in Clyde and one in the East. No calls were reported in North, Local or remote centres.

CS suggested that the Committee link in with the Values group to get away from the blame culture. Arlene Blair to give update to the Committee from the Values group for the next meeting.

Action: Arlene Blair

4.3 Audit Action Tracker/ 4.6 Annual Audit Results – Site and Management

TW provided an update on the recent annual audit.

Clyde scored one hundred per cent on the audit, the NHS 24 average was ninety-eight point four percent.

Actions:

Aberdeen – Make sure that the Fire Safety awareness factsheet is available to all staff. Ensure that the generic risk assessment is available and in the correct format/version. An out of date eye patch was found in the first aid box – ensure all medical equipment/materials are in date.

East – Ensure that the fixed hard wire testing is finalised and that all medication stored in the fridge is in date and that the fridge is locked. The fridge was unlocked and held out of date eye drops, which were disposed of at the time.

Cardonald – full points given for housekeeping though standards in HQ are slipping or have slipped. There was clear evidence of bags etc. being stored under desks. Storage room not clean. RIDDOR reported late. First aid room not clean. The local health and safety meetings are not happening in Cardonald – work is ongoing to rectify this.

The processes are working, minor shortcomings; six or seven years ago, the scores were a lot less.

GMc – well done to the leads and representatives.

Management Audit

The score was ninety-four point seven percent which is a good score, areas felt not as strong in particular in relation to training.

Areas to do better on: elearning mandatory modules, which have showed a downward trend.

Two new questions were added onto the audit regarding completion of driver awareness and stress management training. The number of staff completing the driver awareness training actually exceeds the number of registered drivers. The stress management awareness target fifty per cent was not achieved in the first year. Twenty-five percent of managers completed the training.

4.5 Health Working Lives Gold Award and Wellbeing Group Update

Each site locally is looking to produce their own calendar. Once published can plan ahead and not duplicate campaigns.

GMc – wellbeing road shows are planned across the centres.

JG – involved in group, undertook course on DSE further learning. Will present how look at DSE at September meeting.

DS – A lunch time group go out walking / jogging (couch to 5k)
Promoted the cancer research walk 10,000 steps a day during the month of March. Detox Weekends have taken place.

4.4 Learning & Development Update

GMc gave the latest L&PE update as at 11th February 2019 (based on a headcount of 1566):

	Fire Safety		H&S Awareness		Office Ergonomics	
	Completions	%	Completions	%	Completions	%
Jun-18	1120	71%	1089	69%	1116	71%
Oct-18	992	65%	1008	66%	1006	65%
Feb-18	941	60%	911	58%	927	59%

The completion and percentage figures have decreased since the October update.

GMc to check the reporting is accurate.

Action: GMc

4.7 Office Design

There is a Health and safety aspect, wider issue regarding research office design and wellbeing. Increase performance – committee consideration to look at and consider all wellbeing aspects.

LK provided update:

Redesign works for Cardonald and Clydebank. Work is underway with the main objective of optimising existing attendance flex of space

Clyde – increase capacity and business continuity increase seats. Cardonald looking to maintain or increase peak demand for seats accommodate SAS expansion floor

Need to look at healthier office.

Design phase – acoustics, neuro diversity, biopuilia equality considerations are all being discussed.

Need to review air quality particularly for Cardonald. Professionals will assist in next stages of design.

West – base design has been developed. Feedback through inbox, workshops positive, and points raised, good feedback.

Go back to staff and response to points raised. Feedback sessions. From there will have concept design.

Caledonia House – base design agreed by the Executive team. SAS sign off due this Thursday. Concern over acoustics, engineer coming in on Thursday. No SAS sign off until assurance to improve the acoustics

HQ – Main change, met exec team, go to staff consultation. Moving designated seating to hot desking, cultural change. Survey to assess how staff feel and after redesign wellbeing group.

Workshop – choose colours etc. Advice from designers before suggest pallets/textures.

Agreed to keep this item on the agenda for future meetings. Agreed that Facilities Manager would be invited to all future Health & Safety Committee meetings.

Action: LM

4.8 Action Log

The Committee reviewed the action log and agreed to remove the completed actions from the log.

6. DATE, TIME & LOCATION OF NEXT MEETING

The next meeting is 2.00pm on Tuesday 4th June 2019 in Room 3, Cardonald Contact Centre.