

## **Health & Social Services Committee HSS-11-01(p.8)**

**Date:** 4 July 2001  
**Venue:** Committee Room 3, National Assembly for Wales  
**Title:** Report on Health and Safety Issues in NHS Buildings

### **1 Purpose**

That the Health and Social Services Committee note the information contained within the attached Report on Health and Safety Issues in NHS Buildings.

### **2 Background**

At the HSSC meeting on the 6 June the 2002/2003 budget was discussed and this report on the health and safety of NHS buildings was requested to provide additional detail of the issues involved.

There are a wide range of statutory standards which relate to hospitals. This report gives a broad overview of some of the current issues facing the NHS Estate, current levels of compliance and areas requiring improvement.

### **3 Next Steps**

Welsh Health Estates are already working on a report related to Firecode Compliance, a study into issues associated with ventilation systems (airborne transmission of hospital acquired infection), a survey into the implications of the Disability Discrimination Act and work on new estates performance measures.

**JANE HUTT**

**MINISTER FOR HEALTH & SOCIAL SERVICES**

**REPORT ON HEALTH AND SAFETY ISSUES**

**IN NHS BUILDINGS**

*22<sup>ND</sup> June 2001*

## **WHE/NHSD**

### **1. Introduction**

This report has been compiled by Welsh Health Estates and provides a broad brush picture of the main health and safety issues in NHS Buildings in Wales.

Details of individual problems have not been described in the report since NHS Trusts themselves retain responsibility for the maintenance of their buildings to a safe standard. This is normally achieved from their revenue and discretionary capital funds.

Exceptionally, where Trusts identify major health and safety issues that they are unable to resolve locally, they may seek funding from the central capital programme through the submission of business cases.

Current examples of major health and safety issues are as follows:

- Fire and Asbestos problems in Prince Charles Hospital, Merthyr Tydfil - (Full Business Case expected by December 2001)
- Fire and Asbestos problems in Ysbyty Glan Clwyd - (Outline Business Case expected in July 2001)
- Copper Pipe Corrosion Ysbyty Gwynedd (Strategic Outline Case expected July 2001)
- Copper Pipe Corrosion Wrexham Maelor (Strategic Outline Case expected late summer)
- Major electrical works West Wales General Hospital (Business Case expected June 2001)

### **2. Background**

There are a wide range of statutory standards which relate to hospitals. Some of the most relevant of which are the Health and Safety at Work Act 1974, Management of Health and Safety at Work Regulations 1992, Reporting of injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995, Disability Discrimination Act 1995, Control of Substances Hazardous to Health (COSHH) 1999 and the Fire Precautions Act 1971. In addition, there are numerous non - statutory standards, these include Health Technical Memoranda (HTM's), which includes the Firecode series of documents and Health Building Notes (HBN's).

### **3. Major Issues**

Some of the major issues concerning health and safety compliance with the NHS in Wales are :

- Asbestos removal
- Compliance with Legionella guidance (HTM 2040)
- Control of Substances Hazardous to Health (COSHH)
- Electricity at Work Regulations
- Compliance with Firecode (HTM 86)
- Compliance with the Disability Discrimination Act 1995 (DDA)

This list is not a definitive list, but illustrates the variation in the different areas of concern.

Some of these issues are inter-related, i.e. in order to carry out work to comply with the Fire Precautions Act it may be necessary to carry out asbestos removal, the same might also apply, under certain circumstances, to some of the other items detailed.

Of the major issues, one having a significant offset throughout Wales is compliance with the DDA. This legislation was introduced in 1995 and is being phased in over a 9 year period, with full implementation by 2004.

One of the main aims of this legislation is ensure that all people with disabilities can have full access to services (Section 21 of the Act).

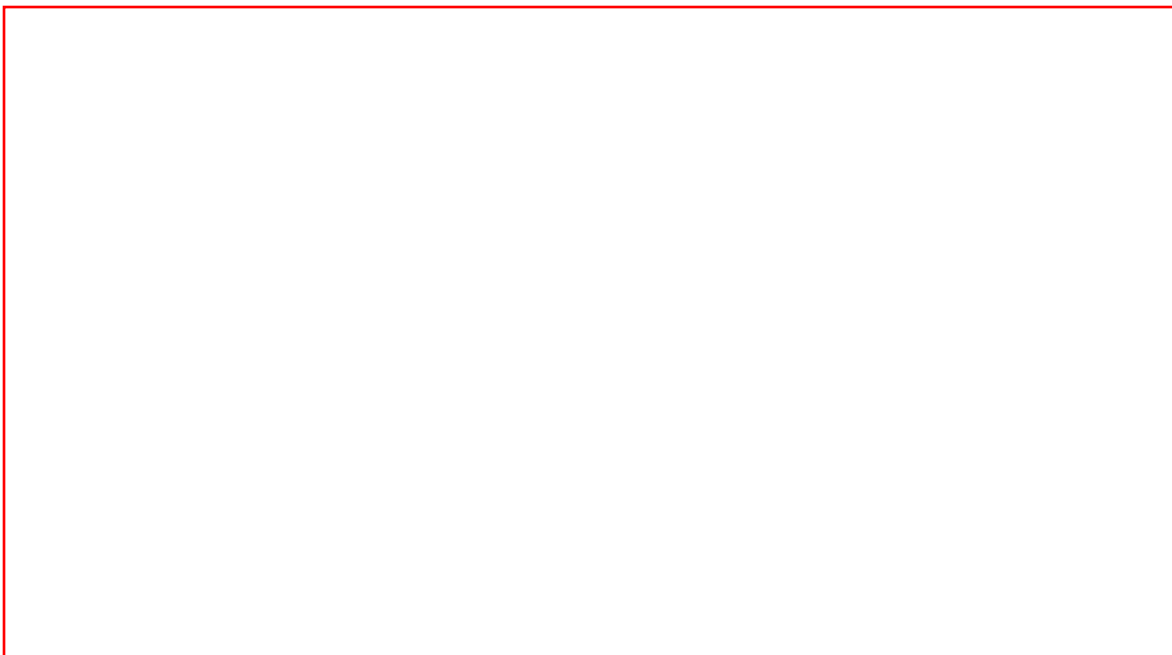
The full cost of compliance is not clear at this time but it is expected that the Act will have major resource implications in the period leading up to the full implementation date. All the Trusts will have to carry out full surveys/audits of their buildings together with risk assessments and undertake all remedial works necessary. A very rough estimate of the cost to NHS of full implementation of the Act has been given at £23million but further work is necessary to firm up this cost and to assess how much of the work has already been implemented.

#### **4. Estate Data Returns**

All the Trusts in Wales submit to Welsh Health Estates an annual Estate Data Return Form (EDR). This form summarises information concerning the condition of the physical assets together with details of information relating to the energy and utility consumption.

One of the sections on this form is concerned with Statutory and Safety (including fire safety) compliance.

The information detailed below has been taken from the EDR's and represents the information for 127 hospitals for the period April 1999 - March 2000.



**Figure 1**

The categories for the Statutory and Safety Performance are defined as follows :

- A - Complies with all standards
- B - Acceptable but with minor non-compliances resulting from recent changes in standards.
- C - Serious non-compliances requiring capital expenditure to bring to condition B.
- D - Dangerous non-compliances rendering the building, part of building or engineering system unacceptable for its current use. Major capital expenditure required to bring to condition B.

It can be seen from Figure 1 above, that 39% of the Estate is below an acceptable standard.

The associated cost for bringing the Estate to condition 'B' is £98.714 million (hospital buildings only). This value is as reported by the NHS Trusts and is not validated by WHE. In addition one location (Ysbyty Glan Clwyd) accounts for £35 million of this total (fire precautions/asbestos removal being included in this figure).

The costs for the individual hospitals are detailed in the WHE report, titled, " Estate Performance Report".

**5.0 Trend in Statutory and Safety Estimates**



**Figure 2**

Figure 2 details the trend in the estimated costs to achieve category 'B', over a five year period. It can be seen from this graph that the costs have remained fairly constant over this period, despite the allocation of significant capital resources into the estate

**6. Future Planned Action**

- A report on Firecode Compliance was received by the National Assembly for Wales in January 2001. Welsh Health Estates have been commissioned to undertake a more detailed survey in order to more accurately identify the risks. This report is expected in Summer 2001
- Welsh Health Estates are to undertake a study into issues associated with specialist ventilation systems installed in hospitals to assess their effectiveness in restricting the airborne transmission of hospital acquired infection
- Disability Discrimination Act - Welsh Health Estates to undertake a survey into the implication of introducing the Act fully into NHS buildings.
- "Improving Health in Wales" has acknowledged the challenge faced to ensure that the existing infrastructure is improved and signalled that new performance measures will be developed to ensure adequate levels of ongoing investment.