

Annual Health and Safety Report

Annual Report/Review

1 April 2022 – 31 March 2023 period

August 2023

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1. Introduction

The purpose of this report is to provide the Board of Directors with information relating to performance, key developments and issues for further consideration within the Trust in the area of occupational safety and health during the year ending 31 March 2023.

The Northern Health and Social Care Trust has a general duty under Section 2 of the Health and Safety at Work (Northern Ireland) Order 1978 to ensure, so far as is reasonably practicable, the health, safety and welfare of all its employees.

2. Health and safety organisation within the Trust

The Trust Board has delegated to the Chief Executive overall responsibility for health, safety and welfare and the attainment and maintenance of an environment, which is safe and healthy.

Directors are responsible to the Chief Executive for the safety of all persons in premises and employed in providing services for which they have management responsibilities. The Director of Human Resources is the nominated Director for the Staff Health and Well-being and Inclusion Strategy.

The Deputy Chief Executive co-chairs the Trust Joint Health and Safety Committee with the Trade Union Side Chair. Matters relating to health and safety are reported to the Executive Team via the Good Governance Steering Group and the Trust accountability arrangements (Appendix 1 Assurance Framework Committee Structure refers).

Each Division has established a Divisional assurance system and structure to support the Assurance Framework and its supporting policies and procedures including health and safety.

The Divisions are supported and facilitated to meet their health and safety requirements by their dedicated governance leads and the staff of the Corporate Governance Department. Health and safety is a standing agenda item at Divisional Governance meetings and guidance has been provided as to the issues which should be considered for discussion.

The Health and Safety Team is part of the Corporate Governance Department, reporting through the Director of Medicine. It provides assistance, advice and support to the Trust's management and staff and by so doing contributes to the discharge of the Trust's health and safety responsibilities.

The team's activities include:

- Regular review of all new and revised health and safety related legislation, guidance and best practice and interpreting the implications for the Trust.
- Developing strategies for managing health and safety within the Trust taking into account the corporate aims and objectives.
- The development, communication, implementation and review of corporate policies, procedures and other guidance relating to occupational safety and health.
- Contributing to the development, completion and maintenance of a Trust-wide risk management auditing system.
- Assisting in the completion of risk assessments, giving support and assistance to managers to ensure compliance with statutory requirements.

- Undertaking incident investigations and interpreting incident data to identify learning.
- Designing and delivering training programmes relating to occupational safety and health.

Since April 2020, cases where staff tested positive for COVID-19 had to be investigated to determine if there was reasonable likelihood of workplace exposure. These cases had to be reported under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR). In May 2022, the requirement to investigate positive staff cases was changed so that only positive tests confirmed by a polymerase chain reaction (PCR) test would be considered for RIDDOR reporting. The outcome of these investigations is detailed in section 6.

The role of the Trust's Occupational Health and Wellbeing Service (OHWS) includes the protection and promotion of the health, safety and well-being of staff within the workplace. Occupational Health undertakes a range of interventions including completion of pre-employment health assessments, health surveillance, the management and follow-up of sharps injuries, health promotion activities including the winter flu campaign and the delivery of specialist services including rehabilitation and psychological support.

3. Trust Health and Safety Committee Activity

Membership of the Trust Health and Safety Committee is drawn equally from management representatives from each Directorate/Division and from Trade Union Side. The Committee only met twice during 2022/23 because of industrial action, although a third (unofficial) meeting was held with some TU Side representatives present.

The Trust's Health and Safety Committee is now well established with a stable membership and over the course of the reporting period there continued to be a good level of engagement from both management and Trade Union Side.

Trade Union Side representatives meet with the Health and Safety Manager in advance of the committee meeting in order to discuss and attempt to address any issues of concern. A summary of discussions is provided at the next committee meeting.

The Committee's principal objective is to provide a Trust-wide forum for the oversight of health and safety management and to encourage joint working between Trust managers, staff and their representatives.

Key areas of business in 2022/23 have included:

- COVID-19 specific issues.
- Risk assessment (GRANT).
- Control of Substances Hazardous to Health (COSHH) management.
- Risk Audit and Assessment Tool (RAANT).
- Fire safety.
- Management of violence and aggression.
- Exposure monitoring for Nitrous Oxide.

Minutes of Committee meetings are posted on Staffnet following Committee agreement but, because of industrial action, only one set of minutes were approved and posted on Staffnet in this reporting period. The Trust Health and Safety Committee is directly

accountable to the Trust's Good Governance Steering Group for its performance in exercising the functions set out in the Terms of Reference.

4. Performance Against the Health and Safety Internal Assurance Standard

The Trust exceeded the minimum substantive score of 75% and achieved a compliance level of 83% for the 2022/23 assessment period, which is the same score as in the previous reporting period.

The area of poorest performance continues to be communication between the Trust and other employers with whom we share buildings. The standard was last independently verified in 2011.

5. Performance Indicators

A feature of an effective health and safety management system is the selection of performance indicators which can be used to demonstrate whether internal controls are working satisfactorily and that objectives for health and safety management are being met.

Measurement against the routine performance indicators was stood down during 2020/21 due to COVID-19 and only partly resumed in 2022/23. It is anticipated that further performance measurement activity will resume in 2023/24.

Incident data provides another performance indicator. Interpretation of this data, both in terms of numbers of incidents and rates is problematic as a number of variables may affect outcomes. Variation within and between Trusts is difficult to interpret and may be affected by changes in recording practice and culture.

The Trust has started to review and collate data over time (table 1). The Trust may in future be better able to identify trends and the impact of safety initiatives or changes in practice.

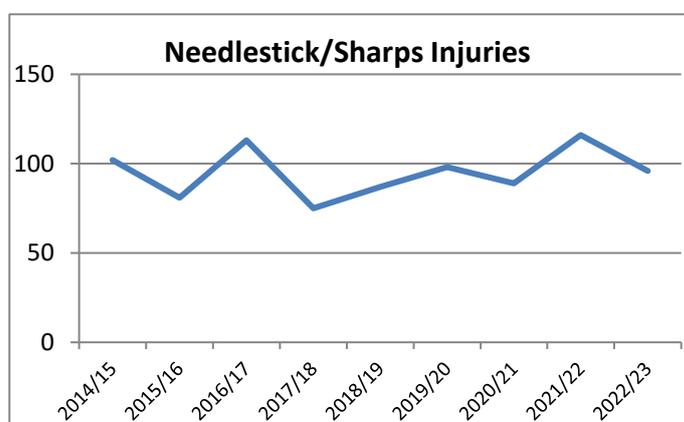
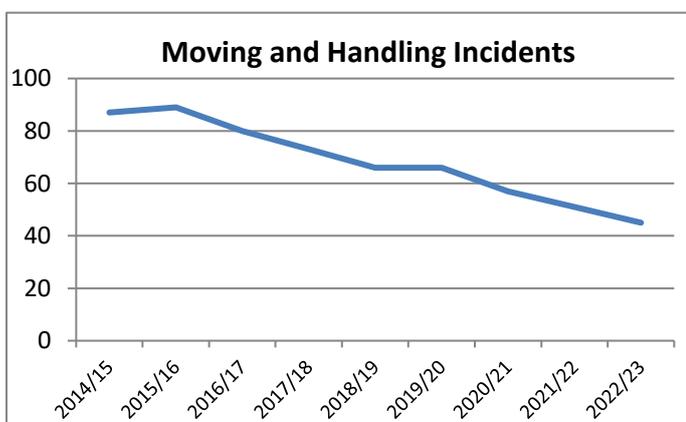
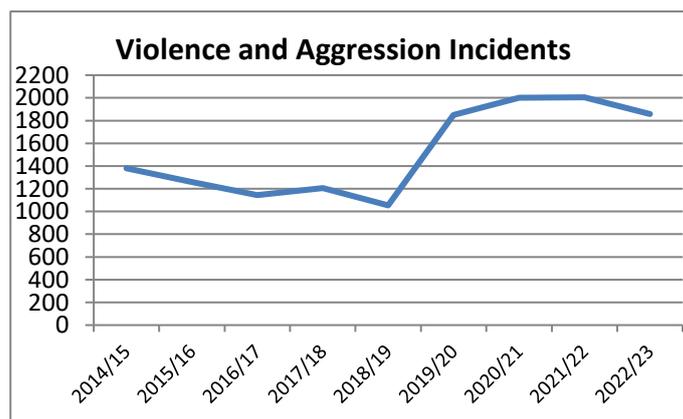
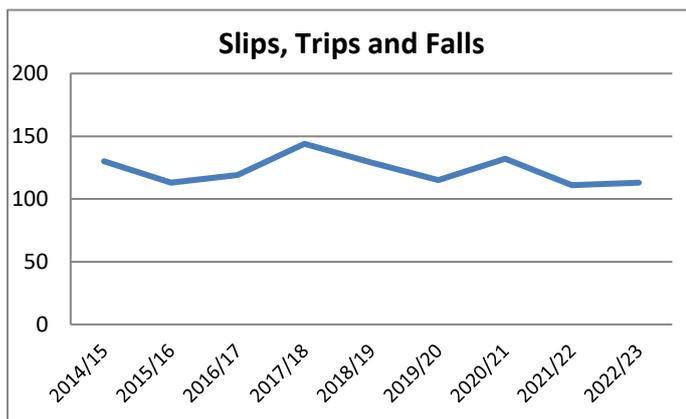
Incidents involving staff

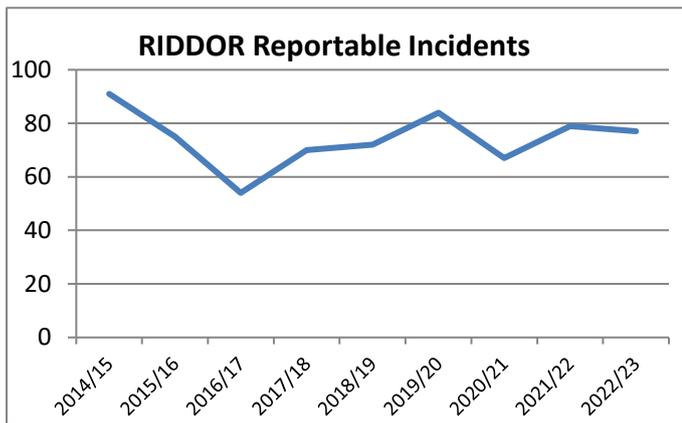
The table below provides details of all incidents involving staff within pre-determined categories. The rate is the number of incidents per 100,000 staff. This is the universally recognised method of calculating incidence rates as used by the Health and Safety Executive and by the five HSC Trusts for benchmarking incidents annually. There are no means of obtaining information on lost time/no lost time accidents within the current systems which the Trust has in place.

Table 1: Incidents involving staff

	Slips, trips and falls	Violence and aggression	Moving and handling	Needlestick/sharps Injuries	RIDDOR reportable
2022/23 (number)	113	1857	45	96	76
NHSCT (rate)	918	15,080	365	780	625
Regional (mean rate)	826	19,992	398	754	659
Regional (range)	681 - 919	15,080 - 27,457	365 - 480	520 - 962	461 - 884

The following graphs show incident numbers involving staff trends over the period 2014/15 to 2022/23:





A comparison with the other four HSC Trusts can be found at Appendix 2.

6. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR) reportable injuries

(RIDDOR reportable injuries are defined as those that result in three or more day's absence from work, a major injury or a dangerous occurrence.)

Seventy six RIDDOR reportable staff injuries were reported as a result of incidents which occurred during 2022/23 (see table 2 – this excludes cases of reasonable likelihood of workplace exposure to COVID-19). Of this number, sixty three were reported as over 3 day injuries and thirteen as major injuries.

Twelve of the thirteen major injuries were as a result of slips, trips and falls and one was following an incident of violence.

Table 2: Staff RIDDOR reportable injuries

Incident category	Number
Moving and Handling Activity	11
Slip Trip and Falls	36
Violence and aggression	23
Contact with equipment etc	5
Equipment	1
Totals:	76

There were eleven incidents reported under RIDDOR where the person injured was not a member of Trust staff, compared to five in the previous reporting period. Of those, ten were patient/visitor falls and one was a choking incident.

Since April 2020, cases where staff tested positive for COVID-19 had to be investigated for RIDDOR reporting purposes. In May 2022, the requirement to investigate positive staff cases was changed so that only positive tests confirmed by a polymerase chain reaction (PCR) test would be considered for RIDDOR reporting. By the end of the reporting period, all of the 6,951 cases where staff tested positive for COVID-19 had been investigated to determine if they met the criteria for reporting under RIDDOR and of these 675 (9.71 %) were reportable. These were reported to the Health and Safety Executive for Northern Ireland as required.

7. Claims for Damages

Table 3 below shows the number of new employer's liability and occupier's liability claims received between 01 April 2014 and 31 March 2023 by year. Further details can be found in Appendix 3 to the report.

Table 3: Employer's liability and occupier's liability claims

	2014 / 15	2015/ 16	2016/ 17	2017/ 18	2018/ 19	2019/ 20	2020/ 21	2021/ 22	2022/ 23
Employer's liability	40	45	49	27	46	33	32	39	25
Occupier's liability	12	3	6	7	4	8	10	5	6

8. Injury Allowance Claims

Injury Allowance is paid when staff are on an authorised absence because of an injury or disease which is wholly or mainly attributable to their employment. It arises when an employee's pay falls below 85% of normal pay, including relevant statutory benefits, and can continue to be paid for a maximum of twelve months so long as the 85% threshold is not exceeded including when returning on a phased basis.

Table 4 shows the number of approved injury allowance claims between 01 April 2022 and 31 March 2023 by year. A total of six application forms were issued during the reporting period but only three of those were submitted as a claim as at 31 March 2023. Of the three applications submitted in this reporting period one was approved and two are currently being processed.

Table 4: Injury Allowance claims approved

2014/ 15	2015/ 16	2016/ 17	2017/ 18	2018/ 19	2019/ 20	2020/ 21	2021/ 22	2022/ 23
12	5	5	3	3	0	0	4	1

A review of these claims demonstrates a varied number of reasons and no specific trend could be identified.

9. Occupational Health and Wellbeing Service (OHWS)

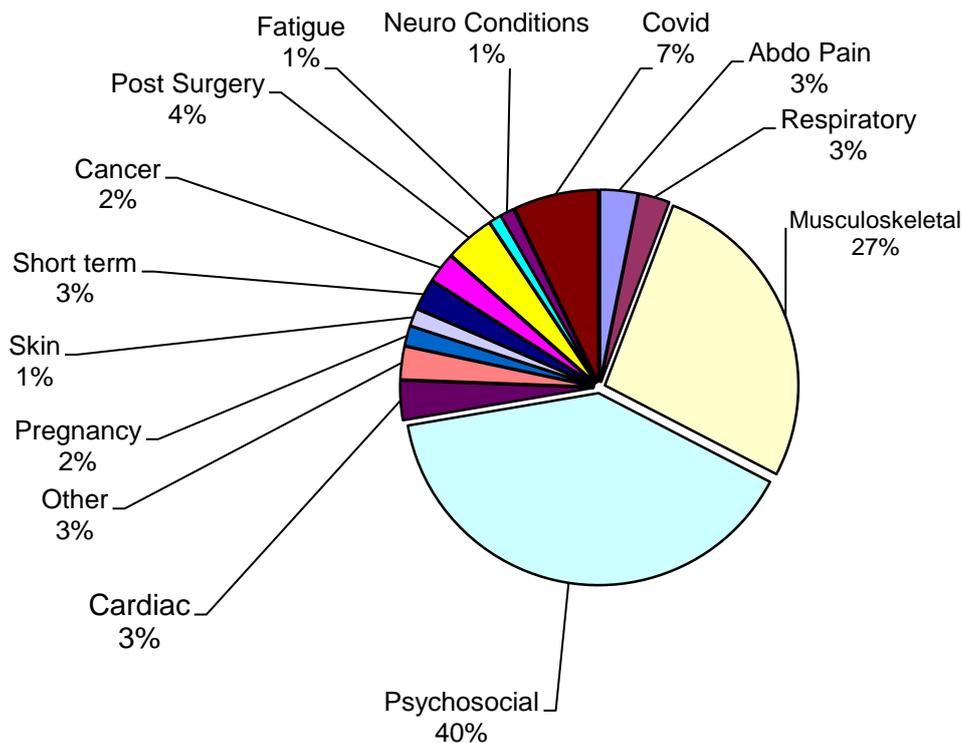
Management Referrals to Occupational Health and Wellbeing Service (OHWS)

The level of demand for management referrals and the ability to respond in a timely manner remains extremely challenging due to the year on year increase of management referrals received within Occupational Health. 3,602 management referrals were received during this reporting period compared to 3,506 in 2021/22 and this equates to an increase of 2.7% compared to that reporting period.

	2019/20	2020/21	2021/22	2022/23
OHWS Management Referrals accepted	3,988	2,583	3,264	3,506

The ability to respond to increasing demand in a timely manner has been further hindered by difficulties with recruitment in key posts such as OH Physiotherapist and OH Nurse Practitioners during 2022/23.

The Pie Chart below provides a detailed breakdown of reasons for attendance at Occupational Health by percentage from a total of 2,931 interventions. Psychosocial reasons account for 40% (1,162) of activity and 24% (276) of these were coded as work related stress.



Staff Vaccination Campaigns

The Staff Autumn Vaccination Programme was successfully rolled out in collaboration with the community facing programme. 2,594 (35.14%) of frontline staff received their COVID-19 booster and 2,534 (34.33%) received their Flu vaccine. Uptake reporting for 2022/23 was carried out by PHA through a new dashboard.

Post COVID-19 Vocational Rehabilitation Programme

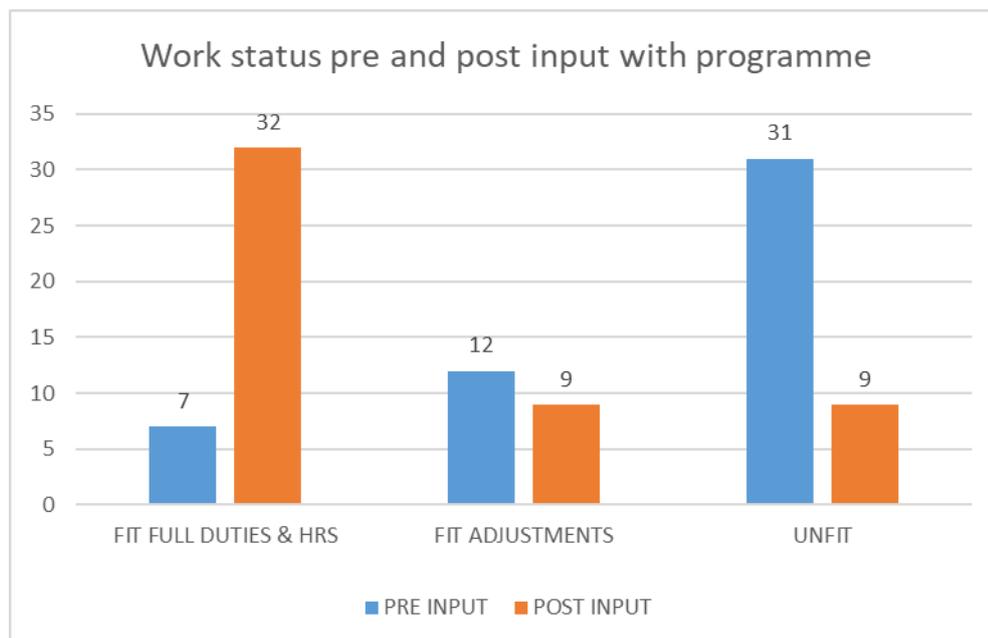
Throughout 2021/22 a business case was submitted and approved by Charitable Trust Funds (CTF) committee for the development of a bespoke vocational rehabilitation programme for those staff experiencing post COVID-19 syndrome. A specialist vocational rehabilitation team comprising of three full time Band 7 clinicians (Physiotherapist, Occupational Therapist and Cognitive Behavioural Therapist), a full time Human Resources Manager and part time Admin Support Officer were recruited and took up post during quarter one of 2022/23.

The programme was developed and officially went live, from September 2022, for managers to make referrals for those staff at work or off work and experiencing symptoms of Long COVID. Following an initial assessment all staff referred to the programme were

then offered a tailored rehabilitation programme which included one to one sessions with a specialist practitioner and/or attendance at a five to six week group programme.

By the end of the reporting period, five group programmes had been completed and a total of forty four staff had attended group sessions.

By late February 2023 a total of 50 staff had completed the vocational rehabilitation programme and the table below shows the work status, both pre and post attending the programme for those staff members who have completed the programme. Thirty one of the fifty staff members were unfit for work pre- programme. On completion of the programme, forty one of the fifty staff were either fit for work or fit for work with adjustments.



Fit Testing

The NHSCT process for fit testing was included in an Internal Audit in May 2022. On completion of the audit there were eight priority 2 recommendations which focused on three main areas:

- To ensure all relevant staff are fit tested and enhanced reporting on the number of fit tests completed for staff against the total number that need to be completed, with reporting of this status through the Assurance Framework;
- Strengthening of contract arrangements, which has been actioned and is considered complete;
- The development of a corporate policy on fit testing.

Work is at a relatively advanced stage to determine the denominator of those staff who will require fit testing. A denominator will facilitate enhanced recording and reporting on compliance rates and this will assist with emergency planning in the event of any future pandemics, by ensuring a consistent and methodical approach to fit testing.

Fit testing, coordinated by a temporary team from within the OHWS, has continued across the Trust throughout 2022/23 with a rolling fit testing programme for Trust staff, delivered

by an external provider. A business case to develop a blended approach to fit testing within the Trust, with the introduction of an internal fit testing team based within the OHWS, was submitted and approved during the reporting period. The internal fit testing team will be able to accommodate a more flexible approach to fit testing and members of the team will travel to specific work locations and departments, rather than individual staff from across the Trust travelling to a limited number of locations to be fit tested. It is anticipated that the team will be in place and begin to deliver the fit testing programme by the Autumn of 2023.

Contract arrangements with the external provider have been strengthened with the implementation of a contract outlining a pricing schedule and the roles and responsibilities of both the contractor and the Trust and yearly formal monitoring meetings. Invoice checks have been strengthened and a standard operating procedure has been written and implemented.

A first draft of a policy and guidance document for fit testing have been developed and disseminated to the Task and Finish group for comment.

Sharps and Splash Injuries

There is very little variation in the numbers of sharps and splash injuries reported to OHWS. In 2022/23 the overall number of sharps injuries reported by Trust employees was 136 compare to 140 in 2021/22. Whilst the figures remain consistent it is difficult to determine whether they are reflective of the actual number of sharps injuries which occur or are indicative of under reporting. However, the Trust sharps injuries policy was reviewed and updated during March 2023 and the title has been amended to include needlestick, splash and bite injuries to ensure that all modes of injury are considered in the reporting and management of sharps injuries.

10. Areas of Work of Particular Significance

General Risk Assessment Northern Trust (GRANT)

The GRANT document is used for recording Ward/Department health and safety risk assessments. Measurement of compliance rates for departments completing GRANT risk assessments had been stood down between March 2020 and March 2022. The completion rate at the end of the 2022/23 reporting period was 88% which was slightly up on the rate at April 2022 (87%) but below the target of 95%.

Risk Audit and Assessment Northern Trust (RAANT)

This audit is one of the methods by which wards, departments, facilities and services in the Trust establish their current level of compliance with a number of safety, health and risk related aspects associated with the delivery of services. Measurement of compliance rates for departments completing RAANT audits had been stood down between March 2020 and March 2022. The completion rate at the end of the 2022/23 reporting period was 89% which was up on the rate at April 2022 (76%) but slightly below the target of 90%.

Control of Substances Hazardous to Health (COSHH)

Audits of COSHH compliance were stood down in March 2020 due to the COVID-19 pandemic and only a small number of audits were undertaken in low risk areas during the 2021/22 reporting period. 91% of departments achieved the level of compliance required

during COSHH audits in October 2022. The Health and Safety Team provided advice to those departments who did not achieve the required level of compliance and divisional governance leads were also notified. Attendance at COSHH Awareness training continues to be alluded to in Table 1 and Section 12.

A significant number of samples for exposure to Nitrous Oxide were obtained in both delivery suites and dental surgeries in this reporting period. With the exception of one sample obtained in Mid Ulster Dental Department in March 2023, all samples were well below the occupational exposure limit. Work is underway with the Community Dental Service to determine the cause of the high exposure. Further assurance sampling will be undertaken throughout 2023/24.

Fire Safety

The Fire Safety Policy was updated during this period and removed the two yearly training requirement for office based staff. All staff, with the exception of those based within community residential care and mental health in-patients units (6 monthly requirement), are now required to complete general fire safety training annually.

Fire safety sub-groups continue to monitor and review compliance with the provision of fire wardens, fire drills, fire risk assessments and evacuation plans across all facilities. This information is collated and reported quarterly to the Trust Fire Safety and Evacuation Planning Group, which is chaired by the Deputy Chief Executive/Executive Director of Finance.

Management of Violence and Aggression

A Management of Violence and Aggression (MOVA) Toolkit which is an information resource for both staff and managers was launched in November 2021. An audit of compliance was undertaken and reported on over the summer of 2022. Compliance with the Toolkit was relatively poor and an action plan, which included re-enforcing the need to use the Toolkit via a number of ways, was developed to try and improve performance. An action to add a prompt on Datix has still to be completed.

In addition to this and the work done by the Trust Security Forum, an Acute MOVA Task and Finish Group was established in November 2021. This Group is chaired by the Executive Director of Nursing and was formed to address concerns about MOVA in acute wards and departments and had short to medium term goals based on implementation of the Regional MOVA Policy, which is still to be approved by the Department of Health.

Work was undertaken to identify the most suitable form of training for staff based in acute hospitals and a decision was made to make Crisis Prevention Institute (CPI) training available.

Funding was sought and in excess of 2,750 seats were purchased on Prevention First (level 1) training. Just over one hundred staff had completed the training by the end of the reporting period and the training will be offered to the remaining staff in our acute hospitals in the early part of 2023/24. Forty eight seats were also purchased for Verbal Interventions (level 2) training and these will be offered to staff over the summer of 2023.

Eleven staff also attended a CPI Train the Trainer course and ten completed the course. These ten staff will undergo a development programme overseen by the CPI Training Team in Holywell Hospital over the course of 2023/24. By the end of that programme they

will deliver both Verbal Interventions (level 2) and Safety Interventions (level 3) training as appropriate to relevant staff.

Table 6: Incidents of violence and aggression by facility (top 10)

Facility	Number of incidents
Holywell Hospital	492 (617)
Antrim Area Hospital	157 (170)
Ross Thomson Unit	87 (73)
Whitehaven Respite Unit	84 (17)
Causeway Hospital	84 (86)
Armour Complex	66 (25)
George Sloan Adult Centre	39 (11)
The Pines	33 (23)
Hollybank Hostel	23 (22)
Antrim Adult centre	21 (24)

(2022/23 figures)

Sharps injuries

There continues to be a discrepancy between the number of staff attending OHWS following a sharps injury and the number of incident reports completed. A process is in place whereby referrals for sharps injuries to OHWS is compared to information on the Datix incident reporting system.

Discrepancies between the two are followed up in an attempt to have all sharps incidents reported. However, this work was stood down at the end of February 2020 due to COVID-19. Opportunities to address these discrepancies will be further explored.

Limited analysis of sharps injuries (between 01 October 2020 and 30 September 2022) was undertaken to try to identify any trends. However, there were no obvious trends in the incidents which occurred in that period and it will need to be explored in more detail.

Backcare Team

The team continued to deliver training, provide telephone advice to frontline clinical staff and provide specialist risk assessment services for clients with complex manual handling issues alongside frontline clinical staff throughout 2022/23.

The team has again been active on regional interest groups. Significant work was undertaken to update the regional care plans that detail safe use of manual handling equipment and safe manual handling techniques used by community staff to reduce manual handling risk. The updated versions have been added to Staffnet and are already being used by community staff.

Trade Union Side (TUS)

This reporting period again has been a busy one for TUS. Partnership working has proved difficult as a result of industrial action, but as health and safety issues are of paramount importance to TUS the forum continued to try and operate via the TUS chair and Secretary

on Health and Safety issues. Risk assessments and inspections continued in partnership and have proved vital.

TUS has stated that the role of the Trust Occupational Health and Wellbeing Service is vital to protect and promote the health, safety and wellbeing of staff in the workplace. TUS have reiterated that it is their view that the service is underfunded and under resourced to fully meet the demands of the staff.

Key areas of focus for TUS in this reporting period have been stress and sickness absence, compliance with RAANT, management of violence and aggression, reduction of slips, trips and falls. TUS indicated its disappointment that the number of slips, trips and falls was above the regional average in the previous reporting period. TUS has again communicated its desire for more of a focus on its members working in service user's homes in the community.

TUS has stated that the number of incidents of violence and aggression which occur is not acceptable and has vowed to continue to help reduce this number. It has welcomed the introduction of lone worker devices but would like to see more widespread availability of these across a lot more areas of the Trust.

TUS has indicated that it has seen little evidence of a holistic approach to stress and absence management and notes a distant lack of empathy and proper leadership in how to manage absence particularly where stress, depression or anxiety are the reasons noted for ill health. TUS would like to see a proactive approach to stop burn out and to avoid such high levels of stress manifesting in the first place and they believe that early intervention is key. A greater evidence of partnership working with TUS is really needed in this particular area.

TUS has reviewed the People and Culture Plan and indicated that it hopes that this will assist in reducing health and safety issues. It has stated that as an overarching framework it appears to be robust with a focus on health wellbeing and inclusion. It has added that the proof will be in the implementation.

TUS has stated that it is its view that understaffing remains a problem and that it is vital that the strong working relationships formed with TUS and management are improved upon to provide a safe workplace for their members and the public we serve.

Estate Services Department

Estate Services continued to respond to the ongoing requirements to address issues relating to health and safety. The Estates team has delivered a capital works programme of £5.25 million associated with addressing backlog maintenance. A number of the health and safety related statutory works projects are outlined below:

- Trust wide asbestos removal

The Trust continues to meet its legal obligation to effectively manage all known or presumed Asbestos Containing Materials (ACMs), including the removal of all high to medium risk ACMs. This commitment provides staff, service users and visitors to Trust facilities with a safer environment. £282,000 was allocated in 2022/23 to the removal of high and medium risk asbestos.

- Trust wide Firecode Works

The Trust has a responsibility to ensure the safety of staff and services users in the event of fire. Effective fire safety depends upon a combination of physical fire precautions and a robust system of effective management. Firecode Works address recommendations from the fire risk assessment process to maintain and upgrade active and passive fire protection. Estate services continue to provide advice and direction internally and externally to support projects delivered by Capital Development colleagues and Health Estates.

- Trust wide water safety

The Trust continues to manage its domestic hot and cold water systems in accordance with statutory requirements and best practice. A number of high risk remedial works were completed during 2022/23. A number of key risk assessments were completed in 2022/23 with an extensive programme to be completed in 2023/24 (subject to funding).

The Trust has deployed a new compliance management software package “zetasafer” which will greatly assist with operational management of the Trust water systems and effective reporting on levels of compliance.

- Trust wide electrical safety

The Trust continues to manage its electrical systems in accordance with statutory standards and best practice. The ongoing process of fixed wire testing and maintenance identified several high risk issues which were addressed during 2022/23.

Employers’ Liability and Occupiers’ Liability (ELOL) claims and Learning from Serious Adverse Incidents

A greater number of meetings of the EL/OL Advisory Board took place in this reporting period compared to the previous year. Meetings are attended by representatives of the Corporate Governance department, managers of departments to which claims relate and DLS representatives, to provide assurance over ongoing learning from these claims.

Each Serious Adverse Incident (SAI) report is presented at a Safety Panel (chaired by an Executive Director, with Corporate Governance representation), which considers the quality and robustness of the review and examines the recommendations to ensure the learning from the SAI is reflected in the outcomes and disseminated internally to staff and/or shared regionally. The Learning for Improvement Group (formerly known as SAI Review Group) provides corporate oversight of SAIs submitted to Strategic Planning and Performance Group (formerly known as the Health and Social Care Board), review outcomes reported, recommendations and learning.

11. Contact with Enforcement Authorities

Any contact with either HSENI or borough councils has been in relation to incidents reported under RIDDOR.

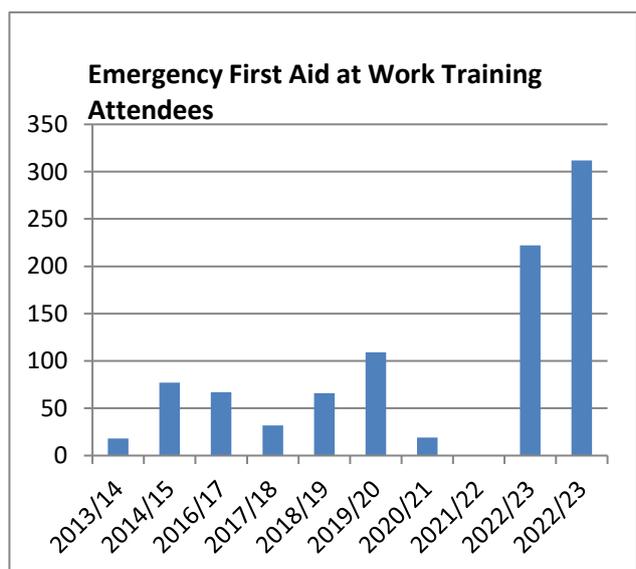
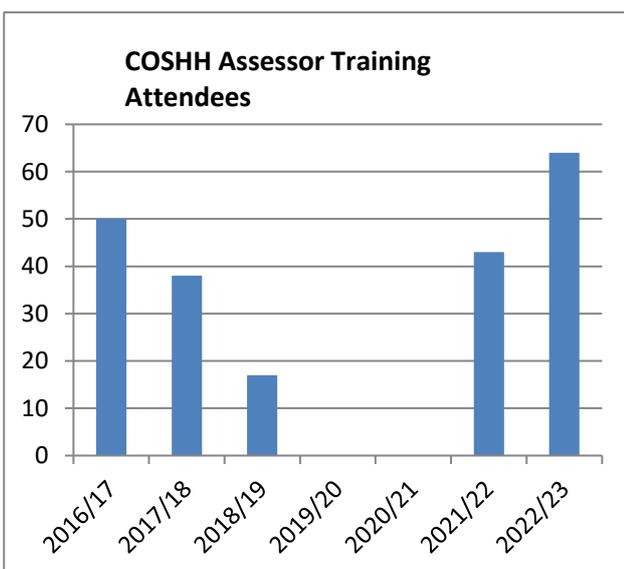
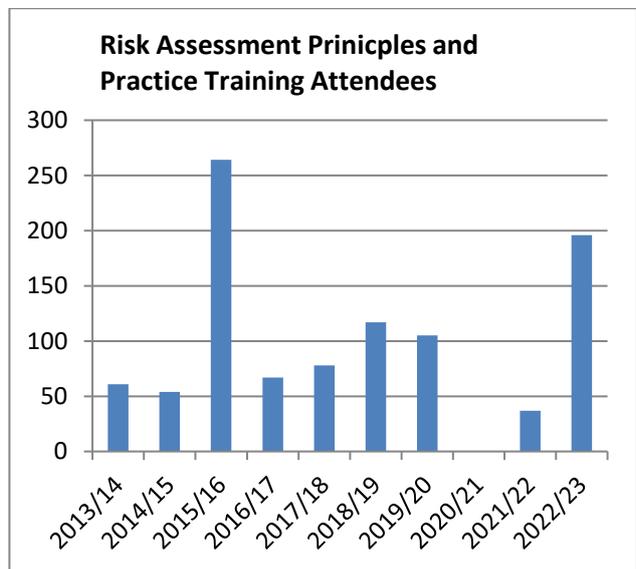
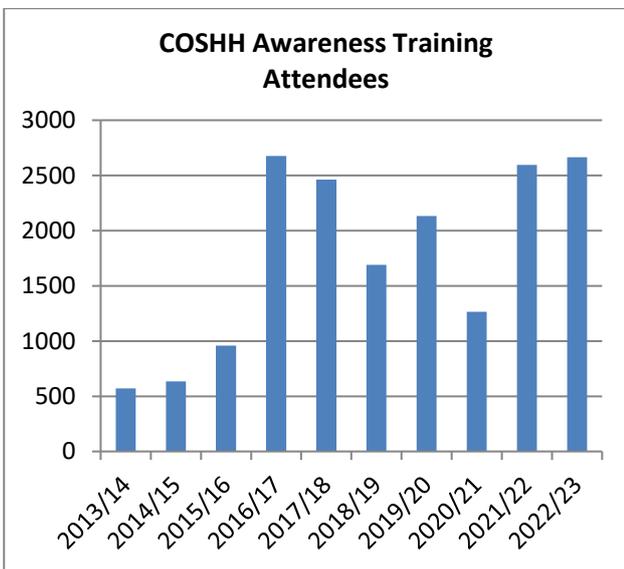
As previously reported a SAI was reported to HSCB in early 2015 involving a patient who died following an episode of choking. The Public Prosecution Service determined that the prosecutorial test was met in relation to a breach of Article 5(1) of the Health and Safety at

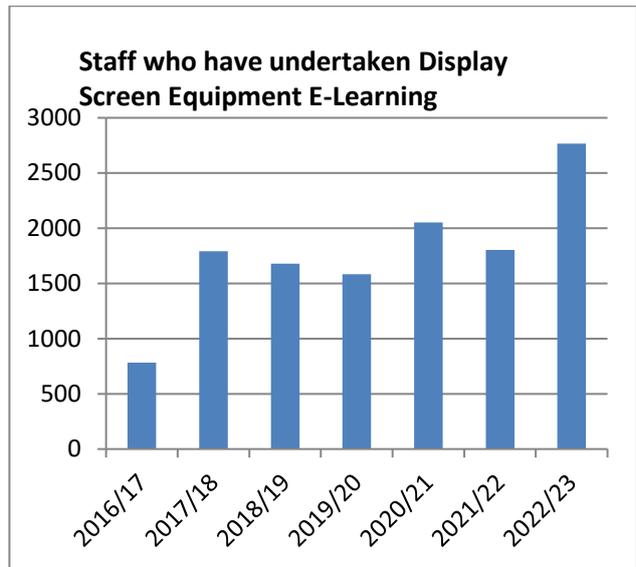
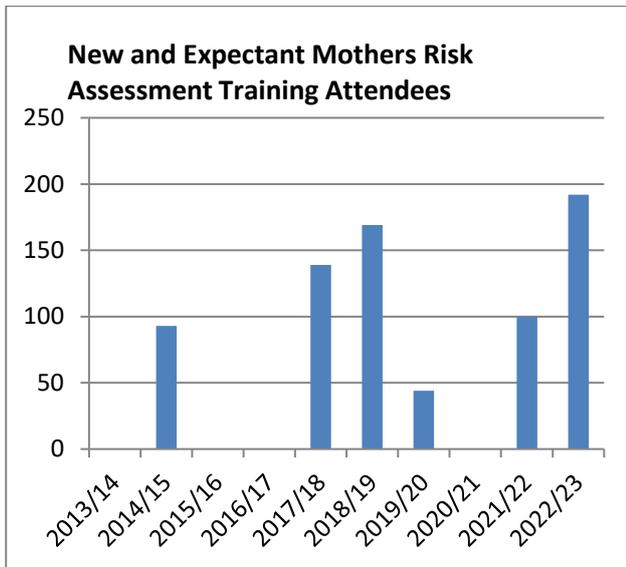
Work (NI) Order 1978. The Trust pleaded guilty to a single health and safety breach in relation to a non-employee. The Trust was fined £10,000, at trial on 27 April 2023 at Coleraine Crown Court. The Trust issued an unreserved apology, and genuine remorse and regret, to the patient's family.

12. Training Provision

Face to face training is still not being delivered to the extent that it was prior to the pandemic, with many courses still being delivered remotely, where possible. The following graphs show training delivered / facilitated during the reporting period and prior years (for comparison) since 2013, where records are available:

General Health and Safety Training





COSHH Awareness Training has been predominantly accessed via e-learning since November 2020, and only those staff who cannot access e-learning receive the training face to face.

Delivery of risk assessment training only recommenced in November 2021 and a significant number of risk assessment training courses, both initial and refresher, were delivered in 2022/23 to address the backlog.

Emergency First Aid at Work Training is delivered by a contracted provider. Services and Departments organise training on the basis of need; this can be cyclical because certification is valid for three years following the completion of training.

COSHH Assessor Training is delivered by a contracted provider on the basis of need, and the availability of funding to a lesser extent. COSHH Assessor Refresher Training was delivered for the first time during this reporting period and it is anticipated that more will be delivered over the next.

Annual Fire Safety Training compliance for applicable staff who are required to complete this increased from 54% to 60% with compliance for 6 monthly training also increasing

from 47% to 52% overall. 2,363 staff completed fire warden training in the previous two years to 31 March 2023, this represents a significant increase from 1,528 in the previous period and returns compliance to pre-COVID-19 levels.

Moving and Handling Training

In 2022/23 the Back Care Service was able to deliver face to face training on a more consistent basis than during the previous reporting period. However, the number of staff attending each training session had to be limited to four in order to comply with COVID-19 safety measures. This compares with twelve staff pre-pandemic. Courses were scheduled to run back to back to maximise the number of staff who could be trained.

The Back Care Service provided face to face practical Manual and Handling Risk Assessment Training to 2,625 staff (see tables below) during this reporting period and this represented an increase of 44% compared to the year before. The video based e-learning Moving and Handling (patient handling) Course introduced during the pandemic to support staff, and retained to assist with pressures where managers had difficulty releasing staff to attend training, was completed by 1,194 staff in 2022/23. This means that the total number of staff trained in patient handling was therefore 3819.

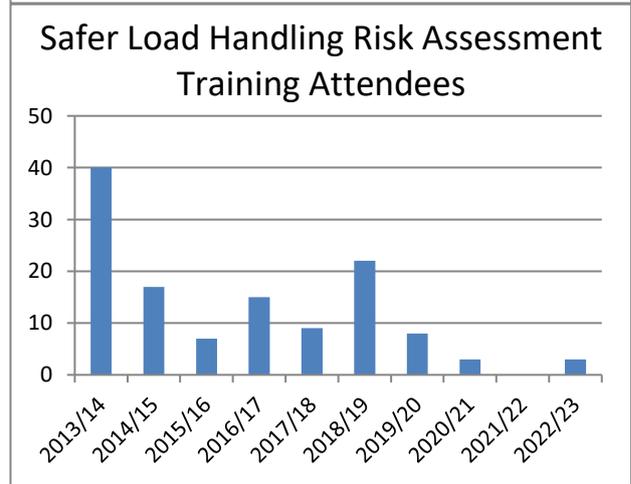
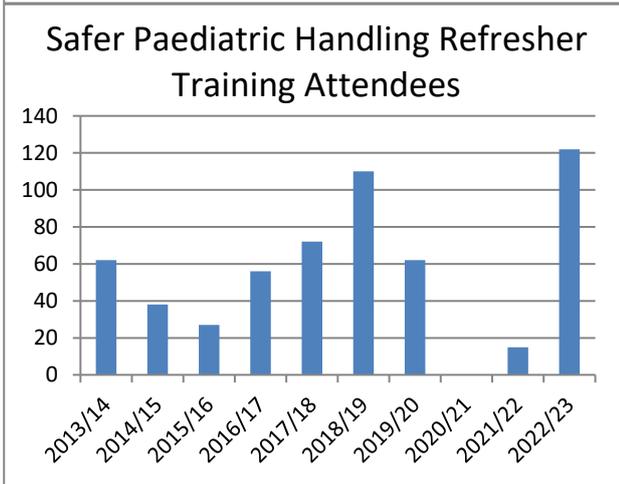
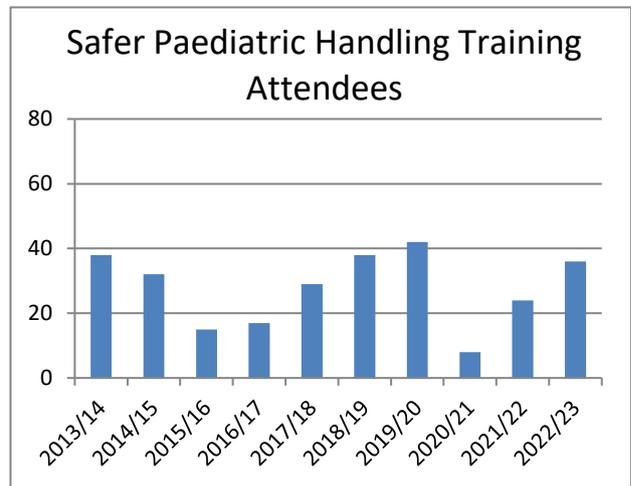
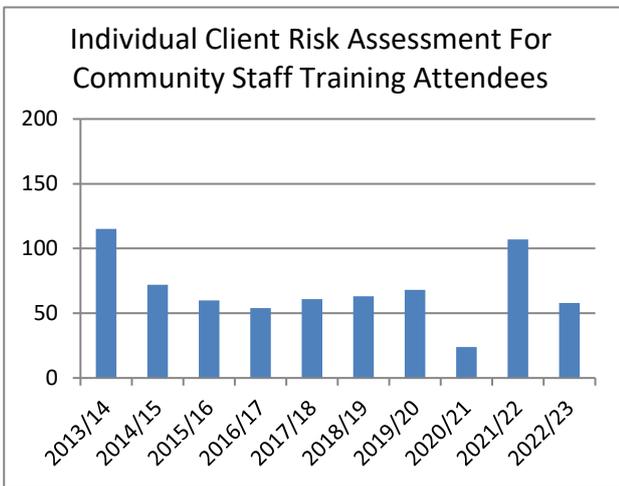
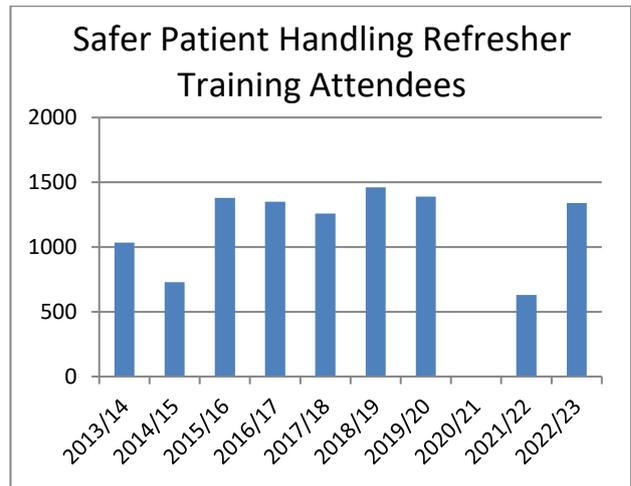
The Back Care Service delivered the Family and Carer Manual Handling Training programme for a third year. This programme provides manual handling training to both paid and informal carers and to service users' family members to assist with the delivery of care in the service users' home. There were 170 referrals to the Family Training programme and Back Care staff delivered 122 sessions of off-site training to 287 family members and carers. *The difference in referrals and sessions is accounted for by service users who were deceased, families declining to avail of training, or service users who had been admitted to hospital or were too unwell.*

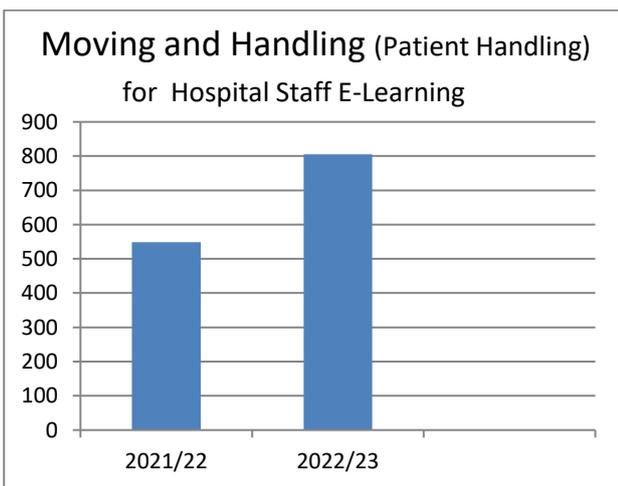
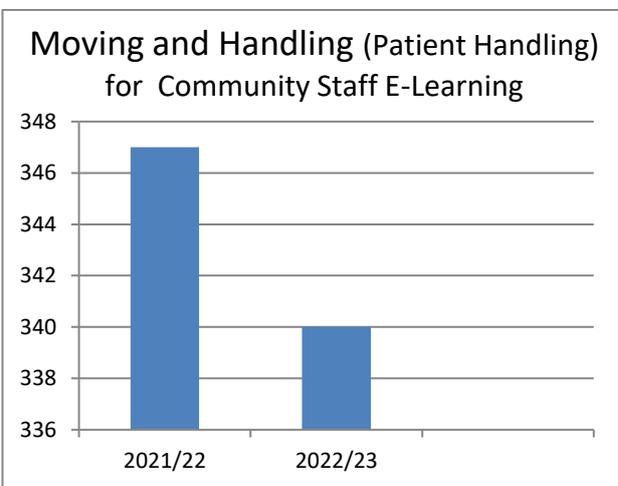
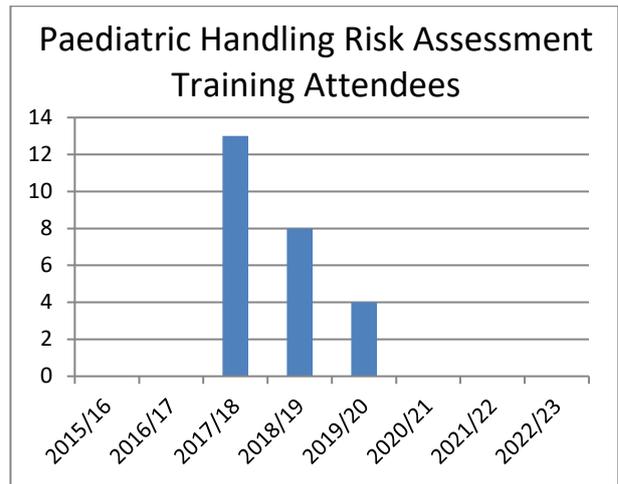
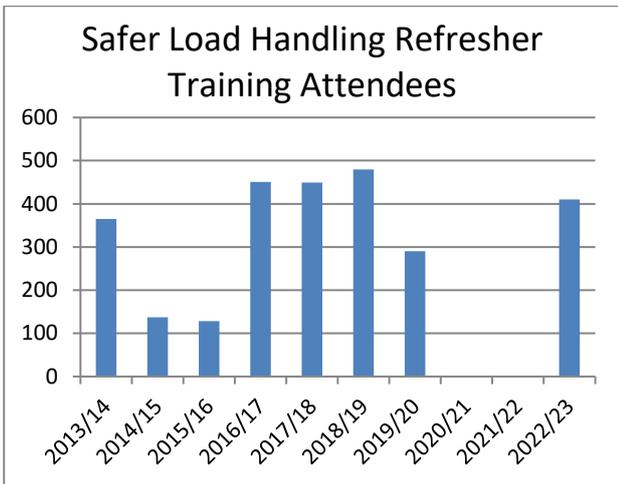
The team recommenced delivery of training on the Hovermatt and Hoverjack, specialist patient lifting equipment for use following falls in Antrim Area Hospital. This specialist equipment is used to lift injured patients from the floor and thereby significantly improve both patient and staff safety. 100 staff were trained in 2022/23.

A bariatric e-learning training video was produced and this form of training was completed by 49 staff. Bariatric resource videos for the acute setting were made available on Staffnet to improve staff safety and increase awareness of specialist Bariatric equipment available on the acute sites. A bariatric poster was designed and developed, which contained QR codes providing a link to specific training videos for bariatric equipment. This was distributed to all acute wards.

Two e-learning video packages introduced in the previous reporting period, one designed for acute/hospital staff and the other for community staff, continued to be used. During periods of high levels of absence/isolation, the programmes have provided greater flexibility as to when learning takes place, reducing time away from the workplace.

Individual videos have also been uploaded onto Staffnet, for staff to refresh knowledge of particular techniques or equipment as required. This in turn supports risk assessments and care provision. The team is now also working on a package aimed at handling the larger patient.





13. Backcare Challenges

The stepping down of face to face training due to COVID-19 and the subsequent redeployment of staff to support the Trust's initial response to COVID-19 has had a significant impact on the team's ability to deliver the statutory and mandatory training required to ensure that the Trust complies with current legislative responsibilities. There

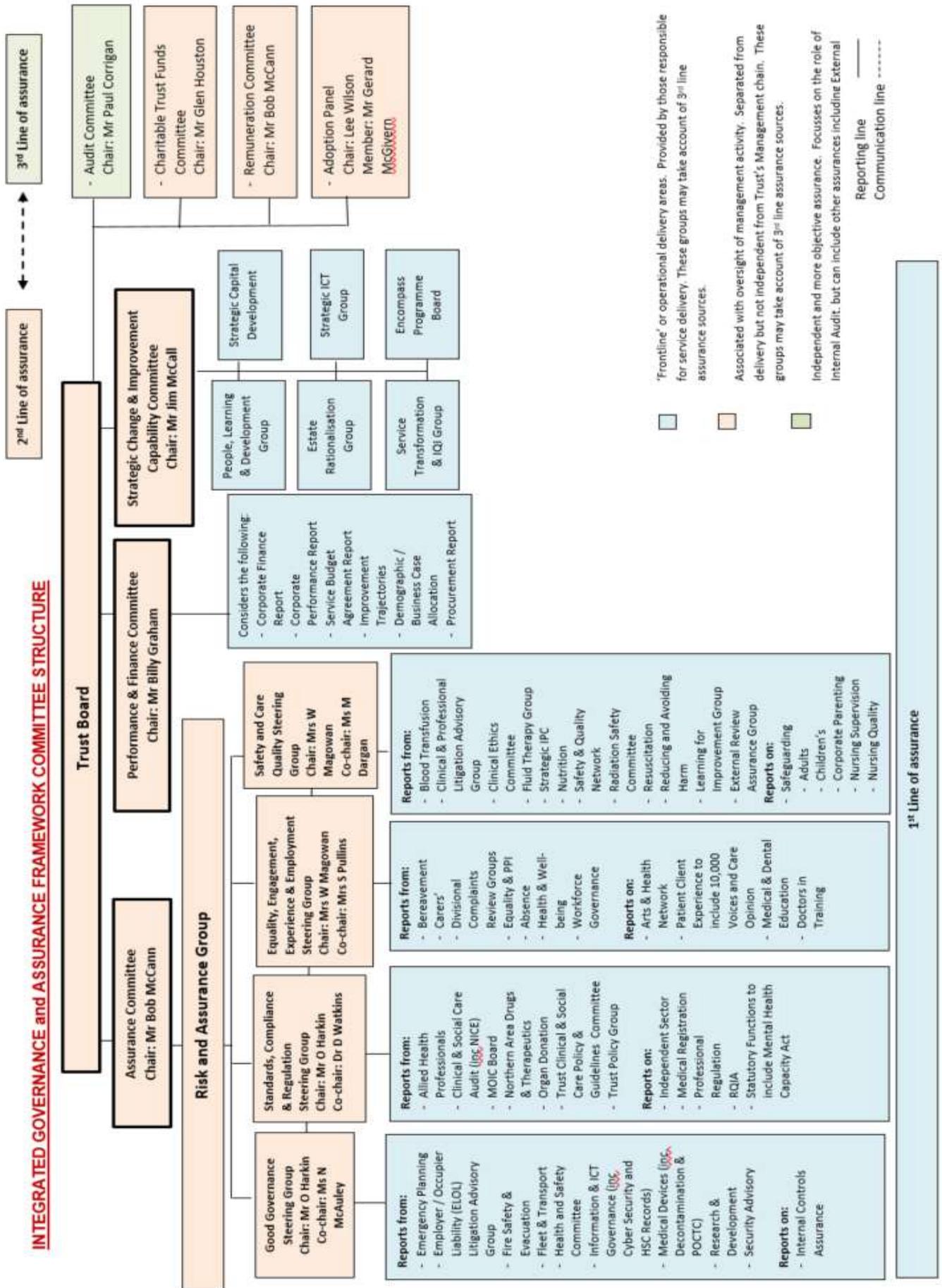
remains a significant long-term backlog in training provision as a result and the team will continue to respond to the increasing demand for Manual Handling training, particularly for new starts and international nurses.

14. Priorities for 2023/2024

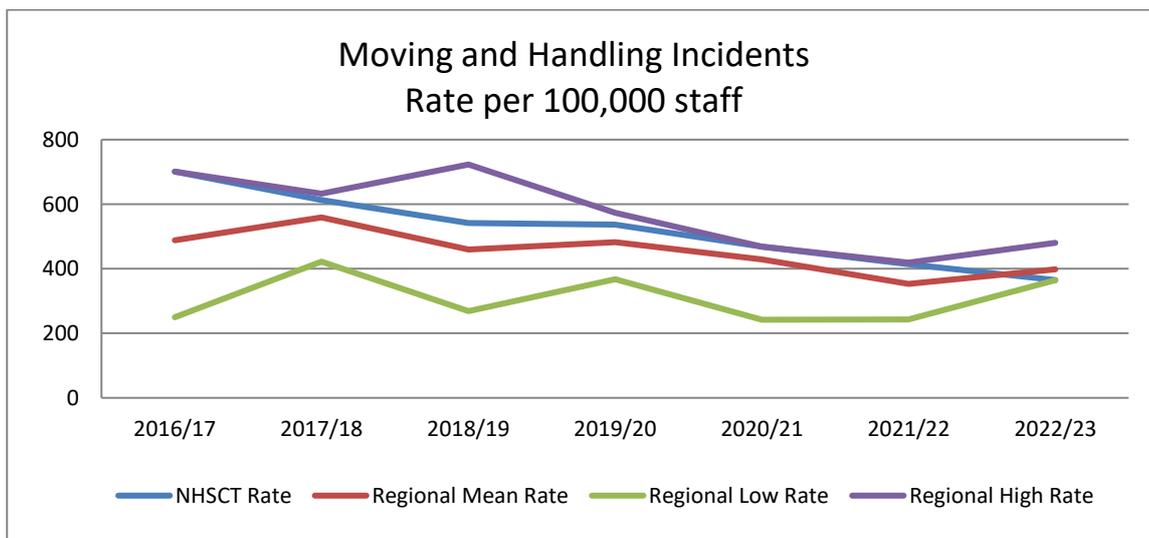
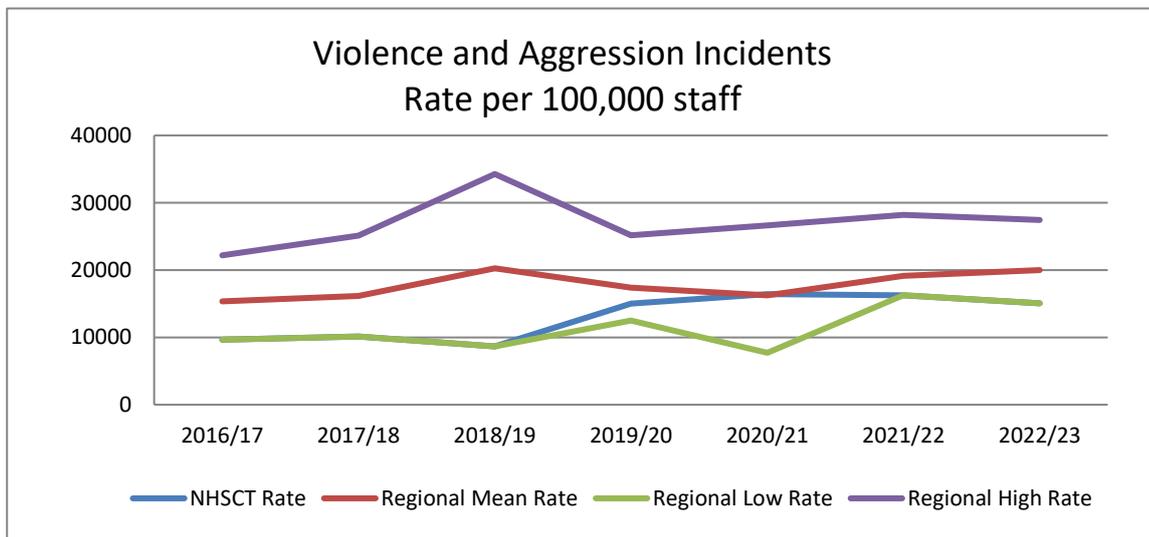
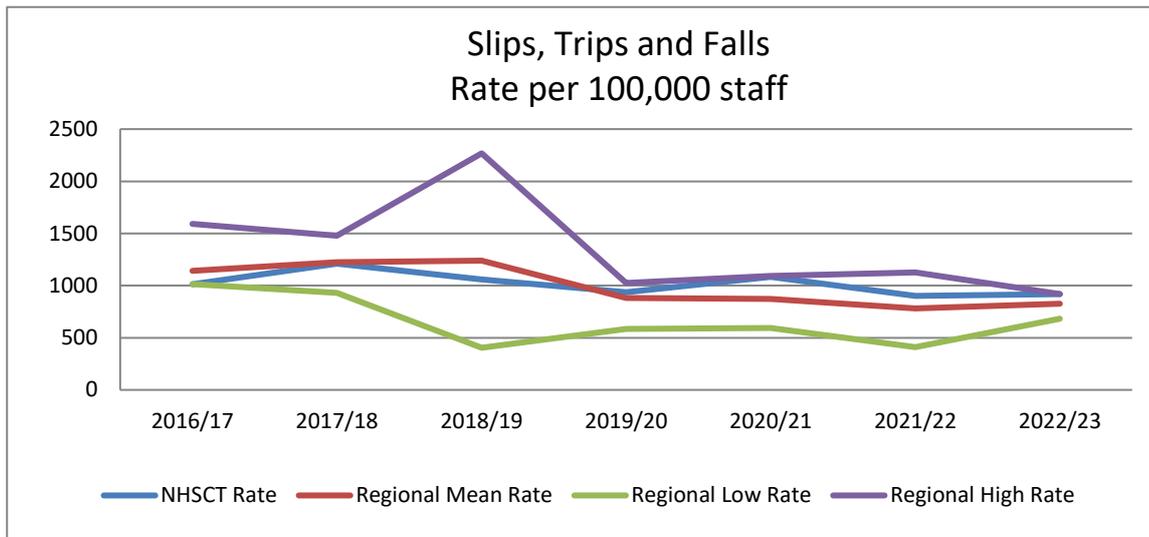
The main health and safety priorities for 2023/24 will be:

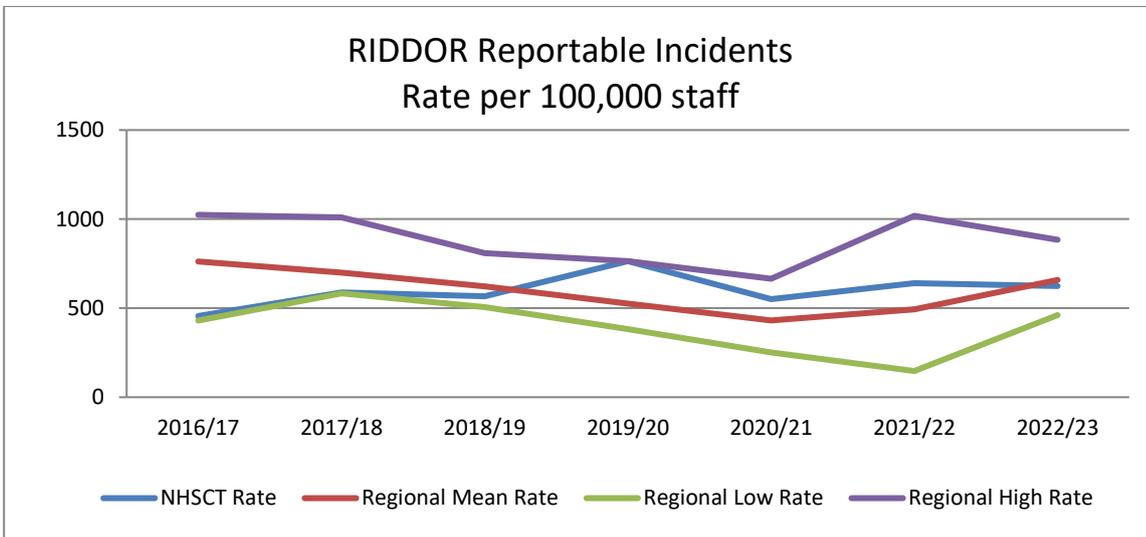
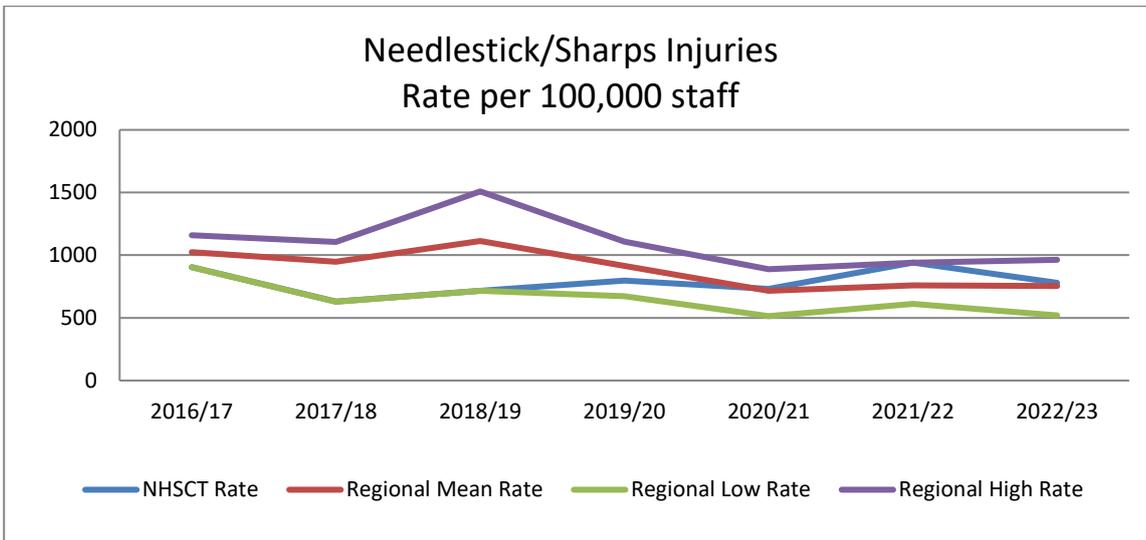
- Support the Acute MOVA Task and Finish Group to reduce risks arising from violence and aggression in acute facilities and improve compliance with the Trust's MOVA Toolkit.
- Support the roll out of Crisis Prevention Institute Safety Intervention Training across all acute sites.
- Carry out a further and more detailed analysis of sharps injuries (between 01 October 2020 and 30 September 2023) to identify any trends and what action could be taken to reduce the number of sharps injuries which occur.
- Improve compliance in respect of GRANT, RAANT and COSHH management.
- To carry out risk assessments of hazardous substances and provide assurance over the management of any risks e.g. Nitrous Oxide.
- Review and update Health and Safety related policies falling due for review.
- To ensure timely investigation of EL/OL claims.
- To carry out risk assessments to support Trust business, for example learning alerts and water safety.

Appendix 1 – Assurance Framework



Appendix 2 – Incidents Involving Staff – Comparison with other HSC Trusts





Appendix 3 – Employer’s and Occupier’s Liability Claim Statistics

Table 1: Total number of employer’s liability and occupier’s liability claims received against Trust and number outstanding at end of each year

Claim Type	2020/2021		2021/2022		2022/2023	
	EL	OL	EL	OL	EL	OL
Corporate Support Services & Nursing	10	3	15	0	10	0
Finance	3	5	2	4	1	3
Mental Health, Learning Disability & Community Wellbeing	6	1	3	0	4	2
Medicine & Emergency Medicine	3	1	8	0	3	0
Community Care	3	0	2	0	4	0
Surgery & Clinical Services	2	0	4	0	2	0
Women, Children & Families	2	0	5	0	1	0
Medical & Governance	3	0	0	0	0	0
Not Stated	0	0	0	0	0	1
Grand Total	32	10	39	4	25	6
Total Claims Outstanding	97	27	97	26	91	23

Table 2: Employer’s liability claims received by category 2022/23

Handling	3 (4)
Needlestick/Sharps	4 (5)
Other	2 (11)
Slip/Trip/Fall	8 (11)
Violence & Aggression	7 (6)
Exposure to COVID-19	1 (0)
Total	25 (39)

(2021/22 figures)

Table 3: Occupier’s liability claims by category 2022/23

Other	2 (2)
Slip/Trip/Fall	4 (2)
Total	6 (5)

(2021/22 figures)

In considering litigation figures in general it must be noted that the number of new claims received in any one year has little or no bearing on settlement costs paid in that same year given that it may take several years for any claim to be resolved.

Table 4: Settled employer's liability claims by incident type and total amount paid in damages 2022/23

Incident type	Number Of Claims Settled	Total Amount Paid in Damages
Other	3	£49,707
Handling	4	£38,902
Assault etc	3	£27,500
Slip/Trip/Fall	5	£25,000
Violence & Agression	2	£15,988
Needlestick/Sharps	4	£9,750
Equipment malfunction	1	£3,500
Grand Total	22	£170,346

Table 5: Settled occupier's liability claims by incident type and total amount paid in damages 2022/23

Incident type	Number Of Claims Settled	Total Amount Paid in Damages
Slip/Trip/Fall	3	£305,000
Equipment malfunction	1	£10,500
Needlestick/Sharps	1	£2,000
Violence & Agression	1	£1,500
Grand Total	6	£319,000

Table 6: Settled Employer's Liability and Occupier's Liability Claims - Number, Damages Payments, Total Payments (which includes Damages Payment).

Directorate	2019/2020		2020/2021		2021/2022	
	EL	OL	EL	OL	EL	OL
Community Care	4	0	12	0	2	0
	£31,000	£0	£111,500	£0	£9,000	£0
	£168,702	£0	£345,447	£0	£41,310	£0
Corporate Support Services & Nursing	4	0	7	2	9	0
	£32,000	£0	£58,000	£4,691	£82,348	£0
	£83,432	£0	£118,838	£11,419	£153,304	£0
Finance	4	2	4	2	2	1
	£36,467	£11,700	£12,500	£4,750	£30,500	£3,150
	£61,034	£14,842	£32,024	£7,508	£43,224	£5,407
HR, OD & Corporate Comms	1	0	0	0	0	0
	£0	£0	£0	£0	£0	£0
	£0	£0	£0	£0	£0	£0
Medical & Governance	0	0	2	0	0	0
	£0	£0	£27,500	£0	£0	£0
	£0	£0	£60,713	£0	£0	£0
Medicine & Emergency Medicine	2	0	2	0	6	1
	£10,000	£0	£6,000	£0	£41,670	£8,500
	£16,579	£0	£9,760	£0	£69,761	£16,612
Mental Health, LD & CW	3	0	2	0	5	0
	£13,500	£0	£33,500	£0	£77,000	£0
	£28,620	£0	£67,145	£0	£116,635	£0
Surgery & Clinical Services	0	0	0	0	2	0
	£0	£0	£0	£0	£6,000	£0
	£0	£0	£0	£0	£12,967	£0
Women, Children & Families	5	0	2	0	5	1
	£57,500	£0	£32,250	£0	£90,500	£0
	£96,829	£0	£67,943	£0	£141,648	£69
Total No. of Claims	23	2	31	4	31	3
Total Sum of Damages	£180,467	£11,700	£281,250	£9,441	£337,018	£11,650
Total Sum of Total payments	£455,196	£14,842	£701,870	£18,927	£578,849	£22,088