



**ACT**  
Government

**Canberra Health  
Services**

Ref FOI18-112



Dear 

### **Freedom of Information Request – FOI18-112**

I refer to your application received by Canberra Health Services on 1 November 2018 in which you sought access to information under the *Freedom of Information Act 2016* (the FOI Act).

In your application you have requested:

*“... documents related to maintenance of ACT Health and Canberra Health Service buildings and facilities. Specifically seeking:*

- Briefings provided to the Minister for Health and Minister for Mental Health related to maintenance issues in ACT Health buildings from 1 January 2018 to 31 July 2018. This may include but is not limited to ministerial briefs, Estimates briefs and question time briefs.*
- Briefings provided to the Minister for Health and Minister for Mental Health related to maintenance issues in ACT Health and Canberra Health Service briefs from 1 September 2018 to date. This may include but is not limited to ministerial briefs, Estimates briefs, annual reports briefs and question time briefs.*
- Documents from all Work Health and Safety Committees located on the Canberra Hospital Campus from 1 July 2018 to date. This excludes the Adult Acute Mental Health Services Work and Safety Committee as I have requested documents from this Committee previously.”*

I am an Information Officer appointed by the Chief Executive Officer under section 18 of the Act to deal with access applications made under Part 5 of the Act.

Canberra Health Services was required to provide a decision on your access application by 29 November 2018.

#### Decision on access

Searches were completed for relevant documents and 14 documents were identified that fall within the scope of your request.

I have included as Attachment A to this decision the schedule of relevant documents. This provides a description of each document that falls within the scope of your request and the access decision for each of those documents.

I have decided to grant full access to all relevant documents. The documents released to you are provided as Attachment B to this letter.

#### Charges

Processing charges are not applicable to this request.

#### Online publishing – disclosure log

Under section 28 of the Act, ACT Health maintains an online record of access applications called a disclosure log. Your original access application, my decision and documents released to you in response to your access application will be published in the ACT Health disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

#### Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman  
GPO Box 442  
CANBERRA ACT 2601

Via email: [ACTFOI@ombudsman.gov.au](mailto:ACTFOI@ombudsman.gov.au).

#### ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal  
Level 4, 1 Moore St  
GPO Box 370  
Canberra City ACT 2601  
Telephone: (02) 6207 1740

<http://www.acat.act.gov.au/>

If you have any queries concerning ACT Health's processing of your request, or would like further information, please contact the FOI Coordinator on 6205 1340 or email [HealthFOI@act.gov.au](mailto:HealthFOI@act.gov.au).

A handwritten signature in black ink, appearing to read 'Colm Mooney', with a stylized flourish at the end.

Colm Mooney

**Executive Director**

Infrastructure Management & Maintenance

29 November 2018

## FREEDOM OF INFORMATION REQUEST SCHEDULE

Please be aware that under the *Freedom of Information Act 2016*, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: <https://www.health.act.gov.au/about-our-health-system/freedom-information/disclosure-log>

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
<div style="background-color: black; width: 100px; height: 20px; margin-bottom: 5px;"></div>	<p>“... documents related to maintenance of ACT Health and Canberra Health Service buildings and facilities. Specifically seeking:</p> <ul style="list-style-type: none"> <li>• Briefings provided to the Minister for Health and Minister for Mental Health related to maintenance issues in ACT Health buildings from 1 January 2018 to 31 July 2018. This may include but is not limited to ministerial briefs, Estimates briefs and question time briefs.</li> <li>• Briefings provided to the Minister for Health and Minister for Mental Health related to maintenance issues in ACT Health and Canberra Health Service briefs from 1 September 2018 to date. This may include but is not limited to ministerial briefs, Estimates briefs, annual reports briefs and question time briefs.</li> <li>• Documents from all Work Health and Safety Committees located on the Canberra Hospital Campus from 1 July 2018 to date. This excludes the Adult Acute Mental Health Services Work and Safety Committee as I have requested documents from this Committee previously.”</li> </ul>	<p>FOI18/112</p>



Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1	1	Caveat Brief – Water Leak in Building 1 at the Canberra Hospital	25/10/2018	Full	N/A	Yes
2	2	Agenda – Tier 1 Work Health and Safety Committee – Wednesday 12 September 2018	12/09/2018	Full	N/A	Yes
3	3	Caveat Brief – TCH: Hot Water Pipe Leak to clinical area Building 8, Pain Management Unit	07/09/2018	Full	N/A	Yes
4	4-7	Agenda – Tier 2 Work Health and Safety Committee – Thursday 6 September 2018	06/09/2018	Full	N/A	Yes
5	8-10	Action Minutes Tier 2 Work, Health and Safety Committee – 6 September 2018	06/09/2018	Full	N/A	Yes
6	11-12	Advisory Note – Additional Information – Paediatric Medical Ward – Water Leaks	31/08/2018	Full	N/A	Yes
7	13	Caveat Brief – Paediatric Medical Ward – Water Leaks	24/08/2018	Full	N/A	Yes
8	14	Caveat Brief – Canberra Hospital: Air Handling Unit to Clinical Theatre 14	15/06/2018	Full	N/A	Yes

9	15-21	Action Minutes Tier 1 Wok Health & Safety Committee – 13 June 2018	13/06/2018	Full	N/A	Yes
10	22-28	Tier 1 WHS Committee Actions Arising – 13 June 2018	13/06/2018	Full	N/A	Yes
11	29-31	Actions Minutes Tier 2 Work, Health and Safety Committee – 31 May 2018	31/05/2018	Full	N/A	Yes
12	32	Caveat Brief – Centenary Hospital for Women and Children Postnatal Suites Bathroom Investigation and Remediation	17/05/2018	Full	N/A	Yes
13	33	Caveat Brief – Disruption to Dental Services at Belconnen Community Health Centre (BCHC)	29/03/2018	Full	N/A	Yes
14	34-35	T2 Work Health and Safety Committee Outstanding Action Arising Running Sheet	13/11/2017	Full	N/A	Yes
<b>Total No of Docs</b>						
14						



# CAVEAT BRIEF

**To:** Meegan Fitzharris MLA, Minister for Health and Wellbeing

**Through:** Bernadette McDonald, Chief Executive Officer, Canberra Health Services (CHS)

**Subject:** **Water Leak in Building 1 at The Canberra Hospital**

*Cleared by: Colm Mooney, Executive Director Infrastructure Management and Maintenance*

- On Friday 12 October 2018, there was a water leak in Building 1 at Canberra Hospital that occurred at around 4.18am on the incoming cold water supply pipework on Level 9 that resulted in minor flooding.
- Some water also flowed down to Level 8 and Level 7 but no clinical operations were affected nor were there any impacts on patient treatment or surgery.
- This was an isolated event that occurred when the connection of one new cold water isolation valve failed when the cold water supply was re-energised. A number of isolation valves were installed by contractors to replace ageing infrastructure and allow individual building floors to be isolated without impacting water supplies to the rest of the building.
- Water entered the corridor outside the Neurosurgery Ward 9B (in Building 1, Level 9) but did not enter the Ward. The corridor was impacted for approximately one hour during part of the clean-up operations.
- Similarly, no water entered the General Medicine Ward 8B (in Building 1, Level 8). However, water did enter the doctors' rest room (in Building 1, Level 8), but no-one was in the room at the time. Arrangements were made to close the room over the weekend to allow sufficient time for clean-up operations.
- While water damage from this event was limited, the contractor arranged for minor repairs and replacement of damaged items, such as ceiling tiles and for an external cleaner for areas that were impacted. As a precautionary measure, the contractor also arranged for an inspection of nearby lifts by the lift manufacturer that resulted in one lift removed from service over the weekend as an additional safety measure.
- To minimise any impact on hospital operations, CHS arranged for ISS, who provide general cleaning and other support services to CHS, to assist in the clean-up operations.
- The installation of new water isolation valves were part of a broader package of works being delivered as part of the Upgrading and Maintaining ACT Health Assets (UMAHA) program.
- A lesson learned workshop is planned with the contractor and relevant stakeholders to identify any changes required to reduce the risk of a similar incident occurring.
- Contractors performing these works are managed by Infrastructure Finance and Capital Works Division within the Chief Minister, Treasury and Economic Development Directorate (Treasury) on behalf of ACT Health.

Contact Officer: Colm Mooney  
 Contact Number: 620 79186  
 Date: 25 October 2018

*A caveat brief contains succinct and factual information in dot point form that is required as a matter of urgency (does not exceed one page).*

*Caveat briefs sent to the Minister's Office are coordinated via the Senior Manager, Ministerial and Government Services.*



# Agenda Tier 1 Work Health and Safety Committee

**Wednesday, 12 September 2018, 1:30 - 3:00 pm**  
**2-6 Bowes Street, Phillip – Level 2, Large Conference Room**

*We wish to acknowledge the traditional custodians of the land we are meeting on, the Ngunnawal people. We acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.*

1. **Attendance**
  - 1.1 Quorum achieved in current meeting - Yes/No
  - 1.2 Apologies
  
2. **Conflict of Interest Declaration (standing item)**
  
3. **Previous Minutes Accepted/Not Accepted**
  
4. **Actions Arising From Previous Meeting**
  
5. **Quarterly Reports from Tier 2 Health and Safety Committees**
  - 5.1 Submission of Quarterly Reports
  
6. **Running Sheets** A Campbell
  - 6.1 Staff Incident Reports Reviewed by Managers
  - 6.2 HSR's - TRAINING Status Recorded
  - 6.3 First Aiders - TRAINING Status Recorded
  
7. **Sub-Committee Reports**
  - 7.1 PSS - Workplace Health Advisory Unit (Workers Compensation) S McDonnell
  - 7.2 BSS – Security C Mooney
  - 7.3 CSS - Radiation Safety S Geoghegan
  - 7.4 WPS - Dangerous Substances Committee R Hledik
  - 7.5 Staff Health and Wellbeing S McGufficke
  
8. **Workplace Safety to Date Report** D Guthrie
  - 8.1 Notifiable Incidents to WorkSafe ACT
  - 8.2 Improvement notices Issued by WorkSafe ACT
  - 8.3 Provisional Improvement Notices (PINs) Issued by HSRs
  
9. **Other Business**
  - 9.1 Hume Health Centre – Passive Smoking Exposure T Bracher/D Guthrie
  - 9.2 Strategic Plan D Guthrie
  - 9.3 Other





**ACT**  
Government  
Health

## CAVEAT BRIEF

**To:** Meegan Fitzharris MLA, Minister for Health and Wellbeing

**Through:** Karen Doran, A/g Deputy Director-General, ACT Health

**Subject:** TCH: Hot Water Pipe Leak to clinical area Building 8, Pain Management Unit.

*Approved*  
*[Signature]*  
10/9

*Cleared by:*  
*Executive Director, Health Infrastructure Services.*

- On Thursday 6 September 2018, a smoke detector, located within the tutorial space of Building 8, Western Wing - Pain Management Unit, Canberra Hospital and Health Services (CHHS) activated and set off a fire alarm. The Western Wing area comprises of a tutorial room, four clinical consultation rooms, two group consumer/staff education rooms, a consumer exercise area and exercise equipment.
- Health Infrastructure Services, Facilities Management (FM) and a Fire Services contractor immediately attended and confirmed that the cause of the smoke detector activation was water egress into the smoke detector.
- Further investigation found that an underground hot water pipe that supplies the heating radiators within the building had ruptured within the underground service duct. Steam created by the ruptured pipe travelled along the service duct and into the building via wall cavities and ceiling spaces.
- It is not clear how long the rupture has been active; the water leak and the heating to the affected area has been isolated by FM.
- Damage to the tutorial room has been identified due to moisture having accessed the ceiling space and wall cavity with possible mould contamination and water egress to adjoining areas within the western wing. Concentrations of mould growth is evident within the ceiling space.
- The western wing of Building 8 has been closed while the level and extent of mould contamination within the tutorial room is examined. The eastern side of the building has remained operational, as it is isolated from the western side of the building.
- A specialised environmental monitoring company has been engaged to provide air and surface sampling within all areas of the building (including the eastern wing) and results will be returned from the contractor by 17 September 2018.
- Full investigation of the extent of the damage and required rectification will now commence.
- Planned clinical activities have been relocated for the week commencing 10 September 2018 with no impact on patient consultations.
- It is not likely that the western wing will be reopened for several weeks and relocation of services will be required for that period. Discussion of alternative accommodation for services provided in the western wing Building 8 have commenced with CHHS.

Contact Officer: Colm Mooney  
Contact Number: 620 79186  
Date: 7 September 2018

*A caveat brief contains succinct and factual information in dot point form that is required as a matter of urgency (does not exceed one page).*

*Caveat briefs sent to the Minister's Office are coordinated via the Senior Manager, Ministerial and Government Services.*



# Agenda

## Tier 2 Work Health Safety Committee (WHSC)

**DATE TIME:** Thursday September 6, 2018  
**VENUE:** The Canberra Hospital, HIS Conference Room

Core Membership		
Colm Mooney	Executive Director	Health Infrastructure Services (HIS)
Dan Guthrie	Director	Workplace Safety
John Kilday	Manager	Facilities Management (FM) -
Sophie Gray	Director	Infrastructure, Finance and Capital Works (IFCW)
Shannon Keevers	Safety Officer	HIS
Rebecca Wells	Health and Safety Representative (HSR)	HIS
Brad Falkenberg / Chris Bryant	HSR	FM
Irene Yong	HSR	IFCW
Louellyn Templeman	Secretariat	HIS

### AGENDA

Serial / Time	Item	Paper(s)	Lead/ Presenter
1.	<b>Welcome, Acknowledgment of Country, Attendance and Apologies</b>		Chair
2.	<b>Previous Minutes for endorsement – 31 May 2018</b>		Chair
3.	<b>Actions Arising</b>		Chair
4.	<b>Program and HSR Reports</b> a. HIS / IFCW: Building 3 & Bowes St b. FM: Building 1 c. HSR status d. Health and Safety Issues	Verbal update B1 Inspection report	RW BF / CB RW / BF / CB SK
5.	<b>Safety Accident Incident Report (SAIR)</b>	SAIR report	SK
6.	<b>Fleet Safety Checklist</b>	HIS: verbal update // FM: attached	JH / BF / CB
7.	<b>Other Business</b>		All



No	Action Item	Person(s) Responsible	From Meeting	Due	Remarks
18/01	Updating FM Ladder Work Order template	Shannon Keevers / Scott Harding	31 May 2018	Next meeting	<ul style="list-style-type: none"> <li>Louise Medlin currently updating this work order form, Scott Harding to follow up. (Risk assessment prompt on form – due diligence)</li> <li><b>6/9/2018 Still open</b></li> </ul>
18/03	What 3 cars do HIS now have? Update checklist	Louellyn Templeman	31 May 2018	Next meeting	<ul style="list-style-type: none"> <li><b>31/5/2018</b> Louellyn to liaise with Scott Harding regards fleet cars for HIS and checklist</li> <li><b>6/9/2018</b> Ensure correct checklist for next meeting – Louellyn to liaise with Scott</li> </ul>
17/28	Send governance sheet to Secretariat showing first aiders / emergency wardens in FM	John Kilday	13 November	28 November 17	<ul style="list-style-type: none"> <li><b>31/5/2018</b> This is yet to be done – John Kilday to action</li> <li><b>6/9/2018</b> – Still open. Scott Harding to action</li> </ul>
17/37	Update registers, reports and other documents in contractor sign in area	Shannon Keevers	13 November	February 18	<ul style="list-style-type: none"> <li><b>31/5/2018</b> This has been put on hold, but to be left open. Shannon waiting on the implementation of the RAPID system which will affect this. To be updated at next meeting.</li> <li><b>6/9/2018 CLOSED</b> – Shannon advises that the Rapid Contractor System coming in November will make this obsolete</li> </ul>
17/34	Rebecca to schedule bi-annual first aid restocking meeting (first one early December) for HSRs and First Aiders	Rebecca Wells	13 November	28 November 17	<ul style="list-style-type: none"> <li><b>31/5/2018</b> Rebecca to follow up on this, and Shannon will check with Daniel Guthrie regarding getting these automatically re-stocked through Parasol / St Johns every 6 months.</li> </ul>

17/33	FM HSR to send through FM HSR training certificate and update HSR register on system	Chris Bryant / Brad Falkenberg	13 November	28 November 17	<ul style="list-style-type: none"> <li>6/9/2018 Shannon advises they have been restocked. Another restocking has been scheduled for December <b>CLOSED</b></li> <li>31/5/2018 Shannon advises not sure this has happened.. Shannon to check and send details to Louellyn</li> <li>6/9/2018 Shannon advised this has been done - <b>closed</b></li> </ul>
17/31	Let Shannon Keevers know who is responsible for testing and tagging Multi Function Devices (MFD)	Louellyn Templeman	13 November	February 18	<ul style="list-style-type: none"> <li>31/5/2018 Louellyn to check with All Jordan / SSICT to ascertain who does this and advise Shannon</li> <li>5/6/2018 SSICT has got back to Louellyn and advised that Testing and Tagging is a Facilities job, and to log it "through something called MainNet?"</li> <li>1/6/2018 Louellyn emailed Shared Services – awaiting response</li> <li>6/9/2018 – when this is required send SSICT a request for service from Ricoh. <b>Closed</b></li> </ul>
17/30	Send proof of updated signage on wall outside B3L1 HIS area to Sophie Gray	Shannon Keevers	13 November	February 18	<ul style="list-style-type: none"> <li>31/5/2018 Shannon advised this was on hold until new signage specs are received – must be Building 3 colours. Colm requested Shannon reactivate this</li> <li>6/9/2018 – <b>Done. Closed</b></li> </ul>
16/08	Formally request footpath upgrade with TCCS for gazetted path between Gilmore Rd and car park	Scott Harding/ John Kilday Shannon Keevers	10 November 16	February 18	<ul style="list-style-type: none"> <li>16/11 – SK to add to risk register <ul style="list-style-type: none"> <li>John Kilday/Scott Harding to send reminder to TCCS</li> </ul> </li> <li>23/8 – changed responsible person from Andrew Steele to Scott Harding</li> </ul>

18/02	Approval to Use Private Vehicle for Official Use forms – Louellyn to locate and email to Leadership group	Louellyn Templeman	31 May 2018	5/6/2018	<ul style="list-style-type: none"> <li>• 31/5/2018 Not complete – Shannon advised still ongoing</li> <li>• 6/9/2018 Shannon advises this is now complete - <b>CLOSED</b></li> <li>• 1/6 Louellyn located form and emailed to leadership group <b>CLOSED</b></li> </ul>
-------	---	--------------------	-------------	----------	--



## Action Minutes Tier 2 Work, Health and Safety Committee

**Meeting Date:** September 6 2018

**Agenda Item No:** 2

---

**Subject:** Action Minutes of Tier 2 Work, Health and Safety Committee - Meeting of 6 September 2018

---

**Source:** Louellyn Templeman, Personal Assistant, Health Infrastructure Services

---

**Purpose/comments:** For endorsement



**Tier 2 Work, Health and Safety Committee  
6 September 2018  
ACTION MINUTES**

Attendees	
Colm Mooney	Executive Director, HIS (Chair)
Shannon Keevers	Safety and Risk Manager, HIS
Sophie Gray	Director, Infrastructure, Finance and Capital Works (IFCW)
James Walsh	Director, Minor Works and Plant Equipment (HIS)
Scott Harding	Manager, Facilities Management (proxy for Chris Tarbuck)
Rebecca Wells	Health and Safety Representative (HSR), HIS
Chris Bryant	Deputy HSR, FM
Louellyn Templeman	Secretariat

Apologies	
Daniel Guthrie	

Agenda Attendees	
N/A	

Serial Time	Item	Paper(s)
1.	Welcome, Acknowledgement of Country, Attendance and Apologies	
2.	Previous Minutes for endorsement	Minutes of 31 May 2018 accepted
3.	Actions Arising	Actions Arising running sheet updated
4.	<p><b>Program and HSR Reports</b></p> <p>a. HIS / IFCW: Building 3 and Bowes St</p> <p>b. Building 1 (FM)</p> <p>c. HSR Status</p> <p>d. Health and Safety Issues</p>	<p>Verbal update – Rebecca Wells advised that lights were out in the offices of Building 3, and that a MyFM request had been put in to get them fixed. Rebecca also advised that she and Irene Yong had tidied the chairs in the HIS Conference room as they were positioned in a way that they had become an OH &amp; S risk</p> <p>Bowes Street – leaking possibly fixed and tile replaced 6/9/2018 (until something happens again)</p> <p>No issues</p> <p>All HSR's are due to attend a refresher course, and it was discussed that they should book themselves in. Rebecca Wells doing her refresher in November 2018</p> <p>None raised</p>
5.	Feedback from Tier 1 Meeting	Nothing reported

Serial Time	Item	Paper(s)
6.	Safety Accident Incident Report	Shannon Keevers advised all SAIR's completed and none open.
7.	Fleet Safety Checklist	HIS – 3 x Colorado Utes undamaged.
8.	Other Business	No other business required discussion
9.	Next meeting	TBC





UNCLASSIFIED - FOR OFFICIAL PURPOSES ONLY

**ADVISORY NOTE**

Minister for Health and Wellbeing

TRIM Ref: MIN18/1369	Additional Information – Paediatric Medical Ward – Water Leaks
Critical Date	31 August 2018
Interim Director-General	Michael De'Ath ..... <i>[Signature]</i> ..... 3.9.18

**Minister's question/s:**

1. Further information on the cause of the leak – if known.
  - o Is this similar to other known issues in Building 11?
2. Were any patients moved as a result of these works?
3. With the closure of three beds, what availability remains in the ward for surge capacity (i.e. how many beds are available)?
4. What is known of the plan to investigate all bathrooms in Building 11?
5. Is there an estimate of costs to remedy these issues?

**ACT Health's response:**

1. At this stage the exact cause of the leak is not known, however some of the issues appear to be of a similar nature to other known issues in Building 11. The investigative works underway in the two impacted rooms, which involves exposing the pipework, will identify the exact issues. A further update will be available later this week.
2. Yes. The Paediatric Medical Ward was relocated to the Paediatric Surge Ward.
3. The Surge capacity has been reduced from 12 beds to 9 beds. Due to a very low flu season this winter there has not been a requirement for more than 8 Paediatric Surge beds.
4. Health Infrastructure Services are currently developing a plan to investigate all bathrooms within Building 11. A further update will be available later this week.
5. An estimate of costs is being developed along with the plan, however are not known at this stage.

Noted / Please Discuss

..... *[Signature]* .....

Meegan Fitzharris MLA  
Minister for Health and Wellbeing

3.9.18

UNCLASSIFIED

Signatory Name:	Karen Doran	Phone:	52248
Action Officer:	Sallyanne Pini	Phone:	54689



## CAVEAT BRIEF

**To:** Meegan Fitzharris MLA, Minister for Health and Wellbeing

**Through:** Michael De'Ath, Interim Director-General, ACT Health ..... / ... / ...

**Subject:** **Paediatric Medical Ward – Water Leaks**

*Cleared by: Karen Doran, A/g Deputy Director-General, Corporate*

- Water leaks in the Paediatric Medical Ward of the Centenary Hospital for Women and Children (Building 11) were identified on 3 August 2018 resulting in two rooms (three beds) being removed from service.
- These Rooms are 17 (beds 16 and 17) and 18 (bed 18).
- Water supply to the impacted rooms has been isolated pending identification of the root cause.
- Investigative works involve demolition, causing the impacted rooms to be offline for an extended period of time.
- ACT Health Facilities Management (FM) are currently implementing a remediation plan in consultation with the impacted clinical areas using existing on site contractor resources to expedite the required works.
- FM are utilising the existing contractor resources currently working on unrelated water leak remediation works in the Birthing Suite area.
- Additional resources are being mobilised to rectify the water leak issues in Rooms 17 and 18 to avoid impacting programmed delivery of the birthing suite remediation program.
- The Birthing Suite water leak issue is linked to a known deficiency with the installation of hydraulic fittings. The responsibility for rectification works is currently being considered by the ACT Government Solicitor in parallel with current remediation work.
- Given the frequency of occurrence of water leaks in Building 11, FM are formulating a plan to investigate all bathrooms within Building 11 to provide assurance of no further issues in the building or to implement a rectification plan to address potential systemic hydraulic systems issues.
- A further update on the cause of the leaks in Building 11 Rooms 17 and 18 will be advised after completion of the investigative works which are expected to be complete by Friday, 31 August 2018.
- The costs of remediation works for rooms 17 and 18 will be covered out of the FM repairs and maintenance budget in parallel with the preparation of an insurance claim.
- While the three beds are closed, the ward remains available for surge capacity.

Contact Officer: Colm Mooney  
 Contact Number: 620 79186  
 Date: 24 August 2018

MIN/18/985



**ACT**  
Government  
Health

## CAVEAT BRIEF

**To:** Meegan Fitzharris MLA, Minister for Health and Wellbeing *alpha* 18/6/18

**Through:** Michael De'Ath, Interim Director-General, ACT Health

**Subject:** Canberra Hospital: AIR HANDLING UNIT TO CLINICAL THEATRE 14

*Cleared by: Karen Doran, Deputy Director-General, Corporate*

- As part of planned annual maintenance checks on 13 June 2018 involving High Efficiency Particulate Air (HEPA) filters in Building 12 at The Canberra Hospital, a mould like substance was detected on a filter servicing Theatre 14 (Neuro Suite Operating Theatre).
- As a precaution in view of patient safety, Theatre 14 was closed on 14 June 2018, to facilitate swab testing of the substance detected by a specialist environmental consultant, Robsons Environmental, and to allow room cleaning, air handling unit cleaning and HEPA filter replacement.
- The substance on the filter has been sampled and forwarded to microbiology for testing. The test results are due to be returned by microbiology on 25 June 2018.
- Following completion of the remediation works, ongoing management of Theatre 14 has been returned to Clinical Operations.
- Theatre 14 will remain closed for at least five days while sampling and identification of any potential spore or organism is completed.
- All other theatres remain operational during this time and no theatre cases are expected to be postponed as a result of these works.
- Facilities Management are reviewing the current applicable maintenance procedures to facilitate improved monitoring and early detection of a further reoccurrence.

Contact Officer: Colm Mooney  
 Contact Number: 620 79186  
 Date: 15 June 2018

## Agenda Item No: 3



## Action Minutes Tier 1 Work Health & Safety Committee

Meeting Date: 13 June 2018

---

**Subject:** Minutes of Tier 1 WHS Committee  
Version 1

---

**Secretariat:** Cassandra Bahr, Workplace Safety

---



## MINUTES Tier 1 Work Health and Safety Committee Meeting 13 June 2018

### 1. Attendance and Apologies

Attendance	Name	Position	Status
Chair	Chris Bone	Deputy Director-General – Canberra Hospital and Health Services	Attended
Workplace Safety	Daniel Guthrie	Director, Workplace Safety	Attended
Secretariat	Cassandra Bahr	Safety Advisor	Attended

Division / Branch	Management Rep Name	Status	HSR/Employee Representative Name	Status
Office of the D-G	Vanessa Dal Molin	Apology	Naveen Wijemanne	Attended
CHHS	Chris Bone	Attended	NO ATTENDEE	
Strategic Finance	Trevor Vivian	Attended	NO ATTENDEE	
Population Health	Conrad Barr	Attended	NO ATTENDEE	
CACHS	Katherine Wakefield	Attended	Elise Field	Apology
Critical Care	Narelle Boyd	Attended	Belinda Lloyd	Attended
Clinical Support Services	Lisa Gilmore Proxy: Sean Geoghegan	Attended	Vincent Lukose	Attended
Chief of Clinical Operations	Mark Dykgraaf	Apology	NO ATTENDEE	
Office of the Chief Nurse	Lesley Thomson	Apology	Nicole Jhonston	Apology
Medicine	Sam Lazarus	Apology	Maxine Wilde	Attended
	Jo Morris	Attended	Veronica Clyde	Apology
MHJHADS	Katrina Bracher	Attended	Denise Meyboom	Attended
Pathology	Tracey Farrar	Attended	Amy Davies	Attended
RACC	Michael Keen	Attended	NO ATTENDEE	
Surgery & Oral Health	Daniel Wood	Apology	Emma Riley	Apology
Women Youth & Children	Elizabeth Chatham	Attended	NO ATTENDEE	
Director Medical Administration	Jeff Fletcher	Attended	NO ATTENDEE	
Director Innovation	Bruce Shadbolt	Apology	Bee Souvannaphong	Attended
Medical Imaging	Mark Duggan	Attended	Melissa Devries	Attended
Chief Allied Health Officer	NO ATTENDEE		NO ATTENDEE	
Audit and Risk	NO ATTENDEE		Geetha Mayoaran	Apology
Workplace Safety	Simon Cavanagh	Attended	Anita Campbell	Attended
Clinical Safety and Quality	Heather Needham	Apology	Jane Temperley	Apology
People and Culture	Janine Hammat	Attended	Sue-Ella McGufficke	Apology
			Terri Conley	Attended
Business Support Services	Chris Mooney	Attended	Melissa Dengate	Attended
	Tim Roach	Attended		
Digital Solutions	Peter McNiven	Attended	Jamie Isaacson	Attended
Performance, Reporting and Data	Lynton Norris	Apology	NO ATTENDEE	
Policy & Stakeholder Relations	Patrick Henry	Apology	NO ATTENDEE	
Health Infrastructure Services	Colm Mooney	Attended	NO ATTENDEE	

#### Visitors and Others

Branch/Division	Name	Purpose
Radiation Safety	Sean Geoghegan	Presentation of Report
Business Support Services	Martin Van Lith	Presentation of Report
Business Support Services	Michael Warylo	Comment on action
Workplace Safety	Lizzy Smith	Observer
Workplace Safety	Peta Mercieca Lima	Observer

#### 1.2 Apologies (in addition to those specified above)

Marg McLeod	Leslie Thomson	Girish Talaulikar
Daniel Wood	Rob Swain	Elise Field



Sue-ella McGufficke	Heather Needham	Rosemary Kennedy
---------------------	-----------------	------------------

### Quorum for Work Health and Safety Committee

Quorum : NOT MET	Managers: 17	HSRs: 11	Visitors: 4
------------------	--------------	----------	-------------

Meeting opened 1:40 pm

#### 2. Conflict of Interest

2.1 Nil.

#### 3. Previous Minutes Accepted

- Previous minutes accepted with no changes.

#### 4. Actions Arising from Previous Meeting

- Refer to separate attachment.

#### 5.1 Tier 2 Work Safety Committees - Reports - Reported by exception.

- No items for escalation except for MHJHADS who are raising the Hume Health Centre passive smoking issue in agenda item 9.1.

#### 6. Running Sheets

#### 6.1 Percentage of Staff Incident Reports Reviewed by Managers 1<sup>st</sup> Quarter 2018 – Anita Campbell

Anita Campbell spoke to the report and highlighted the following.

- This report measures the number of reported Staff Incident Reports that have had the investigation and controls appropriately reviewed and completed by the Manager.
- In the 1<sup>st</sup> Quarter ACT Health achieved a Staff Incident Manager completion rate of 90%, tracking closely to last quarter which was 92% (target is 100%).
- Managers are encouraged to contact the Workplace Safety team if they are having trouble completing incidents or if they are having RiskMan access issues.
- The Chair requested that areas not at 100% to take back to areas to see what is delaying completion.

**Action:** Division that do not have a 100% completion rate of Staff Incident reports reviewed by Managers are to take back to areas to determine what the delay in completion is.

#### 6.2 Health and Safety Representative (HSR) – Overdue Training Status Recorded

Anita Campbell spoke to the report and highlighted the following.

- This report indicates the outstanding HSR training statistics by Division.
- Currently there are 317 HSRs, of these 63 are overdue for training (20%), this is tracking consistently to the last quarter rate of 19%.
- The committee was asked to note that all HSR training is booked through Capabiliti.
- There have been instances of HSR's booking externally recently.
- ACT Health has worked with the training provider to develop ACT Health specific training at a reduced cost. This training uses our documentation and specific ACT Health examples.
- Training calendars are available.
- The Chair requested that Executive Directors check that the correct staff are on the HSR list and that it is up to date to help reduce this number.

**Action:** Executive Directors to check that correct staff are listed on the HSR list and that the list is up to date.

### 6.3 First Aid Officers – Overdue Training Status Recorded – Anita Campbell

Anita Campbell spoke to the report and highlighted the following:

- This report indicates the outstanding First Aid Officers training statistics by Division.
- Currently there are 83 First Aid Officers and of these, 6 (7%) of First Aid Officers are overdue for training, a decrease compared to 16% in the previous quarter.
- Well done to First Aid Officers for the large decrease in these numbers over the year.
- First Aid Officer training is booked by the work area externally. This training cannot be booked in Capabiliti.

## 7. Sub-Committee Reports

### 7.1 Workplace Health Advisory Unit – Chris Millroy

Chris Millroy spoke to the report and highlighted the following.

- There has been a reduction in the number of work ready staff not placed into positions from 6 in October 2017 to 0 in April 2018.
- There are ongoing discussions at an executive level and the unit have begun conversations with other Directorates over short term, non-ongoing placement opportunities.
- The number of Workers Compensation claims accepted is lower compared to this time last year.
- There was an 8% reduction in Workers compensation premium compared to last year.
- Early intervention and identification of suitable duties remains an issue for all managers.

### 7.2 Security Committee Report – Chris Mooney

Tim Roach spoke to the report and highlighted the following:

- Nothing adverse to raise.
- Increase trend in smoking cautions.
- Code Black notifications remained static.

### 7.3 Radiation Safety Committee Report - Sean Geoghegan

Sean Geoghegan spoke to the report and highlighted the following.

- There were 3 incidents in total for the quarter. All incidents were classed as clinical and they are in the process of being addressed.
- Methods for mitigation of the risk of lack of engineering support is being pursued.
- In response to a previous action on lessons learnt from patient radiation events, human factors that evolved indicated that misapplication of vials could lead to a repeat of these incidents. There has been a procurement process for a software scanning solution which reduces the likelihood of humanised misidentification of vials. This will significantly reduce those risks.
- There has been a failure to meet a scheduled testing regime due to an injured staff member however, testing has now been re-started.
- Radiation protection garments are being replaced, new suppliers have been sourced and the garments will be arriving in June.

### 7.4 Dangerous Substances Safety Management Committee – Simon Cavanagh

Simon Cavanagh spoke to the report and highlighted the following:

- The Dangerous Substances (DS) Legislation together with the Work Health and Safety Legislation was updated in the ACT legislative Assembly in 29 March 2018.
- Workplace Safety have provided presentations on the more significant changes to the Dangerous Substances Management Committee and also to Supply in Mitchell in May 2018.
- There were x10 incidents for Group 6 – Chemicals and Other Substances reported in the First Quarter 2018. These incidents pertained mainly to splashes and potential exposures.

- WPS is advised that ACT Health's PICs system (the current Dangerous Substances Management tool) is to be upgraded. Discussions are currently in process with BSS to determine the extent of the impact on the management of Dangerous Substances.

## 7.5 Staff Health and Wellbeing – Daniel Guthrie

Sue-Ella McGufficke was an apology so Daniel Guthrie spoke to the report provided an update for Staff Health and Wellbeing:

- A sign is now displayed on the door of each of the Wellbeing rooms in Bowes Street advising of the shared function of the room, first aid, breastfeeding and wellbeing, with first aid taking priority.
- The Smoke Free Environment Policy and Managing Nicotine Dependence Procedure has been approved by the Policy Advisory Committee. The revised procedure contains the new Smoking Cessation Pathway, face to face training on the Pathway has commenced and is available through Capability.
- The *MyHealth* Expo was held on 28 March 2018 at the Canberra Hospital, 500 staff attended.
- The *MyHealth* mini Expos will continue to held at 11 major health locations, including the Alexander Machonachie Centre and Dhulwa.
- Staff attending the expos go into the draw to win a 1 hour massage, 2 movie tickets or a *MyHealth* promotional products pack.

## 8 Workplace Safety Quarterly Report – Daniel Guthrie

Daniel Guthrie highlighted the following:

Staff incidents are tracking slightly lower than in 2017. Averaging around 121 incidents per month.

Flu Vaccination Staff Program:

- The Occupational Medicine Unit (OMU) ordered 15% more stock than last year and have gone through the majority of stock.
- There was a large demand and the amount of flu vaccines given out exceeded last year's total number given to staff in 3 weeks.
- OMU have quarantined the remaining stock, approximately 350, and in discussions with Population health have provided the remaining vaccines to Neonatal and Maternity, ICU and Oncology and Hematology. OMU has completed the mobile clinics to these areas.
- A further limited number of vaccines are available and clinics are being set up for ED, General Medicine and the Respiratory Ward.
- OMU hope to get more stock and should be available mid-July.
- A question was asked regarding Immuno-suppressed and it was confirmed that vulnerable groups that are identified are able to access a free vaccine from their GP. A message will be sent out reminding staff of this.

Regarding a previous action that asked why there was an increase of Occupational Violence and where these increases were occurring was addressed.

- The increase was occurring in the divisions of MHJHADS, RACC, Critical Care and Medicine.
- The key causal factors include:
  - Patient mix
  - Increase of services
  - Change in patient cohort
  - Single consumers and patient with repeat incidents
  - Increase in training and awareness provided by WPS staff to educate staff to report onto Staff register and not Clinical register.
- A Pipeline is being introduced, this will allow for incidents involving occupational violence that are reported in the Clinical Incident system to be pipelined to the Staff Incidents register.
- The incident will already be created and staff and managers will need to fill in some extra fields. More information will be given before the pipeline comes into effect.
- WPS will be commencing an Occupational Violence project, step one will be consulting with high risk areas and staff.



- There was a comment from a committee member regarding the Emergency Department (ED) Occupational Violence project and Daniel Guthrie confirmed that WPS will consult with ED as well.

**Action:** WPS will report back the initial results of the Occupational Violence project at the next Tier 1 meeting.

8.1 Notifiable Incidents - Nil

8.2 Improvement Notices Issued by WorkSafe - Nil

8.3 Provisional Improvement Notices – Nil

## 9. OTHER BUSINESS

### 9.1 Hume Health Centre – Passive Smoking Exposure

Katrina Bracher and Daniel Guthrie provided the following information:

- Tabled a submission regarding ongoing passive smoking at the Alexander Maconochie Centre (AMC) Health Centre and the ACHS Recommendations Not Met report.
- A joint Risk Assessment was undertaken by WPS, MHJHADS together with ACT Corrective Services to assess the risks at the AMC and implement control measures.
- The issue is very complicated and there is not a simple answer. The issue was highlighted by a recommendation from the ACHS Accreditation Survey but has since been withdrawn, however it is a serious staff safety issue.
- This is a cross government initiative that needs a solution, it can't be fixed by ACT Health alone.
- The centre have implemented good control measures for the AMC Health Centre but the satellite service still carries a high risk to staff as they are going into accommodation areas and enclosed spaces twice a day for their medication rounds.
- The possibility of fixing the air conditioning was explored, however it was not an option.
- Katrina has met with corrections staff and has recommended that the AMC become partially smoke free. Corrections staff have said they will make a concerted effort to enforce designated smoking areas away from communal areas and they will also look to move toward nicotine replacement and other therapeutic measures. Corrections can provide a report to this committee for the next meeting.
- The report included 3 recommendations:
  - Note the information
  - Formally seek support from JACS regarding a commitment to a smoke free prison (noting the required long lead time on implementation); and
  - Assist in determining the responsible officers for the risk mitigation strategies documented in the Risk Assessments.
  - The committee agreed with all three recommendations.
- It was agreed by the committee that Chris Bone would prepare a letter from the interim Director-General (DG) to the DG of JACS recommending that they move to a smoke free environment.
- It was determined that JACS are the responsible officers to implement controls and the Risk Assessment would be included with the letter so that the recommendations are clear.

**Action:** Katrina Bracher to table Corrections report on Passive Smoking at the next Tier 1 WHS meeting.

**Action:** Chris Bone to prepare correspondence from the interim Director-General (DG) ACT Health to the DG Justice and Community Safety (JACS) recommending that they move to a smoke free environment and include the Risk Assessments as an attachment.

### 9.2 Review of Terms of Reference

Daniel Guthrie spoke to the update of the Terms of Reference (TOR):

- The draft Tier 1 WHS committee TOR was tabled to the committee for endorsement.
- The changes made were highlighted, the TOR now aligns to the Executive Director's Committee (EDC) TOR.
- This will need to be updated again once the changes to the organisation re-structure come into effect however in the interim, this document needs to be endorsed.
- There was a recommendation that this be signed by the ACT Health Director-General (DG) as it is a Tier 1 committee.

**Action:** Tier 1 WHS Committee TOR to be signed by the Interim DG.

### 9.3 Other

- Daniel Guthrie raised changes to the Riskman email alerts. These email alerts will now have more information and a table with a summary of the incident so that it is easier for managers to identify the more serious incidents without having to click on a link. Welcome any feedback when these changes come into effect.

**Meeting Closed – 2:34pm**

**Next Meeting**                    **Wednesday 12 September 2018, 1:30pm – 3:00pm**  
Level 2 Conference Room  
2 – 4 Bowes Street, Phillip ACT

4. Tier 1 WHS Committee Actions Arising  
13 June 2018

Meeting Date	Action	Responsible Staff	Timeframe	Status	Status/Progress
13 June 18	<p><b>Staff Incident Reports Reviewed by Managers</b></p> <p>Action: Division that do not have a 100% completion rate of Staff Incident reports reviewed by Managers are to take back to areas to determine what the delay in completion is.</p>	All	12 Sept 2018	Ongoing	
13 June 18	<p><b>Health and Safety Representative (HSR) – Overdue Training Status</b></p> <p>Action: Executive Directors to check that correct staff are listed on the HSR list and that the list is up to date.</p>	All	12 Sept 2018	Ongoing	
13 June 18	<p><b>Occupational Violence Project</b></p> <p>Action: WPS will report back the initial results of the Occupational Violence project at the next Tier 1 meeting.</p>	WPS	12 Sept 2018	Ongoing	
13 June 18	<p><b>Passive Smoking at AMC</b></p> <p>Action: Katrina Bracher to table Corrections report on Passive Smoking at the next Tier 1 WHS meeting.</p>	Katrina Bracher	12 Sept 2018	Ongoing	



13 June 18	<p><b>Passive Smoking at AMC</b></p> <p>Action: Chris Bone to prepare correspondence from the interim DG ACT Health to the Director-General of Justice and Community Safety (JACS) recommending that they move to a smoke free environment and include the Risk Assessments as an attachment.</p>	Chris Bone	12 Sept 2018	Ongoing	
13 June 18	<p><b>WHS Tier 1 Committee TOR</b></p> <p>Action: Tier 1 WHS Committee TOR to be signed by the Interim DG.</p>	WPS	12 Sept 2018	Ongoing	
14 March 18	<p><b>Passive Smoking at AMC</b></p> <p>ACTION - Daniel Guthrie, Katrina Bracher and Chris Bone will discuss the recent risk assessment for passive smoking at the AMC and recommended actions and report back to the committee at the next meeting.</p>	Daniel Guthrie/ Katrina Bracher/ Chris Bone	13/06/18	Ongoing	
14 March 18	<p><b>WHS Strategic Plan</b></p> <p>ACTION - Draft WHS Strategic Plan to be sent out to committee for input. Daniel Guthrie to consult with EDs to gain input in shaping the final version of the Strategic Plan.</p>	WPS	13/06/18	Ongoing	13/06/18 – Draft Strategic Plan has been circulated to Executive for comment. Draft WHS Strategic Plan will now be circulated to committee members for comment. Organisational restructure will need to be considered in respect of the approval of the final plan.

6 Sept 17	<p><b>Autoclave steam production issue</b></p> <p><b>ACTION</b> – Colm Mooney to provide the committee with a progress update at the next meeting.</p>	Colm Mooney	14/03/18	<p>Ongoing</p> <p>13/06/18 – Work scheduled for the end of June 2018. Should be working by July 2018.</p> <p>14/03/18 - Level 4 works completion date revised from end of March 2018 to May 2018. Level 0 works completion date to be confirmed after installation of new electrical switchboard in B10 scheduled for completion in June 2019. In the interim, level 0 steam requirements will be provided by existing b1 steam generation plant.</p> <p>7/12/17 – Scheduled for completion February 2018. Currently there is additional monitoring in place until this work can be completed.</p> <p>13/11/17 – Autoclave ordered, due late December-early January. Engagement of head contractor approved by delegate.</p> <p>6/09/17 – Funding has been approved, finalised specification. Need to engage a contractor. Hope to complete by the end of this year.</p> <p>7/3/2017 – An external report by Shaw’s Building Group was conducted investigating the steam and HVAC issue. The report has been provided to Health Infrastructure Services (HIS) to establishing a plan for a permanent solution to both the steam and HVAC issues.</p>
-----------	--	-------------	----------	--

<p>6 Sept 17</p>	<p><b>Building 10 Air conditioning issues</b></p> <p><b>ACTION</b> –Colm Mooney to provide the committee with a progress update at the next meeting.</p>	<p>Colm Mooney</p>	<p>14/03/18</p>	<p>Ongoing</p>	<p>13/06/18 – Work scheduled for the end of June 2018. Should be working by July 2018.</p> <p>14/03/18 – Project completion revised from end of March 2018 to end of June 2018. Delays incurred associated with shutdown planning for associated project works.</p> <p>01/12/17 – Due for completion in March 2018. Temporary measures in place including de-humidifiers and portable Air conditioners.</p> <p>13/11/17 - Engagement of head contractor approved by delegate. Engagement of subcontractors for works on Level 2 expected mid-November. Further design required for Level 0 works.</p> <p>6/09/17 - Linked into the action above – all the same contractor. Orders have been put into the supplier to complete.</p> <p>7/3/2017 - Interim mitigation occurred, long term solution to be incorporated in the steam and HVAC plan mentioned above.</p>
<p><b>ACTIONS COMPLETED AND CLOSED</b></p>					



14 March 18	<b>Dietpas confidentiality breach</b> ACTION - WPS to follow up WYC breach of confidentiality from DietPas with Peter O'Halloran	WPS	13/06/18	Completed	13/6/18 – Peter McNiven clarified the process, if a patient wishes to remain anonymous a flag/alert is added to their ACTPAS file, this does not create an anonymous record. The process has its limitation and staff need to practice confidentiality.
14 March 18	<b>Parking and walking distance for injured patients</b> ACTION - Rosemary Kennedy and Daniel Wood to look into disability parking issues and education to minimise walking distance for injured patients and report back to next meeting.	Rosemary Kennedy/Daniel Wood	13/06/18	Completed	13/6/18 – Michael Warylo updated the committee, the courtesy bus is under review particularly with promotion. Continuing to work with the Consumer Handouts Committee to develop brochures which should be available in a month or so. Additional posters are also being developed. Continuing to work with the Health Care Consumers Association in relation to mobility parking and more broadly ACT Health are participating in the whole of Government wide mobility parking review.
14 March 18	<b>Radiation Safety Committee Report</b> ACTION - Report back to the committee on the lessons and learnings gained from radiation incidents and actions taken to mitigate risks.	Sean Geoghegan	13/06/18	Completed	5/6/18 – Section added to item 7.3 report detailing lessons learnt - Complete
14 March 18	<b>Globally Harmonised System (GHS) of Labelling</b> ACTION - WPS to provide information on the Globally Harmonised System for Classification and Labelling (GHS) to allow implementation at the local level. ACTION - Organise gap analysis with head of Supply Services regarding the new Globally Harmonised	WPS Rosemary Kennedy	13/06/18	Completed	30/05/18 – Completed – Information sheet sent out with minutes. 13/06/18 – Ongoing gap analysis is being undertaken. Advice has been given to companies that ACT Health will not be accepting old labels. A poster has been displayed regarding training and



	System for Classification and Labelling (GHS) and report back at next meeting.				regular walk-arounds to identify non-compliant labels are in place. WPS have been providing training sessions and is currently ongoing. The committee agreed to remove this action as the Executive Director of BSS will have oversight of the recommendations from the Gap Analysis.
14 March 18	<b>Occupational Violence Data</b> ACTION - WPS to provide further analysis of data to determine what is causing the spike in occupational violence data.	WPS	13/06/18	Completed	13/06/18 – Daniel Guthrie spoke to analysis of data. 4 highest Divisions are MUHADS, RACC, Critical Care and Medicine. Key causal factors identified included patient mix, increase in services, change in patient cohort, single consumer with repeated incidents or incidents affecting multiple staff members and an increase in training and awareness by Workplace Safety. Workplace Safety are conducting a project on occupational violence and will consult with the higher risk areas as part of this project.  30/05/18 – WPS have looked into data trends and will discuss at meeting.
14 March 18	<b>Early Intervention Physiotherapy Data Analysis</b> ACTION - WPS to provide further analysis to determine the number of physiotherapy clinical appointments from repeat visits/new appointments.	WPS	13/06/18	Completed	30/05/18 – Completed - This information is included in item 8 report. As discussed at the last meeting approximately 1 in 8 ACT Health employees attend the Early Intervention clinical each year. It has been confirmed that these statistics are not inclusive of repeat visits/appointments.

14 March 18	<p><b>Tier 2 WHS Committee Terms of Reference</b></p> <p>ACTION - WPS to distribute Tier 2 WHS Committee Terms of Reference to committees.</p> <p>ACTION - Tier 1 WHS Committee Terms of Reference to be reviewed and presented at the next meeting.</p>	WPS	13/06/18	Completed	<p>30/05/18 – Completed. Template sent out with meeting minutes.</p> <p>30/05/18 – TOR updated – for tabling at meeting.</p>
14 March 18	<p><b>Tier 2 WHS Committee Terms of Reference</b></p> <p>ACTION - WPS to distribute Tier 2 WHS Committee Terms of Reference to committees.</p> <p>ACTION - Tier 1 WHS Committee Terms of Reference to be reviewed and presented at the next meeting.</p>	WPS	13/06/18	Completed	<p>30/05/18 – Completed. Template sent out with meeting minutes.</p> <p>30/05/18 – TOR updated – for tabling at meeting.</p>



# Action Minutes Tier 2 Work, Health and Safety Committee

**Meeting Date:** May 31 2018

**Agenda Item No:** 2

---

**Subject:** Action Minutes of Tier 2 Work, Health and Safety Committee - Meeting of 31 May 2018

---

**Source:** Louellyn Templeman, Personal Assistant, Health Infrastructure Services

---

**Purpose/comments:** For endorsement

**Tier 2 Work, Health and Safety Committee  
31 May 2018  
ACTION MINUTES**

Attendees	
Colm Mooney	Executive Director, HIS (Chair)
Shannon Keevers	Safety and Risk Manager, HIS
Debra Storace (Proxy for Sophie Gray and Irene Yong)	Director, Infrastructure, Finance and Capital Works (IFCW)
James Walsh	Director, Minor Works and Plant Equipment (HIS)
John Kilday (absent)	Manager, Facilities Management (proxy for Chris Tarbuck)
Rebecca Wells	Health and Safety Representative (HSR), HIS
Chris Bryant	Deputy HSR, FM
Louellyn Templeman	Secretariat
Apologies	
Sophie Gray	Director, Infrastructure, Finance and Capital Works (IFCW)
Chris Tarbuck	Director, Facilities Management
Irene Yong – on leave	HSR, IFCW
Agenda Attendees	
N/A	

Serial Time	Item	Paper(s)
1.	Welcome, Acknowledgement of Country, Attendance and Apologies	
2.	Previous Minutes for endorsement	Minutes of 13 November 2017 accepted
3.	Actions Arising	Actions Arising running sheet updated
4.	Program and HSR Reports <ul style="list-style-type: none"> <li>a. HIS / IFCW: Building 3 and Bowes St</li> <li>b. Building 1 (FM)</li> <li>c. HSR Status</li> <li>d. Health and Safety Issues</li> </ul>	Verbal update – Rebecca Wells advised all acceptable, only minor clutter on desks.  Inspection report discussed – no issues  We have the 4 HSR's required however we need to roster 1 HSR to attend Tier 1 WH & S meeting on a rotating basis. Next meeting is 13/6, Rebecca Wells attending.  None raised
5.	Feedback from Tier 1 Meeting	Nothing reported
6.	Safety Accident Incident Report	Riskman training has been provided, however all managers must attend the re-scheduled manager Riskman training, date to be advised. Shannon tabled one SAIR report – Medium risk – resolved and to go on Risk Register
7.	Fleet Safety Checklist	HIS – 3 x Colorado Utes undamaged.



Serial Time	Item	Paper(s)
8.	Other Business	<ul style="list-style-type: none"> <li>- HIS Risk Register now functional</li> <li>- HIS Sharepoint site goes live 12 June</li> <li>- Colm Mooney tabled the FM report</li> <li>- Shannon organising another Infection Control presentation for contractors</li> <li>- Shannon advised they are currently updating the FM work order template for ladders</li> <li>- James raised the fact that all <i>Approval to use Private Vehicle for Official Use</i> forms expire June 30</li> <li>- Agenda Item for next meeting on Risk Register</li> </ul>
9.	Next meeting	TBC



## CAVEAT BRIEF

**To:** Meegan Fitzharris MLA, Minister for Health and Wellbeing *MF*

**Through:** Michael De'Ath, Interim Director-General, ACT Health

**Subject:** Centenary Hospital for Women and Children Postnatal Suites Bathroom Investigation and Remediation

*Cleared by: Karen Doran  
A/g Deputy Director-General, Corporate*

- ACT Health Infrastructure Services (HIS) is undertaking maintenance and repair works at the Centenary Hospital for Women and Children (CHWC) postnatal bathroom suites, Level 2, C Block. These works were initiated following the discovery of vinyl floor damage in the ensuite of room number 28.
- Due to the previous wall cavity contamination issue in the birthing suites on Level 3, E Block, HIS in consultation with Women, Youth and Children (WYC) took immediate precautionary steps and closed the room to patients and installed a containment bubble to mitigate any potential risk to patients, staff and visitors.
- HIS is now undertaking an immediate investigation including air and surface testing by an environmental consultant and investigations by contractors into the cause of the damage and any associated risks.
- Works in Room 28 commenced on Wednesday 16 May 2018 to remediate the damage to the vinyl, floor and walls.
- The full rectification works in Bathroom 28 are expected to take between 40-60 days based on similar contamination remediation tasks. The program will vary depending on the investigation findings and contamination tests required.
- Next steps:
  - If no contamination is found, a fast tracked remediation process may be possible in Room 28. A preventative maintenance review will be undertaken with a focus on wet areas, floor and wall vinyl.
  - If water damage has resulted in contamination of the building fabric there will be a requirement to close the adjoining Room 29 immediately.
  - If contamination is found, a wider testing regime will occur in all wet areas across the CHWC to determine works required.
- HIS is reviewing the current scope on Level 3 (two rooms closed) and the impacts of these newly identified rooms also being closed. A coordinated and staged remediation approach to minimise loss of bedrooms will be implemented with WYC to ensure there are minimal operational impacts and no interface between construction areas and patient treatment spaces.
- The health and safety of our patients is paramount and will not be compromised as a result of this issue. Further briefing will occur once the investigation has progressed.

Contact Officer: Colm Mooney  
 Contact Number: 6207 9186  
 Date: 17 May 2018



## CAVEAT BRIEF

**To:** Meegan Fitzharris MLA, Minister for Health and Wellbeing  
**Through:** Karen Doran, A/g Director-General, ACT Health  
**Subject:** **DISRUPTION TO DENTAL SERVICES AT BELCONNEN COMMUNITY HEALTH CENTRE (BCHC)**

31/3/18  
nff

*Cleared by: Executive Director, Health Infrastructure Services*

- Dental services provided at BCHC were disrupted earlier today (29 March 2018) due to a compressed air system fault resulting in a loss of power to all dental service chairs.
- Consequently, 33 client consultations were cancelled or redirected to the Civic Health Centre for alternative treatment/consultation whilst a system investigation and repair was instigated.
- As a precaution, and to prevent client inconvenience, scheduled services for Tuesday, 3 April 2018, have been redirected to Civic Health Centre whilst investigated and repair works were being implemented.
- The total number of rescheduled appointments is 36.
- The air system fault has now been rectified by Health Infrastructure Services' contractors and normal equipment operation and functionality has been restored since 3:20pm on the 29 March 2018.
- To prevent further client appointment disruption normal services will resume at BCHC on Wednesday, 4 April 2018.

**Contact Officer:** Colm Mooney  
**Contact Number:** 620 79186  
**Date:** 29 March 2018

No	Action Item	Person(s) Responsible	From Meeting	Due	Remarks
18/01	Updating FM Ladder Work Order template	Shannon Keever's / Scott Harding	31 May 2018	Next meeting	<ul style="list-style-type: none"> <li>Louise Medlin currently updating this work order form, Scott Harding to follow up.</li> </ul>
18/02	Approval to Use Private Vehicle for Official Use forms – Louellyn to locate and email to Leadership group	Louellyn Templeman	31 May 2018	5/6/2018	<ul style="list-style-type: none"> <li>1/6 Louellyn located form and emailed to leadership group CLOSED</li> </ul>
18/03	What 3 cars do HIS now have? Update checklist	Louellyn Templeman	31 May 2018	Next meeting	<ul style="list-style-type: none"> <li>31/5/2018 Louellyn to liaise with Scott Harding regards fleet cars for HIS and checklist</li> </ul>
16/08	Formally request footpath upgrade with TCCS for gazetted path between Gilmore Rd and car park	Scott Harding/ John Kilday Shannon Keever's	10 November 16	February 18	<ul style="list-style-type: none"> <li>16/11 – SK to add to risk register - John Kilday/Scott Harding to send reminder to TCCS</li> <li>23/8 – changed responsible person from Andrew Steele to Scott Harding</li> <li>31/5/2018 Not complete – Shannon advised still ongoing</li> </ul>
17/28	Send governance sheet to Secretariat showing first aiders / emergency wardens in FM	John Kilday	13 November	28 November 17	<ul style="list-style-type: none"> <li>31/5/2018 This is yet to be done – John Kilday to action</li> </ul>
17/30	Send proof of updated signage on wall outside B3L1 HIS area to Sophie Gray	Shannon Keever's	13 November	February 18	<ul style="list-style-type: none"> <li>31/5/2018 Shannon advised this was on hold until new signage specs are received – must be Building 3 colours. Colm requested Shannon reactivate this</li> </ul>
17/31	Let Shannon Keever's know who is responsible for testing and tagging Multi Function Devices (MFD)	Louellyn Templeman	13 November	February 18	<ul style="list-style-type: none"> <li>31/5/2018 Louellyn to check with All Jordan / SSICT to ascertain who does this and advise Shannon</li> <li>5/6/2018 SSICT has got back to Louellyn and advised that Testing and Tagging is a Facilities job, and to log it</li> </ul>



17/33	FM HSR to send through FM HSR training certificate and update HSR register on system	Chris Bryant / Brad Falkenberg	13 November	28 November 17	<ul style="list-style-type: none"> <li>• "through something called MainNet?"</li> <li>• 1/6/2018 Louellyn emailed Shared Services – awaiting response</li> <li>• 31/5/2018 Shannon advises not sure this has happened.. Shannon to check and send details to Louellyn</li> <li>• STILL OPEN</li> </ul>
17/34	Rebecca to schedule bi-annual first aid restocking meeting (first one early December) for HSRs and First Aiders	Rebecca Wells	13 November	28 November 17	<ul style="list-style-type: none"> <li>• 31/5/2018 Rebecca to follow up on this, and Shannon will check with Daniel Guthrie regarding getting these automatically re-stocked through Parasol / St Johns every 6 months.</li> <li>• STILL OPEN</li> </ul>
17/37	Update registers, reports and other documents in contractor sign in area	Shannon Keevers	13 November	February 18	<ul style="list-style-type: none"> <li>• 31/5/2018 This has been put on hold, but to be left open. Shannon waiting on the implementation of the RAPID system which will affect this. To be updated at next meeting.</li> <li>• STILL OPEN</li> </ul>
16/13	Include updated hazardous materials signage legislation in contractor induction	Shannon Keevers	10 November 16	February 18	<ul style="list-style-type: none"> <li>• 13/11 – ongoing, will be in place by end of year</li> <li>• 23/8 – in progress</li> <li>• Legislation changes are due in 2018, SK to develop and circulate information sheet from recent WPS information session</li> <li>• Irene to liaise with SK to confirm what advice PCW are seeking from GSO re: standard contract changes</li> <li>• 31/5/2018 – Completed</li> <li>• CLOSED</li> </ul>