

COMMITTEE UPDATE REPORT/ ADRODDIAD DIWEDDARU'R HEALTH & SAFETY SUB COMMITTEE

Date of last meeting/ Dyddiad y cyfarfod diwethaf: 3 June 2025

Quoracy/ Cworwm: Met
Arthur, Vice Chair

Report by/ Adroddiad gan: Dr Jonathan

KEY DISCUSSION POINTS AND MATTERS FROM THE DISCUSSION AT THE MEETING/ PWYNTIAU TRAFOD ALLWEDDOL A MATERION I'W HUWCHGYFEIRIO O'R DRAFODAETH YN Y CYFARFOD:

Alert¹ (may require discussion)/ **Rhybuddio** (efallai y bydd angen trafodaeth)

The Health & Safety Sub-Committee (HSSC) wish to **alert** members of the The Health & Safety Committee (HSC) that:

Fire Safety Group - There is significant concern regarding compliance with Level 2 fire safety training across the Health Board. As of the end of May 2025, only 69% of staff have completed the training, with Glangwili Hospital (GGH) identified as a significant area of concern. This falls below the 85% compliance target threshold required by the Mid and West Wales Fire and Rescue Service (MAWWFRS). Continued non-compliance poses a risk of enforcement action or prosecution.

To address this urgently, a targeted communication strategy will be implemented, focusing on the Clinical Care Groups (CCG). A SMART (Specific, Measurable, Achievable, Relevant, Timely) action plan to rapidly improve the position has been requested from the Fire Safety Group, which must include:

- Ensuring CCGs are fully informed of their current training compliance status and the available training provision.
- Confirmation of the "go live date" for the Electronic Staff Record (ESR) level 2 training module to support timely communication and uptake.
- Integration of fire safety training compliance reporting into monthly CCG, Quality, Health & Safety meetings.

In addition to improving training compliance, the action plan must also:

- Provide clear reporting on the status and mitigation of high, medium and low risk actions, including the number of fire risk assessments and a plan to address them.
- Clarify ownership and oversight, particularly of outstanding actions under the responsibility of Estates and Hospital Managers and establish a clear process to ensure responsible leads are actively progressing and closing these outstanding actions.
- Ensure the completion of all overdue risk assessments by the end of July 2025.

¹ There is a lack of confidence that any action in place is sufficient to address the issue satisfactorily and/or within the scope of the operational team or executive to resolve. Engagement, action or intervention required.

- **Security Management Group** – There was low member attendance at the last meeting and low compliance with annual restraint training. A report outlining the cause of non-compliance for training and a trajectory for improvement, has been requested.
- **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)** – A reduction in RIDDOR incidents has been observed in this year's figures. However, concerns remain regarding the timeliness of reporting across the organisation. The HSSC has requested a position update to provide assurance on current processes and outline a clear trajectory for improvement.

Advise² (to monitor)/ **Cynghori** (i fonitro)

The Health & Safety Sub-Committee wish to **advise** members of the Health & Safety Committee that:

- Members of the HSSC were reminded to prioritise completion of outstanding actions from the sub-committee's action log, ensuring progress is made between meetings.
- **Security Management Group** - A training needs analysis confirmed the requirement for staff to attend Violence and Aggression Management training. Operational support is essential to release staff from their duties to attend.
- The Body worn video devices trial project has stalled due to a lack of dedicated security personnel. The Health and Safety (H&S) Team will continue to investigate and explore solutions.
- **Electrical infrastructure Group** – All identified risks relating to electrical infrastructure improvements have been appropriately recorded on the organisational risk register.
- A Targeted Efficiency Fund (TEF) programme has commenced, and a major infrastructure plan has been submitted to Welsh Government (WG) to address high and low voltage switchgear over the next three years. All acute sites now have secondary generator connection points. A detailed mitigation and contingency plan will be presented at the next meeting.
- **Security Management Group** – A security management report including improvements to the ID badge process is due to be presented to the Executive Team. Engagement with workforce colleagues is critical to progress.
- **Medical Gas Pipeline Systems Safety Group** – Two unresolved risks were highlighted. Further clarity is required regarding risk visibility, potential impact of failure, robustness of contingency plans and the organisation's risk tolerance in the context of funding constraints.
- **Compliance and Site Operations Group** – A training needs analysis was presented, and two new risk entries were discussed. An update will be provided at the next HSSC including progress on risk mitigation, training compliance and control measures effectiveness. This will also be reviewed by the Estates and Facilities Integrated Governance Group for development and thereafter presented to the HSSC.
- **Radiation Protection Group** – A Radiology team member exceeded the local action level for whole body radiation dose during a specific period. The Radiation

² There are areas of concern where assurance has been taken on actions in place but requires close monitoring. An early warning of an emerging and potentially serious concern.

Protection Group will investigate whether a formal incident report should have been completed.

An environmental survey identified elevated radiation levels at the Computed Tomography (CT) scanner roof edge. A permit to work system has been implemented. The risk to contractors and estates staff is considered extremely low due to limited occupancy.

- **Trade Union Health and Safety Group –**
 - The Royal College of Nursing (RCN) has completed audits across all four acute sites. Findings will be discussed with the Executive Director of Nursing, Quality and Patient Experience
 - The Society of Radiographers (SOR) completed an inspection in Radiology in Bronlais Hospital (BGH). Results will be shared with the HSSC
 - Trade Union colleagues have been asked to support the development of SMART action plans.
 - **Health & Safety Update Report –** Over 120 site inspections have been completed. The department has been asked to explore how outcomes are tracked using the Audit Management and Tracking (AMAT) and Board Operational Risk Information System (BORIS) platforms.
 - Manual Handling training attendance remains challenging. The CCG's will be asked to support staff release for training.
- Health and Safety (First Aid) Regulations –** The Health and Safety Department has been asked to provide assurance that the organisation is compliant, and the processes align with the policy

Assure³ (to note)/ Sicrhau (i nodi)

The Health & Safety Sub-Committee wish to **assure** members of the Health & Safety Committee that:

- **Medical Gas Pipeline Group –** has addressed identified risks and implemented mitigation measures through established CCG governance processes
- **The Water Safety, Ventilation, and Environmental Hygiene Groups** will now report directly to the Infection Protection Steering Group (IPSSG), rather than the HSSC, as agreed at the previous meeting.
- **Welsh Health Technical Memorandum (WHTM)–** Audits are now tracked through the AMAT system, enhancing visibility and accountability of compliance actions.
- **Anti-Violence Collaborative Wales Data Analysis –** Confirmation that letter received and response provided.

³ There is confidence that actions are robust and will be sufficient to address the issue or generally operating effectively. Routine monitoring.

- The **HSSC Terms of Reference** have been updated and approved by the HSSC and are presented for final approval by the HSC.

Review of Risks/ Adolygiad o Risgiau

Discussed within the body of the AAA report

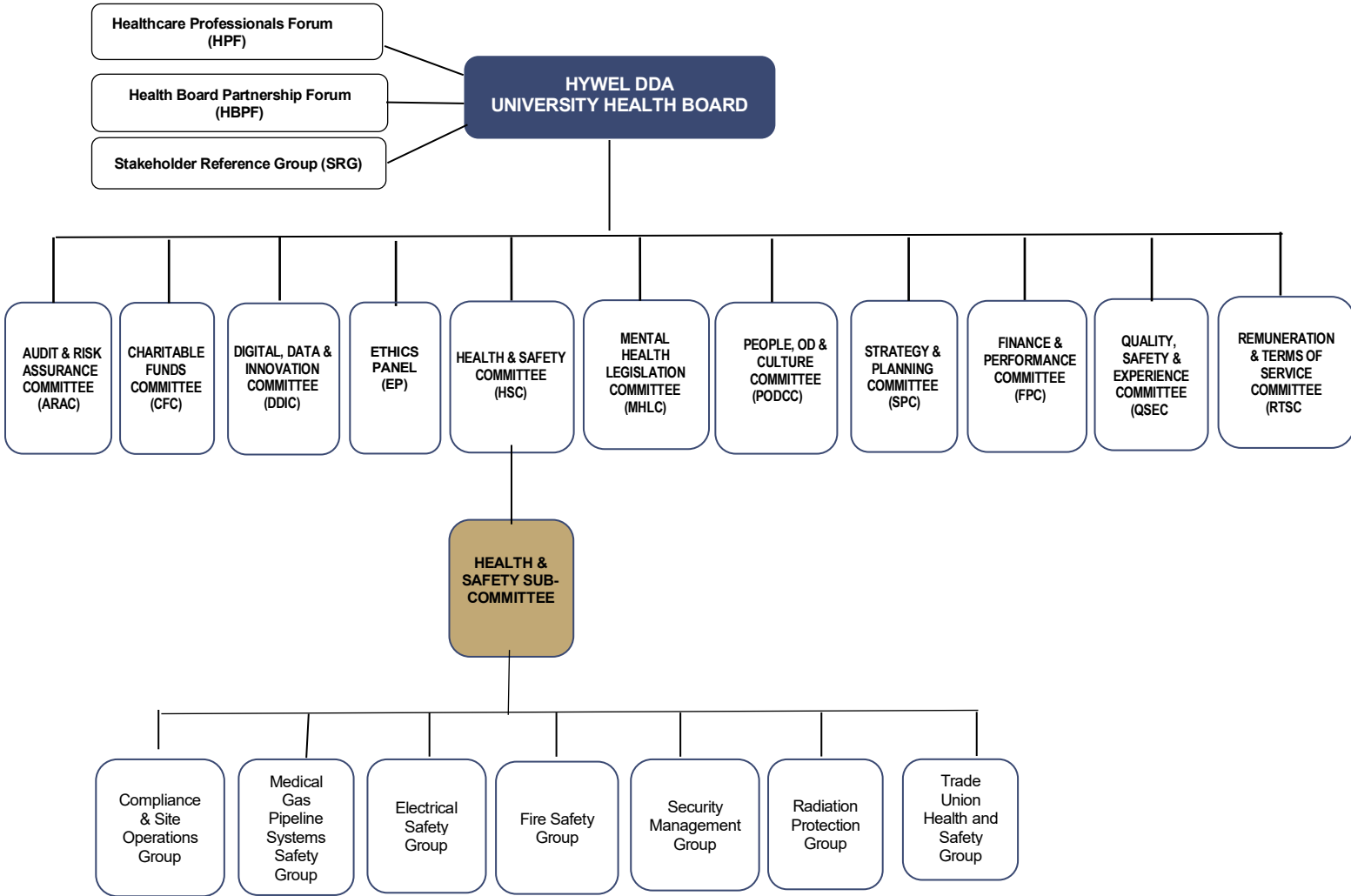
Sharing of learning/ Rhannu dysgu

Not Applicable

Recommendation/ Argymhelliad

The Board/Committee is asked to:

- Approve the revised Terms of Reference for the sub committee
- Respond to the items that they are being alerted to
- Note the items the Committee is advising them of
- Be assured on the items that the Committee is providing assurance on



HEALTH AND SAFETY SUB-COMMITTEE

TERMS OF REFERENCE

1. Constitution			
Version	Issued to:	Date	Comments
V.01	Health & Safety Committee	10.09.2024	For Discussion
V.02	Health & Safety Committee	12.11.2024	For Approval
V.03	Health & Safety Sub-Committee	06.12.2024	For Adoption
V.04	Health & Safety Committee	14.01.2025	Approved
V.05	Health & Safety Sub-Committee	06.02.2025	For Discussion
V.06	Health & Safety Committee	04.03.2025	Approved
V.07	Health & Safety Sub-Committee	03.06.2025	Approved
V.07	Health & Safety Committee	03.07.25	For Approval

- 1.1 The Health and Safety Sub-Committee has been established as a Sub-Committee of the Health & Safety Committee and constituted from 12 November 2024.

2. Purpose

- 2.1 The purpose of the Health and Safety Sub-Committee is to ensure that the health and safety and security arrangements across the Health Board are driven by and focused on the requirements involved in each area, together with Hywel Dda University Health Board's (HDdUHB's) compliance or performance against these.
- 2.2 The Sub-Committee will monitor, scrutinise and receive assurance from its constituent parts that the various actions undertaken to ensure health and safety and security are effective and well managed.
- 2.3 The Sub-Committee will oversee the arrangements in place for the identification, assessment and prioritisation of risks related to health and safety and security.
- 2.4 The Sub-Committee will act as a forum for technical advisors to discuss health and safety and security issues across the Health Board.
- 2.5 The Sub-Committee will also provide opportunity for communication between the Health and Safety Sub-Committee and other health and safety and security related groups.

3. Key Responsibilities

- 3.1 The Health & Safety Sub-Committee will oversee levels of compliance with national guidance and subsequent legislation and standards in respect of health and safety and security.
- 3.2 Monitor progress against agreed performance indicators related to health and safety and security within the Health & Safety Dashboard to be developed.
- 3.3 Approve organisational health and safety policies, procedures, guidelines and codes of practices (policies within the scope of the Sub-Committee).
- 3.4 Review the Health Board's Health and Safety Policy prior to approval by Health & Safety Committee.
- 3.5 Seek assurance on the management of operational risks that have been aligned to the Health & Safety Sub-Committee, where the risk tolerance is exceeded or where there is a lack of timely action. Lack of assurance and resolution to be escalated to the Health & Safety Committee.
- 3.6 Request a deep dive report when action/contingency plans to address incidents and alerts that HDdUHB receives in relation to health and safety and security breach the agreed timescales.
- 3.7 Ensure actions are completed in a robust and timely manner and seek assurance that learning in regard to health and safety is disseminated and embedded across all the Health Board's activities as appropriate.
- 3.8 Receive assurance from the Groups reporting to the Sub-Committee and consider how escalated issues are addressed/resolved.

- 3.9 Provide the necessary assurances to the Health & Safety Committee, escalating any matters of immediate concern with recommendations for action.
- 3.10 Develop an annual work plan, responding to operational service priorities, consistent with the strategic direction for the organisation, for approval by the Health & Safety Committee.
- 3.11 Inform the work plans for reporting Groups and vice versa.
- 3.12 Receive and consider any relevant Health & Safety issues from the Infection Prevention Strategic Steering Group.
- 3.13 Address any other requirements stipulated by the Health & Safety Committee.

4. Membership

- 4.1 The membership of the Health and Safety Sub-Committee shall comprise:

Title
Executive Director of Allied Health Professions & Health Science (Chair)
Deputy Director of Health Science (Vice-Chair)
Deputy Chief Operating Officer
Chair/Vice Chair, Compliance & Site Operations Group
Chair/Vice Chair, Medical Gas and Pipeline Systems Safety Group
Chair/Vice Chair, Electrical Safety Group
Chair/Vice Chair, Fire Safety Group
Chair/Vice Chair, Security Management Group
Chair/Vice Chair, Radiation Protection Group
Chair/Vice Chair, Trade Union Health and Safety Group
Head of Health, Safety & Security (covering Violence & Aggression, Moving & Handling)
Health & Safety Manager
Head of Operations
Head of Occupational Health (or deputy)
Head of Infection Prevention and Control
Head of Fire Safety
Assistant Director of Assurance & Risk
Head of Estates, Risk and Compliance
Assistant Director of Nursing, Patient Safety, Quality & Experience (Community & Integrated Medicine)

- 4.2 The membership of the Sub-Committee will be reviewed on an annual basis.

5. Quorum and Attendance

- 5.1 A quorum shall consist of either the Chair or Vice-Chair and no less than a third of the membership of the Health and Safety Sub-Committee.
- 5.2 Any senior officer of HDdUHB or partner organisation (e.g. NHS Wales Shared Services Partnership NWSSP Legal and Risk Services and NWSSP - SES Specialist Estates Services staff) may, where appropriate, be invited to attend, for either all or part of a meeting, to assist with discussions on a particular matter.

- 5.3 The Sub-Committee may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.
- 5.4 Should any member be unavailable to attend, they may nominate a fully briefed deputy to attend in their place, subject to the agreement of the Chair.

6. Agenda and Papers

- 6.1 The Health and Safety Sub-Committee Secretary is to hold an agenda setting meeting with the Chair and/or the Vice Chair, at least **six** weeks before the meeting date.
- 6.2 The agenda will be based around the Sub-Committee work plan, identified risks, matters arising from previous meetings, issues emerging throughout the year and requests from Sub-Committee members. Following approval, the agenda and timetable for request for papers will be circulated to all Sub-Committee members.
- 6.3 The agenda and papers for meetings will be distributed **seven** days in advance of the meeting.
- 6.4 The minutes and Table of Actions will be circulated to the Chair within seven days to check the accuracy, prior to sending to Members to review within the next seven days.
- 6.5 Members must forward amendments to the Sub-Committee Secretary within the next seven days. The Sub-Committee Secretary will then forward the final version to the Sub-Committee Chair for approval.

7. Frequency of Meetings

- 7.1 The Health and Safety Sub-Committee will meet bi-monthly and shall agree an annual schedule of meetings. Any additional meetings will be arranged as determined by the Chair of the Sub-Committee.
- 7.2 The Chair of the Sub-Committee, in discussion with the Sub-Committee Secretary, shall determine the time and the place of meetings of the Sub-Committee and procedures of such meetings.

8. Accountability, Responsibility and Authority

- 8.1 The Health and Safety Sub-Committee will be accountable to the Health & Safety Committee for its performance in exercising the functions set out in these terms of reference.

9. Reporting

- 9.1 The Health and Safety Sub-Committee may, subject to the approval of the Health & Safety Committee, establish groups or task and finish groups to carry out on its behalf specific aspects of Sub-Committee business. The Sub-Committee will receive an update following each group's meeting, detailing the business undertaken on its behalf. The following groups have been established:
 - 9.1.1 Compliance & Site Operations Group
 - 9.1.2 Medical Gas Pipeline Systems Safety Group
 - 9.1.3 Electrical Safety Group

- 9.1.4 Fire Safety Group
- 9.1.5 Security Management
- 9.1.6 Radiation Protection Group
- 9.1.7 Trade Union Health and Safety Group

- 9.2 The Sub-Committee, supported by the Sub-Committee Secretary, shall:
 - 9.2.1 Report formally, regularly and on a timely basis to the Health & Safety Committee on the Sub-Committee's activities. This includes the submission of a Sub-Committee update report, as well as the presentation of an annual report within 6 weeks of the end of the financial year.
 - 9.2.2 Bring to the Health & Safety Committee's specific attention any significant matters under consideration by the Sub-Committee.

10. Secretarial Support

- 10.1 The Health and Safety Sub-Committee Secretary shall be determined by the Director of Allied Health Professions and Health Science.

11. Review Date

- 11.1 These terms of reference shall be reviewed initially on a 6 monthly basis, and thereafter on at least an annual basis, by the Health and Safety Sub-Committee for approval by the Health & Safety Committee.