



**PWYLLGOR IECHYD A DIOGELWCH
HEALTH & SAFETY COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	05 May 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Health and Safety Committee (HSC) Self- Assessment Report 2025/2026
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Joanne Wilson, Director of Corporate Governance/Board Secretary
SWYDDOG ADRODD: REPORTING OFFICER:	Charlotte Wilmshurst, Assistant Director of Assurance and Risk

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of the report is to present the outcome of the Health and Safety Committee Self-Assessment 2025/2026 process to the Committee.

Cefndir / Background

In line with Section 10.2.1 of Standing Orders, the Board is required to introduce a process of regular and rigorous self-assessment and evaluation of its own operations and performance and that of its Committees and Advisory Groups. Section 10.2.2 also states that each Committee must also submit an annual report to the Board through the Chair within 6 weeks of the end of the reporting year setting out its activities during the year and including the review of its performance and that of any sub-Committees it has established.

In addition to the annual Committee self-assessment process, after each meeting Independent Member (IM) Reflective Sessions take place to gather feedback and insights from Members on the meeting, in terms of what has gone well, what could have gone better, and issues that need to be raised at the Committee Chair's meeting. This feedback helps with the evaluation process and continuous improvement.

During previous years, Committee self-assessments have been based on a comprehensive review of feedback provided by the Committee membership from the completion of a long questionnaire assessment. While these approaches provided valuable insights, they also led to survey fatigue and limited engagement. Feedback from a recent Corporate Governance Conference has highlighted the need for a proportionate process for assessment that avoids unnecessary complexity. This year's approach will streamline the assessment, focusing on critical governance behaviours and outcomes rather than exhaustive questionnaires.

This year's Committee self-assessment form focuses on five core areas of governance and assurance:

Board Assurance and Governance

The Committee provides effective assurance to the Board that Hywel Dda UHB is meeting its statutory health and safety responsibilities.

Compliance with Health and Safety Legislation

The Committee effectively oversees compliance with relevant health and safety legislation, regulations, and Welsh Government requirements.

Risk Management and Incident Learning

The Committee effectively monitors health and safety risks, incidents, and trends, ensuring learning and corrective action across the organisation.

Workforce Engagement, Partnership and Culture

The Committee supports effective partnership working and promotes a positive health, safety, and wellbeing culture across Hywel Dda UHB.

Committee Effectiveness and Delivery of the Terms of Reference

The Committee's membership, agenda management, reporting, and behaviours enable it to deliver its Terms of Reference effectively.

Asesiad / Assessment

To improve response rates, taking into account that there is a process of continuous improvement through the IM Post Committee Reflective Sessions, a short questionnaire was circulated to Members to gather feedback on 5 key areas for the Committee.

Respondents were asked to rate their level of agreement to 5 statements relating to key areas of focus for the Committee on a scale of 1–5. (1 - strongly disagree up to 5 – strongly agree) and to provide more information to support their rating.

Below are the statements relating to 5 key areas of focus for the Committee and the average ratings based on the responses received. 4 (out of 11) responses were received (36.4% response rate).

Area and Statement	Average Rating
Board Assurance and Governance <i>The Committee provides effective assurance to the Board that Hywel Dda UHB is meeting its statutory health and safety responsibilities.</i>	4
Compliance with Health and Safety Legislation <i>The Committee effectively oversees compliance with relevant health and safety legislation, regulations, and Welsh Government requirements.</i>	4
Risk Management and Incident Learning <i>The Committee effectively monitors health and safety risks, incidents, and trends, ensuring learning and corrective action across the organisation.</i>	4
Workforce Engagement, Partnership and Culture <i>The Committee supports effective partnership working and promotes a positive health, safety, and wellbeing culture across Hywel Dda UHB.</i>	4

The following themes were provided:

What has gone well:

- The Committee provides a good level of assurance to the Board, with an average ratings of 4 across this assessed domains.
- Members recognised strong leadership and membership, with assurance issues carefully considered and discussed.
- Committee discussions are increasingly informed by relevant facts, insights and legislation.
- The Committee has continued to develop its role as an assurance-focused Committee, whilst acknowledging there is still more to do.
- Partnership working and trade union engagement has strengthened, with health and safety trade union groups seen as increasingly relevant and effective.
- Respondents acknowledged that the Committee has made significant progress over the last year, reflecting a clear improvement trajectory.

What we want to strengthen going forward:

- Improve clarity and visibility of the overall health and safety legislative framework, including a clearer understanding of compliance status across the organisation to ensure more effective assurance can be provided to the Board.
- Strengthen the Committee's strategic and thematic oversight to drive wider scale improvements and compliance, moving further away from consideration of individual issues in isolation.
- Enhance thematic analysis of incidents, near misses and risks to support organisation-wide learning and preventative action.
- Further improve agenda planning, including the use of themed or deep-dive agenda items on priority health and safety topics.
- Address variability in the quality and assurance focus of papers, ensuring greater consistency from all reporting groups.
- Continue to develop capability and training for contributors, particularly for Clinical Care Groups, to support high-quality, assurance-focused reporting.
- Broaden workforce engagement beyond training compliance, with greater focus on training effectiveness, outcomes and staff confidence in raising safety concerns appropriately.

Suggestions from Respondents

- Developing a clear health and safety legislative framework or overview, setting out key statutory requirements and providing clarity on compliance status.
- Introducing themed agenda items or deep-dive discussions on specific health and safety topics to support strategic oversight.
- Strengthening thematic reporting and analysis of incidents, near misses and enforcement actions to support learning and preventative action at scale.
- Continuing to improve the quality and consistency of committee papers, including further development and support for contributors to ensure reports are focused on assurance, risks, trends and required actions.
- Enhancing workforce engagement beyond mandatory training compliance, with greater focus on the effectiveness and outcomes of training and on creating confidence for staff to raise safety concerns through appropriate routes.

- Supporting ongoing development of Clinical Care Groups, including training and capability building, to ensure issues identified can be taken forward, or escalated and addressed effectively.

Overall Conclusion

The Health and Safety Committee Self-Assessment demonstrates that the Committee is functioning effectively and providing appropriate assurance to the Board, with consistent average ratings of 4 across all assessed domains.

The feedback also highlights that the Committee is on a clear improvement trajectory, having undergone significant development in recent years as it has strengthened its assurance role. The areas identified for further development are well-understood and largely relate to maturing assurance processes, improving consistency of reporting, and enhancing strategic and thematic oversight.

The Committee is well-placed to build on this progress during 2026/27 by focusing on the agreed improvement actions, supporting contributors to improve report quality, and continuing to strengthen its role in providing robust, organisation-wide assurance on health and safety.

Area for improvement	By Whom	By When
Develop a clear overview of health and safety legislative requirements and compliance position	Executive Director of Allied Health Professions and Health Science	30 September 2026
Introduce themed agenda items to support strategic assurance and deep dive discussions	Executive Director of Allied Health Professions and Health Science Executive Leads	Themed reports on compliance have been incorporated on the HSC Workplan 2026/27
Strengthen thematic analysis of incidents, near misses and trends	Executive Director of Allied Health Professions and Health Science/ Health & Safety Team	30 September 2026
Improve consistency and assurance focus of committee papers	All report authors / Secretariat	31 March 2027
Refocus workforce engagement beyond compliance with mandatory training requirements to the effectiveness of training and outcomes	Executive Director of Allied Health Professions and Health Science /Health & Safety Team	31 July 2026
Support the development of Clinical Care Groups, including training and capability building, to ensure health and safety issues can be addressed effectively	Executive Director of Allied Health Professions and Health Science /Health & Safety Team	31 July 2026

Argymhelliad / Recommendation

The Committee is asked to **CONSIDER** the outputs from the Committee Self-Assessment process and **AGREE** to the actions to be taken to improve its effectiveness.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	10.5 The Director of Corporate Governance/Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation, including that of any Sub-Committees established. In doing so, account will be taken of the requirements set out in the NHS Effective Board Committees Guide.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	HSC Terms of Reference HSC Self-Assessment digital form results
Rhestr Termiau: Glossary of Terms:	Included within the report.

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Committee:	Director of Corporate Governance Executive Director of Allied Health Professions and Health Science
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No direct impacts
Ansawdd / Gofal Claf: Quality / Patient Care:	No direct impacts
Gweithlu: Workforce:	No direct impacts
Risg: Risk:	No direct impacts
Cyfreithiol: Legal:	No direct impacts
Enw Da: Reputational:	No direct impacts
Gyfrinachedd: Privacy:	No direct impacts
Cydraddoldeb: Equality:	No direct impacts