

HEALTH AND SAFETY COMMITTEE

ANNUAL REVIEW REPORT

2025/26

1. Introduction and Chair's Summary

In line with Standing Orders the Health and Safety Committee must 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, evidencing how the Committee has met its Terms of Reference during the financial year.

The Board uses this annual report to inform:

- The ongoing development of its governance arrangements, including its structures and processes:
- Its Board Development Programme, as part of an overall Organisation Development framework.

Chair's Reflections

Our purpose is to provide assurance around the Health Board's arrangements for ensuring the health, safety, welfare, and security of all employees and those who may become affected by work related activities including patients, members of public, volunteers, and contractors.

This report provides an overview of the scrutiny we have applied to matters of concern and reflects the increasing attention we are giving to the impact of actions we have taken to strengthen health, safety, welfare and security over the previous year. We recognise the importance of providing assurance to the Board on our compliance with health and safety legislation and have taken steps to strengthen our supporting governance structures.

This year has seen significant change, with a restructure of the Committee, strengthening both attendance and member contribution. Alongside this, stronger partnership working has developed with trade unions, including the introduction of joint arrangements to monitor and evaluate audits collaboratively. The development of a health and safety dashboard for managers has also been a key achievement, providing access to up-to-date, live information across a range of areas covered by health and safety guidance. In addition, the security team has been developed across the Health Board this year, providing valuable support to both clinical and portering teams.

I would like to again thank our patients, visitors and staff for their ongoing cooperation and understanding as we continue to undertake reinforced autoclaved aerated concrete (RAAC) surveys and improvements to our fire safety during 2025/26 and beyond. The Committee remains committed to ensuring safety is always maintained, while keeping disruption to a minimum throughout this work.

This has been a challenging year, and we recognise the hard work and dedication of our teams who keep supporting our services day to day and keeping our patients and staff safe within our Health Board.

The work being undertaken by the Estates Department in response to the fire enforcement notices issued by Mid and West Wales Fire and Rescue Service has progressed well across Hywel Dda sites and represents a strong example of effective collaborative working. However, the ageing nature of the estate means that increasing levels of risk continue to be carried by the Health Board, particularly in relation to ongoing repairs and long-term sustainability challenges.

I would like to commend the excellent work generated by the health, safety, fire, and security teams who work diligently as the foundation to this Committee. As we look to the coming year, the Committee will continue to build its focus on topics such as health surveillance, staff welfare and issues that arise, and ensuring the voices of staff and patients are heard in relation to their experience of working in and receiving care within our environments.

2. Terms of Reference and Workplan

The Terms of Reference (TOR) for the Health and Safety Committee is reviewed on an annual basis or following any significant changes. The TORs were last reviewed in January 2026.

Health and Safety Committee Terms of Reference

The Health and Safety Committee has a work plan to enable forward planning for the forthcoming year. The workplan is produced to incorporate the duties outlined in the Committee's Terms of Reference and any suggested areas of focus identified during the annual self-assessment process.

The Health and Safety Committee workplan covers a range of activities including statutory reporting duties, regular items of business and priority planned pieces of work which support Board and Committee's objectives.

The work plan is regularly updated throughout the year to ensure it remains responsive to emerging issues and risks.

Health and Safety Committee Work Programme 2025-26

3. Sub-Committee/s (if applicable)

The Health and Safety Sub-Committee reported into the Health and Safety Committee with its own Terms of Reference and annual workplan and, in line with those Terms of Reference, provided a report following each meeting.

Following a review of health and safety governance arrangements across both the operational and assurance arms of the Health Board, the Health and Safety Committee agreed on 11 November 2025 to disestablish the Sub-Committee. This reflected revised governance arrangements aimed at strengthening operational ownership and accountability for health and safety, including the establishment of the Health and Safety Compliance Group within the operational arm. The review confirmed that the responsibilities previously discharged by the Sub-Committee

would be addressed through the revised operational governance arrangements, with no gaps in assurance to the Committee or the Board.

4. Table of Attendance

Membership		Date 06/05/25	Date 03/07/25	Date 09/09/25	Date 11/11/25	Date 13/01/26	Date 10/03/26
Ann Murphy	Independent Member	✓	✓	✓	✓	✓	✓
Sarah Harraway	Independent Member		✓	✓	✓	✓	✓
Michael Imperato	Independent Member	✓	✓	✓	✓	✓	✓
Iwan Thomas	Independent Member	x	x	x	✓	✓	✓
Chantal Patel	Independent Member	✓	✓				✓
In Attendance		06/05/25	03/07/25	09/09/25	11/11/25	13/01/26	10/03/26
Andrew Carruthers	Chief Operating Officer	x	✓	✓	✓	✓	✓
Sharon Daniel	Executive Director of Nursing, Quality & Patient Experience	✓	x	✓	✓	✓	✓
Jo Wilson	Director of Corporate Governance	✓	✓	✓	✓	✓	✓
Dr Ardiana Gjini	Executive Director of Public Health	✓	✓	✓	✓	✓	✓
James Severs	Executive Director of Allied Health Professions and Health Science	✓	✓	✓	✓	✓	✓
Rob Elliott	Programme Director Major Infrastructure Projects	x	x				
Tim Harrison	Head of Health and Safety	✓	✓				
Karen Ryan	Head of Occupational Health	✓	✓	✓	✓	✓	✓
Anthony Dean	Unite the Union Rep	✓	✓	✓	✓	x	✓
Simon Chiffi	Head of Operations	✓	✓	✓	✓	✓	✓
Meeting quorate?		Yes	Yes	Yes	Yes	Yes	Yes

A quorum shall consist of no less than two of the membership and must include as a minimum the Chair or Vice-Chair of the Committee, and one other Independent Member, together with a third of the In Attendance Members.

5. Committee Activities – alert, advise and assure.

The Committee is required to report to the Board after each Committee meeting by presenting a report highlighting the key discussion items at the Committee.

Alert – *The following matters were areas where the Committee was unable to take an assurance or had a lack of confidence that the action in place was sufficient to address the issue satisfactorily and/or it was within the scope of the operational team to resolve and were alerting the Board as engagement action or intervention was required.*

The Health and Safety Committee had no matters of which to alert the Board.

Advise – *The following matters were areas of concern where assurance had been taken on actions in place but required close monitoring.*

Health and Safety Sub-Committee Update

- The Health and Safety Committee was initially unable to take assurance on compliance with Level 2 Fire Safety training when updates were first considered in May and July 2025. A further update in September 2025 indicated improving compliance, supported by enhanced access to training and increased organisational awareness, providing the Committee with increased confidence in the direction of travel.

Health and Safety Update

- In May and July 2025, the Committee was unable to take adequate assurance on the reported training figures for face-to-face courses delivered by the Manual Handling Team and the Reducing Restrictive Practice Team. Further discussion with Clinical Care Groups informed actions to strengthen oversight and improve access to training, with improved compliance reported in September 2025. Additional training needs analysis was undertaken in November 2025 to further refine understanding of ongoing requirements

Health and Safety Sub-Committee (HSSC) Update Report

- The Health and Safety Sub-Committee (HSSC) update report presented in July 2025 highlighted concerns regarding delays in the submission of reports under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) across the organisation. A further update provided in November 2025 demonstrated significant improvement in

timeliness and processes, enabling the Committee to take assurance on the management of RIDDOR reporting.

Health & Safety Final Internal Audit Report 2024/25 (HDD-2425-23)

- The Internal Audit Update Report and associated Action Report presented in July 2025 demonstrated progress towards meeting the requirements of the Health & Safety Final Internal Audit Report 2024/25; however, due to the number of outstanding actions, the Committee was only able to take limited assurance at that time. A subsequent update in September 2025 confirmed that Shared Services Partnership Audit and Assurance Services had reviewed all evidence submitted via the Audit Management and Tracking System (AMaT) and were satisfied that sufficient progress had been made by the Health, Safety and Security Team, enabling the Committee to take assurance on compliance with the audit requirements.

Staff Story

- A staff story delivered in September 2025 by a Porter highlighted concerns regarding the adequacy of Personal Protective Equipment (PPE) for Porters required to respond to security incidents. A subsequent Health and Safety Sub-Committee (HSSC) update presented in November 2025 confirmed that a review of PPE provision for Portering Teams had been undertaken and that recruitment was underway for four dedicated Security staff members, enabling the Committee to take assurance on the actions implemented to address the concerns raised.

Stress at Work

- In November 2025, the Committee was unable to take assurance on Stress at Work from a health and safety perspective due to insufficient data and the need to agree which information would be most relevant for oversight. An updated position was subsequently presented to the People, Organisational Development & Culture Committee (PODCC) in February 2026, where this Committee were able to take assurance.

Health and Safety Assurance Report

- The Health and Safety Assurance Report presented in January 2026 highlighted that work was ongoing to further develop processes for reviewing, monitoring and strengthening health and safety regulatory compliance across the Health Board. An update provided in March 2026 introduced a new Health and Safety Operational Compliance Report template, designed to strengthen reporting arrangements between Clinical Care Groups (CCGs) and the Integrated Quality, Finance and Performance Delivery Group, and to support CCGs in taking greater ownership of their local health and safety processes. In March 2026, a number of high and major risks identified through internal health and safety inspections remained outstanding. The Committee received assurance that these risks were under active review and requested a more

detailed report to support further scrutiny and oversight to be presented in May 2026.

Assurance and Risk Report

- The Assurance and Risk Reports presented in January and March 2026 highlighted a number of ongoing matters requiring attention. The January report identified the need to update outstanding audit recommendations, particularly those without revised target dates, with an agreed action to engage with all directorates to resolve recommendations that had been open for more than six months. The March report reflected the realignment of risks to the Health and Safety Committee following the disestablishment of the Health and Safety Sub-Committee. While the Committee was assured that actions were in place to manage these risks, it was agreed that further profiling was required to support effective scrutiny and oversight with updated reporting expected at the May 2026 Committee meeting.

Assure – *The following matters were areas where there was confidence that robust actions are in place and are sufficient to address the issues to operate effectively.*

Health and Safety Update report

- In May 2025, the Committee took assurance on the progress being made towards the implementation of the Health and Safety Dashboard. An update provided in November 2025 confirmed that Phase One of the dashboard implementation had commenced on schedule, marking the transition from development to operational use.

Health and Safety Annual Work Plan

- In May 2025, the Committee was assured that the Health and Safety Annual Work Plan was in place and being monitored by the HSSC. Since the disestablishment of the HSSC, responsibility for oversight of the plan has since transferred to the newly established Health and Safety Compliance Group (HSCG).

Electrical Infrastructure Risks

- In May 2025, the Committee received assurance that robust management processes were in place to effectively manage electrical infrastructure risks. This assurance was supported by evidence of established governance and control arrangements within the Estates function, including the use of authorised and certified electrical personnel, structured planning and communication processes to mitigate service disruption, and the active management and escalation of significant electrical risks through the corporate risk register.

Reinforced autoclaved aerated concrete (RAAC) Assurance Report

- The RAAC Assurance Report presented in May 2025 assured the Committee that reinspection surveys are up to date and that ongoing controls are

effectively managing RAAC risk. The report assured the Committee that re-inspection surveys across affected sites were up to date and that established operational control measures were in place to effectively monitor and manage RAAC risk on an ongoing basis.

Major Incident Plan

- The Major Incident Plan 2025/26 was approved by the Committee in July 2025 for onward recommendation to the Board. The accompanying report, which incorporated learning from the multi-agency emergency response exercise 'Exercise Tendley' conducted in February 2025, was received as evidence that the Plan had been tested and reviewed in line with Welsh Government NHS Emergency Planning Core Guidance (2015).

Management of Actions from Health and Safety Inspections

- In September 2025, the Committee received assurance that the risk stratification work undertaken in respect of historic Health, Safety and Security Team inspections had strengthened the Health Board's understanding of residual risk and enabled more effective prioritisation and management of outstanding actions.

Health and Safety Site Inspection Process

- The Health and Safety Site Inspection Process was reviewed and presented to the Committee in September 2025, resulting in the introduction of a revised approach designed to strengthen the management and oversight of actions arising from inspections.

Health and Safety Sub-Committee (HSSC) update

- The November 2025 Health and Safety Sub-Committee update provided a range of progress reports across key compliance and operational areas, from which the Committee was assured. Updates included progress with generator commissioning at Bronglais Hospital, with further resilience installations planned; ongoing monitoring of fire safety audits; and compliance review work relating to medical gas systems. The Compliance and Site Operations Group continued to oversee assurance metrics, asbestos-related matters and an identified out-of-hours coverage risk. The update also confirmed resolution of specific site-level issues, including pigeon guano at Withybush and Bronglais Hospitals, alongside a review of porter support arrangements within higher-risk environments

Proposed Health and Safety Governance Arrangements

- The November 2025 report on Proposed Health and Safety Governance Arrangements provided assurance that the Health and Safety Sub-Committee's functions had been fully mapped to a new governance model, with revised reporting, oversight and accountability arrangements in

place. In light of this assurance, the Committee approved the dis-establishment of the Health and Safety Sub-Committee.

Heavy Patient Compliance (Manual Handling Operations Regulations 1992)

- An update presented in November 2025 provided assurance on the progress made to date in fulfilling the Health Board's statutory obligations for Heavy Patient Compliance under the Manual Handling Operations Regulations 1992, including alignment with both national and local guidance, particularly in relation to the safe handling of patients.

Health and Safety Sub-Committee Table of Actions

- The Committee received assurance that outstanding actions from the dis-established HSSC Table of Actions have been assigned to the appropriate owners, with overarching responsibility now resting with HSCG, as assured in January 2026.

Items approved by the Committee during the year.

- Health and Safety Sub-Committee Terms of Reference – Approved 3 July 2025
- Major Incident Plan – Approved 3 July 2025
- Business Continuity & Planning Policy – Approved 3 July 2025
- Disestablishment of the HSSC – Approved 11 November 2025

6. Committee Effectiveness - Feedback from self-assessment process

As stipulated within Standard Orders, the Board introduced a process of regular and rigorous self-assessment and evaluation of the performance of the Health and Safety Committee.

- For the Health and Safety Committee this involved the completion of a short digital form which requested feedback on the following areas:
 - Board Assurance and Governance
 - Compliance with Health and Safety Legislation
 - Risk Management and Incident Learning
 - Workforce Engagement, Partnership and Culture
 - Committee Effectiveness and Delivery of the Terms of Reference

What has gone well:

- The Committee continues to provide a good level of assurance to the Board, with consistent average ratings of 4 across all 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.

- There has been ongoing improvement in the quality, focus and brevity of reports, supporting more effective assurance discussions.
- The Committee has continued to develop its role as an assurance-focused committee, rather than an operational forum.
- 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.
- Strengthen the Committee's strategic and thematic oversight, 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 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.

The results from the self assessment process are fed into an action plan. The process was undertaken during the year and is due to be reported to the Committee on 5 May 2026.

The Committee will also receive an update on progress at the mid-year point in November 2026.

7. Conclusion

The Committee is satisfied that it continues to operate effectively and in line with its Terms of Reference. Issues have been escalated to Board as appropriate, and the Committee uses feedback from the self-assessment process to evolve and continually improve.