

## MINUTES OF THE Health and Safety Committee MEETING

Date of Meeting: **9:30 AM, Tuesday 04 March 2025**  
 Venue: **Microsoft Teams Meeting/ Ystwyth Boardroom; Ystwyth Board Room Avocor (Hywel Dda UHB - Generic Account)**

Present:	Ann Murphy	Independent Member – Trade Union (Chair)
	Chantal Patel	Independent Board Member
	Delyth Raynsford	Independent Board Member
In attendance	Ruth Poynting	Committee Services Officer (minutes)
	James Severs	Executive Director of Allied Health Professions and Health Science
	Adam Springthorpe	Health & Safety Manager
	Gareth Cottrell	Deputy Chief Operating Officer
	Amanda Glanville	Assistant Director of People Development
	Jonathan Arthur	Deputy Director of Health Sciences
	Anthony Dean	Estates – Staff Representative
	Charlotte Wilmshurst	Assistant Director of Assurance and Risk
	Rob Elliott	Director of Estates, Facilities and Capital Management
	Sam Hussell	Head of Emergency Preparedness, Resilience & Response (EPRR)
	Tim Harrison	Head of Health, Safety & Security
	Simon Day	Head of Maintenance & Engineering
	Paul Evans	Head of Estates Risk & Compliance
	Karen Ryan	Head of Occupational Health
	Claire Lohse	Assistant Operations Manager
	Rebecca Dodds	Hotel Facilities Assistant
Apologies	Andrew Carruthers	Chief Operating Officer (Gareth Cottrell deputising)
	Eleanor Marks	Vice Chair
	Simon Chiffi	Head of Operations (Simon Day/Paul Evans deputising)
	Sharon Daniel	Interim Executive Director of Nursing, Quality & Patient Experience
	Joanne Wilson	Director of Corporate Governance/Board Secretary (Charlotte Wilmshurst deputising)
	Ardiana Gjini	Executive Director of Public Health (Sam Hussell deputising)

Minutes Ref.	Item	Action
	<b>Governance</b>	
HSC(24)125	<b>Welcome and Apologies</b>	
	Ms Ann Murphy welcomed everyone to the meeting, introductions were made, and apologies were noted as above.	
HSC(24)126	<b>Declarations of Interest</b>	

There were no declarations of interest.

HSC(24)127 **Minutes of Previous Meeting of the Previous Meeting held on 14 January 2025**

The minutes of the previous meeting were reviewed and APPROVED by the Committee with no amendments.

**Decision:**

The Minutes of the meeting held on 14 January 2025 were APPROVED as an accurate record.

HSC(24)128 **Matters Arising and Table of Actions from Meeting held on 14 January 2025**

The Table of Actions were noted.

Ms Charlotte Wilmshurst commented that the action to present a report on Electrical Infrastructure will be extended to the next Committee meeting.

Risk 1745, which covers the Estates condition risk. This will also be brought to the next Health and Safety committee meeting in May.

**Decision:**

The Table of Actions was NOTED.

HSC(24)129 **HSC Self Assessment Outcome Report 2024/25**

Ms Charlotte Wilmshurst introduced the item. The self-assessment survey was completed before Christmas and received six responses.

The survey responses suggested that there is a need for a shift to more of a strategic focus and to strengthen assurance reporting through clear data driven reports. It was also suggested that there is a need for clear questions from the committee to achieve more effective responses.

These responses have been taken forward into the action plan in the body of the report.

The group considered the output from the self-assessment and agreed the associated action plan.

**Decision:** The HSC were ASSURED by the Self-Assessment Outcome Report.

HSC(24)130 **Health and Safety Committee Terms of Reference**

Ms Wilmshurst introduced the changes to the terms of reference. One key change is to the approval process for Health and Safety policies which has now moved to the Health and Safety Sub Committee (HSSC). The Health and Safety Committee retains approval of the overarching Health and Safety Policy.

The attendance requirements for Estates and Facilities will need to be reviewed to reflect the change in Mr Rob Elliott's role as a Member of the Committee.

Ms Murphy noted that the number of Independent Members will be reduced to four, as agreed in a Public Board meeting, which

will need to be considered for future meetings as this could affect quoracy.

There are also some changes to be incorporated to item 3.6 following correspondence that Ms Wilmshurst has received today.

**Decision:** The HSC APPROVED the changes to the Terms of Reference.

## **Health and Safety Updates**

HSC(24)131

### **Health and Safety Sub Committee Update**

Mr Jonathan Arthur shared an update from the HSSC following the meeting on 4 February.

There were no matters to alert the Committee to.

The Terms of Reference for the Sub Committee were agreed.

HSSC wished to advise HSC of the following:

- Further discussion ongoing around the reporting routes for the Ventilation Group and Water Safety Group.
- Further discussion ongoing regarding the leadership for the Security Management Group.
- The frequency of Fire Safety meetings is under discussion.
- Discussion is needed before review of the Terms of Reference for the Environmental Hygiene Group can take place.
- The Terms of Reference for the Electrical Safety Group, Medical Gas Pipeline Systems Safety and Compliance and Site Operations Group, Radiation Protection Group, and the Trade Union Health & Safety Group were approved.

In relation to violence and aggression management, a paper is being considered around the Porter role, which currently encompasses portering duties and security responsibility.

In response to a query from Ms Delyth Raynsford Mr Arthur noted that a timeline is not yet in place for a Violence and Aggression Management Plan and the issue with the Porter role. Mr Arthur will report back after a discussion with Mr Severs. This matter needs further exploration as a matter of urgency.

JA

Mr James Severs noted that a meeting is being planned in the next two weeks with the Security Management Group led by Mr Tim Harrison to discuss corporate risks 1860 and 1861 which will be delegated to the Sub Committee. A Health and Safety 'In Committee' meeting will take place in May to update on these risks.

The Committee APPROVED the HSSC Terms of Reference.

**Decision:** The HSC NOTED the Update Report and APPROVED the HSSC Terms of Reference.

## **Staff Story**

HSC(24)132

Ms Rebecca Dodds shared her recent experience working around Reinforced Autoclaved Aerated Concrete (RAAC) in Withybush General Hospital (WGH). Ms Dodds was working within a Dementia Ward which closed and was then redeployed closer to home in WGH.

Racking was put in place by the Works Team and two members of staff including Ms Dodds went back in to clean the ward to allow for it to be reopened. Personal Protective Equipment (PPE), which included aprons and masks, was provided but staff felt this was insufficient for the level of dust.

Additionally, the two members of staff were given a two-week deadline to complete the work which was very difficult.

Currently work is ongoing on the Stroke Ward and concerns have been raised around the level of dust being produced by this work and the lack of partition which means dust is being emitted through to the other parts of the hospital including the kitchen. Mr Simon Day agreed to take these concerns back to the Capital Projects Team. As this work is resurveying it should theoretically be less intrusive, but lessons learned may need to be taken from this experience and incorporated into the discussion around the frequency of RAAC resurveying. They are also considering AI technology for inspections.

SD

Mr Elliott added that the initial remedial work included completely closing and securing the wards. This may need to be reconsidered for the reinspection work as an alternative. Mr Day noted that for the full initial works, a builders' clean was also included in the specification which lessened the work for the Facilities Team.

Ms Raynsford raised concerns about the need to provide opportunities to hear the voices of the staff for them to report their concerns. There needs to be a robust process in place to protect our patients and staff going forward.

Mr Day offered to come down to meet the staff to listen to their concerns via a meeting.

Ms Karen Ryan stated that it would be beneficial to review the risk assessment that informed the PPE allocation decision and added that while larger safety concerns are raised through Datix, a simpler reporting mechanism may also be helpful.

SD

Ms Claire Lohse added that the decision to open the offices at one end of the site was made by the hospital management team and for staff to get to these offices they do have to walk through areas with high levels of dust.

Mr Severs thanked Ms Dodds and Ms Lohse for sharing their experiences and noted that the governance processes will be strengthened to protect staff and patients.

*Ms Dodds and Ms Lohse left the meeting.*

**Health and Safety Update**

Mr Tim Harrison and Mr Adam Springthorpe presented the Health and Safety Update, noting much of the work outlined is around electrical safety.

A new electrical safety intranet page was launched in the week commencing 24 February 2025.

Additionally, electrical safety training is now being incorporated into Level 2 Fire Safety training which will be online in the next few months.

Mr Springthorpe highlighted concerns around the reporting of issues being resolved in response to audits.

In order to provide better oversight of the actions from audits, findings will move to the AMaT system, which is a system already used by many managers in the Health Board to manage audits.

This will allow the team to see what mitigation has been put in place or whether risk assessment has been undertaken to acknowledge unresolved risk.

Auditing has been paused to allow time to move findings to the new system for improved monitoring.

Work will also be needed to raise the profile of the Health and Safety audits as activity around them is limited compared to other types of audits. Audit tracking will take place in HSSC.

Each of the new Clinical Care Groups will have monitoring arrangements in place to provide further assurance on this.

Mr Springthorpe assured that the system can be tailored to notify the risk holder of outstanding actions.

Ms Wilmshurst clarified the language used for audit actions, noting that risks are categorised on Datix and actions are to be tracked through AMaT.

Mrs Raynsford raised her concerns on the high number of risks including the arrangements in place for monitoring, oversight and control.

Mr Severs highlighted that work is needed to strengthen the governance arrangements including a clear written methodology for the process of audits. This is being developed currently and will be discussed at HSSC over the next two months.

The Committee were assured that the Health, Safety and Security team have created an electrical safety intranet resource, that electrical safety training will be incorporated into mandatory fire training and that pertinent Health and Safety information has been shared via a 7-minute brief but would like to advise the Board that work is ongoing to bring audit monitoring up to compliance.

Discussion took place whether Health and Safety audit monitoring should be an item to be an 'advise' or 'alert' for the Board. The Committee agreed that as work is being undertaken to address the issue this would be best as an advisory item.

The report needs to be modified in future to identify the level of organisational risk associated with the items contained in the report.

TH/AS

**Decision:** Health and Safety Update

HSC were ASSURED That the HSS Team have created a new electrical safety intranet resource highlighting the risks posed by electricity and electrical equipment to HDdUHB staff.

HSC were ASSURED That electrical safety training will be incorporated within mandatory fire training.

HSC were ADVISED that the HSS Team are reviewing and updating their audit system in response to the Internal Audit findings and agreed to advise the Board.

HSC were ASSURED That the HSS Team have shared pertinent H&S information via their 7-minute brief.

HSC(24)134

**Health and Safety Internal Audit Report**

Mr Harrison informed the Committee that the NHS Wales Audit on Health & Safety Compliance provided limited assurance and presented five findings:

- Lack of oversight on mandatory training (medium).
- Insufficient monitoring of audits (high).
- Slow reporting of RIDDOR incidents to the Executive Team. (medium).
- Lack of Executive Director attendance at Committee (medium).
- Gaps in assurance of reporting to H&S Committee (high).

An action plan has been developed, and timescales have been put in place to address all items. This has been reported back to the last Audit Risk and Assurance Committee (ARAC).

In response to a query from Ms Murphy Mr Harrison stated that audit actions are assigned to Service Delivery/Directorate Managers and assured that AMaT will provide better oversight once put in place. Many actions also overlap with Quality and Safety responsibility.

Ms Wilmshurst added that the workplan has been updated to resolve gaps in reporting and that the attendance issues have been resolved going forward.

Mr Harrison assured that the timescales in the action plan are believed to be realistic and achievable.

As this report has limited assurance a follow up audit will take place in the next financial year following the closing date of the recommendations.

**Decision:** The HSC NOTED the Health and Safety Internal Audit Report.

HSC(24)135

**Martyn's Law/ Terrorism Protection of Premises Bill: A Report on the Detail, Impact on the Organisation, and Timelines**

Mr Harrison stated that the purpose of the report is to provide an overview of Martyn's law and the potential impact this will have on the Health Board.

This legislation is not expected to be put in place for at least two years but there may be a need to assess any outstanding actions to ensure the Health Board is prepared before then.

Martyn's Law related to the preparation of public premises for responding to terrorist events. The Bill establishes a tiered approach for the levels of preparation needed. HDdUHB would be considered under the 'Enhanced' criteria for premises.

This would necessitate terrorism risk assessments and clear documentation of all required procedures and control measures. Ms Sam Hussell highlighted that this is linked to an ongoing issue around the availability of security personnel. Terrorism Advisors have already visited sites to assess terrorism response procedures and work has been undertaken to ensure that sites are prepared for any possibility. Good relationships have also been fostered with the Police and Counter Terrorism Advisors.

This will be monitored under security management and emergency preparedness.

The last Counter Terrorism Report needs to be shared in the next In Committee meeting for discussion.

**Decision:**

The HSC NOTED the report.

HSC(24)136

**Update on Traffic Flow Outside PPH**

Mr Gareth Cottrell stated that there are ongoing issues relating to temporary traffic arrangements outside PPH.

Contact has been made with the Highways Department for Carmarthenshire County Council (CCC), but a resolution has not been agreed. Mitigations are in place such as personnel in place during the day to ensure a good flow of traffic is achieved as far as reasonably possible.

Mr Anthony Dean shared feedback from staff that they would like the issue to be escalated further. Mr Cottrell assured that this will take place. Conversations with the council will continue to reach a resolution as soon as possible.

Mr Elliott raised concern that work is now expected to continue until February 2026 and added that in previous years contractor access has been provided at the bottom of the site. If this could be a possibility to address emergency access it may be best to request that the council pay to enable this.

Ms Hussell commented that having only one point of entrance/exit for the site is a business continuity issue.

Ms Raynsford stated that learning may be needed around Highway access to sites, including consultation with the Welsh Ambulance Service and the Police. A strategic discussion needs to take place regarding this issue.

The group agreed that improved communication is needed with staff on site to assure them that correspondence is taking place with the council to rectify these issues.

*Jeni Bryant joined the meeting.*

The Committee agreed that this should be highlighted as an advisory item for Board due to concerns about the ongoing work, business continuity issues as well as concerns about not being involved at the consultation/ planning process for work on the highways.

Mr Severs agreed to discuss the issue with Mr Andrew Carruthers and Mr Gareth Cottrell to assess whether there are any further mitigations that can be put in place. Further correspondence with the Highways Dept is needed to escalate the matter. Verbal update to be provided at next meeting.

JS/AC

**Decision:**

The HSC NOTED the report and agreed to ADVISE the Board of the concerns raised.

HSC(24)137

**Health and Safety Regulations**

**Confined Space Regulations**

Mr Paul Evans informed the group of the robust arrangements currently in place to manage and control confined spaces. HDdUHB sites include a number of confined environments such as service ducts, tunnels, shafts and Plant rooms. Processes include reducing the number of entries to confined spaces to strictly necessary work and monitoring air quality before and during access. Risk assessments have been carried out. A range of PPE is provided for work in these areas and access is restricted to people who have received the necessary training. The training provided is scenario-based learning, not just classroom. Other parties are sometimes consulted for out-of-hours access as needed.

A review of the arrangements will take place over the next couple of months and will be reported back to HSSC for assurance.

Mr Springthorpe added that in response to incidents such as the sounding of carbon monoxide alarms learning is undertaken, and areas are reviewed.

In response to a query from Mrs Raynsford Mr Evans noted that HDdUHB does have increased numbers of confined spaces due to the age of many buildings (some with underground tunnels).

Mr Severs requested that future reports also include the numbers of confined spaces, where are they and what is the risk associated with them, compliance statistics, action plan to achieve 100% and numbers of people who have undertaken training. A report can be brought to the next meeting to include this additional information including rescue protocols as requested by the Chair for assurance.

PE

Mr Day stated that some work can create confined spaces in areas that are not normally deemed as such. This would make it difficult to provide a definitive answer to the total number of confined spaces however there is a list of set confined spaces.

**Decision:**

The HSC were ASSURED by the report, noting that further detail will be discussed in the Sub Committee.

HSC(24)138

**Bariatric Compliance (Manual Handling Operations Regulations 1992)**

Ms Jeni Bryant shared that Bariatric Compliance was initially shared with the Committee to address compliance and to audit how bariatric patients are managed. The paper being presented at this Committee now focuses on how this information is collected and managed, providing assurance that this is being monitored.

As this information is now being maintained centrally this is expected to take pressure away from clinical staff. Bariatric patients are defined as people admitted with a BMI over 30. There has been a significant increase in the numbers of patients in this category in 2024.

Ms Bryant assured that adequate support is in place to be able to achieve the timescale set out by the Action Plan in the report.

Mr Severs and Ms Bryant agreed that work is also needed for staff from an Occupational Health point of view.

An updated report will be presented to the HSSC in November.

**Decision:**

The HSC were ASSURED by the report.

**For Information**

HSC(24)139

**HSC Workplan**

No comments were made on the HSC workplan.

**Decision:**

The HSC NOTED the report.

HSC(24)140

**Any Other Business**

Ms Murphy drew the meeting to a close and thanked Ms Raynsford for her input and contribution into this committee during her time as an Independent Member.

HSC(24)141

**Matters for Escalation to Board**

- The Committee would like to ADVISE the Board of work being undertaken to strengthen audit monitoring in response to the Internal Audit findings.
- The Committee would like to ADVISE the Board that traffic works outside PPH are expected to be in place until February 2025 which is impacting entrance to the site.

**Date and Time of Next Meeting**

Tuesday 6 May 2025, 9:30-11:30