

# Health and Safety Committee

ANNUAL REVIEW REPORT

2024/2025

## **1. Introduction and Chair's summary**

In line with Standing Orders the Health and Safety Committee (HSC) 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, setting out how the Committee has met its Terms of Reference (TORs) 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: and

### **Chairs Reflections**

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

This report gives a flavour 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 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 by the Estates Department on the fire enforcement notices from Mid and West Wales Fire and Rescue Service has been advancing well across the sites of Hywel Dda, this is an excellent example of collaborative working at its best.

I would also like to, again thank, our patients, visitors, and staff for their cooperation and understanding whilst we continue to undertake ongoing RAAC surveys. The Committee is committed to ensuring that safety is maintained, and disruption is kept to a minimum throughout.

I would also like to commend the excellent work generated by the health, safety and security team who worked 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 hearing the voice of the patient, and their experience of receiving treatment within our environment.

## 2. Terms of Reference and Workplan

The TOR for the Health and Safety Committee is reviewed on an annual basis or following any significant changes. The TORs were last reviewed on 28/11/2024.

### [HSC 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 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.

### [HSC Workplan](#)

## 3. Sub-Committee

The Health and Safety Sub-Committee, established 6 December 2024, reports into the Health and Safety Committee with its own terms of reference and workplan for the year.

The Sub-Committee's TOR were last reviewed on 6 February 2025.

In line with their Terms of Reference, the Sub-Committee is required to provide a report after each meeting, as well as produce an annual report which is scheduled to be presented to the Committee on 3 July 2025 reporting on activity throughout the year.

## 4. Table of attendance

Membership	Date 07/05/24	Date 09/07/24	Date 10/09/24	Date 12/11/24	Date 14/01/25	Date 04/03/25
Ann Murphy	✓	✓	✓	✓	✓	✓
Delyth Raynsford	✓	✓	x	✓	x	✓
Iwan Thomas	✓	x	✓	✓	✓	x
Eleanor Marks	✓	✓	✓	✓	✓	x
Chantal Patel	N/A	N/A	N/A	N/A	✓	✓
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 (HSC) had no items of which to **alert** the Board during this year.

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

### Health and Safety Update Report

- In May 2024 a report was requested to address safety concerns raised by Facilities staff around the use of **DiffX** cleaning agent. After not receiving assurance at the meeting in July 2024, a further report to the HSC meeting in September 2024 provided assurance that the four-step plan was progressing to improve education around the use of the cleaning agent.
- The Health and Safety Committee governance structure required strengthening following discussion at the May 2024 meeting. As part of the work to address this, the Health and Safety Sub Committee (HSSC) was established with the first meeting taking place 6 December 2024. Revisions to the Terms of Reference for both HSC and HSSC established the reporting arrangements.
- In March 2025 the Committee was unable to take assurance from the update provided on health and safety site audits on learning that significant number of issues raised through the audits remain unresolved, and that the associated level of risk was unquantified. The Health, Safety and Security team are in the process of reviewing their processes and will be using the AMaT system to manage audits moving forward.

### Fire Safety Management Update

- The Committee were not able to take assurance on the Fire Risk Assessments in the update presented in May 2024. The matter was presented again in the **Fire Safety Audit System (Boris)** report in September 2024 where the Committee were again not assured due to technical issues with the system. Assurance however was then received in an updated **Fire Safety Audit System (Boris)** report in November 2024 that the system was in place to manage and escalate fire safety risks.

### Estates Low Voltage (LV) Electricity Compliance Update

- The Committee advised the Board of ongoing concerns around electricity compliance for low voltage items following the meeting in May 2024. An update report presented in November 2024 provided assurance that many recommendations have been completed, including high risk items.

### **CONTEST 6-Month Update Report**

- The Committee were not initially assured of the preparedness of the organisation for the implementation of ‘Martyn’s Law’ or ‘the Terrorism Protection of Premises Bill’ when the report was first presented in May 2024. An update provided in March 2025 provided assurance that whilst the legislation was not expected to be in place for at least two years, a preparedness plan is being developed in advance.

### **Operational Risk Report**

- Assurance could not be taken on the management of risk 1263 “risk to patient safety due to ongoing issues with vermin (pigeons) at Withybush Hospital” presented in the meeting in July 2024. Outstanding queries were to be forwarded to the Executive Director of Allied Professions and Health Science.

### **Analysis of Sharps Incidents Report (financial year 2023-24 and financial year 2024-25 (up to 31/08/24))**

- Limited assurance was received on the analysis of sharps incidents in November 2024 as there seemed to be an increasing trend in numbers of needle stick incidents. The Sharps Safety Group was reconvened to manage this risk and report directly to HSSC.

### **Prince Philip Hospital (PPH) – Temporary Traffic Control Issues Report**

- In November 2024, traffic control measures in place at PPH were having an adverse impact on traffic accessing the site, and the Committee requested that concerns were raised with Carmarthenshire County Council. An update provided in March 2025 highlighted that the traffic control measures are scheduled to be in place until February 2026 and continue to impact access to the site. Work is ongoing to communicate issues to staff in PPH and improve communication with the Council on any future works.

### **Health and Safety Regulations Overview**

- Assurance was not provided by the overview presented in January 2025 as three regulation areas did not have formal policies or procedures. The Health, Safety and Security Department are taking steps to strengthen monitoring arrangements and arrange training to close these gaps in compliance as a priority in 2025.

### **Staff Story - Reinforced Autoclaved Aerated Concrete (RAAC) remedial works**

- A staff story presented by members of the Facilities team provided insight to challenges of domestic staff working in areas where Reinforced Autoclaved Aerated Concrete (RAAC) remedial works were undertaken in 2023/24. A

commitment was made to review and improve the process of re-inspection and ensure lessons learned help reduce the risks to patients and staff.

**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 2024, assurance was provided that suitable steps to manage cable management risks associated with medical devices on beds were being taken on Health Board sites, including electrical safety awareness training, and continued electrical safety audits.
- Assurance was provided in the meeting in May 2024 that the inspections undertaken by the Health and Safety Executive (HSE) regarding RAAC and asbestos have been positive.
- The update in September 2024 provided assurance that progress has been demonstrated towards compliance with the Control of Vibration at Work Regulations 2005 and the Work at Height Regulations 2005.
- Security and Manual Handling information is shared through ‘seven-minute briefings’ as noted in the November 2024 update.
- The January 2025 update confirmed that adequate arrangements for legionella control, asbestos management control and safe working at height arrangements are in place to manage and monitor health and safety compliance within these high-risk areas.

### **WHTM (Welsh Health Technical Memorandums) 6-Monthly Update Report**

- Assurance was provided in May 2024 that work was underway to address the further improvement required to achieve WHTM compliance. This was reinforced by the update presented in November 2024 which showed improved compliance, however delays were also noted in Authorised Person appointments despite staff completing the training.

### **Fire Safety Training**

- Assurance was received on fire safety training through updates in July and September 2024 which noted that training needs analysis took place, and the training material had been strengthened. The update in March 2025 informed the Committee that electrical safety training is being incorporated into fire safety training which will now move to online learning.

### **Fire Management Update**

- The update in January 2025 informed the Committee that the fire works programme dates for the full fire investment programme have been agreed with Mid and West Wales Fire and Rescue Service (MAWWFRS).

### **Reinforced Autoclaved Aerated Concrete (RAAC)**

- In September 2024, the update of the capital programme of works and the ongoing work to manage the risks of RAAC provided assurance. This was initially managed by control groups which were then stood down and this

matter is now being managed as business as usual by operational teams as assured in the January 2025 meeting.

### **Operational Risks Assigned to Health and Safety Committee Report**

- Assurance was provided that relevant controls and mitigating actions are in place to address these risks following discussion in the November 2024 meeting. These are now overseen by the Health and Safety Sub-Committee.

### **Health and Safety Internal Audit Report**

- An action plan is in place to address the areas of improvement identified in the Health and Safety Internal Audit Report which provided a limited assurance rating as assured by the report presented in the March 2025 meeting.

### **Compliance with the Confined Space Regulations 1997**

- The report presented in March 2025 provided assurance that robust management arrangements are in place for work in Confined Spaces.

### **Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 2013 (RIDDOR) – 6 Monthly Update**

- This update presented in November 2024 provided assurance that the Health Board is operating in compliance with RIDDOR, however there were some areas identified for improvement, which will be raised at directorate governance/quality and safety meetings. The **RIDDOR – All Wales Benchmark Update** presented in January 2025 reinforced Health Board's compliance status alongside data from other organisations.

### **Control of Substances Hazardous to Health (COSHH) Regulations**

- Assurance was received on progress made and the continuing work to address the remaining gaps in compliance with COSHH regulations in the meeting in July 2024. The associated policy was also updated and shared in January 2025 and approved via Chair's Action on 20 February.

### **Health and Safety Display Screen Equipment Regulations**

- Assurance was taken in July 2024 that the Health Board was compliant with Health and Safety Display Screen Equipment Regulations.

### **Bariatric Compliance (Manual Handling Operations Regulations 1992) Update Report**

- In September 2024, the Committee was unable to take assurance on progress made to reach compliance against the Manual Handling Operations Regulations, specifically in relation to people with higher body weights, due to a lack of evidence. A further update given in March 2025 provided assurance that significant progress has been made in monitoring and assessing the care delivery for bariatric patients.

### **Items Approved by the Committee During the Year**

- Policy 258 - Waste Management Policy – Approved 7 May 2024
- Policy 403 - Water Safety Policy - Approved 7 May 2024
- Framework 1155 - Critical Threat Level Response - Approved 7 May 2024
- Major Incident Annual Plan 2024/25 – Approved 9 July 2024
- Policy 703 - Control of Substances Hazardous to Health (COSHH) – Approved 20 February 2025
- Policy 010 – Health and Safety Policy – Approved 10 September 2024
- HSC Terms of Reference – Approved 12 November 2024 then updated and approved to align with the HSSC in March 2025
- Health and Safety Sub-Committee (HSSC) Terms of Reference – Approved March 2025

The approval of policies, with the exception of Policy 010 – Health and Safety Policy was removed from the HSC Terms of Reference in November 2024 and now falls under the remit of the HSSC.

## **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:
  - Governance and administration
  - Committee's inputs
  - Conduct of Committee meetings
  - Interface with other Committees, including the Board
  - Committee's impact
  - Individual role on Committee

The results from which were fed into an action plan, combining information and Auditor/Regulator feedback.

The process was undertaken during the year and reported to the Committee on 4 March 2025 - [Health and Safety Committee \(HSC\) Self-Assessment Outcome Report 2024/25](#)

The Committee will receive an update on progress at the mid-year point.

## **7. Conclusion**

The Committee is satisfied that it continues to operate effectively and in line with the 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.