



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	07 July 2026
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Health and Safety Assurance Report
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	James Severs, Executive Director of Allied Health Professions and Health Science
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Adam Springthorpe, Health & Safety Manager

<b>Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)</b>
Er Sicrwydd/For Assurance

**ADRODDIAD SCAA  
SBAR REPORT**

<p><b><u>Sefyllfa / Situation</u></b> This Health and Safety Assurance Report is presented to the Health and Safety Committee (HSC) to provide an update on the following topics:</p> <ul style="list-style-type: none"> <li>• Key risks and emerging issues</li> <li>• Performance against key safety indicators</li> <li>• Areas of compliance and non-compliance</li> <li>• Actions in place to mitigate identified risks</li> </ul>
<p><b><u>Cefndir / Background</u></b> This report provides an evidence-based assessment of health and safety effectiveness across the Health Board as of July 2026.</p> <p><b>Risk and Compliance Monitoring</b> It includes an analysis of workforce risks, compliance with mandatory training, and incident reporting trends.</p> <p><b>Governance and Evidence Sources</b> The report uses multiple data sources like incident reports and management actions to assess strengths and vulnerabilities.</p> <p><b>Assurance Levels and Recommendations</b> Assurance conclusions help to classify risk control effectiveness and guide Committee decisions for ongoing improvements.</p>
<p><b><u>Asesiad / Assessment</u></b> Please see the accompanying Health and Safety Assurance Report (Appendix 1).</p>
<p><b><u>Argymhelliad / Recommendation</u></b> The Health &amp; Safety Committee is asked to <b>take assurance</b> that appropriate processes and governance arrangements are in place to support effective health and safety management,</p>

noting the continued strong performance in incident reporting and associated oversight arrangements, and that targeted improvement actions are being implemented to address identified risks, including improving mandatory training compliance, strengthening manual handling arrangements, and effectively managing behaviour-related risks.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers contractors etc.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	1. Safe
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	1 Workforce Stabilisation 9 Digital plan
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

<b>Gwybodaeth Ychwanegol:</b> <b>Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Contained within the body of the report and associated Health Board policies.
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch:	<ul style="list-style-type: none"> <li>Health and Safety Compliance Group</li> </ul>

Parties / Committees consulted prior to Health and Safety Committee:	
--	--

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	No direct costs.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	There is a positive impact on staff and patient safety, health and wellbeing through compliance with health and safety regulations.
<b>Gweithlu: Workforce:</b>	Potential for adverse future staffing impacts if health and safety legislation is not complied with as they relate to employee safety.
<b>Risg: Risk:</b>	Risk to health and safety management.
<b>Cyfreithiol: Legal:</b>	A breach of health and safety regulations, such as the Workplace (Health, Safety and Welfare) Regulations 1992, could result in the issue of prohibition or improvement notices or criminal proceedings.
<b>Enw Da: Reputational:</b>	Prosecutions and claims due to breaches in legislation or personal injury claims can lead to negative publicity.
<b>Gyfrinachedd: Privacy:</b>	Not Applicable.
<b>Cydraddoldeb: Equality:</b>	No evidence gathered to indicate a negative impact on any protected group/s.

# Health and Safety Assurance Report

**Health and Safety Committee**

July 2026

# Situation

This report aims to provide assurance to the Health & Safety Committee on the effectiveness of health and safety arrangements across the Health Board.

- The report outlines:
- Key risks and emerging issues
- Performance against key safety indicators
- Areas of compliance and non-compliance
- Actions in place to mitigate identified risks



## **Purpose and Scope**

This report provides an evidence-based assessment of health and safety effectiveness across the Health Board as of July 2026.

## **Risk and Compliance Monitoring**

It includes an analysis of workforce risks, compliance with mandatory training, and incident reporting trends.

## **Governance and Evidence Sources**

The report uses multiple data sources like incident reports and management actions to assess strengths and vulnerabilities.

## **Assurance Levels and Recommendations**

Assurance conclusions help to classify risk control effectiveness and guide Committee decisions for ongoing improvements.

# Executive Assurance Summary



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

Area	Level of assurance (RAG)	Key items to consider
Manual Handling	Orange	Local risk linked to bariatric case
Training Compliance	Orange	Variation across sites
Incident Reporting	Green	Stable trends
Violence and aggression	Orange	Variability due to patient cohort
Reducing Restrictive Practice (RRP) compliance	Orange	Significant variation illustrated

# Key Risks & Issues



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## Manual Handling Incidents

### **Issue:**

Increase in incidents April–May 2026 (Clinical Decision Unit (CDU), Glangwili Hospital (GGH))

### • **Assurance:**

- Specialist support in place
- Controls implemented
- Case-specific risk (not systemic)

### • **Gap / Risk:**

- Continued incidents during period
- Pressure from complex bariatric care

## Estate / Training Risk

Issue: Seeking sustainable training venue in Ceredigion.

### **Assurance:**

- Alternative identified
- Lower complexity option

### **Risk:**

- Deadline (mid-July 2026 vacation of current venue)

## Workforce / Leadership Risk

Issue: Vacant Head of Health and Safety role

### **Assurance:**

Recruitment now successful  
Stability expected; with successful applicant starting on 12 October 2026.

### **Risk:**

Temporary leadership gap;

## Governance / Information Access

Reducing Restrictive Practice (RRP) intranet site has now been developed

### **Assurance:**

- Improved access to guidance and training
- Positive governance development



## **Increased Manual Handling Risk**

Temporary rise in manual handling incidents due to complex bariatric patient care increased physical demands on staff.

## **Response and Controls Implemented**

Manual Handling Team involvement, patient-specific risk assessments, and specialist equipment improved safety measures.

## **Management Review and Assurance**

Senior managers reviewed and confirmed appropriate controls balancing staff safety and compassionate patient care.

## **Learning for Future Planning**

Incident highlighted need for early escalation, better equipment availability, and workforce support in high-risk cases.

# Health and Safety Metrics



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## Health and Safety Mandatory Training E-learning Compliance (at 31/03/2026):

### Health, Safety & Welfare Level 1

Function	Headcount	% compliance
Executive Allied Health Professions and Health Sciences	2	100.0%
Finance	103	98.1%
Digital	373	96.5%
Workforce and Organisational Development	260	93.8%
Medical	142	93.7%
Mental Health and Learning Disabilities	1374	93.2%
Operational Allied Health and Health Sciences	1382	91.5%
Public Health	164	90.9%
Nursing, Quality and Patient Experience	210	90.5%
Estates and Facilities	1035	88.9%
Chief Operating Officer Management	129	88.4%
Pharmacy and Medicines Management	275	88.4%
Strategy and Planning	58	87.9%
Community and Integrated Medicine	3930	87.5%
Primary Care	335	83.9%
Planned and Specialist Care	2696	83.8%
Chief Executive	Zoom Out	80.0%

### Display Screen Equipment (DSE)

Function	Headcount	% compliance
Finance	103	100.0%
Medical	85	100.0%
Pharmacy and Medicines Management	18	100.0%
Workforce and Organisational Development	216	100.0%
Digital	361	98.9%
Estates and Facilities	87	98.9%
Mental Health and Learning Disabilities	174	98.9%
Strategy and Planning	49	98.0%
Primary Care	132	97.0%
Nursing, Quality and Patient Experience	122	96.7%
Public Health	91	96.7%
Community and Integrated Medicine	433	96.1%
Operational Allied Health and Health Sciences	134	94.8%
Planned and Specialist Care	407	94.3%
Chief Operating Officer Management	36	88.9%
Chief Executive	90	87.8%

### Violence & Aggression Module A

Function	Headcount	% compliance
Executive Allied Health Professions and Health Sciences	2	100.0%
Chief Operating Officer Management	129	99.2%
Workforce and Organisational Development	260	98.8%
Medical	142	98.6%
Digital	373	98.1%
Finance	103	98.1%
Nursing, Quality and Patient Experience	210	97.6%
Mental Health and Learning Disabilities	1374	97.5%
Operational Allied Health and Health Sciences	1382	96.7%
Public Health	164	95.7%
Estates and Facilities	1035	95.1%
Pharmacy and Medicines Management	275	94.5%
Community and Integrated Medicine	3930	93.8%
Strategy and Planning	58	93.1%
Planned and Specialist Care	2696	92.6%
Primary Care	335	89.3%
Chief Executive	95	86.3%

## Manual Handling (MH) Compliance (at 31/03/2026 and 31/05/2026 for comparison):

### Level 1 MH (Non-Patient Handling) at 31/03/2026:

Function	Headcount	% compliance
Executive Allied Health Professions and Health Sciences	2	100.0%
Workforce and Organisational Development	263	93.9%
Digital	370	93.5%
Finance	102	93.1%
Medical	141	92.9%
Public Health	167	88.6%
Strategy and Planning	57	84.2%
Nursing, Quality and Patient Experience	208	84.1%
Chief Executive	93	82.8%
Chief Operating Officer Management	132	82.6%
Pharmacy and Medicines Management	274	82.1%
Operational Allied Health and Health Sciences	1389	81.8%
Primary Care	320	80.6%
Estates and Facilities	1043	80.4%
Mental Health and Learning Disabilities	1375	79.2%
Community and Integrated Medicine	3912	77.7%
Planned and Specialist Care	2678	76.6%

### Level 1 MH (Non-Patient Handling) at 31/05/2026:

Function	Headcount	% compliance	
Executive Allied Health Professions and Health Sciences	2	100.0%	=
Digital	373	94.4%	+ 0.9%
Finance	103	93.2%	+ 0.1%
Workforce and Organisational Development	260	90.8%	- 3.1%
Medical	142	89.4%	- 3.5%
Public Health	164	87.2%	- 1.4%
Chief Operating Officer Management	129	85.3%	+ 2.5%
Nursing, Quality and Patient Experience	210	83.8%	- 0.3%
Operational Allied Health and Health Sciences	1382	82.5%	+ 0.7%
Estates and Facilities	1035	82.4%	+ 2.0%
Pharmacy and Medicines Management	275	82.2%	+ 0.1%
Strategy and Planning	58	81.0%	- 3.2%
Chief Executive	95	80.0%	- 2.8%
Community and Integrated Medicine	3930	77.9%	+ 0.2%
Mental Health and Learning Disabilities	1374	77.5%	- 1.7%
Primary Care	335	77.0%	- 3.6%
Planned and Specialist Care	2696	74.1%	- 2.5%

## Manual Handling (MH) Compliance (at 31/03/2026 and 31/05/2026 for comparison):

### Level 2 MH (Patient Handling) at 31/03/2026:

Function	Headcount	% compliance
Workforce and Organisational Development	36	80.6%
Public Health	71	77.5%
Estates and Facilities	141	69.5%
Planned and Specialist Care	2168	60.9%
Operational Allied Health and Health Sciences	736	59.2%
Community and Integrated Medicine	3313	59.2%
Medical	33	57.6%
Digital	7	57.1%
Mental Health and Learning Disabilities	1034	54.6%
Pharmacy and Medicines Management	4	50.0%
Nursing, Quality and Patient Experience	73	49.3%
Primary Care	77	42.9%
Chief Operating Officer Management	12	8.3%
Chief Executive	1	0.0%
Executive Allied Health Professions and Health Sciences	1	0.0%
Strategy and Planning	3	0.0%

### Level 2 MH (Patient Handling) at 31/05/2026:

Function	Headcount	% compliance	Change
Workforce and Organisational Development	33	81.8%	+ 1.2%
Public Health	71	71.8%	- 5.7%
Estates and Facilities	141	68.8%	- 0.7%
Operational Allied Health and Health Sciences	748	62.2%	- 3.0%
Community and Integrated Medicine	3320	60.5%	+ 1.3%
Medical	35	60.0%	+ 2.4%
Planned and Specialist Care	2182	58.0%	- 2.9%
Digital	7	57.1%	=
Mental Health and Learning Disabilities	1038	54.1%	- 0.5%
Nursing, Quality and Patient Experience	75	49.3%	=
Primary Care	95	32.6%	- 10.3%
Pharmacy and Medicines Management	4	25.0%	- 25.0%
Chief Operating Officer Management	12	8.3%	=
Chief Executive	1	0.0%	=
Executive Allied Health Professions and Health Sciences	1	0.0%	=
Strategy and Planning	4	0.0%	=

## Reducing Restrictive Practice (RRP) Team training compliance (at 31/05/2026):

### Mental Health / Learning Disabilities:

- Morlais 100% =
- LSU 78% **(Up 21%)**
- St Caradog 82% **(Down 22%)**
- PICU 97% **(Up 13%)**
- Bryngofal 94% **(Up 1%)**
- Begelly 100% **(Up 13%)**
- Enlli 40% **(Up 5%)**
- St Non 77% =
- Bryngolau 80% **(Up 29%)**

### Porter Training:

The percentage of Portering staff that have completed the Restraint Reduction short course (Module D) for acute sites:

- PPH 72% **(Down 12%)**
- GGH 74% **(Down 12%)**
- BGH 93% =
- WGH 92% **(Up 4%)**

# What is the data telling us?



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## Training Compliance

- **Assurance:**
- Core training is largely embedded
- **Risk:**
- Variation remains
- Inconsistent compliance across services and modules

### RRP Training Compliance

Significant variation (40% - 100%)

#### Assurance:

Improvements have been noted in a number of areas

#### Risk:

Some low compliance areas that need targeted intervention (e.g. Enlli)

### Manual Handling Compliance

#### What the data shows:

Mixed improvement / decline across areas

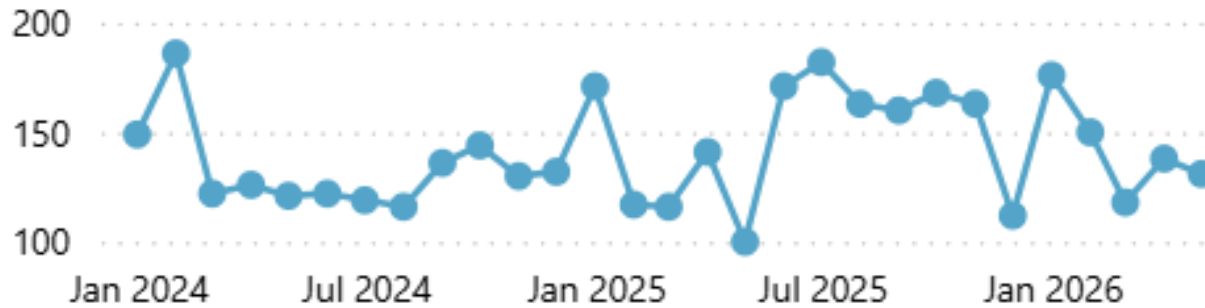
#### Risk:

No consistent systemic deterioration

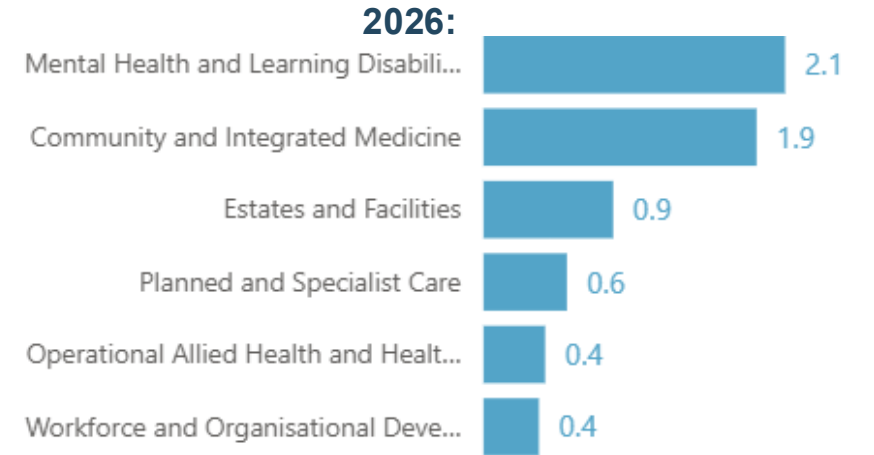
Some areas require targeted intervention

All staff can access the dashboard here (internally): [Health and Safety dashboard - Power BI](#)

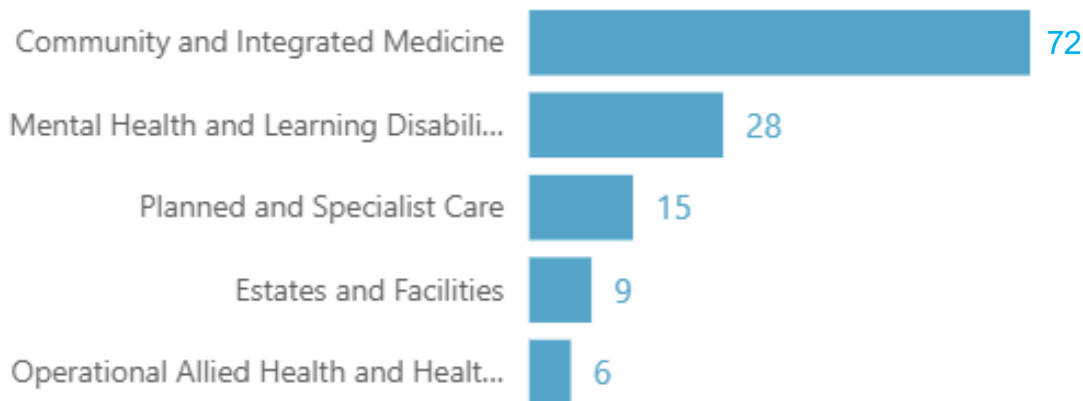
### Staff / Contractor Incidents Reported on Datix (at 31/05/2026):



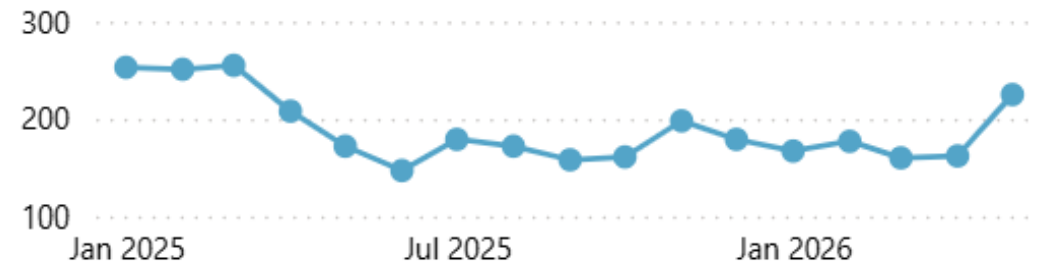
### Staff / Contractor incident rate per 100 staff by Clinical Compliance Group (CCG) in May



### All Staff / Contractor incidents in May 2026 (2+):

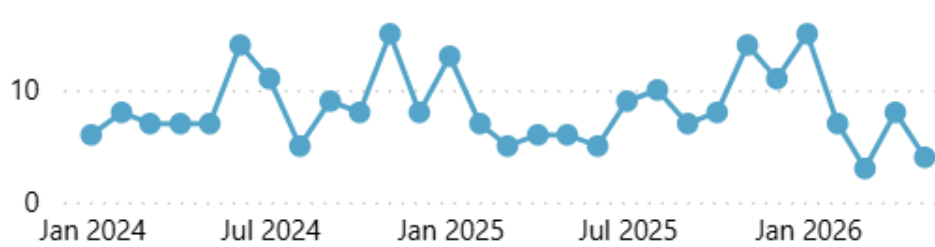


### Staff / Contractor incidents still awaiting review after 30 Days:



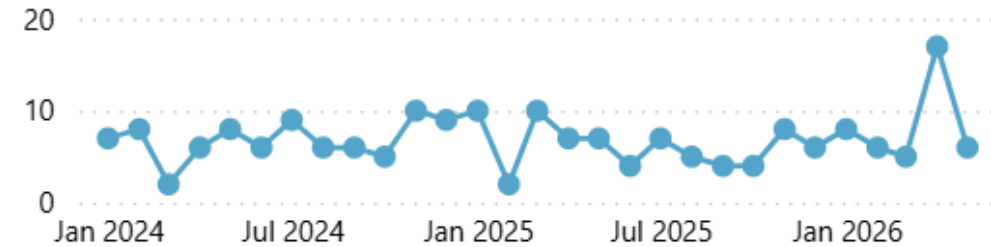
# Staff / Contractor Incidents Reported on Datix (at 31/05/2026):

All Slip/Trip/Fall incidents reported via Datix by month:



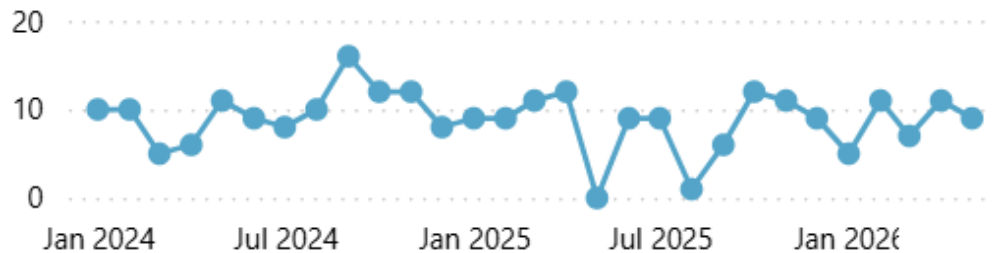
Peaks are notable in the winter months in consecutive years, suggesting a climatic link.

All Manual Handling / Musculoskeletal (MSK) incidents reported via Datix by month:



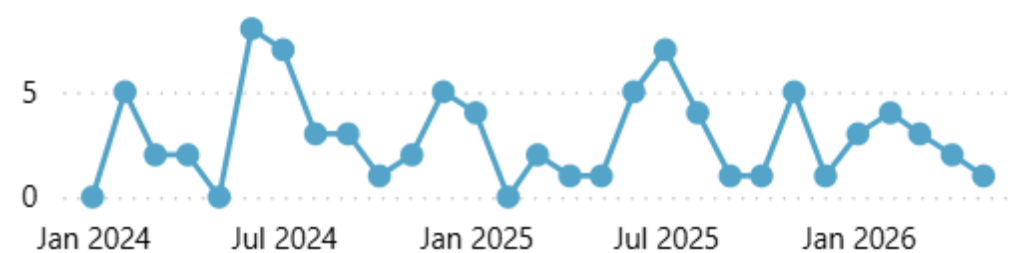
For further information on the peak in Manual Handling / MSK incidents, please refer to slide 3.

All Needlestick / Medical Sharps incidents reported via Datix by month:



Incident rates are relatively stable.

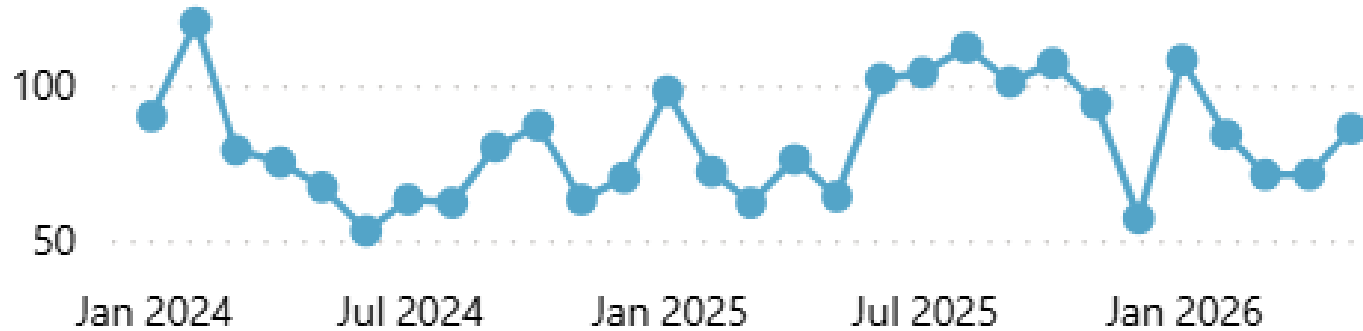
All 'Contact with or exposure to chemicals' (i.e. COSHH) incidents reported via Datix by month:



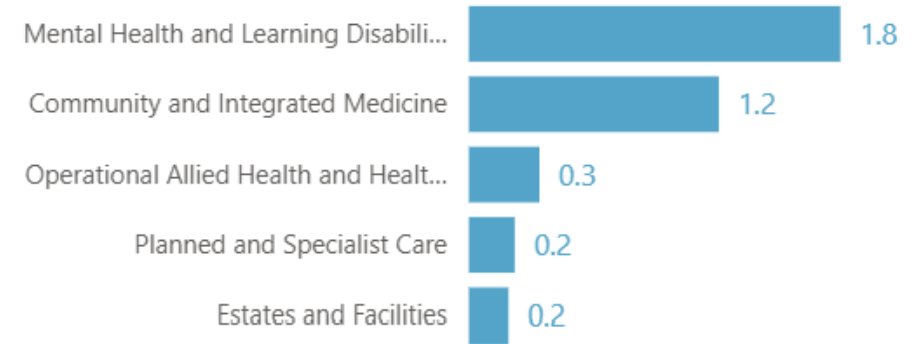
Despite the peaks and troughs, the actual incident rates remain relatively low.

# Staff / Contractor Behaviour Incidents Reported via Datix (at 31/05/2026):

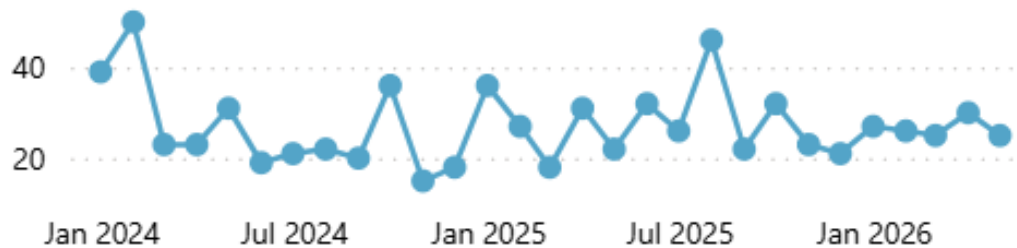
All behaviour incidents reported via Datix by month:



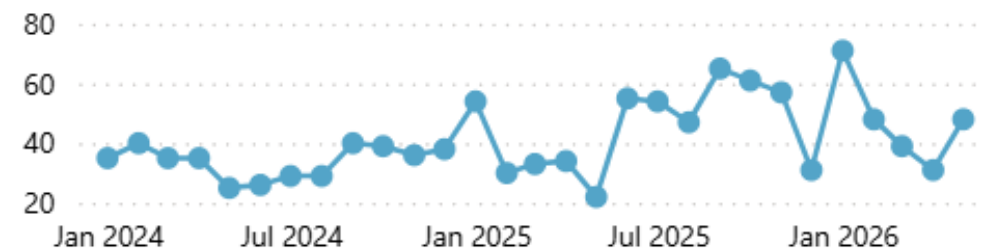
Staff / Contractor behaviour incident rate per 100 staff by CCG in May 2026:



Mental Health / Learning Disabilities (MH/LD) CCG behaviour incidents reported via Datix by month:



Community and Integrated Medicine (CIM) CCG behaviour incidents reported via Datix by month:



MH/LD behaviour incidents remain relatively stable, whereas CIM incidents vary widely dependent on the current patient cohort. The majority of CIM incidents relate to medical confusion / older mental health.

# What's the data telling us?



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

- **Incident Reporting**
- Stable reporting trends
- Seasonal variation (winter peaks)
- **Assurance:**
- Strong reporting culture
- No unexpected systemic increase
- Substantial Assurance can be provided

# What's the data telling us?



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

Behaviour Incidents



Stable in MH/LD



Variable in CIM



Medical confusion and  
older adult mental  
health are the main  
cause of violence and  
aggression incidents.

# Overall Assurance Statement



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

## Overall Assurance Level: MODERATE

- The Health & Safety Committee can take **moderate assurance** that appropriate health and safety systems are in place and functioning.
- **Strengths:**
  - Stable incident trends, with no alarming new trends
  - Strong reporting culture
  - Improvements in key training areas
- **Key Risks:**
  - Variability in compliance across services
  - Localised manual handling risk
  - Dependence on patient cohort for behaviour incidents
- **Focus Areas:**
  - Targeted compliance improvement
  - Continued monitoring of high-risk areas
  - Embed new leadership and communication tools



## The Health and Safety Committee (H&SC) is asked to:

- **Take assurance** that appropriate processes and governance arrangements are in place to support effective health and safety management, noting the continued strong performance in incident reporting and associated oversight arrangements.
- **Take assurance** that targeted improvement actions are being implemented to address identified risks, including improving mandatory training compliance, strengthening manual handling arrangements, and effectively managing behaviour-related risks.