

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 July 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Compliance with Environmental Ligature Anchor Point Assessments and Adoption of the All-Wales Procedure
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	James Severs, Executive Director of Allied Health Professions and Health Science
SWYDDOG ADRODD: REPORTING OFFICER:	Adam Springthorpe, Health & Safety Manager

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

This paper provides assurance to the Health and Safety Committee (HSC) regarding Hywel Dda University Health Board's (HDdUHB) management of environmental ligature anchor point risks and the planned adoption of the new All-Wales Ligature Anchor Point Procedures.

Specifically, the HSC is asked to note that, regarding ligature anchor point risks, HDdUHB:

- has arrangements in place which support compliance with:
 - The Health and Safety at Work etc. Act 1974 (HSWA) including:
 - Section 3 – protecting persons not in their employment;
 - Section 4 – ensuring premises are safe and without risks to health;
 - The Management of Health and Safety at Work Regulations 1999 (MHSWR) including:
 - Regulation 3 – “suitable and sufficient” assessments of risks posed by Ligature Anchor Points in mental health wards and other relevant areas;
 - Regulation 4 – application of the principles of prevention.
- Has fully implemented and embedded Procedure 1069, Assessment and Management of Environmental Ligature Risks, ensuring a consistent approach to environmental ligature risk assessment and control across all Mental Health and Learning Disability (MHL) sites.
- Has an approved and active implementation plan to transition to the All-Wales Ligature Anchor Point Procedures during the second half of 2026.
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Cefndir / Background

Ligature anchor point risks are well established within mental health care environments and require management across three interdependent domains:

- Environmental (physical environment and fixtures);
- Procedural (policies, processes, assessments);
- Relational (clinical observation, supervision, care planning).

This paper focuses principally on environmental risk assessments, while also providing a high-level overview of relevant procedural aspects.

While risk cannot be fully eliminated, there is a statutory duty to reduce risk “so far as is reasonably practicable” and to evidence compliance with relevant legal requirements. In 2022,

HDdUHB introduced the *1069: Assessment and Management of Environmental Ligature Risks Procedure*, which:

- Formalised and standardised environmental ligature risk management;
- Was supported by the Manchester Audit Tool;
- Was embedded through training and multidisciplinary engagement;
- Established a consistent approach to environmental assessments, action planning and annual reviews.

The 1069 Procedure has been applied across:

- All inpatient mental health units;
- Learning disability inpatient/residential settings;
- All relevant outpatient and community MHL D services.

A new All-Wales Ligature Anchor Point Procedure has since been developed and will be applied specifically to HDdUHB's inpatient Mental Health wards. The procedure introduces:

- A more holistic and integrated approach;
- Enhanced documentation (single record vs assessment + action plan);
- Inclusion of training, awareness, and incident response;
- Greater consistency across NHS Wales.

Asesiad / Assessment

Position summary

- HDdUHB has an approved procedure in place – *1069 Assessment and Management of Environmental Ligature Risks Procedure (Review date: 09.02.2029)*, which requires HDdUHB to address ligature risks in a balanced, objective and systematic way using a standardised audit tool. The procedure primarily applies to all MHL D adult, dementia, older adult, rehabilitation, forensic and learning disability inpatient/service user units and residential learning disability settings. The procedure also covers community-based MHL D settings;
- A Teams-based monitoring system demonstrates that all applicable sites (see Appendix 1) have environmental ligature risk assessments in place, including action plans where required.
- Current procedure risk assessment compliance is achieved and evidenced;
- Implementation of the All-Wales Anchor Point Procedure is underway, with a defined plan and target completion during the second half of 2026.

Scope of Application

- The All-Wales Policy and Procedures will apply only to inpatient Mental Health wards.
- The existing Procedure (1069) will continue to apply to all other acute and community MHL D settings.
- There is no specific statutory requirement to undertake ligature risk assessments in non-MHL D settings. However, in practice, HDdUHB extends ligature risk management principles beyond MHL D settings and applies them proportionately, based on the level of risk identified.

Current Compliance

HDdUHB can demonstrate strong, sustained, and evidenced compliance with statutory and organisational requirements via the implementation of *1069: Assessment and Management of Environmental Ligature Risks Procedure*.

Coverage and Governance

- 100% of MHL D sites (inpatient, outpatient, and LD residential) have:
 - Completed a Point of Ligature (PoL) assessment in line with Procedure 1069;

- Established documented Action Plans;
- Maintained annual reviews since 2022.
- All PoL assessments were:
 - Initially led by clinical managers and the Health, Safety & Security Officer;
 - Transitioned to locally owned processes (particularly in outpatient settings);
 - Supported by ongoing expert oversight and review;
 - Additional reviews are triggered by environmental changes, incidents or emerging risks.

The table below outlines the PoL risk assessment audit compliance for the nine Mental Health inpatient facilities at 21/05/2026 (Adult / Older Adult). All sites have a completed risk assessment in place, with reviews undertaken within the last 12 months at all but one location. The exception is St Non's, where Estates works are currently underway. The Health and Safety Compliance Group has requested a further audit recognising that the new All-Wales assessment template has not yet been implemented.

Service	Unit	Date Audit Last Completed
OAMH	Enlli	30/12/2025
OAMH	Bryngolau	12/03/2026
OAMH	St Non's	02/05/2025
Adult MH	Morlais	29/10/2025
Adult MH	Bryngofal	15/03/2026
Adult MH	St Caradog	20/03/2026
Adult MH	ECT	18/03/2026
Adult MH	PICU	07/03/2026
Adult MH	LSU	06/03/2026

Quality and Detail of Assessments

The PoL assessments completed under internal Procedure 1069:

- Systematically map every room, aligned to Estates floor plans;
- Clearly define patient accessibility (unsupervised, supervised, restricted) and environmental characteristics (e.g. door access, ceilings);
- Identify and record all ligature anchor points and all ligature-resistant fixtures (demonstrating consideration, not an assumption of safety);
- Include immediate risk controls (make-safe actions) and detailed, room-by-room risk analysis.

Action Planning

- All identified risks are documented, with recommendations for elimination, substitution, mitigation, or ongoing management, as appropriate;
- Where risks cannot be eliminated, controls include observation, supervision, and patient risk assessment;
- Action plans are RAG-rated by clinical teams and include immediate, short, and longer-term actions;
 - The current reporting arrangements do not enable all outstanding actions across the action plans to be viewed and monitored collectively, limiting both oversight and the ability to quantify the overall position. Work is underway to address this limitation, as outlined in the 'Future Compliance Position' section.

Compliance with Legislation

The above arrangements provide assurance that HDdUHB has effective systems and processes in place to support compliance with:

- HSWA through ensuring that safe environments are maintained and risks are reduced “so far as reasonably practicable”;
- MHSWR through “suitable and sufficient” risk assessments and the application of the principles of prevention.

Wider Impact and Assurance

Procedure 1069:

- Enabled environmental improvements across MHL D inpatient units;
- Supported safe care of high-risk patients in acute/general settings;
- Increased awareness of Ligature Anchor Point risks outside MHL D settings and how high-risk patients can be accommodated outside inpatient units:
 - Improvement works within Emergency Departments (EDs) have included PoL assessments, recognising that EDs may receive patients presenting with a wide range of risk factors. While this work remains under development, it is already demonstrating wider patient safety benefits both within MHL D and across the wider Health Board.;
- Demonstrates organisational maturity in risk identification, risk mitigation and cross-departmental learning.

Risk Register

The MHL D Operational Risk Register includes a risk relating to ligature assessment:

- 139 - Risk of harm due to inpatient units & community facilities not compliant with Points of Ligature (PoL) standards.
- Current score 10: The risk notes that:
 - It is unlikely that all points of ligature will ever be completely eliminated;
 - There is a regular programme of audits and a process in place for prioritising capital funding based on operational risk registers. Significant infrastructure development and changes are required in order to reduce risks across the inpatient estate, which would require significant capital investment;
 - A proportionate approach is being taken to assess risk and apply mitigation through clinical practices, though this has limitations. Without environmental changes this risk will remain scored at 10.

Challenges of Addressing Ligature Risks

- Addressing risks identified through ligature assessments can be challenging. In many cases, mitigation requires capital investment, and the associated approval and delivery processes are often lengthy. As a result, responding to identified risks can take significant time. As outlined in the ‘Action Planning’ section, the development of a consolidated overview of outstanding actions will support improved quantification and oversight.
- A specific concern relates to current non-compliance with Welsh Health Building Notes (WHBN) for acute mental health units, particularly in relation to ceiling design (WHBN 03-01, section 10.65). While suspended grid ceilings in patient bedrooms are consistently identified as a ligature risk through audits, the complexity and cost of remedial works present a significant barrier. Consequently, current risk management relies on mitigating controls, including relational and observational approaches.

Risk Context and Emerging Learning

It should be noted that suicide risks can also arise from:

- Non-anchored ligatures (e.g. plastic bags, personal items and other readily available materials);
- Everyday items used unpredictably.

Recent legal cases (e.g. NHS Trust prosecutions) highlight:

- The importance of comprehensive risk management beyond anchor points;
- The need for clear evidence of assessment and controls.

This identifies a potential area for further policy development within HDdUHB.

Recent learning from a ligature incident within HDdUHB highlighted how individuals may identify and exploit less obvious environmental opportunities. This reinforced the importance of dynamic risk assessment alongside environmental controls and informed further environmental improvements within inpatient settings, including enhancements to ceiling-mounted fixtures.

Safety Alerts / Local Safety Notices

HDdUHB has an established process for responding to and cascading all Safety Alerts and Local Safety Notices relating to ligature risks. A recent example includes a Local Safety Notice issued by Swansea Bay University Health Board in April 2026, highlighting risks associated with a specific anti-ligature wardrobe following a reported incident.

Future Compliance Position – In Progress (2026 Delivery)

Scope of Implementation

The new All-Wales Ligature Anchor Point Procedures apply to:

- All inpatient mental health units;
- Learning disability inpatient sites.

2026 Plan:

- All sites yet to complete a 2026 review will undertake Ligature Anchor Point assessments using the new All-Wales template;
- All reviews previously completed using HDdUHB Procedure 1069 will be transferred to the new template.
- All new and outstanding actions arising from Ligature Anchor Point Assessments Action Plans will be captured within a single reporting framework to enhance visibility, oversight and assurance. The Built Environment Audit “Risk Stratification” approach will be applied to provide a clear overview of the number and status of all outstanding risks; this approach has already been tested and proven useful.

Key Improvements Introduced

The new All-Wales Ligature Anchor Point Procedures:

- Integrate risk identification, controls, actions, escalation, training and awareness, and incident response;
- Removes duplication (no separate action plan);
- Improves documentation quality, consistency, auditability and efficiency;
- Supports electronic data entry and version control (e.g. SharePoint);
- Place a strong emphasis on undertaking assessments using a tripartite approach, involving clinical leads, H&S and Estates, which is a shift for HDdUHB. This multi-disciplinary tripartite approach reinforces the integration of:
 - Environmental controls (Estates / H&S);
 - Procedural controls (clinical governance);
 - Relational controls (patient observation and care).

Governance and Alignment

Existing HDdUHB procedure 1069 will be revised to continue to apply to:

- Outpatient MHLD settings;
- Community services;
- LD residential settings.

Consideration will be given to the development of a new procedure for non-anchored ligatures and risk items, strengthening compliance coverage.

In June 2026, the Health and Safety Compliance Group approved the establishment of an Anti-Ligature Sub-Group to support the implementation of the All-Wales policy and to assist the development of fit for purpose metrics for the topic area. This will need to be a collaborative approach, including representatives from nursing, MHL, Estates and Health and Safety.

Additional Controls

It is vital that HDdUHB ensures that information which could identify environmental ligature risks is not made publicly available, while continuing to meet its transparency and governance obligations. As documents relating to Health and Safety Committee (and potentially other meetings) are publicly available, specific details of ligature points and assessments must not be included.

The new All-Wales Procedures will be used to promote organisation-wide learning to expand awareness beyond MHL into acute hospitals, EDs and community settings.

In Summary

HDdUHB has a clear, structured transition plan to implement the All-Wales Ligature Anchor Point Procedures. The All-Wales approach represents a clear enhancement to existing arrangements and provides an opportunity to strengthen consistency, oversight and assurance across relevant services; implementation is underway but not yet complete (planned 2026 delivery).

Argymhelliad / Recommendation

The Health and Safety Committee is asked to **TAKE ASSURANCE** that HDdUHB has effective and evidenced arrangements in place to identify, assess and manage environmental ligature anchor point risks and, that a structured implementation is in place to transition to the All-Wales Ligature Anchor Point Procedures during 2026, further enhancing organisational consistency, oversight, and assurance.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
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:	139 – Score 10
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	1. Safe 3. Effective 6. Person-Centred
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply

Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Great care
Amcanion Cynllunio Planning Objectives	5 Mental health and CAHMS
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives

Gwybodaeth Ychwanegol: Further Information:	
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.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ceisiadau Gofal Sylfaenol: Parties / Committees consulted prior to the Health and Safety Compliance Group Committee:	<ul style="list-style-type: none"> • Health and Safety Compliance Group • Key Stakeholders

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	The findings of Ligature Risk Assessments may have cost implications to rectify to ensure safe environments for patients.
Ansawdd / Gofal Claf: Quality / Patient Care:	There is a positive impact on patient safety, health and wellbeing through compliance with health and safety regulations.
Gweithlu: Workforce:	No impact identified.
Risg: Risk:	Risk to health and safety management.
Cyfreithiol: Legal:	A breach of health and safety regulations, such as the Management of Health and Safety at Work Regulations 1999, could result in the issue of prohibition or improvement notices or criminal proceedings.
Enw Da: Reputational:	Prosecutions and claims due to breaches in legislation or personal injury claims can lead to negative publicity.

Gyfrinachedd: Privacy:	Not Applicable.
Cydraddoldeb: Equality:	No evidence gathered to indicate a negative impact on any protected group/s.

Appendix 1: Applicable Sites – MHL D Inpatient & Community Sites

Dept.	Site	Location
Mental Health (MH) – Inpatient units		
Adult Mental Health (AMH)	PICU	Block 2, Cwm Seren, Hafan Derwen
	LSU and Stepdown	Block 2, Cwm Seren, Hafan Derwen
	Morlais	Block 21, GGH
	Bryngofal	Template 28, PPH
	St. Caradog's	Bro Cerwyn, WGH
Older Adult Mental Health (OAMH)	Enlli	Enlli (Block 3, BGH)
	Bryngolau	Template 27, Caebryn, PPH
	St. Non's	Bro Cerwyn, WGH
Specialist Child and Adolescent Mental Health Service (S-CAMHS)	Rainbow Suite	Cilgerran ward, Block 3, Room R22/R23, GGH
Learning Disabilities (LD) – Inpatient/residential units		
Learning Disabilities (LD) residential	Begelly	14 Church Close, Kilgetty
	Greville Court	2 Greville Court, Pembroke Dock
MHL D - Outpatient units in the community		
Adult Mental Health (AMH)	Brynmair Clinic	Llanelli
	Swn Y Gwynt	Ammanford
	Wellfield Road	Carmarthen
	Bro Cerwyn	Off site, opposite WGH
	Havenway	SPH
	Gorwelion	Aberystwyth
	Hafan Hedd	Newcastle Emlyn
Older Adult Mental Health (OAMH)/Community Mental Health Team (CMHT)	Heddfan (North Carms OA CMHT)	Block 21/25, GGH
	St. Brynachs Day Hospital (Pembs CMHT)	Bro Cerwyn, WGH
	Enlli CMHT	Block 3, BGH
	Caebryn	Template 26, PPH
Community Teams for Learning Disabilities (CTLD)	Ty Elwyn	Council Offices, Llanelli
	Llanion House	Pembroke Dock
	Coleshill Day Centre	Llanelli
	Penlan	Carmarthen
Integrated Psychological Therapies Service (IPTS)/Local Primary Mental Health Support Services (LPMHSS)	Llys Steffan	Lampeter
	Ty Myddfai	Johnstown
	Brynhaul	Template 27, PPH
Specialist Child and Adolescent Mental Health Service (S-CAMHS)	Elizabeth Williams Clinic	Llanelli
	Ty Llewelyn	Block 18d, GGH
	Canolfan Gwili	Block 20, GGH
	Preseli Centre	Block 14; WGH
	Bro Myrddin	Carmarthen
	Ty Helyg	Block 13, BGH
Adult ADHD Service	Ty Gwili	Off site, opposite GGH
Electro-Convulsive Therapy (ECT)	ECT Department	Alun, Hafan Derwen