

**APPROVED MINUTES OF THE HEALTH AND SAFETY COMMITTEE MEETING/  
COFNODION IECHYD A DIOGELWCH CYFARFOD PWYLLGOR**

Date of Meeting: **9:30 AM, Tuesday 06 May 2025**  
Venue: **Ystwyth Board Room Avocor (Hywel Dda UHB - Generic Account)**

Present: Ann Murphy Independent Board Member (*Chair*)  
Chantal Patel Independent Board Member  
Michael Imperato Independent Board Member

In Attendance: Joanne Wilson Director of Corporate Governance/Board Secretary  
Karen Ryan Head of Occupational Health  
Simon Chiffi Head of Operations  
Adam Springthorpe Health & Safety Manager  
James Severs Executive Director of Allied Health Professions and Health Science  
Jonathan Arthur Deputy Director of Health Sciences  
Tim Harrison Head of Health, Safety and Security  
Simon Day Head of Maintenance & Engineering Estates  
Anthony Dean  
Ardiana Gjini Executive Director of Public Health  
Sharon Daniel Executive Director of Nursing, Quality & Patient Experience  
Ruth Poynting Committee Services Officer (minutes)

Apologies: Rob Elliott Director of Estates, Facilities and Capital Management  
Andrew Carruthers Chief Operating Officer  
Iwan Thomas Independent Board Member  
Amanda Glanville Assistant Director of People Development

<b>Minutes Ref.</b>	<b>Item</b>	<b>Action</b>
HSC(25)001	<p><b>Welcome and Apologies</b></p> <p>Ms. Ann Murphy welcomed everyone to the meeting and announced that a new Independent Member (IM) for Community will be joining the Committee starting in July 2025, following the conclusion of the previous IM's term.</p> <p>Mr Michael Imperato was introduced as a new member as an IM representing the legal sector.</p>	
HSC(25)002	<p><b>Declarations of Interest</b></p> <p>There were no declarations of interest.</p>	

HSC(25)003

**Minutes of the Previous Meeting held on 4 March 2025**

Changes were requested as follows:

- Corrections to Dr Jonathan Arthur's title throughout.

The Committee approved the minutes of the previous meeting provided the above changes are made.

**Decision:**

The Health and Safety Committee APPROVED the minutes of the previous meeting.

HSC(25)004

**Matters Arising and Table of Actions from Meeting held on 4 March 2025**

An update was provided on the Table of Actions from the meeting held on 4 March 2025 and confirmation received those outstanding actions had been progressed. In terms of matters arising:

HSC(24)131: Dr Arthur informed the Committee that a paper is being developed for the Violence and Aggression Management Plan and the challenges with the portering role. An update will be presented to the next HSC meeting on 3 July 2025.

HSC(24)111 Members discussed the presentation of Risk 1745 (Estate Condition) and agreed that this will be presented to the next HSC meeting on 3 July 2025.

HSC(24)136 Mr. Severs stated that the challenge regarding traffic flow outside Prince Philip Hospital (PPH) has been escalated, however this remains unresolved. Ms Joanne Wilson agreed to discuss further with the Chief Executive Officer (CEO).

JW

**Decision:**

The Health and Safety Committee DISCUSSED the Table of Actions.

HSC(25)005

**Health and Safety Committee Annual Report 2024/25**

The Health and Safety Committee approved the Annual Report as an accurate record of the work undertaken in 2024/25.

Ms Chantal Patel queried whether a similar report is produced for In Committee meetings. Ms Wilson stated that currently there is no such report, however this could be considered for the next cycle of meetings.

Ms Wilson and Ms Murphy thanked Charlotte Wilmshurst and Ruth Poynting for supporting the Committee and producing this report.

Members were assured by the HSC Annual Report for 2024/25 that the Committee operates effectively and in line with the Terms of Reference and issues have been escalated to Board as appropriate.

**Decision:**

The Health and Safety Committee **ENDORSED** the Health and Safety Committee Annual Report 2024/25

HSC(25)006

**Health and Safety Sub Committee Update**

Dr Arthur introduced the report from the Health and Safety Sub-Committee (HSSC), highlighting concerns around Level 2 Fire Safety Training, which could potentially be classified as an alert. Current compliance stands at 61%, significantly below the 85% threshold agreed upon with Mid and West Wales Fire and Rescue Service (MAWWFRS). A work plan has been initiated to improve compliance, including further communication with Clinical Care Groups to stress the importance of completing the training. Additionally, an urgent position paper has been requested. An update on progress is expected shortly.

Mr Simon Chiffi added that Hywel Dda University Health Board (HDdUHB) is compliant in level 1 and 3 training but not in level 2. Level 2 training is delivered face-to-face as mandated by the Welsh Health Technical Memorandum (WHTM). As part of the project works and the agreed scope reduction on phase 2 fire projects in Withybush Hospital (WGH) and Glangwili Hospital (GGH) MAWWFRS has agreed that HDdUHB can temporarily put an Electronic Staff Record (ESR) training module in place to achieve the necessary compliance. The Health Board has committed to achieving this by the end of June 2025.

The Fire Safety Group is well attended, and work is taking place to improve communication through Clinical Governance Groups and Directorate leads. Mr Chiffi provided assurance that there is sufficient capacity in the Fire Team to facilitate face-to-face training.

In response to a query from Ms Patel, Mr Chiffi explained that each Service Director, for understanding the training needs of their respective teams. Whilst this responsibility rests with them, the Fire Team is available to provide support, if needed. Adding that Mr Andrew Carruthers is the Chief Officer for this risk.

An Estates and Clinical Care Group has been established with the first meeting taking place today (6 May 2025), which reports to the Integrated Quality, Financial Performance and Delivery Group (IQFPD)

The Committee agreed to advise the Board on the status of Level 2 Fire Safety training and were assured by the other items on the sub-committee update.

**Decision:**

The Health and Safety Committee were ASSURED of the management processes in place to manage Health and Safety through the HSSC, however they were NOT ASSURED of Health Board compliance with level 2 Fire Safety Training.

HSC(25)007

### **Staff/Patient Story**

This item was deferred. A story has been arranged for HSC on 3 July 2025.

HSC(25)008

### **Health and Safety Update Report**

Mr Adam Springthorpe provided an update on the redevelopment of the Health and Safety dashboard which will be pivotal in managing risks and reporting compliance. The expected completion date for this work is the end of September 2025. It is expected that there will be a period of adaptation to the new system however this will be a good resource in the long term.

An application has been made to the Mandatory Training Group for Manager Health and Safety training to be compulsory. This would comply with the findings from of the Internal Audit due to be completed by the end of July 2025.

Ms Murphy queried the lack of medical teams listed under the training proposal. In response, Mr Springthorpe advised that this training is not directly applicable for doctors. Aligning the course with individual roles would prove a challenge as this would entail looking at individual job descriptions.

Mr Springthorpe added that level 2 Manual Handling is delivered face-to-face and often has poor attendance as staff book the course, and do not attend.

Mr Severs noted that the detail for addressing the operational challenges for delivering this training will be discussed at the HSSC.

In response to some discussion about writing reports for HSC, Ms Wilson offered to provide guidance on reporting at Committee level for assurance as opposed to managing work in the more operational sub-committee.

Ms. Wilson commented that HDdUHB has the highest number of mandatory training courses among all health boards in Wales and questioned whether it is necessary for this particular course to be mandatory. Although this was a recommendation in an internal audit, the final decision ultimately rests with HDdUHB. It was agreed that this required further discussion outside of the meeting.

AS, JS

Mr Springthorpe reported that the Health and Safety Executive (HSE) provided very positive feedback on the training. However, a specific compliance figure is not currently available. Mr Springthorpe suggested that making the training mandatory would be the most effective way to obtain accurate compliance data.

Ms Patel noted that the report lacks sufficient detail for the Committee to understand why compliance targets are not being met and the reasons for non-attendance; which would be helpful to provide assurance at Committee level.

Mr Imperato expressed interest in the number of reported incidents and suggested a comparison with figures from previous years would help demonstrate trends and trajectory.

Incident figures for members of the public are very low and as such are not included in the dashboard plan. Mr Springthorpe suggested that data from Datix could be drawn on a periodic basis rather than being presented at every meeting.

Discussion around Health and Safety training will take place in the HSSC and at the Clinical Care Group before being presented to HSC for assurance.

Given the need for further assurance the Committee agreed to advise the Board. However, should there be no progress in forthcoming meetings, the Board may need to be alerted to the concerns raised.

The Committee were assured in all other aspects of the report.

**Decision:**

The Health and Safety Committee were ASSURED that the Health and Safety Dashboard is in development and that at least the first phase will be in place by the end of Q2 2025/26. However NOT ASSURED of Health Board compliance with level 2 Manual Handling training.

HSC(25)009

**H&S Annual Work Plan 2025/26**

Mr Harrison introduced the Health and Safety Annual Work Plan for 2025/26, noting that this report brings together various themes across health and safety and aims to provide assurance that a workplan is in place for the coming year.

In response to concerns raised by Mr Imperato about stress being a leading cause of staff sickness, Mr Springthorpe and Mr Harrison explained that this is primarily managed by the Staff Psychological Wellbeing Group, who may be able to provide further assurance. The Health Board does have a Mental Wellness Policy in place.

Ms Karen Ryan highlighted the proactive work being done in staff psychological wellbeing and noted that Occupational Health provides advice on managing affected staff. Stress management is included in mandatory training for managers, and significant work is ongoing in this area, however current training focuses on managing stress after it occurs.

Mr Severs confirmed that the topic of stress does fall under the HSE and the committee's remit, suggesting the need for greater oversight. A report was requested with input from Mr Harrison, Ms Ryan and the Psychological Wellbeing Group for the HSSC before presenting this topic to the HSC in September 2025.

TH, KR

The Committee were assured by the Annual Health and Safety Work Plan for 2025/26.

**Decision:** The Health and Safety Committee were ASSURED that the Health and Safety and Security Team have a work plan in place and that progress will be monitored by the Health and Safety Sub-Committee during 2025/26.

HSC(25)010

### **Electrical Infrastructure Risks**

Mr Simon Day introduced the report which outlines the need to modernise electrical infrastructure across all hospital sites.

Mr Severs queried what impact the remedial work would have on frontline services, staff and patients. Mr Day answered that circuit breaker replacement would have a relatively low impact on services, however upgrades to the Low Voltage (LV) switchgear would have a significant effect on services.

For any work that may cause an interruption to power on hospital sites there are a series of measures to ensure limited impact on services including creating a schedule of work and communicating with the affected wards in advance of the work. The Estates Team has Certified Persons (CPs) that manage electrical risk and issue permits for the work, while Authorised Persons (APs) lead on the work even in electrical projects raised by the Capital Team. Additionally, action plans are created to respond to any potential trips.

Mr Day confirmed that funding has been secured for the installation of generators across all sites. This initiative, combined with ongoing High Voltage (HV) and LV electrical works, represents significant progress toward enhancing the overall electrical infrastructure.

A correction was made to page 2 of the report. The second point to advise the committee should read:

*Electrical Safety Group meet regularly, in line with the defined requirements of the WHTM. The group is well attended, and the required quorum as defined by the TOR is always met. There are also Electrical Safety sub-groups that regularly meet between the Electrical Safety Group to resolve issues at a working group level.*

Mr Day provided assurance that a robust system of Subgroups and Safety Groups are in place to manage Estate risk.

Mr Chiffi added that there is a new Estates Clinical Governance Group which will be focusing on reprofiling risks to support this structure.

The Committee were assured of the risk management process employed to manage electrical risk across all sites.

**Decision:**

The Health and Safety Committee were ASSURED by the risk management process employed to manage electrical risk.

HSC(25)011

**Risk 1745 - Estates Condition**

*Deferred to July meeting.*

HSC(25)012

**RAAC Assurance Report**

The Committee were assured by the report of the current position of Reinforced Autoclaved Aerated Concrete across all HDdUHB sites.

**Decision:**

The Health and Safety Committee were ASSURED by the current position on the outcome of the reinspection surveys to date and the ongoing controls established by the Operational teams to safely manage the risk.

HSC(25)013

**HSC Workplan**

No comments were made on the content of the workplan.

**Decision:** HSC Workplan

The Health and Safety Committee NOTED the workplan for 2025/26.

HSC(25)014

**Any Other Business**

There was no other business.

HSC(25)015

**Matters for Escalation to Board**

The Committee wish to ADVISE the Board of the following:

- The percentage of staff completing Level 2 Fire Safety training is below the minimum threshold.
- The percentage of staff completing Level 2 Manual Handling training is below the minimum threshold.

HSC(25)016

**Date and Time of Next Meeting**

Thursday 3 July 2025, 9:30-11:30