



HEALTH & SAFETY ASSURANCE COMMITTEE PWYLLGOR ANSAWDD IECHYD A DIOGELWCH

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 June 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Health and Safety Assurance Committee Arrangements
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Executive Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Tim Harrison, Head of Health, Safety and Security

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

Following discussions on the terms of reference at the Health and Safety Assurance Committee meeting in May 2020, a review of the health and safety reporting structure and arrangements was requested.

The Health and Safety Assurance Committee has requested an update on the health and safety arrangements in relation to the sub-ordinate committee structure beneath the overarching Health and Safety Assurance Committee.

This paper describes the proposed approach to be adopted in order to ensure effective health and safety matters are discussed within the Health Board. Any actions identified at a Directorate level should strengthen the ownership of health and safety throughout the organisation.

Cefndir / Background

Currently the Health, Safety and Security Team formally reports into the following Health Board groups:

- County Partnership Forums x 3
- HDdUHB Partnership Forum (when required)
- Community Premises meetings
- Unscheduled Care Governance meetings
- Scheduled Care Quality and Safety meeting
- Listening & Learning Sub-Committee
- Estates Health and Safety Group

The Health, Safety and Security Team have transferred from the Estates, Facilities and Capital Management into the Nursing, Quality and Patient Experience Directorate. To strengthen an amalgamated approach in improving Health and Safety and Quality, consideration has been given to Health and Safety/Security to integrate into existing Quality/Governance committee structures.

In undertaking this review, it has been established that the following Quality/Governance meetings exist;

- Women's and Children
- Mental Health and Learning Disabilities
- Primary Care and Community
- Scheduled Care
- Unscheduled Care Glangwili General Hospital
- Unscheduled Care Withybush General Hospital
- Unscheduled Care Prince Philip General Hospital
- Unscheduled Care Bronglais General Hospital

The above Directorates report into the Operational Quality, Safety & Experience Sub-Committee.

Asesiad / Assessment

Including Health and Safety on the agenda of the various Quality/Governance Committees should demonstrate will enforce the understanding that the Health and Safety at Work Act and its subordinate legislation applies equally to patient safety as well as staff safety and as such covers the many aspects of healthcare risk.

The reporting arrangements will require agreement with regard to which particular Committee should be informed of specific items for example the Quality, Safety & Experience Assurance Committee or Health and Safety Assurance Committee.

Argymhelliad / Recommendation

The Committee is asked to support the following recommendations:

- For Health and Safety to form an integral part of the existing Directorate Quality/Governance meeting structures.
- consider re-branding the Directorate Quality & Safety Groups, in order that Health and Safety is clearly understood and that it forms part of the revised terms of reference for these groups.
- To develop/amend terms of reference for the directorate level groups to include the type of reporting topics requiring escalation to the most appropriate Health Board Committee.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference:
Cyfeirnod Cylch Gorchwyl y
Pwyllgor:

4.2 Advise and assure the Board on whether effective arrangements are in place to ensure organisational wide compliance of the Health Board's Health and Safety Policy, approve and monitor delivery against the Health and Safety Priority Improvement Plan and ensure compliance with the relevant Standards for Health Services in Wales

Cyfeirnod Cofrestr Risg Datix a
Sgôr Cyfredol:

N/A

Datix Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	1.1 Health Promotion, Protection and Improvement 2.1 Managing Risk and Promoting Health and Safety
Nodau Gwella Ansawdd: Quality Improvement Goal(s):	Focus On What Matters To Patients, Service users, Their Families and Carers, and Our Staff
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Health and Safety at Work Act
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Assurance Committee:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No expected impact
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	No adverse impact
Risg: Risk:	Risk mitigation in place in terms of PPE, safe systems of work and safe environments

Cyfreithiol: Legal:	Health and Safety at Work Act 1974 Management of Health and Safety at Work Regulations
Enw Da: Reputational:	/A
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	Has EqIA screening been undertaken? N/A Has a full EqIA been undertaken? N/A