



Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg University Health Board



## Health and Safety Committee Action Log

Open Actions									
Action No.	Minute Ref.	Date	Agreed Action	Lead	Timescale	Status			
1.	24/18	07.08.2018	Hot weather be included within the risk register together with the discussed mitigating actions.	DG	September 2018	In progress			
2.	23/18	07.08.2018	Pam Wenger and Darren Griffiths to discuss further the risk register.	PW/DG	September 2018	In progress Risk management process being reviewed as agreed at Audit Committee. Discussion to be held in relation to health and safety risks.			
3.	32/18	07.08.2018	Darren Griffiths to discuss board-wide roll-out of fire safety training with the service director for Singleton Services Delivery Unit.	DG	September 2018	In progress Verbal update to be given at the meeting			
Closed Actions									
Action	Minute	Date	Agreed Action	Lead	Timescale	Status			

No.	Ref.					
4.	19/18	07.08.2018	Martyn Waygood to provide comments on the annual report to Darren Griffiths outside of the committee.	MW	September 2018	On the agenda
5.	19/18		A revised annual report be received at the next meeting.	DG	September 2018	On the agenda
6.	18/18	07.08.2018	Guidelines for units' reports be developed.	DG	September 2018	Completed – see appendix 1
7.	08/18	20.04.2018	Performance metrics outlining compliance with mandatory training be received at a future meeting.	DG	September 2018	On the agenda

## Units' attendances at the Health and Safety Committee

Each delivery unit is invited to the Health and Safety Committee once a year to outline its health and safety targets and plans to improve in the coming months.

Units are asked to include details of any risk register entries which score more than 16 and the actions in place to mitigate these risks. The governance structures the units have in place to manage health and safety also need to be detailed.

In addition, the report should include performance against and actions to improve:

- Falls;
- Pressure ulcers;
- Sharps injuries.

As well as:

- Relevant mandatory training
- Violence and aggression;
- Lone workers (where relevant).

Units are asked to address the following within the report:

- What do you consider to be the three wards/clinical areas which give you the greatest cause for concern? Why? What actions are you taking to address these concerns? When do you expect an improvement and how will this manifest itself?
- What do you consider to be the three wards/clinical areas which give you the greatest level of assurance? Why? What actions are you taking to spread the good practice you have identified in these areas?

The report is to be submitted to the corporate governance team for circulation at least 10 days in advance of the meeting. Please do not embed documents or appendices; these needed to be attached separately.

No more than three people (including at least the service director, unit medical director **or** unit nursing director) should attend the meeting to present the report, which should be assumed as read and you'll have **five minutes** in which to highlight key points. After this, those in attendance will have an opportunity to ask questions.

**Presentations will only be accepted in exceptional circumstances**. And as such, must be agreed with the meeting chair in advance, via the corporate governance team, and provided alongside the report for attendees to consider prior to the meeting. It is not acceptable to arrive at a meeting and expect to present slides without such agreement.