

Title:	Health and Safety Strategy Action Plan 2021-23
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Swansea Bay University Health Board, Safety and Welfare Strategy

"Embracing and implementing change to enhance the organisations health, safety, welfare and culture"

1	Caring for each other	1. Taking responsibility for all aspects of health and safety					
		2. Treating everyone with dignity and valuing diversity					
		3. Giving/Receiving through recognition and feedback, learning from experiences of others					
2	Working Together	1. Building networks to enhance knowledge to provide a safe environment					
		2. Developing our people with health and safety skills to manage their resources safely					
		3. Growing our reputation in a leader in health and safety					
		4. Developing policies and procedures to embed safety in the culture of the organisation					
3	Always improving	1. Embracing change and innovation					
		2. Using all evidence available to provide a safe and secure environment					
		3. Setting high standards of Health and Safety in all we do					

Strategic Aims

1	Leadership Objective - Control	Allocating responsibilities, securing commitment, having clear instruction and supervision
2	Management System Objective - Communication	Using appropriate media and language i.e. spoken, written. being visible and approachable
3	Workforce Involvement Objective - Cooperation	Between individuals and groups (internal and external)
4	Risk Reduction Objective - Competence	To maintain managers and staff competence
5	Accident Reduction Objective	To maintain and improve health, safety and wellbeing

Please note that the RAG ratings in the Implementation Plan overleaf relate to each task milestone. The definitions for these ratings are:

RAG		Definition
Green		The milestone has been completed, and is fulfilling the expectations of the ascribed performance measure
		Or The milestone is in progress and on target to fulfil the expectations of the ascribed performance measure
Amber		There is slippage in the milestone's achievement of its time, budget and/or performance measure without significant impact upon delivery
Red		There is failure to achieve the milestone's expected time, budget or performance measure with significant impact upon delivery

Ref	Task	Milestones	Start date	End date	Lead	Core / additional resources	Add		nal	Measure - Comments	RAG status	Strategy priority
						(colleagues, support services)	Capital	Recurrent	Non-			
H&S 1	Identify appropriate Health and Safety course for Executive Directors "NEBOSH HSE Certificate in Health and Safety Leadership Excellence"	 Identify all executive directors and deputies to undertake HSE Certificate in Health and Safety Leadership Excellence. Identify course provider. Schedule dates for course completion. 	Dec 21 Feb 22 Apr 22	Mar 22 April 22 June 22	Mark Parsons / workforce rep	Core and support (Workforce and OD and external resources)		✓ ✓		Training identified, implemented with ongoing schedule. Due to the challenges of the pandemic and the limited face to face training coupled with a number of changes at executive level, it is recommended that this is moved to 2022/23 financial year Q1.		Leadership & Management objective (Caring for each other)
H&S 2	Identify appropriate Health and Safety course for managers "IOSH Managing Safely" or equivalent	 Identify appropriate managers to undertake IOSH Managing Safely or equivalent. Identify course provider or develop internally. Schedule initial dates for pilot course completion. This potentially will be 10 year programme. 	Jan 22 Jan 22 May 22	Mar 22 Mar 22 July 22	Mark Parsons / Workforce rep	Core and support (Workforce and OD and external resources) This is dependent on resources for internal and/or external providers		✓ ✓		Training identified, implemented with ongoing schedule. Due to current resource challenges and the pandemic, it is recommended that this is moved to 2022/23 financial year.		Leadership & Management objective (Caring for each other)
H&S 3	Develop manager's health and safety handbook/guidance.	Develop Managers handbook	Nov 21	Jan 22	Mark Parsons / Laurie Higgs / Workforce rep	Core and support from workforce				Manager's handbook/guidance developed and circulated to appropriate groups of staff. Due to resource implications not fully resolved and the pandemic it is recommended that this be moved to 2022/23 financial year.		Leadership & Management objective (Caring for each other)
H&S 4	Develop Health and Safety external site audit.	Agree audit template for external site audit. Agree audit schedule. Commence audit schedule.	Apr 21 Dec 21 July 22	July 21 Jun 22 Sept 22	Mark Parsons / Laurie Higgs	Core – will be dependent on additional resources	✓	✓	√	Programme of audits scheduled on a rolling programme. Some elements have been achieved with an audit template developed. It is recommended that point 2 & 3 be deferred to 2022/23 due to resources and the pandemic.		Leadership & Management objective (Caring for each other – working together – always improving)
H&S 5	Review Health and Safety Resources	1. Review of Health and Safety Resources.	May 21	Jul 21	Mark Parsons / Workforce rep	Core and support (Workforce and OD and external resources)		✓		Resources reviewed and agreed, with scheduled implementation /recruitment of additional resources.		Management & Workforce involvement & Risk reduction objective

		 2. Propose appropriate structure to the Health Board. 3. Develop job descriptions for approved structure. 4. Commence recruitment process and implement structure. 5. Implement structure 	Jun 21 Apr 21 Sept 21 Apr	Aug 21 Dec 21 May 22 July					Resources have been reviewed, business case written and submitted, with some additional resource agreed (2 fire safety officers). The remainder will be phased in during 2022/23 financial year, actual WTE to be confirmed against business case.	(Caring for each other – working together – always improving)
H&S 6	Develop and undertake a snap shot safety culture survey	 Develop initial safety culture survey. Undertake safety culture survey. Analyse survey results. Develop action plan from survey results. 	22 Oct 21 Jan 22 Apr 22 May 22	Mar 21 Mar 22 May 22 June 22	Mark Parsons	Core and support (Communication/IT and other teams) – dependent on additional resources		✓	Survey developed and undertaken. Due to the many challenges within the Health Board it is recommended that this be postponed until either Q4 this year or Q1 2022/23.	Workforce involvement & Risk reduction objective (Caring for each other – working together – always improving)
H&S 7	Develop health and safety audit tool based on ISO 45001 standard	 Develop health and safety audit tool for unit use and corporate use. Schedule a Health Board programme of health and safety compliance audits across the organisation. Analyse audit results. Develop action plan from audit results. 	Apr 21 Apr 22 Sept 22 Apr 22	July 21 June 22 Mar 22 June 22	Mark Parsons / Laurie Higgs	Core - will be based on tool developed by all Wales H&S advisors group and dependent on additional resources	✓	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Programme of audits scheduled on a rolling programme. Point 1 has been developed and is ready for use. Points 2, 3 & 4 are recommended to be deferred to 2022/23 financial year due to resource challenges and the pandemic.	Management, Workforce involvement & Risk reduction objective (Caring for each other – working together – always improving)
H&S 8	Develop Health Board Health and Safety Key Performance Indicators (KPI's)	 Outline KPI's for consideration for HB and Units. Agree KPI's for HB/Units. Implement KPI's. Monitor KPI performance. 	June 21 Aug 21 Jan 22 On- going	Sept 21 Oct 21 Mar 22 On- going	Mark Parsons / Unit director reps	Core / Support from units			KPI's identified and adopted for HB and Units. KPI's have been agreed and submitted to the H&S Ops group and H&S Committee, this will be circulated to the service groups to implement in their respective area in Q4.	Caring for each other – working together – always improving)
H&S 9	Policy and procedure reviews	 Refresh review process and presentation of information to H&S Ops Group and Committee. Include policy/procedure annual update in H&S annual report. 	Sept 20 Apr 21	Nov 20 June 21	Mark Parsons / Laurie Higgs	Core			Policies and procedures reviewed – developed in line with requirements/frequencies System in place to monitor Policies & Procedures, these are updated/developed and flow	Caring for each other – working together – always improving)

		4. Include reviews of policies/procedures in KPI.	Apr 21	Dec 21			through the H&S group and H&S committee for ratification.	
H&S 10	Update Health and Safety Strategic Action Plan to be review annually and approve by Health Board H&S Committee.	1. Agree initial plan and monitoring arrangements for 2020/21 calendar year.	Sept 20	Nov 20	Mark Parsons	Core	Strategy action plan updated and approved by the H&S Committee This plan is regularly reviewed with updates taken through the H&S	Caring for each other – working together – always improving)
		2. Sharing of plan with Units	Sept 20	Nov 20			committee, last review undertaken in Sept/Oct 21 and presented to the	
		3. Upload plan on intranet	Sept	Nov			H&SC on 5 Oct 21.	
		H&S webpage	20	20				
		4. Review current plan	Feb	May				
			21	21				
		5. Develop 3 – 5 year plan	Apr	Mar				
			21	22				
		6. Approve changes to plan	Sept	Nov				
		, programme	21	21				
		7. Monitor plan	On-	On-				
			going	going				
H&S	Develop a Health &	1. Agree format for H&S	Apr	June	Mark Parsons	Core / support	Newsletter format agreed including	Caring for each
11	Safety Newsletter for regular publication.	newsletter	21	21		from Service Groups and	key topics/messages and published/distributed.	other – working together – always
		2. Agree topics/key themes	On-	On-		Medical Illustration		improving)
		for the newsletter	going	going			Points 1 – 3 achieved.	, 57
		3. Publish/distribute	On-	On-			Point 4 has not been achieved due to challenges for the HB and with	
		newsletter	going	going			resources within the H&S team.	
		4. Prepare and publish a quarterly newsletter	On- going	On- going				