

## **APPENDIX 1**

Title:	Health and Safety Strategy Action Plan 2021-24
Document Reference:	SBUHB – H&S Strategy Action Plan
Version:	V.06
Owner:	Mark Parsons Assistant Director of Health & Safety
Executive Lead:	Darren Griffiths Director of Finance and Performan

#### Swansea Bay University Health Board, Safety and Welfare Strategy

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

Г	1	Caring for each other	1. Taking reconnibility for all accepts of health and caf
	I	Caring for each other	1. Taking responsibility for all aspects of health and saf
			2. Treating everyone with dignity and valuing diversity
			3. Giving/Receiving through recognition and feedback,
	2	Working Together	1. Building networks to enhance knowledge to provide
			2. Developing our people with health and safety skills t
			3. Growing our reputation in a leader in health and safe
			4. Developing policies and procedures to embed safety
	3	Always improving	1. Embracing change and innovation
			2. Using all evidence available to provide a safe and set
			3. Setting high standards of Health and Safety in all we



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### 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	Definit	ion
Green	The m	lestone 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
Red	There	is failure to achieve the milestone's expected time, budget or performance measure with significant impact up

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#### upon delivery

Ref	Task	Milestones	Start date	End date	Lead	Core / additional resources	Additional costs		onal	Measure - Comments	RAG status	Strategy priority
						(colleagues, support services)	Capital	Recurrent	Non-	recurrent		
H&S 1	Identify appropriate Health and Safety course for Executive Directors "NEBOSH HSE Certificate in Health and Safety Leadership Excellence"	<ol> <li>Identify all executive directors and deputies to undertake HSE Certificate in Health and Safety Leadership Excellence.</li> <li>Identify course provider.</li> <li>Schedule dates for course completion.</li> </ol>	Dec 21 Feb 22 Apr 22	Oct 22 April 22 June 22	Mark Parsons / workforce rep	Core and support (Workforce and OD and external resources)		✓ ✓		<ul> <li>Training identified, implemented with ongoing schedule.</li> <li>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.</li> <li>Course provider has been identified (Astutis) and courses scheduled for 14<sup>th</sup> &amp; 16<sup>th</sup> September 2022.</li> </ul>		Leadership & Management objective (Caring for each other)
H&S 2	Identify appropriate Health and Safety course for managers "IOSH Managing Safely" or equivalent	<ol> <li>Identify appropriate managers to undertake IOSH Managing Safely or equivalent.</li> <li>Identify course provider or develop internally.</li> <li>Schedule initial dates for pilot course completion. This potentially will be 10 year programme.</li> </ol>	Jan 22 Jan 22 May 22	Mar 23 Mar 23 July 23	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. Initial draft to be piloted in Q4 2022/23		Leadership & Management objective (Caring for each other)
H&S 3	Develop manager's health and safety handbook/guidance.	Develop Managers handbook	Nov 21	Mar 23	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 Q1 2022/23 financial year.		Leadership & Management objective (Caring for each other)
H&S 4	Develop Health and Safety external site audit.	<ol> <li>Agree audit template for external site audit.</li> <li>Agree audit schedule.</li> <li>Commence audit schedule.</li> </ol>	Apr 21 Dec 21 July 22	July 23 Jun 23 Sept 23	Mark Parsons / Laurie Higgs	Core – will be dependent on additional resources	~	~	~	<ul> <li>Programme of audits scheduled on a rolling programme.</li> <li>Some elements have been achieved with an audit template developed. It is recommended that point 2 &amp; 3 be deferred to 2022/23 due to resources and the pandemic.</li> </ul>		Leadership & Management objective (Caring for each other – working together – always improving)

H&S	Review Health and	1. Review of Health and	May	Jul	Mark Parsons /	Core and support				Resources reviewed and agreed,	Management &
5	Safety Resources	Safety Resources.	21	21	Workforce rep	(Workforce and OD				with scheduled implementation	Workforce
		2. Propose appropriate				and external		$\checkmark$		/recruitment of additional	involvement & Risk
		structure to the Health	Jun	Aug		resources)				resources.	reduction objective
		Board.	21	21						1. Has been completed	(Caring for each
		3. Develop job descriptions						$\checkmark$		2. Structure has been proposed	other – working
		for approved structure.	Apr	Dec						3. Job descriptions have been	together – always
		4. Commence recruitment	21	21						completed	improving)
		process and implement	Sept	May						4. Recruitment has progressed	
		structure.	21	22						and will be on-going through	
		5. Implement structure								2022 – 2024 financial years	
			Apr	July						5. Implementation of the	
			22	22						structure has commenced and	
										will be phased in during	
										2022/23 and 23/24 financial	
										years, actual WTE to be	
										confirmed against business	
118.0	Dovelop and undertake	1 Develop initial sofety	Oat	D.4 a.v.	Marili Davaara	Cana and annoart				Case.	Maril forma
H&S	Develop and undertake a snap shot safety	1. Develop initial safety	Oct	Mar	Mark Parsons	Core and support				Survey developed and undertaken.	Workforce
6	culture survey	culture survey.	21	23 Mar		(Communication/IT		$\checkmark$		Due to the menu shellonges within	involvement & Risk
		2. Undertake safety culture	Jan 22	23		and other teams) –		•		Due to the many challenges within the Health Board it is recommended	reduction objective
		survey. 3. Analyse survey results.		May		dependent on additional					(Caring for each other – working
		5. Analyse survey results.	Apr 22	23						that this be postponed until either Q4 2022/23 or Q1 dependant on	together – always
		4 Dovelop action plan from				resources					improving)
		<ol> <li>Develop action plan from survey results.</li> </ol>	May 22	June 23						resources	inipioving)
H&S	Develop health and	1. Develop health and safety	Apr	July	Mark Parsons /	Core - will be				Programme of audits scheduled on a	Management,
7	safety audit tool based	audit tool for unit use and	21	21	Laurie Higgs	based on tool				rolling programme.	Workforce
,	on ISO 45001 standard	corporate use.	21	21	Laune mggs	developed by all					involvement & Risk
		2. Schedule a Health Board	Apr	June		Wales H&S		$\checkmark$		Point 1 has been developed and is	reduction objective
		programme of health and	22	23		advisors group and				ready for use.	(Caring for each
		safety compliance audits		25		dependent on				Points 2, 3 & 4 are recommended to	other – working
		across the organisation.				additional				be deferred to 2023/24 financial	together – always
		3. Analyse audit results.	Sept	Mar		resources				year due to resource challenges and	improving)
		5. Analyse dualt results.	22	23		resources				the pandemic.	inipioving)
		4. Develop action plan from	Apr	June			$\checkmark$		$\checkmark$		
		audit results.	22	23							
H&S	Develop Health Board	1. Outline KPI's for	June	Sept	Mark Parsons /	Core / Support				KPI's identified and adopted for HB	Caring for each
8	Health and Safety Key	consideration for HB and	21	21	Unit director reps	from units				and Units.	other – working
	Performance Indicators	Units.	21	21							together – always
	(KPI's)	2. Agree KPI's for HB/Units.	Apr	June						KPI's have been agreed and	improving)
			22	22						submitted to the H&S Ops group and	
		3. Implement KPI's.	Oct	Dec						H&S Committee, this will be	
			22	22						circulated to the service groups to	
		4. Monitor KPI performance.	On-	On-						implement in their respective area in	
			going	going						Q3/4 2022/23.	
		1	1 8 9 1 8	1 8 9 11 8	1		1				

H&S 9	Policy and procedure reviews	1. Refresh review process and presentation of	Sept 20	Nov 20	Mark Parsons / Laurie Higgs	Core	Policies and procedures reviewed – developed in line with	Caring for each other – working
-		information to H&S Ops					requirements/frequencies	together – always
		Group and Committee.					·	improving)
		2. Include policy/procedure	Apr	June			System in place to monitor Policies	
		annual update in H&S annual	21	21			& Procedures, these are	
		report.					updated/developed and flow	
		4. Include reviews of	Apr	Dec			through the H&S group and H&S	
		policies/procedures in KPI.	21	21			committee for ratification.	
H&S	Update Health and	1. Agree initial plan and	Sept	Nov	Mark Parsons	Core	Strategy action plan updated and	Caring for each
10	Safety Strategic Action	monitoring arrangements for	20	20			approved by the H&S Committee	other – working
	Plan to be review annually and approve	2020/21 calendar year.						together – always
	by Health Board H&S						This plan is regularly reviewed with	improving)
	Committee.						updates taken through the H&S	
		2. Sharing of plan with Units	Sept	Nov			committee, last review undertaken	
			20	20			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				
			21	21				
		7. Monitor plan	On-	On-				
	Davidaria di la sitta di		going	going				
H&S	Develop a Health & Safety Newsletter for	1. Agree format for H&S	Apr	June	Mark Parsons	Core / support	Newsletter format agreed including	Caring for each
11	regular publication.	newsletter	21	21		from Service	key topics/messages and	other – working
						Groups and	published/distributed.	together – always
		2. Agree topics/key themes	On-	On-		Medical Illustration		improving)
		for the newsletter	going	going			Points 1 – 3 achieved.	
			0.				Point 4 has not been achieved due	
		3. Publish/distribute	On-	On-			to challenges for the HB and with	
		newsletter	going	going			resources within the H&S team. The	
							HB has agreed that any H&S related	
		4. Prepare and publish a	On-	On-			topics will be included in the new HB	
		quarterly newsletter	going	going			wide newsletter. Action point to be	
							closed.	
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