



SWAAHB AGM

Health & Safety

ALICE FOXEN | HEALTH & SAFETY OFFICER | PARAMEDIC

EXECUTIVE SUMMARY

Health and Safety is more than trips and slips, it's workplace stress, working conditions, digital screen equipment use, suitable personal protective equipment and more. This year I've raised several issues brought to me by members. These include first aid provision, risk assessment, concerns regarding projectiles, heating issues, being unable to have blinds in an office, boot queries and more. Additionally, you will find a breakdown of some of the meetings that I represent, you, our members at, and the work of my fantastic team of safety reps across SWAST.

HEALTH & SAFETY GROUP (HSG)

This brings together Heads of Departments such as Fleet, Operations, SWAST H&S, Violence and Aggression, Fire Safety, and me as staff side. I represent the workforce. I write a report and escalate matters that warrant the input of this level. The content of these reports is mostly covered in this AGM report. However, on one occasion I brought a written statement from a brave member who shared their poor experience with HSG attendees. Actions arise from HSG, which adds accountability to individuals, and these are reviewed at every meeting.

TEAM & WORKPLACE REVIEWS

Safety reps across the counties have been working hard to review workplaces. They complete a workplace review on a purpose-built template which can be amended for constant improvement. Safety reps can add photos and descriptions of their findings. The report is then made available to staff. Between us we have completed 38 workplace reviews and requested many actions to be taken by site responsible officers to improve their workplace. These actions vary from reporting poor lighting and floor defects, to leaks, fire related signage, and sometimes lack of ergonomic equipment.

If you are interested in reviewing workplaces and improving safety culture in your local area, or Trust wide, please get in contact.

CCTV

After a freedom of information request following member concerns, it was made apparent that the SWAST could be doing more to ensure the successful retrieval of vehicle CCTV. This footage can be used by the police to prosecute the public for assaulting colleagues, or as evidence in road traffic collisions.

A working group was put together to facilitate discussion between operations, staffside and the Fleet and Equipment Business Support Team, a communications plan for supporting staff was designed, and an SOP draft is in progress. The work of this group is due to update the HSG as I raised this as a concern in that forum.

The success rate of CCTV retrieval is now reported on and shared on a monthly basis to UNISON.

VEHICLE EQUIPMENT UNIFORM WORKING GROUP (VEUWG)

This group is made up of various departments including clinical, fleet and equipment, operations, EPRR, procurement, environmental, infection prevention control and more. Colleagues discuss new equipment, vehicle changes, policies relating to these and approve items before they go for further approval at other committees. I represent staff side on this group and raise issues that are brought to

me by members or that I have noted whilst on shift or at workplaces. This has also been an opportunity for me to ask questions on certain topics and bring an equalities perspective on some items.

In collaboration with this working group, some safety reps and I have attended equipment reviews and risk assessments to offer an operational perspective and sometimes challenge. This included the pediatric restraint devices and the specialist paramedic RRVs which had more projectiles than standard layout RRVs.

REPORTING CULTURE

InPhase reporting was highlighted as not up to standard in HSG, as our number of types of report did not align with Heinrich's Triangle. It was raised at JNCC (Chief, directors, staff side) that there is a poor feedback loop and thus poor confidence in reporting. This motivated the Trust to identify that the automated feedback on InPhase that should have been sending out information to the reporter, put in place April 2025, has not been working.

I and the rest of the committee have been encouraging colleagues to report all incidents, observations, near misses or otherwise. In particular, I have encouraged the use of the unavailability codes which allow staff time to complete their InPhases at hospital (SOP81) or at station (SOP79).

Observations, the bottom of the triangle were reported by the Trust to have risen by 89% at one HSG, and 45% at the following. Thank you for your ongoing commitment to this, please continue this effort to improve safety in the workplace.



RAISING AWARENESS OF ISSUES TO TRUST HEALTH & SAFETY TEAM

I have steadily built a rapport with the SWAST H&S Team – safety reps can raise and resolve queries in real time, escalate others or talk through findings from workplace review. We have also had two larger meetings between SWAST and UNISON. Attendees were SWAST H&S team, safety reps, Branch Secretary (Robin) and Assistant Branch Secretary (Emma). Seatbelts, communication plans, heating, stress and future planning were discussed in depth.

Local consultative committees (which take place quarterly in all county ops and some other departments) and this rapport have birthed SWAST's release of the AACE Seatbelt Campaign, and a future campaign to improve staff knowledge and support in use of helmets. These meetings are also an opportunity to check in with SWAST management following workplace reviews and prompts to support InPhase reporting.

EQUALITY STEERING GROUP

As equality is of a particular focus for UNISON, we have agreed and informed SWAST that we will not approve any policies at Policy Review Alignment Group (PRAG) that do not have an acceptable or completed equality impact assessment. This is required as it provides some reassurance that protected characteristics have been considered when the policy has been written or reviewed. This supports the health and wellbeing of our workforce.

DIGITAL SCREEN EQUIPMENT

Something often overlooked but incredibly important for the longevity of careers and wellbeing of staff. This is particularly relevant for control room staff, those who are non-patient facing that use screens continuously for longer than an hour. Healthy DSE habits, [which are also requirements of the law](#), include:

- ! Doing a DSE workstation assessment
- ! Ensuring workers take breaks from screens
- ! Provide eye tests if a worker asks for one

Please ask your manager if you feel that you are not having your DSE usage managed appropriately.

HSE says: *Incorrect use of DSE or poorly designed workstations or work environments can lead to pain in necks, shoulders, backs, arms, wrists and hands as well as fatigue and eye strain. The causes may not always be obvious.*

I have supported colleagues to get appropriate blinds for their office due to DSE requirements and supported others in the branch to provide their members with appropriate advice and signposting. Safety reps also check DSE workstations when they complete their workplace reviews.

INFECTION PREVENTION CONTROL & ENVIRONMENTAL SUSTAINABILITY GROUP

I attend these groups in my role on the Branch Management Group and welcome any feedback or queries that members would like me to raise here. Discussions at Environmental Sustainability Group have included the use of bicycles, green targets, waste audits, solar panels and more. IPC involves discussion on new risks, discussions following or prior to VEUWG ie use of stickers and how to improve general IPC culture.

SOUTH WEST REGIONAL HEALTH & SAFETY COMMITTEE

In November I was nominated and appointed as Co-Chair of the South West H&S Committee and as the delegate to attend National Conference on their behalf. I plan to bring our success story on reporting as a campaign to this committee, as an easy model to circulate to other South West Branches to improve their reporting culture. Watch this space!

NEXT YEAR

This year I hope to build on existing relationships with SWAST, co-creating campaigns to improve safety culture in the workplace, highlighting issues directly to those with overall responsibility when required and bringing staff side's thoughts and feelings to senior leadership.

I welcome all staff to raise issues with me, encourage all staff to raise observations, near misses, work-related injuries or illness via InPhase. This creates a record, requires an assigned investigating officer, and where H&S related, a triage from one of the SWAST H&S team.

If you would like to be part of this innovative and proactive team, or would like to know more, please get in touch using alice.foxen@swast.nhs.uk.

Here to help,

-Alice