
Report to **Audit Committee**

Date of Meeting: **30th September 2021**

Subject: **Health & Safety Annual Report**

Report by: **Strategic Director – Partnerships & Performance**

1.0 Purpose

- 1.1. This report provides the 2020/21 annual report on Health & Safety performance across the Council and sets out a plan of work in this area for the coming year.

2.0 Recommendations

- 2.1. That Committee notes the report, commenting and challenging as appropriate.

3.0 Considerations

- 3.1 The Council has a legal duty to ensure the health and safety of the staff it employees and anyone who comes into contact with the services we provide. As well as ensuring no person comes to harm, this also helps prevent loss or damage to property, disruption due to incidents and claims being made against the Council.
- 3.2 The Health & Safety Team have been heavily involved in the response to the pandemic. This has impacted on work which had previously been planned.
- 3.3 Significant work has been undertaken over the last year to improve the health and safety culture across the organisation and the report provides detail of this activity and performance measures.
- 3.4 However, there is still work to be done to ensure the Council fully meets its legal obligations. The report also sets out a plan of work for the 2021/22 financial year to ensure that progress continues.

4.0 Sustainability Implications

- 4.1. None noted.

5.0 Resource Implications

5.1. Financial Details

- 5.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate. Yes

5.3. Finance have been consulted and have agreed the financial implications as set out in the report. Yes

5.4. *Staffing*

6.0 Exempt Reports

6.1. Is this report exempt? Yes (please detail the reasons for exemption below) No

7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities** (Please double click on the check box)

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

(2) **Council Policies** (Please detail)

Health & Safety Policy

8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations? Yes No

9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

- **Appendix 1:** Health & Safety Annual Report


11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered) Yes (please list the documents below) No

Author(s)

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Health and Safety

Annual Report 2020–2021

Be the
Future

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1. INTRODUCTION

1.1 Aims and Objectives

In order to manage Health and Safety (H&S) effectively, it is essential to carry out and report on periodic reviews of H&S performance. This report aims to provide senior management and Elected Members with insight into the deployment of H&S across the Council. Management information is included for the period between 1st April 2019 and 31st March 2021 – normally this would take place on an annual basis, but due to the Covid19 pandemic, no report was produced for 2019-20. Information relating to the use and performance of the Occupational Health contract is also considered.

The report also provides information on H&S risks and any enforcement action / Health and Safety Executive (HSE) involvement where the effectiveness of internal controls and H&S risk management have not achieved their intended aim(s).

The Council uses the system set out in the HSE publication *Managing for Health and Safety (HSG65:2013)* as the basis for its H&S Management System. This is based on principles of Plan, Do, Check and Act which are common to many management systems.



The ultimate objective of this report is to monitor performance and to provide an indication of the level of assurance on the achievement of statutory compliance.

1.2 H&S Team goals

The H&S Team aims to ensure, as far as is reasonably practicable, that Council business is conducted and services are delivered without causing harm or ill health to our staff, or any others affected by our activities. Advice provided on the management of H&S will be reasonable, proportionate to the level of risk and benchmarked with similar organisations. The team also manages the Council Occupational Health Services contract. The H&S service contributes to maintaining a healthy workforce, improving efficiency, reducing costs and claims, managing risk and reducing absence.

The central H&S Team satisfies the statutory requirement to appoint an adequate number of competent persons to assist the Council to comply with its legal duties, without removing the direct responsibility on Services to assess risk and operate in a safe manner.

Over the past year the team has played a significant role in the Council's response to the Covid19 pandemic. This has involved providing advice and guidance to staff and managers on the national guidance and regulations, carrying out assessments of all buildings to ensure they are "Covid Secure", carrying out individual risk assessments to ensure appropriate measures are in place for staff with underlying health conditions and co-ordinating and issuing PPE to Council services and to wider groups on behalf of the HSCP. This has all been undertaken while continuing a wide range of business as usual activities and in addition to creating new wellbeing activities for staff.

2. EXECUTIVE SUMMARY

Highlights from the broad range of work undertaken from the period 2019-21 include:

- Compliance with an Improvement Notice from the Health & Safety Executive about Management of Asbestos in Schools,
- Development or review of 14 policies,
- Completion of 3794 Health and Safety training activities,
- Completion of General Health & Safety Audit visits to 20 Council properties,
- Completion of 1004 Health Surveillance checks,
- Support provided through 443 contacts with PAM Assist and 17 referrals to Physiotherapy,
- Completion of the analysis of 61 Stress Risk Assessments.

All of the above support the Council in achieving statutory compliance and enhancing the health, safety and wellbeing of staff.

As a result of the Covid-19 pandemic, the team has also been involved in:

- arranging testing for 105 individuals,
- completing 500 individual risk assessments,
- completing around 160 building covid assessments,
- reviewing over 500 DSE assessments and following up on 125 of them,
- providing over 110,000 items/boxes of PPE to Council locations as well as 653,000 pieces of PPE through the HSCP Hub
- answering a large number of queries on the subject from across all Council Service areas, and on a re-active basis.

3 PERFORMANCE - H&S MANAGEMENT SYSTEM

3.1 Key Performance Indicators

In March 2018 a set of Key Performance Indicators were agreed for Health and Safety Performance across the Council. The results from this can be found at Appendix 1.

Objective	Description	Measure
Monitor and review risk assessment programmes	Monitor the implementation of risk assessment procedures	Number of assessments completed against number expected as a %
Ensure effective communication of Policies and Guidance	Measure of how well policies have been disseminated through the organisation	Number of employees receiving a toolbox talk on new H&S policies expressed as a % of those who should have received such a talk.
Ensure employees have completed basic H&S training recently.	Measure of implementation of core H&S Training (H&S Intro, Electricity, First Aid, Fire, Slips & Trips MicroLearn or Toolbox Talk)	Number of employees completing core H&S Training (refreshed each year) expressed as a % of total number of employees.
Ensure appropriate controls are in place to protect employees from violent behaviour	Measure of the number of violent incidents experienced by employees.	Number of violent incidents to employees expressed as a % of the overall number of employees.
Ensure Incidents are reported promptly	Measure the implementation of accident reporting procedures	Number of incidents reported within 5 working days expressed as % of incidents reported.
Ensure Health Surveillance is carried out in line with statutory requirements.	Monitor implementation of the health surveillance programme.	Number of HS appointments attended expressed as a % of the number of appointments offered by Occupational Health.
Ensure that Health & Safety is embedded throughout the organisation	Monitor how well employees feel health and safety is being managed using an HSE tool	Score out of 100 provided.

Significant work is ongoing to work towards these targets but better engagement with the services is required to enable these to be met.

3.2 Statutory Breaches & Enforcement Action

a. HSE Inspection – Management of Asbestos in Schools

Statutory breaches were identified following a proactive inspection by an HSE Inspector looking at management of asbestos in schools. This followed a visit to St Serf's PS on 10th May 2019.

The HSE investigation resulted in an Improvement Notice which required the Council to ensure we have an accurate record of the location of asbestos, an asbestos management plan for each property and that all staff have appropriate training in relation to asbestos. Evidence was submitted to the HSE and they have confirmed that the Council has complied with the Improvement Notice. The related Fees for Intervention was £566.

3.3 Significant Incidents/Accidents

During 2019/20 and 2020/21 there were no full HSE investigations following the reporting of accidents under the RIDDOR Regulations. Where requested by HSE further additional information was provided.

3.4 Accident Data

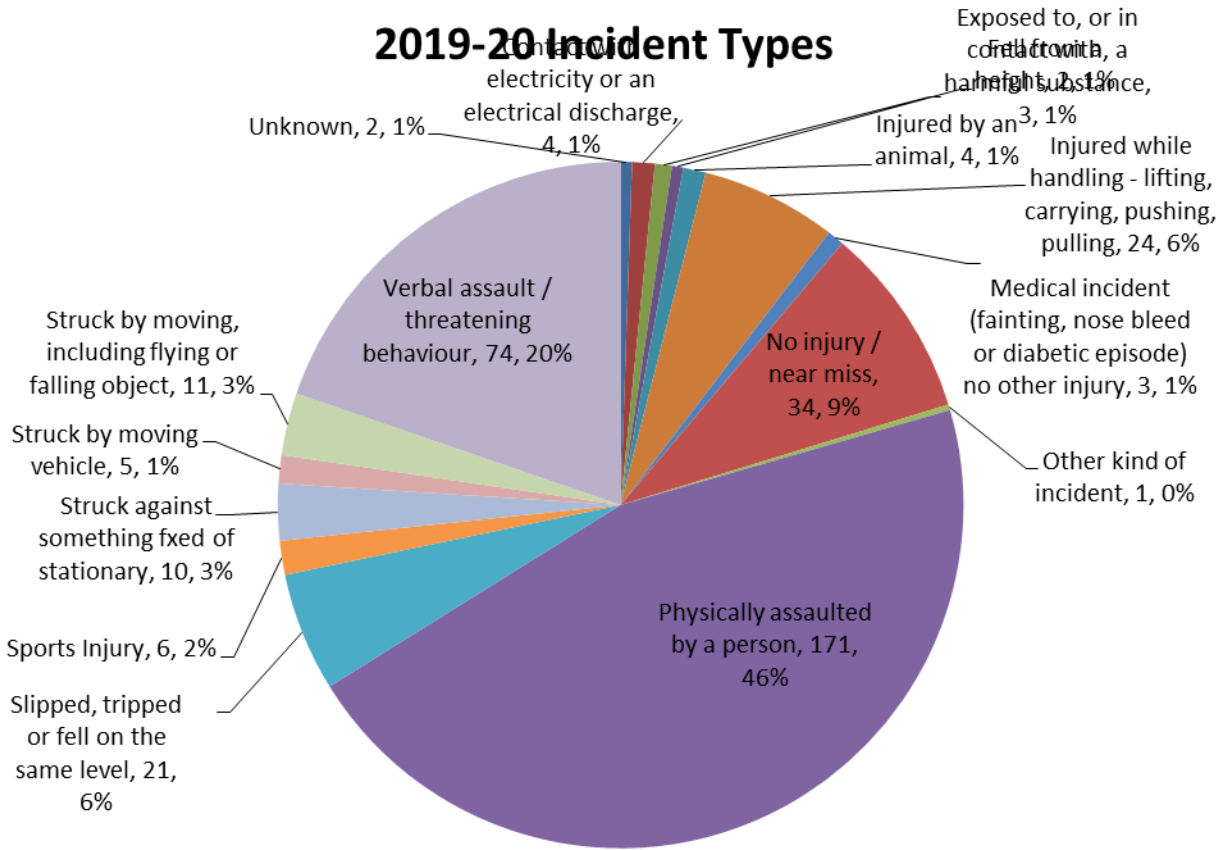
Table 1 below summarises the accident data for employees for the financial years 2019/20 and 2020/21, previous years are included for comparison. Due to capacity issues within the H&S team no statistics are available for incidents to service users or other members of the public although records are held.

TABLE 1 - COUNCIL ACCIDENT STATISTICS – 2018/19, 2019/20 and 2020/21			
Number of Reports	2018/19	2019/20	2020/21
Staff	187	375	264
RIDDOR (HSE) reportable accidents within the above			
Staff	16	8	7
Staff accident incidence rate (AIR) Total riddor reportable x 100,000 / FTE employees.	16 x 100000 / 1961 = 815.91	8 x 100000 / 2029 = 394.28	7 x 100000 / 2090 = 334.93

There has been a significant increase in the number of incidents reported, but the proportion of these required to be reported to the Health & Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) has decreased. The increase is likely a result of activity undertaken to ensure that employees were aware of their responsibility to report incidents and the introduction of a Near Miss Card which allows employees without computer access an easy way to report incidents which have not resulted in any harm. Table 2 illustrates the proportion of incidents across all services areas. Comparison across services with earlier years is not possible due to the Council reorganisation.

TABLE 2 – COUNCIL STAFF ACCIDENT STATISTICS – by Directorate

2019-20 Incident Types



Count of Date of Incident

2019-20 Incident Types

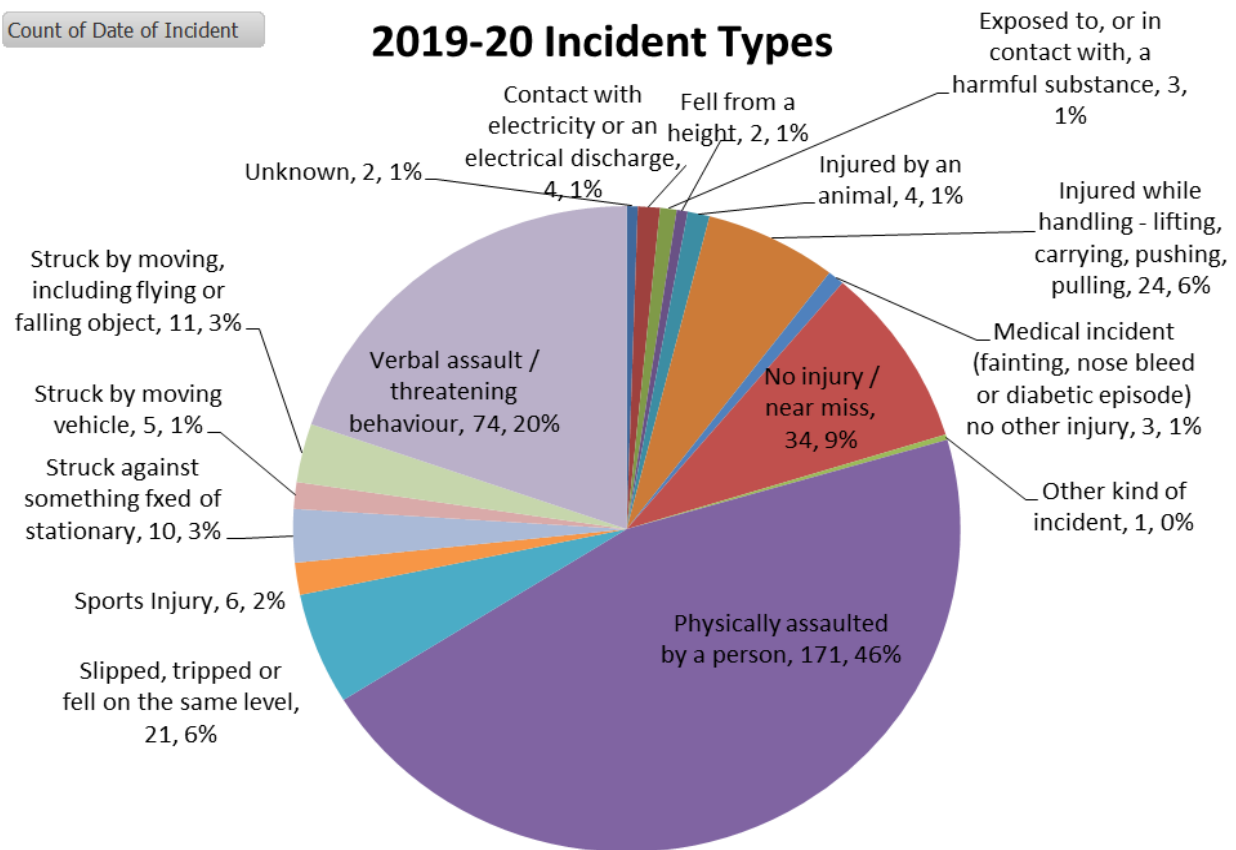
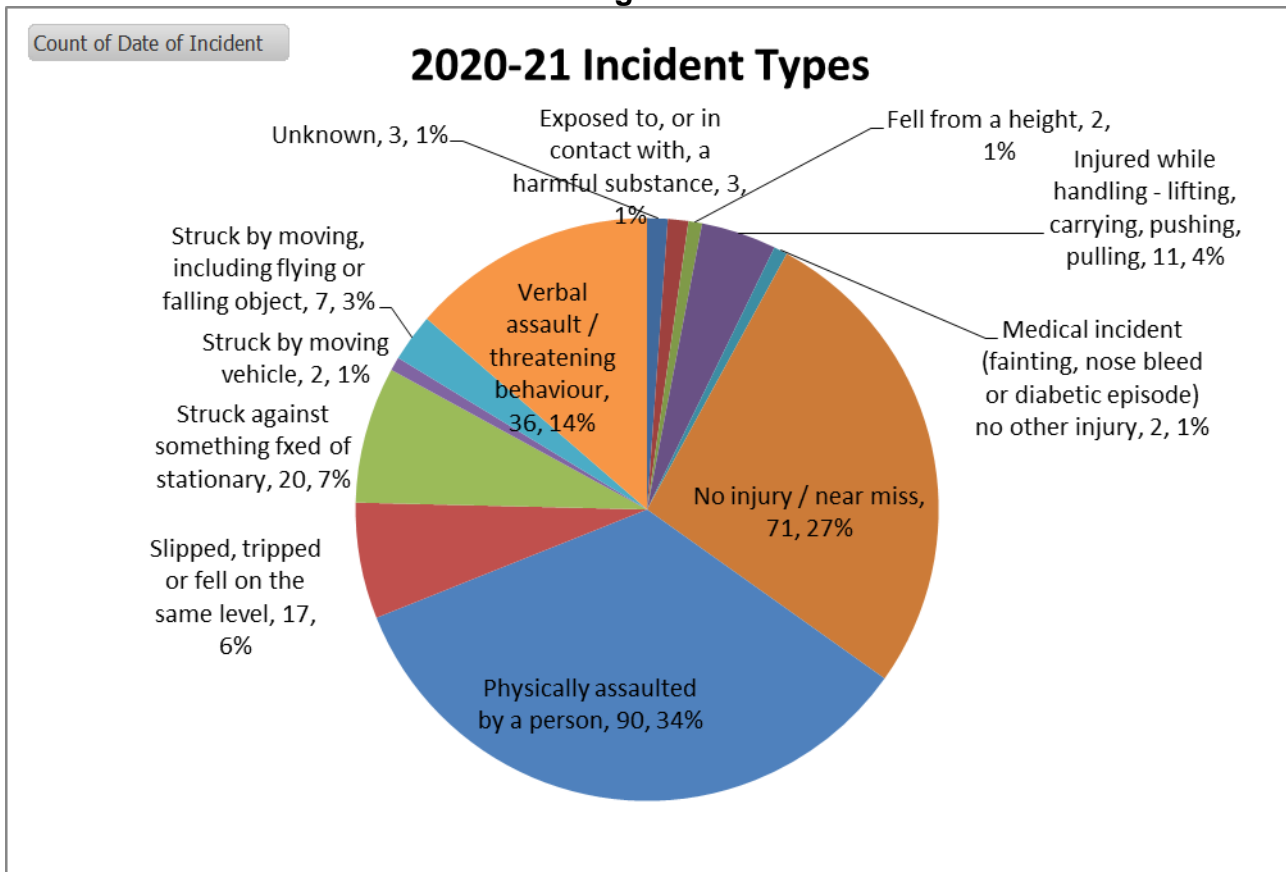


Figure 2



In 2020/21 the proportion of Near Miss events reported has trebled. This is encouraging as reports at this stage allow identification of potential issues before they cause harm.

3.5 Audits

A programme of general Health & Safety Audit visits to 105 identified Council properties commenced in October 2017. These are properties which the Council maintains the responsibility for safety and upkeep. The final 20 buildings were assessed during 2019/20 which concluded the programme. Basic Health & Safety management arrangements are in place for most buildings, although some issues with the building fabric are now being addressed by the Planned Works & Compliance Team.

A new programme has been drawn up for the next round of visits. These will again take place in conjunction with our trade union representatives and will commence once Covid restrictions allow. These will be recorded using our new SHE Assure system which will allow better tracking of follow up actions.

In addition to this the Health & Safety team have completed a number of visits to worksites. The main issue identified from these visits has been a failure to wear Personal Protective Equipment (PPE) correctly. Toolbox talks have been undertaken to help resolve these issues.

An audit of Fire Safety arrangements in school was also undertaken in May 2019. This showed that most arrangements were in place and working well, but some areas for improvement were identified and have been followed up by the Education Service.

An external audit was also undertaken in July 2019 through the Authorities Benchmarking Club. This group comprises of 11 local authorities across Scotland who undertake peer reviews of health and safety arrangements to standards agreed by group members. Each criteria is marked out of a score of 9. The audit showed improvement in scores in a number of areas since the previous Audit in 2014. These scores are summarised in Table 3.

Table 3 – Results of Authority Benchmarking Club Peer Audits

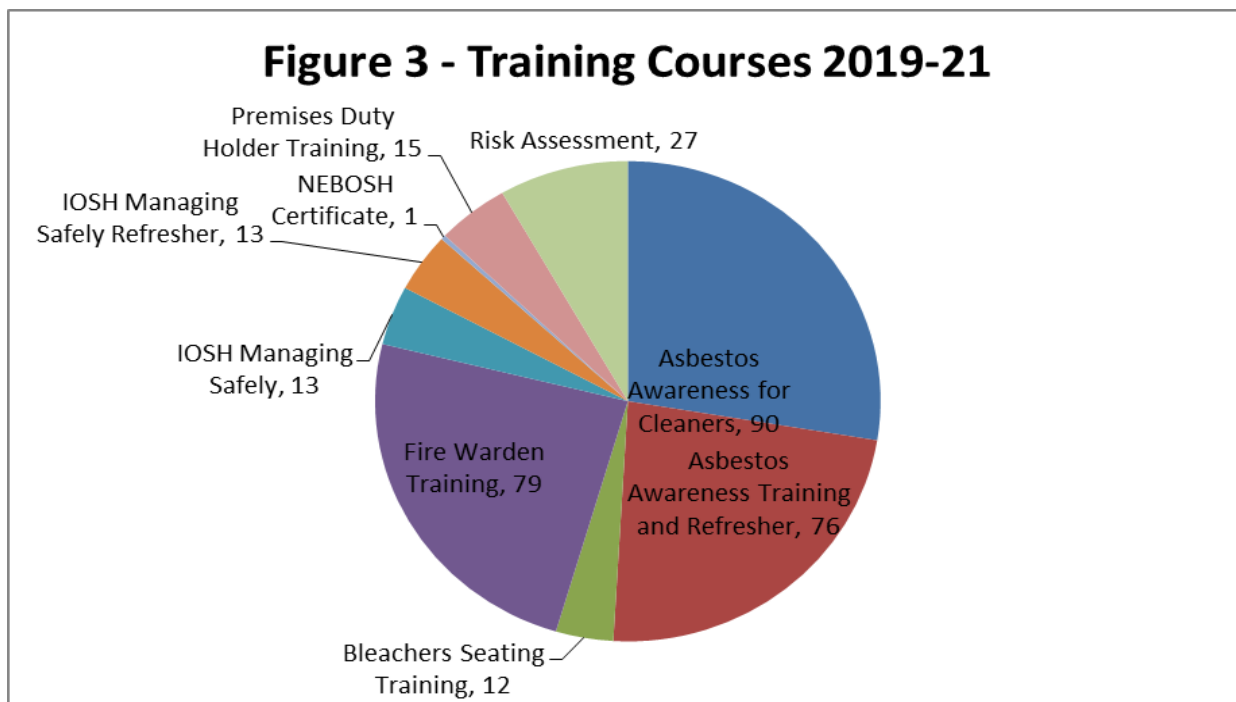
Area	Key Activity	Score Dialogue	2014 Score	2019 Score
1	Health and Safety Policy / Guidance	awareness of good practice evident	3	6
2	Implementation of Corporate Health and Safety plan	awareness of better practice evident	3	7
3	Provision of Health and Safety advice	awareness of good practice evident	8	6
4	Health and safety audit and inspection	awareness of good practice evident	5	6
5	Undertaking Risk Assessments	awareness of good practice evident	6	6
6	Provision of Health and Safety Training	minimum standards evident	6	3
7	Incident Investigation & Recording	awareness of good practice evident	6	5
8	Health and Safety Committees	awareness of good practice evident	7	6
9	Health and Safety Communications	awareness of better practice evident	7	7
10	Managing Performance of H&S Section	awareness of better practice evident	5	9
11	Occupational Health Provision	awareness of better practice evident	8	8
Total			64	69

3.6 Training

H&S training plays a significant role in reducing overall H&S risk. In 2019/20 there were 3698 attendances at events which would improve the safety and health of employees and service users. In 2020/21 events decreased as a result of the H&S Team being diverted to support the pandemic response.

Figure 3 details the attendance at H&S training courses organised by the H&S Team during the financial year 2019/20 and 2020/21.

Figure 3 - Training Courses 2019-21



*the above includes only the H&S courses organised by the Corporate H&S team. Other courses are organised at service level including first aid and other topic specific courses i.e. ladder safety etc.

The IOSH Managing Safely and NEBOSH Certificate courses were supported by funding through the Flexible Workforce Development Fund. This also supported City & Guilds Education & Training courses for four of the Health & Safety Team to give them the competence to be able to run in-house courses on health and safety subjects.

In November 2020 a First Aid Officer was employed within the Health & Safety Team. A significant part of his role is to provide First Aid Training across all Council Services. This has led to a decrease in the costs experienced by the Council and improved satisfaction with the courses as they can be tailored to different groups of staff. It is anticipated that this will be extended to partner organisations in future years.

A growing number of courses are being run as e-learning, allowing employees to choose where and when they access the course. Table 4 shows the number of employees completing key courses across each of the last three financial years. These were deemed to be mandatory courses for all employees.

Course	2018/19	2019/20	2020/21
H&S Intro	248	172	478
Electricity	74	76	239
First Aid	84	93	285
Fire	153	184	1313
Slips & Trips	74	86	261
Total	1233	611	2576

In addition, Toolbox Talks have been developed for H&S policies which have been implemented or reviewed. Table 5 shows the number of employees who have received these since 2018.

TABLE 5 – H&S Toolbox Talks				
Subject	2018/19	2019/20	2020/21	TOTAL
H&S Policy	471	343		814
Risk Assessment Policy	192	43		235
Fire Safety Policy	41	167		208
Construction (Design & Management) Policy	100	15	22	137
Accident Reporting & Investigation Policy	38	31	172	241
Management of Asbestos Policy	42	398	177	617
Management of Contractors Policy	19	15	45	79
Lifting Operations and Lifting Equipment Policy	29	118		147
Asbestos in Council Buildings		197		197
Chief Executive H&S Briefing		603		603
Driving at Work Policy		141		141
Health Surveillance Policy		243		243
Legionella Prevention Policy		116		116
Mental Health		18		18
Near Miss Reporting		41		41
Personal Protective Equipment Policy		183		183
Public Building / School working		57		57
Provision and Use of Work Equipment Policy		131		131
School Crossing Patrol Working		14		14
Control of Vibrations Policy		111	8	119
Workplace Security		59		59
TOTAL	932	3044	424	4400

Delivery of these briefing sessions has been largely stopped due to the restrictions on people gathering as a result of the Covid pandemic, but it is hoped that these can be resumed once there is a sustained reduction in transmission rates.

A Training Needs Analysis for Health & Safety training is underway and from this a matrix will be developed showing what training is required for different types of roles across the organisation. This will then inform the development of a training programme over the next few years.

4 OCCUPATIONAL HEALTH PROVISION

The Occupational Health Provision (OHP) is an important risk/absence management tool, allowing the Council to optimise productivity whilst reducing costs related to health issues. OHP's perform the following functions:

- Identification of the legacy of impairment/disease in new employees and the establishment of a 'baseline' of health.
- Pre employment health assessment.
- Advising on adjustments as required to comply with the Equality Act 2010.
- Identification of work-related disease and defence in the event of legal challenge.
- Provision of advice on preventing/minimising work-related illness.
- Compliance with statutory health surveillance requirements.
- Assessment of fitness for work during and after illness/disease onset and recommending adjustments and restrictions to reduce absence costs.
- Employee Assistance such as Counselling, CBT, EDMR.
- Physiotherapy.

The main OHP is currently delivered by Optima Health, with Employee Assistance provided by PAM Assist and Physiotherapy provided by Framework. The value of these contracts is £84,000 per annum, with some additional costs agreed separately for more specialist services. The initial OH Contract ran until 31st March 2021, but the option to extend this until 31st March 2023 has been implemented.

4.1 OH (Management) referrals

Table 6 below shows the number of referrals made to our OHP. These are mainly made by managers in relation to employee attendance issues, but occasionally may be made to request advice in cases where there has not been any absence.

Referral Type	Number of referrals 2018/19	Number of referrals 2019/20	Number of referrals 2020/21
Management referrals	381	366	365
Pre employment screening	400	535	318
Case conferences	1	0	0

The number of management referrals has decreased as changes to the Maximising Attendance policy have been implemented. The number of pre employment screening requests reflects recruitment activity across the Council.

4.2 Health surveillance

Health surveillance checks are required by legislation and include checks for:

- Noise Induced Hearing Loss;
- Hand Arm Vibration Syndrome;
- Occupational Asthma / lung function;
- Occupational Dermatitis (skin);
- Night worker medicals;

Table 7 below shows the number of staff attending OH for statutory health surveillance appointments over the last three years. In line with guidance from the Health & Safety Executive surveillance was paused during the initial stages of the pandemic, with paperscreen surveillance having taken place since then. It is expected that face to face appointments will resume by October 2021.

There are 295 individual staff members currently included in the health surveillance programme and 38 staff on the night worker medicals programme.

TABLE 7 - Health Surveillance Appointments			
	2018/19	2019/20	2020/21
HAVS	122	97	59
Audiometry	109	82	64
Skin checks	244	221	121
Lung checks	262	222	122
Night worker assessment	18	16	0

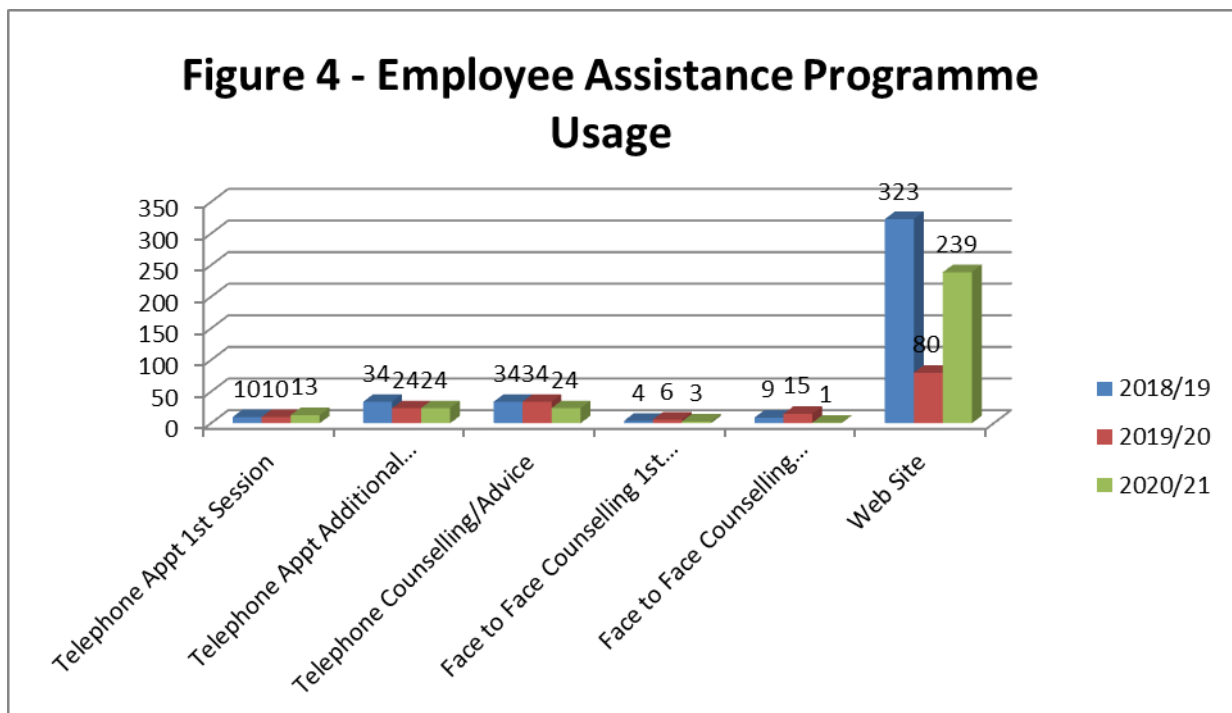
* Health surveillance checks are cyclical, some of which take place on a 3 year rotation. These figures highlight the usage of the contract and are not performance indicators.

Where symptoms are identified during routine health surveillance managers are then provided with recommendations from OH in order to ensure exposures are reduced. A structured feedback form is now used to ensure the outcome of health surveillance appointments is formally passed to staff, with results of this being recorded on iTrent.

4.3 Employee Assistance Programme

The Employee Assistance Programme provides for online and telephone assistance on a wide range of topics. If more specific support is provided such as counselling, CBT or EDMR this is charged separately to the relevant service.

Figure 4 shows the use made of this provision in the over the last three years. A total of 887 contacts were made with PAM Assist, with nearly half of these in the first year.



The main topic for phone contact was Mental Health Issues. Table 8 shows the topics viewed on the website by Council employees.

TABLE 8 – Employee Assistance Website Topics			
Topic	2018/19	2019/20	2020/21
CBT Support		1	13
Change Your Thinking		2	8
Conditions		1	2
Drinking		1	
Drugs and Alcohol	6		
Eating		6	16
Eating Disorders		2	
Finance		1	20
Generic		1	6
Health Awareness			4
Legal Advice	6	1	16
Managing Money	101	2	
Medicine Chest	21	1	
Mental Health	116	18	84
Moving			2
MSK		3	1
No topic	66	7	
Nutrition & Health			1
On-line Counselling	24	5	
Recipes			2
Stress Management		11	1
Support	41	25	
Women's Health		1	1
TOTAL	381	89	177

4.4 Physiotherapy

The primary purpose of the Physiotherapy Service is to either prevent absence or to facilitate a return to work as a result of a musculo-skeletal injury or illness. The Service was set up as part of the Council's absence management initiatives with the aim being to provide faster access to physiotherapy as staff could wait eight to twelve weeks for NHS provision. The physiotherapy provision is delivered by 'Frameworks Clinics'.

There were 17 referrals to Physiotherapy during 2020/21.

5 STRESS RISK ASSESSMENT

Stress risk assessments aim to assist managers in the identification of stressors and the subsequent identification of risk control measures. Table 9 below summarises the demand for assessments from each Service. In 2018/19, the numbers were significantly higher than other years previous or since.

TABLE 9 – Stress Risk Assessments by Service 2018-21			
	2018/19	2019/20	2020/21
P&P	10	1	4
People	40	29	15
Place	16	3	4
HSCP	4	5	0
Total	70	38	23

The working environment was significantly different in 2020/21 and it is interesting to note that there has been a marked decrease in stress risk assessments during this period.

6. PRIORITY AREAS FOR IMPROVEMENT

There is generally good progress in health and safety performance. Review of the information provided within this report and the analysis of performance against HSG65 in Appendix 1 suggests there are areas where we need to focus our resources in order to improve our performance. Four of these areas have been identified as a priority, these being:

6.1 Incident Reporting

Our new IT system (SHE Assure) has been introduced with the aim to transform the way we manage health and safety risks across the organisation. One of the significant benefits the system will bring is the ability to more easily report and analyse H&S incidents. Employees are able to report incidents from any internet enabled device and allows managers easy access to up to date information about incidents within their area of responsibility. An additional benefit is it allows H&S resource to be released to provide the professional input in responding and investigating incidents rather than focussing on the administrative process of reporting them.

The system also provides better tools for analysing incident data so that interventions can be targeted to issues which are causing most harm.

6.2 Risk Assessment

The Gallagher & Bassett Audit of Health and Safety carried out in 2016 raised concern about the quality of risk assessments and the lack of any quality assurance process for this. While a number of risk assessments have been viewed as part of the General Health & Safety Audit programme, it is recognised that a more systematic approach is required to provide assurance that risk assessment is a routine part of Council work. This was also highlighted as an area where improvements could be made during the 2019 Authority Benchmarking Club Peer Review Audit.

All risk assessments will be migrated across to the SHE Assure portal over the coming year. This will allow greater visibility of which risks have been assessed and will allow templates to be created and shared for common activities or risks. This will also allow reminders to be sent to managers at appropriate times, and allow links to be made between risk assessments, incidents and audits.

The SHE Assure portal is being developed in conjunction with Angus Council and Perth & Kinross Council and opportunities are being realised to share good practice and workload across the three small Health & Safety Teams. This project will require significant resource over the next year to see it successfully completed.

However, during the course of the pandemic risk assessment and the language around it has become integrated into working life in a way which would have taken several years under other circumstances.

6.3 Health & Safety Training Programme

Good progress had been made on identifying key areas where training is needed to ensure that staff have the necessary skills and knowledge to allow them to work safely. A programme had commenced as noted above. However, this came to a swift halt as a result of the pandemic.

It is hoped that this work can be refreshed and relaunched during the current year. A systematic approach will be taken, working in conjunction with Organisational Development, to ensure that the health and safety training required within different roles are identified and documented.

To support this work, an Assistant L&D Advisor has been recruited who in addition to supporting the Council's workforce programme, will also work with colleagues in health and safety to develop the organisation wide approach to H&S training and culture.

6.4 Mental Health & Wellbeing

Over the past year it has become clear that mental health issues are likely to be a lasting legacy of the pandemic over the next few years. Work will be undertaken over the coming year to review the Mental Health & Wellbeing policy. This will be complemented by a range of interventions to help support managers and employees to understand their own mental health and that of those around them. These are being developed in conjunction with initiatives that are being developed in other areas of the Council such as the Educational Psychology Team.

7 HEALTH & SAFETY TEAM WORKPLAN 2021/22

The key tasks for the Health & Safety Team over 2020/21 are set out in Table 10.

TABLE 10 – Health & Safety Team Workplan 2021/22

Ref	Task	Target Date
Plan		
P1	Complete phase 1 programme of policy development/review	March 2022
P2	Ensure that H&S implications are considered in new ways of working being developed.	December 2021
P3	Lead work to collaborate on Health & Safety with other organisations with which we work	March 2022
P4	Ensure that information about Health & Safety policies is provided to staff to allow work to be carried out safely.	June 2022
Do		
D1	Carry out systematic risk profiling exercise so that all managers are clear of the key hazards in their area	June 2022
D2	Develop H&S Training matrix to ensure all employees have suitable training for the work they are required to do	March 2022
D3	Develop central system for recording risk assessments to allow better quality assurance.	March 2022
D4	Complete implementation of revised Mental Health & Wellbeing Policy and associated interventions	March 2022
Check		
C1	Roll out service input of incidents into SHE Assure	June 2021
C2	Complete programme of General Health & Safety Audits	June 2022
C3	Roll out Safety Climate Tool to gauge employee engagement on Health & Safety	March 2022
C4	Continue programme of reviews of Covid arrangements within different settings as changing guidance/legislation requires	March 2022
Act		
A1	Ensure reports to H&S Forums and SLG contain measurable timescales with ongoing tracking of actions	December 2021
A2	Ensure in-depth analysis of incidents is provided to Operational Health & Safety Forum	September 2021

8 CONCLUSIONS

The aim of this report is to review H&S performance and to provide general assurance on the level of compliance with statutory requirements. From the review limited assurance can be provided on the uniform compliance with statutory H&S duties across the Council.

Significant work has been undertaken to build the foundations of a strong Health and Safety Management System. 14 policies have been developed over the past year, in addition to the 19 which were agreed in the previous years. 20 General Health & Safety Audit visits have been carried out, building up a picture of compliance levels across the Council. A total of 3794 training activities were undertaken during the period.

Pockets of good practice exist within the Council and a key role for the Health & Safety Team is to share this good practice to help those who may not be performing as well. The development of a central risk assessment store will be a key step forward to assist with this.

A key challenge for the team over the next year will be to ensure that Health & Safety remains a priority in all areas of the Council as the new management structures are developed and implemented. This also presents opportunities as the changing structures and working practices are developed.

The H&S Team will continue to closely monitor performance and work towards reducing the key risks facing the Council as detailed above; adjusting priorities as required in order to safeguard the health, safety and wellbeing of staff, as far as is reasonably practicable.

Key Performance Indicators

Appendix 1

Objective	Description	Measure	2018/19 Actual (%)	2019/20 Actual (%)	2020/21 Actual (%)	Target 2021/22
Monitor and review risk assessment programmes	Monitor the implementation of risk assessment procedures	Number of assessments completed against the number expected as a %	Compilation of data not possible	Compilation of data not possible	Compilation of data not possible	70%
Ensure effective communication of Policies and Guidance	Measure of how well policies have been disseminated through the organisation	Number of employees receiving a toolbox talk on new H&S policies expressed as a % of those who should have received such a talk.	H&S – 17.1 Risk – 6.9 Accident 1.4 Asbestos 1.5 CDM - Contracts – 0.6 Fire – 1.5 LOLER – 1.1	H&S – 47.6 Risk – 12.1 Accident 4.2 Asbestos – 21.7 CDM – 6.2 Contractors 3.5 Fire – 10.6 LOLER – 7.6	H&S – 47.6 Risk – 12.1 Accident 12.1 Asbestos – 29.9 CDM – 7.2 Contractors 5.5 Fire – 10.6 LOLER – 7.6	90%
Ensure employees have completed basic H&S training recently	Measure of implementation of core H&S Training (H&S Intro, Electricity, First Aid, Fire, Slips & Trips MicroLearn or Toolbox Talk)	Number of employees completing core H&S Training (refreshed each year) expressed as a % of total number of employees	H&S – 9.9 Electricity –2.9 Fire – 6.2 First Aid –3.3 Slips – 3.3	H&S – 7.9 Electricity –3.5 Fire – 8.5 First Aid –4.3 Slips – 4.0	H&S – 22.0 Electricity –11.0 Fire – 60.3 First Aid –13.1 Slips – 12.0	90%
Ensure appropriate controls are in place to protect employees from violent behaviour	Measure of the number of violent incidents experienced by employees	Number of violent incidents to employees expressed as a % of the overall number of employees.	3.14%	7.9%	4.13%	4%
Ensure Incidents are reported promptly	Measure the implementation of accident reporting procedures	Number of incidents reported within 5 working days expressed as a % of incidents reported.	82.2%	90.7%	92.4%	93%
Ensure Health Surveillance is carried out in line with statutory requirements.	Monitor implementation of the health surveillance programme	Number of HS appointments attended expressed as a % of the number of appointments offered by OH.	86.1%	88.9%	Not applicable as face to face appointments not offered.	90%
Ensure that Health & Safety is embedded throughout the organisation	Monitor how well employees feel health and safety is being managed using an HSE tool	Score out of 100 provided.	No data available	No data available	No data available	60%

Key Areas of Strength	Key Areas for Development
Plan	
Policy with clear statement of intention, responsibilities and performance measures signed by Chief Executive.	Communication of policies so that everyone knows what is required.
Arrangements for Trade Union involvement in policy development and Health & Safety planning and monitoring.	Share good practice with those with whom we share buildings or work closely with.
Do	
Management of Contractors in relation to Health & Safety has improved dramatically.	Carry out systematic risk profiling to ensure that all risks are appropriately controlled.
Clear arrangements in place for employees to raise H&S issues.	Ensuring that health and safety is seen as a key part of “getting the job done”.
Specialist help engaged and managed effectively in areas such as asbestos.	Making sure all workers have the necessary skills, knowledge and experience to carry out their job safely and without risk to their health.
Check	
Good systems to report and discuss health and safety performance in a systematic way.	Accident reporting and investigation is not carried out as systematically as it could be.
Act	
Senior Managers open to learning lessons from previous incidents.	Ensure momentum is not lost on Health & Safety actions identified.

