# **The Highland Council**

Agenda Item	26
Report	RES/
No	117/15

**Resources Committee - 25 November 2015** 

## Occupational Health, Safety and Wellbeing Annual Report

# Report by Depute Chief Executive/Director of Corporate Development

### Summary

This report presents the Council's occupational health, safety and wellbeing (OHSW) performance, achievements and progress in 2014/2015 and presents the plan for 2016.

### 1. Background

1.1 The Highland Council's Occupational Health, Safety and Wellbeing Policy includes a commitment to the production of an annual report on its occupational health, safety and wellbeing (OHSW) performance. This report presents the Council's OHSW performance, achievements and progress in 2014/2015 and presents the OHSW plan for 2016.

## 2. Occupational Health, Safety and Wellbeing Team

- 2.2 The health and safety advisory team are Chartered Members of the Institution of Safety and Health, meaning they can demonstrate a high level of qualifications and experience, and take part in continuing professional development to maintain this status.
- 2.3 The team also oversee two corporate contracts: the provision of Occupational Health Services and that of Ergonomic Advice and Equipment.

## 3. Performance

### 3.1 HSE Intervention

- 3.1.1 In February 2015, the HSE served two Improvement Notices on the Council in respect of the management of hand arm vibration. In addition to the Notices a letter was served which identified other issues to be addressed, including:
  - Provision of adequate resources, including time and competent advice
  - Supervision, to ensure that health and safety arrangements are followed
  - Checks to ensure plans are implemented and that risk controls are assessed
- 3.1.2 Action plans were drawn up to address the specific issues and are monitored

by Community Services, Occupational Health and Safety and Trade Union representatives. The action plans are available to view on the Council's <u>Intranet</u>.

- 3.1.3 The HSE Inspector revisited Direbught Depot on 29 April 2015 to assess the progress made against the first Improvement Notice (risk assessment for gully works) but the Notice was not lifted. This was because although the risk assessment was competent, the equipment used had been removed from the site as a result of the high readings obtained as part of the exercise. The Inspector acknowledged that this was the correct approach, but as the equipment had not yet been replaced, the risk assessment could not be verified. An extension of three months was approved.
- 3.1.4 At the third visit, the Notices were not lifted (although the requirements were "technically met"). A further extension until 31<sup>St</sup> October 2015 was granted in order to give the Service more time to conduct trigger times on vibrating equipment.
- 3.1.5 As a result of the notices, over 500 staff have now been trained in HAVS, including 21 who are now competent to use the measuring equipment and deliver training to operatives. Over 160 pieces of equipment have been measured and approved equipment lists drawn up. The positive purchasing/hiring approach has resulted in equipment being assessed prior to purchase and maintenance agreement included on the purchase. Stronger controls on the hiring of equipment (including assessment of equipment and limitation of hire periods) have been introduced.
- 3.1.6 In addition, 34 Senior Managers successfully completed the one day Safety for Senior Executive's course.
- 3.1.7 A one-day course on Managing Health and Safety in Highland Council is now offered to all Managers.
- 3.1.8 A series of roadshows which were set up to share lessons learnt in Roads And Community Works were shared with the rest of the Service.
- 3.1.9 The HSE Inspector confirmed in November 2015 that both Notices had been lifted.

#### 3.2 Accident/Incident Analysis

- 3.2.1 There were 937 incidents to staff reported in the period 1 April 2014 to 31 March 2015. This is an increase from last year's total number of incidents (886). This rise is attributed to awareness raising of the need to report accidents/incidents and the inclusion of violent incidents to staff. The severity of incidents has not increased.
- 3.2.2 659 of these incidents (70%) are attributable to violence and aggression reported in schools or child care. This is the highest cause of incident.

- 3.2.3 The next main cause of injury is manual handling which accounts for 6% an increase from last year's 2%.
- 3.2.4 The number of incidents reportable to the Health and Safety Executive increased from last year's 18 to 22. This category refers to accidents which resulted in either 7 or more working days lost or a serious injury.
- 3.2.5 Reportable injuries resulted in a total of 1348 days lost; a significant increase on last year's 340 lost working days.
- 3.2.6 This year's trends and rates compared to the previous 7 years are presented in the table below:

	0000/	0040/	0011/	0040/	0040/	0040/	0040/	0044/
	2009/	2010/	2011/	2012/	2013/	2012/	2013/	2014/
	10	11	12	13	14	2013	2014	2015
Total	845	701	691	746	886	746	886	937
employee								
accidents								
Fatalities	0	0	0	0	0	0	0	0
Working	990	838	467	595	340	595	340	1348
days lost								
Major	4	9	2	1	6	1	6	10
injuries								
Over 7	38	27	26	15	12	15	12	12
day								
injuries								
Total	41	36	28	20	18	16	18	22
reportable								
to HSE								
Accident	424	368	356	158	215	158	215	213
Injury								
Rate								
(AIR)*								

\*AIR = (reportable injuries/no. employees)\*100,000

3.2.7 Services are urged to continue to investigate the root cause of all accidents and incidents and draw up action plans in order to reduce or eliminate these types of accidents.

## 3.3 Training

3.3.1 The following table indicates the level of health and safety training delivered by both the Learning and Development and Occupational Health, Safety and Wellbeing teams:

Course title	2014/2015	Trend
Dealing with challenging behaviour	16	NEW
First Aid Certificate	34	$\checkmark$
First Aid Certificate Refresher	53	$\checkmark$
Emergency First Aid	166	$\checkmark$

Falls prevention	10	NEW
COSHH and Sharps	116	NEW
Moving and Handling (People)	57	$\checkmark$
Evac chair	16	$\checkmark$
Evacuation procedures	4	NEW
Wheelchair tie-down and occupant restraint	23	$\checkmark$
Fire Extinguisher Training	66	$\uparrow$
Fire Marshal	79	NEW
Lone Working	24	$\uparrow$
Managing Health and Safety in Highland Council	7	NEW
Mini-Bus Assessments	57	$\checkmark$
Manual Handling	102	$\uparrow$
Risk Assessment	85	$\checkmark$
Stress Awareness	23	$\checkmark$
Mentally Healthy Workplaces	174	NEW
Work at Height	30	NEW
Violence at Work	55	$\uparrow$
E-learning courses	2014/2015	Trend
Alcohol and drugs in the workplace	132	New
Display Screen Equipment	948	$\uparrow$
H&S Building Files	131	$\uparrow$
Mentally Healthy Workplaces	196	$\checkmark$
Preventing violence and aggression	299	$\uparrow$
Snow and ice clearing	53	$\uparrow$
Managing stress	134	$\uparrow$
Introduction to OHSW	486	New
Occupational Health	117	New

3.3.3 Eight new workshops and 2 new e-learning courses were introduced in 2014/15. Further courses are in development and will be introduced in 2015/16.

## 3.3 **Performance Indicators**

3.3.1 Health and Safety targets have previously been established and the following table indicates progress to date.

3.3.2	Target	Progress
	Improve occupational health	RS Occupational Health was
	provision	appointed in August 2011 to provide
		occupational health services to the
		Council. The contract is monitored
		by the Central Safety Committee
		where quarterly reports are
		submitted.
	To train an additional 30 trade union	Complete.
	safety representatives by 31 March	
	2015.	

## 4. Occupational Health

- 4.1 RSOH has been the Council's occupational health provider since September 2011. The following information relates to 1 April 2014 to 31 March 2015.
- 4.2 Over 500 management referrals were made to the occupational health service, an increase on previous years. These referrals can be broken down by Service:

Service	No. Referrals
Corporate	24
Development	
Finance	40
Development and	27
Infrastructure	
Community Services	121
Care and Learning	307

- 4.3 The main reason for referral to occupational health is for mental health issues and 45% of management referrals are classified thus by the medical staff. There is a requirement for staff who are absent with mental health issues to be referred immediately as early intervention is viewed as crucial to recovery and getting back to work. It should be noted that not all referrals (for any condition) are made when staff are off ill: some are referred while still are at work in order to prevent absence.
- 4.4 116 referrals were made to the physiotherapy service: the most common reason for referral was for lower back problems.
- 4.5 As the current contract is due to expire in 2016, a procurement exercise is underway to appoint an occupational health provider for the next three years. It is anticipated the new contract will commence on 1 April 2016.

### 5. Achievements

5.1 The occupational health and safety management system has been further developed over this period. The Corporate Health, Safety and Wellbeing

policy was revised to reflect current structure and consultation mechanisms (such as the Partnership Forum). Information on the Plan-Do-Check-Act approach to managing health and safety was included which gives managers more information and advice on proactive planning of health and safety issues.

- 5.2 In addition, the following guidance documents were introduced or revised:
  - Guidance on managing hand arm vibration syndrome
  - Guidance on health surveillance
  - Guidance on positive procurement/hire of plant and equipment
  - Guidance in accident reporting and investigation
  - Guidance on managing radon in the workplace
  - Monitoring Protocol
  - Guidance on the use of Display Screen Equipment
  - Guidance on risk assessment
- 5.3 The health and safety advisers supported Services in the work to develop new Service Health and Safety Policies and Plans.
- 5.4 Three TU representatives achieved their TU Health and Safety Diplomas and were presented with their awards on 2 April 2014, along with 5 other TU Representatives from partner organisations. The Council's Safety Representatives Charter and Agreement are seen as leading the way for health and safety partnership working across the public sector in Scotland.
- 5.5 As a result of the work with trade unions, the OHSW manager and two TU Health and Safety representatives were invited to talk at the local IOSH branch meeting on the theme of partnership working, based on the Council's TU partnership and charter agreements. This was very well received and we have been asked by a number of organisations to advise on setting up similar arrangements.
- 5.6 The Council received the RoSPA Silver Award in recognition of our health and safety management system in Glasgow in September 2014. This followed an audit which reviewed competence, leadership commitment, communication, accident trends, HSE intervention (and any response to same) over the last 5 years, contractor management and workforce involvement.
- 5.7 An OHSW management audit system was introduced in Community Services. This will review and measure how health and safety is being managed and will eventually be introduced in all Services.
- 5.8 A confidential Freephone helpline and counselling service was launched in Education to support staff who may have workplace or personal issues. The service is run by the charity Teachers' Support Network, is free to use and is available 24/7, 365 days a year for all teachers.
- 5.9 The team were asked to be the liaison group for the Dingwall office rationalisation project. This included provision of information and advice to ensure compliance with health and safety workplace legislation and health and safety briefings for affected staff. A number of checklists for staff, line

managers and RPOs were published on the office rationalisation microsite. In addition presentations to staff affected by moves were delivered (approximately 70 staff) and moving and handling awareness sessions offered to staff to minimise potential injury when packing and unpacking.

- 5.10 The Council delivered a presentation at the launch of the Healthy Working Lives/IOSH "Train 2015 Challenge" (promotion of Mentally Healthy Workplace training for managers/supervisors) in Inverness on 24<sup>th</sup> October 2015. The presentation was on the Council's commitment and roll out of this training programme.
- 5.11 A cross-Service group (including TU representatives) has been set up to look at additional support for lone workers who work in areas where mobile phone coverage is poor/non-existent.
- 5.12 A working group has been established in Care and Learning (including TU representatives) looking at improving violence and aggression reporting in schools. A new reporting form has been drafted along with a flowchart which details responsibilities at each stage of the process.
- 5.13 A new course Living and Working with Long Term Conditions was offered to all staff who have been diagnosed as having a long term medical condition. This course was run in partnership with "Let's get on with it together", a Highland based team made up of NHS, voluntary sector and Council representatives. The aim is to teach the concepts of self-management: giving people living with long-term conditions the tools, skills and support they need to improve their own wellbeing and, hopefully, maintain productive employment. The course produced excellent feedback from attendees and it is hoped to run a second course in this financial year.

## 6. OHSW Work plans for 2016

- 6.1 The OHSW management system will continue to be reviewed to ensure that guidance for staff is up to date and meets legislative and best practice requirements. Guidance due for review include:
  - Guidance in stress management
  - Policy/Guidance on transport at work
  - Manual handling/Moving and Handling
  - Health and safety consultation
  - Expectant and new mothers at work
  - Food safety
- 6.2 It is anticipated that new guidance will also be developed to assist services manage health and safety requirements. This will include:
  - Use of personal protective/respiratory equipment (PPE/RPE)
  - Workplace equipment
  - Work in confined space

- Noise at work
- 6.3 We will continue to work with Services to ensure that effective health and safety management runs throughout the Council. This will include ongoing monitoring and input to Service OHSW Plans which will identify health, safety and wellbeing needs.
- 6.4 We will continue to work with Services potentially affected by hand arm vibration syndrome to ensure continued application of the guidance and training.
- 6.5 We will continue to develop the range of health, safety and wellbeing courses that are offered, both as face to face workshops and by e-learning, or a combination of both.

E-learning courses currently in development are:

- Fire safety (theory)
- Manual handling (theory)
- Construction, Design and Management (CDM)Regulations 2015
- 6.6 We will work with officers in HR and CIP with a view to using Resourcelink as the method to record workplace accidents and injuries. One benefit of this is that managers will have access to Service-specific health and safety management information, including accident trend monitoring. We will also be able to record, and report on, insurance costs against individual incidents.
- 6.7 The dedicated OHSW pages on the Council's Intranet will be maintained and developed to ensure continued access to competent health and safety information.
- 6.8 We will continue to deliver an advisory role to the workgroup looking at Radon Management in schools, other workplaces and domestic premises.
- 6.9 The OHSW team will endeavour to take a more proactive approach to H&S issues across all Services in 2016. This was hampered in 2015 due other priorities in Community Services (see Section 3.1) and vacancies in the team.

### 7. Implications

- 7.1 Failure to follow health and safety legislation can lead to enforcement action by the Health and Safety Executive (HSE) which can range from the serving of an Improvement Notice to Court Proceedings. HSE intervention is now charged at a cost of £124 per hour and is applied from when HSE Inspector enters the premises NOT from the identification of any breach of legislation.
- 7.2 There will also be resource implications arising from the findings of inspections/assessments of premises (such as fire risk assessments) where improvements/repairs to premises, to ensure they meet legal standards, are identified.

- 7.3 Failure to ensure the safety of staff, students or the public can lead to civil action against the Council.
- 7.4 There are no Equalities, Climate Change/Carbon Clever, Gaelic or Rural implications arising from this report.

### 8. Recommendation

That the Resources Committee notes the content of this report and approves the OHSW plan for 2016.

Designation: Depute Chief Executive/Director of Corporate Development

Date: 16 November 2015

Author: Gena Falconer, OHS & W Manager

Background Papers: