

Agenda Item	14 (b)
Report No	RES/64/17

HIGHLAND COUNCIL

Committee: Corporate Resources Committee

Date: 15 November 2017

Report Title: **Annual Occupational Health and Safety Report 2016/17**

Report By: Director of Corporate Resources

1. Purpose/Executive Summary

- 1.1 The Highland Council's Occupational Health, Safety and Wellbeing Policy includes a commitment to the production of an annual report (attached as **Appendix 1**) on its Occupational Health, Safety And Wellbeing (OHSW) performance. Annual reporting on health and safety performance is also reflective of best practice. This report presents the council's OHSW performance, achievements and progress in 2016/2017 and presents the OHSW plan for 2017/18.
- 1.2 The key challenges for the Highland Council for 2017/18 are:
- Ensuring sensible, proportionate risk management
 - Improved accident, incident, near miss recording and reporting
 - Ensuring a continued focus on health and safety throughout redesign
 - Ensuring Servicer health and safety plans for improvements to specific risks are actioned, implemented and monitored regularly.
- 1.3 The key OHSW achievements for 2016/17 were:
- Reduction in accident severity and accident rate
 - Reduction in the number of people who failed to attend their occupational health appointment
 - Launch of mental health rep course (in conjunction with Learning and Development)
 - Introduction of new reporting process for violence and aggression in schools.

2. Recommendations

- 2.1 Members are asked to:
- Consider the achievements and performance for 2016/17
 - Approve the OHSW Annual Report

3. Implications

- 3.1 Resource – Health and safety should be an integral part of management; failure to properly consider, plan and make sufficient resources available for health and safety will result in a negative impact on resources – both staff time and budget.

Legal - 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 a Notification of Contravention, Improvement Notice, Prohibition Notice or Court Proceedings. HSE intervention is now charged at a cost of £129 per hour. Additional costs to the Council will always be required to rectify the breach of legislation.

Community (Equality, Poverty and Rural) - None

Climate Change/Carbon Clever - None

Risk – Failure to ensure staff safety can lead to civil action against the Council

Gaelic - None

Designation: Director of Corporate Resources

Date: 2 November 2017

Author: Gena Falconer, Occupational Health, Safety and Wellbeing Manager

Background Papers: None



Occupational Health Safety and Wellbeing

Annual Report 2016/2017



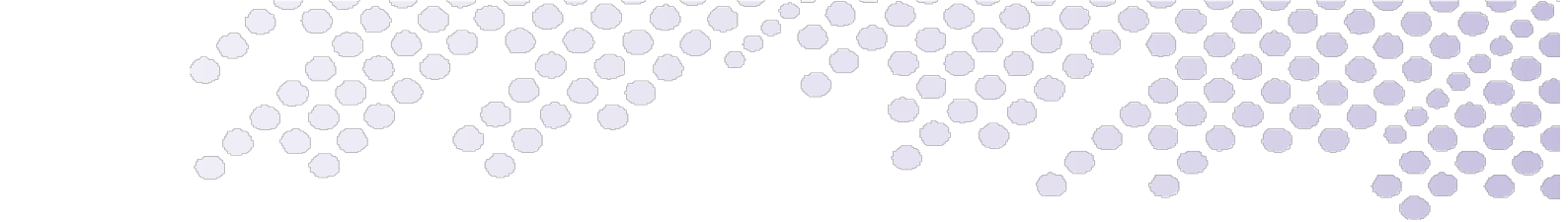
1.0 Introduction

- 1.1 The Highland Council's Occupational Health, Safety and Wellbeing (OSHW) Policy includes a commitment to the production of an annual report on its Occupational Health, Safety and Wellbeing (OHSW) performance. Annual reporting on health and safety performance is also reflective of best practice. This report presents the council's OHSW performance, achievements and progress in 2016/2017 and presents the OHSW plan for 2017/18.
- 1.2 The OHSW policy is based on the Health and Safety Executive's model for successful health and safety management: Plan-Do-Act Check cyclical and this report is structured in a similar manner.



- 1.3 The OHSW team is based in the People and Transformation Team in Corporate Development. They are responsible for:



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- Ensuring that the Council meets its statutory obligations in respect of the health, safety and welfare at work of its employees and all others affected by its activities;
 - Developing policies, procedures and standards
 - Monitoring and inspecting workplaces and investigating accidents, incidents and occupational ill-health;
 - Providing health and safety training;
 - Promoting occupational health.

2.0 Plan

2.1 Policy

2.1.1 The Corporate OHSW policy reflects the Council's values, beliefs and commitment to provide a safe and healthy workplace. The policy includes link to further guidance on managing the hazards faced by staff in the Council. The last review of the policy was in August 2016 and it will be next reviewed following redesign.

2.1.2 In addition to the corporate policy, each Service has its own service-specific health and safety policy which sets out the Service's arrangements for managing health and safety. These policies are all available on the Health and Safety [Intranet site](#).

2.2 Planning for implementation

2.2.1 Effective planning for health and safety is concerned with prevention through identifying and controlling risks. This involves:

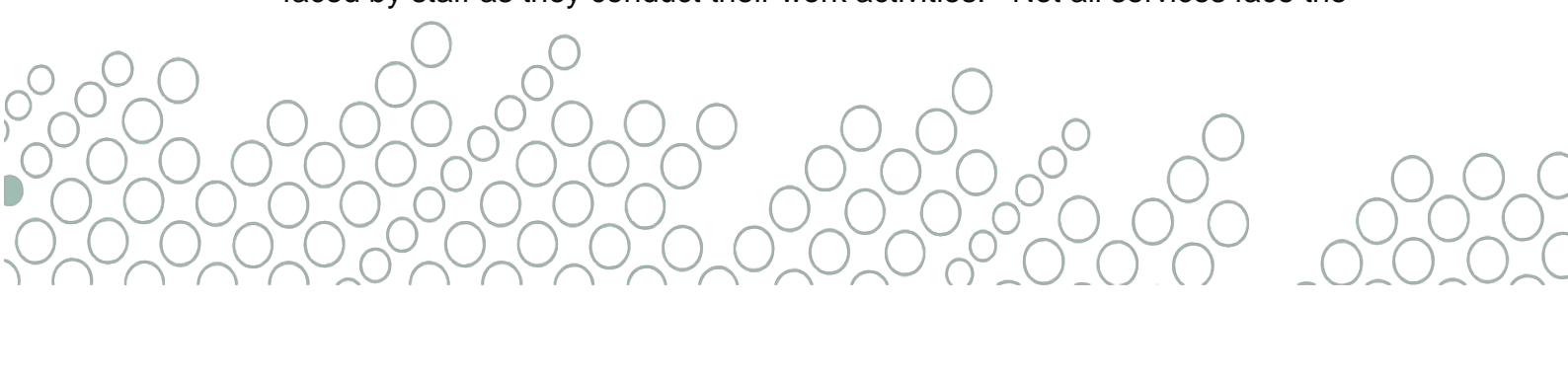
- designing, developing and implementing suitable and proportionate management arrangements, risk control systems and workplace precautions
- operating and maintaining the system while also seeking improvement where needed
- linking it to how other aspects of the organisation are managed

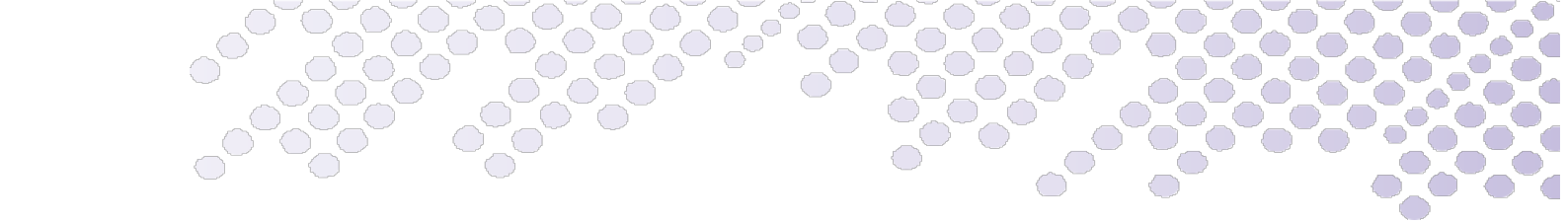
2.2.2 Each service has nominated a Head of Service (other than Finance which is a small service) to take on the role of Service Health and Safety Co-ordinator. Their responsibilities include coordinating health safety and wellbeing issues within their service and championing health and safety. They play a major part in implementing the corporate policy into their service.

3.0 Do

3.1 Risk profiling

3.1.1 The Council's health and safety delivery model covers the significant hazards faced by staff as they conduct their work activities. Not all services face the





same hazard (or level of risk), and the Service health and safety action plan should focus on relevant risks, how they will be addressed within the Service and meet the requirements of Council policy and guidance.

3.1.2 There is a strong focus on the use of risk assessment as a management tool and ensuring that controls are proportionate to the risks. A continued emphasis on sensible, proportionate risk assessment will be one of the main themes for the OHSW team in the 2017/18.

3.2 Organising

3.2.2 Health and safety responsibilities are described in the Corporate Policy and reflected in Service Policies. In addition to Service H&S Coordinators, individuals with specific responsibilities in Services for: risk assessment, Responsible Premises Officers, first aid, fire wardens, key workers (lifting and handling), trainers, assessors etc. have been identified. The basic requirement that everyone is responsible for the health and safety of themselves and others is one that is oft repeated.

3.3 Plan Implementation

3.3.1 OHSW plan

The main actions in the 2016/17 OHSW plan were to:

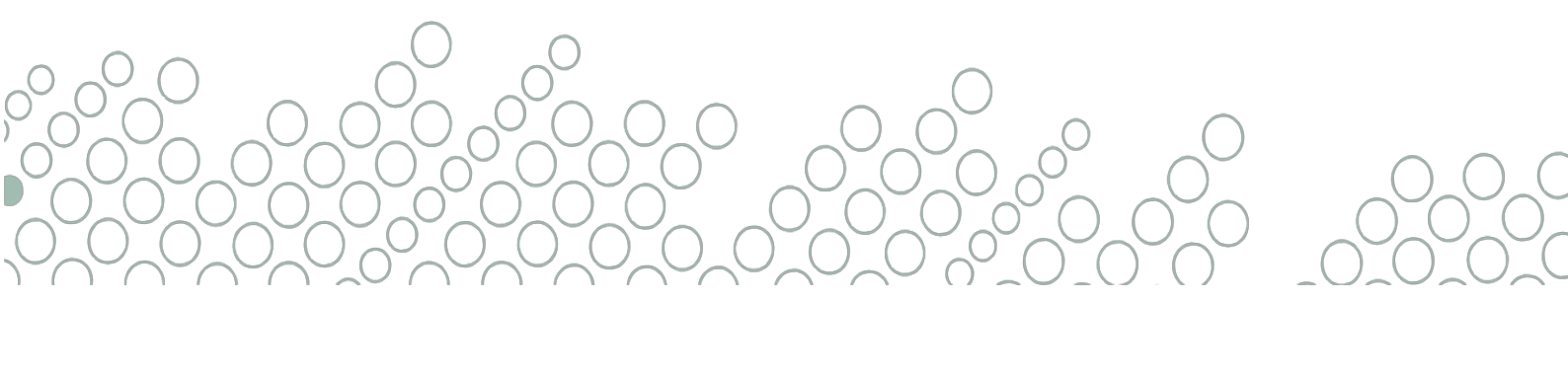
- Maintain the OHSW Management System
- Work with Services to maintain H&S plans
- Reduce the number of occupational health appointments where employees did not attend
- Review Violence and Aggression reporting in schools
- Run “Safety for Senior Executives” course for Directors/Heads of Service and Area Managers

3.3.2 Communication

The Staff Internet and email are the main means of communication health, safety and wellbeing issues. The most important messages are published on the Intranet home page as well as the health and safety site. Health and safety advisers also raise issues at Area, Service and other health and safety meetings.

3.3.3 Co-operation and consultation

3.3.3.1 The Central Safety Committee is the main arena for health and safety consultation. Reports on the occupational health service, health and safety updates are standing items on the agenda. Where Services have had HSE intervention, there is an expectation that update reports will be submitted to the committee until the issue has been closed out. Reports on the issues surrounding the new Inverness Royal Academy was an example of this. It is



envisaged that property-related health and safety issues will be a standing agenda item from 2017 onwards.

3.3.3.2 In line with the Policy and Guidance on Consultation, Service and Area health and safety meetings are held quarterly. Actions raised at these meetings can be escalated to the CSC if not addressed in a timely manner.

3.3.3.3 The appropriate health and safety adviser attends Service and Area meetings. A representative from D&I's Property Management Team is also invited to the meetings to discuss health and safety property-related issues.

3.3.3.4 All work teams are encouraged to have health and safety as a regular item on the agenda for team meetings to ensure that issues can be raised and addressed.

3.3.5 Training

3.3.5.1 Health and safety training is, in the main, delivered by the health and safety team, without cost to the service, except where specialist input is required.

3.3.5.2 The table below shows the number of Council staff attending health and safety courses in 2016/17:

Course title	2016/17	Trend
Dealing with challenging behaviour	25	↑
Mental Health Representative	26	NEW
Accident Investigation and Reporting	30	NEW
CS Risk Assessment	113	NEW
Responsible Premises Officer	11	NEW
First Aid Certificate	40	↑
First Aid Certificate Refresher	54	↑
Emergency First Aid	322	↑
Falls prevention	0	↓
COSHH and Sharps	27	↓

Moving and Handling (People)	124	↑
Evac chair / ski pad	105	↑
Evacuation procedures	16	↑
Wheelchair tie-down and occupant restraint	4	↓
Fire Extinguisher Training	0	↓
Fire Marshal	102	↑
Lone Working	95	↑
Managing Health and Safety in Highland Council	36	↑
Mini-Bus Assessments	68	↑
Manual Handling	197	↑
Risk Assessment	120	↑
Stress Awareness	26	↑
Mentally Healthy Workplaces	82	↓
Work at Height	0	↓
Violence at Work	132	↑
E-learning courses	Complete and in progress	Trend
Alcohol and drugs in the workplace	27	↓
Display Screen Equipment	543	↓
H&S Building Files	0	↓
Mentally Healthy Workplaces	53	↓
Preventing violence and aggression	36	↓
Snow and ice clearing	25	↓
Managing stress	35	↓

Introduction to OHSW	247	↓
Occupational Health	43	↓

3.3.5.3 Other than e-learning courses, the general trend is an increase in attendance at health and safety training.

4.0 Check

4.1 Monitoring performance

4.1.1 Ensuring and encouraging compliance with OHSW policy and associated guidance, as a minimum standard, is at core the core of the proactive work of the OHSW team whilst also promoting a culture of continuous improvement. The quarterly CSC receives reports on the Council's health and safety performance as well as that of the contracted-in occupational health service.

4.1.2 Benchmarking, peer support and sharing of experience and policy and guidance is a core part of the North of Scotland Health and Safety group. This group is comprised of health and safety senior officers from CNES, Orkney, Shetland, Moray, Aberdeen City and Aberdeenshire Councils. A sub group has recently been established to share information and resources for the management of HAVS across these Councils.

4.2 Investigate accidents, etc.

4.2.1 There were 1915 incidents to staff reported in the period 1 April 2016 to 31 March 2017, compared to 1196 in the previous year. This year's trends and rates compared to the previous 5 years are presented in the table below:

	2011/ 2012	2012/ 2013	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017
Total employee accidents	691	746	886	937	1196	1915
Fatalities	0	0	0	0	0	0
Working days lost				1348	1237	916
Major injuries	2	1	6	10	7	8

Over 7 day injuries	26	15	12	12	14	11
Total reportable to HSE	28	16	18	22	21	19
Accident Injury Rate (AIR)*	356	158	215	213	261	244

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

4.2.2 The majority of the incidents were reported as Violence and Aggression (including 1000 reported in schools). None of these incidents were reportable to the HSE. The increase in the numbers reported could in part be down to the improved way of reporting such incidents in schools (see 5.1.6).

4.2.3 Whilst the number of incidents has increased, the severity of the outcome of the accidents has reduced – as noted in the decrease in the number of over 7 day absence injuries and those reported to the HSE.

4.2.4 It is considered essential that the Council makes more use of incident and near miss reports (only one near miss report was received), results from accident investigations, inspections etc. to ensure sufficient learning from these and that appropriate responses are made to prevent recurrence of incidents and loss.

4.3 Performance Indicators

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

Target	Progress
Improve occupational health provision	<p>Iqarus Occupational health took over the contract in 2016. Contract performance and service uptake is monitored by the Central Safety Committee.</p> <p>A monitoring plan is in place to ensure that initial problems in staffing and understanding contract requirements do</p>

	not recur.
Train an additional 30 trade union safety representatives by 31 March 2018.	<p>19 attended so far:</p> <ul style="list-style-type: none"> • 9 attended H&S Stage 1 • 6 attended H&S Stage 2 • 4 attended H&S Diploma

4.4 HSE Involvement

4.4.1 Inverness Royal Academy

4.4.1.1 As a result of Council concerns regarding the construction of the new IRA school, the HSE investigated and served three Improvement Notices on the Hub North Scotland Ltd. and the contractors Galliford Try (Morrisons) Building Ltd. and Vaughan Engineering Group Ltd.

4.4.2 Waste Management

4.4.2.1 The HSE conducted a follow up inspection to their 2012 Waste Management Initiative. The Inspector visited HQ, Lotland Street and the Henderson Street Recycling Centre and no formal issues were raised. An additional visit for the Inspector to accompany one of the waste teams on their route was subsequently cancelled.

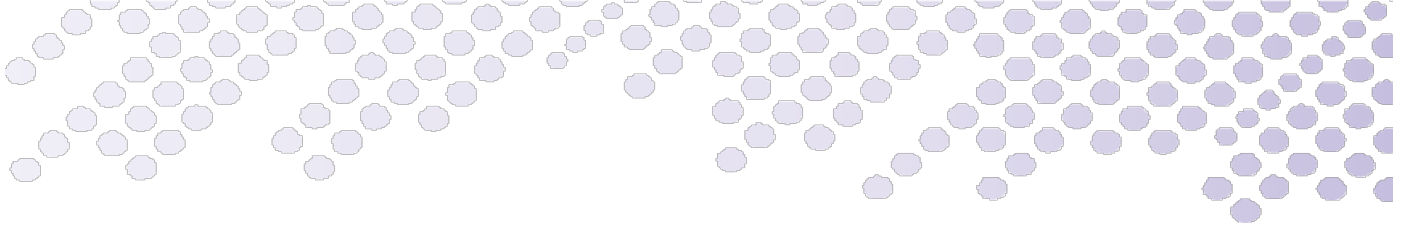
4.4.3 Partnership on Health and Safety (Scotland) (PHASS)

4.4.3.1 The OHSW Manager represents Scottish Local Authority Health and Safety Teams on this cross sectoral group which is chaired by HSE. As part of their 2016 Scottish Plan of Action on Safety and Health, the Council have taken the lead in setting up the Scottish Social Care partners Forum where health and safety staff in all parts of the care sector are working together to share best practice and improve health and safety standards. In addition, the Waste Team are working with STUC in a project looking at worker engagement.

4.5 Occupational Health

4.5.1 Iqarus Occupational health took over the contract in 2016 following their buy-out of RS Occupational Health.

4.5.2 A total of 516 management referrals were seen by occupational health between 1 April 2016 and 31 March 2017: these can be broken down by Service as follows:



Service	No. Referrals
Corporate Development	19
Care and Learning	336
Finance	23
D&I	21
Community Services	117

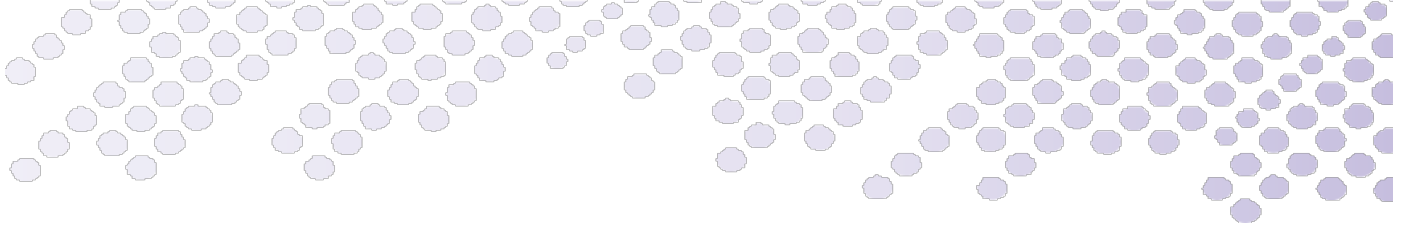
4.5.3 The main reason for referral to occupational health is for mental health issues, 50% of management referrals are classified thus by the medical staff. This is an increase on the rate of 39% of cases in 2015-2016. There is a requirement for staff who are absent with mental health issues to be referred 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 staff are still at work in order to prevent absence.

4.5.4 Where work related stress has been identified, the management report aligns the cause to the HSE Stress standards (demands, control, support, role relationships and/or change) and this way the employee and the manager can focus on these areas specifically. Managers are advised to complete Stress Risk Assessments as part of the return to work process.

4.5.5 Statutory health surveillance is required for all employees who are exposed to certain defined hazards (such as asbestos) or to certain processes such as working with vibrating equipment. Health surveillance is any activity which involves obtaining information about employees' health and which helps protect employees from health risks at work. There is also a requirement to offer night workers a health assessment. The table below shows the health surveillance activity in this period.

Community Services	2016/17
Audiometry	445
HAVS paper screen	412
HAVS Tier 4	11
Skin	432
Respiratory	431
Hep B	16





Care and Learning	2016/17
Hep B	63
Audiometry	6
Respiratory	2
Skin	2
HAVS paper screen	6
HAVS Stage 4	4

4.5.6 Did not attend appointments (DNAs) are those where the employee fails to give more than 24 hours' notice of being unable to attend their appointment – in many cases there is no communication from the employee at all and they do not turn up. Both manager and employee receive notification of appointments and managers are expected to discuss this with the employee.

4.5.7 Under the terms of the contract, the Council is charged the full appointment cost for DNAs. The table below shows a breakdown of DNAs by service.

Service	Management Referral	Physio
Corporate Development	2	2
Care and Learning	30	13
Finance	3	0
D&I	1	2
Community Services	8	11

4.5.8 The 62 DNAs, whilst still a high number, is a significant reduction on the 100 DNAs from 2015/26. The OHSW team now text employees the day prior to their appointment to remind them of the details.

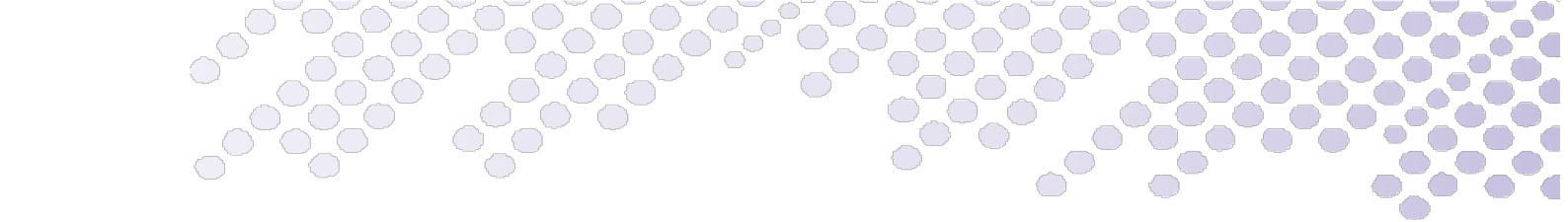
5.0 ACT

5.1 Achievements

5.1.1 Updates to health and safety policy and guidance included:

- Update to Corporate Health, Safety and Wellbeing Policy
- Launch of Management of Occupational Road Risk Toolkit



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- Food Safety Policy
 - Update to Responsible Premises Officer Handbook
 - Bomb threat report template added
 - Occupational Health Guidance
 - Manual handling
 - Fire Safety Policy and Guidance
 - First Aid Policy
 - New and Expectant Mothers at Work
 - Positive Purchasing Policy

5.1.2 In partnership with colleagues in HR and Learning and Development, there was significant input to the development and delivery of the new course for Mental Health Reps.

5.1.3 The OHSW Team were involved in providing advice to a number of projects including the Fort William Office Project and the Depot Rationalisation Project.

5.1.4 Continued support to the radon management group which focus on measuring and managing radon levels in all Council workplaces in high/medium radon levels.

5.1.5 Reduction of DNA appointments to Occupational Health following the introduction of the text reminder service.

5.1.6 A review of violence and aggression reporting in schools resulted in a new electronic reporting format being introduced.

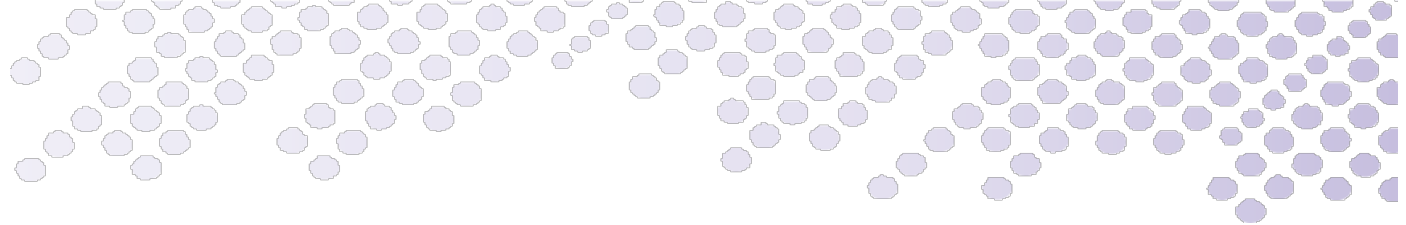
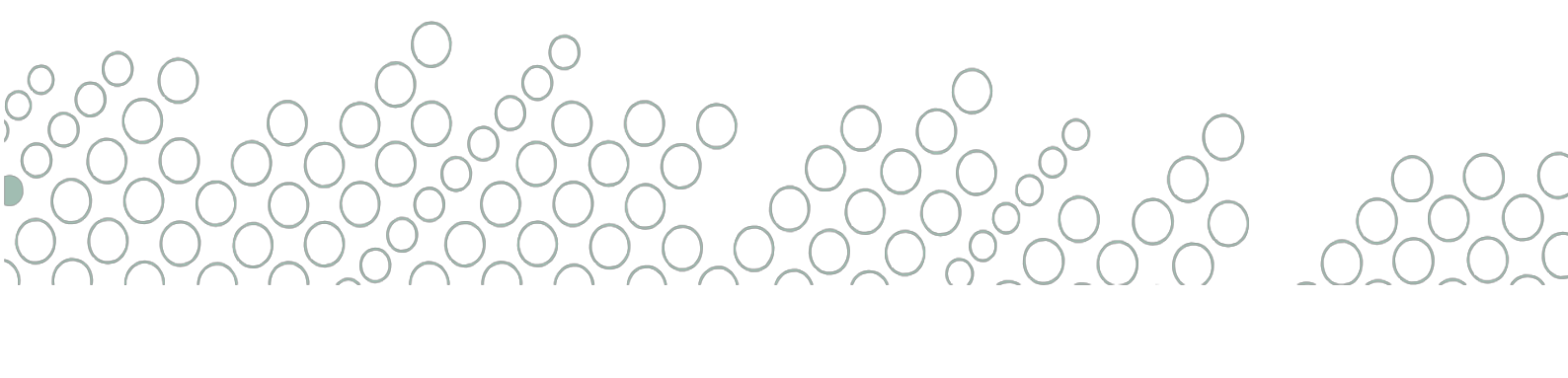
5.1.7 Audit of HAVS management in Community Services was completed and reported to the Service.

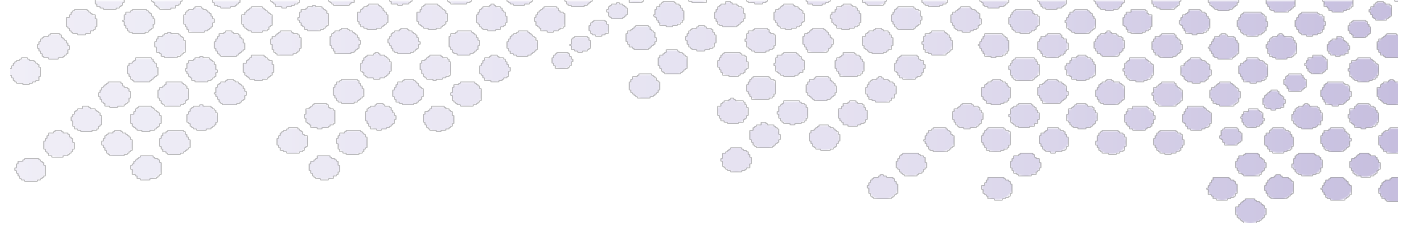
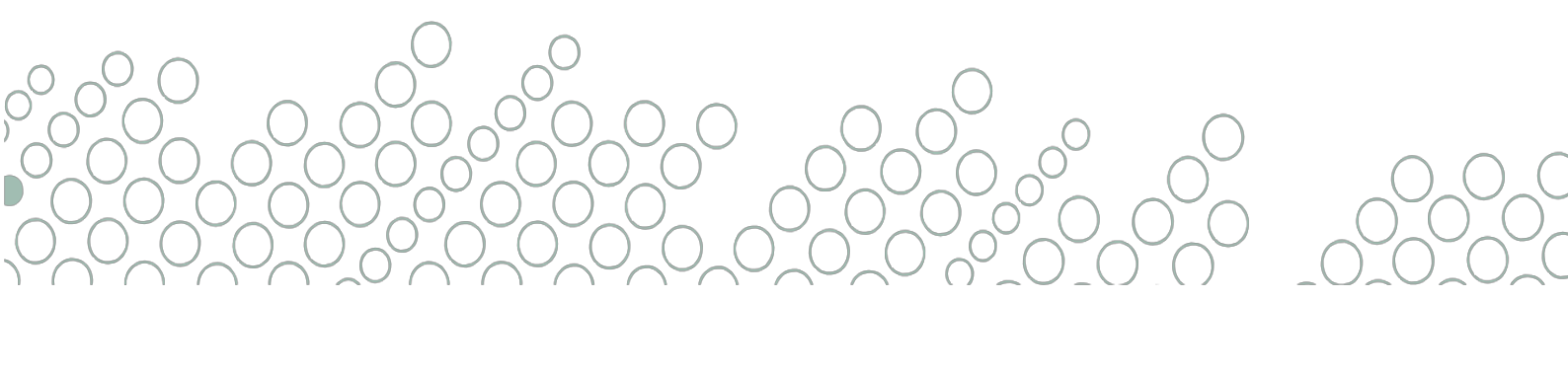
5.1.8 The OHSW team also achieved 100% attendance at Area and Service health and safety consultation groups.

5.1.9 A step challenge to all Council staff was launched at the beginning of April 2016. 18 Council teams took part, resulting in an overall step count of 47,639,497 steps, which is the equivalent of 21317 miles. The winning Council team were “Wrong Direction” (D&I) with a step count of 4,267,927 steps. They were also placed 68th nationally, out of 869 Scottish Teams.

6.0 OHSW Work plan for 2017/18

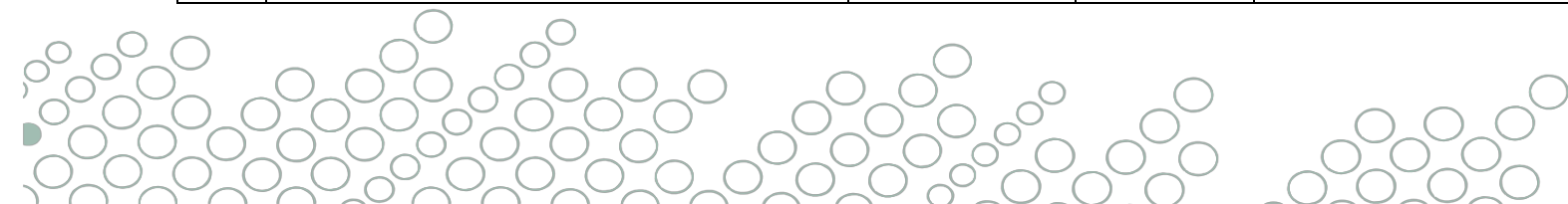


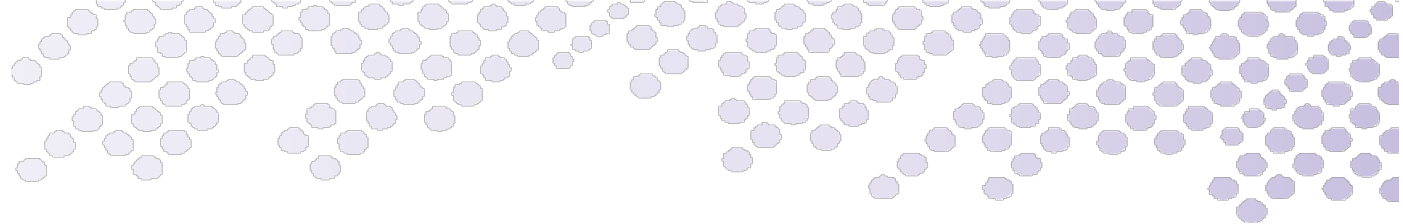
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- 6.1** The OHSW management system will continue to be reviewed to ensure that guidance for staff is up to date and meets legislative and best practice requirements. Policy and Guidance due for review includes:
- Occupational Health Safety and Wellbeing Policy
 - Noise at Work
 - Management of Stress
 - Dyslexia Strategy
 - Radon Policy
 - Violence and aggression
- 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)
 - Safety and security
- 6.3** The team will work with colleagues in D&I to address fire safety issues arising from the Council's work to address actions following the Grenfell fire.
- 6.4** 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 and a focus on sensible, proportionate risk management, especially through the redesign process.
- 6.5** The dedicated OHSW pages on the Council's Intranet will be maintained and developed to ensure continued access to competent health and safety information.
- 6.6** We will continue to deliver an advisory role to the workgroup looking at Radon Management in schools, other workplaces and domestic premises.
- 6.7** A review of lone working arrangements and controls will be completed with a suite of options available to managers and staff.
- 6.8** We will continue to work with CPAM and Community Services involved in the depot rationalisation programme.
- 6.9** The possibility of introducing a confidential Employee Assistance Programme for staff as a way of supporting those with stress/mental health issues will be explored.
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- 6.10** Investigate the possibility of introducing an electronic health and safety management system to record accidents, outcomes from investigations, audits, inspections etc. and manage and report on the same.
- 6.10** A programme of compliance monitoring will be introduced, with a separate topic being reviewed on a bi-monthly. Topics to be covered in 2017/18 will include:
- Responsible Premises Officers
 - Workplace Inspections (by Managers)
 - DSE Assessments
 - First Aid Arrangements
 - Lone Working Arrangements
 - Risk Assessments
- 6.11** Achieve the Healthy Working Lives' Gold Award for health promotion. This will involve setting up a cross-Service Group, reviewing our health related policies and organise health promotion events.
- 6.12** Continue to provide support and advice to Services including site visits, audits and inspections, accident investigation and providing training opportunities.
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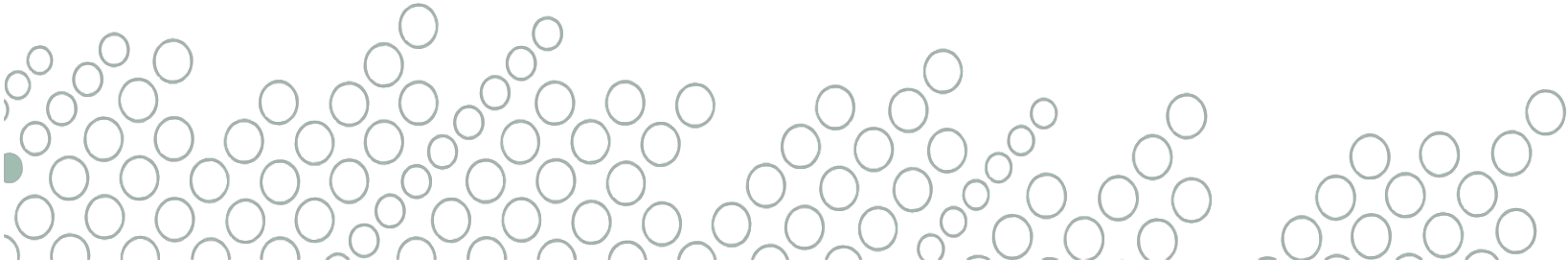
OCCUPATIONAL HEALTH, SAFETY AND WELLBEING PLAN 2017/18

No.	Action	Owner	Due by	Update	Completion
1	Maintain OHSW management system	OHSW Manager	31/3/18	Policy/guidance for review and development identifies. Progress reported to CSC on quarterly basis.	Ongoing
2	Work with Services to update health and safety plans	H&S Advisers			Ongoing
3	Introduce new accident reporting database	OHSW Manager	31/12/17	Business case in development	
4	Work with D&I to address fire safety issues arising from the Council's work to address actions following the Grenfell fire				
5	Review training options	OHSW Manager	31/3/18		
6	Introduce an Employee Assistance Provider to Council staff	OHSW Manager	31/3/18		
7	Maintain OHSW Intranet pages	H&S Assistant	Ongoing		Ongoing
8	Continue the programme of Fire Risk Assessments (FRAs)	Fire Safety Adviser	Ongoing	Delay due to vacant post	Ongoing
9	Provide advisory support to Radon Management Group	OHSW Manager	Ongoing		Ongoing
10	Attend Service and Area Health and Safety Consultation Groups	H&S Advisers	31/3/18		Ongoing
11	Review of lone working arrangements	OHSW Manager	31/12/17		
12	Run "Living and Working with Long Term Conditions" Course	OHSW Manager	31/03/18		
13	Work with CS and CPAM re depot rationalisation project	OHSW Manager		Initial discussions held	
14	Introduce compliance monitoring exercise	H&S Assistant			
15	Conduct health and safety inspections in school residential premises	H&S Adviser		Commenced	





16	Review of lone working arrangements and controls will be completed with a suite of options available to managers and staff.				
17	Achieve HWL Gold Award	OHSW Manager	31/3/18	Review scheduled for September 2017.	



APPENDIX 1

Performance indicators

Performance Indicator (PI)	PI Owner	Reporting Mechanism
Attend all Service and Area H&S Consultation meetings	OHSW Manager	Annual health and safety report
Submit investigation report within 2 weeks of incident	OHSW Manager	Annual health and safety report
Train additional 20 TU H&S reps by 2020	OHSW Manager	Annual health and safety report
Submit RIDDOR reports within statutory timescales (see below)	Service H&S Co-ordinator	Service annual health and safety report
Hold quarterly H&S consultation meetings	Service H&S Co-ordinator	Service annual health and safety report
Attendance at statutory medical surveillance	Service H&S Co-ordinator	Service annual health and safety report
Develop/maintain Service-specific Health and Safety Action Plan	Service H&S Co-ordinator	Service annual health and safety report
Maintain up to date RPO List (Report changes to K2 system)	Service H&S Co-ordinator	Service annual health and safety report
Reduce number of "failure to attend" Occupational Health appointments by 50%	Service H&S Co-ordinator	Service annual health and safety report
Each rep to conduct 4 workplace inspections per year	TU reps	Annual report to CSC

Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) report timescales:

- Fatalities – notify HSE immediately and report within 10 days
- Dangerous Occurrences – within 10 days of the incident
- Major Injuries – within 10 days of the incident
- Injuries leading to over 7 day absence – within 15 days of incident
- Gas incidents – within 14 days of incident

