

Agenda Item	9
Report No	RES/32/22

HIGHLAND COUNCIL

Committee: Corporate Resources Committee

Date: 1 December 2022

Report Title: Annual OHSW Report and Plan 2021/2022

Report By: Interim Head of People

1. Purpose/Executive Summary

- 1.1** The Occupational Health Safety and Wellbeing Policy makes a commitment to providing an annual health, safety and wellbeing report providing a review of issues and developments for the Highland Council. The report also presents the updated OHSW Plan.
- 1.2** This report was originally presented to the Central Safety Committee on 7 October 2022.

2. Recommendations

- 2.1** Members of the committee are asked to:
- (i) Review and note the updated health, safety and wellbeing issues and developments contained in this report; and
 - (ii) Note the updated OHSW Annual Report for 2021/22 attached at Appendix 1;
 - (iii) Note the OHSW Strategy for 2022-25 at Appendix 2.

3. Implications

- 3.1** Resource – Health and Safety is 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 performance and budgets.

- 3.2** 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 £160 per hour. Additional costs to the Council will always be required to rectify the breach of legislation.
- 3.3** Community (Equality, Poverty and Rural,) Climate Change/Carbon Clever, Gaelic – None
- 3.4** Risk – Failure to ensure staff safety can lead to civil action against the Council.

4. Main considerations

- 4.1** The OHSW Policy makes a commitment to providing an annual health, safety and wellbeing report providing a review of issues and developments for the Highland Council. The report also presents the updated OHSW Plan.
- 4.2** The overall trend in staff attending health and safety training has fallen – partly due to reduced provision of face to face training during the pandemic. Plans to reimagine health and safety training utilising a “train the trainer” approach, enhancing the courses offered via the new Learning Management System, amending courses so that they can be offered via MS Teams and refocussing face to face training for practical skills learning have already commenced and will be rolled out in due course.
- 4.3** Last year saw a significant reduction in reported incidents, accidents etc. This may have been in part due to the pandemic. The overall reportable injury rate improved from 140 in 2020/21 to 125 in 2021/22. Correspondingly, the number of days lost to work related injuries fell from 374 to 284, although the number of major injuries increased slightly from 3 to 4.
- 4.4** It is anticipated that the rollout of a new Accident Reporting System and the partnering training sessions will increase the number of accidents reported in the coming months. This is an inevitable result of awareness raising of the need to report and improving the ease of reporting for staff.
- 4.5** We have benchmarked our reportable injury rate with other Councils in the North of Scotland. The rates range from 385 to 125 with The Highland Council having the lowest rate.
- 4.6** Referrals to the Occupational Health Service increased from 465 to 755 – the previous year’s dip may be due to lockdown when absence rates also fell. The main reason for referral, mental health issues, has remained consistent over the past few years. This is consistent with statistics contained in Chartered Institute of Personnel Development report – Working Lives Scotland 2022 which reports 47% of the individuals surveyed state they have experienced a mental health condition over the last 12 months. We will continue to monitor

the mental health and wellbeing of our staff and use the planned employee wellbeing survey to help identify areas for improvement.

- 4.7** The new category of Long Covid has been added to the reasons for referral: we will continue to monitor and report on this category.
- 4.8** The programme for Fire Risk Assessments continues. Responsible Premises Officers have been provided with no/low cost solutions to be put in place to help mitigate the risks especially where maintenance-related actions may be delayed. Outstanding actions from fire risk assessments will be monitored by the new Property Compliance Board.
- 4.9** 2022/23 will see several developments in occupational health safety and wellbeing. including the launch of our Occupational Health and Safety Strategy, organisational wellbeing/stress surveys (and eventual strategies) as well as procurement exercises for occupational health services and the employee assistance programme. Updates to plans will be reported at each Central Safety Committee.

Designation: Occupational Health, Safety and Wellbeing Manager

Date: 21 November 2022

Author: Gena Falconer

Background Papers: OHSW Annual Report for 2021/22



**Occupational
Health Safety and
Wellbeing**

Annual Report 2021/2022

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 2021/22 and presents the OHSW plan for 2022/23. **(Appendix 1)**

1.2 A new document: The Highland Council's Occupational Health, Safety and Wellbeing Strategy 2022-2025 is also appended. **(Appendix 2)**

1.3 The OHSW policy is based on the Health and Safety Executive's model for successful health and safety management: Plan-Do-Act Check cycle and this report is structured in a similar manner.



1.4 The OHSW team is based within the People Service in Resources and Finance. The team is responsible for:

- 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;
- Managing the occupational health contract;
- Managing the EAP contract;
- Managing the ergonomic assessment/equipment contract;
- Providing health and safety training.

1.5 The small team is made up of:

1x OHSW Manager
 1x Senior H&S Adviser
 3 x H&S Advisers (1.5 vacancies)
 1x H&S Technician
 1x H&S trainer (vacancy)
 2x Fire Safety Officers
 1x H&S Assistant
 1x Clerical Assistant

1.6 Since 2020 the team has been operating with 0.8FTE H&S Adviser support despite many recruitment exercises to fill the roles. One role has been converted into an OHSW Technician to enable a member of staff to develop as part of the Council's grow our own approach to recruitment.

1.7 The team is also responsible for the delivery of the Occupational Health contract; the Employee Assistance Programme, and the contract for Ergonomic Assessments and Provision of Ergonomic Equipment/Support.

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 policy will be resubmitted when the senior leadership structure is finalised.

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:

- the concept of those who create the risk must manage it
- considering health and safety risks at all stages of a project
- 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 Council are managed

2.2.2 Each Service has nominated a Head of Service or senior manager to take on the role of Service Health and Safety Coordinator. 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, developing their health and safety plan and ensuring planning for health and safety is included in Senior Management Team meetings at least quarterly.

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 Service risks, how they will be addressed within the Service and also meet the requirements of Council policy and guidance.

3.1.2 The principle is that those who create the risk must manage it. For new or change projects risks should be designed out as far as reasonably practicable so that when projects move to a "go live" state then inherent risks are not handed on too. Committee papers detailing or reporting on changes to which impact on people, equipment or processes should also detail health and safety risks in the Implications section and include links to completed risk assessments.

3.1.3 Within the health and safety management system 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 2022/2023.

3.1.4 One of the positive impacts of Covid-19 was the development/maintenance of premises risk assessments for Covid which can be amended as premises return to new ways of working.

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), etc. have been identified. The basic requirement that everyone is responsible for the health and safety of themselves and others is one that is often repeated.

3.3 Implementation

3.3.1 OHSW plan

The main actions in the 2021/2022 OHSW plan were to:

- Introduce an OHSW Electronic Management System (ongoing)
- Work with Services to maintain H&S plans (ongoing)

- Reduce the number of occupational health appointments where employees did not attend: percentage reduction has been achieved but still remains high. Further work to identify the reasons will be undertaken in 2022/23.

3.3.2 Communication

The Staff Intranet and use of 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 and non-office based staff are briefed at 'tool box' talks.

- 3.3.3** Communication messages have mainly focused on Covid-safety, security issues; mental health awareness; safe driving and safety alerts regarding use of portable heaters, staying safe online, fire safety in schools and portable air conditioner units. All messages can be found on the [OHSW news page](#).

3.3.4 Co-operation and consultation

- 3.3.4.1** The Central Safety Committee (CSC) is the main arena for health and safety consultation in line with the requirements of the Safety Representatives and Safety Committees Regulations 1977. Reports on the occupational health service, health and safety updates and property health and safety issues are all 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.

- 3.3.4.2** Service and Area health and safety meetings are held quarterly, in line with the Policy and Guidance on Consultation. Area meetings can sometimes be negatively impacted upon due to poor attendance – although these now include the ability to join remotely. Actions raised at these meetings can be escalated to the CSC if not addressed in a timely manner.

- 3.3.4.3** The appropriate health and safety adviser attends both Service and Area meetings. A representative from H&P's Property Management Team is also invited to the meetings to discuss health and safety property-related issues.

- 3.3.4.4** 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. This is without cost to Services, unless specialist input is required. The OHSW team can deliver training across the Council's geographical area, where there are adequate numbers of delegates. The delivery of training using Microsoft Teams has been adopted where possible, but cannot be used where practical, hands on exercises are required, especially where there is a need to show competence or understanding of concepts.

3.3.5.2 A number of new courses were introduced, other developed to address Hybrid working.

3.3.5.3 The table below shows the number of Council staff attending health and safety courses in 2021/2022 and the prevailing trend in uptake.

Course title	2020/21	2021/22	Trend
Mental Health Representative	15	15	=
Emergency First Aid	0	70	↑
Moving and Handling	22	7	↓
Moving and Handling (People)	6	38	↑
Moving and Handling (Hoist)	4	4	=
Fire Marshal	9	37	↑
Lone/Home Working	53	8	↓
Manual Handling	14	49	↑
Risk Assessment	256	34	↓
Supporting Anxious Colleagues	55	11	↓
Preventing Violence at Work	0	4	↑
Wellbeing Workshop	4	25	↑

E-learning courses	2020/21	2021/22	Trend
Alcohol and drugs in the workplace	14	22	↑
Mentally Healthy Workplaces	57	78	↑
Preventing violence and aggression	202	56	↓
Snow and ice clearing	65	14	↓
Working with Computers	1458	332	↓
Managing stress	43	7	↓
Extinguishing Fires	1035	410	↓
The Highland Council OH Service	122	38	↓
Asbestos Awareness (Schools)	123	20	↓
Intro to Health, Safety & Wellbeing at Work	1090	225	↓

3.3.5.4 It is of no surprise that the overall trend is that the uptake of training is down, significantly because of the events of the last two years.

3.3.5.5 The new learning management system from Learning and Development has introduced a number of health and safety courses: although from RoSPA, the content will be rewritten to fully reflect our processes, practices, forms or provide internal contacts with more information. Pending the courses being

re-written, trainees will be referred to the OHSW web site to ensure correct documentation used or process is followed.

3.3.5.6 The delay in rolling out the new learning management system alongside the limitations of providing face to face training has resulted in full inductions not being completed. Managers will be reminded to direct staff to the induction courses as soon as these are available – which is expected to be early in 2023.

3.3.5.7 Training of staff is one of the criteria that the HSE will always ask for during inspections or accident investigation. In many cases, training is a statutory requirement and corporate health and safety training addresses our most serious risk. Services will be asked to commit to ongoing programmes of health and safety training in their updated health and safety plans.

3.3.5.8 The new incident reporting system will require managers to upload relevant training records. We will work with Services to identify simple straightforward way to record on the job, short training events such as use of equipment.

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 the core of the proactive work of the OHSW team whilst also promoting a culture of continuous improvement. The quarterly Central Safety Committee 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 subgroup has also been established to share information and resources for the management of HAVS across these Councils.

4.1.3 At the time of writing, 4 North of Scotland councils have shared their AIR (reportable injuries/no. employees)*100,000). These range from 125 to 385 with The Highland Council having the lowest rate.

4.1.4 It is proposed that a health and safety audit is conducted across the Council now that the focus on the pandemic can be lifted. This will give a baseline as to how Services are meeting requirements and results will assist in the development of health and safety plans. (The health and safety advisers are all qualified and experienced in conducting audits.)

4.2 Investigate accidents, etc.

4.2.1 There were 174 incidents to staff reported in the period 1 April 2021 to 31 March 2022, compared to 681 in the previous year. This year's trends and rates compared to the previous 5 years are presented in the table below:

	2015/ 2016	2016/ 2017	2017/ 2018	2018/ 2019	2019/ 2020	2020/ 2021	2021/ 2022
Total employee accidents	1196	1915	1171	1238	1024	681	174
Fatalities	0	0	0	0	0	0	0
Working days lost	1237	916	555	557	407	374	284
Major injuries	7	8	9	6	7	3	4
Over 7-day injuries	14	11	8	17	14	12	9
Total reportable to HSE	21	19	17	23	21	15	13
Accident Injury Rate (AIR)*	261	244	145	219	209	140	125

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

- 4.2.2** The severity of the outcome of the accidents has slightly decreased – as noted in the decrease in the number of over 7day absence injuries and those reported to the HSE. The legal definition of “Major injuries” includes injuries such as broken bones, amputation, loss of consciousness or loss of sight.
- 4.2.3** It should be noted that the number of reported incidents is considered to be low compared to previous years, as neither E&L nor C&P were able to provide numbers of violent/aggressive incidents to staff. These numbers will be updated and reported to Central Safety Committee once received. **It is highly unlikely that the overall increase in numbers will impact on the AIR rate as these are collected separately.**
- 4.2.4** It is important that the Council makes more use of incident and near miss reports, 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. This will be raised with Services over the next year with the introduction of the new Incident Management System.
- 4.2.5** The introduction of an electronic health and safety management system due to go live 1 October 2022 will also allow for quicker and more accurate analysis for Service incident statistics/trends as well as the Corporate overview.
- 4.2.6** Both the corporate process for reporting violence and aggression and the

Education process (where alleged perpetrator is a pupil) will hopefully be incorporated into the new system which will allow for more reliable data.

4.3 HSE Intervention

- 4.3.1** The HSE has been conducting spot Covid inspections as schools and the offices re-opened. No visits to offices have been undertaken; contact was made initially by phone, with questions asked about Covid risk assessments, controls, and the senior managers' knowledge of Covid. The Highland Council is one of the Scottish Local Authorities where no follow up visits were required.
- 4.3.2** The HSE has also been contacting organisations in order to determine the effectiveness of their stress management arrangements. To date, the team have only been made aware of one such contact within the Council, and no follow action has been taken.
- 4.3.3** The HSE will be visiting schools as part of its management of asbestos programme in late 2022/early 2023: there is a need for collaborative working with OHSW team and key service teams - Property and Education - to prepare for these visits.

4.4 Occupational Health/EAP

- 4.4.1** Iqarus Occupational Health were awarded the Highland Council/Highlife Highland contract in 2019. A buy-out and restructure of the organisation resulted in a change of name to International SOS.
- 4.4.2** A total of 755 management referrals were seen by occupational health between 1 April 2021 and 31 March 2022. This represents an increase from the 465 referrals in the previous year.
- 4.4.3** The main reason for referral to occupational health continues to be for mental health issues, 39% of management referrals are classified thus by the medical staff (see appendix 1). This is an increase on the rate of 32% of cases in the previous year. 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.
- 4.4.4** 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.
- 4.4.5** A new classification – Long Covid – has been added to the list of reasons for referral. This trend will be monitored by the Central Safety Committee in the quarterly reports.
- 4.4.6** There has also been an increase in the number of appointments where advice

on ill-health retirement has been requested by the referring manager. It is thought that this is because of the impact of Covid on the NHS – longer waiting times to see specialists or to have operations has increased the time staff are off work with long term conditions. This has been added to the Corporate Risk Register which will be considered by the Audit and Scrutiny Committee on 30 November. Many are on half or no pay situations and ill health retirement is normally then considered. However, pension guidance requires that ill health retirement is not considered until all medical interventions have been considered.

- 4.4.7 Statutory health surveillance is required for all employees who are exposed to certain defined hazards (such as noise) 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.
- 4.4.8 481 health surveillance appointments (mostly on site) were delivered to the workforce in this timeframe, with 1153 actual assessments conducted: for skin, spirometry, hearing and hand arm vibration.
- 4.4.9 In addition to identifying early work-related health issues, health surveillance can help identify control measures which are not working as they should. Line Managers should review risk assessments and control measure when they receive reports which indicate that health is being negatively impacted by work.
- 4.4.10 It is positive that no additional diagnoses of Hand Arm Vibration Syndrome (HAVS) has occurred in this period.
- 4.4.11 "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. They are also expected to investigate the reasons for DNAs.
- 4.4.12 Under the terms of the contract, the Council is charged the full appointment cost for DNAs. In 2021/22 there were 101 missed nurse/doctor appointments and 23 missed physiotherapy appointments. (Last year these figures were 82 and 9 respectively.) This represents a significant cost to the Council and additional work will need to be undertaken to reduce this cost.
- 4.4.13 DNAs will continue to be monitored at Central Safety Committee.
- 4.4.14 Spectrum.Life (the Employee Assistance provider) conducted 193 consultations and answered 189 enquiries in this timeframe. Most of these related to mental health issues, primarily anxiety.
- 4.4.15 Additional awareness sessions of the other services provided by Spectrum.Life (access to online classes, podcasts, etc.) will be conducted in 2022/23.

4.5 Fire safety

4.5.1 The prioritised programme of fire risk assessments for all Council workplaces has been reviewed, with an emphasis on all schools being assessed at least once. Large office premises and depots/workshops/garages are the next priority.

4.5.2 In 2021/22 136 fire risk assessments were conducted, which represents an increase on the 74 assessments undertaken by the team last year. This is primarily due to appointing a Fire Safety Officer who commenced in October 2021 and bring the staff complement back to two.

4.5.3 For the coming year, the situation is:

- Primary schools – 15 require reviews. 6 are booked in and 5 awaiting confirmation of dates from the Head Teacher. The remaining 4 are being arranged.
- Secondary schools – 3 require reviews. 1 is booked in and 2 awaiting confirmation of dates from the Head Teacher.
- Offices – all main office buildings have been assessed.
- Sleeping accommodation – all scheduled for review.

4.5.4 A review of outstanding actions from fire risk assessments identified commonalities for Responsible Premises Officers to address. As a result advice on good housekeeping (internal and external to premises) and templates for local fire policies and evacuation plans were updated and made available on the H&S Intranet site. Good housekeeping can limit the risk of fire starting/spreading and regular evacuation drills ensures people safety.

4.5.5 As of 2023 the Scottish Fire & Rescue Service (SFRS) will no longer respond to out of hours, unconfirmed automatic fire alarms unless they originate from residential accommodation. The OHSW team are working with SFRS, colleagues in Property and in other councils to ensure that this new arrangement can be managed safely.

5.0 ACT

5.1 Achievements

5.1.1 Regular meetings with Service health and safety coordinators and Trade Union H&S reps have been held with a view to promoting and encouraging consultation.

5.1.2 5 IOSH “Safety for Executives and Directors” courses were made available for senior managers. A final, mop up session is scheduled for September.

5.1.3 The team has provided support and advice to the New Ways of Working Team including input to new guidance. Discussions are currently ongoing to ensure First Aid and Fire Warden cover is maintained in offices where many staff are now adopting hybrid working.

5.1.4 Support was provided to the Election Team to help ensure that elections were safely held in the context of Covid limitations and controls.

- 5.1.5** Updates to the health and safety and management documentation included a short course on the importance of managing health and safety developed for Elected Members as part of the Members Induction which is to be delivered. There is also information available for Members on the electronic learning system (LMSx).
- 5.1.6** The OHSW Manager has contributed to a Scottish Government/HSE project to develop a toolkit for SMEs in relation to managing mental health in the workplace. The resource can be found on the [Healthy Working Lives](#) site.
- 5.1.7** At a Court of Session Case heard this summer, the judge and Council solicitors highly commended the Highland Council and Highlife Highland staff involved in defending the case. The outcome demonstrated the value of being trained in and undertaking competent and dynamic Risk Assessments whilst planning and undertaking a school trip.

6.0 OHSW PLANS

- 6.1** The focus for 2022/23 will be to continue to improve health and safety performance across the Council. The new Occupational Health and Safety Strategy 2022-2025 (see appendix) and associated plan along with the People Strategy will contribute to this commitment.
- 6.2** Whilst most of the focus will be internal, the team will also have a continued external focus which will help with benchmarking, sharing best practice, learning from others and making best use of available resources. These actions are included in part 2 of the OHSW work plan.
- 6.3** Progress against these plans will be monitored at the Central Safety Committee.
- 6.4** The OHSW Work Plan for 2022/23 is attached.

OCCUPATIONAL HEALTH, SAFETY AND WELLBEING PLAN 2022/23

No.	Action	Owner	Due by	Update	Completion
Part 1 – Internal Focus					
1	Review OHSW policies and support following restructure	OHSW Manager	31/03/22	OHSW policy update completed Review guidance for suitability post-Covid-19 Update CSC quarterly	
2	Introduce new accident reporting database	OHSW Manager	1/10/22	Project Board established. Project Plan in place. Supplier identified. Delayed due to HR data issues and rebranding by supplier	
3	Continue to promote a sensible, proportionate approach to health and safety risk management.	OHSW Team	Ongoing	Update and issue risk guidance on risk assessments	
4	Ensure health and safety risks are identified and included in the Implication section of committee papers.	OHSW Manager	31/12/22		
5	Work with Education and Property colleagues to prepare for HSE visit re asbestos management.	OHSW Manager	31/12/22	Visits are expected Oct-Dec 2022 Briefings on managing HSE visits to be issued to headteachers	
6	Work with Services to review the process for fire safety assessments and management of actions arising from the reports.	OHSW Manager (with Property Manager)	Ongoing	Part of Property Compliance Board	Ongoing
7	Work with Services to improve the health and safety standards in workplaces, especially in depot/workshops	OHSW Team	Ongoing		
8	Implement the actions from Health Facilities Scotland survey on dealing with adverse incidents and alerts	OHSW Manager	20/12/22	Develop guidance on dealing with adverse incidents and alerts	Ongoing

9	Introduce new suite of H&S KPIs	OHSW Manager	October 2022	Present paper at October Central Safety Committee	
10	Review RPO role and handbook (include security manual)	OHSW Manager/Property manger	December 2022	Delayed due to lack of resource. Handbook needs to be completed pre HSE visit as this commitment was made by Property at previous HSE visit Project manager now appointed to this project	
11	Maintain OHSW Intranet pages	H&S Assistant	Ongoing	New information published and reported at Central Safety Committee	Ongoing
12	Continue the programme of Fire Risk Assessments (FRAs)	Fire Safety Advisers	Ongoing	Progress reported at reported at Central Safety Committee, Area and Service committees	Ongoing
13	Attend Service and Area Health and Safety Consultation Groups	H&S Advisers	Ongoing	Attendance needs promoting – each Service should be represented at the 3 Area meetings.	Ongoing
14	Introduce compliance monitoring exercise	H&S Assistant/ Technician	TBC		
15	Conduct health and safety inspections in school residential premises	H&S Adviser	31/3/23	Programme has commenced	
16	Set up contract for provision of ergonomic assessments, etc.	OHSW Manager	31/10/22	New framework to be launched. Should assist with homeworking	Ongoing
17	Monitor number of/reasons for failure to attend OH appointments	OHSW Manager	Ongoing	Reported quarterly to CSC and Service committees	
18	Review arrangements for testing portable electrical appliances	OHSW Manager Head of Property	TBC	Guidance on visual checks of portable appliances issued. Need to progress risk-based approach to testing To be raised at Property Compliance Board	Ongoing
19	Assist Services with HAVS management	Senior HAS	Ongoing	Need to identify Service champion who can co-ordinate/support activities New Service action plans requested. Identification of staff who need training requested from Services.	Ongoing

20	Manage the re-procurement of OH service	OHSW Manager	31/03/23	Contract extended to end of March 2023	Exercise has commenced
21	Manage the re-procurement of EAP	OHSW Manager	31/03/23		
22	Deliver health and safety training to Elected Members	OHSW Manager	TBC		
23	Continue to monitor “work related stress” reasons for referral to occupational health and encourage stress RAs to be completed.	OHSW Manager	Ongoing	Reported quarterly to CSC and Service committees	
24	Administer an organisation Stress Survey	OHSW team	TBD	Use of Work Positive	
25	Continue with development of mental health rep programme, including training of new MHRs.	OHSW Team	Ongoing		
26	Conduct H&S Audit in all Services	OHSW Team	TBD		
27	Administer staff wellbeing survey and develop new staff wellbeing survey	OHSW Manager	TBD		
28	Run a series of Menopause Cafes for all staff	OHSW Manager	Ongoing	First café held 4 August 2022 with over 40 attendees 2 nd held on 26 October 2022	
Part 2 – External Focus					
2.1	Liaise with other Scottish councils as part of the North of Scotland Councils health and safety group and also as part of the Chairs group.	OHSW Manager	Ongoing	Meetings are held quarterly via MS Teams. OHSW Manager chairs both the North of Scotland and the Chairs’ group.	
2.2	Represent Scottish Local Authorities at the Partnership for Health and Safety in Scotland (PHASS) and contributing to the Scottish Plan of Action on Safety and Health (SPIASH).	OHSW Manager	Ongoing		
2.3	Attend the HPS network meetings for management of advisers incidents and alerts in health and social care.	OHSW Manager	Ongoing		

Occupational Health and Safety Strategy 2022-2025

Healthy and safe people and places

Introduction

This strategy supports the operational health, safety and wellbeing policy in which the council commits to continually improve the health and safety of its employees, clients, pupils and other interested parties. A competent health and safety management approach is not just about achieving legal compliance but will assist and realise efficient, proactive and pragmatic ways of delivering Council services.

This strategy should be read in conjunction with the Council's [Wellbeing strategy](#) and the suite of strategies under the People banner. The People teams have worked together to ensure a joined-up service approach.

Benefits of good health and safety

Addressing health and safety offers significant opportunities. Benefits can include:

- reduced costs;
- reduced risks;
- lower employee absence and unnecessary employee turnover rates;
- fewer accidents;
- lessened threat of legal action;
- improved standing among peers and partners;
- better reputation for corporate responsibility among customers and communities;
- increased productivity, because employees are healthier, happier and better motivated.

The cost of failing to manage health and safety includes:

- **Lost working days** (Highland Council recorded 284 lost working days due to accidents in 2021/22)
HSE costs (currently £160 per hour)
- **Legal costs** (includes legal fees and court fines)
- **Insurance costs** (A high rate of accidents can result in higher insurance premiums. There are also costs associated with personal injury claims.)
- **Management time** involved in incident investigation, court preparation, court attendance)

The **aims** of this strategy are to

1. [Improve the management of health and safety within the Council to develop the control of risks and ensure continuous improvement in health and safety standards and performance.](#)
2. [Comply with health and safety legislation and to target health and safety improvements in higher risk areas.](#)
3. [Reduce accidents, injuries and ill-health at work](#)

4. [Deliver the framework for setting and reviewing occupational health and safety performance.](#)
5. [Embed a positive health and safety culture across the council.](#)
6. [Promote sensible and proportionate risk management and to reinforce worker inclusion in all health and safety matters.](#)
7. [Ensure the Council is prepared for new developments in health and safety](#)

Aim 1 Improve the management of health and safety risks and ensure continuous improvement in health and safety standards and performance. We will achieve this by:

- 1.1 Providing a corporate health, safety and wellbeing policy that outlines the council's health and safety management system.
- 1.2 Establishing and managing a fully resourced, competent OHSW team with development and succession planning for team members.
- 1.3 Producing written management policies and procedures within a controlled health and safety management system, published on the council's intranet and in other formats.
- 1.4 Deliver training to leaders, managers and the workforce to ensure application and action of guidance and processes.
- 1.5 Provide health and safety training to Elected Members in order to assist in decision making
- 1.6 Appoint an Elected Member to the role of health and safety champion.
- 1.7 Ensuring health and safety is designed in at the start of any change management proposals and included in Council reports
- 1.8 Ensure the fire risk assessment programme is adhered to
- 1.9 Regularly reviewing and revising all corporate documents ensuring changes and updates are shared in line with the guidance on Health and Safety Consultation
- 1.10 Measuring and reviewing health and safety performance to ensure standards are being maintained.
- 1.11 Identify underperforming areas and contribute to initiatives for improvement.
- 1.12 Share lessons learnt from both our own accidents/incidents and those from legal case reviews from other organisations.

Aim 2 Comply with health and safety legislation and to target health and safety improvements in higher risk areas. We will achieve this by:

- 2.1 Ensuring each Service has a single point of contact within the OHSW team to work with and advise managers and staff on how to improve health and safety performance
- 2.2 Adopting a collegiate approach to sharing target outcomes and improvement strategies along with monitoring accident reporting, trends and risk assessments
- 2.3 Identifying higher risk areas and services to ensure that appropriate and proportionate resource is identified to address these significant risks
- 2.4 Providing managers and staff with appropriate health and safety training to enable them to manage the risks within their own work areas.

Aim 3 Reduce accidents, injuries and ill-health at work. We will achieve this by:

- 3.1 Providing an online accident reporting system to enable easy recording of all accidents, incidents, including near misses
- 3.2 Investigating accidents to determine any underlying occupational health and safety issues and identifying the corrective action and opportunities to prevent a recurrence
- 3.3 Ensuring all notifiable accidents are reported to the Health and Safety Executive
- 3.4 Carrying out quarterly and annual analysis of accident/incident data to identify statistical trends in order to target areas for improvement

Aim 4 Provide the framework for setting and reviewing occupational health and safety performance. We will achieve this by:

- 4.1 Identifying health and safety performance indicators that can be used to measure performance across the whole Council (Corporate and Service level)
- 4.2 Reviewing progress against these performance indicators at the council's health and safety liaison groups and any health and safety operational management meetings, including identifying areas requiring further action
- 4.3 Carrying out compliance monitoring and health and safety audits to ensure that health and safety standards are being maintained and identifying areas for improvement
- 4.4 Producing quarterly and annual performance reports to enable the Corporate Leadership Team to review the suitability, adequacy and effectiveness of the council's occupational health and safety management system.

Aim 5 To undertake a range of activities to improve the health and safety culture of the council. We will achieve this by:

- 5.1 Having visible senior management commitment and involvement in managing health and safety
- 5.2 Introducing surveys/other tools to gauge areas for improvement health, safety wellbeing culture and practice
- 5.3 Tackling poor health and safety performance promptly and proportionately
- 5.4 Having health and safety embedded into the day to day activities of the Council
- 5.5 Running promotional campaigns, regular training and briefing sessions and events to raise awareness and understanding of health and safety

Aim 6 To encourage an increase in workforce competence helping promote sensible and proportionate risk management and to reinforce worker inclusion in all health and safety matters. We will achieve this by:

- 6.1 Providing robust, pragmatic and sensible health and safety advice to managers and staff
- 6.2 Providing health and safety training for all staff

- 6.3 Consulting staff about how health and safety is managed and changing workplace practices
- 6.4 Establishing mechanisms for staff to raise suggestions to improve health, safety and, subsequently well-being
- 6.5 Supporting health and safety training for Trade Union health and safety representatives
- 6.6 Canvassing staff views on how the council is managing health, safety and subsequently, well-being

Aim 7 Ensure the Council is prepared for new developments in health and safety. We will achieve this by:

- 7.1 Having a robust and competent OHSW team
- 7.2 Benchmarking, liaising with, and learning from, other Scottish Local Authorities and other partners
- 7.3 Using horizon scanning techniques to stay up to date with developments which could impact on health and safety, including:
 - changes in workforce characteristics;
 - new work equipment/tools;
 - different skills/knowledge;
 - new ways of managing/organising work