



Civic Centre,
Arnot Hill Park,
Arnold,
Nottinghamshire,
NG5 6LU

Agenda

Joint Consultative and Safety Committee

Date: **Tuesday 27 August 2013**

Time: **5.30 pm**

Place: **Reception Room**

For any further information please contact:

Lyndsey Parnell

Members' Services Officer

0115 901 3910

Joint Consultative and Safety Committee

Membership

Chair Councillor Steve Ainley

Vice-Chair Councillor Emily Bailey

Councillor Paul Feeney
Councillor John Parr
Councillor Roland Spencer
Councillor Sarah Tomlinson
Councillor John Truscott

AGENDA

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- 1 **Apologies for Absence.**
- 2 **To approve, as a correct record, the minutes of the meeting held on 28 May 2013.** 1 - 4
- 3 **Declaration of Interests.**
- 4 **Borough Safety Officer's Annual Report 2013/13** 5 - 38
Report of the Borough Safety Officer
- 5 **Consultation on the introduction of Substance Misuse Policy.** 39 - 52
Report of the Service Manager, Organisational Development
- 6 **Proposal for minor revisions to the constitution of the Joint Consultative and Safety Committee (JCSC)** 53 - 58
Report of the Service Manager, Organisational Development
- 7 **Sickness Absence** 59 - 64
Current issues, focusing on:
 - i. Current trend analysis (Report of the Chief Executive and the Service Manager, Organisation Development)
 - ii. Current points of particular interest (verbal report)
- 8 **Staffing Issues** Verbal Report
Verbal Report of the Chief Executive/Service Manager, Organisational Development focusing on:
 - i. Awards and recognition
 - ii. Forthcoming events
 - iii. Employee relations
 - iv. Other issues of current relevance/ interest
- 9 **Minor changes to Establishment agreed by Chair and trade unions outside formal full JCSC process.** 65 - 66

Report of the Service Managers, Organisational Development.

10 Any other item which the Chairman considers urgent.

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**DRAFT MINUTES
JOINT CONSULTATIVE AND SAFETY COMMITTEE**

Tuesday, 28th May, 2013

Councillor John Truscott (Chair)

Councillors:	Steve Ainley(a) Paul Feeney Roland Spencer	Emily Bailey (a) John Parr Sarah Tomlinson
UNISON:	Julie Knowles Alison Markowski	Gill Morley Alan Green (a)

Officers in Attendance: David Archer, Lyndsey Parnell

1 APOLOGIES FOR ABSENCE.

Apologies for absence were received from Councillors Ainley, Bailey and Tomlinson and from Alan Green (Unison).

In the Chair and Vice Chair's absence, Councillor Truscott was appointed as the Chair for the meeting.

2 TO APPROVE, AS A CORRECT RECORD, THE MINUTES OF THE MEETING HELD ON 27 FEBRUARY 2013.

RESOLVED:

That the minutes of the above meeting, having been circulated, be approved as a correct record.

3 DECLARATION OF INTERESTS.

None.

**4 SICKNESS ABSENCE, CURRENT ISSUES FOCUSING ON:
• POINTS OF PARTICULAR CURRENT INTEREST (VERBAL REPORT)
• TRENDS; CURRENT ANALYSIS**

The Service Manager, Organisational Development presented a report outlining trends in sickness absence, outlining measures currently used

by the Council to support the workforce, including a planned suite of training to be delivered to managers and supervisors to improve the consistency of sickness management across the Council.

Members requested additional data as to the cost of sickness to the Council and a breakdown to show absence reflected as a percentage. The Service Manager agreed to provide this information to those Members that had requested specific detail in this format.

RESOLVED:

To note the information.

5 STAFFING ISSUES, CURRENT ISSUES INCLUDING:

- AWARDS AND RECOGNITION
- FORTHCOMING EVENTS
- EMPLOYEE RELATIONS
- OTHER ISSUES OF CURRENT RELEVANCE/ INTEREST

The Service Manager, Organisational Development informed Members of current staffing issues including, but not limited to, the Council becoming a City and Guilds and ILM accredited centre, a potential co-location opportunity with the Department of Work and Pensions at the Civic Centre, recent staff briefings carried out by the Chief Executive regarding the Council plan and the current national discussion regarding pay awards for local government employees.

RESOLVED:

To note the information.

6 EMPLOYEE SATISFACTION SURVEY

The Service Manager, Organisational Development, informed Members of a staff satisfaction survey that would be carried out over the coming months.

Members asked that results of the survey be fed back to the Committee.

RESOLVED:

To note the information and request that the Service Manager, Organisational Development bring a report to Committee detailing the results of the survey.

7 ANY MINOR CHANGES TO THE ESTABLISHMENT THAT HAVE BEEN AGREED BY THE CHAIR AND TRADE UNIONS FOR IMPLEMENTATION OUTSIDE THE FULL JCSC PROCESS.

The Service Manager, Organisational Development, presented the report, which had previously been circulated, outlining a minor change to the Establishment which had been agreed with the Chair and Trade Unions outside of the formal committee process.

RESOLVED:

To note the information.

8 ANY OTHER ITEMS WHICH THE CHAIRMAN CONSIDERS URGENT.

None.

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Report to Joint Consultative and Safety Committee

Subject: Borough Safety Officer's Annual Report 2012-2013

Date: 27th August 2013

Author: Borough Safety Officer

1. Purpose of the Report

To appraise members and officers of the Safety Officers Annual Report covering the following:

- Accidents
- Safety Audits
- Safety Policy and Guidance
- Safety Training
- Occupational Health
- Safety Liaison.

2. Background

The report highlights the Safety Officers planned activities and proposed targets for the year 2012 – 2013. A breakdown of the activities are included in both tabular and graphical format, in the Annexes.

3. Proposal

The report also highlights trends, comparisons and compliance with local and/or regional statistics with Gedling Borough Council. The findings are enclosed in the conclusions of the report on page 14 of 15.

4. Resource Implications

To be delivered within existing budgets.

5. Recommendation

That Members and Officers note the report.

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5th June 2013

See Distribution:

OCCUPATIONAL HEALTH AND SAFETY SECTION - ANNUAL REPORT 2012 / 13

1. Introduction

1.1 The Safety Officer's planned activities for 2012/13 included the following, tasks and targets:

Accidents:	Collate, record on the corporate database and monitor all accidents Investigate Reportable accidents
Safety Audits:	Complete Safety Audits of Leisure Centres to meet the requirements of QUEST. Complete Safety Audits of manual tasks to identify noise HAV and Manual Handling issues
Safety Policy and Guidance:	Review Safety Policy Update & circulate Civic Centre & Arnot Hill House Fire Evacuation Procedures Review and circulate Fire Safety, Accident Reporting, Alcohol & Drugs, Display Screen Equipment, Smoking & Risk Assessment Guidance Notes Assist Managers to comply with their health and safety responsibilities
Safety Training:	Plan, prepare and deliver employee and manager safety awareness training Plan, prepare and deliver / facilitate other courses as required Generate / update all safety training records on the corporate database
Occupational Health:	Plan / arrange eye tests for DSE Users; hearing tests for workers in noisy environments; Hepatitis A and B / HAVS cover / screening for vulnerable staff; vibration testing for workers using vibrating tools & equipment Generate / update all occupational health records on the corporate database Host an Employee Health Fair
General Administration:	Answering queries via Intranet, telephone and Internet General administration tasks (Budget, Email etc) Complete an Annual Report
Safety Liaison:	Collate information for distribution via internal and external safety meetings / seminars

1.2 Local performance indicators included the following:

- t Review six Management Safety Guidance Notes including the Safety Policy
- t Ensure a 80% Satisfaction Rating for health and safety training courses
- t Ensure 60% of all employees trained in health and safety awareness

1.3 Working a four day week has been quite challenging especially when balancing the requirements of a full time job. Some tasks have now taken a lesser priority as shown in the table below with safety liaison cut by a third and general administration continuing to fall over the last 6 years. Occupational Health is now more reliant on the nurses as my commitment is reduced by a third. Areas remaining static or increasing significantly are safety training and policy / guidance. Audits remaining the same and as reflected in accident statistics less time has been devoted to accident recording. The time for each task may need to be reviewed to either increase or lower the time recorded to address the observations contained in this report, in particular safety training, safety audit and policy/guidance.

Tasks / Period	2008 - 2009	2009 - 2010	2009 - 2010	2010 - 2011	2011 - 2012	2012 - 2013
Accident recording and Investigations	14.8%	14.7%	14.7%	7.9%	21.4%	13.0%
Safety Audits or Inspections	14.1%	11.1%	11.1%	6.8%	10.8%	11.5%
Safety Policy and Guidance	7.8%	18.7%	18.7%	17.7%	8.0%	15.9%
Safety Training	20.9%	14.1%	14.1%	25.7%	18.9%	28.7%
Occupational Health	1.9%	5.9%	5.9%	8.6%	9.0%	5.8%
General Administration	23.5%	19.5%	19.5%	17.9%	16.0%	15.0%
Safety Liaison	17.0%	16.1%	16.1%	15.5%	15.9%	10.1%

2. Executive Summary

2.1 At the end of 2012-13 it can be seen that whilst there were some health and safety issues these can be addressed for a relatively small outlay in terms of time, effort and money but could produce benefits in business terms i.e. an increase in productivity, compliance with current legal requirements and, most importantly, protection of the workforce. Key issues remain and include noise induced hearing loss, hand arm vibration syndrome and manual handling injuries highlighted through the accident reporting process which has developed into civil claims against the council.

2.2 The conclusions are therefore centred on the above topics:

- The movement of loads, especially in Direct Service areas, to determine if there are less hazardous alternatives
- The use of vibrating tools to determine if the current control measures are suitable and sufficient
- Noisy operations to determine if the current control methods are suitable and sufficient
- Further safety awareness training to ensure the more vulnerable employees and managers are fully aware of their responsibility to either follow (i.e. the employee) or generate (i.e. the manager) necessary safety guidance.

3. ACCIDENTS

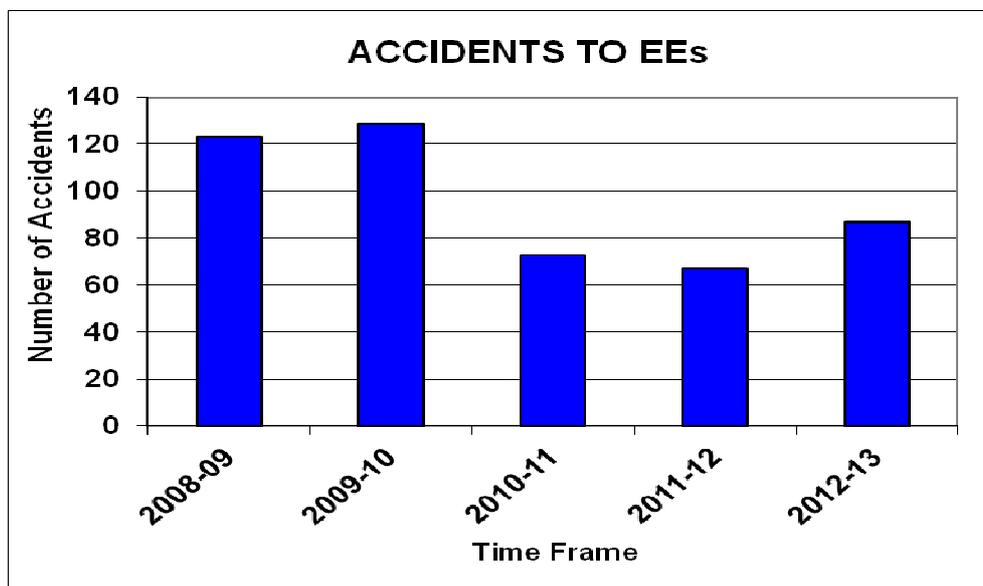
3.1 Streamlining the reporting procedure has increased efficiency resulting in a general fall in the time taken to process accidents. Unfortunately compensation claims, relating, in the main, to manual handling, hand arm vibration and noise induced hearing loss are still causing concern. They continue to be robustly investigated

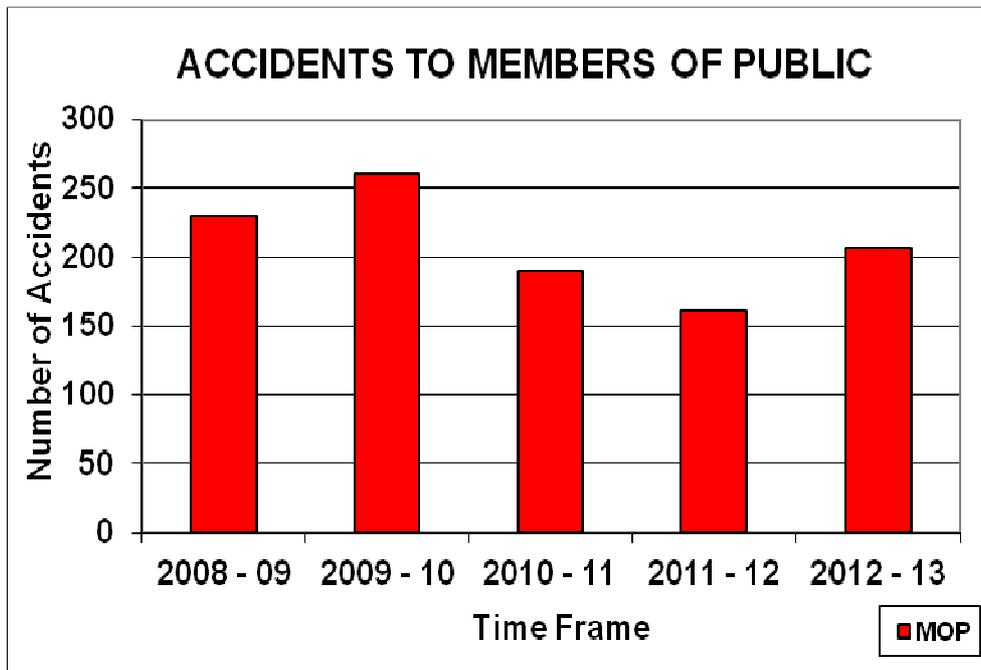
resulting in longer investigation times but a successful defence two years ago highlighted effective management action and comprehensive operating procedures. However there continues to be a relaxed approach to accident investigation at section level that reduces the effective defence of potential civil claims. One area that requires further work is accident investigation and training has been updated to address not only the immediate cause of an accident but the underlying or root cause. Leisure Services have generally addressed this observation but other areas need further work.

3.2 **Service Area Staffing Levels** - Accident statistics are based on the number of staff employed by the council in each service area. In health and safety terms each person employed by the council is included, not just the full time equivalent. I have tried to place the old service areas into the new directorates for continuity. The current structure below is compared with the previous three years.

Service Area / Year	Apr 09-Mar 10	Apr 10-Mar 11	Apr 11-Mar 12	Apr 12-Mar 13
Directorate A (Comms., Elect., Org. Develop)	22	22	23	26
Directorate B (Audit, CS&IT, Fin & Rev)	106	113	125	126
Directorate C (Community, Leisure, P&E)	328	285	295	289
Directorate D (PASC, Waste, P. Prot, Trans)	140	169	173	175
Planning & Environment (absorbed into Directorate C)	63	66	n/a	n/a
CS & OD (absorbed into Directorate A)	59	58	n/a	n/a
Democratic & Community Services (Legal)	19	18	14	13
TOTALS	737	731	630	629

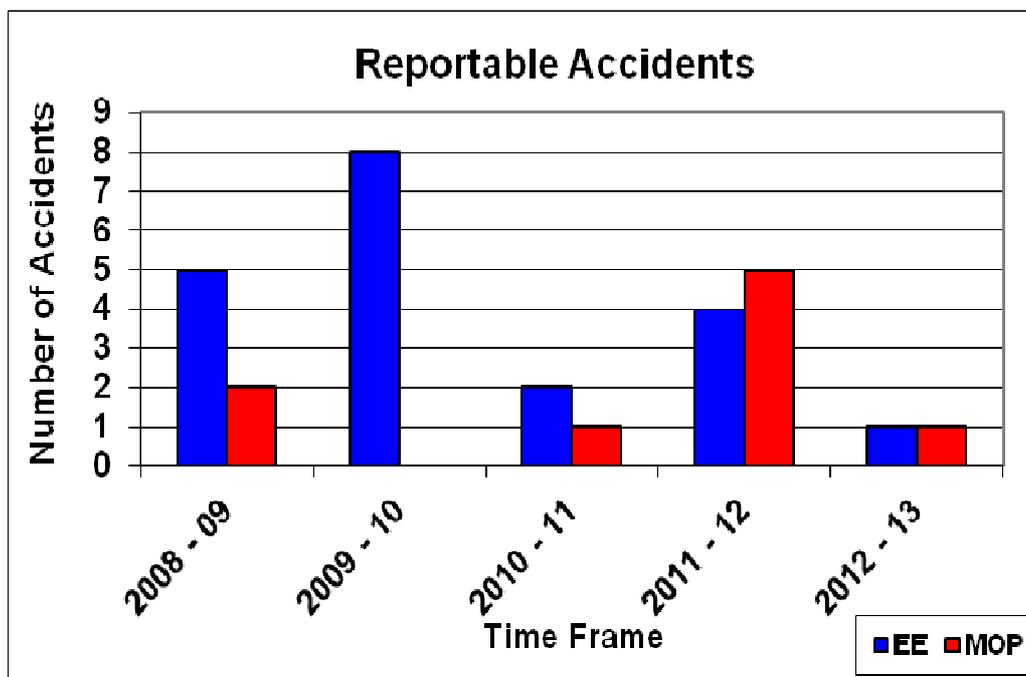
3.3 **Employees and Members of Public** - The number of accidents to EEs has risen for the first time in three years from a low in 2011 of 73 to 87 this year (see below). The trend for members of public (MOPs) has also risen in the same period from 160 to 207(see below). The majority of incidents to MOPs include: swimming into walls, cutting feet on tiles, slipping in the changing rooms and sport related injuries, where they are struck by, for example, shuttlecocks, footballs etc or slipping on floors when playing racquet or contact sports.





3.4 **Reportable accidents** – The chart below identifies the number of reportable accidents involving both MOPs and council employees. Reportable accidents are those that generally involve more than three days off work, fracture of bones, dangerous occurrences, and death or whether a member of public has been taken to hospital following an accident on council premises.

3.5 The reporting of “Reportable” accidents relies on the manager to inform the safety officer when and if the above criteria are met. The time taken to report these incidents can be in excessive especially when the employee goes home following visits to the hospital. Action has been taken to improve reporting times through further training.

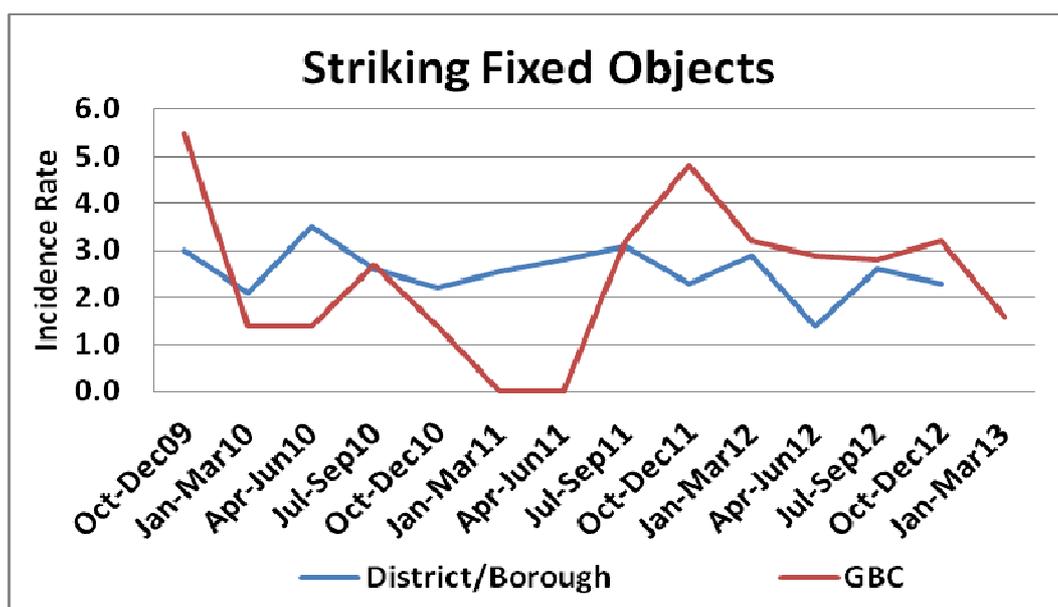
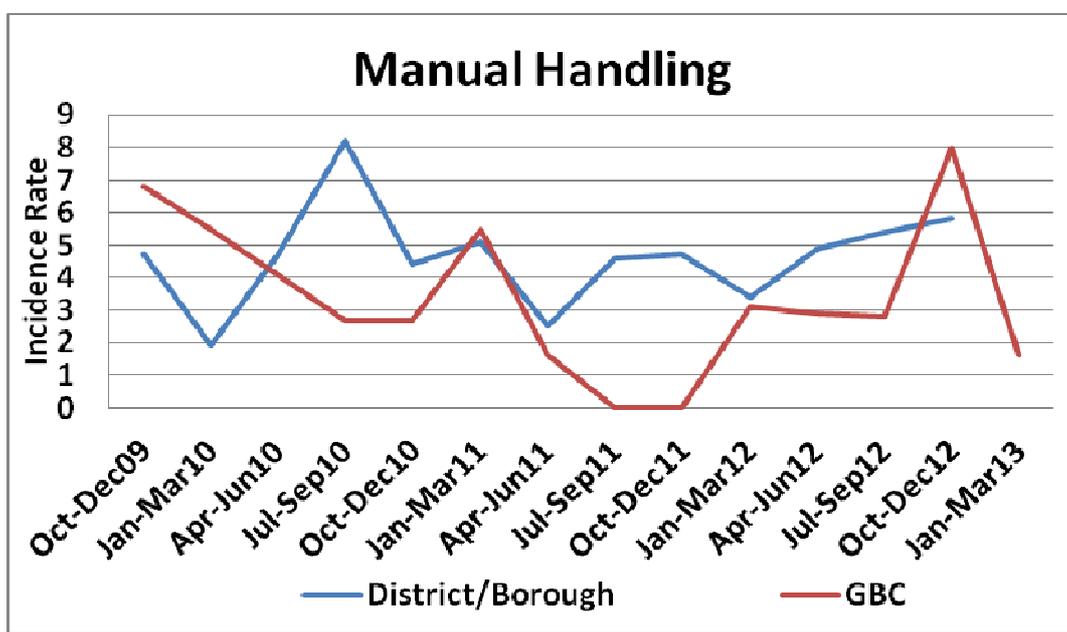


3.6 Reportable accidents to EEs have reduced to one – a manual handling incident and one to a MOP who slipped down the steps at the Richard Herod Centre Bowls Club. She cut her left hand and had to be treated in hospital.

3.7 Accidents are recorded quarterly and forwarded to the Local Government (East Midlands) Office where they are converted to a rate per 1000 employees and compared with other Local Authorities. The main HSE categories of accident are: MH (Manual Handling); SFO (Striking Fixed Objects); SMO (Struck by Moving Objects); STF (Slip, Trip and Falls); VIO (Violence); and OTH (Other types of Accident).

3.8 **Accident by Type** – The following tables shows that there is little difference between GBC and other districts / boroughs for each of the HSE recognised category of accidents. The tables provide the quarterly rate of incidents in all the above categories. Verbal abuse and SMO categories remain higher than the average across the county.

3.9 **MH (Manual Handling)** – After a steady fall from 7 per 1000 in 2009 to under 3 per 1000 at the end of 2010 we had no MH accidents for six months. The rate has risen to just over 3 per 1000 in the last quarter of the year up to 8 per 1000 during October to December before falling to just over 1 per 1000 at the end of the period, due mainly to incidents in the depot. A concerted training schedule has kept the figures low and has reversed the trend of being slightly higher than other boroughs/districts. Main areas of concern are still the depot and leisure centres where most of the manual work is carried out.

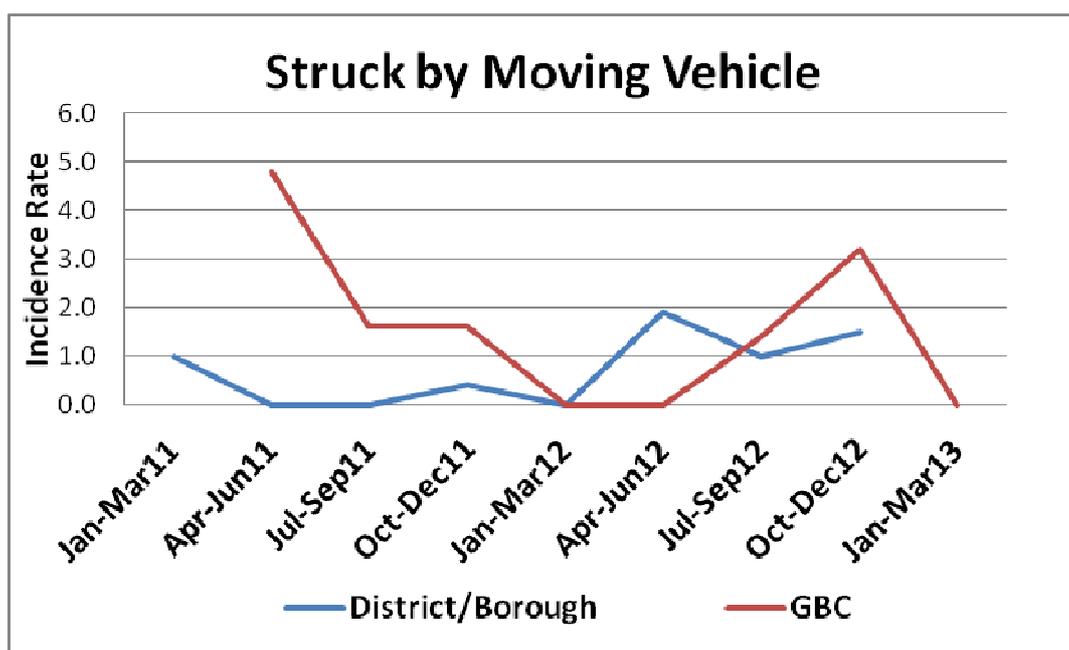
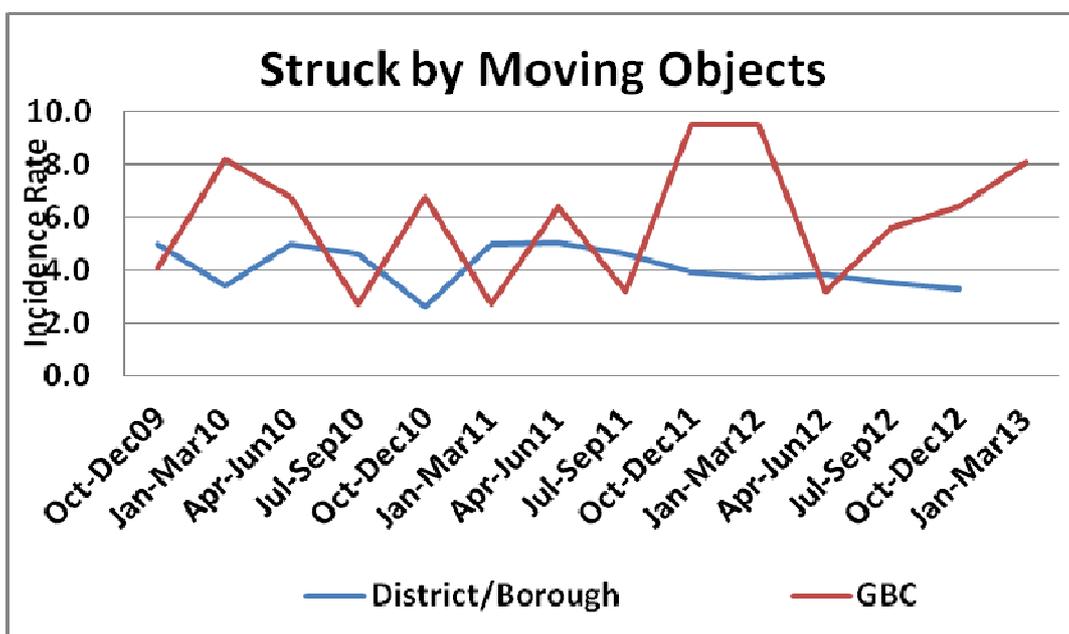


3.10 **SFO (Striking Fixed Objects)** – Walking into doors, shelves and cupboards was quite common six years

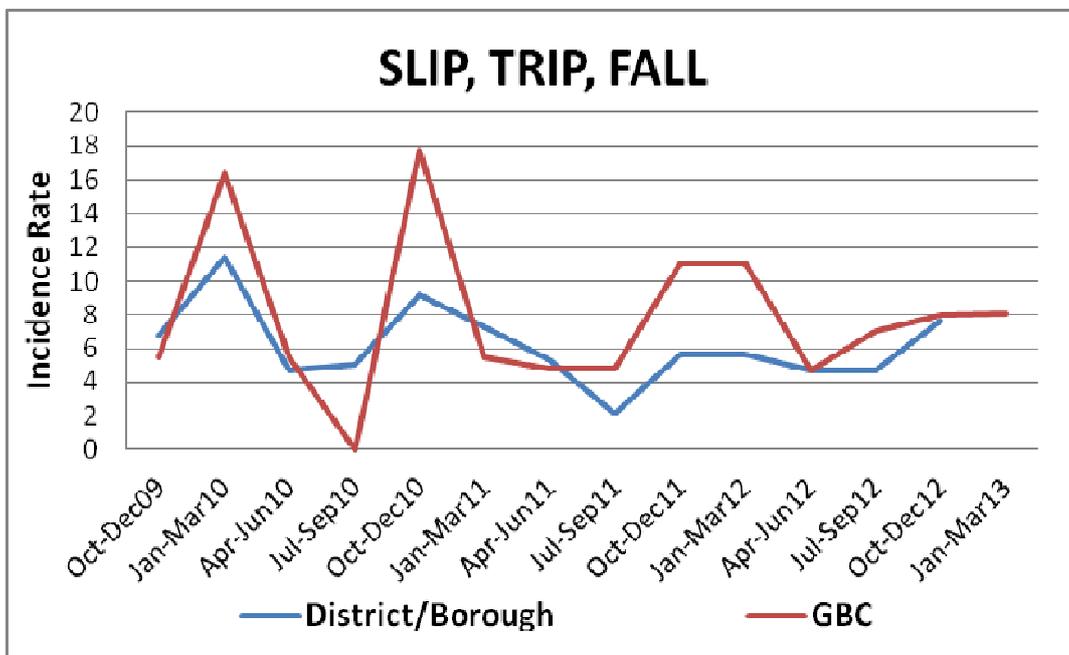
ago, but good management action involving the rearrangement of offices and the supply of modern equipment saw a steady fall from 8 per 1000 to zero in the March 2011. Since last year there has been a steady fall to just over 1 per 1000.

3.11 **SMO (Struck by Moving Object)** – Following a high figure of 9 per 1000 last year this category continued to fall slowly to June last year when four accidents occurred over three months involving cleaning, picking up a broken box, moving a bin over a kerb and pulling a trailer over a gully. Accidents usually involve doors opening onto unsuspecting employees, employees striking others in corridors and items falling off shelves. Manual workers have suffered from branches falling out of trees, road traffic accidents and accidents involving tools and equipment. Management have been taking the necessary and proper action to prevent a recurrence including fitting office doors with glass inspection panels.

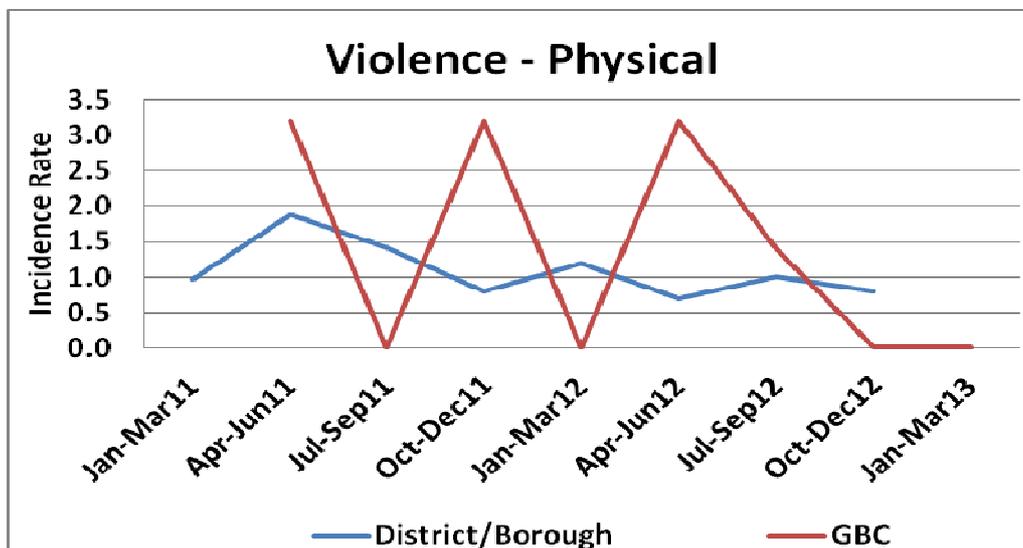
3.12 The category was split in 2011 to identify SMOs involving vehicles and identified a significant number but this has now fallen to nil in the last quarter. Depot employees invariably record the most accidents in this category; however they are not uncommon in busy offices.

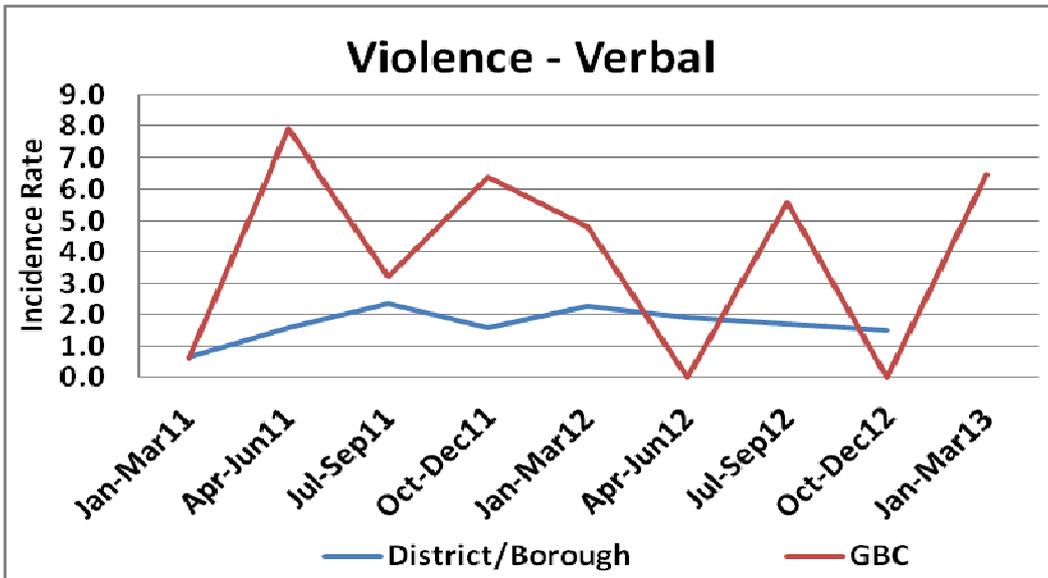


3.12 **STF (Slip, Trip and Fall)** – Slips, trips and falls peaked at 16 per 1000 in 2010, falling to zero by September of the same year. Unfortunately STF accidents during the heavy snowfalls in the winter saw this figure rise again to nearly 18 per 1000 with accidents to Direct Services and Leisure based employees. Slip-on ice shoes were provided to prevent a recurrence of this type of accident but there are still a high number of accidents in this category and double the county average at the end of last year. There has been a recovery over the year but it is still the highest category at 8 per 1000 accidents. Incidents included stepping out of vehicle cabs onto uneven ground (3), slipping on wet grass (4), Tripping over a bramble (1), tripping over a stone (1), falling off a wall when circuit training (1), cutting a hedge on uneven ground (1), leaning over on a chair (1), falling down a rabbit hole (1) and walking on icy surfaces (4).

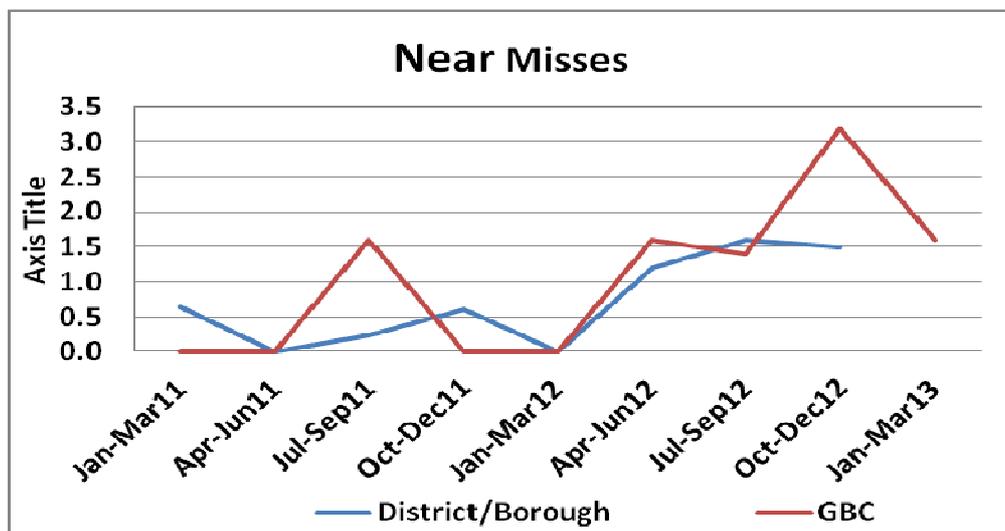
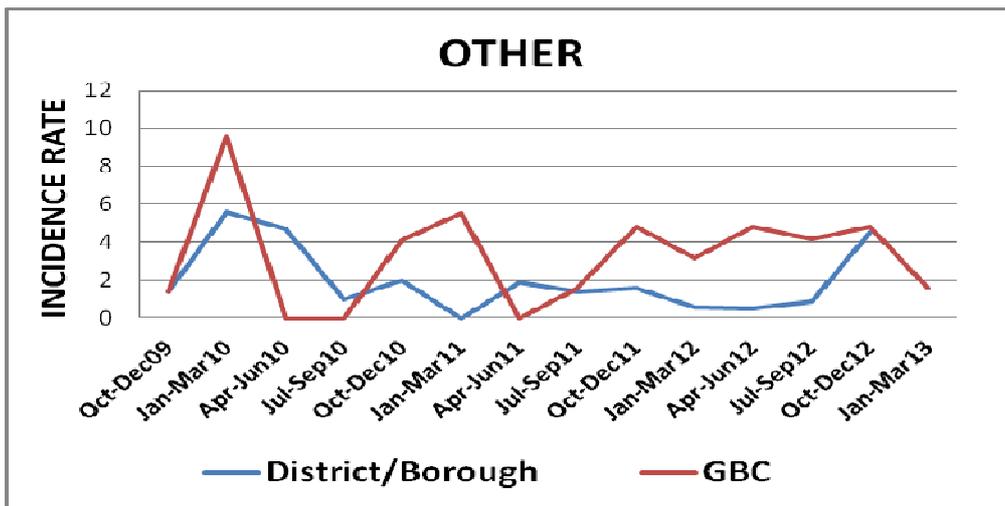


3.13 **VIO (Violence)** – Violence takes two main forms, physical and verbal abuse; physical violence now stands at zero after a peak in June 2012. This involved one member of staff who was threatened with physical abuse and one who was attacked by a dog. There have been no incidents in the last 6 months. Verbal abuse shows peaks and troughs throughout the period and Gedling has generally been above the average for the East Midlands since January 2011. Training courses on how to deal with perpetrators of violence have been popular and the content of the courses include breakaway techniques in case the violence escalates to physical attack. Some useful methods to defuse situations have also been developed following this training. Incidents are related to dealing with MOPs in leisure centres (6), Finance (1), PASC (1), and Waste Services (1).

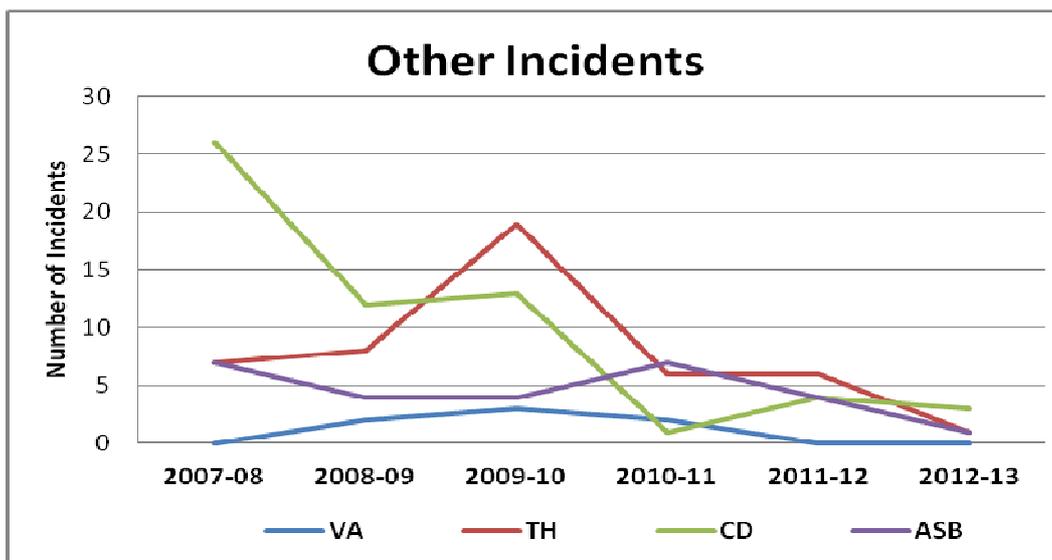




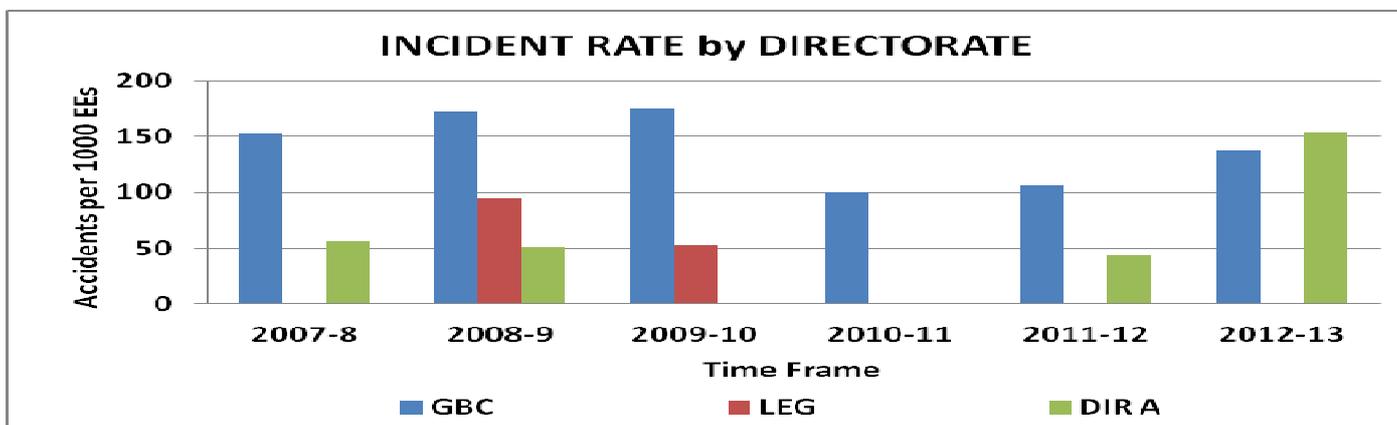
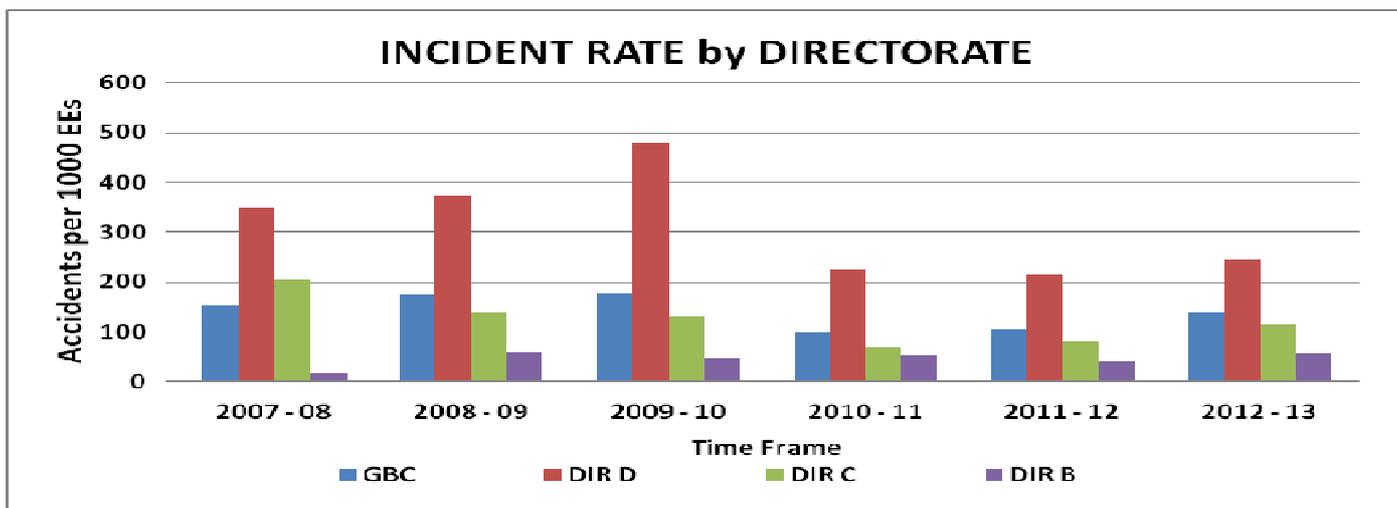
3.14 **OTH (Other types of accident)** – Most accidents can be categorised within the above headings and further training last year on accident reporting ensured that this category was on a downward slope. The category covers near misses, sport related accidents etc. Recording Near Misses has been particularly useful as it triggers an investigation before an accident happens. This year section managers are recording more incidents under this category especially in PASC.



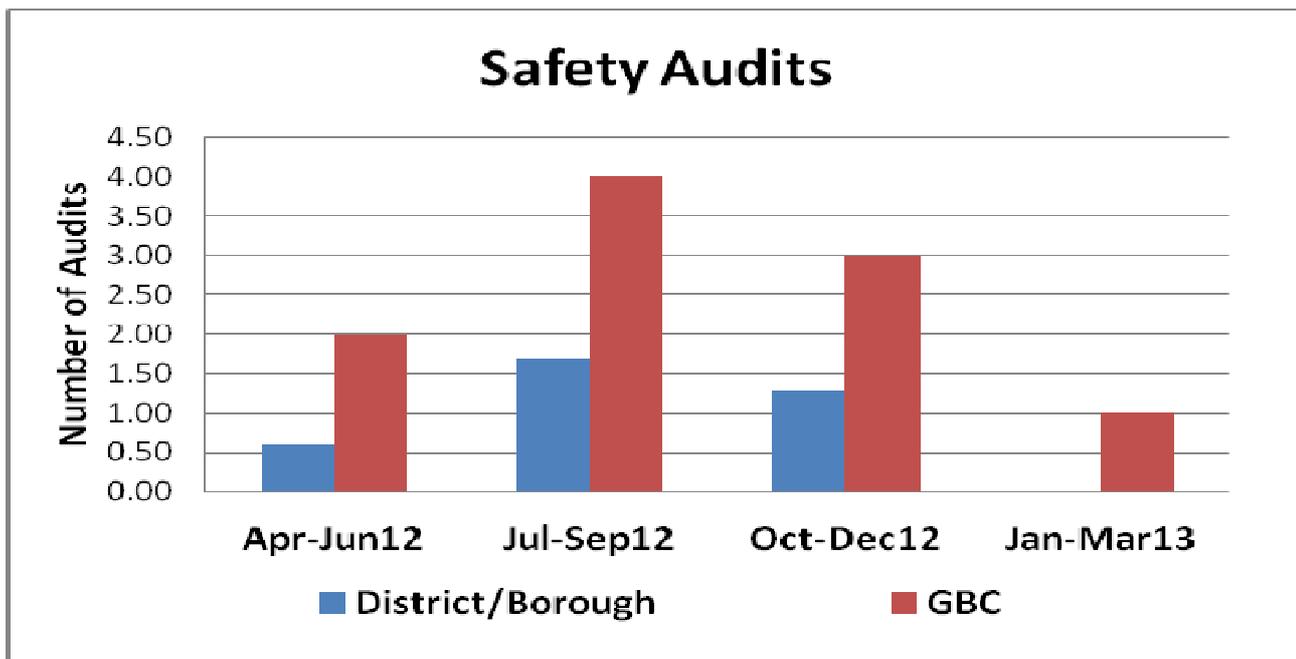
3.15 GBC records the further categories of anti social behaviour (ASB), Criminal damage (CD), Theft (TH) and Vandalism (VA) and the general trend is downward in all categories.



3.16 **Incident Rate by Service Area** – The bar chart below compares the incidence of accidents in the authority with those in the individual directorates. As expected, the highest incidence rate is in the old Direct Service areas, which is invariably double the borough incidence rate. They are followed by the leisure based areas where most of our other manual employees work. After a significantly high accident rate up to 2010, the last three years have been generally consistent at or about 200 per 1000 employees. The smallest directorates and Legal do not have many, if any, significant accidents recorded.



4. SAFETY AUDITS



4.1 Safety audits are carried out to check for compliance with corporate and local safety policies, guidance or procedures. Each leisure centre is now audited annually to ensure they are ready for annual external audit by QUEST as are the various sections in Direct Services with the smaller sections audited at five yearly intervals. The above bar chart compares the number of audits carried out at Gedling with those in the rest of the East Midlands.

4.2 The main observations included the need to complete, update or review risk, COSHH, MH, DSE or Fire assessments and ensure employees attend corporate safety training. Managers had identified the majority of their activities that would cause a significant risk of harm to both staff and their customers but still need to formalise any outstanding, significant risks on the reverse of the risk assessment form. Other major observations include the need to clarify the adopted control measures in order to fully protect the workforce and visitors to the workplace, and identify root causes of accidents. Audit reports have been completed for externally audited sections (Leisure Centres) and action taken to address any non compliance in other areas with the respective section manager. Reports are invariably completed within two days of the audit (with two exceptions), especially those carried out in leisure centres. Observations and recommendation sheets are attached for action with replies expected within a ten day period.

5. SAFETY POLICY AND GUIDANCE

5.1 The Safety Policy was revised and reissued in May 2012 to include major changes to the management structure. The revision also includes changes to legislation updated or introduced at that time.

5.2 Safety guidance drafted and processed this year include:

- ◆ Accident Reporting Forms
- ◆ Fire Risk Assessment Guidance Note
- ◆ Fire Procedures for the Civic Centre
- ◆ Fire procedure for Arnot Hill House
- ◆ Fire and Emergency Guidance Note
- ◆ Alcohol and Drug Guidance Note
- ◆ Display Screen Equipment Guidance Note

5.3 Safety Guidance still under review include:

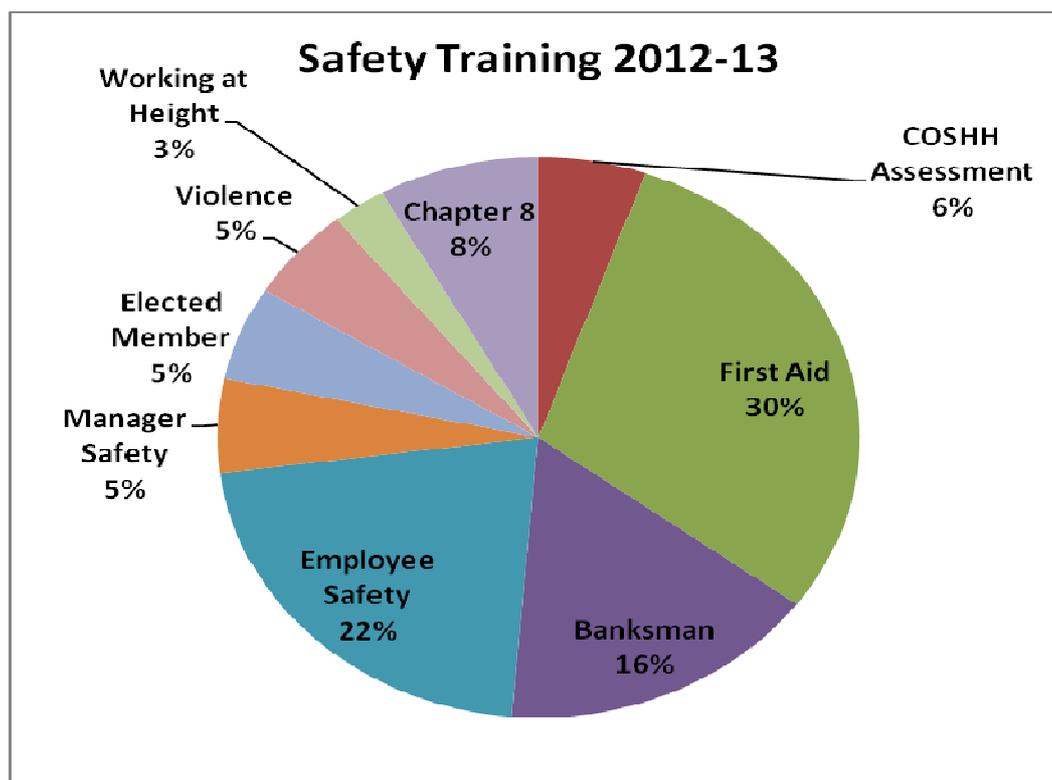
- ◆ Accident Reporting Guidance Note
- ◆ Management of Safety Guidance Note
- ◆ Risk Assessment Guidance Note
- ◆ Noise at Work Guidance Note
- ◆ Vibration at Work Guidance Note

5.4 CHAS members and senior management were kept abreast of the HSE's Strategy document which highlights the criteria required to comply with health and safety legislation and will be used for benchmarking in the future. Further documents explaining sensible risk management have also been circulated.

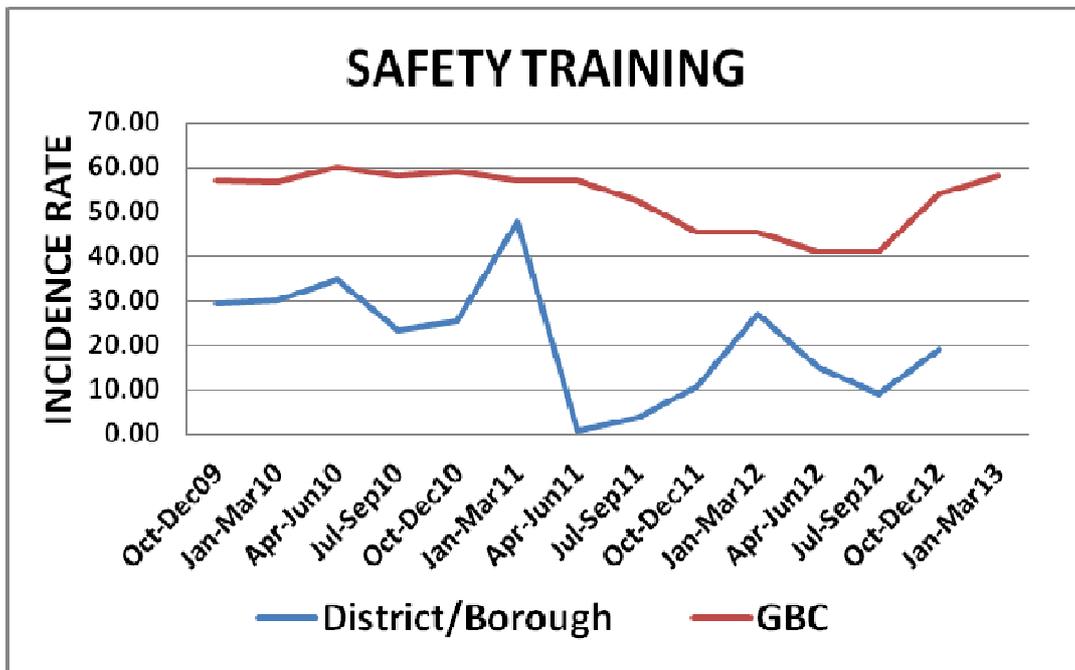
5.5 All documents are placed on the intranet once full consultation has taken place.

6 SAFETY TRAINING

6.1 All employees are given a safety induction by local management when they arrive at the council. Part of the process is to ensure the employee attends a safety awareness course bookable on the events folder of the intranet. This course covers general health and safety issues encountered in the workplace i.e. law, accident reporting, manual handling, hazardous substances, electrical and computer safety, noise and vibration safety, safety signs and fire awareness. Managers are then required to attend a manager's safety awareness course which includes how to complete the various risk assessment forms, accident investigation, law, and safety management. Both courses are one day long and assessed through multi choice test papers. Other section specific training is provided as and when required. The pie chart below represents training carried out this year.



6.2 Staff turnover makes a target greater than 60% difficult to achieve and following the latest employee and manager safety training this figure has yet to be reached. The overall figure for all employees at the end of the last quarter was 58% but safety training planned for the autumn of this year should address any shortfall in the target. The table below compares safety training carried out at GBC with other districts / boroughs in the East Midlands. From the start of this comparison GBC has consistently been at least 20% above other East Midland districts / boroughs.



6.3 A further target of 80% of First Aiders / Appointed Persons trained is used as a target and currently stands at 95% (Cover complies with legislative requirements for employees on our premises). In addition 65% of Appointed Persons (those who support the First Aider) are trained and course planned for the summer should address any shortfall. A new course: Basic First Aid Life Skills, is currently being rolled out to anyone who is not a first aider. It covers CPR, recovery position, heart attack and choking skills. All first aiders are offered defibrillator training to supplement their qualifications. All first aid training is now carried out in house to reduce costs and increase efficiency. An outlay of approximately £750 (for training the two trainers) has reduced the individual cost of £120 to £25 per person.

6.4 **Safety Training Appraisal** – Critiques are issued to delegates attending each training session. They cover two main areas: General learning methods used by the tutor and relevance of the training to the delegate in the job they do. They are collated as a percentage with the aim of reaching 60% in each category. Scrutiny of three types of course, Banksman, EE Safety awareness and Manager Safety Awareness are provided:

Course / Part appraised	General Content 2012	General Content 2013	Relevance to Workplace 2012	Relevance to Workplace 2013
First Aid	91%	n/a	100%	n/a
Banksman	n/a	93%	n/a	77%
Employee Safety Awareness	70%	86%	87%	94%
Manager Safety Awareness	80%	94%	95%	98%

6.5 Written comments included tailoring courses to types of workplaces rather than the generic version; more emphasis on practical work; more discussion required with fewer slides and more time for the test. Other comments included good DVDs and very informative with useful reminders and updates. These and other observations will be adopted in safety training courses this year.

6.6 Safety training courses were again offered to external delegates and Clinical Commissioning Group and Rushcliffe Borough Council took advantage. It is hoped that others courses can be offered on a top up basis in the future.

7. OCCUPATIONAL HEALTH

7.1 A contractor provides an occupational health service to address work related hazards that have been identified through the risk assessment process. These include: blood borne diseases; hazardous substances related (e.g. asbestos, legionella); noise induced hearing loss; strain and similar injuries to the eyes; Vibration related injuries; and lung damage following exposure to dusts and fibres.

7.2 **Hepatitis A & B** – Hepatitis A & B can be contracted through some of the tasks carried out by employees (e.g. cleaners and first aiders) and can be by either the oral or faecal route (HEP A) or bodily fluids (HEP B). We used to offer prophylaxis for both which was renewed every 5 years (HEP A) or 10 years (HEP B) but a new treatment is now available which gives cover for both A and B and this cover is for life. Over the last year we have been continuing to update employee records to reflect the change.

7.3 **Hearing Tests** – These have been carried out for all employees who have been exposed to noise at or above the first action level to determine if hearing damage has occurred. This is a rolling programme and will continue until the employee either retires or changes employment. The database at Orchard Health is currently being updated following staff changes.

7.4 **Eye tests** – These are carried out for employees who use computers as part of their job to determine if they require glasses for PC work. Once again this is an on going programme of work that will continue until the employee either retires or changes employment.

7.5 **Vibration Damage Monitoring** – The register of vulnerable employees reflects recent changes in the regulations and is used to determine how long an employee can use a particular tool or whether redeployment is necessary. This is also an on going programme of work, which will continue until the employee ceases to use tools and equipment that vibrate at or above the first action level. Once again the database is being updated to include starters and leavers

7.6 With savings in the training budget more time has been spent on Occupational Health this year to cover the retesting of DS employees following their claim that the equipment we provide is exacerbating existing levels of damage.

7.7 Another successful health fair was held in January 2013 with support from UNISON. A report is attached at Annex A. UNISON provided funds to offset the cost of holding this popular event. Employees were able to have their weight, blood pressure and heart rate measured, their blood and urine checked for diabetes, prostate health and cholesterol level and their bone density measured. Leisure staff carried out fitness checks and the Food Team offered samples of healthy eating (exotic fruits). Stalls highlighted sport and healthy lifestyle initiatives and nurses were available for professional advice. Dental Health was added for the first time this year.

8. SAFETY LIAISON

8.1 The CHAS Group continued to meet on a quarterly basis to review health and safety issues and act as a consultation group for health and safety within the council. Sub groups are formed from members of the Group to look at corporate guidance. The Joint Consultative and Safety Committee continues to meet and health and safety is featured on the agenda. Advice and guidance is offered as and when requested.

8.2 External liaison is maintained through various safety groups:

EMRLGA

General local authority safety issues shared with members of the 45 local authorities in the East Midlands. HSE Strategy and benchmarking initiatives are presented by the current Chairman – GBC Safety Officer

Midlands Construction

This Group provides information on highway and construction based matters; although not attended the information provided has been invaluable in developing the fire policy and work on the highways carried out by PASC operatives.

Nottinghamshire Occupational Safety and Health Association

Liaison with local businesses to discuss various health and safety topics including updates from the HSE (Nottingham Office) and law updates (Browne Jacobson Solicitors) (Secretary and treasurer)

Nottinghamshire Safety and Risk Management Group

Nottinghamshire Local Authority Safety Officers share knowledge at a local level to the benefit of all parties, especially sharing guidance notes, training events and costs, seminars on asbestos, contracting, legionellosis as they apply to LAs.

9. UNPLANNED TASKS

9.1 The following unplanned tasks were completed during the year:

- **Contract auditing** – This involves checking contract paperwork for client officers in Leisure Services who employ stone masons and play equipment providers. This year there was also a need to update the Occupational Health contract.
- **Investigating accidents related to Insurance Claims** – following claims this year from both employees and members of public relating to a variety of issues e.g. Noise Related Hearing Loss, Vibration and Manual Handling injuries, and slips, trips and falls.
- **Document Management related** – Checking documents prior to placing them on the IDOX system. With office moves over the last three years a considerable amount of paperwork has accumulated from the time when there were no computers and it is gradually being either stored electronically or shredded.

10. CONCLUSIONS

10.1 An external audit has confirmed that health and safety is managed effectively in the council however another inspection by our insurer considered that more work may be required to reduce the number of claims against the council. Taking into consideration the results of safety audits this year and the standard of accident reporting the following should be considered:

Recommendations	Resource Implications	Priority	Review Date
Complete a thorough safety audit of PASC and Waste Services to identify significant issues	Can be completed within current SO work plan. Some routine tasks will be given a lower priority	High to determine following action	30SEP13
Review Safety Guidance to determine if the above is suitable and sufficient. Develop further guidance as necessary following safety audit	Can be completed within current SO work plan. Some routine tasks will be given a lower priority	Medium to High depending on review and audit	31DEC13
Carry out revised Manger's Safety Awareness training to remaining managers	Can be completed within current SO work plan. Some routine tasks will be given a lower priority. Training venues will need to be allocated.	Medium to High depending on numbers	31MAR13

10.2 The attached Position Statement (**Annex B**) shows that the majority of identified health and safety issues have been addressed and now require a safety audit to determine compliance. Newer legislation has yet to be supplemented with Gedling Borough Council Safety Guidance Notes, but training has been made available to employees that are affected by it.

10.3 If you require any further information relating to this Report, please contact the undersigned

B J Saunders
Safety Officer
Ext 3940

Annexes:

Annex A Health Fair Report dated JAN 2013
Annex B Position Statement dated MAR 2013

Distribution:

Action:

CHAS Officers:

Caroline McKenzie	Directorate D	Jayne Cox	Directorate C
Duncan Adamson	Directorate B	David Archer	Directorate A and Legal

Information:

Chief Executive & Corporate Directors:

John Robinson
Stephen Bray (DIR A) David Wakelin (DIR D) Mark Kimberley (DIR B) Paula Darlington (DIR C)
Vince Rimmington Audit & Risk Management

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5th June 2013

See Distribution:

HEALTH FAIR 2013 – 31st January 2013**INTRODUCTION**

1.1 “Health Fair 2013” was the eleventh in a series of health promotions that provide information and practical advice for employees of Gedling Borough Council under the welfare part of the Health & Safety at Work Act 1974. The first event in May 1997 highlighted healthy eating initiatives and the deleterious effects of smoking, drinking and stress, as well as a check on employee general health and fitness.

1.2 The second event, aimed at the non-manual workforce, was held in January 1998 and concentrated on similar topics although emphasis was placed on regaining pre Yuletide fitness after the Christmas excesses.

1.3 The third event was dedicated to the manual workers at the Jubilee Depot Site and concentrated on men’s health with reference to the usual topics. Added information on sexual health and methods for checking the body for disease and/or abnormalities was also included.

1.4 The fourth event, planned for those who could not easily visit the Arnot Hill Park site, was based at Carlton Forum Leisure Centre. This venue was aimed at employees working in Richard Herrod Centre; St Andrew’s House, Moreland Court, Foxhill Court and various Community Centres in the locale. The theme for the day encompassed the usual topics with additional information on lung function, carbon monoxide testing and sampling the more exotic fruits as an alternative to crisps and sweets!

1.5 The fifth, sixth, seventh and eighth events, back at the original venue in the Civic Centre, were planned for members of staff based at the Arnot Hill Park site although they did attract staff from outlying areas. The theme for this event was the deleterious effects of osteoporosis. A team of professionals from the company “Osteohealth” checked the thickness of each individual’s anklebones to determine if osteoporosis was an issue for staff. A charge of £15 was made for each consultation, although this was offset for UNISON members with a subsidy of £5. The usual topics of previous health fairs were supported with urine analysis and cholesterol checks based on the feedback from attendees. A further stall was placed in the foyer to attract members of public who were visiting One Stop. The theme of the latter was to prevent or stop smoking.

1.6 The last three events were in collaboration with Paul McGinty and the Well at Work Team and included:

Body Mass Index	Food Safety	Cholesterol level	Blood Pressure
Urine analysis	Bone Density check	Prostate health check	Stress management
Smoking cessation	Keeping fit with LS		

2 ORGANISATION

2.1 As with all of these types of event, it would be difficult to organise without the dedicated support of the following:

2.2 **Edit Bodis** - who provided the “stop smoking” initiatives for staff. Edit signed up four smokers on the day to her annual programme.

2.3 **Occupational Health** – Julie Howe-Shilton our Occupational Health Nurse, from “Orchard Health” was once again available for checking employee’s blood pressure, heart rate, cholesterol levels and carrying out urine analysis. As we expected great interest in this section, she also provided another nurse. Further health advice of a private nature, related to the observations taken was also offered.

2.4 **Planning and Environment** – Our Food, Health and Safety Team, Julie, Shabnam, Rachel and Sue for providing exotic fruit for tasting and their time to give advice on food hygiene.

2.5 **Leisure Services** – Paul McGinty, Patrick Meakin and Johann Polak led a leisure based fitness team (Rikki Jeffrey, Sarah Jenkins and Dion Nangle) who provided a most popular check off an employee’s fitness through a series of body statistics. As an added bonus there was a fitness competition on a rowing machine and the “Smoothie” Bicycle. Paul also provided a health professional to discuss the effects of alcohol.

2.6 **Communications** – Rob McCleary provided advertising through the internet and produced posters for those who could not access a computer.

2.7 **Kay Richards** – provided her machine to check for the early signs of osteoporosis in both male and female employees of a certain age.

2.8 **Frank Walters** – provided his colleague, Jacqui to determine the level of prostate specific antigen in male members of staff.

2.9 **UNISON** – Sponsored their members to the tune of £5 per member for both Osteoporosis and Prostate checks.

2.10 **KV Mobile** – This group offered subsidised eye tests for staff in the mobile surgery.

2.11 **Simon Norman** – Simon designed a booking system for all the stalls, no mean feat when some of the appointments were for 10 minutes, others at 20. It took a little tweaking before the event but it did enable everyone to book on line.

2.12 The standard questionnaire was handed to each person as they entered in order to determine the success or failure of the event. (This has proved to be an effective method of assessment since its inception with the added bonus that one of the returns wins 3 months DNA membership).

3. STATISTICS

3.1 **OSTEOPOROSIS** – Kay advised that those with below average bone density should visit their doctor to determine if there is an underlying cause for the low levels and if there was a need to take calcium supplements. Those that have attended before and taken her advice have found their bone density figures to be higher than previously recorded.

Bone Density	%	2012	2013
Above average	100% or above (Some were as high as 135%)	40% of attendees	50% of attendees
Average	74 – 99%	42.5% of attendees	42.8% of attendees
Below average	50-75%	17.5% of attendees	7.1% of attendees
High risk	0-50%	0% of attendees	0% of attendees

3.2 PROSTATE – Jacqui also advised that raised levels should be referred to their doctor for a further more in depth test. After the last health fair two members of staff with raised levels were able to confirm the initial signs of prostate cancer and had the condition treated.

Antigen Reading	units	2012	2013
Negative antigen reading	0-4 units	86.3% of attendees	87% of attendees
Positive antigen reading	5-10 units	13.7% of attendees	13% of attendees
Positive antigen reading	10+ units	0% of attendees	0% of attendees

3.3 URINE ANALYSIS – This test detected glucose and the onset of diabetes. There were no positive results on the day.

Glucose Reading	2012	2013
Negative for glucose	100%	100%

3.4 CHOLESTEROL LEVEL – This test involved a pin-prick to release blood and measuring the level in the sample taken. High levels were discussed with the employee and advice on diet or referral to their own doctor was advised. Employees from previous years with higher levels are now recording lower readings after taking the above advice.

Reading	2012	2013
Less than 5	69%	67%
5.1 and above	31%	33%

3.5 BODY MASS INDEX (BMI) – Employees were weighed and their height recorded to determine their BMI. It was surprising to see that over 50% of staff were not of a healthy weight.

Body Mass Index	Relation to weight	2012	2013
BMI less than 19	Under weight	2%	7%
BMI 20 - 25	Healthy weight	54%	42%
BMI 26 or above	Over weight	44%	52%

4. SMOKING

Type	2012	2013
Ex-Smokers	-	9.3%
Current Smoker	-	9.3%
Non Smoker	-	81.3%

5 EYE TESTS

5.1 The tests showed that two members of staff had one eye that was compensating for the other and required spectacles to correct the observation. This group of opticians proved to be much more professional in their approach than the previous mobile opticians.

6. EXPENDITURE

6.1 Expenses included the nurses time and for consumables – Urine analysis (£1 per test) and Cholesterol (£3 per test). The cost for both prostate and bone density checks were also £20 per employee. Subsidies over the years have kept costs down with UNISON and employees paying for the service. This year external funding supplemented the cost borne by both employees and UNISON. Expenditure was as follows:

PROVIDER	2007	2007	2012	2012	2013	2013
	Item	COST £	Item	COST £	Item	COST £
ORCHARD HEALTH						
Nursing Provision & travel		560.00		617.60	16 x £45	729.60
Cholesterol check	135 x £3	405.00	89 x £3	267.00	76 x £3	228.00
Urine analysis	24 x £1	24.00	48 x £1	48.00	41 x £1	41.00
TOTAL		989.00		932.60		998.60
OSTEOCARE	82 x £18	1476.00	46 x £20	920.00	42 x £20	840.00
PROSTATE	41 x £18	738.00	43 x £20	860.00	33 x £20	660.00
TOTAL COSTS		3203.00		2712.60		2498.60
SUBSIDY						
UNISON						
Prostate	32 x £10	320.00	27 x £5	135.00	7 x £5	35.00
Osteohealth	36 x £10	360.00	32 x £5	160.00	21 x £5	105.00
EMPLOYEE						
Prostate	9 x £13*	117.00	16 x 5	80.00	33 x £5	165.00
Prostate	32 x £3*	96.00	14 x 5	70.00	42 x £5	210.00
Osteohealth	46 x £13*	598.00				
Osteohealth	36 x £3*	108.00				
External Funding (Health & Wellbeing Fund)		nil		1250.00		nil
TOTAL SUBSIDY		1599.00		1695.00		515.00
COST OF FAIR		1604.00		1017.60		1983.60

- Subsidy by EEs in the past was related to UNISON membership i.e. Union members paid less than non union members.

7. WINNERS OF COMPETITIONS

Category	Winner	Prize
Male to row Farthest	1. Johann Polak 2. Rikki Jeffrey 3. Andy Fretwell	No Prize
Prize Draw Winners	CLARE JANES JOHN EVENS	Digital Photograph Frame Digital Photograph Frame
Returned Questionnaire Winner	Bev Beal X3855	3 months DNA membership

8. FEEDBACK FROM ATTENDEES

8.1 Twenty seven questionnaires were returned from the one hundred and twenty attendees. 59% were informed via the intranet, 25% saw the poster and 16% read about it in the GEN.

8.2 The most popular events were bone density checks, checking body mass index, healthy eating, blood pressure and heart rate, cholesterol and urine analysis. There were only 8 negative comments relating to gender specific testing, smoking and eye testing; topics that were of no interest to the particular attendees. The raw data on feedback sheets can be viewed in the Safety Officer's office if required.

9. CONCLUSIONS

9.1 Thanks to the appointment based attendance the eleventh Health Fair coped with a steady flow of people instead of the peaks and trough situation (around lunch and tea breaks) we have experienced in the past. By transferring the booking of appointments to attendees a great part of the previous administration of the event was transferred out leaving more time for the setting up before and clearing up after the event. The venue seemed to suit the majority of staff employed at the Arnot Hill Park site but those who worked at Carlton, Mapperley and Calverton still found it more difficult especially when relying on public transport.

9.2 All stallholders enjoyed the busier feel to the day and managed to get at least 30 minutes break. Appointments ran to schedule and at times were quicker than planned allowing latecomers to take advantage of the service provided. The planned finish time of 1600hrs was once again extended to beyond 1730 thanks to stall holders. A finish at 1700 hrs or later may have to be considered in future.

9.3 There was only one possible topic for future events: Mental health and it has been suggested that the next event take place at the Richard Herod Centre to cater for outlying staff. One or two attendees asked if consultations could have been a little more private.

9.4 If you require any further information relating to this Health Fair Report, please contact the undersigned

Barry J Saunders

Safety Officer
Ext: 3940

Annexes:

Distribution:

Action:

CHAS Officers:

Caroline McKenzie Directorate D
Duncan Adamson Directorate B

Jayne Cox Directorate C
David Archer Directorate A and Legal

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POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 1 of 9 ANNEX B

No	REFERENCE (Statute / Regulation / Source Document)	Date	Completion Stages				CURRENT STATE	FURTHER REQUIREMENTS
			A	B	C	D		

A - Info collated / received. B - Forms and / or procedures purchased, developed / reviewed. C - Initial / refresher training completed. D – Initial / revised Guidance Note issued.

GENERIC								
1	Health and Safety at Work Act	1974	✓	✓	✓	✓	1. Policy Statement, Organisation & Arrangements revised	1. Update Policy (ongoing) 2. Audit for compliance
2	Factories Act	1961	✓	n/a	✓	n/a	1. Parts of the act have now been replaced or revoked.	1. Audit for compliance
3	Office, Shops and Railway Premises Act	1963	✓	n/a	✓	n/a	1. Parts of the act have now been replaced or revoked.	1. Audit for compliance
4	Occupiers Liability Act	1984	✓	n/a	✓	n/a	1. Included on Safety Awareness Training	1. Audit for compliance
5	Management of Health and Safety at Work Regs Management of Health and Safety at Work Amendment) Regs	1999 2006 2007	✓	✓	✓		1. Initial Risk assessment training completed (ongoing). 2. Guidance Note completed. 3. Revised Risk Assessment form issued	1. Refresher RA training required. 2. Review Guidance Note to include HSG 64 information 3. Audit for compliance.
6	Employer's Liability (Compulsory Insurance) Regs Employer's Liability (Compulsory Insurance) (Amendment) Regs	1998 2008					1. Contractors checked at selection stage	1. Review Guidance Note and provide training as required. 2. Check certificates in place 3. Audit for compliance.

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 2 of 9 ANNEX B

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GENERIC								
7A	Health and Safety (Information for Employees) Regs Health and Safety (Information for Employees) (Amendment) Regs Health and Safety (Information for Employees)(Repeals and Mod) Regs	1989 1995 2007 2009	✓	✓	✓	✓	1. New addresses and telephone numbers issued. 2. Posters on display. 3. All new employees made aware on induction.	1. Audit for compliance
7B	Safety Representatives and Safety Committees Regs	1977 1992 1996 1999	✓	✓	✓	✓	1. Safety Policy updated 2. EE Safety training 3. UNISON Safety Rep appointed 4. JCSC re-established	1. Audit for compliance
7C	Health and Safety (Consultation with Employees) Regs	1996 1999	✓	✓	✓	✓	1. Revised Safety Policy reflects the Borough method of consultation with all employees.	1. Audit for compliance.
8	H & S (Miscellaneous Amendments) Regs	2002						1. Check for applicability. 2. Arrange training as required
9	Corporate Manslaughter and Corporate Homicide Act	2007	✓	✓		✓	1. Info received and HoS briefed. Guidance given.	1. Check for applicability. 2. Audit for compliance

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 3 of 9 ANNEX B

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TOPICS								
ACCIDENTS								
10	Reporting Injuries, Diseases and Dangerous Occurrences Regs Amendments	1995 1999 2001 2004 2009 2012	✓	✓	✓	✓	1. Included in safety awareness training 2. Revised accident forms developed and issued 3. Safety Policy amended 4. Accident software purchased and accidents recorded on database.	1. Further Training as required. 2. Revise guidance to include current amendments 3. Audit for compliance.
11	Control of Major Accident Hazards (COMAH) Regs Control of Major Accident Hazards (Amendment) (COMAH) Regs	1999 2005 2008 2009						1. Review to determine requirements of both sets of regulations. 2. Arrange training as required
ASBESTOS								
12	The Control of Asbestos at Work Regulations	2006 2007 2009 2012	✓	✓			1. Asbestos Register reviewed. 2. All properties checked for asbestos products 5. Competent persons used to dispose of asbestos waste. 3. Recognised contractors used to deal with asbestos. 4. Asbestos awareness training completed.	1. Register requires review (ongoing). 2. General Guidance required. 3. Further training as required. 4. Contractors procedures require development 5. Review monitoring forms 6. Audit for compliance.

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 4 of 9 ANNEX B

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COMPUTERS								
13	Health and Safety (Display Screen Equipment) Regs Health and Safety (Miscellaneous Amendments) Regulations	1992 2002	✓	✓	✓	✓	1. Recognised as a hazard on risk assessments 2. Eye care vouchers stopped in favour of cheques. 4. “Users” identified and trained. (Ongoing) 5. Guidance note reissued	1. Train remaining “Users” (ongoing) 2. Audit for compliance.
CONSTRUCTION								
14	Construction (Head Protection) Regs 1989	1992 1997 2007	✓				1. Information included in safety awareness training	1. Audit for compliance
15	Construction (Design and Management) Regs	2007	✓				1. Initial Guidance in place 2. Client officers trained (ongoing)	1. Audit for compliance. 2. Review Guidance Note
CONFINED SPACES								
16	Confined Space Regs	1997	✓	✓	✓		1. DS staff trained 3. Original guidance in place.	1. Review Guidance Note and provide training as required. 2. Audit for compliance.
ELECTRICITY								
17	Electricity at Work Regs	1989 1997	✓	✓			1. All areas registered checked & tested portable electrical equipment. 2. Included in safety awareness training	1. Guidance Note and forms. 2. Audit for compliance

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 5 of 9 ANNEX B

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FIRE								
18	Regulatory Reform (Fire Safety) Order Building Regs	2005 2006 2007 2000	✓ ✓	✓	✓		1. Fire Risk Assessment issued 2. Fire Officers trained 3. Fire Supervisors trained 4. Room Checkers trained 5. Evacuation, fire drills and procedures tested. 6. Guidance Note issued 7. Civic & AHH procedures issued	1. Update Evacuation plans for Jubilee House. 3. Audit for compliance
19	Fireworks Safety Regulations	1997 2006					1. Information received from DT1 and HSE 2. Advice & Guide provided	1. Review Guidance Note and provide training as required. 2. Audit for compliance.
FIRST AID								
20	Health and Safety (First Aid) Regs Amendments	1981 1989 1997 1999 2002	✓	✓	✓		1. First Aiders & Appointed Persons nominated. 2. First Aid Group formed 3. Safety Policy updated 4. FA box content checked	1. Further training for First Aiders & Appointed Persons (ongoing) 2. Guidance Note 3. Audit for compliance
FOOD								
21	Food Hygiene (England) Regulations Food Hygiene (England) (Amendment) Regulations	2006 2007 2010					1. Recognised hazards, on risk assessments. 2. Cooks and others handling food trained	1. Review guidance. 2. Further training (ongoing) 3. Audit for compliance

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 6 of 9 ANNEX B

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GAS SAFETY								
22	Gas Safety (Installation and Use) Regs	1998	✓				1. Revised regulations from CORGI registration to other forms of registration.	1. Check for applicability 2. Audit for compliance.
HAZARDOUS SUBSTANCES								
23	COSHH Regs COSHH (Amendment) Regs	2002 2003 2004 2009	✓ ✓	✓ ✓	✓ ✓	✓ ✓	1. Recognised hazards, on risk assessments. 2. Included in safety awareness training 3. Safety Policy amended 4. COSHH assessor training 5. Guidance Note raised.	1. Training and Guidance as required. 2. Audit for compliance.
24	Chemicals (Hazard Information & Packaging for Supply) Regs (CHIP)	2009	✓					1. Check for applicability
25	Carriage of Dangerous Goods & Use of Transportable Pressure Equipment Regs	2009					1. Guidance received	1. Check for applicability. 2. Arrange training as required
26	Transport of Dangerous Goods (Safety Advisor) Regs	1999						
LEGIONAIRES DISEASE								
27	Control of Legionella bacteria in water systems. Legionnaires Disease – Guide Legionnaires Disease - ACoP	2001 2009 2000	✓	✓	✓	✓	1. Revised documents in place 2. Training provided 3. Scheme of work developed 4. Schematics acquired	1. Review existing guidance. 2. Audit for compliance

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 7 of 9 ANNEX B

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MANUAL HANDLING								
28	Manual Handling Operations Regs	1992 2002	✓	✓			1. Recognised as a hazard on risk assessments. 2. Basic assessment forms in place.	1. Review Guidance Note. 2. Audit for compliance.
NOISE AND VIBRATION								
29	Control of Noise at Work Regs	2005 2009	✓	✓			1. Noise assessments initiated 2. Included in safety awareness training. 3. Safety Policy updated	1. Review Guidance Note 2. Review Safety Policy 3. Audit for applicability
30	Control of Vibration at Work Regs	2005					1. Recognised hazards, on risk assessments.	1. Review Guidance Note and provide training as required. 2. Audit for compliance.
PPE								
31	PPE Regs Amendments	2002 2005	✓	✓	✓		1. Recognised as a requirement on risk assessments 2. Included in safety awareness training	1. Training and Guidance as required. 2. Audit for compliance.
RADIATION								
32	Ionising Radiations Regs Amendments	1999 2001						1. Check for applicability. 2. Arrange training as required

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 8 of 9 ANNEX B

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SAFETY SIGNS								
33	Health and Safety (Safety Signs and Signals) Regulations Amendments	1996 1999 2004 2005	✓				1. Signs purchased or made and distributed. (Ongoing) 2. Incl. in safety awareness trg 3. Safety Policy amended	1. Audit for compliance.
WORK EQUIPMENT								
34	Provision and Use of Work Equipment Regs	1998 1999 2002 2005 2007 2008					1. Recognised hazards, on risk assessments. 2. Included in safety awareness training 3. Department procedures in place	1. Training and Guidance as required. 2. Labelling of “s” &”u/s” equipment. 3. Audit for compliance.
35	The Lifting Operations and Lifting Equipment Regulations (LOLER) Amendments	1998 2002 2007 2008	✓				1. Guidance received 2. Recognised hazards, on risk assessments.	1. Review Guidance Note and provide training as required. 2. Audit for compliance.
36	Pressure Equipment Regs Pressure Equipment (Amendment) Regs	1999 2002 2008						1. Check for applicability. 2. Arrange training as required
WORK EXPERIENCE								
37	The Right Start (WE for Young People) Health and Safety (Training for Employment) Regs	2002 1990					1. Risk Assessments raised for work experience students	1. Review Guidance Note and provide training as required. 2. Audit for compliance.

POSITION STATEMENT - COMPLIANCE WITH MAJOR H & S REGULATIONS (March 2013) Page 9 of 9 ANNEX B

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WORKING AT HEIGHT								
38	Work at Height Regs Work at Height (Amendment) Regs	2005 2007	✓				1. Recognised hazards, on risk assessments. 2. Training provided for LC staff	1. Review Guidance Note and provide training as required. 2. Audit for compliance.
WORKING TIME								
39	Working Time Regs Working Time (Amendment) Regs	1998 2002 2003 2004 2005 2006 2007 2009	✓ ✓				1. Guidance received 2. Advice given as required	1. Review Guidance Note and provide training as required. 2. Audit for compliance.
WORKPLACES								
40	Workplace (Health Safety & Welfare) Regs Workplace (Health Safety and Welfare) (Amendment) Regs	1992 1996 2002 2005 2007	✓	✓	✓		1. Recognised as hazard, when applicable, on risk assessments 2. Included in safety awareness training 3. Department procedures in place	1. Training and Guidance as required. 2. Audit for compliance.

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Report to Joint Consultative and Safety Committee

Subject: Consultation of the introduction of Substance Misuse Policy

Date: 27 August 2013

Author: Service Manager; Organisational Development

1. Purpose of the Report

To introduce a draft policy that specifies how the misuse of substances will be dealt with in the workplace. Specifically the policy focuses on the misuse of alcohol and drugs.

2. Summary

The policy, shown at Appendix 1, is designed to be both supportive of employees where there is a wish to engage with the Council in order to try to ensure that substance misuse does not have a detrimental effect on their work performance or on the health and safety of themselves or others, and also to be clear about the potential conduct issues that may arise when substance misuse has been detected through testing.

The policy proposes the use of testing for substance misuse in order to support managers who are charged with ensuring that services are delivered both to a high standard and safely.

The policy draft has the support of Senior Leadership Team.

Appendix 2 is not intended to be included within the policy but shows guidance that is proposed for managers to help them to recognise signs of substance misuse and also to assist with the wording to be used when introducing a substance (drug or alcohol) test.

3. Recommendation

The Committee is recommended to consider the proposed policy draft and to make any recommendations to the Appointments and Conditions of Service Committee which will authorise the formal adoption of a final policy on behalf of the Council.

Substance Misuse Policy

1. Introduction

1.1 The Council is committed to ensuring the health, safety and welfare of its employees and those affected by its activities. It will take all reasonable steps to reduce, if not eliminate, the risk of injuries or incidents occurring due to individuals suffering from the effects of alcohol or substance abuse. Consequently, the Council reserves the right under this policy to exercise alcohol and drug testing of its employees. This policy applies to all employees, including management.

1.2 No employee shall attend for work in an unfit state due to the misuse of alcohol or drugs. Employees and contractors are prohibited from drinking alcohol (or misusing drugs) in the workplace, whilst undertaking the business of the Council, or immediately prior to or during a break in a working shift. These actions will be treated and investigated as a matter of potential misconduct under the Council's Disciplinary Procedure (or appropriate procedure for a contractor). An unfit state may include, but not be limited to cases where:

- The individual is over the legal alcohol limit stipulated for driving (ie 35mcg/100ml of breath alcohol concentration).
- In the opinion of management, the individual's performance is impaired. In respect to alcohol, this may be at less than the legal limit stipulated for driving.
- In the opinion of management, the individual's behaviour may cause embarrassment, distress or offence to others.

1.3 All reasonable steps will be taken by the Council to prevent employees and contractors carrying out work-related activities if they are considered to be unfit or unsafe to undertake the work as a result of alcohol consumption or substance misuse.

1.4 The Council expressly prohibits the use by an employee of any controlled drugs or any prescription drugs that have not been prescribed for the user or which are not used in the manner described in the prescription. It is a criminal offence to possess, use or supply a controlled substance. If any such incidents take place during an employee's working day or outside normal hours of work at a Council function, they will be regarded as serious and will be investigated under the Council's Disciplinary Procedure. The outcome of any hearing resulting from such an investigation may be disciplinary action, including dismissal and possible reporting to the police.

1.5 No employee or other person under the Council's direction shall, in connection with any work-related activity:

- report, or endeavour to report, for duty having consumed drugs or alcohol likely to render themselves unfit or unsafe for work;
- consume or be under the influence of drugs or alcohol while on duty;
- store drugs or alcohol in personal areas such as lockers and desk drawers; or
- attempt to sell or supply drugs or alcohol to any other employee or other person on the Council premises, in Council vehicles or at any time during work time.

1.6 The policy has been written with reference to relevant legislation including, but not limited to: Health and Safety at Work Act 1974 (Section 2), Management of Health and Safety at Work Regulations 1999, Road Traffic Act 1988 and Human Right Act 1988.

2. Support

2.1 Employees must inform their line manager or Service Manager if they are taking any medication that may have an effect on their ability to carry out their work safely, and must follow any instructions subsequently given. Where necessary and appropriate a manager will review a risk assessment for a person carrying out particular tasks who may be taking such medication in order to put into place appropriate control measures.

2.2 In general terms, any employee suffering from drug or alcohol dependency should declare such dependency to their manager or Service Manager. The Council will subsequently provide reasonable assistance and support.

2.3 Where an employee has a dependency that has an impact on their normal work, or which prevents them undertaking some or all of their duties, they will be managed within a capability framework. This means that a length of time over which an improvement is expected will be determined and a range of support measures will be agreed. Should the employee not be able to demonstrate that the drug or alcohol use is no longer an issue in relation to their work within this timescale, an employment decision will be taken about the employee's suitability to continue and the outcome may include redeployment or dismissal from the Council.

2.4 Absences relating to this dependency or its treatment will be dealt with under the Council's Absence Management Policies as appropriate.

2.5 Loss, damage or accidents arising as a result of an employee being under the influence of alcohol or drugs will be investigated and dealt with appropriately through the Council's Disciplinary Procedure as will occasions when an employee has taken part in safety-critical work whilst being under the influence of such substances. This will be the case whether or not any dependency had previously been declared.

3. With-cause alcohol and drug testing

3.1 A manager may require an employee to be tested for alcohol and drugs in cases where they have had any involvement in a workplace accident, "near miss" or in an incident that has caused or could have caused a danger to health or safety.

3.2 Testing may also be carried out where a manager has grounds to believe or suspect that the employee is or may be under the influence of alcohol or drugs.

3.3 Any employee who notices signs of alcohol or drug abuse in a colleague should report their observations or suspicions in confidence to the employee's line manager.

4. Random alcohol and drug testing

4.1 Random alcohol and drug testing will be carried out on employees who work in safety-critical jobs, including those working with machinery, whose job duties involve driving, or working in potentially dangerous environments or whose job involves responsibility for the safety of others. A list of jobs defined by the Council as "safety-critical" as at August 2013 is shown at Appendix A; this list will be amended or added to periodically by management following consultation with trade unions. Management will determine the timing, frequency and sample size of random testing exercises.

5. Carrying out tests

5.1 Asking an employee to undergo alcohol and drug testing does not necessarily indicate that there is any suspicion of wrongdoing.

5.2 Alcohol and drug testing will be carried out only by a qualified and competent person. On each occasion of testing, the Service Manager or other appropriate senior manager will determine if a trained and appropriate employee or an external service provider will be used to conduct the testing. Tests used will be industry standard and will be reliable, credible and safe. Tests are carried out with the least possible intrusion into employees' privacy.

5.3 Test results will be held securely and treated confidentially.

5.4 Employees who are tested will be notified of the result before this is disclosed to their line manager. Immediately after this notification to the employee, the line manager will be notified of the results of testing.

5.5 Refusal to submit to an alcohol and drug test will be treated as a misconduct issue, potentially gross misconduct, and dealt with within the Council's Disciplinary Procedure.

6. Action after a positive test

6.1 If a test proves positive and the employee has been engaged in safety critical activities at the time of the test, or the test has been conducted because of an accident or other similar event or near-miss, the employee will be required to take part in an investigatory interview as defined within the Council's Disciplinary Procedure. This may lead to a formal hearing and appropriate formal action being taken which may include dismissal. If action short of dismissal is taken, it may be appropriate to establish a more regular drug or alcohol monitoring programme with an employee over an extended period of time to ensure that use of these substances is not affecting work performance or safety.

6.2 If work performance appears to be adversely affected by the use of drugs or alcohol the employee will be managed within a capability framework in which specific improvements within defined timescales will be made clear. Failure to meet these required improvements may lead to redeployment or dismissal. It may be appropriate to establish a more regular drug or alcohol monitoring programme with an employee over an extended period of time to ensure that use of these substances is not affecting work performance.

6.3 If a test proves positive but the case criteria of the previous two paragraphs do not apply, the employee will be interviewed by a senior departmental manager within a more general welfare framework. The purpose of this will be to identify the support that can be offered by the Council in order to assist the employee with any lifestyle changes that they may wish to make.

6.4 Generally, a result will be considered "positive" where the presence of alcohol above 35mcg/100ml of breath alcohol concentration is detected or where there is the presence of controlled drugs.

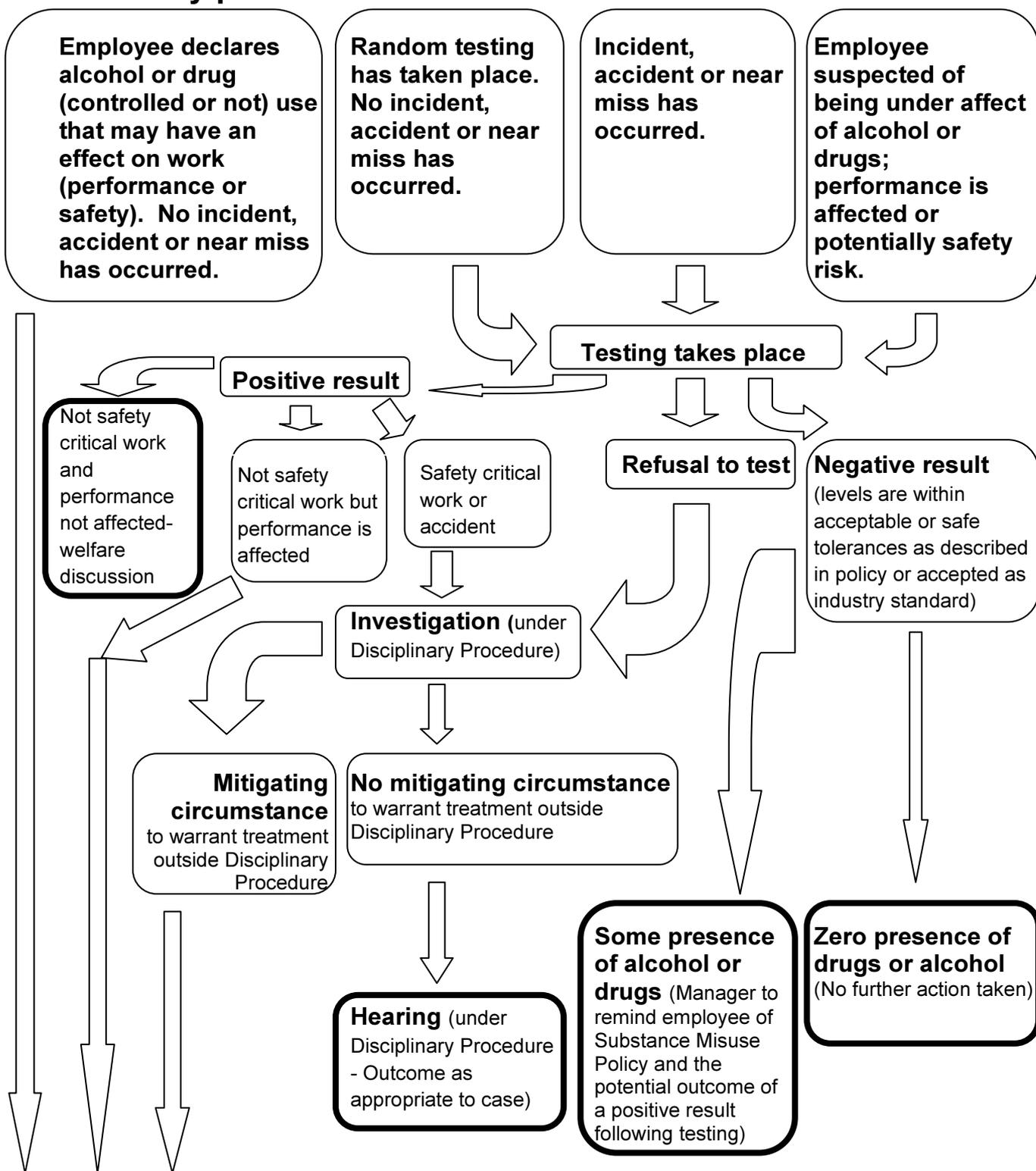
7. Complaints

7.1 Any complaint about the way in which an alcohol and drug test has been conducted should be stated in writing to a senior departmental manager who will investigate the complaint through the Council's Disciplinary Procedure.

8. Equality issues

8.1 This policy will not be used in a discriminatory manner to single out and treat differently based on a protected characteristic defined in the Equality Act 2010, any individual employee or group of employees. Testing will be carried out as described above. Each employee's dignity will be respected at all times.

Summary process chart



Manage within capability framework Issues to consider:

- Risk assessment (temporary and permanent)
- Apply appropriate control measures
- Appropriate support (internal and external)
- Consider appropriateness and possibility of temporary or permanent redeployment.
- If performance or ability to undertake work safely is affected, identify improvement required within timescales
- Introduce periodic/ extended testing regime
- Consider alternative options if required improvements not achieved (including redeployment or dismissal)

Safety-critical jobs

Team	Post ID	Post Description
Leisure and Culture	LAR01	Operational Manager
Leisure and Culture	LAR02	Administration Officer/Duty Manager
Leisure and Culture	LAR04	Duty Manager
Leisure and Culture	LAR20A	Assistant Manager
Leisure and Culture	LAR20B	Assistant Manager
Leisure and Culture	LAR30	Duty Manager
Leisure and Culture	LAR30CAS	Duty Manager
Leisure and Culture	LAR40A	Leisure Attendant
Leisure and Culture	LAR40B	Leisure Attendant
Leisure and Culture	LAR40B	Leisure Attendant
Leisure and Culture	LAR40C	Leisure Attendant
Leisure and Culture	LAR40CAS	Leisure Attendant
Leisure and Culture	LAR40D	Leisure Attendant
Leisure and Culture	LAR40F	Leisure Attendant
Leisure and Culture	LAR40G	P/T Leisure Attendant/Swim Instructor
Leisure and Culture	LAR80A	Female Centre Attendant
Leisure and Culture	LAR80B	Male Centre Attendant
Leisure and Culture	LAR80C	Female Centre Attendant
Leisure and Culture	LAR80CAS	Centre Attendant
Leisure and Culture	LAR80D	Centre Attendant
Leisure and Culture	LAR80E	Centre Attendant
Leisure and Culture	LAR80F	Centre Attendant
Leisure and Culture	LAR80G	Centre Attendant
Leisure and Culture	LAR80H	Centre Attendant
Leisure and Culture	LCA01	Operational Manager
Leisure and Culture	LCA02	Fitness Development Officer/Duty Mgr
Leisure and Culture	LCA20B	Assistant Manager
Leisure and Culture	LCA20CAS	Casual Assistant Manager
Leisure and Culture	LCA30	Duty Manager
Leisure and Culture	LCA30CAS	Duty Manager
Leisure and Culture	LCA60A	Fitness Advisor
Leisure and Culture	LCA60B	Fitness Advisor
Leisure and Culture	LCA60CAS	Fitness Advisor
Leisure and Culture	LCA80A	Centre Attendant
Leisure and Culture	LCA80B	Centre Attendant
Leisure and Culture	LCA80C	Centre Attendant
Leisure and Culture	LCA80CAS	Centre Attendant
Leisure and Culture	LCA80D	Centre Attendant
Leisure and Culture	LCA80E	Centre Attendant
Leisure and Culture	LCA80F	Centre Attendant
Leisure and Culture	LCA80G	Centre Attendant
Leisure and Culture	LCA80H	Centre Attendant
Leisure and Culture	LCA85A	Sportshall Attendant
Leisure and Culture	LCA85B	Sportshall Attendant

Leisure and Culture	LCA85CAS	Sportshall Attendant
Leisure and Culture	LCF01	Manager
Leisure and Culture	LCF02	Operations Manager
Leisure and Culture	LCF04	Swim Development Officer
Leisure and Culture	LCF04CAS	Casual Swim Development Officer
Leisure and Culture	LCF05	Maintenance Assistant
Leisure and Culture	LCF20A	Assistant Manager
Leisure and Culture	LCF20B	Assistant Manager
Leisure and Culture	LCF20C	Assistant Manager
Leisure and Culture	LCF30	Duty Manager
Leisure and Culture	LCF30CAS	Duty Manager
Leisure and Culture	LCF40A	Leisure Attendant
Leisure and Culture	LCF40B	Leisure Attendant
Leisure and Culture	LCF40C	Leisure Attendant
Leisure and Culture	LCF40D	Leisure Attendant
Leisure and Culture	LCF40E	Leisure Attendant
Leisure and Culture	LCF40F	Leisure Attendant
Leisure and Culture	LCF40H	Leisure Attendant
Leisure and Culture	LCF60A	Fitness Advisor
Leisure and Culture	LCF60B	Fitness Advisor
Leisure and Culture	LCF60C	Fitness Advisor
Leisure and Culture	LCF60CAS	Fitness Advisor
Leisure and Culture	LCF60D	Fitness Advisor
Leisure and Culture	LCF60G	Fitness Advisor
Leisure and Culture	LCF65CAS	Fitness Advisor - Youth Gym
Leisure and Culture	LCF65CAS	Fitness Advisor - Youth Gym
Leisure and Culture	LCF80A	Centre Attendant
Leisure and Culture	LCF80B	Centre Attendant
Leisure and Culture	LCF80C	Centre Attendant
Leisure and Culture	LCF80CAS	Centre Attendant
Leisure and Culture	LCF80D	Centre Attendant
Leisure and Culture	LCF80G	Centre Attendant
Leisure and Culture	LCF80J	Centre Attendant
Leisure and Culture	LCF80L	Centre Attendant
Leisure and Culture	LCF80M	Centre Attendant
Leisure and Culture	LCF80N	Centre Attendant
Leisure and Culture	LFA20A	Caretaker Burton Road
Leisure and Culture	LFA20A	Caretaker Burton Road
Leisure and Culture	LFA20B	Caretaker Arnold Hill
Leisure and Culture	LFA20C	Caretaker Arnold Hill
Leisure and Culture	LFA20CAS	Caretaker
Leisure and Culture	LFA20D	Caretaker Killisick
Leisure and Culture	LFA20E	Caretaker Killisick
Leisure and Culture	LFA20F	Caretaker Ponds Hill
Leisure and Culture	LFA20G	Caretaker Ponds Hill
Leisure and Culture	LFA20H	Caretaker Westdale Lane
Leisure and Culture	LFA20I	Caretaker Westdale Lane
Leisure and Culture	LFA20L	Caretaker Brickyard

Leisure and Culture	LRE01	Operations Manager
Leisure and Culture	LRE02	Fitness Development Officer/Duty Office
Leisure and Culture	LRE20A	Assistant Manager
Leisure and Culture	LRE20B	Assistant Manager
Leisure and Culture	LRE20C	Assistant Manager
Leisure and Culture	LRE30	Temporary Duty Manager
Leisure and Culture	LRE30CAS	Duty Manager
Leisure and Culture	LRE60A	Fitness Advisor
Leisure and Culture	LRE60B	Fitness Advisor
Leisure and Culture	LRE60C	Fitness Advisor
Leisure and Culture	LRE60CAS	Fitness Advisor
Leisure and Culture	LRE60E	Fitness Advisor
Leisure and Culture	LRE85CAS	Sportshall Attendant
Leisure and Culture	LRH01	Operations Manager
Leisure and Culture	LRH20A	Assistant Manager
Leisure and Culture	LRH20B	Assistant Manager
Leisure and Culture	LRH20C	Assistant Manager
Leisure and Culture	LRH30CAS	Duty Manager
Leisure and Culture	LRH40A	Centre Assistant
Leisure and Culture	LRH40B	Centre Assistant
Leisure and Culture	LRH40C	Centre Assistant
Leisure and Culture	LRH40CAS	Centre Assistant
Planning and Economic Development	EPB02A	Senior Building Control Officer
Planning and Economic Development	EPB02B	Senior Building Control Officer
Planning and Economic Development	EPB02D	Senior Building Control Officer
Planning and Economic Development	EPB03B	Assistant Building Control Officer/BCO
Asset Management	DPS09A	Fitter
Asset Management	DPS09B	Fitter
Asset Management	DRR11B	Fitter
Asset Management	DRR11C	Fitter
Asset Management	DRR12	Assistant Fitter
Asset Management	DTF06	Caretaker
Asset Management	DTF07A	Caretaker
Asset Management	DTF07B	Caretaker
Asset Management	DTS01	Transport Services Manager
Asset Management	DTS02	Workshop Supervisor
Parks and Street Care	DPS06A	PASC Skilled Team Worker - Arborist
Parks and Street Care	DPS07A	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS08	Parks Development Officer
Parks and Street Care	DPS10B	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10C	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10D	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10E	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10F	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10G	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10J	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10J	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10K	Parks & Street Care Skilled Team Worker

Parks and Street Care	DPS10L	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10M	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10N	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS10P	Parks & Street Care Skilled Team Worker
Parks and Street Care	DPS11A	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11AA	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11AD	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11AE	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11AF	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11B	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11C	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11D	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11E	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11F	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11I	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11L	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11M	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11O	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11P	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11Q	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11R	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS11S	Parks & St Care Semi-skilled Team Worker
Parks and Street Care	DPS12B	Parks and Street Care Team Worker
Parks and Street Care	DPS12C	Parks and Street Care Team Worker
Parks and Street Care	DPS12D	Parks and Street Care Team Worker
Parks and Street Care	DPS12E	Parks and Street Care Team Worker
Parks and Street Care	DPS13A	Parks & Street Care Apprentice
Parks and Street Care	DPS13B	Parks & Street Care Apprentice
Parks and Street Care	DPS15	Play Area Maintenance Worker
Parks and Street Care	LRS15A	Urban Park Ranger
Parks and Street Care	LRS15B	Urban Park Ranger
Public Protection	EEE07	Pest Control Operator
Public Protection	EEE09A	Neighbourhood Warden
Public Protection	EEE09C	Neighbourhood Warden
Public Protection	EEE09D	Neighbourhood Warden
Public Protection	EEE09E	Neighbourhood Warden
Public Protection	EEE09F	Neighbourhood Warden
Waste Operations	DRR05A	Refuse Driver
Waste Operations	DRR05B	Refuse Driver
Waste Operations	DRR05C	Refuse Driver
Waste Operations	DRR05D	Refuse Driver
Waste Operations	DRR05E	Refuse Driver
Waste Operations	DRR05F	Refuse Driver
Waste Operations	DRR05G	Refuse Driver
Waste Operations	DRR05H	Refuse Driver
Waste Operations	DRR05I	Refuse Driver
Waste Operations	DRR05J	Refuse Driver
Waste Operations	DRR05K	Refuse Driver

Waste Operations	DRR05L	Refuse Driver
Waste Operations	DRR05M	Refuse Driver
Waste Operations	DRR05O	Refuse Driver
Waste Operations	DRR05P	Refuse Driver
Waste Operations	DRR05Q	Waste Services Response Driver
Waste Operations	DRR05R	Refuse Driver
Waste Operations	DRR05S	Waste Services Response Driver
Waste Operations	DRR05T	Refuse Driver
Waste Operations	DRR05U	Refuse Driver
Waste Operations	DRR06A	Refuse Loader
Waste Operations	DRR06B	Refuse Loader
Waste Operations	DRR06C	Refuse Loader
Waste Operations	DRR06CAS	Refuse Loader
Waste Operations	DRR06D	Refuse Loader
Waste Operations	DRR06E	Refuse Loader
Waste Operations	DRR06G	Refuse Loader
Waste Operations	DRR06H	Refuse Loader
Waste Operations	DRR06I	Refuse Loader
Waste Operations	DRR06J	Refuse Loader
Waste Operations	DRR06K	Refuse Loader
Waste Operations	DRR06L	Refuse Loader
Waste Operations	DRR06M	Refuse Loader
Waste Operations	DRR06N	Refuse Loader
Waste Operations	DRR06O	Refuse Loader
Waste Operations	DRR06P	Refuse Loader
Waste Operations	DRR06Q	Refuse Loader
Waste Operations	DRR06R	Refuse Loader
Waste Operations	DRR06S	Refuse Loader
Waste Operations	DRR06T	Refuse Loader
Waste Operations	DRR06U	Refuse Loader
Waste Operations	DRR06V	Refuse Loader
Waste Operations	DRR06W	Refuse Loader
Waste Operations	DRR06X	Refuse Loader
Waste Operations	DRR06Y	Refuse Loader
Waste Operations	DRR07A	Refuse Driver- Recycling
Waste Operations	DRR07B	Refuse Driver- Recycling
Waste Operations	DRR07C	Refuse Driver- Recycling
Waste Operations	DRR07D	Refuse Driver- Recycling
Waste Operations	DRR07F	Refuse Driver- Recycling
Waste Operations	DRR07G	Refuse Driver- Recycling
Waste Operations	DRR07H	Refuse Driver- Recycling
Waste Operations	DRR07I	Refuse Driver- Recycling
Waste Operations	DRR07J	Refuse Driver- Recycling
Waste Operations	DRR08A	Recycling Loader
Waste Operations	DRR08B	Recycling Loader
Waste Operations	DRR08C	Recycling Loader

Signs of possible substance abuse or misuse

One or more of these signs may be an indicator of possible substance abuse and misuse. They are also indicators to other medical conditions.

- Slurred or rambling, stumbling, incoherent speech
- Drowsiness or inability to stay awake
- Poor co-ordination, staggering, disorientation
- Unsure standing, turning, moving
- Irrational or inappropriate behaviour (belligerence, violence, etc.)
- Nausea
- Inflamed, glassy or droopy eyes, dilated/constricted pupils
- Hallucinations
- Mood swings, unpredictability (hyperactivity, depression, euphoria)
- Frequent sniffing or touching of the nose
- Personality changes
- Heightened reflexes
- Exaggerated confidence or glibness
- Forgetfulness
- Lack of attention
- Agitation, restlessness, anxiety and paranoia
- Runny or bleeding nose
- Aroma of alcohol or drugs
- Limited attention span, difficulty concentrating
- Hand tremors
- Violent tendencies, loss of temper or irritability
- Time distortion
- Mental confusion, bizarre thoughts, ideas or statements
- Poor personal hygiene

Job Performance Patterns Indicating Possible Substance Abuse and Misuse

One or more of these patterns may be an indicator of possible substance abuse and misuse. They are also indicators to other medical conditions.

- Extended absences from the job
- High accident rate
- Inability to work with others, friction in relationships
- Chronic, excessive absenteeism pattern
- Poor workmanship on the job (e.g. error, wasted materials)
- Failure to complete jobs/tasks etc. in a timely manner
- Difficulty concentrating
- Confusion, inability to handle jobs of increasing complexity
- Spasmodic work patterns

- Irrational personal behaviour on the job (overreaction, unusual personality change, decline in personal hygiene, etc.)
- Four or more incidents of absences (sickness, tardiness, or being AWOL) in the preceding twelve months
- Suspicious absence pattern such as:
 - Immediately preceding or following days off
 - Coincident with weekends
 - Always on the same shift
 - Swings in activity level – hyperactivity to sluggishness
- Inability to perform two tasks at the same time (divided attention), such as handling a discussion while physically performing a task
- Sporadic or poor workmanship or job performance
- Change in attitude – moody, resentful of criticism, always casting blame on others, sudden inability to work with others
- Chronic forgetfulness or broken promises

Contributing Evidence:

- Physical evidence (drug paraphernalia, alcohol beverage bottles, etc.)
- Smell of marijuana, alcohol
- Attempts to hide or destroy evidence
- Observance of use
- Suspicious employee reaction

Guidance script for managers requiring an employee to undergo a substance test

“I require you to undertake a drug and alcohol test. This is because <see policy: either as a result of an incident or reasonable suspicion of use or as a result of being chosen through random selection from the pool of safety-critical posts>. This will be conducted <by whom> at <location> at <time>. You will need to supply a sample of your saliva by means of a mouth swab and/or a sample of breath. There will be an immediate result for both tests.”

“If the tests prove to be negative, you will be asked to resume your normal work.”

“If the test for alcohol proves to be positive as defined within Council policy you will be suspended on full pay. I shall arrange transport to home/elsewhere.”

“If the saliva tests positive to drugs another sample may need to be taken under chain of custody conditions (this means that the sample will be dealt with securely and that it cannot be tampered with) and forwarded to an independent laboratory for further analysis. The results should be available within 48 hours. In the meantime, you will be suspended on full pay. I shall arrange transport to home/elsewhere. I shall contact you at home <check contact number> as soon as the results have been confirmed.”

“In the event of a positive result being found for drug or alcohol presence that is above the limit defined in Council policy, you will remain suspended whilst an investigation under the Council’s Disciplinary Procedure is conducted. The matter will be treated as an issue of potential misconduct, possibly gross misconduct. If as a result of this investigation a formal hearing is called, the outcome may be disciplinary action up to and including dismissal.”

“As part of the procedure for testing, you may request a colleague to be present as a witness and you will be asked for your consent for the tests to take place. Do you wish for a colleague to be present? <Who?> (*this will need to be someone who is readily available if the test is to be carried out immediately*). Refusal to provide a sample may be viewed as an act of gross misconduct which may lead to disciplinary action up to and including dismissal.”

“If you are concerned or have questions about this test or the reason for it, you may wish to discuss this with me, a Personnel Officer from the HR team or your union representative. If you wish to make complaint about how the test has been applied, you should state this in writing to my manager <who?>.”

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Report to Joint Consultative and Safety Committee

Subject: Proposal for minor revisions to the constitution of the Joint Consultative and Safety Committee (JCSC)
Date: 27 August 2013
Author: Service Manager; Organisational Development

1. Purpose of the Report

Unison has highlighted a number of issues in the current JCSC constitution that they consider to require updating or amendment.

The current constitution is shown at Appendix 1 and the areas proposed for revision are highlighted.

Having been made aware of these proposals, management have considered the wording of the JCSC constitution and have taken advice on the correct process to make particular changes. Appendix 2 shows a management proposal for an updated draft of the JCSC constitution for consideration.

2. Summary

The management proposals made to the existing policy are as follows. Advice has been sought from Legal Services about the process to make the changes and this advice is also shown below.

Section	Current Wording	Proposed Wording	Legal advice regarding process to make change
3	There will be no substitute members from either side.	Substitute members from the Employees' side are allowed. Membership and substitution of Employers' side members will be governed by the terms of the general Council Constitution.	This change of wording can be determined by the JCSC Committee itself.
4	The Chair and Vice-Chair of the Committee will alternate between the Employer's side and the Employees side on an annual basis.	The Chair and Vice-Chair of the Committee will be drawn from the Employer side and be determined by Council.	The JCSC is now a full committee of the Council. As such, the Constitution does not allow for anything other than the Chair and Vice-Chair be drawn from Elected Members and determined through Council.
7	Meetings will be called as required...	Scheduled meetings will be held on a frequency	This change of wording can be

		determined by Council. In addition, ad hoc meetings will be called as required when there are items for discussion and consultation raised by either the Head of Paid Service, or the Trade Unions.	determined by the JCSC Committee itself.
7	The meetings will usually be held in working time, and the provisions of the Council's Trade Union Facilities Agreement for paid time off for Trade Union Representatives will apply.	The timing of the meetings will be determined by the Chair following consultation with members from both sides. The provisions of the Council's Trade Union Facilities Agreement for paid time off for Trade Union Representatives will apply.	This change of wording can be determined by the JCSC Committee itself.
7	Agenda items may be submitted by either side and should be with Democratic Services at least 6 clear working days before the date of the Committee.	Agenda items may be submitted by either side and should be with Member Services at least 8 clear working days before the date of the Committee.	This proposed change just brings the wording up to date with current general committee arrangements. This change of wording can be determined by the JCSC Committee itself.

3. Recommendation

The Committee is recommended to approve the proposed policy draft shown at Appendix 2. The JCSC committee does have the authority to make these changes in this way should it so wish.

JOINT CONSULTATIVE AND SAFETY COMMITTEE

1. Responsible for

Providing a forum for discussion and consultation between the Council and Trade Union representatives on matters affecting the Council's employees. Such matters to include but not limited to:

- a) Employee terms and conditions
- b) Employee health and wellbeing

2. Delegation

2.1 To receive proposals and make recommendations to the Appointments and Conditions of Service Committee in relation to terms and conditions of Council employees and procedures for disciplinary action and dismissal.

2.2 To receive proposals and make recommendations to the Head of Paid Service in respect of his proposals for significant change to:

- a) The manner in which the discharge by the authority of their different functions is co-ordinated
- b) The number and grades of staff required by the authority for the discharge of their functions
- c) The organisation of the authority's staff.

2.3 To be consulted on and make recommendations to the Executive in respect of any health and safety functions of the Council to the extent that those functions are discharged in the Authority's capacity as an employer.

3. Membership

The Committee shall comprise of 7 members appointed by Gedling Borough Council representing the Employers (Employer's side) and 7 members appointed by the recognised Trade Unions (Employees' side).

The Employer's side will make their appointments at the Council's Annual Meeting.

The Employees side will be invited to make appointments to their places in proportion to their membership among the Council's workforce.

There will be no substitute members from either side.

4. **Chair and Vice-Chair**

The Chair and Vice-Chair of the Committee will alternate between the Employer's side and the Employees side on an annual basis.

5. **Voting**

Voting shall be by a show of hands by the Committee members. No resolution shall be regarded as carried until it has been approved by a majority of the members present on either side of the Committee.

6. **Resolutions**

Resolutions that are passed by the Committee will be presented to the Executive, Appointments and Conditions of Service Committee or the Head of Paid Service as appropriate. Where a resolution is not passed the matter will nonetheless be reported to the Executive, Appointments and Conditions of Service Committee or the Head of Paid Service as appropriate.

The role of the Committee is consultative and therefore any resolution cannot be a decision of the Council. The decision rests with the Executive, Appointments and Conditions of Service Committee or the Head of Paid Service as appropriate having due regard to any resolution of the Committee.

7. **Meetings**

Meetings will be called as required when there are items for discussion and consultation raised by either the Head of Paid Service, or the Trade Unions. There will be at least one meeting per year for consideration of the annual Health and Safety Report.

The meetings will usually be held in working time, and the provisions of the Council's Trade Union Facilities Agreement for paid time off for Trade Union Representatives will apply.

Agenda items may be submitted by either side and should be with Democratic Services at least 6 clear working days before the date of the Committee.

Summons to the Meeting and Agendas will be circulated to all Committee members 5 clear working days before the meeting.

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Scheduled meetings will be held on a frequency determined by Council. In addition, ad hoc meetings will be called as required when there are items for discussion and consultation raised by either the Head of Paid Service, or the Trade Unions. There will be at least one meeting per year for consideration of the annual Health and Safety Report.

The timing of the meetings will be determined by the Chair following consultation with members from both sides. The provisions of the Council's Trade Union Facilities Agreement for paid time off for Trade Union Representatives will apply.

Agenda items may be submitted by either side and should be with Member Services at least 8 clear working days before the date of the Committee.

Summons to the Meeting and Agendas will be circulated to all Committee members 5 clear working days before the meeting.



Report to Joint Consultative and Safety Committee

Subject: Sickness Absence: summary of current trends

Date: 27 August 2013

**Author: Chief Executive
 Service Manager; Organisational Development**

1. Purpose of the Report

This is an information item to inform the Committee of the current levels of sickness absence in the organisation and to examine trends. Relevant data is shown at Appendix 1; officers will present a verbal report on the context of this data.

As part of the introduction of this item, officers will also highlight to the Committee through verbal report, any matters of particular current interest in respect to absence management.

2. Summary of key data

Of particular interest to the committee may be that:

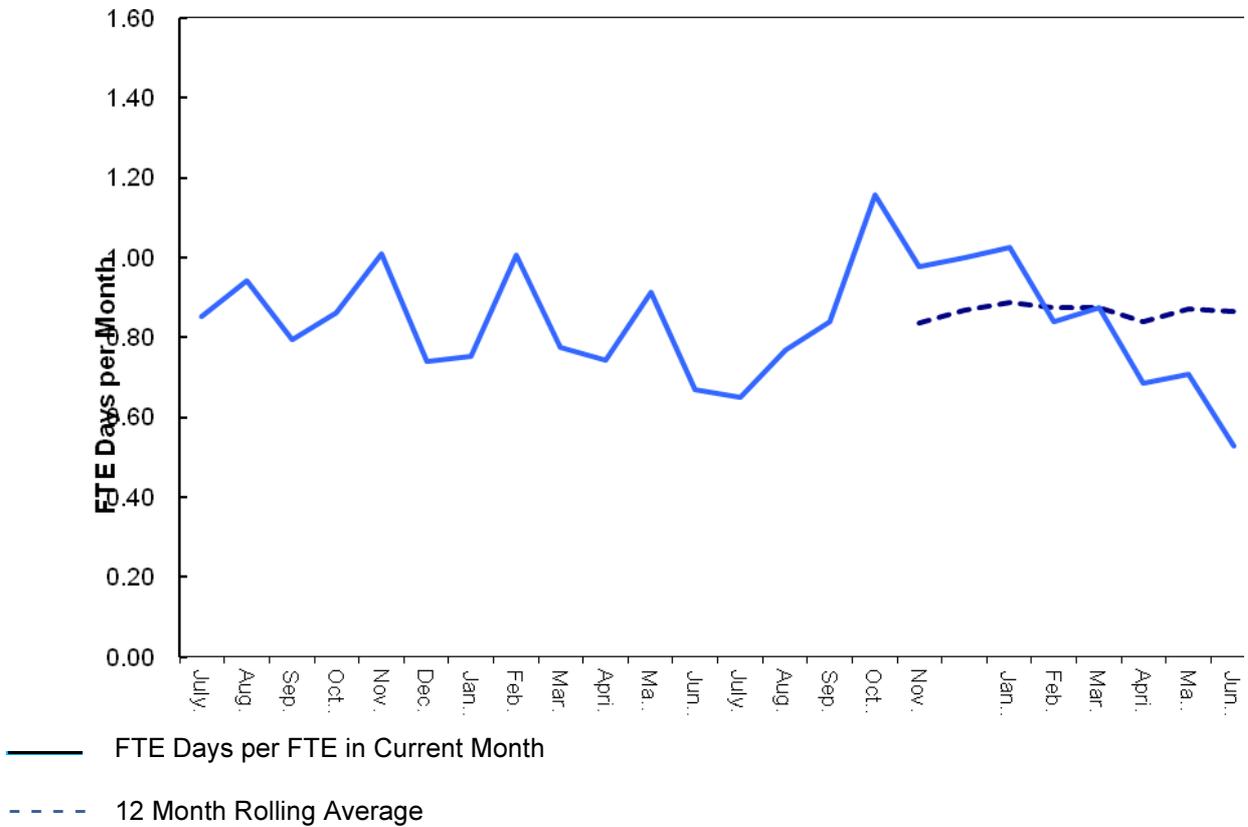
- The summary of trends graph shows that absence has decreased this month, in fact the rate of .53 FTE days lost per FTE is the lowest absence rate over the last two-year "accounting period". In percentage terms this equates to a rate of 2.64%.
- The target for this financial year is ten working days lost.
- The "year to date" table shows that average absence levels generally seem to be within target although, in particular, there are two large service areas where absence levels are very high.
- Measures that are currently being taken to combat this increase include:
 - A number of "long term" cases have now been resolved either through dismissal or return to work. In the current month there are now no long term absence cases in either Waste Services or PaSC. It is these cases that tend to have the most significant effect on absence rates.
 - The suite of training workshops previously reported at this committee has now been commissioned by the PaSC and Waste Management Services for delivery in October. this will be delivered by the Organisational Development team and will centre on effective communication and management of absence and conduct.
 - Further training for managers is planned to help with the management of employees with depression or other mental health issues.

- Although the “current month” data shows a mix of increase and decrease when compared to the previous month, the service with the highest absence rate over the year, Waste Services, in fact shows a significant drop from the previous month (less than half the absence rate). PaSC’s level of absence is similar to last month although this level is less than half the rate that it had been six months ago. Some service areas such as Communications and Public Protection do show a substantial increase in absence rates between the current and previous month although care should be taken in the analysis of information as small numbers of long-term absence within a small team can significantly skew the data.
- Although absence rates are traditionally low around June and July, the current month is very low and is almost half the rate that it was six months ago.

3. Recommendation

The Committee is asked to note this report.

Summary of trends graph; year to date at June 2013



Month	Total Absence (%)	No of FTE Staff	12 Month Average (%)	FTE Days per FTE in Current Month	FTE Days per FTE 12 Month Average	FTE Days per FTE Per Month Average
July 11	4.06	437.38	4.23	0.85	10.69	0.89
Aug 11	4.29	434.70	4.25	0.94	10.77	0.90
Sept 11	3.61	428.92	4.24	0.79	10.90	0.91
Oct 11	4.10	423.31	4.25	0.86	10.87	0.91
Nov 11	4.59	420.72	4.27	1.01	10.86	0.91
Dec 11	3.90	420.61	4.16	0.74	10.58	0.88
Jan 12	3.59	416.28	4.03	0.75	10.11	0.84
Feb 12	4.80	419.94	4.08	1.01	10.18	0.85
March 12	3.53	428.12	4.01	0.78	9.92	0.83
April 12	3.91	417.26	3.97	0.74	9.99	0.83
May 12	4.16	417.75	4.05	0.91	10.25	0.85
June 12	3.53	417.10	4.01	0.67	9.92	0.83
July 12	2.96	415.08	3.91	0.65	9.82	0.82
August 12	3.50	420.21	3.85	0.77	9.75	0.81
Sept 12	4.21	411.60	3.90	0.84	9.85	0.82
Oct 12	5.03	412.81	3.98	1.16	10.15	0.85
Nov 12	4.44	415.81	3.96	0.98	10.04	0.84
Dec 12	5.88	417.07	4.13	1.00	10.44	0.87
Jan 13	4.66	417.10	4.22	1.03	10.65	0.89
Feb 13	4.19	417.79	4.17	0.84	10.49	0.87
March 13	4.60	417.79	4.26	0.87	10.49	0.87
April 13	3.27	412.27	4.20	0.69	10.06	0.84
May 13	3.37	409.62	4.14	0.71	10.46	0.87
June 2013	2.64	408.54	4.06	0.53	10.38	0.87

Year to date absence data, by service area with six month trend

YEAR TO JUNE 2013

Service	Section	Fte At Start	Fte At End	Average Fte	No Emps Sick FTE	FTE Days Lost	FTE Days Lost per FTE
Chief Executive		5.42	5.00	5.21	2.39	5.73	1.10
Service Total:		5.42	5.00	5.21	2.39	5.73	1.10
Corporate Directorate (A)	Communications	4.50	5.09	4.80	4.09	15.70	3.27
	Elections and Members' Services	5.50	6.00	5.75	4.50	26.00	4.52
	Organisational Development	9.57	9.11	9.34	2.81	182.23	19.52
		1.00	1.00	1.00	1.00	2.00	2.00
Service Total:		20.57	21.20	20.89	12.41	225.93	10.82
Corporate Directorate (B)	Audit and Risk Management	4.36	4.36	4.36	1.00	3.00	0.69
	Customer Services and IT	36.07	34.33	35.20	24.47	360.17	10.23
	Financial Services	17.29	16.49	16.89	7.65	70.77	4.19
	Revenues Services	41.91	37.95	39.93	26.45	248.62	6.23
		1.00	1.00	1.00	0.00		0.00
Service Total:		100.63	94.13	97.38	59.56	682.56	7.01
Corporate Directorate (C)	Housing and Localities	10.42	11.42	10.92	5.11	27.90	2.55
	Leisure and Culture	89.51	84.55	87.03	54.04	728.64	8.37
	Planning and Economic Development	29.22	26.12	27.67	17.95	167.57	6.06
		1.00	1.00	1.00	0.00		0.00
Service Total:		130.15	123.09	126.62	77.09	924.11	7.30
Corporate Directorate (D)	Asset Management	14.99	22.71	18.85	9.41	51.00	2.71
	Parks and Street Care	46.89	47.89	47.39	29.00	798.00	16.84
	Public Protection	26.23	27.42	26.82	11.39	118.02	4.40
	Waste Operations	64.00	58.85	61.43	39.28	1402.06	22.83
		1.00	1.00	1.00	0.00		0.00
Service Total:		153.11	157.88	155.50	89.09	2369.09	15.24
Legal Services	Legal Services	6.50	6.50	6.50	1.50	70.27	10.81
		0.00	0.00	0.00	0.00		0.00
Service Total:		6.50	6.50	6.50	1.50	70.27	10.81
Grand Total:		416.38	407.80	412.09	242.04	4277.69	10.38

Year to date trend

Absence as %	Days lost 1 month ago	Days lost 2 months ago	Days lost 3 months ago	Days lost 4 months ago	Days lost 5 months ago	Days lost 6 months ago
0.44%	1.10	0.91	0.32	0.29	0.31	0.34
0.44%	1.10	0.91	0.32	0.29	0.31	0.34
1.31%	1.08	1.08	0.57	0.60	0.67	0.67
1.82%	4.70	5.14	4.15	4.15	4.66	5.17
7.84%	17.37	15.12	12.87	10.41	8.59	6.56
0.80%	2.00	2.00	0.00	0.00	0.00	0.00
4.34%	9.31	8.51	6.80	5.93	5.40	4.61
0.28%	0.69	0.69	0.69	1.15	1.15	2.06
4.11%	11.24	11.77	11.54	10.46	11.12	9.86
1.68%	6.24	7.11	7.99	8.95	9.78	10.90
2.50%	6.14	6.05	6.46	5.74	6.61	8.40
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
2.81%	7.59	7.89	8.21	7.67	8.42	8.96
1.03%	2.50	1.50	1.32	0.99	0.99	2.57
3.36%	8.36	8.29	8.11	7.75	7.93	7.96
2.43%	6.14	6.80	6.99	7.23	6.50	5.62
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
2.93%	7.29	7.31	7.14	6.98	6.92	6.92
1.09%	2.63	2.44	2.13	2.70	3.10	2.60
6.76%	16.44	16.94	17.10	18.75	19.34	18.51
1.77%	3.99	3.99	3.96	3.46	3.12	2.22
9.17%	23.30	23.60	23.90	23.61	23.16	22.49
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
6.12%	15.26	15.54	15.32	16.07	16.15	15.44
4.34%	10.81	10.81	13.59	11.39	9.41	7.60
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
4.34%	10.81	10.81	13.59	11.39	9.41	7.60
4.17%	10.46	10.60	10.49	10.49	10.65	10.44

Current month's absence data, by service area with six month trend

Days lost per FTE employee; current month: June 2013

Service	Section	Average Fte	No Emps Sick FTE	FTE Days Lost	FTE Days Lost per FTE
Chief Executive		5.00	0.00		0.00
Service Total:		5.00	0.00		0.00
Corporate Directorate (A)	Communications	5.09	1.00	8.99	1.76
	Elections and Members' Services	6.00	0.00		0.00
	Organisational Development	9.11	1.00	20.00	2.20
		1.00	0.00		0.00
Service Total:		21.20	2.00	28.99	1.37
Corporate Directorate (B)	Audit and Risk Management	4.36	0.00		0.00
	Customer Services and IT	34.33	2.39	15.55	0.45
	Financial Services	16.49	0.00		0.00
	Revenues Services	37.78	4.00	9.99	0.26
		1.00	0.00		0.00
Service Total:		93.96	6.39	25.54	0.27
Corporate Directorate (C)	Housing and Localities	11.42	0.50	2.99	0.26
	Leisure and Culture	84.55	8.67	56.69	0.67
	Planning and Economic Development	26.53	1.00	3.00	0.11
		1.00	0.00		0.00
Service Total:		123.50	10.17	62.68	0.51
Corporate Directorate (D)	Asset Management	22.71	1.62	4.59	0.20
	Parks and Street Care	47.89	3.00	30.00	0.63
	Public Protection	27.42	2.00	10.90	0.40
	Waste Operations	59.35	7.43	52.65	0.89
		1.00	0.00		0.00
Service Total:		158.38	14.05	98.14	0.62
Legal Services	Legal Services	6.50	0.00		0.00
Service Total:		6.50	0.00		0.00
Grand Total:		408.54	32.61	215.34	0.53

Current month trend

Current month as %	Days lost 1 month ago	Days lost 2 months ago	Days lost 3 months ago	Days lost 4 months ago	Days lost 5 months ago	Days lost 6 months ago
0.00%	0.19	0.32	0.00	0.00	0.00	0.00
0.00%	0.19	0.32	0.00	0.00	0.00	0.00
8.82%	0.00	0.00	0.00	0.00	0.00	0.00
0.00%	0.00	0.00	0.38	0.00	0.00	0.38
10.98%	2.31	2.42	2.20	2.20	2.36	1.98
0.00%	0.00	2.00	0.00	0.00	0.00	0.00
6.84%	0.97	1.11	1.04	0.93	1.07	0.95
0.00%	0.00	0.00	0.00	0.00	0.00	0.69
2.26%	0.71	1.21	1.72	0.57	1.45	1.34
0.00%	0.13	0.04	0.13	0.13	0.58	1.28
1.32%	0.27	0.14	0.76	0.51	0.21	0.53
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
1.36%	0.38	0.49	0.95	0.44	0.69	0.94
1.31%	0.96	0.00	0.40	0.00	0.00	0.00
3.35%	0.64	0.53	0.77	0.55	0.68	0.71
0.57%	0.05	0.04	0.50	0.96	1.15	1.30
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
2.54%	0.54	0.37	0.67	0.59	0.72	0.77
1.01%	0.69	0.04	0.00	0.25	0.65	0.56
3.13%	0.62	0.80	0.72	0.77	1.66	1.86
1.99%	0.00	0.07	0.46	0.76	0.94	0.19
4.44%	2.00	1.99	1.73	2.24	1.78	1.34
0.00%	0.00	0.00	0.00	0.00	0.00	0.00
3.10%	1.04	1.02	0.96	1.26	1.46	1.19
0.00%	0.00	0.42	1.89	2.16	2.31	2.74
	0.00	0.00	0.00	0.00	0.00	0.00
0.00%	0.00	0.42	1.89	2.16	2.31	2.74
2.64%	0.71	0.69	0.87	0.84	1.03	1.00

Current month's absence data (June 2013), long and short-term absence

Head of Service	Section	No Occurrences Long Term	Total No Occurrences Absent	Long Term FTE Days Lost	Total FTE Days Lost	Long Term as a % of Days Lost	Long Term as a % of Occurrences
Corporate Directorate (A)	Communications	0	1	0.00	8.80	0.00%	0.00%
	Organisational Development	1	1	19.57	19.57	100.00%	100.00%
Head of Service Total:		1	2	19.57	28.36	68.99%	50.00%
Corporate Directorate (B)	Customer Services and IT	0	5	0.00	15.28	0.00%	0.00%
	Revenues Services	0	4	0.00	9.78	0.00%	0.00%
Head of Service Total:		0	9	0.00	25.05	0.00%	0.00%
Corporate Directorate (C)	Housing and Localities	0	1	0.00	2.93	0.00%	0.00%
	Leisure and Culture	2	16	31.27	58.49	53.46%	12.50%
	Planning and Economic Development	0	2	0.00	4.91	0.00%	0.00%
Head of Service Total:		2	19	31.27	66.32	47.15%	10.53%
Corporate Directorate (D)	Asset Management	0	6	0.00	4.86	0.00%	0.00%
	Parks and Street Care	0	4	0.00	29.35	0.00%	0.00%
	Public Protection	0	2	0.00	11.63	0.00%	0.00%
	Waste Operations	0	10	0.00	51.26	0.00%	0.00%
Head of Service Total:		0	22	0.00	97.11	0.00%	0.00%
Grand Total:		3	52	50.84	216.85	23.44%	5.77%



Report to Joint Consultative and Safety Committee

Subject: Minor changes to Establishment agreed by Chair and trade unions outside formal full JCSC process.

Date: 27 August 2013

Author: Service Manager; Organisational Development

1. Purpose of the Report

This is an information item highlighting to the Committee, any minor changes to Establishment agreed by Chair and trade unions outside formal full JCSC process. Such minor changes will not have wide organisational impact and will be authorised for implementation by the Chief Executive under delegated powers.

It is important to note that prior to the minor changes being implemented, trade unions will still need to be consulted locally. Should there ever be concerns raised during this consultation about any proposal made, the matter would be taken out of this "shortened process" and placed before the Joint Consultative Committee for full consideration.

2. Summary of case

The following is a summary of the case that has been considered appropriate for management outside the full JCSC process:

Leisure and Culture

Senior Leadership Team propose to implement a change to the way that we manage the Bonington Theatre in Arnold.

In essence the proposal is to create new posts of full-time Theatre Manager and part-time Theatre Technician. The manager role is entirely new and the technician role was previously undertaken by a contractor who has now retired.

The proposals are being funded by the deletion a number of vacant posts in the current structure including the Operations Manager at Arnold Leisure Centre as well as a part-time Maintenance Operative at Carlton Forum. The two General Managers will pick up the senior management role at the centre in the short to medium term although it is possible that there may be further structural changes in the future.

No posts proposed for deletion are currently occupied. The Chief Executive will have delegated powers to authorise the staffing changes proposed. The re-opening of the theatre is planned to be around the end of September.

Trade unions are supportive of this proposal and there are no adverse effects to current employees contained in the staffing report.

3. Recommendation

The Committee is asked to note this report.