

Report to Joint Consultative and Safety Committee

Subject: Corporate Health and Safety Annual Report 2022/23

Date: 29 August 2023

Author: Health, Safety and Emergency Planning Manager

Wards Affected

Borough wide

Purpose

To present the Corporate Health and Safety Annual report for the year 1st April 2022 to 31st March 2023 to JCSC.

Key Decision

This is not a key decision.

Recommendations

THAT:

The Corporate Health and Safety Annual Report 2022/23 contents be noted.

1 Background

- 1.1 Reporting on H&S performance is considered good practice by the Health and Safety Executive, the Institute of Directors and the Royal Society for the Prevention of Accidents (RoSPA).
- 1.2 This annual report summarises the challenges and achievements of the Health, Safety and Emergency Planning Service during the financial year from 1st April 2022 to 31st March 2023 and presents some of the upcoming work streams for the service in 2023/24.

2.0 Considerations:

- 2.1 The Health, Safety and Emergency Planning service has operated in a state of flux during 2022 with several changes. The Health, Safety and Emergency Planning Officer left GBC in December 2021 and was

replaced, as an interim measure with a secondment arrangement, pending wider review of the service and its future delivery. Bolsover District Council were seconded to provide Health and Safety (H&S) advice and guidance. This commenced in January 2022 with 3 days support provided to GBC alongside an existing, in house, full time temporary H&S Technician post. Initially support from Bolsover was remote but moved to face to face support one day a week from April 2022. This arrangement continued until October 2022.

- 2.2 Due to available resource and the effort necessary to provide the pandemic response delivery, required during 19/20, 20/21 and 21/22 (from February 2020 to end of March 2022), there had been limited proactive Health, Safety, Emergency Planning and Business Continuity management within the Council. With the departure of the temporary H&S Technician in June 2022, the Bolsover team determined that the volume and breadth of work required at GBC was too great for them to continue working part time and remotely. Bolsover did agree to continue to support the Council until alternative arrangements for the function could be finalised and some additional, interim administrative support was provided to Bolsover by the Executive Support team from June to October 2022
- 2.3 Following presentation of a report and supporting business case from Bolsover, SLT took the decision to recruit to two full time in-house posts -a Health, Safety and Emergency Planning Manager (HSEPM) and a Health and Safety Adviser (HSA). These new roles commenced on the 18th October 2022. It had also been agreed that an Emergency Planning Officer, would be provided from Nottinghamshire County Council (NCC) to support GBC for 2.5 days per week with Emergency Planning (EP) and Business Continuity (BC). After 2 rounds of recruitment, NCC have been unable to successfully appoint anyone to the post and at present they are not confident that this level of support can be provided. (Discussed further on page 7, 4.1.)

3.0 **Summary of Health and Safety key performance areas**

- 3.1 Items maintained in 2022/23 have included the quarterly Corporate Health and Safety (CHAS) group meetings to highlight corporate Health and Safety risks in consultation with departmental representatives and Heads of Service. The CHAS briefing notes have been reviewed and simplified to enable managers to digest the contents more easily. A headline overview document is now produced to enable the information to be readily cascaded to employees. Actions identified in the CHAS minutes are presented to SLT quarterly. Responsibility for completion of actions rests with the relevant Head of Service. Following a review of the group, the membership of CHAS does now comprise Heads of Service in order to ensure that the importance of health and safety is recognised at the highest levels of the Council and also greater scrutiny of CHAS actions is

now undertaken through Corporate Management Team. An example of the effectiveness of these new arrangements is the improvement during 2023 of the completion rates for actions that arise from the CHAS meetings.

The CHAS group has been active for several years and the original terms of reference are not readily available. These are now also being reviewed with a view to further increasing its effectiveness.

- 3.2 A programme of workplace inspections commenced in 2022. The inspections consider the physical state of the workplace and identify any areas for improvement required, with a SMART action plan provided. The Civic Centre, Jubilee Depot yard, Leisure Centres and Community Centres received a proactive inspection during 2022/23. A working group has been established to support completion of the Depot inspection action plan to ensure risks are adequately addressed and managed. This group meets monthly to progress actions and has been successful in driving change. The support received from the Waste, Fleet and Depot Manager in driving this change must also be acknowledged.

A plan has been formulated for 2023/24 to continue these inspections and expand scope to include Leisure Pavilions, Temporary Accommodation and Industrial Unit sites with visit intervals varying dependant on complexity of the site and risk presented.

- 3.3 Several procurement projects are required in the coming year including a refresh of Lone Worker devices and Occupational Health.

Lone worker devices are currently provided by Peoplesafe. Work is required to review the types and number of devices required for lone workers. Additionally, a review of current lone working arrangements across the Council is required. Robust procedures must be in place to monitor and manage lone working including the use of a buddy procedure and an escalation procedure. Once existing processes have been reviewed and refreshed, procurement can begin.

Occupational Health provision for both medical and surveillance purposes will be reviewed through a procurement exercise. Health & Safety will work with HR to ensure an appropriate provider is sourced for both parts of the service.

- 3.4 During 2022/23 it was identified that Hand Arm Vibration (HAV) management procedures were not fully embedded. The Control of Vibration at Work regulations have been in place since 2005 and issues have been identified around the control of paper monitoring forms, tool usage information and limitations, the formal recording of measurements and appropriate training for the operatives involved. Potentially this represented a serious risk to the Council.

To address this risk training has been carried out, the monitoring sheet has

been refreshed (including the filing and storage of records) and the process of adding Vibration information onto tools has begun. Reinvestment has been made in the Reactec HAV monitoring system the equipment supplied on a 3 year managed contract. The serviced contract provides peace of mind regarding ongoing maintenance, replacement of faulty items and Reactec supported software updates. A full roll out is expected in due course.

Once fully implemented, the management system for HAVs **must** be maintained. This has been highlighted as a priority for PASC.

- 3.5 Some benchmarking of employee accident statistics has been completed with Bolsover and North East Derbyshire District Councils in 2022. GBC figures are very low compared to these similarly sized councils, indicating there may be an issue with under reporting of accidents. The breakdown of GBC employee accidents for the calendar year is shown at Appendix 1 and is a sum total of 25 for the year. In comparison Bolsover District Council recorded 43 to the end of October only with North East Derbyshire recording 31 in the same period. A comparison chart is provided at Appendix 2.

The Health and Safety team have conducted site visits to PASC and Waste teams to begin to break down possible barriers and open up communications in relation to accident reporting. All managers have also been asked to remind employees about the need to report accidents on AssessNet, (the Council's health and safety software), through the CHAS group.

To enable front line workers to report accidents, incidents and near misses more readily, the Health & Safety team have produced QR code stickers. These will be placed in staff areas within buildings. They will also be displayed in works vehicles. Employees with a data enabled mobile device can connect to the accident reporting portal and make a report directly "at the time" without the need to wait and report via a Supervisor.

Reporting of member of the public accidents remains robust – please see the chart at Appendix 3.

- 3.6 Health and Safety Awareness training has been relaunched with an online presentation available to those with network log in credentials. Face to face sessions have been provided to facilitate this training with frontline workers. In 2023/24, face to face sessions have been scheduled quarterly and advertise through the room booking system.

Training has been maintained for key areas such as First Aid and Water Safety for Park Rangers.

"How to" sessions via Teams, have commenced to support colleagues with

the continued use of AssessNet.

A programme of Health and Safety training will be developed during 2023/24 focussing on broad spectrum topics such as Manual Handling, Ladder usage, Lone Working etc. This will not cover service specific training.

Since being in post late 2022, The Waste, Fleet and Depot Manager has identified gaps in the induction and training regime in place for Waste services.

Health and Safety will aim to support the WFD Manager and Supervisor to develop and deliver a suite of toolbox talks and a robust induction process. To be implemented efficiently and effectively this will be treated as a separate project within the team's work programme. It has been identified by the WFD Manager that capacity will need to be identified within that team to develop the necessary robust induction process. It is an area of risk to the Council if proper processes are not implemented as a priority.

In addition to the need to recognise the importance of training, another potential risk to the Council relates to methods of operation on its glass collection round. Currently the majority of glass collected for recycling, is collected in boxes at the kerbside. These boxes have a 45 litre capacity but this does not limit the weight of items inside them. The boxes can be easily overloaded and stacked higher than the sides of the boxes. This both increases the weight and the possibility of items slipping from the stack and breaking.

Current methods of operation for emptying the boxes takes a loader through a full range of body movement from floor level to above shoulder height. This range of movement can be potentially harmful as the capacity to lift is greatly reduced when loads are held away from the waist. The lifting action involves stooping and twisting movements which adds to the potential hazard when conducting a lift.

The weight of the boxes will vary according to what type of glass is included. A 45 litre box can hold approximately 50 empty bottles weighing 500 grams each. If these are sparkling wine bottles, the weight of each rises to 900 grams. So a full glass recycling box can weigh between 25kg and 45kg.

On the glass collection rounds the task is repetitive and frequent.

It can be seen from the MAC chart at Appendix 4 that such frequent lifting at these weights can be very hazardous. With the higher estimate of weight, the operations are clearly within the purple zone – as noted on the chart, they represent a serious risk of injury and operations must be improved. Harm is likely in the form of manual handling injuries such as

strains or sprains or cuts and abrasions from contact with broken glass.

The noise on the glass round is also hazardous. According to Waste Industry Safety and Health forum data, operatives being exposed to peak levels of 110 decibels and a typical daily dose level of a minimum of 90 decibels. These levels exceed the exposure limit value of 87 decibels.

In order to minimise the risks associated with the manual handling of glass collection boxes, the most effective solution would be to change the method of operation so that glass collection forms part of a mixed recyclables collection in a wheeled bin. This reduces risks from handling and from noise and is a method of operation adopted by a number of councils locally.

This would however reduce income, with a loss of recycling credits for glass collected. It would mean capital outlay was necessary because a new Refuse Collection Vehicle would need to be purchased and new wheeled bins would be necessary for each household within the Borough. It would be appropriate to consider collection via this method prior to when it becomes necessary to replace those vehicles that have reached the end of their useful life.

The future waste strategy for Nottinghamshire in line with the Environment Act 2021 requirements, will influence how to address this issue. The act notes that all recyclable waste streams are to be collected separately unless this is not economically or technically practicable. As an interim measure to mitigate against risk at a lower cost, the WFD Manager has suggested that a rolling replacement of 45 litre boxes with a 38 litre version could be implemented, subject to funding availability. Stipulations could be made and communicated to the public that glass recycling will not be collected unless a lid is used and the box correctly closed. This would reduce overloading of the boxes. This action would require a change to the published Waste and Recycling Policy consulted on in 2022. The WFD Manager will work with the Head of Environment to enable this. The policy additionally states that households can apply for a second glass recycling box and this should be promoted to households known for overloading boxes. The WFD Manager will work with Supervisors to ensure crews identify these locations.

The HSEPM has spoken previously to the WFD Manager regarding the rotation of crews onto the glass round. Rotating different crews onto this round will provide greater periods of rest and repair after exertion. A common statistic related to manual handling notes that for every hour of heavy manual work, the body needs 6 hours to properly repair. Historically glass collection is an unpopular round with crews. Several existing employees have been moved off glass permanently and onto other, wheeled bin collection rounds. The pool of those available to be rotated is quite small.

The WFD Manager reports that rotating crews will not work operationally because each round is mapped differently and when a crew is not familiar with a round, it generates more missed bins and customer service issues. It has been necessary from an operational perspective to employ a crew solely to man the glass collection rounds.

Workers on the glass collection round should be routinely offered physiotherapy and / or sports massage to encourage recovery and repair from any damage incurred during their work. Health and Safety will liaise with HR to see if this can be arranged.

Hearing health surveillance is conducted on the Waste crews and will identify any harm done over time. Hearing protection provided to the crews has been reviewed. The protection must be carefully chosen so as to reduce the hazardous noise but still permit the workers to hear road noise and retain awareness of their working environment.

Specialist assistance has been sought from Arco and a trial is being arranged of attenuating ear defenders. In addition, ear plugs from a different supplier, offering similar attenuation have been identified. A trial has been requested for these items also. Furthermore, the HSEPM will ask the Nottinghamshire Risk Management Group of advisers if their councils collect glass waste separately and if so, what receptacles are used and what PPE is offered to crews.

In order to mitigate against the potential risk to the safety of employees the method of operation for glass collection should be formally reviewed and revised methods of operation implemented that are reasonably practicable.

- 3.7 Health and Safety and Property Services have put considerable time and effort into developing fire procedures for the Civic Centre and ensuring they can be implemented effectively. This included writing a new guidance document, installation of new fire assembly point signs, room checker wallets installed in corridors in each fire zone, checking and providing contents for the folders, issuing guidance for meetings, ensuring training is provided for use of the Evacuation Chair, issuing guidance for Elected Members and briefing this out.

This has been challenging as fire safety legislation requires the building to be confirmed as empty, so far as is reasonably practicable, following an evacuation. This relies on a suite of Fire Wardens (or Room Checkers) but these are not available in the building due to agile working.

The procedures require significant cooperation between managers in each fire zone to ensure a room checker is available.

Several further revisions have been made to the procedure which has caused delays in rolling it out. Work has commenced with Communications to produce a series of short information films to assist with this roll out and

ensure all stakeholders are informed.

3.8 AssessNet has been retained as the Council's Health and Safety software management system for a further 2 years.

A system upgrade has been applied with e-learning courses added to each module to facilitate ease of use. Additionally, there have been changes to increase security during the log in process.

The upgrade has also presented opportunities to further expand utilisation of the system with the introduction of a mobile app. This will enable workers in the field to access risk assessments, log accidents, incidents and hazards, increasing the robustness of Health and Safety arrangements. For these frontline services, it would remove the need to have folders of risk assessments available which have to be reviewed, updated and reprinted – an onerous task. In some cases it is unclear which set of risk assessments teams are working from. Up to date, regularly reviewed risk assessments are a pivotal item looked for by the HSE during investigation.

In order to maximise the opportunity for these efficiencies then it would be necessary to provide each PASC team with a data enabled smartphone or tablet at an estimated total cost of around £2,200 per annum.

The HSEPM will liaise with the PASC Operations Manager to determine the how best this necessary change to some mobile devices might be made within a reasonable timeframe.

Ongoing housekeeping and maintenance is required on the AssessNet system as there are a number of risk assessments for each area that need to be archived e.g.: Covid assessments, one off event assessments. Support has been offered to managers to assist with this. Some of this work has been done by the HSA

Keeping the system up to date with risk assessment reviews remains a challenge. This is part of the ongoing housekeeping and maintenance required.

Templates have been provided by the previous HSEPO but some risk assessments have not been adapted for use by the service that requires them. Users seem reluctant to remove examples provided in the template even where they are not relevant to the task being assessed.

Health and Safety have been looking at ways of simplifying the risk assessment process for lower risk service areas. In the first instance the HSEPM has sat with managers including Legal, Customer Services, Housing and Welfare Manager to review their content and make relevant what is there.

Furthermore, a single team activity risk assessment template has been formulated for lower risk services. This has been trialled by the EGR team and discussed at their team meetings. Although the template still must be adapted to cover the differences between teams, it means that many subjects are covered in one risk assessment. This means fewer risk assessments to communicate, fewer to review and sign off making the management process much simpler.

This new template will be carefully rolled out in due course. As the assessment covers a wide scope of topics, it is vital that adaptations are made. Higher risk activities such as Lone Working will still require their own detailed assessment and associated procedures.

On an annual basis, Heads of Service are asked to complete a statutory declaration to confirm that they understand when risk assessments are to be reviewed, confirm all those overdue for review will be prioritised in the following financial year and they consider risks to be controlled. This is a requirement of the Council's insurer to manage the insurance premium and limit the potential for an insurance claim occurring. During the investigation necessary as part of a claim, if the declarations have not been completed or found to be false, this could result in the insurance being invalidated. The Council would still be responsible for any costs or compensation but with no insurance cover, representing a significant financial risk.

For the financial year 2022/23, the declaration form was simplified for Heads of Service and the declaration satisfactorily completed for the insurance renewal.

- 3.9 The Occupational Health Surveillance process has been subject to a lack of process consistency with 4 changes of system administrator in the past year. The Council is however meeting its legal obligations and duty of care towards employees. For the financial year 2022/23 10 clinics have been delivered or are planned, this is compared to 6 clinics in 2019/20 and 8 clinics in 2020/21. This increase may have resulted from the changes in administration with some catch ups required but the situation will be closely monitored moving forward.

A review of employees requiring Occupational Health Surveillance will be completed in due course. This will likely extend into 2024/25 work

- 3.10 Inclusion to the Employee Protection register remains low. At the end of Quarter 1 2023/24, 5 entries remained on the EPR of which 2 were locations and 3 were people.

A review is scheduled for Quarter 4 of 2023/24 on the EPR process to determine if it is user friendly, remove possible barriers and encourage employees to report potentially violent, abusive or distressing situations

experienced during the course of their duties.

- 3.11 The statement of intent and organisational roles and responsibilities for managing Health and Safety were more clearly defined as part of a Health and Safety policy review. These documents were approved by SLT and circulated to Heads of Service. No comments have been received back.

These two parts of the Health & Safety policy clearly identify where responsibilities lie for the management of Health and Safety and should be reminded to senior managers at regular intervals, to embed the Health and Safety process.

4.0 **Brief Resume of Emergency Planning and Business Continuity work**

- 4.1 The EP and BC workload will remain with the HSEPM and the HSA. NCC have agreed to provide a critical friend role, on an ad-hoc basis, to ensure appropriate plans, policies and guidance are in place and fit for purpose. This will form part of a review of Emergency Plans due to take place in 2023/24. The lack of support with Emergency Planning has been identified as an increased risk on the corporate risk register going into quarter 4 of 2022/23, however steps are being taken to lower the risk through improved control measures including the delivery of business continuity training as detailed below.

- 4.2 Business Continuity training has been conducted with managers and Heads of Service, focussing on the impact and aftermath of a cyber-attack. Additionally a video presentation, produced by Copeland Borough Council on how they were affected by and what they learned from, a major cyber-attack, was shared with managers to keep the topic alive.

A workshop to facilitate Business Continuity Plan writing took place in May. Plans are due to be reviewed by the Corporate Management Team at a meeting on the 30th August. This will look for overlaps in the process and where departments will be required to work together to ensure the recovery of business as usual e.g.: loss of Depot premises.

Findings from the Business Continuity and Emergency Planning audit have been finalised. As expected, this has highlighted areas for improvement and this framework will be closely adhered to as the review of Business Continuity arrangements continued.

This work will involve ensuring Business Continuity Plans are completed by all teams, provision of a Corporate BCP and a review of the BC policy document which lays out how BC will be managed by the Council. This is due to be completed by the end of the year 2023/24.

- 4.3 With regard to the Council's Emergency Plan, contact details are amended on an approximately 6 month basis to ensure they are refreshed as the organisation changes. Some processes detailed within the plan have been

noted to be out of date such as the provision of MTPAS phones and as such a review of the full plan is required. This is due to be completed in the year 2023/24.

5 Proposal

- 5.1 It is proposed that the contents of the Corporate Health and Safety Annual Report 2022/23 above, be noted.

6 Alternative Options

- 6.1 Not to present an annual Health and Safety report, in which case JCSC will not be updated on H&S activity across the Council.

7 Financial Implications

- 7.1 There are no financial implications directly arising from this report. Individual recommendations may incur additional budget requirements but these will be addressed when necessary approvals are required.

8 Legal Implications

- 8.1 The Council must comply with a number of statutory obligations in the Health and Safety at Work etc. Act 1974 and other H&S legislation, Health and Safety Executive Guidance, Approved Codes of Practice and other industry best practice.

9 Equalities Implications

- 9.1 There are no equalities implications directly arising from this report.

10 Carbon Reduction/Environmental Sustainability Implications

- 10.1 There are no carbon reduction/environmental sustainability implications directly arising from this report.

11 Appendices

- 11.1 Appendix 1 – Chart to show the total number of employee accidents from Jan 2022 to Dec 2022

Appendix 2 – Chart to show results from number of accidents reported benchmarking

Appendix 3 – Chart to show Breakdown of reported accidents by person type

Appendix 4 – MAC tool load / weight frequency graph

12 Background Papers

12.1 None identified.

13 Reasons for Recommendations

13.1 To ensure SLT is updated in respect of Health and Safety activity across the Council.

Statutory Officer approval

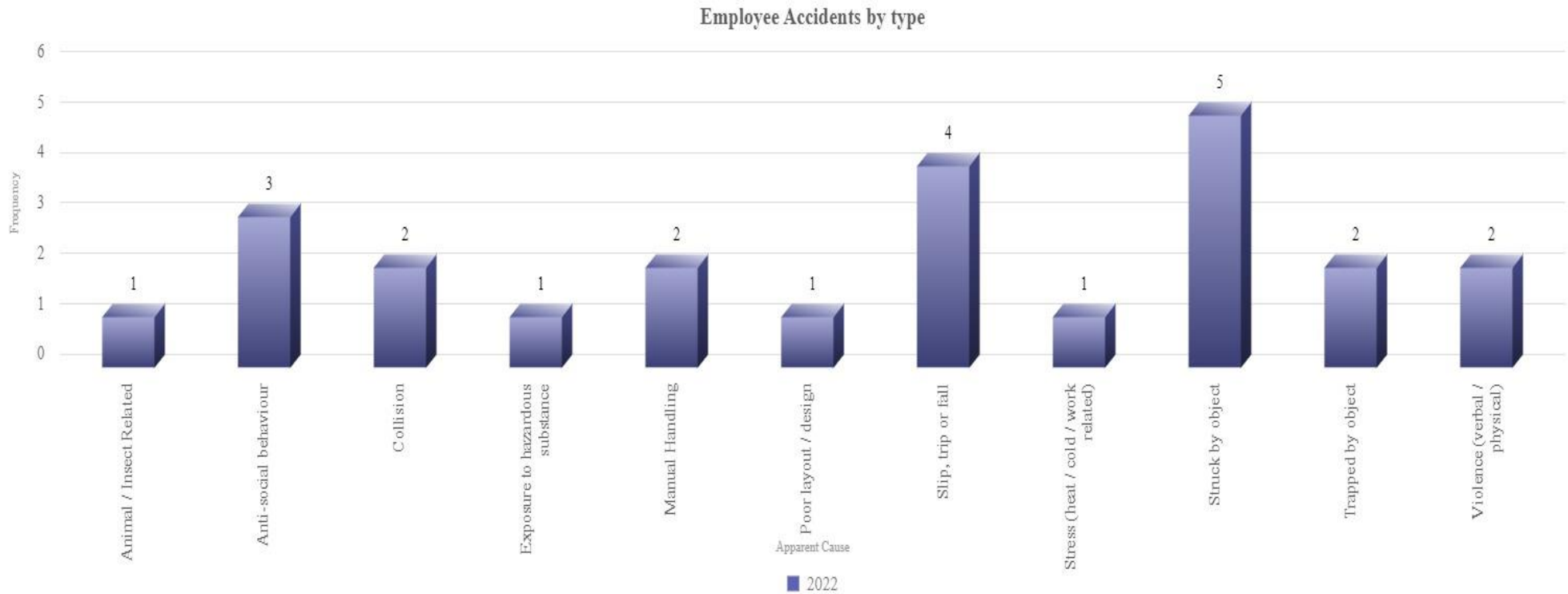
Approved on behalf of the Chief Financial Officer

Date: 16.08.2023

**Approved on behalf of the
Monitoring Officer**

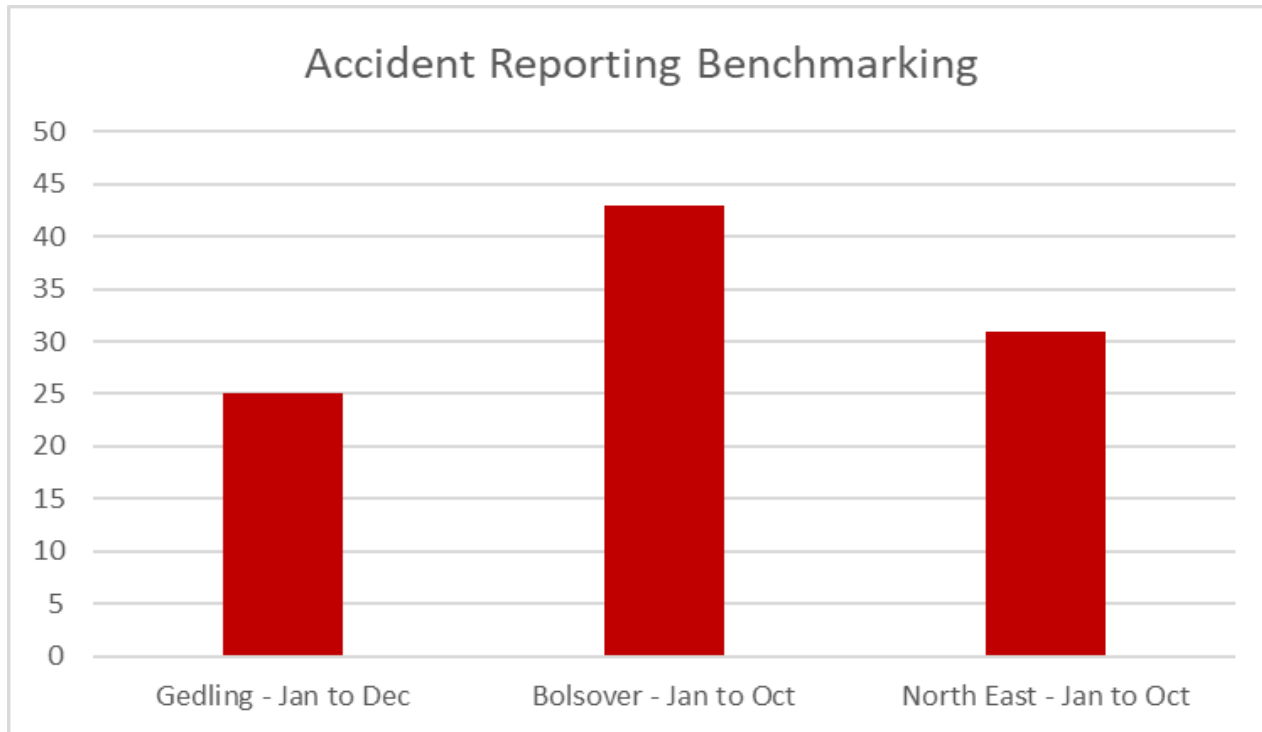
Date: 16.08.2023

Appendix 1 Total number of Employee accidents from Jan 2022 to Dec 2022



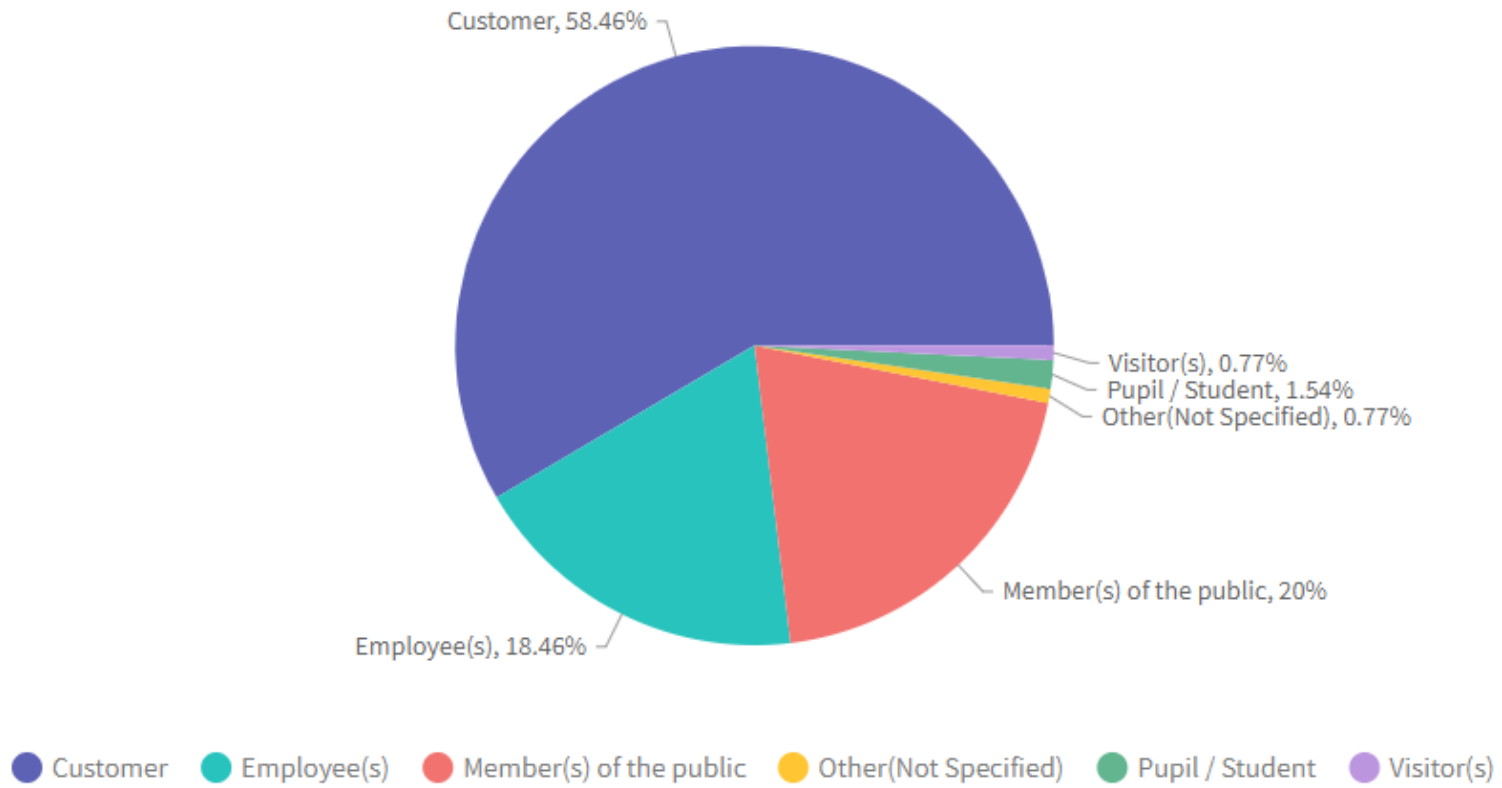
Appendix 2

Chart to show accident reporting benchmarking results.



Appendix 3
Breakdown of reported accidents by person type

Accidents by Person type



Appendix 4

MAC Tool load/weight frequency graph.

A Load weight/frequency

Note the weight of the load and the frequency (or repetition rate) of the lifting operation. Read the risk band from the graph below and enter the colour band and numerical score onto the score sheet.

If the colour band is purple you should examine the task very closely as it may represent a serious risk of injury and must be improved.

Load weight/frequency graph for lifting operations

