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ABERDEEN
CITY COUNCIL

To: Councillor Allan, Convener; Councillor Houghton, Vice Convener; and Councillors Allard, Cameron, Copland, Delaney, Graham, Macdonald and Reynolds.

Trade Union Advisers: Carole Thorpe and Ron Constable (EIS); Mike Middleton and Brenda Murdoch (GMB); Edwin Cameron and Thomas Whyte (SSTA); Kenny Luke and Alison Robertson (UNISON); Joe Craig and Mishelle Gray (UNITE); and Rob Stephen and 1 vacancy (VOICE).

Town House,
ABERDEEN, 24 August 2018

STAFF GOVERNANCE COMMITTEE

The Members of the **STAFF GOVERNANCE COMMITTEE** are requested to meet in **Committee Room 2 - Town House on MONDAY, 3 SEPTEMBER 2018 at 2.00 pm.**

FRASER BELL
CHIEF OFFICER - GOVERNANCE

B U S I N E S S

DETERMINATION OF URGENT BUSINESS

1.1 There are no items at this time

DETERMINATION OF EXEMPT BUSINESS

2.1 Members are requested to determine that any exempt business be considered with the press and public excluded

DECLARATIONS OF INTEREST

3.1 Members are requested to declare any interests (Pages 5 - 6)

REQUESTS FOR DEPUTATION

4.1 None at this time

MINUTE OF PREVIOUS MEETING

5.1 Minute of Previous Meeting of 29 June 2018 - for approval (Pages 7 - 12)

COMMITTEE PLANNER

6.1 Committee Business Planner (Pages 13 - 16)

NOTICES OF MOTION

7.1 None at this time

REFERRALS FROM COUNCIL, COMMITTEES AND SUB COMMITTEES

8.1 None at this time

PARTNERSHIP APPROACH ARRANGEMENTS

9.1 Violence Against Women - Trade Union Request (Pages 17 - 20)

STAFF GOVERNANCE STANDARDS

10.1 There are no reports under this heading

WORKFORCE STRATEGY

11.1 Retention of IIP Gold Accreditation - People and Organisation (Pages 21 - 26)

COUNCIL POLICIES AFFECTING STAFF

12.1 Corporate Health and Safety Policy (Pages 27 - 54)

HEALTH, SAFETY & WELLBEING OF STAFF

13.1 Corporate Health and Safety Improvement Plan (Pages 55 - 62)

13.2 Corporate Health and Safety Quarterly Report - April - June 2018 (Pages 63 - 74)

13.3 Employee Assistance Service Quarterly Report - April - June 2018 (Pages 75 - 84)

13.4 OHP Quarterly report: April - June 2018 (Pages 85 - 92)

ESTABLISHING AND PROMOTING VALUES FOR THE ORGANISATION

14.1 There are no reports under this heading

EMPLOYEE APPEALS AND DISPUTES

15.1 There are no reports under this heading

EXEMPT / CONFIDENTIAL BUSINESS

16.1 There are no reports under this heading

EHRIA's related to reports on this agenda can be viewed at
Equality and Human Rights Impact Assessments

To access the Service Updates for this Committee please use this link.

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Should you require any further information about this agenda, please contact Stephanie Dunsmuir, tel 01224 522503 or email sdunsmuir@aberdeencity.gov.uk

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You must consider at the earliest stage possible whether you have an interest to declare in relation to any matter which is to be considered. You should consider whether reports for meetings raise any issue of declaration of interest. Your declaration of interest must be made under the standing item on the agenda, however if you do identify the need for a declaration of interest only when a particular matter is being discussed then you must declare the interest as soon as you realise it is necessary. The following wording may be helpful for you in making your declaration.

I declare an interest in item (x) for the following reasons ……
For example, I know the applicant / I am a member of the Board of X / I am employed by…
and I will therefore withdraw from the meeting room during any discussion and voting on that item.

OR

I have considered whether I require to declare an interest in item (x) for the following reasons …… however, having applied the objective test, I consider that my interest is so remote / insignificant that it does not require me to remove myself from consideration of the item.

OR

I declare an interest in item (x) for the following reasons …… however I consider that a specific exclusion applies as my interest is as a member of xxxx, which is

(a) a devolved public body as defined in Schedule 3 to the Act;

(b) a public body established by enactment or in pursuance of statutory powers or by the authority of statute or a statutory scheme;

(c) a body with whom there is in force an agreement which has been made in pursuance of Section 19 of the Enterprise and New Towns (Scotland) Act 1990 by Scottish Enterprise or Highlands and Islands Enterprise for the discharge by that body of any of the functions of Scottish Enterprise or, as the case may be, Highlands and Islands Enterprise; or

(d) a body being a company:-

i. established wholly or mainly for the purpose of providing services to the Councillor's local authority; and

ii. which has entered into a contractual arrangement with that local authority for the supply of goods and/or services to that local authority.

OR

I declare an interest in item (x) for the following reasons……and although the body is covered by a specific exclusion, the matter before the Committee is one that is quasi-judicial / regulatory in nature where the body I am a member of:

- is applying for a licence, a consent or an approval
- is making an objection or representation
- has a material interest concerning a licence consent or approval

- is the subject of a statutory order of a regulatory nature made or proposed to be made by the local authority…. and I will therefore withdraw from the meeting room during any discussion and voting on that item.

STAFF GOVERNANCE COMMITTEE

ABERDEEN, 29 June 2018. Minute of Meeting of the STAFF GOVERNANCE COMMITTEE. Present:- Councillor Allan, Convener; Councillor Houghton, Vice-Convener; and Councillors Allard, Cameron, Copland, Delaney, Graham, Macdonald and Reynolds.

Trade Union Advisors present: Mr Ron Constable and Ms Carole Thorpe (EIS); Mr Neil Watson (GMB), Mr Kenny Luke and Mrs Deirdre Macdonald (UNISON), Mr Sid Sandison and Mr Edwin Philpott (SSTA); and Mr Stephen Clunes (UNITE).

The agenda and reports associated with this minute can be found here.

Please note that if any changes are made to this minute at the point of approval, these will be outlined in the subsequent minute and this document will not be retrospectively altered.

ANNOUNCEMENT

1. The Convener welcomed everyone to the meeting and advised that this was the last meeting of the Staff Governance Committee that Sid Sandison, SSTA representative would be attending prior to his retirement. The Convener advised that Thomas Whyte would attend future meetings, thanked Mr Sandison for his contributions and wished him well for his retirement.

The Committee resolved:-
to concur with the remarks of the Convener.

DECLARATIONS OF INTEREST

2. Members were requested to intimate any declarations of interest in respect of the items on today's agenda, thereafter, the following declarations of interest were intimated at this stage in the meeting:-:

(i) The Convener and Councillor Macdonald declared an interest in all items on the agenda by virtue of their membership of Unite the Union but neither felt it necessary to leave during consideration of any items of business.

MINUTE OF PREVIOUS MEETING

3. The Committee had before it the minute of its previous meeting of 4 May 2018.

The Committee resolved:-
to approve the minute as a correct record.

STAFF GOVERNANCE COMMITTEE
29 June 2018

COMMITTEE BUSINESS PLANNER

4. The Committee had before it the committee business planner as prepared by the Chief Officer – Governance.

The Committee resolved:-
(i) to note that items 5 (Directorate Health and Safety Improvement Plan Annual Report) and 9 (Corporate Health and Safety Improvement Plan Annual Report) would be presented at the September meeting following a report to CMT on health and safety arrangements;
(ii) to note that item 15 (Supporting Attendance and Wellbeing Policy) would be reported to Committee in September and would not be held until the Chief Officer – People and Organisation was in post;
(iii) to agree to remove item 21 (Development of Models for Civic Leadership and Engagement);
(iv) to agree to remove items 4 (Review of the Managing Substance Misuse at Work Policy), 6 (Corporate Health and Safety Annual Report 1 April 2017 to 31 March 2018), 7 (Health and Safety Quarterly Report – January to March 2018), 8 (Transgender Employment Provision and Proposed Mental Health Action Plan), 11 (Occupational Health Quarterly Report) and 12 (Occupational Health Annual Report) subject to the decisions to be taken later on today's agenda; and
(v) to otherwise note the planner.

TRANSGENDER EMPLOYMENT PROVISION AND PROPOSED MENTAL HEALTH ACTION PLAN - RES/18/054

5. The Committee had before it a report by the Director of Resources which set out two matters raised by Unison, in terms of 1.3 of the Staff Governance Committee Terms of Reference, namely:-

(1) In respect of the employment provisions the Council had in place in respect of transgender employees; and

(2) In respect of a request for the Council to compile an action plan in relation to mental health and employment, based on robust evidence-based data.

The report recommended:-
that Committee –
(a) notes the employment provisions in place in the Council relating to transgender employees; and
(b) notes the request to produce a mental health action plan based on robust evidence-based data and instructs the Interim Chief Officer, People and

Organisation to gather relevant data and present this to the meeting of the Staff Governance Committee on 1 November 2018 together with any necessary action plan.

The Committee resolved:-
(i) to request that officers discuss with the Organisational Development team how courses offered via the Zone could be promoted to teaching staff who might not access the Zone and would instead use Abernet to undertake professional development; and
(ii) to otherwise approve the recommendations.

REVIEW OF THE MANAGING SUBSTANCE MISUSE POLICY - RES/18/049

6. With reference to article 6 of the minute of its previous meeting, the Committee had before it a report by the Director of Resources which sought approval for a revised Managing Substance Misuse policy. The report advised that the matter had been deferred from the meeting of the Committee of 4 May 2018, to enable further consultation with the trades unions to take place. The further consultation resulted in certain changes being made to the policy document to take account of the views of the trades unions.

The report recommended:-
that Committee approve the revised Managing Substance Misuse Policy.

The Committee resolved:-
(i) to request that officers also look to communicate the revised policy to teaching staff via Abernet and through Toolbox Talks to staff in Operations;
(ii) to note that guidance notes would be prepared to sit alongside the policy and to request that officers include in these that managers take steps to record declarations in respect of prescribed medication;
(iii) to note that a summary of changes sheet would be issued alongside the communication in respect of the revised policy and to request that officers send this to the Trade Unions ahead of wider release; and
(iv) to approve the recommendation.

CORPORATE HEALTH & SAFETY QUARTERLY REPORT - JANUARY TO MARCH 2018 - GOV/18/031

7. The Committee had before it a report by the Chief Officer – Governance which provided a summary of statistical health and safety performance information for the reporting period January to March 2018 to enable the Committee to monitor compliance with health and safety legislation.

STAFF GOVERNANCE COMMITTEE
29 June 2018

The report recommended:-
that Committee –
(a) review, discuss and comment on the issues raised within this report; and
(b) scrutinise and review health, safety and wellbeing policy, performance, trends and improvements.

The Committee resolved:-
to approve the recommendations.

CORPORATE HEALTH AND SAFETY ANNUAL REPORT - 1 APRIL 2017 TO 31 MARCH 2018 - GOV/18/030

8. The Committee had before it a report by the Chief Officer – Governance which provided a summary of statistical health and safety performance information for the reporting period 1 April 2017 to 31 March 2018 to enable the Committee to monitor compliance with health and safety legislation.

The report recommended:-
that Committee review, discuss and comment on the issues raised within this report.

The Committee resolved:-
to note the issues contained in the report.

OCCUPATIONAL HEALTH QUARTERLY REPORT - JANUARY TO MARCH 2018 - GOV/18/033

9. The Committee had before it a report by the Chief Officer – Governance which provided an update on the utilisation of the Occupation Health Service contract provided by OH Assist during the 3 month period January 2018 to March 2018.

The report recommended:-
that Committee –
(a) consider the contents of the report; and
(b) instruct the Chief Officer – Governance to share the information with Functions, request that actions are taken to support individuals and address trends (usage and root causes) as detailed in the report.

The Committee resolved:-
to approve the recommendations.

OCCUPATIONAL HEALTH ANNUAL REPORT - 1 APRIL 2017 TO 31 MARCH 2018 - GOV/18/035

STAFF GOVERNANCE COMMITTEE
29 June 2018

10. The Committee had before it a report by the Chief Officer – Governance which provided an update on the utilisation of the Occupational Health Service contract provided by OH Assist during the last 12 month period of April 2017 to March 2018.

The report recommended:-
that Committee –
(a) considers the contents of the report; and
(b) instructs the Chief Officer - Governance to share the information with Functions, request that actions are taken to support individuals and address trends (usage and root causes) as detailed in the report.

The Committee resolved:-
to approve the recommendations.
- **COUNCILLOR YVONNE ALLAN, Convener**

STAFF GOVERNANCE COMMITTEE
29 June 2018

	A	B	C	D	E	F	G	H	I
1	**STAFF GOVERNANCE COMMITTEE BUSINESS PLANNER** The Business Planner details the reports which have been instructed by the Committee as well as reports which the Functions expect to be submitting for the calendar year.								
2	**Report Title**	**Minute Reference/Committee Decision or Purpose of Report**	**Update**	**Report Author**	**Chief Officer**	**Directorate**	**Terms of Reference**	**Delayed or Recommended for removal or transfer, enter either D, R, or T**	**Explanation if delayed, removed or transferred**
3			**3 September 2018**						
4	Annual Function Health and Safety Reports	To provide oversight of the specific functions health and safety - single function H&S report to be submitted each quarter.			Relevant Director	Relevant Function	5.2	R	Proposals will be developed over the coming months, in consultation with trade unions, on the data to be reported to Staff Governance Committee to help ensure that the committee discharges its role as effectively as possible
5	Corporate Health and Safety Improvement Plan Annual Report	CHSC 25/08/17 - Corporate / Directorate Health and Safety Improvement Plan - (i) That the Corporate & Directorate Health and Safety Improvement Plan Annual Reports would be reported to its meeting in June. SGC 29/06/18 - The Committee noted that the detail in respect of Directorate H&S plans will be incorporated into the report on improvement proposals.	Following the approval of the Annual Corporate Health and Safety Improvement Plan (HSIP), Functions will develop specific HSIP that will be monitored via their related Health and Safety Groups.	Mary Agnew	Governance	Governance	5.2 and 5.3	D	Was delayed from May meeting. Improvement proposals in line with Target Operating Model on agenda
6	Retention of IIP Gold Accreditation - People and Organisation	To provide an update on the IIP Gold Accreditation		Keith Tennant	People and Organisation	Resources	3.1		
7	Violence Against Women Policy	To present a request from a Trade Union in relation to consideration of a policy		Keith Tennant	People and Organisation	Resources	Purpose 1 and Remit 1.3		
8	Corporate Health and Safety Policy	To present the revised Corporate Health and Safety Policy		Mary Agnew	Governance	Governance	4.1, 5.1, 5.2 and 5.3		
9	Corporate Health and Safety Quarterly Report	To present the quarterly health and safety report for April to June 2018 - will include Record of Health & Wellbeing Events as appendix		Mary Agnew	Governance	Governance	5.2 and 5.3		
10	Employee Assistance Scheme Quarterly Report	To present the quarterly employee assistance programme report for April to June 2018		Mary Agnew	Governance	Governance	5.2		
11	Occupational Health Quarterly Report	To present the quarterly occupational health report for April to June 2018		Mary Agnew	Governance	Governance	5.2		

	A	B	C	D	E	F	G	H	I
2	**Report Title**	**Minute Reference/Committee Decision or Purpose of Report**	**Update**	**Report Author**	**Chief Officer**	**Directorate**	**Terms of Reference**	**Delayed or Recommended for removal or transfer, enter either D, R, or T**	**Explanation if delayed, removed or transferred**
12	Supporting Attendance and Wellbeing / Revised Absence Management Policy	To seek approval of a new policy to replace the Maximising Attendance policy.		Keith Tennant	People and Organisation	Resources	4.1	D	Will now be reported in November to allow sufficient time to consult with the Trade Unions, particularly the teaching Trade Unions as a result of the school summer holidays
13			**01 November 2018**						
14	Health and Safety Quarterly Report	To present the quarterly health and safety report - will include Record of Health & Wellbeing Events as appendix		Mary Agnew	Governance	Governance	5.2		
15	Revised Behavioural Framework	The report will either report progress towards a revised behavioural framework for the organisation or will present the framework itself		Dorothy Morrison/ Martin Wyllie	People and Organisation	Resources	6.1	D	Delayed from September 2018 meeting
16	Employee Assistance Programme Quarterly Report	To present the quarterly employee assistance programme report.		Mary Agnew	Governance	Governance	5.2		
17	Travel Policy	To present the revised travel policy for approval	Moved from September 2019 meeting	Carol Smith	Finance	Resources	4.1		
18	Occupational Health Quarterly Report	To present the quarterly occupational health report.		Mary Agnew	Governance	Governance	5.2		
19	Mental Health Action Plan	SGC 29/06/18 - To note the request to produce a mental health action plan based on robust evidence-based data and to instruct the Interim Chief Officer - People and Organisation to gather relevant data and present this to the meeting of the Staff Governance Committee on 1 November 2018 together with any necessary action plan.		Keith Tennant	People and Organisation	Resources	1.3		
20	Risk Register (People and Organisation)	To present the risk register		Morven Spalding	People and Organisation	Resources	GD 7.4		
21	Recruitment and Retention of Lorry Drivers	ODC 29/05/18 - To request that a report be brought to the Staff Governance Committee, to investigate what initiatives could be used to recruit and retain lorry drivers		TBC	Operations and Protective Services	Operations	Purpose 5		

	A	B	C	D	E	F	G	H	I
2	**Report Title**	**Minute Reference/Committee Decision or Purpose of Report**	**Update**	**Report Author**	**Chief Officer**	**Directorate**	**Terms of Reference**	**Delayed or Recommended for removal or transfer, enter either D, R, or T**	**Explanation if delayed, removed or transferred**
22	Annual Function Health and Safety Reports	To provide oversight of the specific functions health and safety - single function H&S report to be submitted each quarter.		TBC	Relevant Director	Relevant Function	5.2	R	Proposals will be developed over the coming months, in consultation with trades unions, on the data to be reported to Staff Governance Committee to help ensure that the committee discharges its role as effectively as possible
23			**31 January 2019**						
24	Absence Update	To update Committee on absence rates for ACC		Neil Yacamini	People and Organisation	Resources	5.3		
25									
26			**18 March 2019**						
27	Health and Safety Quarterly Report	To present the quarterly health and safety report - will include Record of Health & Wellbeing Events as appendix		Mary Agnew	Governance	Governance	5.2		
28	Equal Pay Audit	SGC 04/05/18 - To request that following the equal pay audit report having been considered by the Audit, Risk and Scrutiny Committee that a copy of the report be submitted to a meeting of this Committee for information		Neil Yacamini	People and Organisation	Resources	6		
29	Employee Assistance Scheme Quarterly Report	To present the quarterly employee assistance programme report.		Mary Agnew	Governance	Governance	5.2		
30	Occupational Health Quarterly Report	To present the quarterly occupational health report.		Mary Agnew	Governance	Governance	5.2		
31	Annual Function Health and Safety Reports	To provide oversight of the specific functions health and safety - single function H&S report to be submitted each quarter.			Relevant Director	Relevant Function	5.2	R	Proposals will be developed over the coming months, in consultation with trades unions, on the data to be reported to Staff Governance Committee to help ensure that the committee discharges its role as effectively as possible
32			**April 2019 Onwards**						
33	Annual Committee Effectiveness Report	To present the annual effectiveness report for the Committee.	To be reported May 2019	Stephanie Dunsmuir	Governance	Governance	GD 7.4		
34	Employee Assistance Scheme Annual Report	To present the annual Employee Assistance Programme Annual report	To be reported May 2019	Mary Agnew	Governance	Governance	5.2		

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ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	3 September 2018
REPORT TITLE	Violence against women – Unison request
REPORT NUMBER	RES/18/100
DIRECTOR	Steven Whyte
CHIEF OFFICER	Morven Spalding
REPORT AUTHOR	Keith Tennant
TERMS OF REFERENCE	Purpose of Committee 1 Remit of Committee 1.3

1. PURPOSE OF REPORT

1.1 The purpose of this report is to make Committee aware of a request to the Director of Resources from Unison for the Council to explore the merit of producing an employment policy dealing with the effects of violence against women and for this item to be put on the agenda of the Staff Governance Committee.

2. RECOMMENDATIONS

That the Committee: -

2.1 notes the request from Unison for the Council to explore the merit of producing an employment policy dealing with the effects of violence against women and;

2.2 instructs the Interim Chief Officer - People and Organisation to consider the request, and report back to the Staff Governance Committee by March 2019 on whether such a policy is required; and if so, produce a draft document for consideration.

3. BACKGROUND

3.1 Unison recently asked that the Director of Resources bring a report to the Staff Governance Committee on a request for the Council to explore the merit of producing an employment policy dealing with the effects of violence against women.

3.2 At present the Council does not have an employment policy or guidance on this subject.

3.3 It should be noted that officers in People and Organisation are currently assessing possible participation in the 'Equally Safe at Work' pilot programme.

3.4 'Equally Safe at Work' is part of a Scottish Government and Cosla joint owned strategy for preventing violence against women and girls, 'Equally Safe'. 'Close the Gap', Scotland's national policy and advocacy body working on women's labour market equality, are developing an employer accreditation programme that will address gender inequality and violence against women.

3.5 This programme will be piloted with Councils between January and December 2019; with the pilot comprising around 5-6 Councils. Councils wanting to take part in the pilot, have been asked to register their interest to hear more about what the programme will entail. This Council has registered an interest.

3.6 The pilot programme will involve policy review as well as awareness raising and surveying staff. So, it is likely that if the Council proceeds with involvement in this programme the producing of an employment policy or guidance on the effects of violence against women will be a likely outcome.

3.7 Regardless of whether the Council proceeds with involvement in this programme the Interim Chief Officer, People and Organisation will consider the merits of compiling either a policy or guidance on this subject and arrange for a draft document to be produced, if it is deemed to be required.

4. FINANCIAL IMPLICATIONS

4.1 There are no financial implications arising from the recommendation in this report.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from the recommendation in this report.

6. MANAGEMENT OF RISK

	Risk	**Low (L), Medium (M), High (H)**	**Mitigation**
Financial	There is no financial risk.	N/A	N/A
Legal	There is no legal risk.	N/A	N/A
Employee	There is no risk to employees.	N/A	N/A

Customer	There is no risk to customers.	N/A	N/A
Environment	There is no environmental risk.	N/A	N/A
Technology	There is no technological risk.	N/A	N/A
Reputational	There is no reputational risk to the Council.	N/A	N/A

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	N/A
Prosperous People	N/A
Prosperous Place	N/A
Enabling Technology	N/A

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	N/A
Organisational Design	N/A
Governance	N/A
Workforce	N/A
Process Design	N/A
Technology	N/A
Partnerships and Alliances	N/A

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Not required
Privacy Impact Assessment	Not required
Duty of Due Regard / Fairer Scotland Duty	Not applicable

9. BACKGROUND PAPERS

Equally Safe at Work pamphlet

10. APPENDICES

None

11. REPORT AUTHOR CONTACT DETAILS

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Tel 01224 - 523094

ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	3 September 2018
REPORT TITLE	Retention of Investors in People Gold Accreditation – People and Organisation
REPORT NUMBER	RES/18/144
DIRECTOR	Steven Whyte
CHIEF OFFICER	Morven Spalding
REPORT AUTHOR	Keith Tennant and David Forman
TERMS OF REFERENCE	Purpose of Committee 5 Remit of Committee 3.1

1. PURPOSE OF REPORT

1.1 The purpose of this report is to make Committee aware of the retention of the Investors in People Gold accreditation in People and Organisation.

2. RECOMMENDATIONS

That the Committee:-

2.1 notes the retention of the Investors in People Gold accreditation in People and Organisation; and

2.2 instructs the Interim Chief Officer - People and Organisation, to proceed to assess the content of the feedback report from Investors in People and continue the process of action planning for further improvements.

3. BACKGROUND

3.1 Investors in People (IIP) is a nationally recognised framework that helps organisations, through assessment and action planning, improve their performance and realise their objectives through the effective management and development of their people.

3.2 The former HR Service attained the IIP Gold accreditation in 2015, having formally held the Silver award. An assessment against the standard is undertaken every 3 years to evaluate whether it has been met, with interim assessments held at the end of the first two years.

3.3 The assessment involved interviews with a range of employees in People and Organisation on a one to one and on a group basis. Following this a report was compiled by the assessor detailing findings, decision and whether any enhanced awards had been achieved. It was confirmed in the feedback report to the Council of July 2018 that the accreditation level of Gold had been successfully retained by People and Organisation.

3.4 There are nine standard indicators used to measure organisations against for the Gold award, as below, with these covered in sub sets over the 3-year review cycle:-

- Leading and inspiring people
- Living the organisation's values and behaviours
- Empowering and involving people
- Managing performance
- Recognising and rewarding high performance
- Structuring work
- Building capacity
- Delivering continuous improvement
- Creating sustainable success

3.5 The business benefits of the accreditation can include:

- Connecting people more directly with the organisation's business strategy, particularly in times of change
- Developing a common understanding of the organisation's purpose and individuals' roles in achieving this
- Encouraging flexibility and resilience, through trust and openness
- Creating energy and building commitment, which supports innovation and creativity
- Transferring information and ideas, clearly and concisely, in order to achieve tasks more effectively
- Positively influencing staff morale, improving productivity and the quality of customer service
- Better sharing of knowledge and good practice within the organisation
- Creating a more collaborative and supportive environment which people feel part of and do not want to leave

3.6 It should be noted that IIP now has an extended framework for attaining accreditation beyond the core standard. These levels are measured against hierarchical criteria that progress from what is referred to as 'Developed', 'Established', 'Advanced' and 'High Performing'. The revised framework is more stringent than previously, and this is reflected in the numbers of organisations expected to attain the higher awards. The Gold award is expected to be achieved by just 2% of organisations, which now includes People and Organisation in the Council.

4. FINANCIAL IMPLICATIONS

4.1 There are no financial implications arising from the recommendation in this report.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from the recommendation in this report.

6. MANAGEMENT OF RISK

	Risk	Low (L), Medium (M), High (H)	Mitigation
Financial	There is no financial risk.	N/A	N/A
Legal	There is no legal risk.	N/A	N/A
Employee	There is no risk to employees.	N/A	N/A
Customer	There is no risk to customers.	N/A	N/A
Environment	There is no environmental risk.	N/A	N/A
Technology	There is no technological risk.	N/A	N/A
Reputational	There is no reputational risk to the Council.	N/A	N/A

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	The effective management and development of people is important in maintaining employee morale and engagement. With levels of employee morale and engagement linked to productivity and resource efficiency, having the IIP Gold accreditation in People and Organisation should assist the Council in delivering services as cost effectively as it can. Given the role that the Council plays in fostering an

	environment where the local economy can thrive, having an engaged workforce delivering efficient cost-effective services is a key element of achieving this.
Prosperous People	N/A
Prosperous Place	N/A
Enabling Technology	N/A

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	N/A
Organisational Design	N/A
Governance	N/A
Workforce	Links to the Workforce design principle in that having IIP Gold status in People and Organisation, which will help connect people more closely with the organisation's business strategy, will contribute to the culture the Council is aiming to provide.
Process Design	N/A
Technology	N/A
Partnerships and Alliances	N/A

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Not required
Privacy Impact Assessment	Not required
Duty of Due Regard / Fairer Scotland Duty	Not applicable

9. BACKGROUND PAPERS

IIP Feedback Report for People and Organisation.

10. APPENDICES

None

11. REPORT AUTHOR CONTACT DETAILS

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And

Name	David Forman
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ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	03 September 2018
REPORT TITLE	Corporate Health and Safety Policy
REPORT NUMBER	GOV/18/064
DIRECTOR	N/A
CHIEF OFFICER	Fraser Bell
REPORT AUTHOR	Mary Agnew
TERMS OF REFERENCE	4.1, 5.1, 5.2, 5.3

1. PURPOSE OF REPORT

1.1 This report provides a reviewed Corporate Health and Safety Policy Improvement Plan for consideration by the Committee. This legal requirement provides a framework for how and by who health and safety will be managed within the organisation.

2. RECOMMENDATIONS

That Committee:

2.1 approves the proposed Corporate Health and Safety Policy; and
2.2 agrees that compliance be monitored via health and safety performance reports to Committee.

3. BACKGROUND

3.1 The Corporate Health and Safety Policy has been reviewed to reflect the new organisational structure of Functions and Clusters. The format has been refreshed to provide clearer roles and responsibilities, updated arrangements including a revised health and safety reporting process. It reflects a 'Plan, Do, Check, Act' approach.

3.2 The attached document links to the Local Outcome Improvement Plan (LOIP) outcomes and the related Target Operating Model. The organisation's focus being on the priority areas of service to deliver to ensure; Prosperous Economy; Prosperous People, Prosperous Place and Enabling Technology.

3.3 There is a legal requirement under Regulation 2(3) of the Health and Safety at Work Act etc.1974 to develop and implement a written Health and Safety Policy for the organisation. The document comprises of 3 parts:

a. Policy Statement on health and safety at work sets out the organisations commitment to managing health and safety effectively, and what it wants to achieve;
b. Responsibilities section sets out roles and who is responsible for specific actions; and
c. Arrangements section contains the detail of what we are going to do in practice to achieve the aims set out in our statement of health and safety policy.

3.4 Main changes

3.5 The attached policy has been reviewed to reflect the new Target Operating Model in relation to Functions and Clusters. The context reflects a more systematic approach with less prescriptive detail. This is to enable Functions to shape the health and safety management system while ensuring a consistent approach across the organisation.

3.6 The roles and responsibilities have been refreshed to improve clarity, ownership and accountability and to ensure that Councillors are aware of the critical role that they play in ensuring that health and safety implications of decisions made at the highest level are fully considered. The content is less prescriptive.

3.7 Further clarity has been provided around Premises Responsible Person and the revised remit of the Corporate Health and Safety Lead. The Responsible Person's duties include ensuring that the provisions of the Fire Safety (Scotland) 2005 are complied with.

3.8 Greater emphasis on a Plan, Do, Check, Act approach. This achieves a balance between systems and behavioural aspects of management. It assists in ensuring that health and safety is an integral tool of good management rather than regarded as a stand-alone system.

3.9 The health and safety reporting structure has been revised to reflect new arrangements to ensure that health and safety is considered at all levels and with mechanisms in place for early consideration and address.

3.10 Supplementary guidance that supports the Corporate Health and Safety policy has been produced and refreshed this includes;

i. HS.1.20v2 - Health and Safety Group Consultation Procedure;
ii. HS.1.20.1Fv2 - Function Health and Safety Consultation Groups – Terms of Reference; and
iii. HS 1.20.2F - Health and Safety meeting Agenda template;

3.11 Implementation

3.12 For the Council to succeed in meeting its health and safety objectives, everyone including Councillors, the management team, and each individual employee has a role to play. We continually update and refresh interventions to support a

cultural shift to further improve the health and safety culture. For the policy to be effective a culture which encourages employees to always work safely and to present this safety-first image to colleagues, service users and members of the public is required.

3.13 To ensure legal compliance the Council must promote and maintain health and safety throughout the organisation. Through a sensible, responsible and proportionate risk management via visible leadership and management health and safety performance will be improved. An embedded approach through Plan, Do, Check and Act will assist in a more proactive approach. Raising the standards of competence in relation to health and safety will also be a priority through the use of skills and training matrices and comparison against delivered development.

3.14 Functions will require to develop specific health and safety arrangements which will set out in detail how the aims of the attached policy will be met.

3.15 Implementation of health and safety arrangements will be managed and progress monitored via related performance information presented to the Function Health and Safety Groups and the Staff Governance Committee.

3.16 Health and safety management needs to be embraced in a holistic way: interactions between the working environment, equipment, systems and procedures, and the people in the organisation. Effective risk management depends partly on the behaviour of individuals in an organisation. Poorly designed equipment or operations, poor systems and poor working conditions can all encourage unsafe behaviours, but these behaviours are not inevitable. The organisation's attitudes and values regarding safe working are important factors that influence its approach to work and ultimately its health and safety performance. It is not enough to provide safe equipment, systems and procedures if the culture doesn't encourage healthy and safe working.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct Financial implications arising from the recommendations of this report. By improving the management of health and safety through implementation of the policy this will improve the management of health and safety and in turn the Function / Cluster leading and lagging health and safety performance indicators. This will improve legal compliance which will reduce financial exposure to the Council.

4.2 An effective health and safety management system in which roles and responsibilities are clearly defined will ensure that risks are identified and either eliminated or reduced and will result in a reduction of costs to the organisation.

4.3 There are financial benefits to be gained through reduced absence and related sick leave, reduced insurance premiums and potential legal costs. Studies show that good practice in health and safety makes sound business sense.

5. LEGAL IMPLICATIONS

5.1 The Health and Safety at Work etc Act 1974 requires an employer to ensure the health and safety of their employees and those who may be affected by their undertaking. To comply with its duties, the Council must ensure that its safety management system is robust and reliable. The Council is required to produce a written health and safety policy. It needs to let employees and others know what the organisation's commitment is to health and safety and say who does what, when and how.

5.2 Failure to comply with legislation in ensuring a safe and healthy workplace may result in enforcement action (criminal) by the Health and Safety Executive (HSE). Such a prosecution could be raised against the organisation or senior managers; line managers and/or individual employees where it is found that there has been negligence by an individual (for example, knowingly allowing an unsafe act to continue). Potential penalties for material breaches includes fines, imprisonment and remedial orders in addition a to fee for intervention. There is also the possibility of employee claims (civil) - these are more likely to succeed following a successful HSE prosecution.

5.3 Statistical evidence shows that HSE have been successful in prosecuting 94% of cases brought to court for health and safety breaches. Not only may the Council be liable to pay any fine or damages imposed, they may also be liable for the legal costs involved.

6. MANAGEMENT OF RISK

6.1 The risks with the potential to impact the decision being sought from the Committee are categorised as:

	Risk	**Low (L), Medium (M), High (H)**	**Mitigation**
Financial	The risk is that health and safety policy is not implemented and there is no robust system for the management of health and safety. This could result in an incident or non-compliance. This has the potential to bring a reduction in the overall budget in place to provide service delivery.	M	Legal compliance is achieved through the development and implementation of a Corporate Health and Safety policy. This along with Health and Safety Improvement Plan(s) will assist in the identification of improvement areas and legal compliance.
Legal	There is the risk that required documentation is not in place and that	M	As above.

	any health and safety non-compliance with statutory requirements is investigated by the HSE. Identification of a material breach could result in enforcement action in the form of notices or prosecution.		
Employee	The risk is that without clarity of roles and health and safety arrangements hazards are not risk assessed and controlled there is the potential of incidents resulting in employee injury. This has the potential to temporarily or permanently affect either or both their employment or their life.	M	As above. Clarity of what the organisations commitment is to health and safety including who does what, when and how will ensure a safe and working environment for employees. Robust arrangements will ensure that that the task has been risk assessed; employees are trained, competent and supervised then there should be less likelihood of incidents.
Customer	The risk to our citizens is that we are unable to provide the same level of service delivery due to staff absences from illness and injury sustained during their work. Also there is the possibility of a reduced budget due to the associated financial costs.	M	Ensuring legal statutory compliance through the management system detailed in the Corporate Health and Safety Policy will assist in reducing the number of incidents, reduce the number of absences and the subsequent costs to the Council.
Reputational	Local and National press coverage of any material breaches (lack of required health and safety policy), incident and HSE prosecution can present reputational damage to the organisation.	M	Should be provided by each Function having a robust safety management system in place. This will be reflected in their arrangements to implement the Corporate Health and Safety Policy. There are many facets to this which are important starting from ensuring employees are trained and competent, every hazard is risk assessed and

			up to carrying out investigation of near misses to ensure controls are reviewed to consider whether remedial actions are required.

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	As with any other local authority, Aberdeen City Council has a key role in ensuring a prosperous economy. By ensuring legal compliance and effectively managing health and safety this reduces the likelihood of incidents, related injury and work-related ill health. This in turn means that the Council's and employees contribution to the local economy is not affected through lost resource eg absence, prosecution and associated costs. By taking a proactive approach to health, safety and wellbeing the "public pound" will be used effectively reducing lost resource through direct and indirect costs. Research shows that good health is good for business and better workplaces have better financial results.
Prosperous People	As an organisation the Council considers the health of its workforce to be paramount and a key element in service delivery. This focus is on having an engaged workforce and all the additional benefits associated with this. The workplace is an environment in which most adults spend a substantial proportion of their time. It has the potential to have both positive and negative influences on their health and well-being. Where there are continuing trends of incidents there is the risk that employees become disengaged with the organisation as they feel that there is no concern for their safety. There are many additional strands from disengaged employees: poor customer service, increased absence rates and reduced productivity.

Prosperous Place	The Council promotes the health and well-being of its employees by: creating a safe and healthy workplace and a healthier workforce, which enhances its image and reputation as a good employer. An engaged workforce contributes to the local economy ensuring that resources are spent as intended on the delivery of high quality services. This has a ripple effect in the wider community and links to economic development. Any detrimental effects caused through incidents or poor health of employees impacts on the provision of public services and as such a pro-active approach to the management of health and safety ensure that the "public pound" is used effectively.
Enabling Technology	The implementation of a system to monitor closing out actions will assist in achieving the identified targets. This along with other digital enhancements currently being explored will assist in the management of health and safety within the Council.

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	No impact
Organisational Design	No impact
Governance	Committee support would endorse and show commitment to the effective management of health and safety in the organisation.
Workforce	Approval of the recommendations would assist the Council in improving the current health and safety management system. It would help address the risk of lost resource through for example absence, enforcement action and potential claims. A pro-active approach has the potential to reduce any impact on employees and the wider community; reducing demands on other public-sector organisations.

Process Design	This provides the committee with detail of processes that are in place for stated outcomes in the policy. It provides a framework against which levels of assurance can be measured. This will assist in improving legal compliance and culture within the organisation.
Technology	No impact
Partnerships and Alliances	This allows Trade Unions, elected members and officers to collaborate on potential health and safety arrangements.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Not required
Privacy Impact Assessment	Not required
Children's Rights Impact Assessment/Duty of Due Regard	Not Applicable

9. BACKGROUND PAPERS

N/A

10. APPENDICES

Appendix 1 – Corporate Health and Safety Policy

11. REPORT AUTHOR CONTACT DETAILS

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ABERDEEN
CITY COUNCIL

Health and Safety Policy

(HS.1.0) v3

Version	Committee approval	Date
HS.1.0v3	Staff Governance	

1.0 Introduction

1.1 The purpose of this policy is to set out Aberdeen City Council's arrangements for meeting its responsibilities under the Health and Safety at Work etc Act (HASWA) 1974 and associated statutory provisions.

1.2 This policy describes the occupational health, safety and welfare arrangements for all Council employees and any other persons e.g. contractors, visitors, clients, service users, pupils, members of the public who may be affected by the Council's acts or omissions, work activities and or service delivery.

1.3 The Council recognises that this policy is a legal document and is designed to meet the specific requirement of the HASWA (Section 2 (3)) to prepare and, as often as necessary, revise a written statement of the Council's general policy in respect to health and safety.

1.4 This policy has been developed in consideration of the organisations the priority areas of service to deliver; Prosperous Economy; Prosperous People, Prosperous Place and Enabling Technology.

Local Outcome Improvement Plan Theme	
	Impact of Report
Prosperous Economy	As any other local authority, the Council has a key role in ensuring a prosperous economy. By ensuring legal compliance and effectively managing health and safety this reduces the likelihood of incidents, related injury and work-related ill health. This in turn means that the Council's and employees contribution to the local economy is not affected through lost resource e.g. absence, prosecution and associated costs. By taking a proactive approach to health, safety and wellbeing the "public pound" will be used effectively reducing lost resource through direct and indirect costs. Research shows that good health is good for business and better workplaces have better financial results.
Prosperous People	As an organisation the Council considers the health of its workforce to be paramount and a key element in service delivery. This focus is one key in having an engaged workforce and all the additional benefits associated with this. The workplace is an environment in which most adults spend a substantial fraction of their time. It has the potential to have both positive and negative

	influences on their health and well-being. Where there are continuing trends of incidents there is the risk that employees become disengaged with the organisation as they feel that there is no concern for their safety. There are many additional strands from disengaged employees: poor customer service, increased absence rates and reduced productivity.
Prosperous Place	The Council promotes the health and well-being of employees, creating a safe and healthy workplace and a healthier workforce, which enhances its image and reputation as a good employer. An engaged workforce contributes to the local economy ensuring that resources are spent as intended on the delivery of high quality services. This has a ripple effect on place in the wider community and links to economic development. Any detrimental effects caused through incidents or poor health of employees impacts on the provision of public services and as such a pro-active approach to the management of health and safety ensure that the “public pound” is used effectively.
Enabling Technology	The implementation of a system to monitor closing out actions will assist in achieving the identified targets. This along with other digital enhancements currently being explored will assist in the management of health and safety within the Council.

2.0 Policy Statement

2.1 Aberdeen City Council recognises that health and safety is a fundamental part of both the efficient and effective delivery of quality local government services. Councillors, Chief Executive, Directors, Chief Officers and line managers are committed to making health, safety and wellbeing a high priority in all our activities.

2.2 It is the policy of Aberdeen City Council to take all reasonably practicable steps to ensure the health, safety and welfare of work of all its employees. The Council acknowledges its responsibilities in respect of persons other than its own employees.

2.3 A high standard of health and safety performance is recognised as an integral part of service delivery. This standard will be achieved by:

a. Creating and maintaining a positive health and safety culture which secures the commitment and participation of all employees;

b. Meeting its responsibilities to employees, other people and the environment in a way which recognises that legal requirements are the minimum standard;

c. Engage, communicate and consult with all employees on matters affecting their health, safety and wellbeing;

d. Ensuring that responsibilities of individuals are clearly defined and understood by all;

e. Adopting a planned and systematic approach to ensure, as far as is reasonably practicable: -

i. the provision and maintenance of plant, machinery and systems of work that are safe and without risks to health;

ii. that articles and substances are used, handled, stored and transported safely and are without risks to health;

iii. the provision of such information, instruction, training and supervision as is necessary to ensure the health and safety at work of its employees;

iv. as regards any place of work under the Council's control[1], the maintenance of it in a condition that is safe and without risks to health and the provision and maintenance of a safe means of access and egress;

v. the provision and maintenance of a working environment for employees that is safe, without risks to health, and appropriate as regards facilities and arrangements for their welfare at work;

f. identifying, assessing and providing adequate control of occupational health and safety risks arising from our work activities, ensuring risks are dealt with sensibly, responsibly and proportionately to eliminate or minimise risks;

g. allocate resources to meet requirements of the Council's Health and Safety Policy;

h. planning for health and safety including the setting of realistic short and long terms objectives, deciding priorities and establishing suitable performance standards;

i. monitoring, auditing and reviewing performance on a regular basis to ensure that high standards and maintained;

j. maintaining a system of joint consultation with health and safety representatives and providing them with facilities and assistance to enable them to carry out their functions.

2.4 The above requires the commitment, support and action from everyone working within Aberdeen City Council and is central to the ongoing effective management of health and safety within the organisation.

Signed Date

Angela Scott
Chief Executive
Aberdeen City Council

[1]In the case of non-Council owned premises such as PPP schools and leased premises there will be specific and detailed agreement about the responsibilities which fall within the Council's domain and therefore, which impact on the nominated 'Responsible Person.'

3.0 Responsibilities

3.1 Councillors

3.1.1 Through collective responsibility for providing leadership and direction Councillors have a significant part to play in securing the health and safety of themselves, Council employees and others who may be affected by the Council's activities.

3.1.2 Though not responsible for managing health and safety services on a day-to-day basis, Councillors must understand the impact of strategic decisions they make on operational health and safety. In particular, Councillors will:

a. provide effective and responsible leadership based on a proper understanding of risk, systems in place for managing risk and an appreciation of the causes of health and safety failures;

b. support best practice in managing health and safety so that the Council is seen as an exemplar;

c. ensure that decisions taken when developing Council policies and services reflect the Council's health, safety and wellbeing commitment;

d. ensure that sufficient health and safety resources are available to, at least, meet legislative standards;

e. ensure that principles of sensible risk management are applied so that health and safety risks are tackled sensibly, responsibly and proportionately within the Council's risk management approach; and

f. Scrutinise and consider the overall health and safety performance and trends of Council in relation to legal compliance and against this policy.

3.2 Chief Executive

3.2.1 The Chief Executive is responsible, so far as is reasonably practicable, for ensuring the health, safety and welfare at work of all Council employees and others who may be affected by what the Council does or fails to do. This will be achieved by:-

a. determining the organisational structure in the Council through which the policy will be implemented and delegating the responsibility for implementation of the policy within Functions to each Director and Chief Officer;

b. ensuring that adequate resources are made available to enable the Council policy to be implemented;

c. ensuring that health and safety is an integral part of the overall management culture and developing a positive attitude to health and safety among employees by visibly and actively demonstrating their own commitment to achieving a high standard of health and safety performance;

d. appointing a competent person to assist in applying the provisions of health and safety legislation; and

e. ensuring the establishment and maintenance of health and safety management systems within Functions, which will ensure the assessment of risks and the effective planning, organisation, control, monitoring and review of the preventative and protective measures necessary to control the risks through Plan, Do, Check and Act approach.

f. ensuring effective communication and consultation to foster joint working to enable scrutiny on health and safety performance and a culture of being part of the solution at all levels within the organisation;

3.2.2 Practical day-to-day responsibility for ensuring this policy is put into practice is delegated to line managers in respect of areas under their management control as detailed below:

3.3 Directors and equivalent posts

3.3.1 Directors must, so far as is reasonably practicable, ensure the health, safety and welfare at work of all employees they are responsible for. In particular within their Function(s) they will -

a. Lead by example by visibly and actively demonstrating commitment to achieving a high standard of health and safety performance and developing a positive attitude to health and safety among employees and contractor activities;

b. develop and foster health and safety as an integral part of the organisations general management arrangements;

c. contribute to deciding on priorities and establishing relevant performance standards (leading and lagging) through the achievement of the aims of this policy and the Corporate Health and Safety Improvement Plan;

d. establish the organisation through which the policy will be implemented. This includes nomination of responsible persons for delegated health and safety duties;

e. ensure that arrangements along with related documentation are established, maintained and revised as necessary to ensure this policy is implemented at strategic level thorough to operational delivery ensuring risks are dealt with sensibly, responsibly and proportionately;

f. ensure that adequate resources are made available to meet the requirements of the policy, Health and Safety Improvement Plans and Function arrangements;

g. establish health and safety management systems which will ensure the assessment of risk and the effective planning, organisation, control, monitoring and review of the preventative and protective measures necessary to eliminate or control the risks through Plan, Do, Check and Act approach;

h. establish and ensure arrangements are in place to monitor and review health and safety performance to provide levels of assurance in relation to legal compliance and against this policy and the Corporate Health and Safety Improvement Plan;

i. promote health, safety and wellbeing as a shared employee and management objective with effective two-way communication including consultation with recognised safety representatives;

j. establish systems to ensure compliance with all relevant Council policy, procedures and guidance documents and procedures;

k. prepare reports evaluating health and safety performance for their Function for review by Health and safety Groups and the Staff Governance Committee as required; and

l. inform Councillors and Health and Safety Representatives of health and safety issues, as appropriate.

3.4 Chief Officers

3.4.1 Chief Officers, so far as is reasonably practicable, ensure the health, safety and welfare at work of all employees they are responsible for. In particular within their Cluster they will –

a. visibly and actively demonstrate commitment to achieving a high standard of health and safety performance and develop a positive attitude to health and safety among employees and contractor activities;

b. develop and foster health and safety as an integral part of the organisations general management arrangements;

c. contribute to deciding on priorities and establishing relevant performance standards (leading and lagging) through the achievement of the aims of this policy and the Corporate Health and Safety Improvement Plan;

d. ensure that arrangements along with related documentation are established, maintained and revised as necessary to ensure this policy is implemented at strategic level thorough to operational delivery ensuring risks are dealt with sensibly, responsibly and proportionately; establish the arrangements, including the provision of necessary training to ensure competent employees through which the aims of the policy and Health and Safety Improvement Plans will be met;

e. ensure that adequate resources are made available to meet the requirements of the policy, Health and Safety Improvement Plans and Cluster arrangements;

f. implement health and safety management systems which will ensure the assessment of risk and the effective planning, organisation, control, monitoring and review of the preventative and protective measures necessary to eliminate or control the risks through Plan, Do, Check and Act approach;

g. ensure arrangements are in place to monitor and review health and safety performance to provide levels of assurance in relation to legal compliance and against this policy and the Corporate Health and Safety Improvement Plan;

h. promote health, safety and wellbeing as a shared employee and management objective with effective two-way communication including consultation with recognised safety representatives;

i. nominate responsible persons for delegated health and safety duties in establishments including a Premises Responsible Person;

j. ensure that suitable emergency arrangements are made within their control in the event of fire or other emergency;

k. ensure compliance with all relevant Council policy, procedures and guidance documents and procedures;

l. prepare reports evaluating health and safety performance for their Cluster for review by the health and safety Groups as appropriate; and

m. inform Health and Safety Representatives of health and safety issues, as appropriate.

3.5 Line managers

3.5.1 Through regular contact with employee's line managers can make an important contribution in ensuring so far as is reasonably practicable, the health, safety and welfare at work of all employees they are responsible for. In particular they will:

a. follow the Plan, Do, Check and Act approach to ensure sensible, responsible proportionate approach to the management of health and safety risk;

b. ensure that key occupational health and safety risks related to their service delivery and work tasks are identified, assessed and eliminated, reduced or controlled, including management, of contractors' activities;

c. lead by example and actively support and reinforce safe systems of work while ensuring employees know how to work safely and without risk to their health;

d. lead by example to motivate and empower employees to work in a safe and healthy manner in order to encourage a positive attitude towards health, safety and wellbeing in the workplace;

e. ensure the use and implementation of skills and training matrices to ensure competent employees (through the provision of information, instruction, training and supervision) and their inclusion in job profiles along with health surveillance requirements;

f. allocate sufficient resources for supervision according to complexity and level of risk. Recognise that different levels of supervision may be needed at certain times, for example during shift changeover or where there are young or inexperienced workers;

g. engage and consult with employees on matters affecting their health, safety and wellbeing;

h. ensure effective discussion and communication of health and safety issues and performance at workplace meetings, health and safety consultation groups, and the Staff Governance Committee;

i. ensure effective communication, co-ordination and co-operation where more than one line manager is involved in a process especially regarding health and safety issues within the Cluster and across the organisation;

j. involve employees and safety representatives on the likely risks in their work and the precautions they should take and introduction of any measures that may affect their health and safety.

k. undertake proactive compliance checks on the effectiveness of the health and safety management systems including Workplace Inspections within their related Cluster ensuring that findings are communicated, and corrective action implemented;

l. ensure the provision and maintenance of safe vehicles, plant and equipment and reinforce safe handling, transportation, storage and use of substances;

m. encourage each employee to co-operate in incident and near miss prevention;

n. record and fully investigate incidents and near misses to identify the cause, determine and implement any remedial actions, and identify trends to prevent reoccurrence. Line managers should refer to section 4.11 of this policy for further details on incident recording, investigation and reporting; remedial actions and trends to prevent reoccurrence; and

o. actively monitor and review health and safety performance and identification of trends;

3.6 Premises Responsible Persons

a. A Premises Responsible Person (PRP), who will have sufficient authority and competence to manage health and safety, will be identified for every non-domestic Council premises.

b. The Premises Responsible Person (PRP) will:

i. be the main point of contact for health and safety on the premises and related workplace monitoring, the subsequent actions and checking effectiveness of controls;
ii. ensure effective communication of health and safety risks and associated controls including between occupants from an operational perspective. In the case of a multi-occupied premise agreement must be reached for one Council nominated employee to fulfil this role to co-ordinate and communicate with other Functions and third parties;
iii. ensure suitable emergency arrangements for the premise are in place;
iv. ensure security of the premise and prevent unauthorised access; and
v. operate of permit to work system for contractors undertaking work within the premise and surrounding grounds.

c. The Premises Responsible Person will be the contact person for facilities issues in each establishment/site and will ensure that systems are in place to manage premises risks. These risks will include (but not be limited to):

- Fire
- Asbestos
- Legionella
- Gas
- Relevant notifiable or communicable diseases or infections
- Statutory inspection and maintenance of plant and equipment
- Passenger lift safety

- Control of contractors

d. The Premises Responsible Person will also ensure that regular Health and Safety Inspections are carried out (as required in the Council's Health and Safety Performance Monitoring).

e. The Responsible Person will be provided with and will make themselves available to attend any necessary training to enable them to discharge their duties competently.

f. The Corporate Health and Safety team (Strategy) will support and advise Premises Responsible Persons as necessary.

g. The Premises Responsible Person fulfils an essential role in managing health and safety across Council premises. However, this does not dilute the ultimate health and safety responsibilities of the Chief Executive and the management team described in sections 3.2 and 3.3.

3.7 Chief Officer - Governance

a. The Chief Officer – Governance has been nominated by the Chief Executive to administer the Council's Health and Safety Policy.

b. In the case of non-Council owned premises such as PPP schools and leased premises there will be specific and detailed agreement about the responsibilities which fall within the Council's domain and therefore, which impact on the nominated 'Premises Responsible Person.'

c. The Chief Officer Governance will be advised on health and safety matters by the Corporate Health and Safety Lead who will be the competent person providing assistance within the meaning of Regulation 7 of the Management of Health and Safety at Work Regulations 1999.

3.8 Employees

3.8.1 All employees will be expected to co-operate in the implementation of the Council's Health and Safety Policy by:

a. acting in the course of their employment with due care for their own safety and that of others, who may be affected by their acts or omissions at work;

b. co-operating, so far as is necessary, to enable the Council to perform any duty or to comply with any requirements, as a result of any health and safety legislation which may be in force;

c. using all work items provided by the Council in accordance with the information, training and instructions they receive to enable them to use the items safely;

d. reporting work situations, including incident/near misses and violent incidents or other shortcomings which may present health and safety risks at work to his/her line manager or other appropriate officers without delay;

e. participating in health and safety training provided during the working day or during agreed staff development times. This training may include tutor-led courses, tool box talks, e-learning and all other means of imparting health and safety knowledge;

f. participating in identified health surveillance required in connection to work activities;

g. setting a good example to others, especially young or inexperienced workers and participating in health and safety related workplace discussions and meetings;

3.9 Corporate Health and Safety lead

3.9.1 This role will be the competent person providing assistance within the meaning of Regulation 7 of the Management of Health and Safety at Work Regulations 1999. This will include:

a. Implementation and management of an effective corporate health and safety framework to form part of a wider Assurance Framework for the Council;

b. Develop and put in place corporate health and safety policies and procedures to help ensure that the Council meets its statutory responsibilities and provide support, advice and guidance to services on compliance with these;

c. Ensuring a consistent and informed approach to health and safety risk assessments to help inform decision making across the Council (including at officer level and committee level) through training and guidance;

d. Coordination and delivery of relevant corporate training to services, elected members and stakeholders where required to help promote effective health and safety; and

e. Proactively support Leadership Teams across the Council to comply with the Council's corporate health and safety framework;

3.10 Health and Safety Representatives

3.10.1 This policy uses the term 'Health and Safety Representative' to apply to both appointed and elected representatives, they are responsible for:

a. Promoting a sensible, responsible and proportionate approach to health and safety;

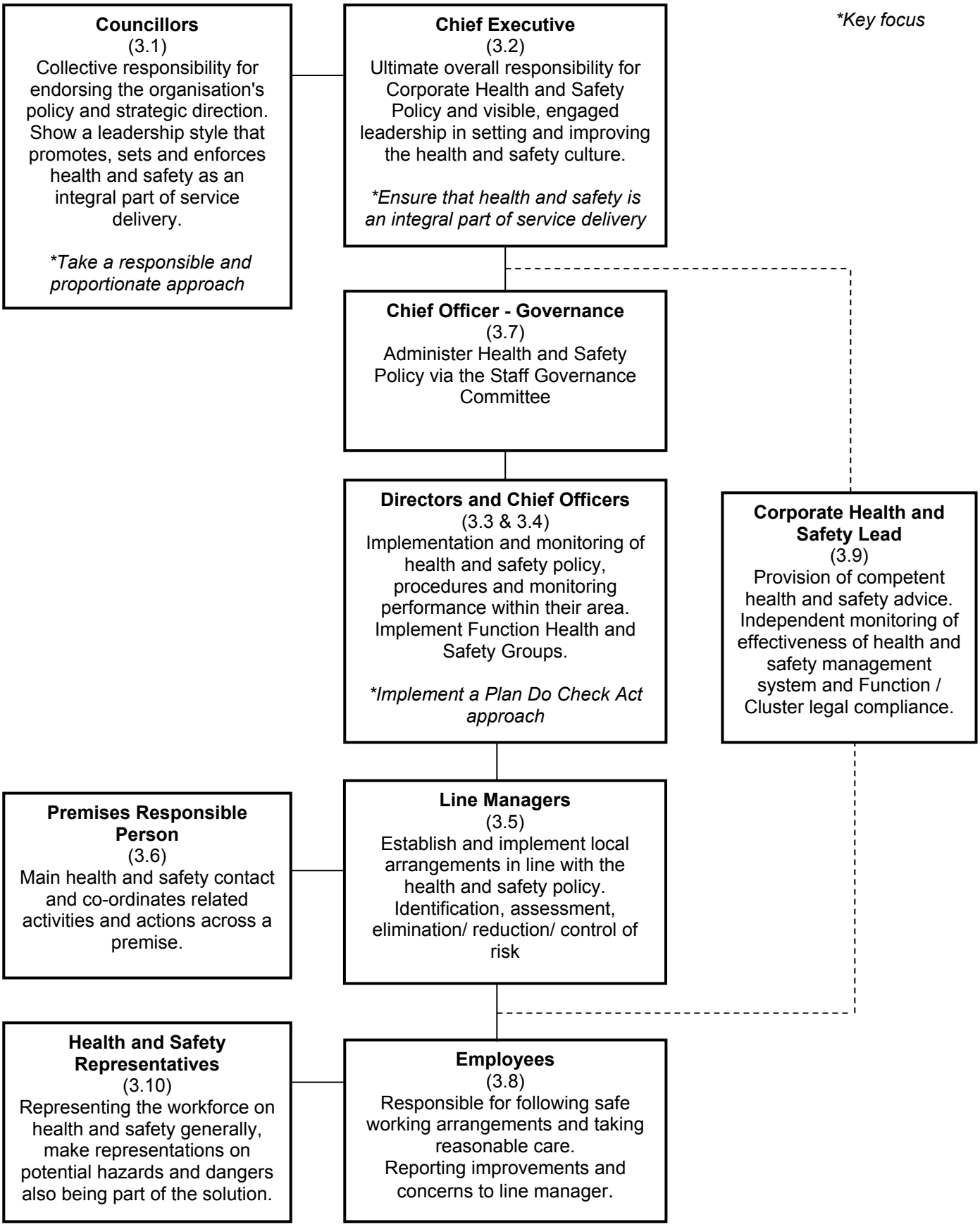
b. Joint working with line managers and employees in "championing" health and safety in the workplace, being part of the solution;

c. Undertaking functions as per the Safety Representatives and Safety Committees Regulations 1977 (as amended) or the Health and Safety (Consultation with Employees) Regulations 1996 (as amended);

d. Independently of line managers, representing the workforce on health and safety generally, or making representations on potential hazards and dangers; and

e. Attending and actively participating at relevant health and safety consultation groups and committees.

3.11 Structure Chart



4.0 Arrangements

4.1 This policy is the over-arching policy for occupational health and safety management within Aberdeen City Council. It is supported by other related policies, procedures and guidance available on the Intranet “the Zone” health and safety pages; and

4.1.1 The undernoted arrangements should be incorporated into the Function arrangements and Health and Safety Improvement Plans (HSIP)as appropriate. Where necessary and following appropriate consultation, they may be expanded or altered to meet specific Function requirements.

4.2 Safety Culture promoting health, safety and wellbeing

4.2.1 The Council will ensure that health, safety and wellbeing is an integral part of the overall management culture and seek to develop a positive attitude among employees by:

a. visibly demonstrating a clear commitment to improving health and safety performance;

b. managing and promoting the mental health of employees;

c. promoting co-operation by recognising that all employees have an important contribution to make towards effective health and safety management and providing opportunities for participation and involvement in health and safety activities e.g. development of safe working practices, health promotion activities;

d. ensuring the communication of necessary information throughout the Council;

e. alerting employees from the start of their employment with the Council the importance of the policy and providing training as necessary during any induction period;

f. ensuring that all employees have sufficient and appropriate health and safety competence to ensure, so far as is reasonably practicable, their health, safety and welfare at work;

g. implement systems which identify health and safety training needs arising from recruitment or changes in employees, procedures, or safe systems of work; and

h. providing an independent, impartial and confidential employee assistance service designed to support employees accessible 24 hours a day, 365 days a year;

4.3 Planning

4.3.1 The Corporate Management Team (CMT) will agree a Corporate Health and Safety Improvement Plan which will outline specific improvement areas. This will be developed following consultation with the Directors, Chief Officers and Health and Safety representatives;

4.3.2 This plan will detail key performance indicators which will be used as a benchmark of the Council's health and safety performance and reviewed on an annual basis;

4.3.3 Any shortcoming will be identified, and a remedial action plan will be developed for agreement outlining short, medium and long-term objectives;

4.3.4 A Plan, Do, Check and Act approach will be taken to achieve a balance between the systems and behavioural aspects of management;

4.3.5 Functions will ensure that health and safety is an integral part of service delivery through the development of health and safety specific arrangements to implement the Health and Safety Policy. Strategic decisions will consider the potential impact on operational service delivery.

4.3.6 Functions will prepare Health, and Safety Improvement Plans outlining specific health and safety objectives and targets (short and long term) developed in consultation with the Health, Safety and Wellbeing team and Trade Unions. These will be evaluated, reported and monitored by the Senior Management Teams (SMT's) and reported to the Staff Governance Committee.

4.3.7 Health and Safety will be a standing agenda item at SMT and CMT meetings. See appendix 1 for the process for raising and dealing with health and safety issues.

4.4 Monitoring

4.4.1 The effectiveness of the Council's Health and Safety policy will be monitored in the following ways:

a. Benchmarking of HSIP's (Function and Corporate) and related action plans;

b. Use of key health and safety performance indicators will be identified and progress towards their achievement will be reported on a regular basis to SMT's and CMT's;

c. Via the review of health and safety performance information (leading and lagging) by health and safety consultation groups, Staff Governance Committee and Audit, Risk and Scrutiny Committee held in line with their terms of reference;

d. Regular and systematic inspections will be undertaken by Directors and Chief Officers to ensure that the requirements of the policy are being met. The outcomes will be reported through the Function Health and Safety Group;

e. A formal audit plan as agreed by CMT will be undertaken by Corporate Health and Safety team. This will include compliance monitoring. Findings will be discussed with SMT's resulting in detailed improvement plans designed to remedy any shortcomings in the health and safety management system; and

f. A system of closing out actions will be implemented for identified actions.

4.5 Risk management

4.5.1 The Council will pursue continuous improvements to lead to a reduction in injury and ill health by the development and implementation of a risk management approach in relation to health and safety;

4.5.2 Risk assessments will be carried out to identify potential hazards, evaluate risks from these and implement control measures. The methodology for undertaking risk assessments is contained in the Council Risk Assessment Procedure;

4.5.3 Identified risks will be dealt with sensibly, proportionately and responsibly in the development and implementation of safe systems of work with adequate control;

4.5.4 Trained employees will be involved in the Risk Assessment process and where necessary supported by the Corporate Health and Safety team (Strategy);

4.5.5 Risk assessment findings and their associated controls will be communicated to the affected employees using appropriate methods of informing, instructing and training. Adequate level of supervision will positively reinforce safe working arrangements; and

4.5.6 The quality of risk assessments and extent to which they have been completed will be under the constant review by Functions and will be monitored by the Corporate Health and Safety team (Strategy) through ongoing enquiry and Health and Safety Audit process.

4.6 Emergency Arrangements

4.6.1 Procedures to be followed by any person at work if situations present serious or imminent danger arise, will be established in accordance with legal requirements. Such procedures will set out the role and responsibilities of competent persons nominated to implement the detailed actions and will ensure that the other employees know who the competent persons are and understand their role. Where appropriate, they will also contain specific action required for the evacuation of disabled persons.

4.7 Fire Safety

4.7.1 The management of fire within Council workplaces will be undertaken in line with corporate policy, procedure and guidance. Each establishment will produce a local Fire Safety Policy and Emergency Fire Action Plan that will ensure arrangements are in place for the maintenance of fire safety measures and any required emergency evacuation; and

4.7.2 The Fire Risk Assessment (FRA) programme will be undertaken by the Corporate Health and Safety team (Strategy) for employee workplaces. There is also a programme for multi-storey buildings. Completed FRA's will be provided to the Premises responsible person and ACC landlord for action and retaining on the premise.

4.8 Vehicles, Plant and Equipment

4.8.1 Functions will ensure that all vehicles, plant and equipment provided for service delivery is suitable, fit for purpose and appropriately inspected, examined, certificated and maintained. Such regimes will reflect risk assessment based on manufacturer's instructions, legislation and Approved Codes of Practice requirements such examples include Lifting Operations and Lifting Equipment Regulations (LOLER) 1998, Provision and Use of Work Equipment Regulations 1998 (PUWER) and Pressure Systems Safety Regulations 2000. Specific risk assessments will be undertaken for those activities that present an occupational risk to health such as Display Screen Equipment (DSE) workstations, vibration and noise;

4.8.2 Arrangements will be made to ensure that defective equipment is taken out of use and remains unavailable until repaired or removed;

4.8.3 Arrangements will be made to provide adequate information, instruction and training to employees to ensure competency in its operation prior to use and at determined suitable frequencies; and

4.8.4 Portable appliance testing, and examination of the fixed electrical installations will be undertaken by competent persons. The frequency will be based on assessment of risk but will normally be annual /biannually for portable appliances and at five-year intervals fixed installations. Informal visual inspections of electrical equipment will be carried out by employees before using equipment.

4.9 Hazardous Substances

4.9.1 Adequate arrangements will be made for the safe use, handling, storage, security and transportation of substances in line with corporate procedure and guidance to prevent injury or ill health due to exposure to hazardous substances;

4.9.2 Corporate and related Function procedures and arrangements will be followed for occupational hazardous substances to health such as asbestos, legionella, gas, lead and ionising radiation;

4.9.3 Corporate infection control guidance and Function arrangements will be followed to reduce the risk of ill health from identified biological hazards such as blood borne viruses and bodily fluids via risk assessment;

4.9.4 Health surveillance will be implemented within workplaces by operational line managers (recorded in Job Profiles) and where appropriate referrals through the Council's occupational health provider; and

4.9.5 The Council operates a policy that so far as is reasonably practicable ensures that a smoke free working environment and surrounding workplace grounds exists for all employees. A complete ban on smoking in all Council wholly or substantially enclosed workplaces will be applied including vehicles.

4.10 Management of Contractors

4.10.1 Commissioning Function will proportionately assess all contractors in terms of health and safety in line with corporate guidance. The contractor's health and safety policy statement, safe system of work and method/ risk assessments, information on past performance e.g. incidents/ near misses/dangerous occurrences, enforcement action,

insurance cover, operatives training and qualifications will be examined through the procurement process by competent persons;

4.10.2 The contractor must be given details of any specific risks such as asbestos. Securing of co-operation, communication arrangements, site security and working arrangements must be discussed with the “Premises Responsible Person” prior to the start of works; and

4.10.3 The related Function will monitor the performance of the contractor health and safety management during the contract, taking action where necessary to ensure the health and safety of persons who may be affected by the work activities.

4.11 Incident Recording, Investigation and Reporting

4.11.1 Employees must inform line managers as soon as is practicable of incidents and instances of near miss (including others affected by our service delivery e.g. members of the public) in the course of their work duties;

4.11.2 Every incident and near miss will be investigated by the employee’s line manager or a line manager who has direct control over the work activity with sufficient competence and authority to action any necessary remedial action to prevent a reoccurrence. A report and investigation record will be recorded on the corporate system as soon as is reasonably practicable, in line with corporate guidelines;

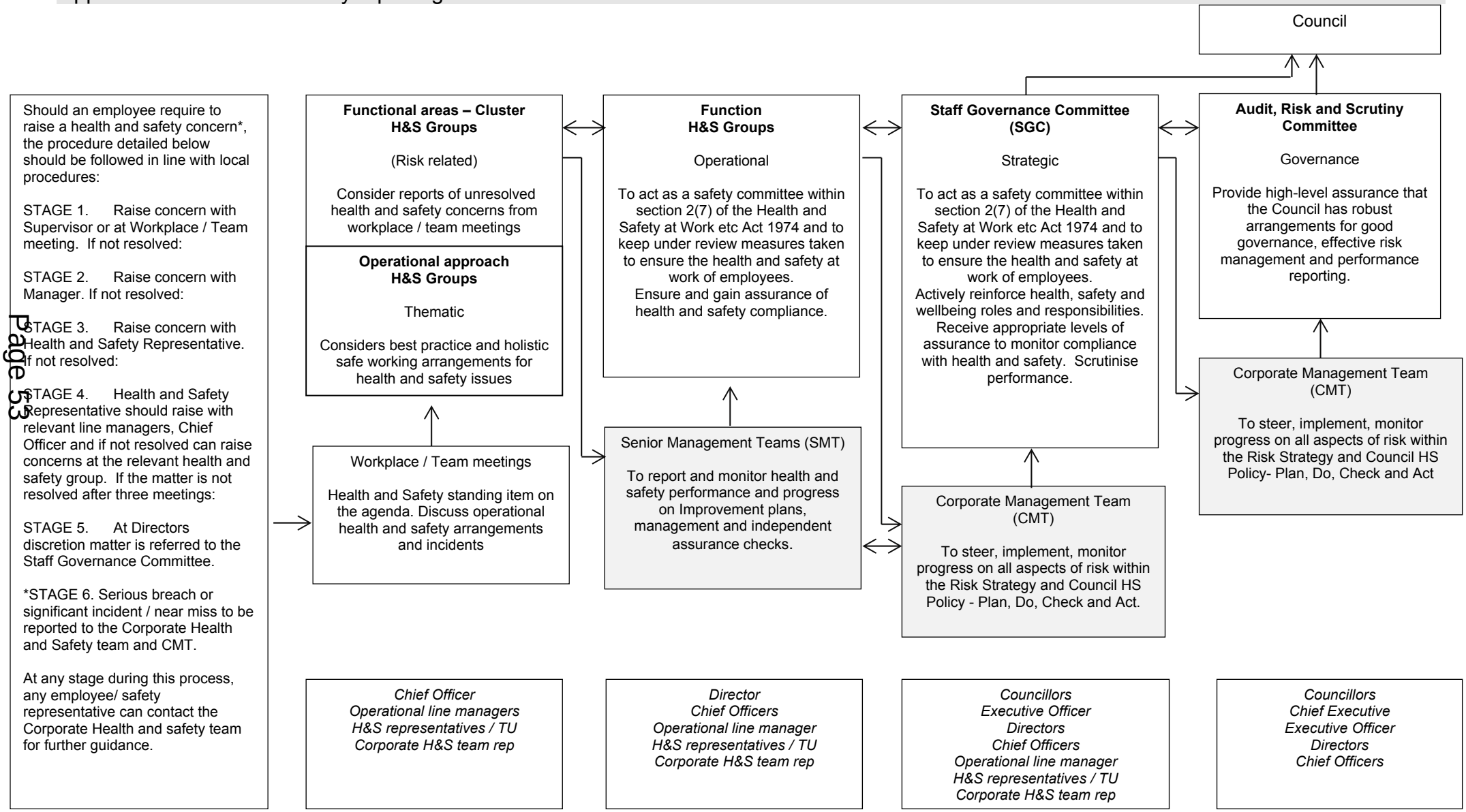
4.11.3 The Corporate Health and Safety team (Strategy) will assist and on occasion carry out a further investigation where considered necessary either by virtue of actual or potential seriousness or frequency of cause;

4.11.4 Every employee who suffers personal injury at work must give notice of any such incident as soon thereafter as is practicable;

4.11.5 Incident and near miss reports and related information will be held by Functions for a minimum of 3 years from the date of the incident or 40 years in the case of work related disease;

4.11.5 The Council will meet its duty to report certain incidents, diseases and dangerous occurrences as required under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013;

Appendix 1- Health and safety reporting structure



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ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	03 September 2018
REPORT TITLE	Corporate Health and Safety Improvement Plan
REPORT NUMBER	GOV/18/068
DIRECTOR	N/A
CHIEF OFFICER	Fraser Bell
REPORT AUTHOR	Mary Agnew
TERMS OF REFERENCE	5.2, 5.3

1. PURPOSE OF REPORT

1.1 This report provides the principles that the Corporate Health and Safety Improvement Plan will be based upon for consideration by the Committee.

2. RECOMMENDATION

2.1 That Committee endorses the proposed principles for the organisation's Corporate Health and Safety Improvement Plan.

3. BACKGROUND

3.1 Corporate and Directorate Health and Safety Plans were previously developed in line with Local Outcome Improvement Plan (LOIP), implemented and presented at the Corporate Health and Safety Committee. Annual review and comparison of health and safety performance against the targets has been limited. This is owing to a combination of the organisation's restructure, changing personnel and difficulty in accessing the related data. To ensure meaningful benchmarking information on improvement areas the targets will be reviewed.

3.2 The aim of the Corporate Health and Safety Improvement Plan is to improve legal compliance, reduce injuries, reduce financial burden (improve use of resources) and enhanced service delivery.

3.3 Design principles and implementation

3.4 With the introduction of the new structure based on the Target Operating Model principles and the focus on the LOIP it is proposed that the Corporate Health and Safety Improvement Plan 2019/20 is implemented from 01 April 2019.

3.5 The previous Corporate Health and Safety Improvement Plan will be reviewed to ensure measurable targets (leading and lagging) linked to the LOIP outcomes, through which accountability and ownership of improvement areas will be managed and monitored ultimately by the Corporate Management Team (CMT) and the Staff Governance Committee. An annual report on performance containing relevant data will be produced for review to provide levels of outcome assurance.

3.6 The Corporate Health and Safety Improvement Plan requires to be supported and regularly reviewed by senior management to ensure resources are made available and target dates met. The Corporate Health and Safety Improvement Plan and any related actions, need to match the plans of the organisation and have Specific, Measurable, Accountable, Realistic, Timely (SMART) targets.

3.7 Sources of information

3.8 The identified improvement areas will be based on a range of health and safety performance metric data from both internal and external sources. When identifying what data to measure, a mindful approach will be taken to avoid 'information overload' and instead focus has been on the priority areas of service delivery; Prosperous Economy; Prosperous People, Prosperous Place and Enabling Technology. Legal compliance is critical to ensure that the organisation meets its statutory requirements under the Health and Safety at Work Act etc.1974 ensuring safe service delivery without risks to the health of employees and any third parties who may be affect by our undertaking.

3.9 The Corporate Health and Safety Improvement Plan will be outcome based and focus on addressing root causes. The core health and safety improvement areas will be evolved to meet the needs of the organisation, other measures may be included on a short-term basis to allow for improvements in a specific identified area. There is an opportunity for these to be addressed via thematic groups reporting to the Cluster / Function Health and Safety Groups to facilitate cross organisation discussion.

3.10 Consideration will be given to the Health and Safety Executive (HSE) - Sector Plan for Health and Safety in Public Services and the improvement areas from the organisation's qualitative and quantitative health and safety performance data. This will include but not be limited to the health and safety culture, incident and near miss trends and investigation, work related absence, and workplace monitoring findings e.g. audits, compliance monitoring and fire risk assessments. Health and wellbeing management information will be considered, such as occupational health and employee counselling statistics. Any HSE contact / intervention locally and nationally will also be considered as part of the gap analysis.

3.11 The Corporate Health and Safety Improvement Plan will include improvement themes with a range of targets and actions that will assist in strengthening the health and safety culture. As an organisation we need to continue to promote

a sensible, proportionate and responsible approach to health and safety while ensuring legal compliance.

3.12 Monitoring

3.13 Discussions have been held on the high-level health and safety metric data information that would be valuable to be included in Function / Cluster related dashboards and scorecards to assist in measuring performance. Linkages to this business data will contribute to determining the achievement of any identified outcomes set out in the Corporate Health and Safety Improvement Plan. More detail would be expected at local level meetings for scrutiny. Business Intelligence will provide such information for Health and Safety Groups and senior management meetings.

3.14 Functions will develop specific Health and Safety Improvement Plans and related actions, these will be managed and monitored via their related Health and Safety Groups. Performance against these plans would be fed back to their related Health and Safety Groups. These will reflect the improvement themes as appropriate to the related Function / Cluster. This will provide an opportunity to improve the organisation's health and safety maturity level.

3.15 Any significant health and safety improvement areas will be captured within the Cluster / Function risk registers for address. Depending on the severity these may require to be escalated to the Corporate Risk Register to prioritise actions to ensure compliance.

3.16 The Corporate Health and Safety Improvement Plan will be kept under review and updated to reflect changing health and safety priorities as required.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct Financial implications arising from the recommendations of this report. By improving performance on those items that will be included in the Health and Safety Improvement Plan (addressing root causes and ensuring the correct processes are followed) this will improve the Function / Cluster leading and lagging health and safety performance indicators. This will improve legal compliance which will reduce financial exposure to the Council.

4.2 An effective health and safety management system in which risks are identified and either eliminated or reduced will result in a reduction of costs to the organisation.

4.3 There are financial benefits to be gained through reduced absence and related sick leave, reduced insurance premiums and potential legal costs. Studies show that good practice in health and safety makes sound business sense.

5. LEGAL IMPLICATIONS

5.1 The Health and Safety at Work etc Act 1974 requires an employer to ensure the health and safety of their employees and those who may be affected by their undertaking. To comply with its duties, the Council must ensure that its safety management system is robust and reliable.

5.2 Failure to comply with legislation in ensuring a safe and healthy workplace may result in enforcement action (criminal) by the Health and Safety Executive (HSE). Such a prosecution could be raised against the organisation or senior managers; line managers and/or individual employees where it is found that there has been negligence by an individual (for example, knowingly allowing an unsafe act to continue). Potential penalties for material breaches includes fines, imprisonment and remedial orders in addition a to fee for intervention. There is also the possibility of employee claims (civil) these are more likely to succeed following a successful HSE prosecution.

5.3 Statistical evidence shows that HSE have been successful in prosecuting 94% of cases brought to court for health and safety breaches. Not only may the Council be liable to pay any fine or damages imposed, they may also be liable for the legal costs involved.

6. MANAGEMENT OF RISK

6.1 The risks with the potential to impact the decision being sought from the Committee are categorised as:

	Risk	**Low (L), Medium (M), High (H)**	**Mitigation**
Financial	The risk is that health and safety is not robustly managed and could result in an incident or non-compliance. This has the potential to bring a reduction in the overall budget in place to provide service delivery.	M	Legal compliance is achieved through the identification and address of improvement areas as will be detailed in the Health and Safety Improvement Plan(s).
Legal	There is the risk that any health and safety non-compliance with statutory requirements is investigated by the HSE. Identification of a material breach could result in enforcement action in the	M	As above.

	form of notices or prosecution.		
Employee	The risk is that if hazards are not risk assessed and controlled there is the potential of incidents resulting in employee injury. This has the potential to temporarily or permanently affect either or both their employment or their life.	M	As above. If the task has been risk assessed; employees are trained, competent and supervised then there should be less likelihood of incidents.
Customer	The risk to our citizens is that we are unable to provide the same level of service delivery due to staff absences from illness and injury sustained during their work. Also there is the possibility of a reduced budget due to the associated financial costs.	M	Ensuring legal statutory compliance and reducing the number of incidents will reduce the number of absences and the subsequent costs to the Council.
Reputational	Local and National press coverage of any incident and HSE prosecution can present reputational damage to the organisation.	M	Should be provided by each Function having a robust safety management system in place. There are many facets to this which are important starting from ensuring employees are trained and competent, every hazard is risk assessed and up to carrying out investigation of near misses to ensure controls are reviewed to consider whether remedial actions are required.

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	As any other local authority, the Council has a key role in ensuring a prosperous economy. By ensuring legal compliance and effectively managing health and safety this reduces the likelihood of incidents, related injury and work-related ill health. This in turn means that the Council's and employees contribution to the local economy is not affected through lost resource eg absence, prosecution and associated costs. By taking a proactive approach to health, safety and wellbeing the "public pound" will be used effectively reducing lost resource through direct and indirect costs. Research shows that good health is good for business and better workplaces have better financial results.
Prosperous People	As an organisation the Council considers the health of its workforce to be paramount and a key element in service delivery. This focus is one key in having an engaged workforce and all the additional benefits associated with this. The workplace is an environment in which most adults spend a substantial fraction of their time. It has the potential to have both positive and negative influences on their health and well-being. Where there are continuing trends of incidents there is the risk that employees become disengaged with the organisation as they feel that there is no concern for their safety. There are many additional strands from disengaged employees: poor customer service, increased absence rates and reduced productivity.
Prosperous Place	The Council promotes the health and well-being of employees, creating a safe and healthy workplace and a healthier workforce, which enhances its image and reputation as a good employer. An engaged workforce contributes to the local economy ensuring that resources are spent as intended on the delivery of high quality services.

	This has a ripple effect on place in the wider community and links to economic development. Any detrimental effects caused through incidents or poor health of employees impacts on the provision of public services and as such a pro-active approach to the management of health and safety ensure that the “public pound” is used effectively.
Enabling Technology	The implementation of a system to monitor closing out actions will assist in achieving the identified targets. This along with other digital enhancements currently being explored will assist in the management of health and safety within the Council.

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	No impact
Organisational Design	No impact
Governance	Committee support would provide a level of assurance that Functions are addressing identified health and safety improvement areas within the organisation. Monitoring of progress via the Committee, CMT and related Function Health and Safety Groups provides ownership and accountability.
Workforce	Approval of the recommendations would assist the Council in improving the current health and safety management system. It would help address the risk of lost resource through for example absence, enforcement action and potential claims. A pro-active approach has the potential to reduce impact on employees and the wider community reducing demands on other public-sector organisations.

Process Design	This can allow the committee to see where processes are failing to address health and safety risks. It provides an opportunity to focus on improvement process areas to improve legal compliance and the health and safety culture of the organisation.
Technology	No impact
Partnerships and Alliances	This allows Trade Unions, elected members and officers to collaborate on potential health and safety improvements.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Not required
Privacy Impact Assessment	Not required
Children's Rights Impact Assessment/Duty of Due Regard	Not Applicable

9. BACKGROUND PAPERS

N/A

10. APPENDICES

N/A

11. REPORT AUTHOR CONTACT DETAILS

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ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	03 September 2018
REPORT TITLE	Corporate Health and Safety April - June 2018
REPORT NUMBER	GOV/18/065
DIRECTOR	N/A
CHIEF OFFICER	Fraser Bell
REPORT AUTHOR	Colin Leaver
TERMS OF REFERENCE	5.2; 5.3

1. PURPOSE OF REPORT

1.1 The report summarises statistical health and safety performance information for the three-month reporting period April – June 2018 to provide the Committee with the opportunity to monitor compliance with health and safety legislation.

2. RECOMMENDATION

It is recommended that the Committee:

2.1 review, discuss and comment on the issues raised within this report; and
2.2 scrutinise and review health, safety and wellbeing policy, performance, trends and improvements.

3. BACKGROUND

3.1 This report contains statistical information on the three-month reporting period (April – June 2018) and a review of health and safety activities for the same period. This reporting period is the first to follow the new interim functional structure approved by Full Council in December 2017. This report does not therefore have comparison figures for the corresponding period as this period was reported under the previous Directorate structure. Future reports will initially be able to report on the previous quarter's reporting period.

3.2 Incidents (April – June 2018)

3.3 An Incident is an unplanned, uncontrolled and/or unintentional event, which causes death, ill health, injury, or other harm.

3.4 The incident reporting and near miss reporting systems are set up to comply with Health and Safety and Employment Laws. The Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) puts

duties on employers, to report certain serious workplace accidents, occupational diseases and specified dangerous occurrences (near misses) to the Health and Safety Executive (HSE). There is also a requirement to report an injury if an employee is incapacitated for more than seven days. There is no longer a requirement to report occupational injuries that result in more than three days of incapacitation, but a record must still be kept of such injuries.

3.5 Incident information:

The following table gives a breakdown of incidents across all Functions in Aberdeen City Council.

	1. RIDDOR Reportable employee (including absences over 7 days)	2. Non-RIDDOR reportable employee (absences of 4 to 7 days)	3. Non-RIDDOR reportable employee (absences of 0 to 3 days)	4. RIDDOR Reportable 3rd party	5. Non-RIDDOR reportable 3rd party
AHSCP	1	-	9	-	10
Commissioning	-	-	-	-	-
Customer	-	-	3	-	3
Governance	-	-	1	-	0
Operations	3	4	101	-	44
Place	-	-	1	-	1
Resources	-	-	-	-	-
Total	4	4	115	-	58

3.6 77 of the total of 123 incidents in the three relevant categories (total of columns 1, 2 and 3 in table) were as a result of physical assault of an employee by a service user. The organisation offers various training modules, depending on the Function, on dealing with challenging behaviours, but these are not mandatory.

3.7 It is not possible to simply look at the available statistics and understand what the root causes were of any one incident or group of incidents. This would require an in-depth study of every incident and this is the line managers' and Clusters' role.

3.8 Employers have a legal obligation to protect their health and safety and that of their workforce. Regulation 3, of the Management of Health and Safety at Work Regulations 1999, requires, among other things, that all employers assess the risks to the health and safety of their employees while they are at work. There is a legal requirement to carry out a review of a risk assessment when "there is reason to suspect that it is no longer valid". One of these reasons would be when there has been a physical injury. To assist in this an investigation would need to be carried out to determine what, if any, of the controls which were in place had not worked as expected; had not been followed in the work practice; or whether a new unidentified risk had become apparent.

3.9 This level of investigation will allow further controls to be put in place to prevent reoccurrence of a similar incident; to better improve the safety management system of the Council this improvement would be shared across the Council to other areas who face the same risks; perhaps by the use of safety alerts through Clusters.

3.10 Reportable employee incidents (April – June 2018)

3.11 During the last three months 4 employees were injured in incidents, which required to be reported to HSE either because of the seriousness of the injury or that it prevented the employee from working for 7 or more days. 2 of these incidents were attributed to moving and handling, 1 employee being assaulted and 1 other.

3.12 Incident (reportable employee) frequency rates

Period – Quarterly	Reportable Incident rate	Reporting period
April – June 2018	**0.59**	2018/19

The above figures are calculated using the formula:

$$\text{Incidence rate} = \frac{\text{RIDDOR injuries per year}}{\text{Employment}} \times 1000$$

3.13 This figure has decreased from 0.87 from the last quarter last year when there was 7 RIDDOR reportable incidents with 4 from this corresponding period. The figure varies every quarter depending on the number of RIDDOR incidents (those which require to be reported to the HSE). The reasons for incidents tend to be similar quarter on quarter where they are incidents which require an employee to be absent from work for a period of more than 7 days.

3.14 Reportable Diseases (April – June 2018)

3.15 There were no diseases reportable under RIDDOR; as was the case in the corresponding reporting period last year.

3.16 Dangerous Occurrence and Dangerous Gas Fittings (April – June 2018)

3.16 There were no dangerous occurrences or reports of dangerous gas fittings in the period April – June 2018.

3.17 Near Miss information (April – June 2018)

3.18 A Near Miss is an unplanned event that did not result in an injury or property damage, but had the potential to do so. Given a slight shift in time or position, damage or injury easily could have occurred.

3.19 Identifying and investigating near-misses is a key element to finding and controlling risks before workers are injured. The information gathered through

near-miss reporting is evaluated to determine root causes and hazard mitigation strategies.

3.20 Many safety activities are reactive, that is, they occur after an injury incident. By reporting near-miss incidents this promotes proactive safety. “Proactive” means raising awareness of potential hazards and mitigation strategies BEFORE an injury occurs. Recognizing and reporting near-miss incidents can significantly improve employee safety and enhance the safety culture.

3.21 The table below shows relevant near miss information for April to June 2018. HSE report that many near misses can become events with more serious consequences. All the events (not just those causing injuries) can represent failures in control, so are potential learning opportunities. HSE’s theory is that for every 189 near misses there will be 7 minor incidents and 1 major incident so identifying the remedial actions at the near miss stage can have a direct effect on the number of incidents a company has.

3.22 Within the information input by the reporting managers 31 near misses involving employees reported by line managers have no identified root cause recorded and 17 were recorded as having no investigation carried out post incident. The reporting line managers reported that there was no risk assessment review carried out in 150 of the 246 occasions where there was a near miss. This review of the risk assessment is an important part in providing assurance that the risks and controls have been identified to prevent other incidents which may result in injury. 121 showed that the level of risk of reoccurrence was unknown; the risk assessment process will identify the likelihood of reoccurrence. Overall the number of near misses reduced on the same period last year.

3.23 A solution to reducing the number of near misses is the same as with incidents: plan; train; organise and control.

3.24 Near Miss information:

	Near Misses Apr - Jun 2018	Employee at risk Apr - Jun 2018	No risk assessment review Apr - Jun- 2018
Total Number of Near Misses	123	83	87
AHSCP	21	11	11
Commissioning	-	-	-
Customer	21	14	14
Governance	0	0	0
Operations	76	56	37
Place	2	1	-
Resources	3	1	1
Total	**246**	**166**	**150**

3.25 Occupational health and wellbeing

3.26 Occupational Health Provider – A report is provided separately for the relevant reporting period. During this period a Wellbeing kiosk was provided in different locations until the end of June to enable employees to have their health statistics assessed. The employee is provided with the results of their session at point of source along with additional health and wellbeing information.

3.27 Employee Assistance Provider – A report is provided separately for the relevant reporting period.

3.28 Enforcement interventions (HSE / SF&R)

3.29 There are occasions where HSE and Scottish Fire and Rescue Services (SFRS) contact Aberdeen City Council to request further information or ask for action to be taken. HSE interventions are usually to request further information on work tasks following a complaint or to investigate a serious incident which has been reported. SFRS interventions usually follow an audit visit they have carried out of Aberdeen City Council properties where they have found fire safety issues.

3.30 During this reporting period there was no HSE intervention or SFRS interventions. There was still an HSE intervention, from the previous reporting period which is still ongoing during this reporting period. However, we have subsequently been advised that this has now been completed and that no material breaches of legislation were discovered. This compares to the corresponding period last year where there were 3 HSE and 1 SFRS interventions.

3.31 Health and safety training

3.32 A selection of training has been delivered over this quarter through the health and safety development programme.

Course – face to face (April - June 2018)	Number of courses	Number attended
First Aid (EFAW) 1 day	13	106
First Aid (FAW) 3 day	4	4
First Aid (FAW) 2 day Requalification	3	3
Evac chair	1	3
Personal resilience	2	22
Personal Wellbeing	5	55

Course – eLearning (April – June 2018)	Number of completions within the period April, May, June 2018
Basic Health and Safety Awareness	71
Asbestos awareness	21
Fire safety awareness	264

Fire warden responsibilities	52
Food hygiene L2 certificate	59
Moving and Handling Module 1- object handling	14
Moving and Handling Module 2 - object handling	9
Moving and Handling Module 3 – People handling	2
STEP – Preventing slips and trips at work	31
Stress Awareness for Managers	38
Display Screen Equipment E-Learning	57

3.33 At this time the organisation is unable to provide a report on the percentage of training completed against the number of employees who have been identified as needing training to be able to do their jobs safely. This involves identifying the compulsory skills and training required for each job role. This has been included as an action in the Directorate health and safety improvement plans.

3.34 Fire risk assessment

3.35 Fire risk assessments are completed on a rolling 5-year programme. A total of 26 fire risk assessments were completed during this reporting period. The overall average compliance score was 86% with the main areas where improvements are needed being housekeeping and limiting spread of fire. This overall compliance figure for the same period last year was 90%. Four fire risk assessments were carried out on multi-storey domestic blocks in this reporting period and the average compliance score was 66%.

3.36 Health and Safety Audits

3.37 The new audit plan and question template started on 1 April 2017. The overall average audit score for this reporting period was 63%.

3.38 The average figure has remained constant over the last four reporting quarters; being between 60% and 66%. There is a need for the remedial actions identified in each audit to be implemented by the auditee. However, it is equally important that the message is shared with other managers within the Cluster to ensure that they are also compliant. This should allow the safety management performance to improve and therefore the average figure to increase as the same issues would not reoccur.

3.39 Compliance Monitoring

3.40 A process of compliance visits has been carried out over the period looking at risk topics such as work at height, premises security, personal protective equipment, driver checks, workplace inspections, etc. The average score was 87% over all topics covered. Again, the lessons need to be implemented and shared to ensure that employees and members of the public's safety is not being endangered. The average score for the same period last year was 84%.

3.41 Health and safety policies and guidance

3.42 There were no policies or procedures reviewed this reporting quarter.

3.43 Work-related absence

3.44 The sections below detail the absence levels for both work-related injury and stress. These figures have not changed in the period.

3.45 Mental health

3.46 The percentage of employees by headcount who were absent for this period reported as being for mental health issues is 1.2%; however, each absence tends to be for longer periods than other absence reasons and this accounts for 0.2 days per employee by headcount. The completion of Quality of Working Life risk assessments by all line managers who have teams or employees who are likely to be pressured in their jobs would be the starting level. This should especially be the case where employees are absent for this reason to potentially prevent others from being similarly affected.

3.47 Physical Injury

3.48 The percentage of employees who are absent following a work-related injury is very low at slightly over 0.15% of the headcount workforce and slightly over 0.012 days per employee.

3.49 The number of absences is mainly related to musculoskeletal injuries. Functions should investigate if there are areas of the jobs where the work involves tasks where musculoskeletal injuries are a risk, which would allow the Council to identify where changes in work method could reduce the risk; such as removing manual handling tasks. This learning could be shared across areas with similar issues.

4 FINANCIAL IMPLICATIONS

4.1 There are no direct Financial implications arising from the recommendations of this report. Analysis of the causes of the incidents, near misses and work-related absences and resultant improvements to prevent, where possible, reoccurrences, can reduce the financial exposure to the Council.

4.2 An effective health and safety management system in which risks are identified and either eliminated or reduced will result in a reduction of costs to the organisation.

5 LEGAL IMPLICATIONS

5.1 The Health and Safety at Work etc Act 1974 requires an employer to ensure the health and safety of their employees and those who may be affected by their undertaking. To comply with its duties, the Council must ensure that its safety management system is robust and reliable. Where an incident is of

sufficient seriousness there is the potential that the Health and Safety Executive (HSE) will become involved and carry out their own investigation into the circumstances of the incident. Any HSE investigation could result in prosecution of the organisation. There is also the risk that prosecution could be raised against the senior managers; line managers and in some cases individual employees if it is ascertained that the individual has been negligent, (for example, knowingly allowing an unsafe act to continue).

5.2 Statistical evidence shows that HSE have been successful in prosecuting 94% of cases brought to court for health and safety breaches. Not only may the Council be liable to pay any fine or damages imposed, they may also be liable for the legal costs involved. Experience shows that civil claims are usually delayed until the criminal HSE investigation and court case are concluded.

6 MANAGEMENT OF RISK

	Risk	**Low (L), Medium (M), High (H)**	**Mitigation**
Financial	The risk is that any incident has the potential to bring a reduction in the overall budget in place to provide service delivery.	M	All tasks are risk assessed and the controls implemented and supervised by line managers. All employees are trained to a level where they are competent to carry out the work
Legal	There is the risk that any injury or serious health and safety incident could result in focus from the Health and Safety Executive which could result in enforcement action in the form of notices or prosecution.	M	As above.
Employee	The risk is that any health and safety incident can lead to an injury to an employee which could have the potential to temporarily or permanently affect either	M	As above. If the task has been risk assessed; employees are trained, competent and supervised then there should be less likelihood of incidents.

	or both their employment or their life.		
Customer	The risk to our citizens is that we are unable to provide the same level of service delivery due to staff absences from illness and injury sustained during their work. Also there is the possibility of a reduced budget due to the associated financial costs.	M	Reducing the number of incidents will reduce the number of absences and the subsequent costs to the Council.
Reputational	Local and National press coverage of any incident can present reputational damage to the organisation.	M	Should be provided by each Function having a robust safety management system in place. There are many facets to this which are important starting from ensuring employees are trained and competent, every hazard is risk assessed and up to carrying out investigation of near misses to ensure controls are reviewed to consider whether remedial actions are required.

7 OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	Local Authorities play a key role in local economic growth, e.g. investment in local infrastructure. Any detriment to this investment would have a detrimental effect on this investment. Therefore any financial burden placed on the organisation in the form of legal costs and punishment; staff absence which affects service provision can lead to a lesser level of funding for investment. The aim should be to be an organisation who considers the health and safety of its workforce to be paramount and a key element in service delivery. This focus is one key in having an engaged workforce and all the additional

	benefits associated with this; it will also reduce the likelihood of legal challenges and their associated costs.
Prosperous People	The workplace is an environment in which most adults spend a substantial fraction of their time. It has the potential to have both positive and negative influences on their health and well-being. Where there are continuing trends of incidents there is the risk that employees become disengaged with the organisation as they feel that there is no concern for their safety. There are many additional strands from disengaged employees: poor customer service, increased absence rates and reduced productivity.
Prosperous Place	An engaged workforce is best-placed to provide good service delivery to the residents of the City. Any financial penalties imposed by poor health and safety practices impacts on the provision of public services, especially in an environment of reducing budgets. The provision of good service to the residents would result in good public opinion, which would benefit the City, which can extend outwardly to visitors and businesses seeking to inwardly invest.
Enabling Technology	Each Function conducting an exercise where they conduct a skills and training analysis of their workforce with the results populating a skills and training matrix would benefit the organisation and give assurance that they have a workforce who have the competence levels to continue to provide Services in a safe manner. The current electronic reporting system can be utilised to assess where trends are apparent and resource placed there to improve safety management systems.

Design Principles of Target Operating Model	
	Impact of Report
Governance	This report gives the committee the opportunity to gain assurance that the Functions are managing health and safety effectively. This can be done by scrutinising the level of incidents as a trend and being allowed the opportunity to question relevant managers. Figures on audits, compliance monitoring and training which will allow the committee to gauge the effectiveness and suitability of the safety management system.
Workforce	The report gives the committee the opportunity to improve the health and safety management system, which would in turn reduce the risks to employees of being involved in an incident.
Process Design	This can allow the committee to identify where processes are failing to address safety risks.
Partnerships and Alliances	The report to committee allows Trade Unions, elected members and officers to collaborate on potential improvements to the Council's health and safety arrangements.

8 IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	EHRIA not required
Privacy Impact Assessment	Not required
Children's Rights Impact Assessment/Duty of Due Regard	Not applicable

9 BACKGROUND PAPERS

N/A

10 APPENDICES

N/A

11 REPORT AUTHOR CONTACT DETAILS

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ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	03 September 2018
REPORT TITLE	Employee Assistance Service April – June 2018
REPORT NUMBER	GOV/18/066
DIRECTOR	N/A
CHIEF OFFICER	Fraser Bell, Chief Officer, Governance
REPORT AUTHOR	Mary Agnew
TERMS OF REFERENCE	5.2

1. PURPOSE OF REPORT

1.1 This report updates the Committee on utilisation of the Employee Assistance Service (EAS) provided by Time for Talking during the 3 month period April – June 2018.

2. RECOMMENDATION

2.1 That Committee considers the contents of the report.

3. BACKGROUND

3.1 Following a joint tender evaluation process with Aberdeenshire Council, Therapeutic Counselling Services Ltd. (Time for Talking) were awarded the Employee Assistance Service (EAS) contract. The new contract commenced on 01 January 2017 and is for duration of 3 years with the option of extending for a further period of up to 24 months.

3.2 This report contains utilisation information on the 3 month reporting period (April – June 2018). The provided information reflects the revised Function structure. This report therefore has limited comparison figures for the corresponding period reported under the previous Directorate structure.

Utilisation (April – June 2018)

3.3 A total of 39 referrals were made during April to June 2018, 38 from employees and 1 from a family member. The overall figure is similar to the last reporting period of 38. There was a higher number of referrals relating to Personal Issues (29) compared to Work Related Issues (10) the same trend as the last reporting period. The greatest number of referrals was 23 from Operations, this includes Integrated Children's and Family Services and Operations and Protective Services. In comparison to the previous reporting period Education

and Children's Services (19) and Communities, Housing & Infrastructure (10) had a combined total of referrals of 29.

3.3.1 Of the personal issues 20 out of 29 relate to Personal Stress/Depression/Anxiety/Anger. This accounts for 69% of the personal issue referrals; this is higher than the last reporting period of 45%. Of the Work Related Issues all 10 referrals related to Demands (Workload/ Stress/Anxiety). This figure is similar to the previous reporting period of 11.

3.3.2 The greatest percentage 1.09% of Staff usage came from Customer.

3.3.3 Overall the provided utilisation information shows similar trends to the last reporting period with the related services, albeit in the new Function structure. Work Related Issues remain similar for Demands (Workload/ Stress/Anxiety) and are the only category referenced.

3.4 A person can experience excessive pressure and demands outside work just as much as they can at work. Stress tends to build up over time because of a combination of factors that may not all be work related. Conflicting demands of work and home can cause excessive stress. Problems outside work can affect a person's ability to perform effectively at work. Stressors at home can affect those at work and vice versa. The "adverse reaction people have to excessive pressures or other types of demand placed on them" can seriously undermine the quality of people's working lives and, in turn, the effectiveness of the workplace.

Functions	**Number of Staff within Service**	**% of Staff usage**	**Number of referrals**	**Personal Issues**	Health/Bereavement	Addiction/Abuse	Relationship/Family Issues	Personal Stress/Depression/Anxiety/Anger	Traumatic Incident	**Work Related Issues**	**Change** (Organisational/redundancy)	**Demands** (Workload/Stress/Anxiety)	**Relationships** (with colleagues)	**Relationships** with manager (Bullying Harassment)	**Role** (Understanding of)	**Support** (discipline & grievance)	**Control**
Commissioning	101	0.99	**1**		0	0	0	0	0		0	1	0	0	0	0	0
Customer	1189	1.09	**13**		1	0	1	7	0		0	4	0	0	0	0	0
Operations	5151	0.45	**23**		5	0	2	12	0		0	4	0	0	0	0	0
Resources	327	0.31	**1**		0	0	0	0	0		0	1	0	0	0	0	0
Governance	81	0.00	**0**		0	0	0	0	0		0	0	0	0	0	0	0
Place	156	0.00	**0**		0	0	0	0	0		0	0	0	0	0	0	0
Foster Carers	0	0.00	**0**		0	0	0	0	0		0	0	0	0	0	0	0
Elected Members	0	0.00	**0**		0	0	0	0	0		0	0	0	0	0	0	0
Family Member	0	0.00	**1**		0	0	0	1	0		0	0	0	0	0	0	0
Total Number of Referrals/C'ling	**7005**	**2.83578**	**39**	**0**	**6**	**0**	**3**	**20**	**0**	**0**	**0**	**10**	**0**	**0**	**0**	**0**	**0**

3.5 The numbers of referrals for the same reporting period (April - June) are higher than last year:

- April – June 2015 20
- April – June 2016 41
- April – June 2017 30

- April – June 2018 39

3.6 The percentage of the Council's workforce that used the service is detailed below, along with similar sized local authorities' industry averages for comparison for the reporting period:

Council A – Aberdeen City Council	0.56%
Council B	0.32%
Council C	0.47%
Council D	0.69%

3.7 It is encouraging that both full-time (38) and part-time (1) employees are using the service. Female utilisation has decreased (26 from 29) with male utilisation increased (13 from 9) in the last reporting period. The majority of employees are at work (26) compared to those absent from work (12) when receiving support. One family member has used the service.

	Demographics	Male	Female	Full Time	Part Time		Currently at work	Absent from work
Commissioning		0	1	1	0		1	0
Customer		7	6	13	0		10	3
Operations		5	18	22	1		14	9
Resources		1	0	1	0		1	0
Governance		0	0	0	0		0	0
Place		0	0	0	0		0	0
Foster Carers		0	0	0	0		0	0
Elected Members		0	0	0	0		0	0
Family Member***		0	1	0	0		0	0
		13	**26**	**37**	**1**		**26**	**12**

***Family member not included in Full / Part Time or at Work / Absent at work categories

3.8 All referrals made in this reporting period were self-referrals. The assistance provided was mainly via face to face counselling (25) with a small number of telephone counselling (4). During the reporting period 3 employees were given additional sessions. A total of 7 additional sessions were given. Employees were made aware of the service via a range of means as detailed in the table below.

	Assistance Provided	Helpline/Advice Only	No contact from client	Telephone Counselling	Face to face counselling	CBT Counselling Sessions	Live Zilla Counseling sessions	Type of Referral	Management Referral	Self Referral		How Employees heard about Service	Website/Posters/Leaflets	Managers	Colleagues	HR	Wallet Cards
Commissioning		0	0	0	1	0	0		0	1			**1**	**6**	**11**	**21**	**0**
Customer		0	1	0	12	0	0		0	13							
Operations		2	6	3	12	0	0		0	23							
Resources		0	1	0	0	0	0		0	1							
Governance		0	0	0	0	0	0		0	0							
Place		0	0	0	0	0	0		0	0							
Foster Carers		0	0	0	0	0	0		0	0							
Elected Members		0	0	0	0	0	0		0	0							
Family Member		0	0	1	0	0	0		0	1							
		2	**8**	**4**	**25**	**0**	**0**		**0**	**39**							

3.9 Service users are offered the opportunity to provide feedback on the service via a short questionnaire. No such anonymous questionnaires have been completed by a service user in the last reporting period.

Actions

3.10 It is critical that Functions ensure that suitable and sufficient action is being taken to support individuals and address trends (usage and root causes). This includes the application of the Mental Health and Wellbeing in the Workplace Policy and supporting Stress Procedure. This includes but is not limited to:

- Creation and maintenance of a mentally healthy workplace throughout an employee's lifecycle ensuring open and clear two way communication at all levels;
- Completion of risk assessments to assist in identifying, understanding and addressing factors that affect employees' mental health and wellbeing. Functions should be proactively completing Quality of Working Lives (QWL's) Risk assessments for teams (and in some cases individuals) to identify improvement areas as detailed in the Health and Safety Executive (HSE) Management Standards;
- Completion of Line Manager Competency Indicator Tool (HSE) for managers to assess whether they currently have the behaviours identified as effective for preventing and reducing stress at work. This will assist managers reflect on their behaviour and management style and adapt as necessary;
- Analysis of current root causes of service usage, staff absence and implement action to prevent reoccurrence;
- Inclusion of related information, instruction and training requirements in Job Profiles and skills and training matrices. Delivery will improve corporate awareness to identify and promote the mental wellbeing of employees and develop colleagues/managers' skills on how to deal with the issues around mental health and stress effectively.; and

- Active monitoring of workloads through 1-2-1's and team meetings.

3.11 The organisation should continue to advertise the service but must not rely on the EAS to address the issues. If no action is taken to address the root causes of issues and related absence the referral utilisation figures will continue to remain the same. Employee absence from work related to mental health is in many cases the forerunner of contacting the EAS. Through good management and a proactive approach the utilisation of the service from a work related perspective has the potential to be reduced and corresponding direct and indirect costs.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial consequences resulting from this report. The total contract sum over 5 years is £127,779.25. The award price has been calculated on the expected usage. Through improved management of root causes the level of support required would be less resulting in reduced future tender costs.

4.2 An effective EAS service supports individuals with difficulties in their lives; sometimes these problems can affect an individual's ability to function fully at work or at home. This in turn may impact on their health and wellbeing, which may also impact on their productivity, attendance and associated costs. Both direct and indirect costs require to be considered.

4.3 The longer an employee is off work the more challenging it becomes to manage their health problems and less likely that they will return to work. Long-term absence is costly. There is mutual benefit if we can proactively support employees in the workplace and help employees avoid long waiting times for, eg counselling or psychological therapy.

4.4 Failure to comply with legislation in ensuring a safe and healthy workplace has the potential to result in enforcement action by the Health and Safety Executive (HSE). Such intervention can result in potential prosecution (criminal) equally, employees (civil claims) are more likely to succeed following as successful HSE prosecution. Changes in the Sentencing and Fines Guidance for health and safety non-compliances are resulting in increased financial penalties. Fine starting points are based on an organisation's turnover, as Local Authorities do not have turnover Annual Revenue Budget is deemed to be the equivalent. This amount is then altered depending on the culpability of the organisation and harm factors to employees and members of the public.

4.5 There is also the potential for industrial tribunal associated costs.

5. LEGAL IMPLICATIONS

5.1 Under the Health and Safety at Work Act 1974 and Management of Health and Safety at Work Regulations 1999 there is a legal requirement to ensure the health safety and welfare at work of our employees. This includes minimising the risk of stress-related illness or injury to employees.

5.2 The provision of an EAS is in line with guidance produced by the HSE as one of the measures to control that risk. One person in four in the UK will experience a mental health problem in their lives.

5.3 HSE potential prosecution (criminal) can attract fines, imprisonment and remedial orders. There is also the possibility of employee claims (civil). Provision of an EAS can be used as mitigation against potential claims from employees exposed to work related stress.

6. MANAGEMENT OF RISK

6.1 The risks with the potential to impact the decision being sought from the Committee are categorised as:

	Risk	Low (L), Medium (M), High (H)	Mitigation
Financial	If no action is taken to support individuals and address trends then the organisation will incur both direct and indirect costs.	M	Implementation of the Mental Health and Wellbeing in the Workplace Policy and supporting Stress Procedure. Effective management and maintenance of a mentally healthy workplace and provision of appropriate support. Review and identification of EAS use and related absence to act on lessons learned. Corporate and individual awareness of mental health in the workplace. Active monitoring of work-loads.
Legal	Non-compliance with legal requirements ensures the health and safety of employees. Poor management of the risks and lack of support has the potential to attract enforcement action (Criminal and Civil) fines and claims.	M	As above. Assessment of risk via stress and QWL's risk assessments with identification and implementation of safe working arrangements. Functions acting on utilisation, trend and root cause information to develop and

			implement controls to prevent a reoccurrence. Completion of Line Manager Competency Indicator Tool (HSE) by line managers acting on feedback. Provision of specialist support / advice.
Employee	Not the right support during challenging times impacting on an employee's personal health and wellbeing. This has the potential to affect their resilience and ability to function at work and with general life events. This can result in employee ill health and related absence. The longer an employee is absent the more likely it will impact on an employee's health and wellbeing and the less likely that they will return to the workplace.	M	As above. Provision of information, instruction and training as identified in Job Profiles, skills and training matrices and in risk assessment. Open and clear two way communication at all levels within the organisation. Non-judgmental and proactive support provided to employees who experience mental health problems. Good self-management of personal wellbeing and resilience.
Customer	Reduced quality of service delivery owing to the lack of resource. No identification of trends and root causes will not address or prevent reoccurrence and not ensure a safe and healthy employee workplace.	M	As above.
Environment	No risk or impact was identified.	-	-
Technology	No risk or impact was identified.	-	-
Reputational	Without ensuring suitable employee support there is a risk of the organisation not being seen as an employer of choice and having recruitment and retention issues.	L	As above.

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	An EAS assists in having a workforce which is healthier, happier and better motivated, which is essential to the sustainability of high quality services. This in turn has a corporate social responsibility ripple effect impacting on the health of the wider community. By taking a proactive approach to health, safety the "public pound" will be used effectively reducing lost resource through direct and indirect costs.
Prosperous People	By reducing the impact of personal issues that an employee may encounter such as stress, bereavement or debt we can substantially reduce the negative impact of such issues on their productivity, efficiency and overall behaviour at work. Through the provision of support, employees' resilience improves enabling them to deal with life and work challenges more positively. As well as impacting on productivity it also assists in maximising attendance. It is difficult to control outside stressors, but there is a need to take a holistic approach to employee wellbeing. To manage work related stress effectively, we need to recognise the importance and interaction of work and home problems. Employees do not have to be experiencing problems to use the service, as there are many positive benefits of regular engagement for lifestyle guidance. As an engagement tool the provision of the service and associated resources can assist the organisation's health and wellbeing strategies.
Prosperous Place	With stronger resilience employees, elected members and foster carers would be able to provide better service delivery. There are only positive outcomes to be gained from support colleagues and seeking assurance from Functions that action is being taken to support individuals and address trends in the current changing environment.
Enabling Technology	The use of telephone counselling, instant messaging and website information increases the speed of accessing support.

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	No impact
Organisational Design	No impact
Governance	The provision of EAS utilisation figures and trends provides an opportunity for the committee to scrutinise the provided management information. It enables what action has been taken by Function responsible line management to support individuals and address trends to be questioned. From the evidence the committee can determine if the level of assurance provided is acceptable in effectively managing health and safety.
Workforce	The report provides the opportunity for the committee to ensure that trends are addressed and the health and safety management system improved. This would reduce the risk of lost resource through for example absence, enforcement action and potential claims. Early address of issues has the potential to reduce impact on employees and the wider community reducing demands on other public sector organisations.
Process Design	This can allow the committee to identify where processes are failing to address health and safety risks and improve wellbeing.
Technology	No impact
Partnerships and Alliances	This allows Trade Unions, elected members and officers to collaborate.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Not required
Privacy Impact Assessment	Not required
Children's Rights Impact Assessment/Duty of Due Regard	Not Applicable

9. BACKGROUND PAPERS

Employee Assistance Service – Quarterly report April 2018 – June 2018

10. APPENDICES

There are no appendices.

11. REPORT AUTHOR CONTACT DETAILS

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ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	03 September 2018
REPORT TITLE	OHP Quarterly report: April 2018 – June 2018
REPORT NUMBER	GOV/18/067
DIRECTOR	N/A
CHIEF OFFICER	Fraser Bell
REPORT AUTHOR	Mary Agnew
TERMS OF REFERENCE	5.2

1. PURPOSE OF REPORT

1.1 This report updates the Committee on Council wide utilisation of the Occupation Health Service contract provided by OH Assist during the 3 month period April 2018 – June 2018.

2. RECOMMENDATION

2.1 That Committee considers the contents of the report.

3. BACKGROUND

3.1 Following a joint tender evaluation process with Aberdeenshire, OH Assist were awarded the Occupational Health Service contract. The contract commenced on 03 August 2015 and has since been novated to OH Assist Limited. The original contract was for 18 months with an option to extend for up to a further 24 months. A 12 month extension followed by a further 6 month extension has been agreed.

3.2 An EU compliant tender exercise has been undertaken, a new occupational health supplier will commence on 02 August 2018.

3.3 This report contains limited utilisation information on the 3-month reporting period (April 2018 – June 2018). The provided figures do not reflect the new Function structure, this has been requested from the supplier.

3.4 Utilisation (April 2018 – June 2018)

3.5 A total of 379 employee referrals were made in the period April – May 2018; there were 411 referrals in the January to March reporting period. The usage

of the services provided by occupational health (OH) is reflective of the related size of the work areas. The programme of health surveillance continues for manual employees.

3.6 The table below provides a summary of occupational health services delivered during this reporting period.

OH service	OH referral	Pre-employment	Ill-health retirement	Health Surveillance	Health Assessment	Specialist services
Volumes	116	84	-	137	9	33

3.7 It is critical that line management focus on the root causes of ill health so that appropriate measures can be implemented to support and prevent absence. In line with corporate policy and procedures for psychological issues Quality of Working Lives (QWL's) risk assessments must be completed, line management behaviours reviewed against the HSE Management Standards and attendance and completion of appropriate available training. Equally manual handling risk assessments require to be completed and work practices reviewed to minimise such activities alongside suitable information, instruction, training and supervision.

3.8 There were 137 Health Surveillance appointments undertaken compared to 163 in the last reporting period.

3.9 During this reporting period there have been 5 physiotherapy assessments delivered to individual employees compared to 12 in the last reporting period.

3.10 There were 98 short notice cancelled appointments over this period. There were 55 for the previous reporting period.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial consequences resulting from this report. The total current contract sum over 5 years is £739,132.15. The award price has been calculated on the expected usage. Through improved management of work related root causes the level of support required would be less resulting in reduced future tender costs.

4.2 The contract core cost is covered in monthly utilisation figures. Any service delivery over and above these volumes incur additional expenditure, these are kept to a minimum.

4.3 Sickness absence is a key business issue, in terms of direct and indirect costs. Examples of tangible elements include reduced absence costs, less disruption due to employees being absent, reduced overtime/agency staff costs, early return to work by employees, increased productivity, reduced insurance costs, reduced industrial tribunals / claims, reduced staff turnover and thus recruitment costs. Uninsured costs can be greater than insured costs, this can have a

significant impact on Service budgets. Examples of less tangible benefits include improved quality of workplace experience, improved wellbeing, employees feel more valued, increased employee morale and engagement.

4.4 There are savings to be realised in early intervention to support employees in the workplace. The involvement of independent specialist's increases legal compliance of statutory requirements such as health surveillance and can reduce costs in the event of legal challenge for example, enforcement action from the Health and Safety Executive (HSE) and industrial tribunals.

4.5 The longer an employee is off work the more challenging it becomes to manage their health problems and less likely that they will return to work. Long-term absence is costly. There is mutual benefit if we can proactively support employees in the workplace through reasonable adjustments.

5. LEGAL IMPLICATIONS

5.1 Under the Health & Safety at Work Act 1974 etc and Equality Act 2010 there is a legal requirement to ensure the health safety and welfare at work of our employees and consider any health issues that might affect an employee's ability to safely fulfil their job. There is a requirement to ensure that an organisation has access to competent advice such as occupational health. This provides line management with independent advice to enable them to make an informed decision on any recommended employee adjustments or adaptations.

5.2 The provision of or access to an occupational health service is in line with guidance produced by the HSE as one of the measures to control that risk and ensure legal compliance with health surveillance.

5.3 Failure to comply with legislation in ensuring a safe and healthy workplace has the potential to result in enforcement action by the HSE. This includes fines, imprisonment and remedial orders. There is also the possibility of employees making a civil claim; civil claims are more likely to succeed following a successful HSE prosecution. Access to competent occupational health service can be used as mitigation against prosecution and potential claims from employees for unfair dismissal or exposure to work related ill health.

6. MANAGEMENT OF RISK

6.1 The risks with the potential to impact the decision being sought from the Committee are categorised as:

	Risk	Low (L), Medium (M), High (H)	Mitigation
Financial	If no action is taken to support individuals and address trends then the organisation will incur both direct and indirect costs.	M	Implementation of corporate health and safety policy and related procedures to ensure a

			safe and mentally healthy workplace. Identification of and address of root causes and trends. Review and identification of Service use, trends and related absence to act on lessons learned to prevent reoccurrence.
Legal	Non-compliance with legal requirements if specialist occupational health recommendations and referral trends are not acted upon. No mitigation of potential challenge and subsequent claims. Poor management of the work related risks has the potential to attract enforcement action (Criminal and Civil) fines and claims.	M	As above. Provision of specialist clinical support / advice via competent occupational health service providing clinical based recommendations to enable informed decisions on workplace employee support. Undertaking of employee occupational referrals in relation to work related issues and acting on clinical recommendations. Implementation and completion of health surveillance programme.
Employee	If the right support is not provided it can lead to ill health and further employee absence incurring direct and indirect costs. The longer an employee is absent the more likely it will impact on an employee's health and wellbeing and the less likely that they will return to the workplace.	M	As above. Proactive approach to managing workplace risk and supporting employees with adjustments to comply with legislation. Provision of information, instruction and training as identified in Job Profiles, skills and training matrices and in risk assessment. Open and clear two way

			communication at all levels within the organisation.
Customer	Reduced quality of service delivery owing to the lack of resource. No assurance of a safe and healthy employee workplace.	M	As above.
Environment	No risk or impact was identified.	-	-
Technology	No risk or impact was identified.	-	-
Reputational	Without ensuring suitable employee support there is a risk of the organisation not being seen as an employer of choice and having recruitment and retention issues.	L	As above.

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	An occupational health provider will assist in having a workforce which is healthier, happier and better motivated, which is essential to the sustainability of high quality services. This in turn has a corporate social responsibility ripple effect impacting on the health of the wider community. Occupational health is a fundamental part of the process in managing absence. An occupational health service supports keeping people well at work – physically and mentally. They provide critical support to the process of effective absence management and increase the numbers of employees returning to work earlier. This keeps our employees healthy and safe whilst in work while managing any risks in the workplace that are likely to give rise to work-related ill health. This in turn ensures the way that they contribute to the local economy is not affected, both in their ACC role and in their personal lives. Research shows that good health is good for business and better workplaces have better financial results. Early intervention can help prevent staff being absent for health-related reasons

	and improve opportunities for people to recover from illness while at work. Research shows that the longer people are off sick, the less likely they are to make a successful return to work. After six months absence from work, there is only a 50 per cent chance of someone making a successful return. By taking a proactive approach to health, safety and wellbeing the “public pound” will be used effectively reducing lost resource through direct and indirect costs.
Prosperous People	As an organisation ACC considers the health of its workforce to be paramount and a key element in service delivery. This focus is one key in having an engaged workforce and all the additional benefits associated with this. An effective occupational health service will assist in providing clinical based timely support reducing long term sickness and related absence. It will provide advice about how work affects a person’s health and how someone’s health affects their work. Their independent advice will enable line management to make informed decisions on how to prevent work-related illness and make sure someone is fit to work; being in ‘good’, stable work is beneficial to health and well-being, and for those on long-term sick leave, getting back to work is a very important part of the recovery process. By reducing the impact of work related issues and ill health we can substantially reduce the negative impact of such issues on employee productivity, efficiency and overall behaviour at work resulting in better service delivery.
Prosperous Place	ACC require to keep employees healthy and safe whilst in work and manage any risks in the workplace that are likely to give rise to work-related ill health. An occupational health provider fulfils this and the statutory requirement to have access to ‘competent’ occupational health advice as part of the organisational arrangements. ACC in conjunction with an occupational health service can protect and promote the health and well-being of employees, creating a healthier workplace and a healthier workforce, which will also protect and enhance our image and reputation as a good employer. Any detrimental effects caused through poor health of employees impacts on the provision of public services. An engaged workforce is best-placed to provide good service delivery to the residents of the City. This would result in good public opinion, which would benefit the City, which can extend outwardly to

	visitors and businesses seeking to inwardly invest. Through early intervention absence the impact on the local economy and drain on other public sector services can be reduced.
Enabling Technology	The use of a digital solutions has assisted in delivery of the service. The use of a portal providing an electronic booking system and access to reports improves the speed of accessibility. The majority of appointments are conducted by telephone to remove the need for employees and the medical professionals to travel thus saving the time and additional effort for both parties. Through prompt access to support, early address is provided in reducing absence, work related ill health and employee stress.

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	No impact
Organisational Design	No impact
Governance	No impact.
Workforce	Approval of the recommendation would assist in reducing the risk of lost resource through for example absence, enforcement action and potential claims. Early address of issues has the potential to reduce impact on employees and the wider community reducing demands on other public-sector organisations.
Process Design	This can allow the committee to identify where processes are failing to address health and safety risks and improve wellbeing.
Technology	No impact
Partnerships and Alliances	This allows Trade Unions, elected members and officers to collaborate.

8. IMPACT ASSESSMENTS

Assessment	**Outcome**
Equality & Human Rights Impact Assessment	Not required

Privacy Impact Assessment	Not required
Children's Rights Impact Assessment/Duty of Due Regard	Not Applicable

9. BACKGROUND PAPERS

ACC Quarterly Executive Summary – OH Assist: April 2018 – June 2018.

10. APPENDICES

N/A

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