# **Public Document Pack**



<u>To</u>: Councillor Allan, <u>Convener</u>; Councillor Houghton, <u>Vice Convener</u>; and Councillors Cameron, Copland, Delaney, Graham, Hutchison, Macdonald and Reynolds.

<u>Trade Union Advisers</u>: Ron Constable and Carole Thorpe (EIS); Brenda Murdoch and David Willis (GMB); Thomas Whyte and 1 vacancy (SSTA); George Ferguson and Kenny Luke (UNISON); Joe Craig and Mishelle Gray (UNITE); and Rob Stephen and 1 vacancy (VOICE).

Town House, ABERDEEN, 24 September 2019

# STAFF GOVERNANCE COMMITTEE

The Members of the **STAFF GOVERNANCE COMMITTEE** are requested to meet in **Committee Room 2 - Town House on TUESDAY, 1 OCTOBER 2019 at 2.00pm.** 

FRASER BELL CHIEF OFFICER - GOVERNANCE

## BUSINESS

## **DETERMINATION OF URGENT BUSINESS**

1.1 There are no items at this time

## **DETERMINATION OF EXEMPT BUSINESS**

2.1 There are no items of exempt business

## **DECLARATIONS OF INTEREST**

3.1 Members are requested to declare any interests

## REQUESTS FOR DEPUTATION

4.1 None at this time

## MINUTE OF PREVIOUS MEETING

5.1 Minute of Previous Meeting of 18 June 2019 (Pages 3 - 6)

## **COMMITTEE PLANNER**

6.1 Committee Business Planner (Pages 7 - 12)

## **NOTICES OF MOTION**

7.1 None at this time

# REFERRALS FROM COUNCIL, COMMITTEES AND SUB COMMITTEES

8.1 None at this time

# **WORKFORCE STRATEGIES**

- 9.1 New Approach to Internal Recruitment and Internal Movement of Staff RES/19/371 (Pages 13 24)
- 9.2 <u>Alignment of Working Practices with the Craft Agreement OPE/19/378</u> (Pages 25 28)

## **HEALTH, SAFETY & WELLBEING OF STAFF**

- 10.1 <u>Corporate Health & Safety Quarterly Update April to June 2019 GOV/19/380</u> (Pages 29 40)
- 10.2 Professional Learning for Support Staff OPE/19/360 (Pages 41 50)
- 10.3 <u>Bridge of Don Academy Asbestos Incident Update and Beachview Court</u> Update - RES/19/386 (Pages 51 - 74)

Website Address: www.aberdeencity.gov.uk

Should you require any further information about this agenda, please contact Mark Masson, tel 01224 522989 or email mmasson@aberdeencity.gov.uk

ABERDEEN, 18 June 2019. Minute of Meeting of the STAFF GOVERNANCE COMMITTEE. <u>Present</u>:- Councillor Allan, <u>Convener</u>; Councillor Houghton, <u>Vice-Convener</u>; and Councillors Cameron, Copland, Delaney, Graham, Hutchison, Macdonald and Wheeler (as substitute for Councillor Reynolds).

<u>Trade Union Advisors present</u>:- Ron Constable and Carole Thorpe, EIS; Brenda Murdoch and David Willis, GMB; Kenny Luke, UNISON; Mishelle Gray and Liam Knox, UNITE.

The agenda and reports associated with this minute can be found <a href="here">here</a>.

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.

#### **DECLARATIONS OF INTEREST**

**1.** There were no declarations of interest.

## **MINUTE OF PREVIOUS MEETING OF 18 MARCH 2019**

2. The Committee had before it the minute of its previous meeting of 18 March 2019.

## The Committee resolved:-

to approve the minute as a correct record.

# **COMMITTEE BUSINESS PLANNER**

**3.** The Committee had before it a committee business planner prepared by the Chief Officer – Governance.

## The Committee resolved:-

- in respect of item 5 (Asbestos Incident Bridge of Don Academy), to note the update from the Chief Officer – Corporate Landlord and to request that a service update be circulated within the next few weeks to provide an update on progress to date; with a full report to Committee at its meeting in October 2019;
- (ii) to agree that item 10 (Equal Pay Audit) be circulated as a service update after consideration at the Audit, Risk and Scrutiny Committee in June 2019, rather than as a committee report in October as previously agreed; and
- (iii) to otherwise note the planner.

18 June 2019

## **COMMITTEE ANNUAL EFFECTIVENESS REPORT - GOV/19/245**

**4.** The Committee had before it a report by the Director of Resources which presented the annual committee effectiveness report for the Staff Governance Committee for 2018/19.

# The report recommended:-

that Committee note the report.

## **The Committee resolved:-**

to approve the recommendation.

## **WORKFORCE DEVELOPMENT PLAN - RES/19/296**

**5.** With reference to article 8 of the minute of its previous meeting, the Committee had before it a report by the Director of Resources which presented a Workforce Plan which set out how the Council would ensure its future workforce had the capacity and capability to support the culture set out in the Guiding Principles which had been approved by Committee at its meeting in March 2019.

## The report recommended:-

that Committee -

- (a) approve the Workforce Plan and the actions contained within it including the revisal of the Performance Review and Development Scheme (PR&D) including the incorporation of the Capability Framework to take effect in the current PR&D year 2019/20:
- (b) note that the introduction of the Capability Framework to PR&Ds would form a part of the assessment of overall performance of an individual within their role and help to identify strengths as well as capability gaps that need to be addressed;
- (c) note that the Chief Officer Organisational Development would work with Trade Union colleagues in updating current PR&D guidance;
- (d) instruct the Chief Officer Organisational Development to make those amendments necessary to PR&D and to remove the stipulation that to receive an increment under the Local Salary Progression Scheme employees could not be undergoing an absence management process;
- (e) note that the capability framework would be used to support internal recruitment and movement of staff;
- (f) instruct the Chief Officer Organisational Development to develop a new approach to the internal movement of staff which would aim to mitigate the future continued use of VSER payments and to report back on this approach in October 2019; and
- (g) approve the utilisation of the approved corporate training budget in line with the workforce development plan.

18 June 2019

# **The Committee resolved:-**

to approve the recommendations.

## EMPLOYEE ASSISTANCE SCHEME ANNUAL REPORT - RES/19/295

**6.** With reference to article 9 of the minute of its meeting of 4 May 2018, the Committee had before it a report by the Director of Resources which provided an update on the utilisation of the Employee Assistance Service (EAS) provided by Time for Talking during the last 12 month period April 2018 – March 2019.

## The report recommended:-

that Committee -

- instruct the Director of Resources to request evidence from Functions on the actions taken to support individuals and address trends (usage and root causes) as detailed in the report; and
- (b) consider the contents of the report.

# The Committee resolved:-

- (i) to note the number of referrals as a result of stress, and that officers were continuing to monitor this to identify if it was an issue in any specific clusters and if further support was required to staff, and to request that this, and information on any correlation with particular posts that had changed significantly, be included in the six-monthly report to be presented to Committee in October 2019;
- (ii) to request that the six-monthly report to the October meeting of the Committee also contain information in respect of the utilisation of the alternative therapy service located in the Town House: and
- (iii) to otherwise note the report.

# CORPORATE HEALTH AND SAFETY QUARTERLY REPORT - JANUARY TO MARCH 2019 - GOV/19/270

**7.** With reference to article 7 of the minute of its previous meeting, the Committee had before it a report by the Chief Officer – Governance which summarised statistical health and safety performance information for the three-month reporting period January – March 2019 in order that the Committee had the opportunity to monitor compliance with health and safety legislation.

# The report recommended:-

that Committee -

- (a) review, discuss and comment on the issues raised within this report;
- (b) scrutinise and review health, safety and wellbeing policy, performance, trends and improvements; and
- (c) note that future reports will provide comparative performance data.

18 June 2019

# The Committee resolved:-

- (i) to request that the figures be broken down further where possible, while noting that if the figure was less than five, that would not be reported to Committee;
- (ii) in respect of the incident at Beachview Court, to note that an update on this would be included in the asbestos report to Committee in October 2019;
- (iii) in respect of paragraph 3.5 and the work being carried out in service areas to review policies and procedures and identify training which could assist employees to deescalate issues quickly, to request that officers report back to Committee in October 2019 in respect of the work being undertaken in relation to Pupil Support Assistants, to include financial information in respect of any training required; and
- (iv) to otherwise note the report.
  - COUNCILLOR YVONNE ALLAN, Convener

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|---|--|--|---|--------------------------------------|--|-------------------|--------------------|---|--|
| 1 | Th   | STA e Business Planner details the reports which have been i   | FF GOVERNANCE COMM<br>nstructed by the Committe |                                      |  | nctions expect to | be submitting fo   | or the calendar ye  | ear.   |
| 2 | Report Title   | Minute Reference/Committee Decision or Purpose of Report   | Update  | Report Author                        | Chief Officer                                      | Directorate       | Terms of Reference | Delayed or<br>Recommended<br>for removal or<br>transfer, enter<br>either D, R, or T | Explanation if delayed, removed or transferred |
| 3 |  |  | 1 October 2019                                  |                                      |  |                   |                    |   |  |
| 4 | Bridge of Don Academy<br>Asbestos Incident<br>Update and Beachview<br>Court Update | SGC 18/03/19 - To instruct the Chief Officer - Corporate Landlord to (a) provide a service update on the actions taken, and implemented, since this incident and further to the action plan reported to this Committee in January 2019; and (b) report back to Committee in June 2019 on actions taken to ensure the safety, in so far as is reasonably practicable, of all Council personnel, contractors and members of the public when work involving asbestos is carried out on any Council property.  SGC 18/06/19 - (a) To note the update from the Chief Officer – Corporate Landlord and to request that a service update be circulated within the next few weeks to provide an update on progress to date; with a full report to Committee at its meeting in October 2019; and (b) to request that this report include an update on the incident at Beachview Court |   | Stephen Booth                        | Corporate<br>Landlord                              | Resources         | Purpose 8          |   |  |
| 5 | Alignment of Working<br>Practices with the Craft                                   | To provide an update on the realignment of the craft agreement to ensure that the working arrangements meet the requirements of the working time directive and meet current working practices. This is in accordance with Audit AC1602 recommendation (2.2.6)  |   | Graham<br>Williamson /<br>John Noble | Operations and<br>Protective<br>Services           | Operations        | 4 and 8            |   |  |
| 6 | Professional Learning for<br>Support Staff   | SGC 18/06/19 - With reference to unacceptable behaviours, and in relation to the work being carried out in service areas to review policies and procedures and identify training which could assist employees to deescalate issues quickly, to request that officers report back to Committee in October 2019 in respect of the work being undertaken in relation to Pupil Support Assistants  |   | Eleanor<br>Sheppard                  | Integrated<br>Children's and<br>Family<br>Services | Operations        | 4.5                |   |  |

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| 2   | Report Title  | Minute Reference/Committee Decision or Purpose of Report   | Update  | Report Author      | Chief Officer                 | Directorate | Terms of<br>Reference | Delayed or<br>Recommended<br>for removal or<br>transfer, enter<br>either D, R, or T | Explanation if delayed, removed or transferred   |
| 7   | Movement of Staff   | SGC 18/06/19 - On 18 June 2019, the Staff Governance Committee approved the Council's Workforce Plan. As part of that report the Chief Officer (Organisational Development) was instructed to develop a new approach to the internal movement of staff and to report back on this approach in October 2019. This report sets out the proposed new approach to internal recruitment and the internal movement of staff across the Council, including incorporating the Council's process for managing redeployment  |   | Lesley<br>Strachan | Organisational<br>Development | Resources   | 2.1                   |   |  |
| 8   | EAS Scheme /<br>Occupational Health /<br>Sickness Absence six<br>monthly report | be greater areas of absence.  SGC 18/06/19 - To note the number of referrals as a result of stress, and that officers were continuing to monitor this to identify if it was an issue in any specific clusters and if further support was required to staff, and to request that this, and information on any correlation with particular posts that had changed significantly, be included in the six monthly report to be presented to Committee in October 2019; and to request that the six-monthly report to the October meeting of the Committee also contain information in respect of the utilisation of the alternative therapy service located in the Town House. | While transitioning from PSe to using CoreHR, P&O have continued to use the YourHR/PSe database to produce sickness absence information in the interim. As PSe has not been updated to include new starts or remove leavers since the start of June (in line with the transition to CoreHR), it is expected that some new start and leavers absence will not be accounted for using the current reporting process. A revised reporting process is currently under development, which will mitigate any short term errors, and is anticipated to be available within the coming weeks. | Neil Yacamini      | Organisational<br>Development | Resources   | 4.2                   | D   | The OH data will also now be presented to the December meeting as officers are currently working with OH on the format and relevance of data presented in order to address previous discussions at Committee |
| 9   | Corporate Health &<br>Safety Quarterly Update                                   | To present the quarterly update for April to June 2019   |   | Colin Leaver       | Governance                    | Governance  | 4.2                   |   |  |
| _10 | Policy Review   | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles  | There are no policies to be reported to this meeting  | Keith Tennant      | Organisational<br>Development | Resources   | 3.1                   | R   |  |

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| 11 |  |   | 10 December 2019 |               |                               |             |                       |   |  |
| 12 | Policy Review                              | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles   |                  | Isla Newcombe | Organisational<br>Development | Resources   | 3.1                   |   |  |
|    | Corporate Health & Safety Quarterly Update | To present the quarterly update for July to September 2019  |                  | Colin Leaver  | Governance                    | Governance  | 4.2                   |   |  |
|    | Violence Against<br>Employees Policy       | SGC 03/09/18 - to instruct the Interim Chief Officer - People and Organisation to consider the request from Unison to explore the merit of producing an employment policy dealing with the effects of violence against women and to report back to the Committee by March 2019 on whether such a policy was required - The Convener proposed that a wider review in respect of violence in the workplace be considered and the Trade Unions expressed support for this.  SGC 18/03/19 - to note that there was general interest in a safe leave policy for staff which would offer employees time off to access help and support without it affecting their finances or using annual leave, and to request that officers investigate this as part of the work being undertaken on the Policy and include it in the report back to Committee later in the year |                  | Keith Tennant | Organisational<br>Development | Resources   | 1.3 and 3.1           |   |  |
| 15 | Terms and Conditions                       | Council Budget 05/03/2019 - to instruct the Chief Officer - Organisational Development to begin negotiations with the Trade Unions relating to locally agreed changes to terms and conditions of employment and to review related policies and procedures and report the proposed changes to the Staff Governance Committee   |                  | Isla Newcombe | Organisational<br>Development | Resources   | Purpose 3             |   |  |

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| 2  | Report Title  | Minute Reference/Committee Decision or Purpose of Report   | Update        | Report Author                 | Chief Officer                            | Directorate | Terms of<br>Reference | Delayed or<br>Recommended<br>for removal or<br>transfer, enter<br>either D, R, or T | Explanation if delayed, removed or transferred |
|    | Recruitment and<br>Retention - LGV Drivers /<br>Roads Infrastructure            | SGC 18/03/19 - to instruct the Chief Officer – Operations and Protective Services in conjunction with the Chief Officer – Organisational Development and Chief Officer - Finance to bring a report to the December meeting of the Staff Governance Committee detailing the full cost of covering these services over a 12 month period, looking at agency costs, advertising costs, travel and any other applicable costs. The purpose of this report being to evaluate such costs against possible incentives which may assist in the recruitment and retention of staff to these posts. The recommendations arising from this report should consider a possible incentive scheme which incorporates a retention element and saves the Council money in the long term, to the benefit of both the Council and its employees, and provide savings options required to fund such initiatives, highlighting any necessary referrals to the budget process  |               | Mark Reilly                   | Operations and<br>Protective<br>Services | Operations  | Purpose 4 / 2.1       |   |  |
| 16 |   |  | 00 F-l        |                               |  |             |                       |   |  |
| 17 |   | To report appually on the divotor right register   | 03 Febru      | ary 2020                      |  |             |                       |   |  |
| 18 | Risk Register - People and Organisation   | To report annually on the cluster risk register  | January 2020  | Isla Newcombe                 | Organisational<br>Development            | Resources   | GD 7.4                |   |  |
| 19 | Mental Health Action Plan   | SGC 31/01/19 - To note that progress on the implementation of the actions would be reported to Committee in approximately a year's time  | January 2020  | Keith Tennant /<br>Mary Agnew | Organisational<br>Development            | Resources   | 1.3 and<br>Purpose 8  |   |  |
| 20 | Policy Review   | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles  | Standing item | Isla Newcombe                 | Organisational<br>Development            | Resources   | 3.1                   |   |  |
| 21 |   |  | 30 Marc       | h 2020                        |  |             |                       |   |  |
| 22 | EAS Scheme /<br>Occupational Health /<br>Sickness Absence six<br>monthly report | To present the EAS/OH/sickness absence six monthly report, to include comparator data with previous performance, and to request that officers investigate whether the data included on the average days absent per employee could be broken down further and ideally by cluster in future reports to identify where there might be greater areas of absence  | March 2020    | Neil Yacamini                 | Organisational<br>Development            | Resources   | 4.2                   |   |  |
| 23 | Policy Review   | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles  | Standing item | Isla Newcombe                 | Organisational<br>Development            | Resources   | 3.1                   |   |  |
| 24 |   | A standing the state and be seen to the state of the stat | 09 Jun        | e 2020                        |  |             |                       |   |  |
| 25 | Policy Review   | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles  | Standing item | Isla Newcombe                 | Organisational<br>Development            | Resources   | 3.1                   |   |  |

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|    | Employee Assistance<br>Scheme Annual Report   | To present the annual Employee Assistance<br>Programme Annual report  | June 2020     | Neil Yacamini | Organisational<br>Development | Resources   | 4.2                |   |  |
| 27 |   |   |               |               |                               |             |                    |   |  |
| 28 |   |   | _             |               |                               |             |                    |   |  |
| 29 |   | <del>,                                      </del>  | 29 Septen     | nber 2020     |                               |             |                    |   |  |
| 30 | Policy Review                                 | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles | Standing item | Isla Newcombe | Organisational<br>Development | Resources   | 3.1                |   |  |
| 31 |   | , , , , , , , , , , , , , , , , , , ,   |               |               |                               |             |                    |   |  |
| 32 |   |   |               |               |                               |             |                    |   |  |
| 33 |   |   | 24 Novem      | ber 2020      |                               |             |                    |   |  |
| 34 | Policy Review                                 | A standing item to enable presentation of any policies that require to be reviewed and approved by Committee, as a result of the review of policies to ensure that they meet the Guiding Principles | Standing item | Isla Newcombe | Organisational<br>Development | Resources   | 3.1                |   |  |
| 35 |   |   |               |               |                               |             |                    |   |  |
| 36 |   |   |               |               |                               |             |                    |   |  |
| 37 | Corporate Health &<br>Safety Quarterly Update | To present the quarterly update   | Quarterly     | Colin Leaver  | Governance                    | Governance  | 4.2                |   |  |
| 38 | Annual Committee<br>Effectiveness Report      | To present the annual committee effectiveness report  | TBC           | Isla Newcombe | Organisational<br>Development | Resources   | GD 7.5             |   |  |

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## ABERDEEN CITY COUNCIL

| COMMITTEE          | Staff Governance Committee  |
|--------------------|---|
| DATE               | 1 October 2019  |
| EXEMPT             | No  |
| CONFIDENTIAL       | No  |
| REPORT TITLE       | New Approach to Internal Recruitment and Internal Movement of Staff |
| REPORT NUMBER      | RES/19/371  |
| DIRECTOR           | Steve Whyte, Director of Resources                                  |
| CHIEF OFFICER      | Isla Newcombe, Chief Officer (Organisational Development)           |
| REPORT AUTHOR      | Lesley Strachan, Talent Acquisition Lead                            |
| TERMS OF REFERENCE | 2.1   |

## 1. PURPOSE OF REPORT

On 18 June 2019, the Staff Governance Committee approved the Council's Workforce Plan. As part of that report the Chief Officer (Organisational Development) was instructed to develop a new approach to the internal recruitment and movement of staff across the Council and to report back on this approach in October 2019. This report sets out the proposed new approach.

#### 2. RECOMMENDATIONS

That Committee:

- 2.1 approve the new approach to internal recruitment and internal movement of staff as set out within this report and instruct the Chief Officer (Organisational Development) to implement the approach;
  - and
- 2.2 note that following consideration of this report, and consultation with trade unions, the redeployment process and the managing recruitment and selection guidance will be updated to align with the approach and circulated to this committee as a service update.

### 3. BACKGROUND

- 3.1.1 In August 2017 Council approved the 'Building a Council of the Future' report which set out our Target Operating Model (TOM) and the workforce we will require in the future. The Workforce Plan approved at Staff Governance Committee in June 2019 builds on this, and the Council Delivery Plan approved at Committee in March 2019, by setting out how we will develop and deliver that workforce during 2019/20 and 2020/21.
- 3.1.2 Within the Workforce Plan, there is a clear commitment to focus on our internal talent by supporting agile career opportunities; building organisational capability through development of generic skills and knowledge and building organisational capacity and resilience through cross skilling and taking a more flexible approach to the recruitment and movement of our existing workforce.
- 3.1.3 Our current selection process is the same whether we recruit internally or externally. The process focuses on the qualifications, technical skills and experience set out within the job profile and a candidate's ability to meet these from day one, rather than considering an internal candidate's potential ability to undertake a role based on transferable skills, knowledge and behaviours, and with time and development.
- 3.1.4 As demand on our services continues to change, it is proposed that the focus moves to re-skilling and re-training existing employees where needed to be able to recruit on a predominantly internal basis. This will enable a shift of our critical people resource into areas of sustained demand.
- 3.1.5 Benchmarking and research with other local authorities and organisations seeking similar outcomes, has shown success in using an internal recruitment approach which focuses more on a person's 'fit' to a role rather than purely on their qualifications, technical skills and experience.
- 3.1.6 Work already undertaken as part of the Workforce Plan lays the foundation for this focus on internal recruitment and retention by introducing a capability framework which sets out the skills, knowledge and behaviours required at each level in the organisation and by providing the means to support employees to develop these transferable skills through the revised approach to PR&D and the establishment of a Learning Academy. The Learning Academy comprises an online platform which links directly to the capability framework and provides access to self-directed and face to face learning to support the framework.

# 3.2 Aims of the new approach

3.2.1 The new approach to internal recruitment and internal movement of staff represents a different approach to resourcing our workforce which will break down the barriers in our current recruitment and selection process, which can prevent internal candidates from being successful.

The scheme aims to:

- 3.2.2 move us beyond a traditional recruitment or redeployment model whereby the assessment of employees' technical capabilities is used to move people into new roles. Instead the process is based on an employee's personal qualities and behaviours as well as transferable skills and knowledge (capabilities).
- 3.2.3 support our required shift in culture as outlined by the TOM and articulated by staff in our Guiding Principles. The approach should also develop individual staff capability as well as organisational capability and capacity.
- 3.2.4 enable employees to move more flexibly between roles across the organisation, offering opportunities for the retention of internal talent and the redeployment of staff subject to redeployment, including those on medical redeployment.
- 3.2.5 increase the feeling of support for staff undergoing change in their current role, and therefore at risk of displacement, or those who may have personal reasons for seeking a role change.
- 3.2.6 support the development of our young workforce as research suggests that younger generations seek varied 'portfolio' careers.

# 3.3 Consultation and Engagement

- 3.3.1 Detailed discussion on the new approach to internal recruitment and internal movement of staff has taken place with the extended corporate management team, a diverse selection of recruiting managers and Trade Unions. All are supportive of the principle of focusing opportunities on internal talent and see it as a positive step for our internal workforce. We are committed to implementing this new approach in partnership with Trade Union colleagues.
- 3.3.2 Sessions have also taken place with the Council's Engagement Ambassadors, the Equality Ambassador's Network and with the Young Employee Network, where positive feedback and helpful questions and suggestions regarding implementation were received.

# 3.4 Underpinning Theory – Person Job Fit Theory

- 3.4.1 Person-job fit theory (as well as other theories such as person-occupation fit, person-organisation fit and person-vocation fit) suggests that while people can learn skills and gain job specific knowledge and experience which can make them capable in their role, finding a match between the requirements of the role and their transferable skills and abilities, personal preferences and ways of working make them more likely to succeed increasing likelihood of high performance, motivation and job satisfaction. (Ones et al., 2007; Boon et al., 2011; Huang et al., 2019).
- 3.4.2 A traditional selection process does not provide evidence about a candidate's working preferences or tendencies, for example creativity, interpersonal style, ability to handle pressure or work as part of a team. The approach, taking account of an employee's working preferences assessment (for example, a psychometric profile such as the SHL Occupational Personality Questionnaire OPQ32 could be used), predicts how a person will work, based on their responses. The attributes under assessment would be aligned to the capability framework and any other requirements of the role.

# 3.5 **Scope and Eligibility for the Scheme**

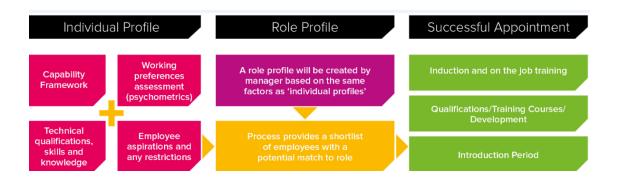
- 3.5.1 The scheme will include recruitment to all vacancies, short term projects and secondment opportunities, redeployment (see section 3.8 below) and opportunities for re-training, apprenticeships or traineeship roles (e.g. DLITE for Teachers). By implementing this new approach, recruitment for all roles will go through this internal process initially, substantially reducing the need for external recruitment.
- 3.5.2 The scheme will operate Council-wide and all employees will have the opportunity to join the scheme.
- 3.5.3 Employees will be assigned a priority status depending on their current employment situation:
  - Priority 1 Employees who are subject to formal redeployment (see section 3.8 below);
  - Priority 2 Employees currently going through changes which impact
    on their role and are therefore 'at risk' of displacement from their
    current position, as a supportive measure / mitigation before and
    alongside formal job matching processes, and
  - **Priority 3** Volunteers employees who wish to join the scheme as they are seeking a change in role or career.

## 3.6 The Scheme – (name is to be confirmed)

3.6.1 The scheme aims to find suitable internal employees for vacant roles within the organisation, based on alignment between the attributes

required to perform a specific role with the attributes of employees held within the scheme.

3.6.2 The high-level scheme is illustrated in the diagram below:



- 3.6.3 As part of the scheme, the job profile will be considered and where there are qualification or job specific requirements, these will be removed or altered (unless there is a legal / statutory reason that these must be in place immediately or a significant risk to service delivery). The focus of the approach is agreeing what is fundamentally required to deliver the role, transferable skills and knowledge, candidate 'fit' and the potential to learn or gain technical elements on the job and within a defined period.
- 3.6.4 Support and guidance will be provided to recruiting managers by the People & Organisation team. Where there are gaps in employees' technical skills, knowledge and experience, which are essential to the delivery of the role, learning and development options will be explored. Consideration will be given to providing financial support from the corporate training budget, as outlined in the Workforce Plan.
- 3.6.5 Considering an individual's 'fit' and potential to fulfil a role is a different approach to our current selection process and recruiting managers will be supported throughout.
- 3.6.6 Staff who enter the scheme will also be supported they will be offered a feedback session on their working preferences assessment and other elements of the personal profile. The purpose of this is as a career coaching session, as part of the employee's development and to increase self-awareness.
- 3.6.7 The scheme will capture two sets of information employee details and role details. In addition, the priority status of each employee and any weightings on any key job requirements are taken account of. The scheme will provide a list of employees who have a potential match to a role and their priority status.

- 3.6.8 The selection process will be in accordance with the Council's Managing Recruitment and Selection guidance. Interview questions and / or assessment tools will be based on the capability framework including the Guiding Principles. In addition, if there are any development gaps, these will be considered and assessed to ensure suitability to the role.
- 3.6.9 Once an employee has been selected and appointed, the employee and recruiting manager will benefit from an introduction period.

#### 3.6.10 Introduction Period

There is currently a four-week period within the current redeployment process which gives both the redeployee and the recruiting manager the opportunity to meet regularly during the period to determine suitability for the role.

3.6.11 For the purposes of the scheme, an introduction period will be developed to ensure an employee has an opportunity to gain an understanding and experience of all aspects of the role, progress against an agreed development plan and to have regular 1:1 meetings. This will ensure a full induction process and support managers to gain an assurance that an employee is able to undertake the role effectively with the agreed development plan. A structured plan will be provided to managers undertaking the introduction period.

# 3.7 Managing Redeployment

3.7.1 It is proposed that the provisions of the Council's Managing Redeployment process are incorporated into the scheme. The detail of the process will be reviewed and updated to fit with the scheme and following consultation with trade unions this will be circulated to Staff Governance Committee as a service update.

# 3.8 Benefits of an Internal Movement of Staff / Internal Recruitment Approach

3.8.1 In addition to meeting the aims stated in this report, benchmarking with other organisations (including local authorities), and further research, has highlighted potential additional benefits.

## 3.8.2 Individual Benefits

3.8.2.1 by reducing existing qualification and experience barriers, more role opportunities are available to employees to move across the organisation to fill key roles and develop or continue their careers at Aberdeen City Council;

3.8.2.2 the process is reportedly viewed as fair and transparent by employees and Trade Unions in benchmarked organisations. Recruiting this way provides an objective, transparent and consistent approach to selection.

# 3.8.3 Organisational Capability and Culture Benefits

The approach:

- 3.8.3.1 embeds and reinforces the knowledge, skills and behaviours contained in the capability framework which supports the delivery of the organisational capabilities in the TOM and our Guiding Principles;
- 3.8.3.2 provides varied and flexible career development opportunities to our workforce, enabling employees to develop new skills, knowledge and experience, resulting in a multi-skilled workforce leading to improved outcomes for customers and better talent retention:
- 3.8.3.3 has the potential to break down silos, increasing a One Team, One Council, One City approach and to improve customer service as staff knowledge and understanding is broadened across organisational boundaries;
- 3.8.3.4 encourages managers to consider their workforce requirements and succession planning earlier than is sometimes currently the case shifting the attention of recruiting managers onto development of their teams, thereby demonstrating trust in our staff's ability to perform a range of roles and to develop into the roles that are needed;
- 3.8.3.5 encourages a move to a learning organisation through the formalisation of an introduction period with a development plan; by promoting a manager's role as a mentor and coach and by reducing stigma attached to identifying and addressing personal development needs or technical knowledge and experience gaps;
- 3.8.3.6 creates an environment of increased curiosity as new members of staff offer a fresh perspective and are encouraged to ask questions to support their learning. It also creates an environment where everyone has a role in coaching and mentoring to support each other's learning;
- 3.8.3.7 supports increased self-awareness of knowledge, skills and behaviours and personal attributes or working preferences. As part of the scheme, staff will complete a working preferences assessment and will then be offered a coaching and feedback session. This is a powerful career and personal development tool. It also empowers staff to take responsibility for their own career and professional development and to see viable opportunities for this internally;
- 3.8.3.8 helps to create a high performing workforce with lower sickness absence levels, improved job satisfaction and performance. It will also increase individual and organisational pride by matching an

employee's strengths to those valued by the organisation and required for a specific role.

# 3.8.4 Support to Organisational Efficiency Savings

- 3.8.4.1 the internal movement of staff across the organisation creates a natural turnover, which provides a greater range of opportunities, as well as resultant vacancies, which can further be used as opportunities or put towards efficiency savings;
- 3.8.4.2 the scheme provides a potential for the reduction in agency spend, an alternative use of recruitment costs as well as providing an alternative for staff to VSER.

# 3.9 Digital and Technology

- 3.9.1 Other organisations who have implemented similar internal movement / internal recruitment approaches have benefited from implementing the process with support from a digital tool, to increase self-service, openness and transparency and to reduce manual or administrative intervention where possible.
- 3.9.2 As part of the implementation of the process, Digital and Technology are working in partnership with People & Organisation to develop the digital elements.

## 3.10 Next Steps

- 3.10.1 An implementation group, chaired by the Chief Officer (Organisational Development), will be established and will meet every 4 weeks. Trade Union colleagues will be invited to join. The purpose of the group is to identify issues arising, take decisions in the operational delivery of the scheme and to ensure the process is implemented on time;
- 3.10.2 Communications and engagement will take place promoting the scheme and the potential benefits for all staff and managers and encouraging staff to sign up it is proposed that this is a joint approach with Trade Union colleagues;
- 3.10.3 All recruitment and redeployment will be routed through the new scheme meaning that roles being recruited to will be reviewed by the team as per the process outlined;
- 3.10.4 All current redeployees will be entered in the scheme;
- 3.10.5 All staff undergoing change will be encouraged to sign up to the scheme as a supportive measure;

- 3.10.6 Development and implementation of the digital support mechanism for the process will take place;
- 3.10.7 Guidance on the scheme will be developed for recruiting managers, employees and those administering the scheme.

## 4 FINANCIAL IMPLICATIONS

- 4.1 There may be a 'time to develop' cost associated with the implementation of digital processes.
- 4.2 There will be cost associated with developing any psychometric assessments to undertake the working preferences assessments for employees registered with the scheme.
- 4.3 These costs will be funded from a combination of budgets previously assigned to external recruitment costs and the corporate training budget and can all be met from within the existing revenue budget.
- 4.4 A further cost will be learning and development support to employees for identified development gaps as they move into new roles, as outlined in the workforce plan and workforce development plan, the corporate training budget will be used to support the re-skilling and retraining of staff where appropriate and where it represents best value.

## 5 LEGAL IMPLICATIONS

5.1 It is proposed that the Council's existing redeployment procedures and managing recruitment and selection guidance will be updated to enable the adoption of the proposed new approach to internal recruitment and internal movement of staff. Incorporation of the proposed new approach within existing procedures and processes (which already ensure adherence to duties under the Employment Rights Act 1996 and Equality Act 2010), will ensure compliance with the Council's employment law obligations.

# **6 MANAGEMENT OF RISK**

|           | Risk   | Low<br>(L),<br>Medium<br>(M),<br>High<br>(H) | Mitigation   |
|-----------|--|--|--|
| Financial | The continued application of rigid qualification and | L  | By reducing existing qualification and experience barriers, more |

|          | experience requirements reduces our ability to move people freely around the organisation. This may result in increased costs due to reliance on external recruitment and agency to fill gaps which could have been filled by existing staff. |   | opportunities are available to employees to move across the organisation to fill key roles internally and develop or continue their careers at ACC  |
|----------|---|---|---|
| Legal    | None  | L | None  |
| Employee | Without this scheme the ability to move between jobs is restricted. There is a risk that this could result in increased numbers of staff on redeployment while at the same time there is an inability to fill certain roles.                  | M | The scheme opens up an internal job market which allows greater movement, development and career opportunities. This is likely to result in a greater ability to fill roles internally and improved retention and job satisfaction of valued employees.   |
| Customer | There is a risk that in moving employees into roles where there is a potential gap in skills and experience initially, there may be an impact on customer experience until the employee is fully cognisant with the role.                     | L | Whilst the employee is undertaking their introduction period, ongoing support with all aspects of the role will be provided together with a comprehensive development plan designed to minimise the learning period.  In addition, the scheme seeks to match an individual's strengths and working preferences to roles. This, in turn, makes it more likely that a better match will be achieved resulting in higher performance and greater |

| Environment  | Nana  |   | job satisfaction with resulting impact on customer experience.   |
|--------------|---|---|--|
| Environment  | None  | L | None   |
| Technology   | As with all digital solutions there is a risk that some staff may have difficulty in accessing the tool.  | L | Work is underway with Digital and Technology to ensure the solution is accessible for all staff. Any individual struggling to access will be supported to do so in the first instance. Any individual with additional needs will be supported to access the scheme in an alternative way if necessary by the team. |
| Reputational | Without these internal opportunities we may have an inability to fill skill gaps in areas of growth thus impacting on our reputation as a council in terms of service delivery. | M | A clear and planned approach to internal recruitment and internal movement with a focus on developing skillsets and promoting fluidity and flexibility across the workforce should provide opportunities for existing staff and demonstrate we value our workforce by investing in their development.              |

# 7 OUTCOMES

| Design Princ | Design Principles of Target Operating Model   |  |  |  |  |
|--------------|---|--|--|--|--|
|              | Impact of Report  |  |  |  |  |
| Workforce    | The impact of this proposal is primarily intended to ensure we have the internal capacity to deliver the Target Operating Model. This should, in turn, impact on our ability to deliver on outcomes for our citizens and improve the services delivered to our customers. |  |  |  |  |

# **8 IMPACT ASSESSMENTS**

| Assessment                                   | Outcome        |
|--|----------------|
| Equality & Human Rights Impact Assessment    | Required       |
| Data Protection Impact<br>Assessment         | Required       |
| Duty of Due Regard /<br>Fairer Scotland Duty | Not applicable |

# 9 BACKGROUND PAPERS

None

# **10 REPORT AUTHOR DETAILS**

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## **ABERDEEN CITY COUNCIL**

| COMMITTEE          | Staff Governance  |
|--------------------|---|
| DATE               | 1 October 2019  |
| EXEMPT             | No  |
| CONFIDENTIAL       | No  |
| REPORT TITLE       | Alignment of Working Practices with the Craft Agreement |
| REPORT NUMBER      | OPE/19/378  |
| DIRECTOR           | Rob Polkinghorne  |
| CHIEF OFFICER      | Mark Reilly   |
| REPORT AUTHOR      | John Noble  |
| TERMS OF REFERENCE | 4 and 8   |

## 1. PURPOSE OF REPORT

1.1 The purpose of this report is to inform the Committee on progress made in implementing the recommendation 2.2.6 in audit report AC1602 AW which was to review the Building Services craft agreement and ensure that it was relative to the current working practices.

## 2. RECOMMENDATION

The Committee is requested to:

2.1 Note the report.

# 3. BACKGROUND

3.1 Audit report AC1602 AW reviewed payments being made to Craft Workers in Building Service to determine whether they were compliant with the Craft Workers Agreement entered into in April 2007. The report made several recommendations all, apart from one, have been completed. There is one outstanding recommendation to be completed, Recommendation 2.2.6, and this is currently being progressed through consultation with the trade unions.

- 3.2 Audit Risk & Scrutiny Committee on 26 June 2019, requested a report on this review to the Staff Governance Committee in October 2019.
- 3.3 During the summer of 2019 there have been several informal meetings between management and unions to resolve the outstanding audit recommendation. This is to ensure that the service can deliver 24/7 whilst being fully compliant with the "Working Time Directive".
- 3.4 The service presented to unions five operational areas of the existing agreement that it would like to review, however due to a current national review of craft workers Terms and Conditions (Red Book) the service agreed with the unions to only move forward on two of the areas. These are:
  - a) Introduce digital/electronic working on the call out service this will implement digital/electronic mobile working in the call out service.
  - b) Review existing shift patterns to meet modern operational needs this will allow the service to deliver 24/7 while becoming fully compliant with the working time directive.
- 3.5 Addressing these two areas will complete the remaining audit action.
- 3.6 The service is currently working with the union on developing a staff questionnaire. Once finalised, this will be used in the staff sessions where the service and unions will jointly be engaging with staff.
- 3.7 The service is currently working to the following timeline, and intends to meet the following dates:

Week Commencing 30/9/19 - Meetings (6) with affected staff groups.

Monday 7th October - Paper sent to unions for formal consultation

Friday 18th October - End of formal consultation period

Week commencing 21/10/19 - Outcome of consultation/ implementation details shared with affected staff

## 4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from the recommendations of this report.

#### 5. LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from the recommendations of this report.

# 6. MANAGEMENT OF RISK

| Category     | Risk            | Low (L)<br>Medium (M)<br>High (H) | Mitigation |
|--------------|-----------------|-----------------------------------|------------|
| Financial    | Not applicable. |                                   |            |
| Legal        | Not applicable. |                                   |            |
| Employee     | Not applicable. |                                   |            |
| Customer     | Not applicable. |                                   |            |
| Environment  | Not applicable. |                                   |            |
| Technology   | Not applicable. |                                   |            |
| Reputational | Not applicable. |                                   |            |

# 7. OUTCOMES

| Design Principles of Target Operating Model |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| Impact of Report                            |  |  |  |  |  |  |  |  |
| Governance                                  | Report is submitted to Committee in line with governance in respect of Internal Audit recommendations and compliance with the instruction from the Audit, Risk and Scrutiny Committee. |  |  |  |  |  |  |  |

# 8. IMPACT ASSESSMENTS

| Assessment                                   | Outcome         |
|--|-----------------|
| Equality & Human Rights Impact Assessment    | Not applicable. |
| Data Protection Impact Assessment            | Not applicable. |
| Duty of Due Regard /<br>Fairer Scotland Duty | Not applicable. |

# 9. BACKGROUND PAPERS

Audit AC1602AW Craft Workers Terms and Conditions

# 10. APPENDICES

None

# 11. REPORT AUTHOR CONTACT DETAILS

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## **ABERDEEN CITY COUNCIL**

|                    | 1   |
|--------------------|---|
| COMMITTEE          | Staff Governance Committee                    |
| DATE               | 1 October 2019                                |
| EXEMPT             | No  |
| CONFIDENTIAL       | No  |
| REPORT TITLE       | Corporate Health and Safety April - June 2019 |
| REPORT NUMBER      | GOV/19/380                                    |
| CHIEF OFFICER      | Fraser Bell                                   |
| REPORT AUTHOR      | Colin Leaver                                  |
| TERMS OF REFERENCE | Remit – 4.1 - 4.6                             |

#### 1. PURPOSE OF REPORT

1.1 The report summarises statistical health and safety performance information for the three-month reporting period April – June 2019 to provide the Committee with the opportunity to monitor compliance with health and safety legislation.

## 2. RECOMMENDATION

That the Committee: -

2.1 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 2019) and a review of health and safety activities for the same period. The Reporting of Injuries, Diseases and Dangerous Occurrences 2015 (RIDDOR) puts duties on employers, the self-employed and people in control of work premises (the Responsible Person) to report certain serious workplace accidents, occupational diseases and specified dangerous occurrences (near misses) to the Health and Safety Executive. This duty includes the reporting of incidents which result in an employee being absent from work for 7 days or longer. The information presented takes account of the recent audit of health and safety compliance and reporting to this Committee will demonstrate improvements in performance.

This report addresses the following matters:

- 1. All incidents involving employees and members of the public (serious and minor)
- 2. HSE Reportable Incidents
- 3. Reportable Diseases
- 4. Near Miss Information
- 5. Enforcement Interventions
- 6. Fire Risk Assessment
- 7. Health and Safety Audits
- 8. Compliance Monitoring
- 9. Health and Safety Policies and Guidance

# Incidents (April - June 2019)

3.2 All incident and near miss information in this report has been provided to a Function and Cluster level. The current incident and near miss reporting system does not record organisational units below the Cluster level so it is not possible to split the reported figures further.

## 3.3 **Incident information:**

The following table gives a breakdown of all incidents across all Functions and Clusters in Aberdeen City Council, which are the lowest sized reporting groupings available from the current corporate incident reporting system. For the corresponding period last year there were a total of 181 incidents which shows an increase in this reporting period of 11% from the equivalent reporting period in 2018-19. The figures in brackets at Function level show the figures reported for the period 1 April – 30 June 2018 as a comparison.

| Function/Cluster          | 1. RIDDOR Reportable employee (including absences over 7 days) | 2. Non-<br>RIDDOR<br>reportable<br>employee<br>(absences<br>of 4 to 7<br>days) | 3. Non-<br>RIDDOR<br>reportable<br>employee<br>(absences<br>of 0 to 3<br>days) | 4. RIDDOR<br>Reportable<br>Non-<br>employee | 5. Non-<br>RIDDOR<br>reportable<br>Non-<br>employee | Total |
|---------------------------|--|--|--|---|---|-------|
| AHSCP                     | 1(1)   | 1(0)   | 1(9)   | 0(0)  | 3(10)   | 6(20) |
| Older Adult<br>Services   | 1  | 1  | 1  | 0   | 3   | 6     |
| Younger Adult<br>Services | 0  | 0  | 0  | 0   | 0   | 0     |
| Commissioning             | 0(0)   | 0(0)   | 0(0)   | (0)   | 0(0)  | 0(0)  |
| Commercial & Procurement  | 0  | 0  | 0  | 0   | 0   | 0     |
| Customer                  | 0(0)   | 0(0)   | 4(3)   | 0(0)  | 0(3)  | 4(6)  |
| Customer<br>Experience    | 0  | 0  | 0  | 0   | 0   | 0     |

| Function/Cluster                              | 1. RIDDOR Reportable employee (including absences over 7 days) | 2. Non-<br>RIDDOR<br>reportable<br>employee<br>(absences<br>of 4 to 7<br>days) | 3. Non-<br>RIDDOR<br>reportable<br>employee<br>(absences<br>of 0 to 3<br>days) | 4. RIDDOR<br>Reportable<br>Non-<br>employee | 5. Non-<br>RIDDOR<br>reportable<br>Non-<br>employee | Total    |
|---|--|--|--|---|---|----------|
| Early Intervention and Community Empowerment  | 0  | 0  | 4  | 0   | 0   | 4        |
| Governance                                    | 0(0)   | 0(0)   | 0(1)   | 0(0)  | 0(0)  | 0(1)     |
| Operations                                    | 9(3)   | 7(4)   | 124(101)   | 0(0)  | 50(44)  | 190(152) |
| Operations and Protective Services            | 6  | 3  | 18   | 0   | 3   | 30       |
| Integrated<br>Children and<br>Family Services | 3  | 4  | 106  | 0   | 47  | 160      |
| Place   | 0(0)   | 1(0)   | 1(1)   | 0(0)  | 0(1)  | 2(2)     |
| Strategic Place Planning                      | 0  | 0  | 0  | 0   | 0   | 0        |
| City Growth                                   | 0  | 1  | 1  | 0   | 0   | 2        |
| Resources                                     | 0(0)   | 0(0)   | 0(0)   | 0(0)  | 0(0)  | 0(0)     |
| Corporate<br>Landlord                         | 0  | 0  | 0  | 0   | 0   | 0        |
| Total Apr - Jun                               | 10(4)  | 9(4)   | 130(115)   | 0(0)  | 53(58)  | 202(181) |

- 3.4 The figures increased in column 1 of the table where employees have been absent for 7 days or more. The type of incident type in this reporting period are around slips/trips but don't exhibit any other trend, which a control can be put in place to prevent. The examples are:
  - Employee suffers a muscle injury by turning too quickly.
  - Employee slips in supermarket on wet floor (whilst at work).
  - Employee hurts ankle whilst getting out of van.
  - Employee trips over rug in a drama class whilst stepping back.
  - Employee tripped over an extended leg.
- 3.5 The other area where numbers have increased are in the third column for 0-3 day injuries. This column includes the incidents which involve unacceptable behaviour. Unacceptable behaviours as a category include all instances of verbal and physical threat against an employee from a service user. There is a separate report being presented to this Committee by Integrated Children's and Family Services on this topic area.
- 3.6 Incident causation is detailed in the table below.

| Function/Cluster                                      | Slip, trip, fall | Contact with<br>Machinery | Manual | Struck against | Struck by vehicle | Falls from<br>Height | Struck by<br>Object | Another type of accident | Contact with electricity | Unacceptable behaviour | Total |
|---|------------------|---------------------------|--------|----------------|-------------------|----------------------|---------------------|--------------------------|--------------------------|------------------------|-------|
| AHSCP   | 2                | 0                         | 0      | 0              | 0                 | 0                    | 0                   | 2                        | 1                        | 1                      | 6     |
| Older Adult<br>Services                               | 2                | 0                         | 0      | 0              | 0                 | 0                    | 0                   | 2                        | 1                        | 1                      | 6     |
| Customer  | 1                | 0                         | 0      | 0              | 0                 | 0                    | 2                   | 1                        | 0                        | 1                      | 5     |
| Early<br>Intervention and<br>Community<br>Empowerment | 1                | 0                         | 0      | 0              | 0                 | 0                    | 2                   | 1                        | 0                        | 1                      | 5     |
| Operations  | 30               | 2                         | 8      | 6              | 1                 | 5                    | 16                  | 21                       | 1                        | 100                    | 190   |
| Integrated Children's and Family Services             | 25               | 0                         | 1      | 5              | 0                 | 4                    | 8                   | 15                       | 0                        | 100                    | 158   |
| Operations and Protective Services                    | 4                | 2                         | 7      | 1              | 1                 | 1                    | 8                   | 6                        | 1                        | 0                      | 32    |
| Governance  | 0                | 0                         | 1      | 0              | 0                 | 0                    | 0                   | 0                        | 0                        | 0                      | 1     |
| Total Numbers   | 33               | 2                         | 9      | 6              | 1                 | 5                    | 18                  | 24                       | 2                        | 102                    | 202   |

- 3.7 The largest percentage of incidents reported is related to unacceptable behaviours, which is a range of actions towards employees which the organisation defines as unacceptable. These are defined in the Unacceptable Action Policy as:
  - Aggressive or abusive behaviours;
  - Unreasonable demands; and/or
  - Unreasonable levels of contact.
- 3.8 The report also being presented to this Committee by Integrated Children's and Family Services and this will show how they are identifying the need for training which can assist employees in de-escalating issues quickly.
- 3.9 When an incident is reported the corporate system generates an investigation report which the reporting officer is required to complete. This report highlights categories of criteria which require to be considered including root cause, actions identified and completion dates. These investigation reports are reviewed and where non-compliant the reporting manager is contacted to advise on the need to complete and to be offered assistance with their investigation. For incidents where there is a requirement to RIDDOR report to HSE then the reporting manager is assisted in completing their investigation.

# **HSE Reportable incidents (April - June 2019)**

- 3.10 During the reporting period 10 employees were injured in incidents, which required to be reported to the Health and Safety Executive.
- 3.11 Every RIDDOR incident has been followed up by the corporate health and safety team to get assurance that the correct causation and remedial actions been identified; also, that these remedial actions have been implemented. The checks on all 10 incidents have confirmed that these elements were all completed correctly.

# Incident (reportable employee) frequency rates

| Period – Quarterly | Reportable Incidence rate | Reporting period |
|--------------------|---------------------------|------------------|
| Apr -Jun 2019      | 1.25                      | 2019/20          |

3.12 The above figures are calculated using the formula:

3.13 This figure has increased from the reported figure for the corresponding period last year (Apr – Jun 18) of 0.87 when there were 4 RIDDOR reportable incidents.

## Reportable Diseases

3.14 There were no diseases reportable under RIDDOR; which was also the case in the corresponding reporting period last year.

# **Near Miss Information**

3.13 Many safety activities are reactive, that is, they occur after an injury incident. By reporting near-miss incidents this promotes proactive safety, thereby raising awareness of potential hazards and mitigation strategies before an injury occurs. Recognising and reporting near-miss incidents can significantly improve employee safety and enhance the safety culture.

3.14 The table below shows relevant near miss information for April – June 2019.

| Function   | Cluster                                      | Near Misses<br>Apr-Jun 2019<br>Cluster | Near Misses<br>Apr-Jun 2019<br>Function |
|------------|--|--|---|
| AHSCP      |  |  | 11                                      |
|            | Older Adult Services                         | 11                                     |   |
| Customer   |  |  | 25                                      |
|            | Customer Experience                          | 5                                      | 0                                       |
|            | Early Intervention and Community Empowerment | 20                                     | 0                                       |
| Operations |  |  | 147                                     |
|            | Integrated Children's and Family Services    | 137                                    | 0                                       |
|            | Operations and Protective Services           | 10                                     | 0                                       |
| Place      |  |  | 1                                       |
|            | City Growth                                  | 1                                      |   |
| Total      |  |  | 184                                     |

# 3.15 The table below shows the causation for the numbers of near misses in the table under 3.14.

| Function/Cluster                                | Vandalism | Security | Other | Unacceptable behaviour | Total |
|---|-----------|----------|-------|------------------------|-------|
| AHSCP   | 0         | 0        | 0     | 10                     | 10    |
| Older Adult<br>Services                         | 0         | 0        | 0     | 10                     | 10    |
| Customer  | 1         | 3        | 3     | 16                     | 23    |
| Customer<br>Experience                          | 0         | 1        | 2     | 1                      | 4     |
| Early Intervention and Community Empowerment    | 1         | 2        | 1     | 15                     | 19    |
| Operations                                      | 3         | 19       | 29    | 99                     | 150   |
| Integrated<br>Children's and<br>Family Services | 3         | 19       | 21    | 95                     | 138   |
| Operations and Protective Services              | 0         | 0        | 8     | 4                      | 12    |
| Place   | 0         | 0        | 0     | 1                      | 1     |
| City Growth                                     | 0         | 0        | 0     | 1                      | 1     |
| Total Numbers                                   | 4         | 22       | 32    | 126                    | 184   |

3.16 The overall number of near misses decreased from 246 for the same reporting period last year.

# Regulator interventions (HSE / SFRS)

- 3.17 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 with regard to the way Aberdeen City Council undertake their legal duties.
- 3.18 There was one intervention with HSE in this reporting period. HSE were happy that the work being undertaken to review all of the procedures around this area of work has closed out any issues which were highlighted during their intervention.
- 3.19 There was one intervention with SFRS this reporting period due to their annual audit inspection of care homes in the area. This audit identified an issue which with further discussion with SFRS it was agreed that ACC were already compliant.

# Fire risk assessments

- 3.20 Fire risk assessments are completed on a rolling 5-year programme. A total of 23 fire risk assessments were completed during this reporting period. The overall average compliance score was 91%.
- 3.21 Multi-storey tenanted properties are assessed on a 3-year rolling programme. As part of this programme 5 multi storey blocks were also assessed with an average compliance score of 59%. Each assessment results in an action plan being provided to the relevant Service Areas. Each action in these plans have a risk rating against them detailing the agreed timescales for the actions to be completed. The 4 categories are for works wo be completed within 4 hours, 24 days, 90 days and finally where there is a recommendation for work to be competed, where legal compliance is already achieved but to encourage best practice.
- 3.22 In these 5 action plans there were 118 actions identified across the risk ratings; there were no actions identified in the 4-hour action period. Of the 118 identified there were 65 completed action and 53 which were still within the compliance period. However, in this period there were 17 actions which had passed the compliance date. There is an officer who manages the database for the required actions, and the officer is checking whether these are due to actions not being closed out in database or the work not having been completed. This is currently a manual checking process, but work is planned to include this in the digitalisation of processes. The Corporate Health and Safety Team will also audit this process every quarter to ensure actions are closed out in future in time.

# **Health and Safety Audits**

- 3.23 The overall average audit score for all audits completed in a reporting quarter and for this reporting period was 69%.
- 3.24 The average figure seems to sit on average between 65% and 72%. Currently the report is shared with each auditee and identified senior managers within each cluster. However, work is being undertaken with Business Intelligence through their data forum procedures to enable a recording and reporting system to be developed, which will allow reports to be available identifying actions which have not been completed by the required compliance date. This will allow the Function Health and Safety Groups to scrutinise the reports and hold responsible officers accountable. This should result in improvements to safety management, monitored through health and safety improvement plans.

# **Compliance Monitoring**

3.25 A process of compliance visits has been carried out over the period looking at risk topics such as premises security, personal protective equipment, driver checks, lifting equipment, workplace inspection and work at height. The average score for all compliance visits completed was 84%. Again, the issues identified during these compliance visits need to be implemented and shared to ensure that employees and members of the public's safety is not at risk. The average score for the same period last year was 68%; this score was for different work activities, so it is difficult to reach an exact comparison.

## Health and safety policies and guidance

3.26 The document management system has been in development and has identified 11 policies and procedures which will be reviewed in this next fiscal year. The initial work on an asbestos management plan which will provide the framework for the organisation's management of asbestos is in the first draft stage. This includes an asbestos policy and will be the umbrella document under which each Cluster's asbestos procedure will sit.

## 4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from the recommendations of this report.

# 5. LEGAL IMPLICATIONS

5.1 Health and safety legislation requires that an organisation has a suitably robust safety management system to ensure the health safety and welfare of their employees. Where any incident is of sufficient seriousness there is the potential that the Enforcing Authorities will become involved and carry out their own investigation into the circumstances of the incident. Any investigation could result in prosecution of the organisation and in some cases prosecution of managers and/or employees.

# 6. MANAGEMENT OF RISK

|           | Risk   | Low (L),<br>Medium<br>(M), High<br>(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.  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.  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.  If the Enforcing Authorities take a case to court against Aberdeen City Council for breaches of legislation then it could leave the Council liable to pay any fine or damages imposed and also for the expenses of any subsequent civil claim, which follows where an individual has suffered personal injury. |
| 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 | M                                      | As above.   |

|              | action in the form of notices or prosecution.   |   |   |
|--------------|---|---|---|
| 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 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 | 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                    | A healthy and safe workplace assists the overarching principles of the stretch outcomes within the LOIP by ensuring that resource is directed at the services required by the city. Removing the level of lost resource to the financial penalties incurred through the Civil and Law Courts and from the Regulators will allow the available resource to be best used to ensure funding of the growth sectors of the local economy. |
| Prosperous People                     | The areas reported on within this report allow Clusters a further opportunity to recognise areas which when acted upon can assist with engagement of staff and service users to support the meaningful educational progress of children and young people   |

| Design Principles of Target Operating Model |  |  |
|---|--|--|
|   | Impact of Report   |  |
| Governance                                  | This report is designed to provide a level of assurance to the organisation that the safety management system is working and effective. Where there are issues the understanding that this safety management system has basic functions which are followed to identify any areas for improvement should provide further assurance to the committee and the organisation in general.  |  |
| Workforce                                   | This report identifies area where the workforce could be at risk from hazards, which they encounter in their role. The reporting of incidents and near misses through the electronic reporting system allows trends to be better identified and to allow focus to be placed on areas where there is most need for this focus. This should provide assurance that the likelihood of the risk eventuating is lessened when required actions are implemented. |  |
| Process Design                              | The reporting within this document can identify trends within Clusters or with certain hazards where the process currently followed allows incidents and near misses to occur. A health and safety management system requires investigation to be completed after every near miss and incident to identify where there are both process and behavioural faults.  |  |

# 8. IMPACT ASSESSMENTS

| Assessment                                   |                    |
|--|--------------------|
| Equality & Human Rights Impact Assessment    | EHRIA not required |
| Data Protection Impact Assessment            | Not required       |
| Duty of Due Regard / Fairer Scotland<br>Duty | Not required       |

# 9. BACKGROUND PAPERS

N/A

# 10. APPENDICES

N/A

# 11. REPORT AUTHOR CONTACT DETAILS

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## **ABERDEEN CITY COUNCIL**

| COMMITTEE          | Staff Governance Committee              |
|--------------------|---|
| DATE               | 1 October 2019                          |
| EXEMPT             | No                                      |
| CONFIDENTIAL       | No                                      |
| REPORT TITLE       | Professional Learning for Support Staff |
| REPORT NUMBER      | OPE/19/360                              |
| DIRECTOR           | Rob Polkinghorne                        |
| CHIEF OFFICER      | Graeme Simpson                          |
| REPORT AUTHOR      | Eleanor Sheppard                        |
| TERMS OF REFERENCE | 4                                       |

### 1. PURPOSE OF REPORT

The Staff Governance Committee of 18 June 2019 requested a report detailing the work being undertaken by Integrated Children and Family Services to assist employees to de-escalate issues which can result in unacceptable behaviours being directed towards Pupil Support Assistants. This report aims to provide the assurance requested by Committee.

#### 2. RECOMMENDATIONS

That the Committee:-

- 2.1 note the content of this report; and
- 2.2 instruct the Chief Operating Officer to continue to monitor the impact of the actions detailed in this report and to provide a service update to Members and Trade Union Advisers in one calendar year.

## 3. BACKGROUND

3.1.1 Children and young people display distressed behaviour which can result in unacceptable behaviours for several reasons although the reason for the

distress can be hard to determine. This complexity can be further compounded by a lack of communication or age appropriate social skills. Around 30% of all children and young people are deemed to have an additional support need. Changes in behaviour can indicate to staff that the supports in place are not quite right. Although unacceptable behaviour is widely recognised to reflect a particular need in a child or young person, it is important that staff report incidents and are supported when unacceptable behaviour takes place. This reporting process ensures that valuable learning informs future planning for children and young people.

3.1.2 Trade Union colleagues raised concerns about the general awareness of reporting procedures around a year ago suspecting that some leaders and staff were unaware of the corporate process. As a result the Service worked with Trade Union colleagues to agree the wording of the circular to reiterate the need for accurate reporting and subsequent action. School staff were issued with the circular through normal channels and by Trade Unions at the beginning of session 18/19. It was felt that this would help to gather more accurate data which could be used to support service improvement.

# 3.2.1 Why do Children and Young People Present Unacceptable Behaviours?

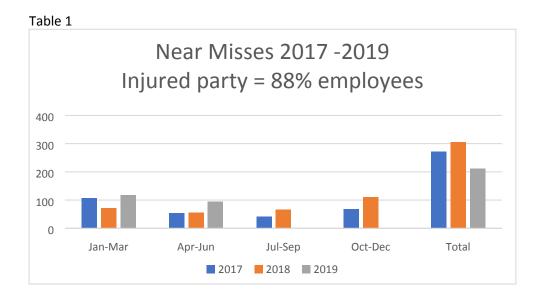
All children and young people are individuals and as such it isn't possible to provide an exhaustive list of reasons why children would present with distressed behaviour, but some reasons include:

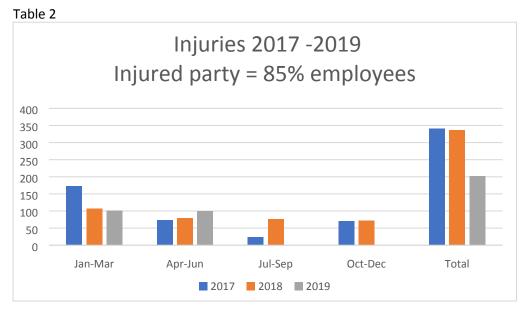
- A need for attention;
- A desire for something tangible;
- A means of escaping something;
- A sensory need:
- An inability to communicate needs to others and associated frustration;
- A mental or physical health need; or
- A need for security/safety or mistrust associated with a traumatic experience.
- 3.2.2 Given that there are a range of reasons for different behaviours it is important that the service continues to take a range of actions to enable the workforce to respond flexibly and proactively to any potential challenges.

# 3.3.1 Making Better Use of Data

Central Health and Safety and Education Officers have worked with Trade Unions over the last few months to agree a monthly report of violent incidents. The agreed format (which illustrated the number of broad types of incident in each school) is shared with Trade Union colleagues on a monthly basis. Trade Unions review the data and raise any issues for clarification with the Chief Education Officer. In addition to seeking answers to any questions the Chief Education Officer works with Quality Improvement Managers to understand and address any emerging trends. All information is shared verbally with Trade Unions in scheduled meetings which take place two weeks after the data has been shared. Although in its infancy this approach is proving helpful and has been well received by Trade Unions who also appreciate the opportunity to approach Quality Improvement Managers with any concerns for members.

3.3.2 In additional to monthly reviews of the data, the Service continues to make comparisons with historical data.





- 3.3.2 The rate of near misses during the first two quarters of 2019 (January-June) is above the trendline set during the previous two years and this will reflect greater awareness and use of corporate procedures for reporting. There were 211 near misses arising from violence or aggression to date in 2019, this compares with 127 incidents in 2018 and 161 incidents in 2017 at the same stage. 88% of near misses in 2019 involved employees.
- 3.3.3 The rate of injuries as a result of violence and aggression increased in comparison to 2018 but is below the rate recorded in 2017. 202 injuries were recorded between January June 2019 which compares with 187 incidents in 2018 and 247 incidents in 2017. Employees were the injured party in 85% of incidents in 2019 to date.
- 3.2.2 Although looking at long term trends are helpful, making effective use of monthly data enables the service to be more proactive. Emerging trends from

monthly reports have already resulted in a range of actions having been taken including:

- Reminding staff of the need to report incidents timeously;
- Working collaboratively with colleagues across Integrated Children and Family Services to address the significant challenges faced by some families:
- Working with school staff teams to better understand behaviours;
- Looking at how best to support the emotional wellbeing of children; and
- Ensuring our staff are supported through debrief and other supports as necessary.

# 3.3.1 **Professional Learning –** The Introduction of ELSA

Following on-going discussions with Trade Unions, there was agreement of a need to offer an in-depth training programme. The Educational Psychology Service were asked to identify an evidence-based programme to empower support staff to enable support children to understand and manage their own behaviours.

- 3.3.2 ELSA, Emotional Literacy for Support Assistants provides a means of upskilling staff to better understand emotional literacy and to enable them to support children to recognise, understand and manage emotions by working with individuals and small groups. Support staff who embark on the programme will be trained by our Educational Psychology team and will receive on-going supervision as they deliver the programme.
- 3.3.3 The programme is wide ranging and includes modules on:
  - Understanding emotional literacy;
  - Understanding self-esteem and how to actively listen and communicate with children;
  - Anger management;
  - How to use social stories (with reference to autism spectrum disorder);
  - Friendship skills/writing therapeutic stories.
- 3.3.4 ELSA takes a problem-solving approach and provides an opportunity for groups of support staff to share ideas through peer support systems. The programme has been used by other Local Authorities and has been found to help children to:
  - feel more supported;
  - develop greater self-awareness;
  - learn to talk about difficulties;
  - develop coping strategies;
  - interact more positively with others:
  - · feel more confident; and
  - manage better in schools.
- 3.3.5 ELSA is available to schools for the first time from August 2019 and represents a significant investment in our support staff.

- 3.3.6 Ongoing delivery of Emotion Coaching
  - Emotion Coaching is an approach whereby adults help children understand emotions and how to regulate them. This strategy helps the child to feel understood and learn the skills to recognise, understand and regulate their emotions. All Educational Psychologists within Aberdeen City (EPS) have been trained in Emotion Coaching by Licette Gus, co-founder of Emotion Coaching UK and this training continues to be available to all schools across Aberdeen City.
- 3.3.7 Emotion Coaching is also rooted in brain science recognising that when people are overwhelmed by emotions, they respond with the emotional parts of their brain. Children and young people find it very difficult to think logically and problem solve, because they don't have much access to these parts of the brain until they are able to calm down first.
- 3.3.8 There is overwhelming evidence that the effective use of Emotion Coaching can lead to:
  - Improved Behaviour: Emotion Coaching strategies, when used by either parents or school staff, can lead to improved behaviour / reduction in disruptive behaviours.
  - Emotional Regulation: Emotion Coaching supports children to process their emotional experiences and develop the skills to self-soothe and solve problems.
  - Academic Attainment: Improved pupil attainment has been recorded within the schools in the UK. Pupils with better emotion regulation are better able to learn.
  - Attachment & Connection: Emotion Coaching can strengthen communication between adult and child and can promote the development of a healthy attachment relationship.
- 3.3.9 Further Training Available from EPS Based on Local Need
  The Educational Psychology Service continues to offer a range of training to
  staff groups depending upon the needs of the school community. Training
  offers are negotiated locally and can include:
  - The Science of Behaviour;
  - Mindsets:
  - Resilience:
  - Looking After Your Own Wellbeing.
- 3.3.10 Education Support Officer Professional Learning for Support Staff
  Support staff often feel frustrated at the limited programme of professional
  learning available to them. Significant attempts have been made to provide a
  tighter programme which takes account of feedback from previous professional
  learning.
- 3.3.11 Identified Training has specific outcomes which relate to:
  - Protecting the dignity, rights and fundamental freedoms of child/ young person, staff and school communities
  - Effective use of de-escalation techniques, enhancing skills for resilience, relationships, knowledge and self esteem

- The use of the National Practice Model, Assessment, Plan and Person-Centred Risk Assessment
- Post incident debriefing and building networks of support
- 3.3.12 The full programme (see appendix A) has been shared with staff and many of the courses are already delivered annually. The focus and impact of the professional learning will be subject to on-going review to ensure that it meets the needs of staff.
- 3.3.13 A range of further training is available through our support services including Autism Outreach and Aspire. This enables staff teams to better understand additional support needs to consider how best to support them within their local context.

# 3.4.1 Quality Improvement and Assurance

The service has reviewed its Quality Improvement model and the use of data will be a more prominent feature in the model being utilised from August. This will include a review of violent incidents as the service works with schools to evaluate performance against Quality Indicator 3.1. This will enable further analysis of the extent to which our schools make effective use of established systems and process to ensure statutory compliance.

# 3.5.1 **Health and Safety Expectations**

In order to realise greater consistency and compliance, a suite of health and safety exemplars are in development. These will include an exemplar school health and safety policy and risk assessments.

## 3.6.1 Person Centred Risk Assessment

Understanding the root cause of behaviours and mitigating any risks is central to our approach as we have evidence that a 'one size fits all' approach to mitigating risks is not effective. School staff are supported to undertake a Person Centred Risk Assessment when the root cause of behaviours is hard to determine and this may include completion of an analysis of behaviour (often to referred to as an ABC to understand what happens immediately before an incident and immediately afterwards) so that patterns can be identified and addressed.

#### 3.7.1 Utilising skills across the Service

There are a number of staff with particular specialism across the city and colleagues are increasingly utilising the skills of key individuals appropriately. An example of this in action would be the utilisation of a member of staff who is training in VIG (Video Interactive Guidance) when it is thought that this approach could help identify the root cause of behaviour. As the central team are making better use of data it has become easier to signpost colleagues to expertise across the city.

3.7.2 The recently published Scottish Government's Trauma Training Framework stipulates the level of training all categories of staff working with children and young people require. Early use of the assessment tool accompanying the guidance clarifies that Pupil Support Assistants will require second level training and this is currently being scoped by the service and will be put in

place over session 2019/2020.

## 4. FINANCIAL IMPLICATIONS

4.1 The expertise of the service is being fully utilised to support sustainable professional learning. All costs are met through established professional learning budgets.

#### 5. LEGAL IMPLICATIONS

- 5.1 The Education (Additional Support for Learning) (Scotland) Act 2004 (as amended) clarifies expectations of staff working with learners with additional support needs. An updated Code of Practice widens the definition of 'additional support needs' to include those with wellbeing needs. This has implications for how we work to support children with emotional needs which may be as a result of trauma or from a mental health need.
- 5.2 The Council also has duties under the Health, Safety and Welfare at Work Act to protect the health, safety and welfare at work of its employees. The professional learning being provided assists in the fulfilment of these duties.

## 6. MANAGEMENT OF RISK

| Category  | Risk   | Low (L)<br>Medium<br>(M)<br>High (H) | Mitigation  |
|-----------|--|--------------------------------------|---|
| Financial | Risk of increase in out of authority placements if staff don't have the skills they require to support children. | M                                    | Training programme in place and Quality Improvement Framework will help evaluate the effectiveness of systems and processes in schools. |
| Legal     | Risk of not meeting statutory obligations for children with additional support needs.                            | M                                    | Quality Improvement Framework will help determine the level of compliance with legislation and enable proactive action to be taken      |
| Employee  | Risk of staff feeling at risk.   | M                                    | Ensuring compliance with agreed procedures to ensure that an incident is used to inform future planning.                                |

| Customer     | Risk of children not<br>being given every<br>opportunity to thrive<br>in their local school | M | Quality Improvement Model will enable proactive action to be taken if agreed processes are not in place. |
|--------------|---|---|--|
| Environment  | N/A   |   |  |
| Technology   | N/A   |   |  |
| Reputational | Risk of schools not being viewed as inclusive   | M | Professional learning offer in place to ensure staff are aware of a range of additional support needs.   |

# 7. OUTCOMES

| Local Outcome Improvement Plan Themes |   |  |
|---------------------------------------|---|--|
|                                       | Impact of Report  |  |
| Prosperous Economy                    | The proposals within this report support the delivery of LOIP Stretch Outcome 1 – 10% increase in employment across priority and volume growth sectors by 2026 as the professional learning offer will enable schools staff to support positive engagement with education and therefore improve their long term life chances. |  |
| Prosperous People                     | The proposals within this report support the delivery of all Children & Young People Stretch Outcomes 3 to 7 in the LOIP as children require to be well supported in school to be able to realise the stretch outcomes identified in the LOIP.  |  |
| Prosperous Place                      | Increasing attainment and achievement through positive engagement with education will help improve the prosperity of Aberdeen City.   |  |

| Design Principles of Target Operating Model |   |  |
|---|---|--|
| Impact of Report                            |   |  |
| Customer Service Design                     | The Professional learning offer is shaped around the current needs of customers and will impact positively. |  |

| Organisational Design      | The offer takes account of the range of expertise across the Council in keeping with the principles of the Target Operating Model.  |
|----------------------------|---|
| Governance                 | The data will be monitored through monthly collaborative meetings with Trade Unions, through established Senior Management meetings and through the Quality Improvement Framework. These will provide sound governance and quality assurance.                 |
| Workforce                  | The professional learning and monitoring arrangements will reflect positively on the workforce due to a quality professional learning offer and mechanism to take action if risks are not mitigated. This will provide a higher level of protection to staff. |
| Partnerships and Alliances | Expertise from NHS Grampian and colleagues in Children's Social Work will be utilised wherever possible to improve the quality of the offer.  |

# 8. IMPACT ASSESSMENTS

| Assessment                                   | Outcome      |
|--|--------------|
| Equality & Human Rights Impact Assessment    | Not required |
| Data Protection Impact Assessment            | Not required |
| Duty of Due Regard /<br>Fairer Scotland Duty | Applicable   |

# 9. BACKGROUND PAPERS

None

# 10. APPENDICES

Appendix A – Professional Learning Programme

# 11. REPORT AUTHOR CONTACT DETAILS

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# Appendix A

| Supporting<br>Learning | Technology:<br>accessibility for<br>all | Supporting<br>Learners |                           | Promoting<br>positive<br>behaviour<br>and<br>relationships | Challenging<br>behaviours:<br>behaviour is<br>communication | Ensuring care<br>welfare and<br>health and<br>safety | Girfec:<br>wellbeing and<br>child protection |
|------------------------|---|------------------------|---------------------------|--|---|--|--|
|                        | Emerging<br>literacy                    |                        | Autism                    |  | Emotion<br>Coaching   |  | Child protection                             |
|                        | Numeracy                                |                        | Dyslexia                  |  | Restorative conversations                                   |  | Mental health                                |
|                        | Play & outdoor<br>learning              |                        | Tourettes                 |  | Wellbeing and resilience                                    |  | First aid                                    |
|                        | Texthelp                                |                        | Motor skills              |  | Strategies & skills   |  | Moving & handling                            |
|                        | How children<br>learn                   |                        | Supporting SQA assessment |  | Emotional<br>literacy ELSA                                  |  | Food hygiene                                 |
|                        |   |                        |                           |  |   |  | Understanding<br>LGBTQ                       |

#### ABERDEEN CITY COUNCIL

| COMMITTEE          | Staff Governance Committee                         |
|--------------------|--|
| DATE               | 1 October 2019                                     |
| REPORT TITLE       | Bridge of Don Academy Asbestos Incident Update and |
|                    | Beachview Court Update                             |
| EXEMPT             | No   |
| CONFIDENTIAL       | No   |
| REPORT NUMBER      | RES/19/386   |
| DIRECTORS          | Steve Whyte  |
| CHIEF OFFICERS     | Mark Reilly/Stephen Booth/John Wilson              |
| REPORT AUTHOR      | Stephen Booth                                      |
| TERMS OF REFERENCE | Purpose 8  |

#### 1. PURPOSE OF REPORT

1.1 The report provides an update on actions taken following an accidental uncontrolled release of asbestos fibres at Bridge of Don Academy during July 2018. In accordance with the instructions of Committee it also provides a background to a separate incident at Beachview Court.

## 2. RECOMMENDATION

2.1 That the Committee note the report.

#### 3. BACKGROUND

- 3.1 On the 31 January 2019 a report was presented to this Committee regarding an asbestos incident at Bridge of Don Academy in July 2018. A link to this report is attached.
- 3.2 The Committee resolved:-
  - (ii) to instruct the Chief Officer Corporate Landlord to (a) provide a service update on the actions taken, and implemented, since this incident and further to the action plan reported to this Committee in January 2019; and (b) to report back to Committee in June 2019 on actions taken to ensure the safety, in so far as is reasonably practicable, of all Council personnel, contractors and members of the public when work involving asbestos is carried out on any Council property.

3.3 A verbal update was provided to the Committee and the Committee resolved:-(i) in respect of item 5 (Asbestos Incident – Bridge of Don Academy), to note the update from the Chief Officer – Corporate Landlord and to request that a service update be circulated within the next few weeks to provide an update on progress to date; with a full report to Committee at its meeting in October 2019.

Then, there was further discussion of asbestos under the health and safety report which was later on the agenda (due to an incident at Beachview Court) and the Committee resolved:-

(i) in respect of the incident at Beachview Court, to note that an update on this would be included in the asbestos report to Committee in October 2019.

# **Bridge of Don Academy**

3.4 The action plan in the appendices updates the remedial actions being undertaken by the Council to satisfy the requirements within HSE's notification of contravention. This is updated in Appendix A.

#### **Beachview Court**

- 3.5 In November 2018 a near miss asbestos incident was reported within a plant room at Beachview Court. A fire door which contained asbestos was found in a bad state of repair, removed from its hinges presenting a possible risk. An internal investigation was undertaken into the incident to establish why the door was off its hinges, why it was in a state of disrepair and why it had not been removed from the property when it was removed from its hinges.
- 3.6 An internal investigation was undertaken with recommendations noted below. The incidence was also reported to the Health and Safety Executive who advised that whilst no breach was found they made some recommendations which were consistent with the Council's own findings. The following remedial actions have been or are in the process of being undertaken. (subsequent actions in bold)
  - a) A process should be put in place by the Asbestos Team to ensure that their instructions are closed out effectively. This should include a method of escalation where instructions are not followed.
    - A schedule of work required to multi-storeys, derived from 6 monthly inspections, Fire Risk Assessment and inspections by Scottish Fire and Rescue are now centrally collated and actions reviewed on a monthly basis.
  - b) Any available asbestos survey should be provided electronically to all relevant contractors on site. This provides evidence that the required health and safety information has been provided. This should include an interpretation of the asbestos information to allow it to be easily comprehended by the contractors.

The team are now using a central database (MODUS) which holds all asbestos information and is accessible remotely. Information will now be available to design teams and building services and can be shared with contractors.

c) The process requires that asbestos containing materials are removed by ACC prior to contractors starting. Where this is not possible a method of documenting this should be in place which will include the contractors' methods of dealing with this. These methods should be reviewed by the asbestos team to ensure they are compliant.

Method statements are submitted to the design team and advice is sought from the asbestos surveyor as required depending on the complexity of the work.

d) If the process to make asbestos containing materials is to encapsulate rather than remove, then the method chosen should be reviewed and approved by the asbestos team. This should all be documented as part of the project paperwork to evidence correct procedures are followed.

The decisions around this are now recorded in the MODUS system.

e) The process of 6 monthly inspections as part of the property factors duties should be in a documented and diarised plan which would allow reporting of compliance and assurance to be given to the organisation.

A programme of inspections is currently being developed by the factor. This will be in place by the end of 2019.

f) The project process requires that there are sufficient site inspections, dependent on the risk; also, that regular project meetings are held with contractors. These visits should be recorded and documented to evidence compliance.

Site inspections are recorded by clerk of works and site progress meetings with the design team and contractor are formally recorded

g) Checks on this compliance should be undertaken by line managers during 1-2-1s.

This is ongoing.

h) All employees who are at risk of being exposed to substances hazardous to health, including asbestos should be provided with the correct standard of RPE and face-fitted to ensure that there is a proper seal achieved when used.

## Asbestos team have necessary RPE.

i) Where the risk exists, all employees should carry this RPE with them to jobs. This RPE is required to be stored in a manner which prevents it from being damaged and allows it to be used when required.

This is not yet in place but being developed by operational teams with expectation that this will be complete during 2019.

## 4. FINANCIAL IMPLICATIONS

- 4.1 There are no current financial implication based on the content of this report.
- 4.2 The bespoke asbestos training provided to frontline services was estimated at a total cost of £23,000 which will be met from existing training budgets. Ongoing refresher training will be required, and a plan will be developed during 2019 to identify future budget requirements.
- 4.3 Service redesigns are currently being considered in all areas of the council. Within the Corporate Landlord Structure the level of resources around asbestos surveyors and inspectors is being reviewed.

#### 5. LEGAL IMPLICATIONS

5.1 The Health and Safety Executive has identified contraventions of health and safety legislation. Aberdeen City Council must now seek to implement the recommendations across all relevant service areas to help ensure full compliance with the relevant legislation.

#### 6. MANAGEMENT OF RISK

|           | Risk           | Low (L),<br>Medium<br>(M), High<br>(H) | Mitigation  |
|-----------|----------------|--|---|
| Financial | Punitive costs | M                                      | Ensure compliance with statutory requirements and internal processes and procedures. Review of the policies and procedures in place, implementation of the proposed action plan, develop accessible single asbestos register and bespoke asbestos training. |
| Legal     | Prosecution    | Н                                      | Ensure compliance with statutory requirements and internal processes and procedures. Review of the policies and procedures in place, implementation of the proposed action plan, develop accessible single  |

|              |  |     | asbestos register and bespoke asbestos training.  |
|--------------|--|-----|---|
| Employee     | Civil claims if industrial disease diagnosed in future | M   | Ensure compliance with statutory requirements and internal processes and procedures. Review of the policies and procedures in place, implementation of the proposed action plan, develop accessible single asbestos register and bespoke asbestos training. |
| Customer     | N/A  | N/A | N/A   |
| Environment  | N/A  | N/A | N/A   |
| Technology   | N/A  | N/A | N/A   |
| Reputational | Loss of good reputation                                | M   | Ensure compliance with statutory requirements and internal processes and procedures. Review of the policies and procedures in place, implementation of the proposed action plan, develop accessible single asbestos register and bespoke asbestos training. |

# 7. OUTCOMES

| Design Principles of Target Operating Model |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
|   | Impact of Report  |  |  |  |  |  |
| Governance                                  | The changes required from both the HSE and internal ACC investigations will result in the organisation meeting the required statutory requirements by developing and improving the internal processes and procedures of the Clusters who face the risk of exposure to asbestos. |  |  |  |  |  |

#### 8. **IMPACT ASSESSMENTS**

| Assessment             | Outcome      |
|------------------------|--------------|
| Equality & Human       | N/A          |
| Rights Impact          |              |
| Assessment             |              |
| Data Protection Impact | Not required |
| Assessment             |              |
|                        |              |
| Duty of Due Regard /   | N/A          |
| Fairer Scotland Duty   |              |

#### 9. **BACKGROUND PAPERS**

None

#### **APPENDICES** 10.

Appendix A: Action Plan

#### 11. **REPORT AUTHOR CONTACT DETAILS**

Name: Stephen Booth Title: Corporate Landlord
Email: stbooth@aberdeencity.gov.uk

Tel: (01224) 522675

# APPENDIX A

| HSE contravention   | ACC Investigation Recommendation   | Responsible officer  | Remedial Actions   | Completion date   | Update   |
|---|--|--|--|-------------------|--|
| You should review the arrangements for commissioning refurbishment surveys to ensure that the survey is suitable and sufficient for the work to be carried out and for ensuring that there is adequate review if the scope of work changes. | Review process to ensure refurbishment surveys reflect the scope of works to be carried out. | lan<br>Cowling/lan<br>Perry (Client<br>Function)           | Prior to the incident occurring, procedures were being revisited. Design Function to provide detailed scope of work to allow relevant survey information to be obtained. Should scope of works change, Design Function to seek additional information from Asbestos Management Team. Asbestos Management Team to review asbestos report prior to issuing to Design Function. | Complete – Jan 19 | Within the Non-Housing projects we now receive requests for surveys via the 'Modus AIMs 5' database system where all correspondence is noted and held for any future audits or inspections. All Architects requesting an asbestos survey use this requesting method. |
|   |  | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | Procedures have been reviewed. The asbestos and issuing of variations procedures have been amended to highlight to the Contract Administrator and Contractor the need to refer   | Complete – Jan 19 |  |

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| HSE contravention | ACC Investigation Recommendation   | Responsible officer                              | Remedial Actions   | Completion date    | Update   |
|-------------------|--|--|--|--------------------|--|
|                   |  |  | to the asbestos report where<br>the scope of the works<br>changes, and to obtain from<br>the Client (Asbestos<br>Management Teams) further<br>information if required.   |                    |  |
|                   |  | Graham<br>Williamson<br>(Contractor<br>Function) | The pre-construction information provided by the client/design team is reviewed and incorporated within the Construction Phase Plan (CPP) to ensure safe working practices are identified and carried out on site.  Any amendment to the design during the construction phase, will require the CPP to be reviewed and updated as necessary. | Complete – Jan 19  |  |
|                   |  |  |  |                    |  |
|                   | Review how refurbishment survey information is presented to those attending site to ensure understanding before commencement of works. | lan<br>Cowling/lan<br>Perry (Client<br>function) | Believed to be Contractor Function and therefore no action considered necessary.   | No action required | On receipt of the survey undertaken by external surveyors they are checked prior to being forwarded the architect staff. |

| HSE contravention | ACC Investigation Recommendation               | Responsible officer  | Remedial Actions   | Completion date    | Update  |
|-------------------|--|--|--|--------------------|---|
|                   |  |  |  |                    | Only if requested will the asbestos officer be in attendance at any prestart meeting.   |
|                   |  | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | Believed to be Contractor<br>Function and therefore no<br>action considered necessary  | No action required | As above  |
|                   |  | Graham<br>Williamson<br>(Contractor<br>Function)           | Information is presented to those on site during the induction process and within the Risk Assessment/Method Statement (RAMS).                                       | Complete – Jan 19  |   |
|                   |  |  |  |                    |   |
|                   | Review risk assessments and method statements. | lan<br>Cowling/lan<br>Perry (Client<br>Function)           | Believed to be Design<br>Function therefore no Action<br>required. If required contract<br>administrator can request<br>assistance from Asbestos<br>Management Team. | No action required | In practise the asbestos surveyor is regularly supporting the Design team in this area. |
|                   |  | Neil<br>Esslemont/   | There is already a requirement for the Principal Designer/Contract Administrator to review the   | No action required | See above   |

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| LICE control continue | ACC Investigation        | Daananaikla   | Demodial Actions                                      | Commission deta    | Lladata                        |
|-----------------------|--------------------------|---------------|---|--------------------|--------------------------------|
| HSE contravention     | ACC Investigation        | Responsible   | Remedial Actions                                      | Completion date    | Update                         |
|                       | Recommendation           | officer       |   |                    |                                |
|                       |                          | John Buthlay  | contractor's method                                   |                    |                                |
|                       |                          | (Design       | statements and where                                  |                    |                                |
|                       |                          | Function)     | considered appropriate                                |                    |                                |
|                       |                          |               | consult with the Asbestos                             |                    |                                |
|                       |                          |               | Management Team within Housing Assets, therefore      |                    |                                |
|                       |                          |               | no action required.                                   |                    |                                |
|                       |                          |               | no action required.                                   |                    |                                |
|                       |                          | Graham        | RAMS are written in the first                         | Complete - Jan 19  |                                |
|                       |                          | Williamson    | instance to be site specific                          | Joinpieto Guii 10  |                                |
|                       |                          | (Contractor   | for the contract and are                              |                    |                                |
|                       |                          | `Function)    | reviewed if the scope of                              |                    |                                |
|                       |                          | ,             | work changes, a change to                             |                    |                                |
|                       |                          |               | materials used or working                             |                    |                                |
|                       |                          |               | practices and when a design                           |                    |                                |
|                       |                          |               | change occurs during the                              |                    |                                |
|                       |                          |               | construction process.                                 |                    |                                |
|                       |                          |               |   | N1 41 1            | ) A //                         |
|                       | Competent asbestos       | lan           | The Asbestos Management                               | No action required | When an                        |
|                       | officer (advisor) to be  | Cowling/lan   | Team is commissioned at                               |                    | asbestos                       |
|                       | included at design stage | Perry (Client | the outset of ever project                            |                    | survey is                      |
|                       | of project.              | Function)     | and the scope of works is discussed at this stage and |                    | requested this is made via the |
|                       |                          |               | the relevant survey                                   |                    | Modus system.                  |
|                       |                          |               | information is made                                   |                    | Prior to                       |
|                       |                          |               | available.  |                    | employing the                  |
|                       |                          |               |   |                    | services of the                |
|                       |                          |               |   |                    | asbestos                       |
|                       |                          |               |   |                    | surveyor, the                  |
|                       |                          |               |   |                    | request is                     |
|                       |                          |               |   |                    | checked that it                |

| HSE contravention | ACC Investigation Recommendation                                | Responsible officer  | Remedial Actions   | Completion date                        | Update  |
|-------------------|---|--|--|--|---|
|                   |   |  |  |  | contains all required information and design drawings etc. Any issues noted and referred back to the project architect and are recorded of the Modus system. This ensures we have a complete overview of the survey request |
|                   |   | Neil Esslemont/ John Buthlay (Design Function) Graham Williamson | The Asbestos Management Team is commissioned at the outset of every project. No additional action is considered necessary. Function of design team | No action required  No action required |   |
|                   |   | (Contractor<br>Function)   |  |  |   |
|                   | Competent asbestos advisor to be at pre-site meeting to discuss | lan<br>Cowling/lan   | Asbestos Officers are available to attend as   | No action required                     | In practise this requirement will depend on the   |

| HSE contravention | ACC Investigation Recommendation  | Responsible officer  | Remedial Actions   | Completion date     | Update   |
|-------------------|---|--|--|---------------------|--|
|                   | scope of works and available when required through the life cycle of the project. | Perry (Client<br>Function)                                 | requested by the project administrator.  |                     | project and the risks associated.  |
|                   |   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | An Asbestos Officer does not currently attend pre-start meetings. These meetings follow a formal structure dealing with contractual issues and therefore it is not considered necessary for an asbestos officer to attend these meetings, therefore no action required. The Asbestos Management Team is available throughout the life of the project and currently provide support and advice to the Principal Designer/Contract Administrator and Contractor. | No action required  | If the project involves works to asbestos containing materials, i.e. encapsulation or removal, then a separate dedicated technical meeting is held with the Contractor, Contract Administrator and Asbestos Management Team to review the works. |
|                   |   | Graham<br>Williamson<br>(Contractor<br>Function)           | Believed to be Client/Design<br>Function and therefore no<br>action considered necessary   | No action required  |  |
|                   |   |  |  |                     |  |
|                   | Consideration to be given on implementing a checklist for work                    | lan<br>Cowling/lan   | Believed to be Contractor<br>Function and therefore no<br>action considered necessary  | No action required. |  |

| HSE contravention  | ACC Investigation Recommendation  | Responsible officer  | Remedial Actions  | Completion date                               | Update   |
|--|---|--|---|---|--|
|  | arrangements before intrusive works is to be carried out.   | Perry (Client<br>Function)                                 |   |   |  |
|  |   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | Believed to be Contractor<br>Function and therefore no<br>action considered necessary   | No action required                            |  |
|  |   | Graham<br>Williamson<br>(Contractor<br>Function)           | Checklist to be developed.  | Completed                                     |  |
| The procedures for dealing with accidental disturbance and damage to asbestos are not sufficiently robust to be effective. The level of training provided to managers and supervisors is not adequate to ensure that the correct procedures are followed. The level of training and information provided should be improved to ensure there is a robust system for | Review all existing procedures for dealing with potential asbestoscontaining materials – disturbed and undisturbed. | (Client<br>Function)                                       | Procedures are in place but, require to be formalised to outline to end users actions to be taken in the event of a potential accidental disturbance and or damage to asbestos. | February 2019  To be changed to November 2019 | New draft procedures are now in place and are being consulted on with unions and practitioners. These were discussed at a meeting in September 2019 and it is planned that they will be formally signed off in October 2019. |

| HSE contravention   | ACC Investigation Recommendation | Responsible officer  | Remedial Actions   | Completion date   | Update   |
|---|----------------------------------|--|--|---|--|
| dealing with such occurrences. A more robust system with a means of ensuring that all the relevant action is taken should be implemented. |                                  |  |  |   |  |
|   |                                  | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | An additional procedure relating to the potential accidental disturbance of asbestos has been drafted and implemented. All members of the Design Team have previously attended an asbestos awareness course. All will attend refresher training. | Procedure Implemented.  Refresher training arranged for April 2019. | All members of the Design Teams have now attended asbestos awareness refersher training. Arrangements are made to ensure that all new members of the Design Teams also attend this training. |
|   |                                  | Graham<br>Williamson<br>(Contractor<br>Function)           | Existing procedures have been reviewed and agreement reached with EIS/GMB/Unison/Unite unions. Initial Building Services asbestos process reminder delivered to front line staff.  | Complete  | New procedure delivered initially during team meetings. Follow up delivery via external training provider 98.5%  |

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| HSE contravention | ACC Investigation Recommendation  | Responsible officer  | Remedial Actions   | Completion date                       | Update  |
|-------------------|---|--|--|---------------------------------------|---|
|                   |   |  | Agreed process to be delivered to staff at team meetings   | Original date<br>January/ February 19 | complete by 13 <sup>th</sup> September 2019. Procedure embedded in Small task Risk Assessment Notebook 90.32% completed to date.                                |
|                   |   |  |  |                                       |   |
|                   | Ensure correct level of training on the management of asbestos is delivered to responsible persons involved in the client, design and contract sides of projects. | lan<br>Cowling/lan<br>Perry (Client<br>Function)           | No action required as Asbestos team are adequately trained and refresher training is carried out at appropriate intervals. | No Action Required.                   |   |
|                   |   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | All members of the Design Team have previously attended an asbestos awareness course. All will attend refresher training.  | Complete                              | All members of<br>the Design<br>Teams have<br>now attended<br>asbestos<br>awareness<br>refersher<br>training.<br>Arrangements<br>are made to<br>ensure that all |

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| HSE contraver | ntion | ACC Investigation Recommendation  | Responsible officer                              | Remedial Actions  | Completion date   | Update  |
|---------------|-------|---|--|---|-------------------|---|
|               |       |   |  |   |                   | new members<br>of the Design<br>Teams also<br>attend this<br>training.  |
|               |       |   | Graham<br>Williamson<br>(Contractor<br>Function) | Bespoke Asbestos Awareness training in place and being delivered to Building Services frontline staff, union and others services. | Almost Complete   | 98.5% Building Services employees will have attended external Asbestos training provider by 13th September 2019. Total 473, Booked 466. 36 Design team, 5 Corporate H&S and 7 union work colleagues have also attended. |
|               |       | Defeads as too less to a less   | 1  | All relevent off and the state of   | Outstand of Paris | Otill to be   |
|               |       | Refresher training for all line management on compliance with the CDM2015 regulations to ensure that all tasks, | lan<br>Cowling/lan<br>Perry (Client<br>Function) | All relevant officers to attend appropriate CDM training/ refresher training.   | Outstanding       | Still to be actioned by end 2019  |

| HSE contravention | ACC Investigation Recommendation   | Responsible officer  | Remedial Actions  | Completion date   | Update  |
|-------------------|--|--|---|---|---|
|                   | regardless of size, are planned correctly.   |  |   |   |   |
|                   |  | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | All members of the team have received APS accredited training on CDM 2015, but a refresher course should be arranged to further enhance the knowledge base.                           | Outstanding   | Still to be actioned.   |
|                   |  | Graham<br>Williamson<br>(Contractor<br>Function)           | All Building Services supervisory staff hold a current Site Management Supervisory Training Scheme (SMSTS) qualification, and specific staff hold a Principal Designer qualification. | Complete.  Refresher training for Principal Designer to be arranged for April 2019, incorporated with Design Team | All required<br>supervisory<br>employees,<br>currently hold<br>SMSTS<br>qualification                       |
|                   |  |  |   | N 41 1 1  | NA (1) 1  |
|                   | Ensure all information is provided to frontline employees / sub-contractors to ensure that the task is carried out safely. | lan<br>Cowling/lan<br>Perry (Client<br>Function)           | Believed to be Contractor<br>Function and therefore no<br>action considered necessary   | No action required  | Within the individual contractors access to the Modus Data Base we have updated the information as follows; |

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| HSE contravention | ACC Investigation Recommendation | Responsible officer  | Remedial Actions  | Completion date    | Update  |
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|                   |                                  |  |   |                    | When a contractor views the indvidual property asbestos information they are automatically allowed access to a front page'dashboard 'that indicates where asbestos has been found or is presumed to be located. |
|                   |                                  | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | Contractor Function and therefore no action considered necessary  | No action required |   |
|                   |                                  | Graham<br>Williamson<br>(Contractor<br>Function)           | Information is presented, for planned work, to those on site during the induction process and within the Risk Assessment/Method Statement (RAMS). | Complete           |   |

|          | HSE contravention   | ACC Investigation Recommendation   | Responsible officer                              | Remedial Actions  | Completion date    | Update   |
|----------|---|--|--|---|--------------------|--|
|          |   | Build on existing asbestos training to increase knowledge and understanding  | lan<br>Cowling/lan<br>Perry (Client<br>Function) | Agree. Additional Training to be arranged as and when considered necessary. | Ongoing.           | Training requirements continue to be reviewed.   |
| <b>!</b> |   |  | Neil Esslemont/ John Buthlay (Design Function)   | Agree. Additional Training to be arranged as and when considered necessary. | Ongoing.           | All members of the Design Teams have now attended asbestos awareness refersher training. Arrangements are made to ensure that all new members of the Design Teams also attend this training. |
|          |   |  | Graham<br>Williamson<br>(Contractor<br>Function) | Third party accredited bespoke asbestos training being delivered.           | June 19            | Training now delivered to514 employees.  |
|          |   |  |  |   |                    |  |
|          | Prior to construction activity beginning a clear plan to segregate the construction work from other activities should have been | Review all asbestos procedures in each Service Area to ensure that coordination planning is included. This should have a | lan<br>Cowling/lan<br>Perry (Client<br>Function) | Design Function and therefore no action considered necessary                | No action required |  |

| HSE contravention  | ACC Investigation Recommendation                                  | Responsible officer  | Remedial Actions   | Completion date | Update |
|--|---|--|--|-----------------|--------|
| drawn up. There should not have been unauthorised access inside the work area and if necessary alternative security arrangements should have been implemented to avoid the need for Facilities staff to access the area. Effective arrangements to coordinate the various parties with an interest in the project should have been put in place. | method to ensure that the identified issues have been closed out. |  |  |                 |        |
|  |   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | Procedure relating to the Design Team's evaluation and monitoring of the Contractor's measures to prevent unauthorised access has been made more robust. | Complete.       |        |
|  |   | Graham<br>Williamson<br>(Contractor<br>Function)           | System in place for Building Services.   | Complete        |        |

| HSE contravention  | ACC Investigation Recommendation  | Responsible officer  | Remedial Actions  | Completion date                    | Update   |
|--|---|--|---|------------------------------------|--|
| In reviewing your procedures following an incident you should also consider the arrangements for communicating information to the relevant parts of the organisation to ensure that the information reaches those who may be affected. | Toolbox talk to improve line management incident/near miss recording and reporting. | (Client<br>Function)                                       | Procedures are in place but, require to be formalised to outline to end users actions to be taken in the event of a potential accidental disturbance and or damage to asbestos.     | Outstanding – was<br>February 2019 | Covered in new combined procedure  |
|  |   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | A procedure detailing the action required by the Design Team when we are advised that there could potentially have been a disturbance of asbestos has been drafted and implemented. | Complete                           |  |
|  |   | Graham<br>Williamson<br>(Contractor<br>Function)           | Toolbox talks have been delivered and will be repeated on a regular basis.  | Complete - June 19                 | Building Services Small Task Risk Assessment Notebook containing Generic Emergency Procedure for incidents and |

| HSE contravention | ACC Investigation Recommendation  | Responsible officer  | Remedial Actions   | Completion date     | Update  |
|-------------------|---|--|--|---------------------|---|
|                   |   |  |  |                     | Asbestos Disturbance Emergency Procedure delivered to 90.32% of frontline employees |
|                   | Introduce an emergency  | lan  | Believed to be a   | No action required  |   |
|                   | Introduce an emergency sequential checklist to be completed to ensure correct procedures are complied with.                     | Cowling/lan Perry (Client Function)                        | Design/Contractor Function and therefore no action considered necessary. | No action required. |   |
|                   |   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | Not considered necessary as new procedure to be adopted has been issued. | No action required. |   |
|                   |   | Graham<br>Williamson<br>(Contractor<br>Function)           | Has been developed.  | Completed           |   |
|                   |   |  |  |                     |   |
|                   | Ensure strong communication links are maintained between the Client, Principal Designer and Principal Contractor and facilitate | lan<br>Cowling/lan<br>Perry (Client<br>Function)           | Agree. Asbestos<br>Management Team are<br>available to assist.           | Ongoing.            | In practise Asbestos surveyor is regularly advising design team                     |

| HSE contravention | ACC Investigation Recommendation   | Responsible officer  | Remedial Actions  | Completion date | Update |
|-------------------|--|--|---|-----------------|--------|
|                   | frontline employees/<br>sub-contractor's<br>awareness of where it is<br>known or strongly<br>suspected that<br>asbestos-containing | Ollidei  |   |                 |        |
|                   | materials are present.   | Neil<br>Esslemont/<br>John Buthlay<br>(Design<br>Function) | CDM 2015 was introduced with an aim to improve liaison between Client, Principal Designer, Designer, Principal Contractor, Contractor and to enhance communication between all parties to ensure health and safety. This is currently carried out by way of meetings at various stages of the design and construction process and is imbedded in existing procedures. It places a duty on Principal Contractors/ Contractors to consult and engage with workers, front line employees and subcontractors so that construction work can be carried out without risks to health and safety. | Ongoing         |        |

| HSE contravention | ACC Investigation Recommendation | Responsible officer                              | Remedial Actions   | Completion date | Update  |
|-------------------|----------------------------------|--|--|-----------------|---|
|                   |                                  | Graham<br>Williamson<br>(Contractor<br>Function) | Communication links are in place and are being strengthened and developed. | Complete        | Asbestos working group meetings are being refocussed to create overview of activities and identify future improvements or gaps. |