

# Public Document Pack



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

Trade Union Advisers: 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 03 December 2019

## **STAFF GOVERNANCE COMMITTEE**

The Members of the **STAFF GOVERNANCE COMMITTEE** are requested to meet in **Council Chamber - Town House** on **TUESDAY, 10 DECEMBER 2019 at 2.00 pm.**

FRASER BELL  
CHIEF OFFICER - GOVERNANCE

### **B U S I N E S S**

#### **NOTIFICATION OF URGENT BUSINESS**

1.1 There are no items at this time

#### **DETERMINATION OF EXEMPT BUSINESS**

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

#### **DECLARATIONS OF INTEREST**

3.1 Members are requested to declare any interests (Pages 3 - 4)

#### **DEPUTATIONS**

4.1 None at this time

### **MINUTE OF PREVIOUS MEETING**

5.1 Minute of Previous Meeting of 1 October 2019 (Pages 5 - 8)

### **COMMITTEE PLANNER**

6.1 Committee Business Planner (Pages 9 - 14)

### **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 LGV Driver Retention/Recruitment - OPE/19/454 (Pages 15 - 20)

### **COUNCIL POLICIES AFFECTING STAFF**

10.1 Gender Based Violence Policy - RES/19/420 (Pages 21 - 36)

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

11.1 Corporate Health & Safety Quarterly Update - July to September 2019 - GOV/19/418 (Pages 37 - 48)

11.2 EAS Scheme / Occupational Health / Sickness Absence Six Monthly report - RES/19/463 (Pages 49 - 66)

Website Address: [www.aberdeencity.gov.uk](http://www.aberdeencity.gov.uk)

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

## **DECLARATIONS OF INTEREST**

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

I declare an interest in item (x) for the following reasons .....

*For example, I know the applicant / I am a member of the Board of X / I am employed by...* and I will therefore withdraw from the meeting room during any discussion and voting on that item.

### **OR**

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

### **OR**

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

- (a) a devolved public body as defined in Schedule 3 to the Act;
- (b) a public body established by enactment or in pursuance of statutory powers or by the authority of statute or a statutory scheme;
- (c) a body with whom there is in force an agreement which has been made in pursuance of Section 19 of the Enterprise and New Towns (Scotland) Act 1990 by Scottish Enterprise or Highlands and Islands Enterprise for the discharge by that body of any of the functions of Scottish Enterprise or, as the case may be, Highlands and Islands Enterprise; or
- (d) a body being a company:-
  - i. established wholly or mainly for the purpose of providing services to the Councillor's local authority; and
  - ii. which has entered into a contractual arrangement with that local authority for the supply of goods and/or services to that local authority.

### **OR**

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

- is applying for a licence, a consent or an approval
- is making an objection or representation
- has a material interest concerning a licence consent or approval
- is the subject of a statutory order of a regulatory nature made or proposed to be made by the local authority.... and I will therefore withdraw from the meeting room during any discussion and voting on that item.

## STAFF GOVERNANCE COMMITTEE

ABERDEEN, 1 October 2019. Minute of Meeting of the STAFF GOVERNANCE COMMITTEE. Present:- Councillor Allan, Convener; and Councillors Cameron, Copland, Delaney, Graham, Hutchison, Macdonald, Avril MacKenzie (as substitute for Councillor Houghton) and Wheeler (as substitute for Councillor Reynolds).

Trade Union Advisers present:- Ron Constable and Carole Thorpe (EIS); Brenda Murdoch and David Willis (GMB); George Ferguson and Kenny Luke (UNISON); Joe Craig and Mishelle Gray (UNITE).

The agenda and reports associated with this minute can be viewed [here](#).

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

### DECLARATIONS OF INTEREST

1. There were no declarations of interest.

### MINUTE OF PREVIOUS MEETING OF 18 JUNE 2019

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

#### The Committee resolved:-

to approve the minute as a correct record.

### COMMITTEE BUSINESS PLANNER

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

#### The Committee resolved:-

- (i) to note the reason for the reporting delay in relation to item 8 (EAS Scheme/Occupational Health/ Sickness Absence six monthly report);
- (ii) in respect of item 10 (Policy Review), to note that there were no policies to be reported; and
- (iii) to otherwise note the planner.

## STAFF GOVERNANCE COMMITTEE

1 October 2019

### **NEW APPROACH TO INTERNAL RECRUITMENT AND INTERNAL MOVEMENT OF STAFF - RES/19/371**

4. With reference to article 5 of the minute of its previous meeting, the Committee had before it a report by the Director of Resources which sought approval of a new approach to internal recruitment and internal movement of staff across the Council.

**The report recommended:-**

that the Committee –

- (a) 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
- (b) 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.

**The Committee resolved:-**

- (i) to approve the recommendations;
- (ii) to note that the Chief Officer - Organisational Development would circulate details of the external recruitment costs and current redeployment figures to Members of the Committee; and
- (iii) to instruct the Chief Officer - Organisational Development to submit an update report on the new approach to internal recruitment and internal movement of staff to this Committee in one year.

### **ALIGNMENT OF WORKING PRACTICES WITH THE CRAFT AGREEMENT - OPE/19/378**

5. With reference to article 8 of the minute of the Audit, Risk and Scrutiny Committee of 26 June 2019, the Committee had before it a report by the Chief Operating Officer which provided an update on the progress to review the Building Services craft agreement and to ensure that it was relative to the current working practices.

**The report recommended:-**

that the Committee note the report.

**The Committee resolved:-**

- (i) to note that officers had provided assurances that there would be a degree of flexibility in terms of the timescales for the formal consultation period;
- (ii) to instruct the Chief Officer – Operations and Protective Services to determine whether Trade Unions had been notified of the timescales for formal consultation and that a response in this regard be circulated to Members and Trade Union advisers; and

**STAFF GOVERNANCE COMMITTEE**

1 October 2019

(iii) to otherwise note the report.

**CORPORATE HEALTH & SAFETY QUARTERLY UPDATE APRIL TO JUNE 2019 - GOV/19/380**

6. 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 outlined statistical health and safety performance information for the three-month reporting period April – June 2019 in order that the Committee had the opportunity to monitor compliance with health and safety legislation.

**The report recommended:-**

that the Committee scrutinise and review health, safety and wellbeing policy, performance, trends and improvements.

**The Committee resolved:-**

- (i) that in relation to incident (reportable employee) frequency rates at section 3.11 of the report, that officers incorporate benchmark figures from other local authorities in future reports, if available; and
- (ii) to otherwise note the report.

**PROFESSIONAL LEARNING FOR SUPPORT STAFF - OPE/19/360**

7. With reference to article 7 of the minute of its previous meeting, the Committee had before it a report by the Chief Operating Officer which provided information on the work being undertaken by Integrated Children and Family Services to assist employees to de-escalate issues which could result in unacceptable behaviours being directed towards Pupil Support Assistants.

**The report recommended:-**

that the Committee –

- (a) note the content of this report; and
- (b) 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.

**The Committee resolved:-**

to approve the recommendations.

**STAFF GOVERNANCE COMMITTEE**

1 October 2019

**BRIDGE OF DON ACADEMY ASBESTOS INCIDENT UPDATE AND BEACHVIEW COURT UPDATE - RES/19/386**

8. With reference to article 3 of the minute of its previous meeting, the Committee had before it a report by the Director of Resources which provided an update on actions taken following an accidental uncontrolled release of asbestos fibres at Bridge of Don Academy during July 2018 and a separate incident at Beachview Court.

**The report recommended:-**

that the Committee note the report.

**The Committee resolved:-**

- (i) to instruct officers to circulate details to Members in relation to Respiratory Protective Equipment (RPE), specifically (1) why policies and procedures were not yet in place; and (2) whether there was a system in place to check the condition of the equipment;
  - (ii) that 'Asbestos Incidents' be added to the agenda as a standing item for three committee cycles, noting that if there were no incidents of this nature, a report would not be required; and
  - (iii) to otherwise note the report.
- **COUNCILLOR YVONNE ALLAN, Convener.**



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<b>STAFF GOVERNANCE COMMITTEE BUSINESS PLANNER</b>								
The Business Planner details the reports which have been instructed by the Committee as well as reports which the Functions expect to be submitting for the calendar year.								
Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
		<b>10 December 2019</b>						
Asbestos Incidents	SGC 01/10/19 - To request that Asbestos Incidents be added as a standing item for three committee cycles, noting that if there were no incidents of this nature, a report would not be required		Stephen Booth	Corporate Landlord	Resources	Purpose 8	R	There have been no incidents this cycle therefore there is no requirement for a report
Corporate Health & Safety Quarterly Update	To present the quarterly update for July to September 2019		Colin Leaver	Governance	Governance	4.2		
EAS Scheme / Occupational Health / Sickness Absence six monthly report	<p>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.</p> <p>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.</p>		Neil Yacamini	Organisational Development	Resources	4.2		



	1	2	3	4	5	6	7	8	9
	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
2	LGV Drivers Recruitment and Retention	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		Paul McPherson	Operations and Protective Services	Operations	Purpose 4 / 2.1		
9									
10	<b>03 February 2020</b>								
11	Risk Register - People and Organisation	To report annually on the cluster risk register		Isla Newcombe	Organisational Development	Resources	GD 7.4		
12	Asbestos Policy	To seek approval of the Asbestos Policy		Vikki Cuthbert	Governance	Governance	3.1		
13	Asbestos Incidents	SGC 01/10/19 - To request that Asbestos Incidents be added as a standing item for three committee cycles, noting that if there were no incidents of this nature, a report would not be required		Stephen Booth	Corporate Landlord	Resources	Purpose 8		
14	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		Keith Tennant / Mary Agnew	Organisational Development	Resources	1.3 and Purpose 8		
15	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 Development	Resources	3.1		
16	<b>30 March 2020</b>								

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	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
2									
17	Asbestos Incidents	SGC 01/10/19 - To request that Asbestos Incidents be added as a standing item for three committee cycles, noting that if there were no incidents of this nature, a report would not be required		Stephen Booth	Corporate Landlord	Resources	Purpose 8		
18	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 Development	Resources	3.1		
19	<b>09 June 2020</b>								
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 Development	Resources	3.1		
21	EAS Scheme / Occupational Health / Sickness Absence six 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		Neil Yacamini	Organisational Development	Resources	4.2		
22	Employee Assistance Scheme Annual Report	To present the annual Employee Assistance Programme Annual report		Neil Yacamini	Organisational Development	Resources	4.2		
23	Annual Committee Effectiveness Report	To present the annual committee effectiveness report		Isla Newcombe	Organisational Development	Resources	GD 7.5		
24	<b>29 September 2020</b>								
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 Development	Resources	3.1		
26	Internal Recruitment and Internal Movement of Staff	SGC 01/10/19 - To instruct the Chief Officer - Organisational Development to submit an update report on the new approach to internal recruitment and internal movement of staff in one year's time		Isla Newcombe	Organisational Development	Resources	2.1		
27	<b>24 November 2020</b>								

	1	2	3	4	5	6	7	8	9
2	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
28	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 Development	Resources	3.1		

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## ABERDEEN CITY COUNCIL

<b>COMMITTEE</b>	Staff Governance Committee
<b>DATE</b>	10 December 2019
<b>EXEMPT</b>	No
<b>CONFIDENTIAL</b>	No
<b>REPORT TITLE</b>	LGV Driver Retention/Recruitment
<b>REPORT NUMBER</b>	OPE/19/454
<b>DIRECTOR</b>	Rob Polkinghorne/Andy Macdonald
<b>CHIEF OFFICER</b>	Mark Reilly/Isla Newcombe
<b>REPORT AUTHOR</b>	Paul McPherson
<b>TERMS OF REFERENCE</b>	Purpose 4 / Remit 2.1

### 1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to inform the Committee of the progress relating to LGV Driver recruitment and retention for Waste & Recycling Services and the mitigating actions being taken to alleviate the shortage of drivers which was experienced in late 2018.

### 2. RECOMMENDATION

- 2.1 It is recommended that the Committee note the improvements made in reducing the amount of driver vacancies within the Waste Service and agree that no further action is required at this stage.

### 3. BACKGROUND

#### Background

- 3.1 A Service Update was circulated in October 2018 which highlighted that the Waste & Recycling Service was facing difficulty recruiting LGV Drivers, this was followed by a joint report to Committee in March 2019 from the Roads and Waste & Recycling Services on the same issue. The Committee requested that a further report was brought to Committee detailing progress made.

- 3.2 The Waste & Recycling Service has a daily requirement for 49 LGV drivers to run the waste and recycling collection services and an establishment of 60 LGV Driver posts.
- 3.3 At that time, the service was running with 14 LGV Driver vacancies and relied on agency drivers to keep the service running.

### **Current Position**

- 3.4 As at September 2019, the number of driver vacancies has vastly reduced and the number of applicants for vacant posts has increased. The service has been running with an average of 4-6 driver vacancies which is considered to be a “normal” turnover rate of staff for a service of this size and nature. This is the lowest vacancy level the service has had for several years.
- 3.5 There are several activities and circumstances that have occurred which have contributed to this improvement. These include:
- Continuous open advert to maximise the opportunity for potential applicants to apply throughout the period
  - Increased profile of the Waste & Recycling Service due to press coverage of the recruitment shortages, following the Committee Service Update in October 2018
  - Increased and focused online and digital media advertising using social media including the Council’s Facebook jobs pages.
  - Emphasis on promoting the additional benefits of working with the Council – adverts included information about pension benefits, daytime working and short haul driving
  - The national cost of living pay award from 1 April 2019 resulted in a positive salary increase for the roles.
  - Training and development of existing staff – existing refuse loaders were offered the opportunity for career progression to train to become drivers. Four refuse loaders expressed an interest and two have taken advantage of this and are currently being trained to become drivers. One further member of staff has also shown interest and it is planned to continue to encourage existing staff to take up this opportunity.
- 3.6 Following the press coverage at the end of 2018, an unprecedented level of interest was received for driver vacancies.

### **Next Steps**

- 3.7 Despite the recent success and improvement, it is important that the focus remains on recruitment and retention within the service. Waste Operations continues to work with colleagues in People and Organisation to develop initiatives to retain existing staff and to attract new staff.
- 3.8 These include:
- An emphasis on the new internal recruitment / internal movement of staff scheme – RE.CR.UIT, which focuses on moving our internal resource to our



areas of demand, identifying, supporting and developing staff across the organisation who may be interested in a move to these roles and / or who 'match' the key skills, experience or 'fit' for LGV driving roles, offering re-training opportunities where required. Only where the new scheme does not produce any suitable candidates will external recruitment.

- Consideration of an open day at Altens East to showcase the high-quality facilities and vehicle fleet that ACC has, which would be a benefit both to internal and external candidates.
- Continue to promote roles to existing staff as an internal programme, using case studies of staff that have made the transition to showcase, and providing a rolling programme of training.
- Investigating the availability of further funding and the potential to offer training opportunities to staff in other Council services.
- Using other non-digital methods of advertising, e.g. distribution of flyers/ posters to public spaces such as leisure centres, libraries, doctor's surgeries, lorry parks, etc.
- As part of our commitment to the Armed Forces Covenant, promote our opportunities to make those leaving the armed forces, reserve forces and cadet forces aware of these opportunities.
- Contacting contractors that are engaged on local projects that are coming to an end to raise awareness of LGV employment opportunities at ACC.
- Reviewing establishment numbers as part of the Service's working practices review.
- Further promotion of the non-financial benefits of working for ACC – employee benefits, pension, annual leave, training, etc.
- Investigation of a "job bank" which could reduce the time taken to recruit to vacancies and subsequently further reduce reliance on agency staff.

## **Summary**

- 3.9 The Service has now resolved the recruitment issues faced last year. The high profile story in the press last year made a significant difference to the interest in the LGV vacancies within the service, and this, coupled with the targeted hard work put in by the staff from the service supported by colleagues in People & Organisation has reaped results. The training of existing staff has also been a success and we see this as a valuable way of succession planning for the future and will continue to explore ways of funding this.
- 3.10 One of the options that was put forward as a potential solution to the issues faced was to consider the introduction of a recruitment and retention incentive payment to encourage external candidates to work within the Council.
- 3.11 The only group of staff in the Council where a recruitment and retention incentive payment scheme are used currently is for teachers. This takes the form of a combination of a 'golden hello' and 'golden handcuff' scheme, which provides candidates with an incentive payment (equivalent to approximately 10% of salary) on commencement of employment with the Council with a further retention payment on completion of three years' service.

3.12 Having considered this as an option, it has been determined that due to the success of the actions taken as outlined within this report that there is not a requirement to introduce incentive payments at this stage. The team will continue to keep recruitment as a priority for the service and monitor the situation and should the number of vacancies rise above manageable levels, additional steps will be taken to increase activity on this issue including investigation into the potential for financial incentives.

#### 4. FINANCIAL IMPLICATIONS

##### Waste & Recycling

4.1 When there are driver vacancies there is a requirement to cover these with agency staff or by overtime working. The agency staff are mainly used to cover the vacant posts; however, agency staff are also employed to cover periods of sickness/ unplanned absence or peak holiday periods. Use of agency staff is carefully controlled and these agency costs are within the current overall staffing budget for the service.

4.2 The introduction of any financial incentive would require to be offset by a corresponding financial benefit.

#### 5. LEGAL IMPLICATIONS

##### 5.1 Waste & Recycling

5.1.1 Provision of the waste and recycling service is a statutory function of the Council in discharging its duties as the Waste Collection Authority. Due to the nature of the service it cannot run below its minimum staffing levels as doing so would mean the Council failing to undertake its statutory duty to uplift waste.

#### 6. MANAGEMENT OF RISK

	Risk	Low (L), Medium (M), High (H)	Mitigation
<b>Financial</b>	Overtime required to complete routes where insufficient drivers are available.	Low	Managing available resources efficiently and work carried out to recruit more permanent staff. Control of agency staff use.
<b>Legal</b>	N/A	Low	
<b>Employee</b>	Increased pressure on existing staff to work	Low	Manage personal circumstances and drivers' hours to ensure staff can

	additional hours or take on extra work		accommodate these requests.
<b>Customer</b>	Refuse and recycling routes not completed. Business customers and householders do not receive their service.	Medium	Enlist agency staff or existing staff asked to work overtime (drivers hours allowing). Where possible divert resources from other less-essential tasks.
<b>Environment</b>	Overflowing bins and waste on streets.	Low	Enlist agency staff or existing staff asked to work overtime (drivers hours allowing).
<b>Technology</b>	N/A	Low	
<b>Reputational</b>	Risk of adverse publicity due to non-collection of waste and increase in litter/fly-tipping and overflowing bins. Risk to city reputation as a tourist attraction.	Medium	Enlist agency staff or existing staff asked to work overtime (drivers hours allowing).

## 7. OUTCOMES

<b>Design Principles of Target Operating Model</b>	
	<b>Impact of Report</b>
<b>Customer Service Design</b>	Decreased use of agency staff means service provided to customer will be of improved quality due to permanent staff who are more experienced and have a better understanding of the service.
<b>Workforce</b>	Improved morale within team if staff are employed and workforce is stable.

## 8. IMPACT ASSESSMENTS

<b>Assessment</b>	<b>Outcome</b>
<b>Equality &amp; Human Rights Impact Assessment</b>	Not required
<b>Data Protection Impact Assessment</b>	Not required

<b>Duty of Due Regard / Fairer Scotland Duty</b>	N/A
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**9. BACKGROUND PAPERS**

N/A

**10. APPENDICES**

None

**11. REPORT AUTHOR CONTACT DETAILS**

Name Paul McPherson  
Title Waste Collection Service Manager  
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Tel 01224 387601

## ABERDEEN CITY COUNCIL

<b>COMMITTEE</b>	Staff Governance
<b>DATE</b>	10 December 2019
<b>EXEMPT</b>	No
<b>CONFIDENTIAL</b>	No
<b>REPORT TITLE</b>	Gender Based Violence policy
<b>REPORT NUMBER</b>	RES/19/420
<b>DIRECTOR</b>	Steven Whyte
<b>CHIEF OFFICER</b>	Isla Newcombe
<b>REPORT AUTHOR</b>	Keith Tennant
<b>TERMS OF REFERENCE</b>	Purpose of Committee 5 Remit of Committee 3.1

### 1. PURPOSE OF REPORT

- 1.0 The purpose of this report is to seek approval for the attached Gender Based Violence policy.

### 2. RECOMMENDATION

- 2.1 That the Committee approves the attached Gender Based Violence policy

### 3. BACKGROUND

- 3.1 A report to the Staff Governance Committee of 3 September 2018 indicated that the Council would explore the merit of producing an employment policy dealing with the effects of violence against women, following a request from the trade union Unison.
- 3.2 The Interim Chief Officer – People and Organisation (in post at the time) was asked to consider the request and report back to the Committee on whether such a policy was required and if so to arrange to produce a document for consideration.

- 3.3 The report also mentioned that the Council was assessing possible participation in the 'Equally Safe at Work' pilot employer accreditation programme, which is concerned with addressing gender inequality and violence against women.
- 3.4 It has since been confirmed that the Council was accepted to join the pilot group of councils undertaking the accreditation programme and has been progressing with this during the year, through the application of an action plan approved by 'Close the Gap', (the overseeing organisation). This has involved various activities including policy review, data gathering, awareness raising and training.
- 3.5 The aim of the programme is to support employers in reviewing workplace culture and ensuring that policies and practices are enhanced to address the barriers that women face at work. The potential benefits of participation include having a wider range of skills, experiences and perspectives; being able to recruit from a wider talent pool; increased employee retention rates and enhanced performance of the public-sector equality duty.
- 3.6 The Council is committed to ensuring gender equality in the workplace and preventing violence against women and being a part of the 'Equally Safe at Work' programme will assist in meeting these aims. It also recognises the link between women's labour market inequality, violence against women and wider gender inequality. The organisation is aiming to create a supportive environment for victims and survivors of violence to encourage disclosure, and to foster a culture of zero-tolerance of violence against women.
- 3.7 There is evidence to support a correlation between gender equality at work and improved business performance. There is also evidence of the benefits of providing flexible working and the gains where women's under-used skills are more effectively utilised, particularly in areas where there are concentrations of females in certain jobs.
- 3.8 One of the criteria of the 'Equally Safe at Work' programme is the development of an employment policy covering violence against women. This therefore accords with the Unison request mentioned in 3.1 above.
- 3.9 It was confirmed by the Chief Officer – Organisational Development that there was a need for such a policy in the Council, in line with our involvement in the 'Equally Safe at Work' programme. It should indirectly assist with improving staff performance, attendance and help reduce labour turnover.
- 3.10 Having a policy in place will provide employees with defined routes to disclose that they are experiencing gender-based violence and allow for a discussion with a manager (or appropriate other) to agree relevant support measures to keep the employee safe at work and to assist them more generally in relation to the difficulties they may be facing. The attached document has therefore been compiled for consideration by Committee.
- 3.11 The new corporate policy template has been used with the headings populated with appropriate wording. Sections on manager and employee responsibilities have been added to the document detailing what is expected of each, as well

as a section on core principles. The requirements of the 'Equally Safe at Work' programme have also been considered including a definition of gender-based violence, a statement confirming zero-tolerance, mention of confidentiality and reference to the management of perpetrators.

- 3.12 If approval is given, the policy will be implemented, and appropriate communication undertaken to ensure that employees and managers are aware of its content. A separate set of guidance notes will accompany the policy giving fuller details on its application. The guidance notes have been developed in consultation with the trade unions and the Equality Ambassadors Network and have been through CMT.
- 3.13 The guidance notes will include the routes and process for disclosing gender-based violence; advice on identifying gender based violence; risk assessment and safety planning; possible measures to ensure an employee remains safe in the workplace and other general support; details of external agencies employees can consult for support and advice; and the management of perpetrators of gender based violence.
- 3.14 At the Staff Governance Committee of 18 March 2019, it was noted that there was a general interest in a 'safe leave' provision which would offer employees experiencing domestic abuse time off to access help and support without it affecting their finances or using annual leave. It was requested that this be investigated as part of the work being undertaken on the violence against women policy and then reported back to Committee.
- 3.15 This was considered as part of the development of the policy and it was decided to include provision for paid time off for employees experiencing gender-based violence of up to 3 days' special leave.
- 3.16 The purpose of the leave would be to allow for time off requirements an employee has in relation to practical arrangements directly linked to their experience of gender-based violence e.g. attending an appointment with a support organisation to seek advice in relation to domestic abuse; arranging for alternative accommodation where it has been necessary to move home due to gender-based violence; or participating in a police investigation into the gender-based violence as the victim. Special leave could have been used for this purpose prior to this policy being developed, but this provision will give managers and staff more clarity in relation to its availability.
- 3.17 It is a decision for the Council how much paid special leave is offered. It is considered that 3 days is appropriate to begin with, subject to review in future, if this is thought to be too low. It should be noted that such leave is not commonly offered in the UK at present. Countries such as Canada, Australia and New Zealand offer between 5 and 10 days paid leave as a national policy. Offering such leave is one of the criteria for the Gold level of the Equally Safe at Work employer accreditation, rather than the Bronze level, which the Council is currently working towards.
- 3.18 It should be noted that the reason for the leave will be recorded as 'special leave' on the Council's system, for reasons of confidentiality and to avoid any

possible stigma associated with applying for the leave. Details of the process of applying for the leave will be contained in the guidance notes.

- 3.19 At Committee on 3 September 2018 the Convenor also proposed that a wider review in respect of violence in the workplace be considered. Members should note that there already exists a ‘Violence and Abuse Towards Employees policy’ which is concerned with service user/members of the public violence against employees.
- 3.20 This policy is part of the Health and Safety suite of policies and therefore its review would be the responsibility of the Governance Function. Accordingly, the Chief Officer – Governance has been informed of the Convenor’s proposal and will arrange for that policy to be checked as to its fitness for purpose and reviewed if necessary, (with Committee informed of the outcome). If it is identified that a revised policy is needed or wider measures required, this will be the subject of a future Committee report.

#### **4. FINANCIAL IMPLICATIONS**

- 4.1 Offering employees up to 3 days paid leave for practical arrangements related to gender-based violence, will have a financial implication for the Council, with this being an expansion of the current special leave provisions. As the likely take up of the provision is unknown, it is not possible to quantify the cost of offering this leave in terms of lost productivity. Its use will be monitored once in place.

#### **5. LEGAL IMPLICATIONS**

- 5.1 There are no direct Legal implications arising from the recommendations of this report, although having a policy in place on gender-based violence will assist the Council in meeting its general and specific duties under the Equality Act.

#### **6. MANAGEMENT OF RISK**

<b>Category</b>	<b>Risk</b>	<b>Low (L) Medium (M) High (H)</b>	<b>Mitigation</b>
<b>Financial</b>	Potential financial risk if there were instances of gender-based violence occurring in the workplace that were not addressed, meaning that harassment and other claims against the Council could occur,	M	The approval of this new policy will help to mitigate this risk, helping to ensure that the Council’s welfare and health and safety responsibilities to employees are met reducing the chances of cases and tribunals arising.



	which can be costly if a case is lost at tribunal.		
<b>Legal</b>	There is a risk of the Council not fully meeting its responsibilities under the Equality Act if the policy were not implemented.	M	The approval of this new policy will help the Council to meet its general and specific duties under the Equality Act.
<b>Employee</b>	Managers and employees not being fully aware of their responsibilities in relation to gender-based violence in relation to work.	M	The approval of this new policy will help to ensure that managers and employees are fully aware of their responsibilities in relation to gender-based violence and work.
<b>Customer</b>	There are no customer related risks.	N/A	N/A
<b>Environment</b>	There is no environmental risk.	N/A	N/A
<b>Technology</b>	There is no technological risk.	N/A	N/A
<b>Reputational</b>	Potential reputational damage risk if cases of gender-based violence were to occur in the workplace that were not addressed, which could result in negative publicity for the Council if employment tribunals were to occur.	M	The approval of this new policy will help to mitigate this risk, helping to ensure that the Council's welfare and health and safety responsibilities are met and reduce the chance of tribunal cases occurring.

## 7. OUTCOMES

<b>Design Principles of Target Operating Model</b>	
	<b>Impact of Report</b>
<b>Workforce</b>	Links to the 'Workforce' design principle in that having a policy in place that provides support to victim-survivors of gender-based violence should assist in ensuring that the Council has an engaged workforce contributing positively to its outcomes and delivery of services to customers. It should also assist in

	contributing to a positive culture and hence with the retention of staff.
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## 8. IMPACT ASSESSMENTS

Assessment	Outcome
<b>Equality &amp; Human Rights Impact Assessment</b>	Full EHRIA required. No adverse equality or human rights issues were identified from the assessment.
<b>Data Protection Impact Assessment</b>	Not required
<b>Duty of Due Regard / Fairer Scotland Duty</b>	Not applicable

## 9. BACKGROUND PAPERS

Equally Safe at Work employer accreditation programme handbook

## 10. APPENDICES

Appendix 1 – Gender Based Violence policy

## 11. REPORT AUTHOR CONTACT DETAILS

Name Keith Tennant  
 Title Policy and Advice Officer  
 Email Address ktennant@aberdeencity.gov.uk  
 Tel 01224-523094

# Gender Based Violence Policy

Approved by Committee on  
2019 with an implementation date of 2019

## Document Control

<b>Approval Date</b> Calibri bold 12pt	- Calibri Regular12pt
<b>Implementation Date</b>	
<b>Policy Number</b>	
<b>Policy Author(s) and Owner</b>	
<b>Approval Authority</b>	
<b>Scheduled Review</b>	
<b>Changes</b>	

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## 1. Purpose Statement

- 1.1 The main purpose of this policy is to provide support to employees who are experiencing gender-based violence (GBV), which is defined in 8.1 below.
- 1.2 The Council recognises that GBV is a serious issue which is prevalent in all sections of society and has the potential to affect any employee of the Council as a victim-survivor. The Council has a duty to ensure the health, safety and welfare of its employees at work and seeks to support and assist employees experiencing problems arising from GBV.
- 1.3 GBV can adversely impact on an employee's work performance and attendance, and ultimately this can influence service provision, hence the need for a policy covering this area.
- 1.4 By increasing awareness of the signs of GBV and providing a supportive working environment, the Council can help employees experiencing such violence to increase their safety and to make changes in their home or work life to help them to adjust positively to their circumstances and construct lives free from abuse. This in turn can indirectly contribute to organisational efficiency through having supported and engaged employees.
- 1.5 The Council is committed to providing a work environment where employees can disclose concerns relating to GBV in a safe and confidential setting and seeks to foster a culture of zero tolerance towards GBV.
- 1.6 Through communication and briefing the Council aims to raise awareness and support managers to enable safe disclosure by employees of GBV and to put in place appropriate employee support.
- 1.7 Any support measures implemented will be monitored to ensure that they are reasonable in relation to the impact on the employee's situation and to enable the maintenance of a balance between the welfare of the victim-survivor of GBV and the continuation of effective service provision.

## 2. Application and Scope Statement

- 2.1 The policy applies to all employees of the Council. It is concerned with supporting employees who are victim-survivors of GBV to help ensure the health safety and welfare of employees at work. Whilst it is acknowledged that GBV is experienced mostly by women, any person of any gender identity or sexual orientation can experience this.
- 2.2 It aims to provide reasonable and appropriate support to victim-survivors, foster a culture of zero-tolerance towards GBV and encourage disclosure by employees. It also aims to

ensure issues relating to GBV are managed effectively and that help is provided to employees to access support.

2.3 It is also concerned with managing employees who are perpetrators of GBV and helping those who wish to change their behaviour.

2.4 It aligns with the Council's Guiding Principle of 'valuing each other', confirming a commitment to ensuring everyone is treated with dignity and respect and supported by the organisation and by colleagues.

### 3. Core Principles

3.1 Disclosures of GBV will be dealt with promptly and confidentially with victim-survivors of GBV treated with dignity and respect, and account taken of cultural and equality related needs, in accordance with the Council's Guiding Principles.

3.2 Appropriate support will be provided to victim-survivors of GBV to ensure their safety in the workplace and accommodation of their needs.

3.3 Efforts will be made to signpost victim-survivors of GBV to relevant external agencies that can offer information, support and advice.

3.4 A decision of a victim-survivor of GBV not to disclose abuse experienced will be respected, with barriers to disclosure recognised.

3.5 Known instances of GBV occurring in the workplace will be appropriately addressed through the Council's procedures.

3.6 Anonymized data will be gathered on disclosures of GBV for monitoring purposes.

3.7 As the impact of GBV can be prolonged, appropriate support for victim-survivors will be applied for as long as is necessary.

3.8 Where an employee who is a known perpetrator of GBV is willing to address their behaviour, efforts will be made to provide appropriate support to enable positive change.

### 4. Responsibilities

4.1 Chief Officers are responsible for the application of the policy and associated guidance within their service delivery remit to help embed a culture of health, safety and wellbeing.

4.2 Line managers have responsibility for supporting the wellbeing of the employees they manage to enable a healthy workplace. Specifically, they should:

- Create an environment where employees are aware of this policy and associated guidance and feel able to seek help and support.
- When responding to a disclosure of GBV treat employees with dignity and respect.
- Provide flexible workplace support tailored to meet the circumstances of each individual, taking account of the needs they may have, including considering adjustments to working arrangements, in line with service provision.
- Be conscious not to make judgements or to provide counselling themselves and not feel that they are responsible for resolving an employee's issue.
- Be as supportive as possible of the employee including signposting them to appropriate professional services, examples of which are contained in the guidance.
- Ensure that disclosures of GBV by an employee are treated confidentially, except where there is a belief that there may be a risk of harm to others, including harm to children.
- Have an awareness of the signs of GBV and of the barriers to disclosure by employees of GBV.
- Complete a form, as contained in the guidance notes, to record anonymously disclosures of GBV for statistical monitoring purposes only.
- Appropriately manage employees who are perpetrators of GBV in accordance with the accompanying guidance and provide help to those who wish to change their behaviour.

#### 4.3 Employees have a responsibility to:

- Familiarise themselves with the contents of this policy and associated guidance.
- Co-operate with the requirements of the policy where it is being applied to them.
- Inform line management if they witness an incident of GBV at work.
- Behave in a supportive manner towards colleagues who are victim-survivors of GBV.

4.4 A breach or misuse of this policy may result in the potential use of a corporate procedure e.g. disciplinary procedure.



4.5 Non-compliance with this policy should be reported to the employee's line manager.

4.6 Any feedback on the policy or suggestions for improvement can be communicated to the policy author or owner in the first instance.

## 5. Special Leave

5.1 The Council can provide employees experiencing GBV with up to 3 days paid special leave per annum.

5.2 The purpose of the paid leave would be to allow for time off requirements an employee has in relation to practical arrangements directly linked to their experience of GBV e.g. an appointment with a support organisation in relation to domestic abuse.

5.3 Full details on this special leave provision, including the application process, are contained in the accompanying guidance notes.

## 6. Supporting Procedures & Documentation

6.1 Accompanying guidance on GBV has been put in place to support adherence to this policy.

6.2 The routes for disclosing GBV are contained in the accompanying guidance.

6.3 The policy also links to;

- Managing Diversity and Equality policy
- Managing Bullying and Harassment procedure
- Managing Grievances procedure
- Managing Discipline procedure
- Employee Code of Conduct
- The Council's Guiding Principles

## 7. Policy Statement/s

7.1 The policy is not creating any specific regulations or requirements other than what is stated under section 4 and 5 above.

## 8. Definitions

8.1 Gender-Based Violence can be defined as domestic abuse, sexual harassment, stalking, sexual assault and rape and so-called 'honour based' violence with an explanation of each, based on guidance from 'Close the Gap', detailed below (this is not an exhaustive list): -

8.11 Domestic abuse is a pattern of controlling, coercive, threatening, degrading and/or violent behaviour, including sexual violence by a partner or ex-partner.

8.12 Sexual harassment is unwanted conduct of a sexual nature, which is intended to, or has the effect of, violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment e.g. unwelcome physical contact, sexual comments, inappropriate and sexist jokes, and displaying sexually graphic pictures.

8.13 Stalking is a persistent and unwanted attention that aims to curtail freedom. It is defined as two or more incidents of behaviour directed towards a victim-survivor which causes physical or psychological harm, or fear for the safety of the victim-survivor e.g. following a person, watching or spying on them or forcing contact with them through any means, including social media.

8.14 Sexual assault can be defined as any behaviour of a sexual nature which is unwanted and that takes place without consent or any reasonable belief of consent. Sexual assault covers sexual contact and behaviour that is unwanted, ranging from touching and sexual activity involving physical contact to penetration. Rape is when any person with a penis penetrates another person (whether intentionally or recklessly) against their will, either vaginally, anally or orally.

8.15 So-called 'honour based' violence is a form of violence and abuse that is committed to protect family and community honour. It is the belief that family and community honour is rooted in women's behaviour, appearance and sexuality and is to be guarded by men. It includes restricting women from doing certain things that are perceived as going against culture, family, community and religion, and can involve physically and sexually harming a woman, forcing marriage and isolating them from friends and family. It can also involve controlling finances, preventing women from learning the language of their new country, restricting movement and using their immigration status to threaten to send them away.

## 9. Risk

9.1 The policy is designed to reduce compliance, operational, financial and reputational risks. Compliance risk is the risk that may prevent the Council adhering with laws and regulations. Operational risk is concerned with the risk of disruption to Council services

and service users. Financial risk is where unexpected costs could be incurred that have not been budgeted for. Reputational risk concerns the threat of adverse media coverage for the organisation which could affect its standing in the community.

9.2 By having a GBV policy in place this will assist the Council in meeting its public sector equality duties by helping to comply with the Equality Act and hence reducing the risk of legislative non-compliance. Operational risks will be reduced, as if employees who are victims-survivors of GBV are supported in the workplace through this policy, this should assist with performance and attendance levels at work and meeting service requirements. Financial risks should be mitigated by this policy as it should help ensure that any instances of GBV in the workplace are addressed, meaning that harassment and other claims against the Council should not occur (which can be costly). The policy will also contribute towards reducing reputational risks as it should help ensure cases of GBV do not occur in the workplace meaning that negative publicity through employment tribunals should not happen. It will also enhance the Council's reputation as an employer of choice and one which applies good employment practices.

9.3 There have been no unintended effects, consequences and risks identified resulting from the introduction of the policy.

9.4 The risks identified will be managed and mitigated through application of the policy across the Council. This will be undertaken by ensuring the policy is readily available to managers and employees and that support is provided from People and Organisation in the interpretation of the policy and associated guidance, where required.

9.5 The policy will also support the organisation's "PREVENT" obligations as part of the CONTEST framework by helping to ensure that victims-survivors of GBV are supported in the workplace, which should help to maintain their health and wellbeing and reduce their vulnerability. This should in turn make employees less susceptible to radicalization and being drawn into terrorist organisations.

## 10. Policy Performance

10.1 The main factor that will determine whether the policy is effective and adds the value intended will be the use made of it by victims-survivors of GBV, including the supporting provisions.

10.2 The effectiveness of the policy will be measured through gathering data on the overall number of disclosures made by employees of GBV and by collecting any feedback from users of the policy.

10.3 The Chief Officer – Organisational Development will decide where and when data is reported on the effectiveness of the policy, ensuring confidentiality is maintained.

## 11. Design and Delivery

- 11.1 The policy links to the 'Workforce' design principle of the Target Operating Model (TOM) in that it is concerned with organisational culture and the promotion of equality in the workplace, with GBV being an issue experienced most by women in society. Having measures in place to address and mitigate the effects of GBV will contribute to the achievement of equality in the workplace. It also accords with the Council's Guiding Principles, particularly in relation to the commitment to valuing and supporting staff.
- 11.2 The policy also links to the 'Prosperous Place' theme in the Local Outcome Improvement Plan (LOIP) which indicates that all people in the City are entitled to live in a manner in which they feel safe and protected from harm and supported where necessary. All citizens are equally entitled to enjoy these aspirations, including employees of the Council. The support measures included in the accompanying guidance in relation to GBV will help to contribute to this objective.

## 12. Housekeeping and Maintenance

- 12.1 The Policy will be reviewed annually and any necessary updates made to it and the accompanying guidance document.

## 13. Communication and Distribution

- 13.1 The policy will be communicated through normal channels to ensure all relevant parties are aware of its content.

## 14. Information Management

- 14.1.1 Data collected as a result of the policy and associated guidance will be stored and managed in line with the Data Protection Act 2018 and the General Data Protection Regulation.

## ABERDEEN CITY COUNCIL

<b>COMMITTEE</b>	Staff Governance Committee
<b>DATE</b>	10 December 2019
<b>EXEMPT</b>	No
<b>CONFIDENTIAL</b>	No
<b>REPORT TITLE</b>	Corporate Health and Safety July - September 2019
<b>REPORT NUMBER</b>	GOV/19/418
<b>CHIEF OFFICER</b>	Fraser Bell
<b>REPORT AUTHOR</b>	Colin Leaver
<b>TERMS OF REFERENCE</b>	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 July - September 2019 to provide the Committee with the opportunity to monitor compliance with health and safety legislation.

### 2. RECOMMENDATION

- 2.1 That the Committee 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 (July - September 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 (HSE). This reporting duty includes incidents which result in an employee being absent from work for 7 days or longer.

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 (July - September 2019)

3.2 All incident and near miss information in this report has been provided at 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. In this reporting period the total of 118 incidents shows a decrease of 26% from the corresponding period in 2018 where there was a total of 159 incidents. The figures in brackets at Function level show the figures reported for the period 1 July – 30 September 2018 as a comparison.

Function/Cluster	1. RIDDOR Reportable employee (including absences over 7 days)	2. Non-RIDDOR reportable employee (absences of 4 to 7 days)	3. Non-RIDDOR reportable employee (absences of 0 to 3 days)	4. RIDDOR Reportable Non-employee	5. Non-RIDDOR reportable Non-employee	Total
<b>AHSCP</b>	<b>0(1)</b>	<b>0(0)</b>	<b>6(6)</b>	<b>0(0)</b>	<b>4(2)</b>	<b>10(9)</b>
Older Adult Services	0(0)	0(0)	5(4)	0(0)	3(1)	8(5)
Younger Adult Services	0(0)	0(0)	1(2)	0(0)	1(1)	2(3)
<b>Commissioning</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>
Commercial & Procurement	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
<b>Customer</b>	<b>1(0)</b>	<b>0(1)</b>	<b>2(2)</b>	<b>0(0)</b>	<b>1(4)</b>	<b>4(7)</b>
Customer Experience	0(0)	0(0)	0(1)	0(0)	1(2)	1(3)
Early Intervention and Community Empowerment	1(0)	0(1)	2(1)	0(0)	0(2)	3(4)
<b>Governance</b>	<b>0(0)</b>	<b>0(0)</b>	<b>2(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>2(0)</b>
<b>Operations</b>	<b>4(2)</b>	<b>2(3)</b>	<b>55(97)</b>	<b>2(0)</b>	<b>35(41)</b>	<b>98(143)</b>

Function/Cluster	1. RIDDOR Reportable employee (including absences over 7 days)	2. Non-RIDDOR reportable employee (absences of 4 to 7 days)	3. Non-RIDDOR reportable employee (absences of 0 to 3 days)	4. RIDDOR Reportable Non-employee	5. Non-RIDDOR reportable Non-employee	Total
Operations and Protective Services	4(2)	2(2)	25(13)	0(0)	3(4)	34(21)
Integrated Children and Family Services	0(0)	0(1)	30(84)	2(0)	32(37)	64(122)
<b>Place</b>	<b>0(0)</b>	<b>0(0)</b>	<b>4(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>4 (0)</b>
Strategic Place Planning	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
City Growth	0(0)	0(0)	4(0)	0(0)	0(0)	4(0)
<b>Resources</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>	<b>0(0)</b>
Corporate Landlord	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
<b>Total Jul-Sept</b>	<b>5(3)</b>	<b>2(4)</b>	<b>69(105)</b>	<b>2(0)</b>	<b>40(47)</b>	<b>118 (159)</b>

3.4 The figures in column 1 of the table when compared to the corresponding period in 2018 increased; this is where employees have been absent as a result of incidents which are RIDDOR reportable.

3.5 In most other areas there have been a decrease in figures with a slight increase in Governance and Adult Health and Social Care.

3.6 Incident causation is detailed in the table below.

Function/Cluster	Slip, trip, fall	Exposure to substances	Contact with Machinery	Manual handling	Struck against	Falls from Height	Struck by Object	Another type of accident	Unacceptable behaviour	Injured by Animal	Total
<b>AHSCP</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>6</b>	<b>0</b>	<b>10</b>
Older Adult Services	1	0	0	0	0	0	1	1	5	0	8
Young Adult Services	1	0	0	0	0	0	0	0	1	0	2
<b>Customer</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>4</b>
Early Intervention and Community Empowerment	1	0	0	0	0	0	0	1	0	1	3

Customer Experience	0	0	0	0	0	0	1	0	0	0	1
<b>Operations</b>	<b>12</b>	<b>2</b>	<b>1</b>	<b>4</b>	<b>6</b>	<b>4</b>	<b>11</b>	<b>21</b>	<b>36</b>	<b>1</b>	<b>98</b>
Integrated Children's and Family Services	5	1	0	0	4	3	3	12	36	0	64
Operations and Protective Services	7	1	1	4	2	1	8	9	0	1	34
<b>Governance</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>
<b>Place</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>4</b>
City Growth	0	0	0	0	3	0	0	1	0	0	4
<b>Total Numbers</b>	<b>16</b>	<b>2</b>	<b>1</b>	<b>4</b>	<b>9</b>	<b>4</b>	<b>13</b>	<b>25</b>	<b>42</b>	<b>2</b>	<b>118</b>

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 A report was presented to this Committee by Integrated Children's and Family Services last quarter detailing the work being undertaken by this Cluster to assist employees to de-escalate issues which could result in unacceptable behaviours being directed towards them.

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 (July-Sept 2019)**

3.10 During the reporting period 5 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 5 incidents have confirmed that these elements were all completed correctly.

### Incident (reportable employee) frequency rates

Period – Quarterly	Reportable Incidence rate	Reporting period
July - Sept 2019	0.61	2019/20

3.12 The above figures are calculated using the formula:

$$\text{Incidence rate} = \frac{\text{RIDDOR injuries per period}}{\text{Number of employees}} \times 1000$$

3.13 This figure has increased from the reported figure for the corresponding period last year (July - Sept 18) of 0.23 when there were 2 RIDDOR reportable incidents.

3.14 The table below shows benchmark comparisons against other North of Scotland Local Authorities for the financial year 1 April 2018 to 31 March 2019. These are collated by a Health and Safety officer from the North of Scotland Local Authority Health and Safety Group, which is a forum which each Authority's Health and Safety Manager attends to discuss and seek best practice solutions for the similar risks each Authority faces. These comparative figures are collated annually by the group with the figures calculated as per 3.12 above and other Authorities are anonymised.

ACCIDENT INCIDENT RATE (2018/19)	
Aberdeen City Council	1.625
Local Authority 1	4.45
Local Authority 2	2.2
Local Authority 3	1.86
Local Authority 4	2.9

### Reportable Diseases

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

### Near Miss Information

3.16 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.

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

Function	Cluster	Near Misses Apr-Jun 2019	Near Misses Apr-Jun 2018
<b>AHSCP</b>		<b>7</b>	<b>12</b>
	Older Adult Services	7	12
<b>Customer</b>		<b>10</b>	<b>30</b>
	Customer Experience	5	13
	Early Intervention and Community Empowerment	5	17
<b>Operations</b>		<b>86</b>	<b>102</b>
	Integrated Children's and Family Services	76	81
	Operations and Protective Services	10	21
<b>Place</b>		<b>3</b>	<b>3</b>
	Strategic Place Planning	3	3
<b>Resource</b>		<b>1</b>	<b>1</b>
	Corporate Landlord	1	1
<b>Total</b>		<b>107</b>	<b>148</b>

3.18 The table below shows the causation for the numbers of near misses in the table under 3.17. The figures in brackets are for the corresponding period in 2018.

Function/Cluster	Vandalism	Security	Other	Unacceptable behaviour	Total
<b>AHSCP</b>	<b>0(0)</b>	<b>0(0)</b>	<b>3(3)</b>	<b>4(9)</b>	<b>7(12)</b>
Older Adult Services	0(0)	0(0)	3(3)	4(9)	7(12)
<b>Customer</b>	<b>0(0)</b>	<b>0(2)</b>	<b>1(6)</b>	<b>9(22)</b>	<b>10(30)</b>
Customer Experience	0(0)	0(1)	0(5)	5(7)	5(13)
Early Intervention and Community Empowerment	0(0)	0(1)	1(1)	4(15)	5(17)
<b>Operations</b>	<b>1(1)</b>	<b>10(7)</b>	<b>19(29)</b>	<b>56(65)</b>	<b>86(102)</b>
Integrated Children's and Family Services	1(1)	10(6)	10(12)	55(62)	76(81)
Operations and Protective Services	0(0)	0(1)	9(17)	1(3)	10(21)
<b>Place</b>	<b>0(0)</b>	<b>0(0)</b>	<b>1(3)</b>	<b>2(0)</b>	<b>3(3)</b>
City Growth	0(0)	0(0)	1(0)	1(0)	2(0)
Strategic Place Planning	0(0)	0(0)	0(3)	1(0)	1(3)
<b>Resource</b>	<b>0(0)</b>	<b>0(0)</b>	<b>1(1)</b>	<b>0(0)</b>	<b>1(1)</b>
Corporate Landlord	0(0)	0(0)	1(1)	0(0)	1(1)
<b>Total Numbers</b>	<b>1(1)</b>	<b>10(9)</b>	<b>25(42)</b>	<b>71(96)</b>	<b>107(148)</b>

3.19 The overall number of near misses decreased from 148 for the same reporting period last year, which is a reduction of 28% with figures across most categories and Clusters reducing.

### **Regulator interventions (HSE / SFRS)**

3.20 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.

3.21 There were three interventions with HSE in this reporting period. These were for a variety of reasons: one was a periodic check on annual inspection of equipment paperwork, the second was a periodic inspection of our duty to manage asbestos in schools and the third was regarding the work of a contractor. The first two periodic inspections were completed without any issues being identified. The third intervention identified no issues with ACC's process of monitoring contractors.

3.22 There were no interventions with SFRS this reporting period.

### **Fire risk assessments**

3.23 Fire risk assessments are completed on a rolling 5-year programme. A total of 27 fire risk assessments were completed during this reporting period. The overall average compliance score was 90%.

3.24 Multi-storey tenanted properties are assessed on a 3-year rolling programme. As part of this programme of 27 visits there were 6 multi storey blocks assessed with an average compliance score of 68%. 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 to be completed within 4 hours, 24 days, 90 days and finally where there is a recommendation for work to be completed, where legal compliance is already achieved but to encourage best practice.

3.25 In these 6 action plans there were 88 actions identified across the risk ratings; there were two actions identified in the 4-hour action period. Of the 88 identified there were 33 completed actions and 53 which were still within the compliance period. In this period there were 2 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**

- 3.26 The overall average audit score for all audits completed in a reporting quarter and for this reporting period was 71.5%.
- 3.27 The average figure seems to sit on average between 57% and 80%. 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**

- 3.28 A process of compliance visits has been carried out over the period looking at risk topics such as lone working, personal protective equipment, workplace inspection, cyclical maintenance and work at height. The average score for all compliance visits completed was 64%. 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 82%; this score was for different work activities, so it is difficult to reach an exact comparison.

## **Health and safety policies and guidance**

- 3.29 There are no policies and procedures finalised following review this reporting period.

## **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), Medium (M), High (H)	Mitigation
<b>Financial</b>	The risk is that any incident has the potential to bring a reduction in the overall budget in place to provide service delivery.	M	<p>All tasks are risk assessed and the controls implemented and supervised by line managers.</p> <p>All employees are trained to a level where they are competent to carry out the work.</p> <p>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.</p> <p>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.</p> <p>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.</p>
<b>Legal</b>	There is the risk that any injury or serious health and safety incident could result in focus from the Health and Safety Executive which could result in enforcement action in the form of notices or prosecution.	M	As above.

<b>Employee</b>	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.
<b>Customer</b>	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.
<b>Reputational</b>	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

<b>Design Principles of Target Operating Model</b>	
	<b>Impact of Report</b>
<b>Governance</b>	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.

<b>Workforce</b>	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.
<b>Process Design</b>	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 ear miss and incident to identify where there are both process and behavioural faults.

## 8. IMPACT ASSESSMENTS

<b>Assessment</b>	
<b>Equality &amp; Human Rights Impact Assessment</b>	EHRIA not required
<b>Data Protection Impact Assessment</b>	Not required
<b>Duty of Due Regard / Fairer Scotland Duty</b>	Not required

## 9. BACKGROUND PAPERS

N/A

## 10. APPENDICES

N/A

## 11. REPORT AUTHOR CONTACT DETAILS

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## ABERDEEN CITY COUNCIL

<b>COMMITTEE</b>	Staff Governance
<b>DATE</b>	10 <sup>th</sup> December 2019
<b>EXEMPT</b>	No
<b>CONFIDENTIAL</b>	No
<b>REPORT TITLE</b>	Absence and Employee Assistance Update
<b>REPORT NUMBER</b>	RES/19/463
<b>DIRECTOR</b>	Steve Whyte
<b>REPORT AUTHOR</b>	David Forman/Neil Yacamini
<b>TERMS OF REFERENCE</b>	4.3

### 1. PURPOSE OF REPORT

This report updates the Committee on absence days lost from May 2019 to October 2019, utilisation of the Employee Assistance Service (EAS) provided by Time for Talking during the period April– September 2019 and gives an overview of actions being undertaken to support employees who are absent from work.

### 2. RECOMMENDATION(S)

That the Committee :-

- 2.1 Note the sickness absence figures.
- 2.2 Note the further development of the absence information
- 2.3 Note the utilisation of the Employee Assistance Programme over the period; and
- 2.4 Endorse the approaches supporting employees who are absent from work.

### 3. BACKGROUND

- 3.1 This report outlines the absence information for Aberdeen City Council from May 2019 to October 2019 as per the 6 month timeline utilisation of the Employee Assistance Service for the period April 2019 to September 2019 and

outlines approaches to support employees. It proposes actions to more closely manage absence with the aim of supporting employees.

### 3.2 Sickness Absence Information

The table below shows the number of days lost due to sickness absence between May 2019 and October 2019 and compares it against the same period for 2018.

	May-18	May-19	Jun-18	Jun-19	Jul-18	Jul-19	Aug-18	Aug-19	Sep-18	Sep-19	Oct-18	Oct-19
ACC Days	7700.0	8143.2	7109.0	7793.4	6784.0	5915.1	7028.0	5984.8	7345.0	7299.3	7834.0	5835.6
<b>Absence Type</b>												
Bacterial	0.0%	0.1%	0.0%	0.0%	0.0	0.0%	0.00%	0.30%	0.00%	0.27%	0.00%	0.03%
Cardiovascular	4.7%	2.6%	4.7%	2.3%	4.5%	1.9%	5.12%	1.11%	3.2%	0.27%	3.5%	0.79%
Dermatological	0.6%	0.4%	0.5%	0.9%	0.4%	1.1%	0.37%	0.54%	0.4%	0.43%	0.8%	0.59%
Endocrine	1.0%	0.1%	0.8%	0.3%	0.8%	0.6%	0.91%	0.29%	0.6%	0.14%	0.7%	0.00%
Gastrointestinal	12.7%	12.4%	12.8%	12.7%	10.1%	11.6%	11.55%	11.32%	13.3%	11.17%	14.1%	11.71%
Gynaecological	2.1%	4.2%	2.5%	2.6%	3.6%	3.4%	2.42%	2.64%	1.9%	2.83%	2.1%	1.77%
Industrial injury	0.5%	0.0%	1.1%	0.0%	1.1%	0.0%	0.64%	0.00%	0.5%	0.00%	0.8%	0.00%
Malignancy	3.1%	3.2%	3.3%	4.2%	3.2%	5.3%	3.07%	3.86%	3.2%	2.40%	3.6%	2.79%
Musculoskeletal	27.3%	23.5%	26.3%	24.0%	29.4%	26.0%	28.06%	27.00%	26.8%	18.26%	25.8%	17.13%
Neurological	6.8%	5.6%	6.8%	6.1%	5.8%	5.3%	7.70%	3.72%	6.1%	2.96%	5.5%	4.30%
Ophthalmic	0.8%	0.5%	0.6%	1.0%	1.0%	1.2%	0.61%	0.93%	0.4%	1.81%	0.4%	0.27%
Other	0.8%	7.8%	1.5%	8.5%	1.4%	9.6%	1.14%	13.10%	1.4%	16.16%	1.0%	15.74%
Psychological	29.2%	25.2%	29.1%	24.0%	28.9%	23.7%	30.49%	23.05%	27.8%	23.80%	32.2%	17.90%
Respiratory	9.4%	10.4%	8.2%	9.4%	7.5%	7.4%	5.75%	6.84%	11.4%	11.76%	10.1%	17.01%
Urological	0.5%	0.9%	0.9%	0.7%	1.7%	0.6%	1.49%	0.58%	2.2%	0.84%	2.2%	0.69%
Viral	0.5%	2.5%	0.70	2.6%	0.7%	1.5%	0.67%	2.67%	0.9%	1.89%	0.9%	2.20%
#N/A	0.0%	0.6%	0.1%	0.6%	0.0	0.8%	0.00%	2.06%	0.00%	5.00%	0.00%	7.06%
Total Percentage	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

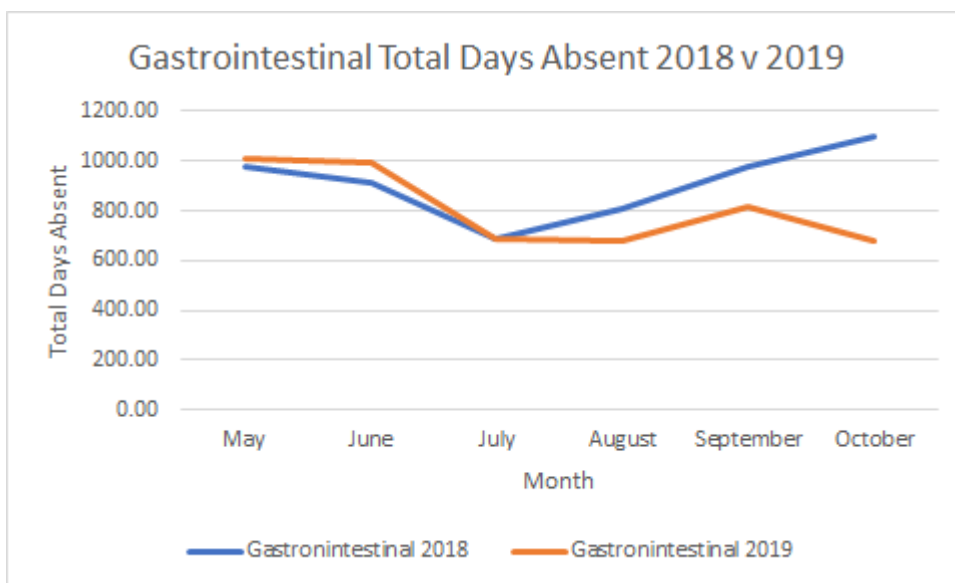
A comparison of the data shows that the two main reasons for absence with Aberdeen City Council are musculoskeletal and psychological although there has been a decrease in both types of absence in recent months.

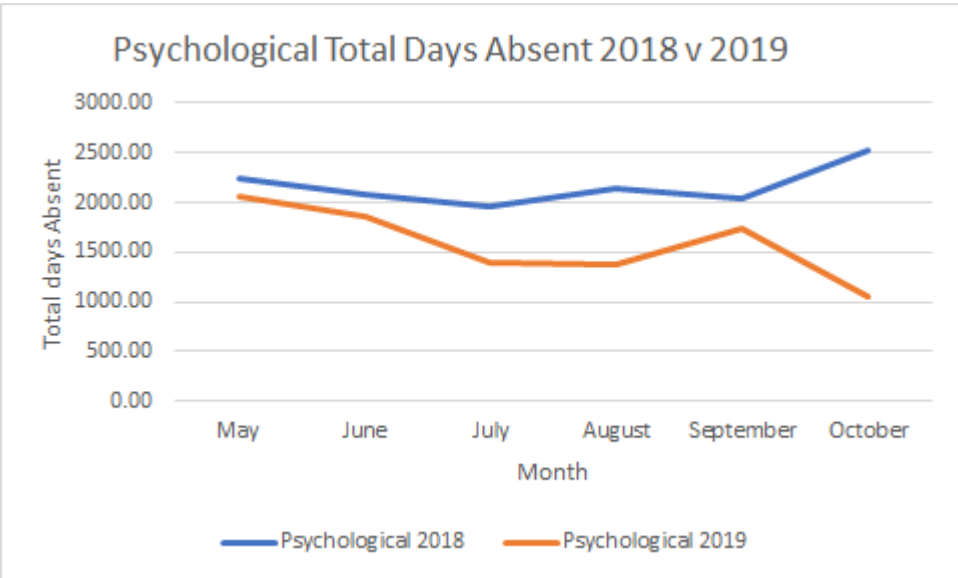
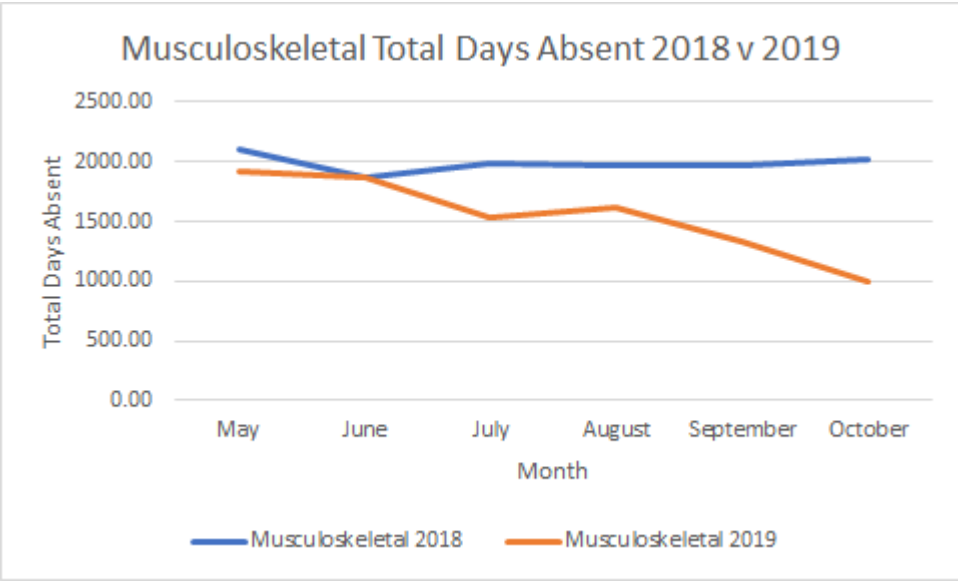
Top absence reasons May to Oct 2018

Absence Category	% of Total days Absent
Psychological	29.5%
Musculoskeletal	27.0%
Gastrointestinal	12.4%
Respiratory	8.8%
Neurological	6.4%
Cardiovascular	4.2%
Malignancy	3.2%
Gynaecological	2.4%
Urological	1.5%
Other (No Longer Used)	1.2%
Endocrine	0.8%
Industrial Injury/Accident	0.7%
Viral	0.7%
Ophthalmic	0.6%
Dermatological	0.5%
Currently Unknown	0.0%
Grand Total (43800 days )	100.0%

Top absence reasons May to Oct 2019

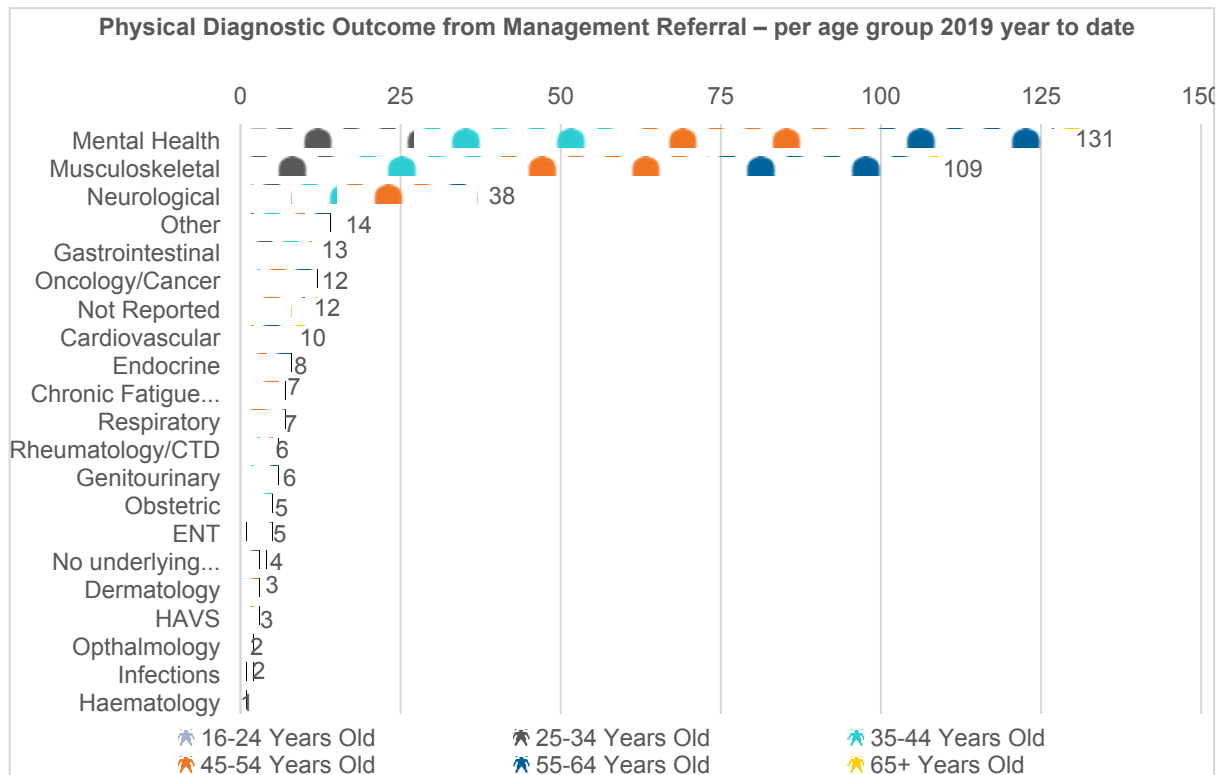
Absence Category	% of Total days Absent
Psychological	27.5%
Musculoskeletal	26.1%
Gastrointestinal	12.1%
Respiratory	9.7%
Neurological	6.3%
Cardiovascular	3.9%
Other	3.3%
Malignancy	3.1%
Gynaecological	2.4%
Urological	1.2%
#N/A	1.0%
Viral	0.9%
Endocrine	0.7%
Industrial injury	0.6%
Ophthalmic	0.6%
Dermatological	0.5%
Bacterial	0.005%
Grand Total (40971 days)	100.0%





### 3.3 Occupational Health Referrals

The Council has an Occupational Health Provider and Management information in relation to the number of referrals, and reasons for the referrals is shown below :-



The Management information provided by Occupational Health shows that Psychological and musculoskeletal also account for the highest numbers of referrals to the Council’s Occupational Health provider.

3.4 Managers must also apply the Supporting Attendance and Wellbeing policy. As ever, they are supported to do so by colleagues in People & Organisation. The following actions continue in line with absence policy and guidance –

Issue	Action	Owner	Measure	Supporting Actions
Psychological Absence	Promote and use Quality of Working Lives stress risk assessments to reduce stress in the workplace	Health and Safety/People and Organisation	Number of risk assessments	Work with Corporate Health and Safety team to support Managers.

Psychological Absence	Continue to increase awareness of the Employee Assistance Service	People and Organisation	Monitoring of the number of self-referrals to Employee Assistance Service due to Psychological conditions	All employees have been issued with information such as a wallet card highlighting the availability of the Employee Assistance Service.
Psychological Absence	To continue the roll out of the use of Mental Health First Aiders throughout the Organisation	People and Organisation	Monitoring the interactions of the Mental Health First Aiders	Two Mental Health training courses have been completed. Three further courses are scheduled for the first quarter of 2020. Using Management information gathered through the interaction of Mental Health First Aiders to work with Managers to provide support to employees within that area.
Psychological absence	Continue to deliver the mental health action plan.	Health and Wellbeing Adviser	Measures of psychological absence	Health and Wellbeing Adviser to utilise communications channels to promote mental health awareness. Roll out of the mental health first aiders programme and other mental health initiatives such as suicide prevention training. Review of the Mental Health Action Plan to be reported to Staff

				Governance in early 2020.
Musculoskeletal absence	Provide support to Managers in relation to musculoskeletal absence	People and Organisation	Supporting Managers	Working with Managers in areas with historically high musculoskeletal absence to identify available support to assist employees ie physiotherapy.
Musculoskeletal absence	Promote and use manual handling risk assessments to help reduce absence related to musculoskeletal issues	Health and Safety	Number of risk assessments	Provide the Corporate Health and Safety team with relevant data to enable targeted interventions.

### 3.5 Mental Health Awareness Week

- 3.5.1 Aberdeen City Council's first ever Mental Health Awareness Week took place from 7<sup>th</sup> – 11<sup>th</sup> October 2019. The events were another important step in the implementation of our Mental Health Action Plan with many positive steps already taken to tackle the stigma of mental health. Since the introduction of the plan earlier this year we have recruited our first cohort of mental health first aiders, who are currently undergoing training, and have introduced mentally healthy workplace training through Online Interactive Learning.
- 3.5.2 Developed in partnership with the NHS, Aberdeen City Health and Social Care Partnership, Trade Unions and the third sector, the purpose of the week was to raise awareness of mental health in the workplace and to begin breaking down some of the taboos and stigma associated with poor mental health.
- 3.5.3 A programme of 28 events were developed which highlighted the importance of tackling the issue of mental health head on ranging from traditional talks and training opportunities to mindfulness and wellbeing sessions.
- 3.5.6 The introduction of monthly events has begun and is being developed further, with partnership working also expanded to harness the support of the Aberdeen City Health and Social Care Partnership and the Samaritans.
- 3.5.7 An update on progress on the Mental Health Action plan will be reported to Committee in early 2020.

#### **4. Employee Assistant Service Utilisation (April 19 - September 2019)**

- 4.1 A total of 74 referrals were made during the 6 month period comprising of employees (73) and family members (1). The greatest number of referrals was from Operations (59%), this includes Integrated Children's and Family Services and Protective Services and accounts for 68% of all employees in the workplace. The overall staff usage from Operations was 0.39%. The greatest percentage of usage per function came from Place (1.28%).
- 4.2 While the number of referrals is similar to the equivalent period, Work Related Issues have increased with Demands (Workload/ Stress/Anxiety) being the most common reason for utilisation (26 out of 32, 81%), compared to 19 out of 20 (95%) in the equivalent period in the previous year. Of the Personal Issues 24 out of 43 (56%) relates to Personal Stress/Depression/Anxiety/Anger in comparison to the equivalent period in the previous year which was 37 out of 56 (66%). Employees who are suffering from work related stress are also encouraged to complete the Quality of Working Lives Risk Assessments to find out the cause of their stress at work to identify what controls can be put in place to counteract the identified stressors.
- 4.3 A person can experience excessive pressure and demands outside work just as much as they can at work. Stress tends to build up over time because of a combination of factors that may not all be work related. Conflicting demands of work and home can cause excessive stress. Stressors at home can affect those at work and vice versa. The "adverse reaction people have to excessive pressures or other types of demand placed on them" (HSE, 2018) can seriously undermine the quality of people's working lives and, in turn, the effectiveness of the workplace.
- 4.4 The breakdown of figures by Function and issue for the period April 2019 to September 2019 is shown in the tables below: -



Total Apr - Sep 19  
EAS Utilisation

Functions	Number of Staff within function	% of Staff usage	Number of referrals	Personal Issues	Health/Bereavement	Addiction/Abuse	Relationship/Family Issues	Personal Stress/Depression/Anxiety/Anger	Traumatic Incident
Commissioning	101	0	0		0	0	0	0	0
Customer	1189	0.34	8		<5	0	<5	<5	0
Operations	5151	0.39	43		5	0	8	14	0
AHSCP	607	0.49	6		0	0	<5	<5	0
Resources	327	0.92	7		<5	0	0	<5	0
Governance	81	3.7	<5		0	0	0	<5	0
Place	156	1.28	5		0	0	0	<5	0
Other Foster Carers	0		0		0	0	0	0	0
Other Elected Members	0		0		0	0	0	0	0
Other Family Member	0		<5		0	0	<5	0	0
<b>Total Number of Referrals</b>	<b>7612</b>	<b>0.97</b>	<b>74</b>		<b>7</b>	<b>0</b>	<b>12</b>	<b>24</b>	<b>0</b>

Functions	Number of Staff within Service	% of Staff usage	Number of referrals	Work Related Issues	Change (Organisational/redundancy)	Demands (Workload/Stress/Anxiety)	Relationships (with colleagues)	Relationships with manager (Bullying Harassment)	Role (Understanding of)	Support (discipline & grievance)	Control
Commissioning	101	0	0		0	0	0	0	0	0	0
Customer	1189	0.34	8		<5	<5	0	0	0	<5	0
Operations	5151	0.39	43		0	13	0	<5	<5	0	0
AHSCP	607	0.49	6		0	<5	0	0	0	0	0
Resources	327	0.92	7		0	<5	0	<5	0	0	0
Governance	81	3.7	<5		0	<5	0	0	0	0	0
Place	156	1.28	5		0	<5	0	0	<5	0	0
Other Foster Carers	0		0		0	0	0	0	0	0	0
Other Elected Members	0		0		0	0	0	0	0	0	0
Other Family Member	0		<5		0	0	0	0	0	0	0
<b>Total Number of Referrals</b>	<b>7612</b>	<b>0.97</b>	<b>74</b>		<b>&lt;5</b>	<b>25</b>	<b>0</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>0</b>

	Clusters	Commercial and Procurement	Bus Intelligence & Perf Manage	ALEO's	Customer Experience	Early Interven and Comm Emp	Digital and technology	External Communications	Integrated Children's and Fam Serv	Operations and Protective Services
Commissioning		0	0	0	0	0	0	0	0	0
Customer		0	0	0	<5	6	0	0	0	0
Operations		0	0	0	0	0	0	0	29	14
AHSCP		0	0	0	0	0	0	0	0	0
Resources		0	0	0	0	0	0	0	0	0
Governance		0	0	0	0	0	0	0	0	0
Place		0	0	0	0	0	0	0	0	0
Foster Carers		0	0	0	0	0	0	0	0	0
Elected Members		0	0	0	0	0	0	0	0	0
Family Member		0	0	0	0	0	0	0	0	0
		<b>0</b>	<b>0</b>	<b>0</b>	<b>&lt;5</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>29</b>	<b>14</b>

	Clusters	AHSCP	Finance	Capital	People and Organisation	Corporate Landlord	Governance	Strategic Place Planning	City Growth	Foster Carers	Elected Members	Family Member
Commissioning		0	0	0	0	0	0	0	0	0	0	0
Customer		0	0	0	0	0	0	0	0	0	0	0
Operations		0	0	0	0	0	0	0	0	0	0	0
AHSCP		6	0	0	0	0	0	0	0	0	0	0
Resources		0	<5	<5	<5	<5	0	0	0	0	0	0
Governance		0	0	0	<5	0	<5	0	0	0	0	0
Place		0	0	0	0	0	<5	<5	<5	0	0	0
Foster Carers		0	0	0	0	0	0	0	0	0	0	0
Elected Members		0	0	0	0	0	0	0	0	0	0	0
Family Member		0	0	0	0	0	0	0	0	0	0	<5
		<b>6</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>&lt;5</b>	<b>0</b>	<b>0</b>	<b>&lt;5</b>

4.5 The number of referrals for the same reporting period (April – September) are in line with the last 3 years aside from 2017.

- April 2016 – Sept 2016 71

- April 2017 – Sept 2017 59
- April 2018 – Sept 2018 76
- **April 2019 – Sept 2019 74**

4.6 The percentage of the Council’s workforce that used the service is detailed below, along with similar sized local authorities’ industry averages for comparison for the 6 month reporting period:

<b>Council A – Aberdeen City Council</b>	<b>0.51%</b>
Council B	0.21%
Council C	0.30%
Council D	0.77%

4.7 Both full-time (69) and part-time (4) employees are using the service (34% male; 66% females). There has been an increase in part-time (3) with a decrease of full time (4) using the service from the equivalent period last year. The majority of employees have been at work (47) compared to those absent from work (26) when receiving support. One family member has used the service. Full details are shown in the table below:

#### Demographics

Apr - Sep 19

Functions	Male	Female	Full Time	Part Time		Currently at Work	Absent from Work
Commissioning	0	0	0	0		0	0
Customer	<5	5	7	0		<5	<5
Operations	13	30	41	<5		26	17
AHSCP	<5	<5	6	0		<5	<5
Resources	<5	5	7	<5		6	<5
Governance	<5	<5	<5	<5		<5	0
Place	<5	<5	5	0		<5	<5
Foster Carers	0	0	0	0		0	0
Elected Members	0	0	0	0		0	0
Family Member	0	<5	<5	0		0	<5

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

4.8 In the reporting period there were both self-referrals (70) and management referrals (4). This is broadly similar to the equivalent period last year. The assistance provided was mainly via face to face counselling (49) along with telephone counselling (16). Face to face counselling has decreased (49 compared to 50) and telephone counselling has increased (16 compared to 14) from the equivalent period last year. Employees were made aware of the service via a range of means as detailed in the table below:

	Assistance Provided							Type of Referral		
	Helpline/Advice Only	No contact from client	Telephone Counselling	Face to face counselling	CBT Counselling Sessions	Live Zilla Counselling sessions	Management Referral	Self-Referral		
Commissioning	0	0	0	0	0	0	0	0		
Customer	0	<5	<5	9	0	0	0	14		
Operations	<5	<5	10	26	0	0	<5	37		
AHSCP	0	0	<5	<5	0	0	0	7		
Resources	<5	0	<5	<5	0	0	<5	5		
Governance	0	<5	0	<5	0	0	0	<5		
Place	0	0	0	<5	0	0	0	<5		
Foster Carers	0	0	0	0	0	0	0	0		
Elected Members	0	0	0	0	0	0	0	0		
Family Member	0	0	0	<5	0	0	0	<5		
	<5	7	16	49	0	0	<5	70		

How Employees heard about Service	Website/Posters/Leaflets	Managers	Colleagues	HR	Wallet Cards
	10	34	11	19	0

## Actions

4.9 It is critical that Function leads, and responsible line management ensure that suitable and sufficient action is being taken to support individuals. This includes the application of the Supporting Attendance and Wellbeing Policy and delivery of the Mental Health Action Plan. Other improvement actions suggested include:

- Continued communication and advocacy of the service provided by Time for Talking (leaflets and wallet cards will be provided to every employee over the next month as well as new posters being displayed throughout all corporate buildings);

- Completion of risk assessments to assist in identifying, understanding and addressing factors that affect employees' mental health and wellbeing. Functions should be proactively completing Quality of Working Lives (QWL's) risk assessments for teams (and in some cases individuals) to identify improvement areas as detailed in the Health and Safety Executive (HSE) Management Standards;
- Completion of Line Manager Competency Indicator Tool (HSE) for managers to assess whether they currently have the behaviours identified as effective for preventing and reducing stress at work. This will assist managers reflect on their behaviour and management style and adapt as necessary;

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

## **5. FINANCIAL IMPLICATIONS**

5.1 There are no financial implications arising directly from this report. The main implications arising from absence are when alternative resources are required for cover purposes, and any corresponding impact on Council budgets will be reported within the quarterly Council Financial Performance report.

## **6. LEGAL IMPLICATIONS**

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

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

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

## 7. MANAGEMENT OF RISK

	Risk	Low (L), Medium (M), High (H)	Mitigation
<b>Financial</b>	If no action is taken to support individuals there is a risk that EAS referrals may increase. This may result in increased costs to the council .	M	<p>Actions as outlined above.</p> <p>Implementation of the Mental Health and Wellbeing in the Workplace Policy and supporting Stress Procedure. Effective management and maintenance of a mentally healthy workplace and provision of appropriate support.</p> <p>Review and identification of EAS use and related information to act on lessons learned. Corporate and individual awareness of mental health in the workplace.</p>
<b>Legal</b>	Compliance with legal requirements ensures the health and safety of employees. Poor management of the risks and lack of support has the potential to attract enforcement action (criminal and civil).	L	<p>As above.</p> <p>Corporate Health and Safety team to continue to advise the Council compliance with Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 Reporting requirements</p> <p>Assessment of risk via stress and QWL's risk assessments with identification and implementation of safe working arrangements.</p>
<b>Employee</b>	Risk of stress related illness as a result of employees covering absent colleagues' workloads	M	<p>Health Contract to minimise absence levels</p> <p>The provision of, and signposting to, online stress reducing advice as well as face to face sessions</p>

	Ineffective support during challenging times impacting on an employee's personal health and wellbeing..		concerned with stress reduction.  Provision of information, instruction and training as identified in Job Profiles, skills and training matrices and in risk assessment. Open and clear two-way communication at all levels within the organisation. Non-judgmental and proactive support provided to employees who experience mental health problems. Good self-management of personal wellbeing and resilience.
<b>Customer</b>	Service Delivery may be affected if absence is high in customer facing roles.	M	Use of peripheral staffing such as agency or overtime if there is a Service delivery risk
<b>Environment</b>	N/A		
<b>Technology</b>	N/A		
<b>Reputational</b>	Risk to Organisations reputation if absence levels are high.	M	Management of absence levels to ensure that they are kept to as low a level as possible.

## 8. OUTCOMES

Design Principles of Target Operating Model	
	Impact of Report
<b>Workforce</b>	The approaches identified within this report will help to provide support to employees.

## 9. IMPACT ASSESSMENTS

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

## 9. BACKGROUND PAPERS

N/A

## 10. APPENDICES (if applicable)

## 11. REPORT AUTHOR CONTACT DETAILS

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