

ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance Committee
DATE	10 December 2019
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Corporate Health and Safety July - September 2019
REPORT NUMBER	GOV/19/418
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TERMS OF REFERENCE	Remit – 4.1 - 4.6

1. PURPOSE OF REPORT

- 1.1 The report summarises statistical health and safety performance information for the three-month reporting period 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
AHSCP	0(1)	0(0)	6(6)	0(0)	4(2)	10(9)
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)
Commissioning	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
Commercial & Procurement	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
Customer	1(0)	0(1)	2(2)	0(0)	1(4)	4(7)
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)
Governance	0(0)	0(0)	2(0)	0(0)	0(0)	2(0)
Operations	4(2)	2(3)	55(97)	2(0)	35(41)	98(143)

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)
Place	0(0)	0(0)	4(0)	0(0)	0(0)	4 (0)
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)
Resources	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
Corporate Landlord	0(0)	0(0)	0(0)	0(0)	0(0)	0(0)
Total Jul-Sept	5(3)	2(4)	69(105)	2(0)	40(47)	118 (159)

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
AHSCP	2	0	0	0	0	0	1	1	6	0	10
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
Customer	1	0	0	0	0	0	1	1	0	1	4
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
Operations	12	2	1	4	6	4	11	21	36	1	98
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
Governance	1	0	0	0	0	0	0	1	0	0	2
Place	0	0	0	0	3	0	0	1	0	0	4
City Growth	0	0	0	0	3	0	0	1	0	0	4
Total Numbers	16	2	1	4	9	4	13	25	42	2	118

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
AHSCP		7	12
	Older Adult Services	7	12
Customer		10	30
	Customer Experience	5	13
	Early Intervention and Community Empowerment	5	17
Operations		86	102
	Integrated Children's and Family Services	76	81
	Operations and Protective Services	10	21
Place		3	3
	Strategic Place Planning	3	3
Resource		1	1
	Corporate Landlord	1	1
Total		107	148

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
AHSCP	0(0)	0(0)	3(3)	4(9)	7(12)
Older Adult Services	0(0)	0(0)	3(3)	4(9)	7(12)
Customer	0(0)	0(2)	1(6)	9(22)	10(30)
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)
Operations	1(1)	10(7)	19(29)	56(65)	86(102)
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)
Place	0(0)	0(0)	1(3)	2(0)	3(3)
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)
Resource	0(0)	0(0)	1(1)	0(0)	1(1)
Corporate Landlord	0(0)	0(0)	1(1)	0(0)	1(1)
Total Numbers	1(1)	10(9)	25(42)	71(96)	107(148)

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
Financial	The risk is that any incident has the potential to bring a reduction in the overall budget in place to provide service delivery.	M	<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>
Legal	There is the risk that any injury or serious health and safety incident could result in focus from the Health and Safety Executive which could result in enforcement action in the form of notices or prosecution.	M	As above.

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

7. OUTCOMES

Design Principles of Target Operating Model	
	Impact of Report
Governance	This report is designed to provide a level of assurance to the organisation that the safety management system is working and effective. Where there are issues the understanding that this safety management system has basic functions which are followed to identify any areas for improvement should provide further assurance to the committee and the organisation in general.

Workforce	This report identifies area where the workforce could be at risk from hazards, which they encounter in their role. The reporting of incidents and near misses through the electronic reporting system allows trends to be better identified and to allow focus to be placed on areas where there is most need for this focus. This should provide assurance that the likelihood of the risk eventuating is lessened when required actions are implemented.
Process Design	The reporting within this document can identify trends within Clusters or with certain hazards where the process currently followed allows incidents and near misses to occur. A health and safety management system requires investigation to be completed after every ear miss and incident to identify where there are both process and behavioural faults.

8. IMPACT ASSESSMENTS

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

9. BACKGROUND PAPERS

N/A

10. APPENDICES

N/A

11. REPORT AUTHOR CONTACT DETAILS

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