

ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance Committee
DATE	9 September 2024
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Corporate Health and Safety – April to July 2024
REPORT NUMBER	CORS/24/262
EXECUTIVE DIRECTOR	Andy MacDonald
CHIEF OFFICER	Jenni Lawson
REPORT AUTHOR	Colin Leaver
TERMS OF REFERENCE	3.2

1. PURPOSE OF REPORT

- 1.1 The appendix to this report summarises statistical health and safety performance information for the 3-month reporting period April to July 2024 to provide the Committee with the opportunity to monitor compliance with health and safety legislation.

2. RECOMMENDATION

That the Committee:

- 2.1 Note the report and provide comment on the health, safety policy, performance, trends, and improvements.

3. CURRENT SITUATION

- 3.1 The appendix to the report contains a dashboard of the statistical information in relation to health and safety activities for the three-month reporting period April to July 2024. The statistical information also contains an analysis of the key figures in each of the incident and near miss sections.

- 3.1.1 The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) places 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 as a result of an injury, which have historically been the main reason for Aberdeen City Council's reports to HSE.

This report addresses the following matters:

- All incidents involving employees and members of the public (serious and minor)
- HSE Reportable Incidents

- Reportable Diseases
- Near Miss Information
- Enforcement Interventions
- Fire Risk Assessment
- Health and Safety Audits
- Compliance Monitoring
- Health and Safety Policies, Procedures and Guidance

3.2 Incidents (Apr – Jul 2024)

All incident and near miss information in the appendix to this report has been provided to Cluster level in the appendix. However, within Education incidents have been reported to nursery, primary and secondary school level.

- 3.3** Education and Lifelong Learning have created a Microsoft word form which permits any employee who has concerns regarding the non-reporting of incidents by their line manager to raise these with the Chief Officer.
- 3.4** Since its creation in May 2024 there has been one employee who has used the form. This report was from an employee from a school who has reported on the incident and near miss reporting system since its live date. The report was followed up by the Chief Officer with the employee and they are happy that the process has now been followed. The line manager was reminded of the need to report all incidents where the employee feels there is a health and safety element.

Incident information

- 3.5** The figures are reported to Cluster level for both employee and third-party incidents. Causation figures are also included within the appendix. There is also now a comparison for each of the three years prior to this reporting period so the Committee has sight of the reporting years through the Covid pandemic. The comparative figures for this year are in a separate chart due to the change of reporting system.
- 3.6** When an incident is reported, the manager is required to complete an investigation report, and this should be shared with the employee and signed off by both. This investigation report highlights categories of criteria which require to be considered including root cause, actions identified and completion dates.
- 3.7** Page five of the appendix details the breakdown of incident causation within the Education Service, where the largest number of incidents occur. Figures have increased both from the corresponding period last year and year on year.
- 3.5.1** Incident numbers have increased year on year. It is difficult to identify exact reasons for this but the majority of the increase is within Education.

3.5.2 Following the last Staff Governance Committee meeting the Chief Officer of Education and Lifelong Learning, the Corporate Health and Safety Lead and colleagues from all Trade Unions met to discuss the reporting of these incidents to this committee.

3.5.3 A project is already in place to provide an induction programme for head teachers and other members of senior leadership teams. This includes an e-learning module available to all staff on how to report incidents on the corporate system and the process to follow when an incident happens.

3.5.4 The module contains categories of causes, together with definitions, which were discussed and agreed by all members of the Education safeguarding group. The categories and definitions are as follows:

- **Externalising behaviour:** This refers to any behaviour that is directed outwardly, such as aggression, defiance, disruption, or vandalism. Externalising behaviour can be a sign of emotional distress, learning difficulties, or social problems.
- **Inappropriate communication/abuse:** This refers to any communication that is disrespectful, rude, offensive, or abusive, such as swearing, name-calling, bullying, or harassment.
- **Physical injury or violence:** This refers to any behaviour that causes or threatens to cause physical harm to oneself or others, such as hitting, kicking, biting, or throwing objects.
- **Threatened with a weapon:** This refers to any situation where a person is threatened with a weapon, such as a knife, gun, or other object that can cause injury or death.
- **Threatening behaviour:** This refers to any behaviour that intimidates, frightens, or coerces others, such as verbal threats, gestures, or body language.
- **Unacceptable behaviour:** This refers to any behaviour that does not meet the expectations and standards of the school, such as breaking rules, lying, cheating, or being disrespectful.

3.5.5 Many of the incidents are reported either as 'physical injury and violence' or 'externalising behaviour'. There can be no difference in the consequences of these incidents to the staff involved in the different categorisations. The choice on recording of every incident should be done following a consultation between the line manager and the affected member of staff.

3.5.6 None of this reduces the impact that such incidents can have on the staff supporting and teaching the children and senior managers understand that working with children who may exhibit dysregulated behaviours can be challenging at times for staff. However, the support provided by the staff plays a vital role in helping children learn to regulate their emotions and behaviours, and to cope with the demands and expectations of the school environment. By providing consistent, positive, and supportive guidance, staff can help the children understand the rules, boundaries, and consequences of their actions, and to develop skills such as self-control, problem-solving, and empathy. This

can lead to a medium to long term reduction in the level of incidents from an individual child, as they become more confident, cooperative, and resilient.

- 3.5.7** The Health and Safety Sub-Group, which was formed, with a membership of Education staff, Trade Unions and Corporate health and safety, to undertake analysis of health and safety data generated by schools, informs the direction of the overall workstream. This also ensures that appropriate support is made available to schools if required.

HSE Reportable incidents (April – July 2024)

- 3.6** The table in the Appendix also shows the number of RIDDOR reportable incidents. During the reporting period between April and July 2024 10 incidents involving an employee required to be reported to the Health and Safety Executive. The vast majority of these continue to be for over 7-day absences.
- 3.7** The corporate health and safety team contact the reporting manager when a RIDDOR incident is reported to HSE to get assurance that the correct causation and remedial actions have been identified and that any identified remedial actions have been implemented.

Incident (reportable employee) frequency rates

Period – Quarterly	Reportable Incidence rate	Reporting period
Apr-Jul 2024	1.29	2023/24

- 3.8** The above figures are calculated using the formula:

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

- 3.9** The figure for the corresponding period last year (April to July 2023) was 8 RIDDOR reportable incidents and a reportable incident rate of 0.98.

Reportable Diseases

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

Near Miss Information

- 3.11** 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 by allowing processes and systems to be altered before an incident occurs.

- 3.12 Reporting managers are required to investigate the near miss to identify the root cause and implement any new identified controls, where possible, to reduce the likelihood of any reoccurrence or for any future incident to result in injury.
- 3.13 The appendix shows information on the number of near miss figures for this reporting period and again a comparison with the three previous reporting years. The near miss figures have stabilised or reduced slightly year on year and from 2023's corresponding reporting period.
- 3.14 Page nine of the appendix gives a breakdown of near misses within the Operations function. As with incidents, the majority are within the Education services. Like incident figures, these are mainly because of distressed behaviours evident in some children with additional support needs. Risk assessments are reviewed after every near miss to consider any actions which can be taken to prevent or reduce the risk of reoccurrence.

Regulator interventions (HSE / SFRS)

- 3.15 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 regarding the way Aberdeen City Council undertake their legal duties.
- 3.16 There were no HSE visits or interventions during this reporting period.
- 3.17 SFRS carried out no audit visits of any ACC (Aberdeen City Council) owned or managed buildings during this reporting period.

Fire risk assessments

- 3.18 Fire risk assessments are completed on a rolling 5-year programme. A total of 18 fire risk assessments were completed during this reporting period. The overall average compliance score was 85%. The issues identified are across the range of topics considered in the assessment process. These issues are given a priority level dependent on the resultant risk which requires an action by a specified date. No building is left at risk during this process.
- 3.19 Any identified actions are included into the fire risk actions database and monitored to a close. This database is available to all Chief Officers on the managers' portal, which shows live data on open, closed, and non-complied with actions. Should an action pass the compliance date these are escalated in writing to the Chief Officer and taken to the relevant senior management team meeting to make Service Managers aware of the need to close these off.

Health and Safety Audits

- 3.20 Compliance visits have been undertaken on several topics / premises within the ACC estate. Topics included Management of Contractors (93%); Lone Working (96%); Security (100%); Line Managers Health & Safety Responsibilities (97%); Workplace Inspections (88%); Control of Substances

Hazardous to Health (COSHH) (75%); First Aid (88%); Waste & Refuse Operations (96%); Lifting Operations & Lifting Equipment Operations (100%) and Object Handling (100%).

- 3.20.1** Again, all action points raised are included in an action log, which is reviewed weekly and reported to the relevant Chief Officer. Managers who have had actions allocated to them are given access to the action log to record the action taken to remove the risk and to record the date completed. Follow up visits are also carried out to ensure actions have been completed and that controls continue to be suitable and sufficient and are being followed. Again, the actions are given a compliance date based on the level of risk which ensures that the risk is removed before it places anyone in greater danger.
- 3.21** Line Manager responsibility is one strand of the review of the health and safety policy. Compliance monitoring continues to be undertaken to understand the level of line managers' understanding of the health and safety responsibilities placed on them by the Council. The results of these compliance visits identify areas where managers may require additional support, explanation, or training to close that knowledge gap. Several areas have been identified as requiring action including risk assessment training, completion of a first aid needs assessment and understanding and complying with the workplace inspection procedure. Having identified the areas requiring further improvement and those managers who require that additional support the Corporate Health and Safety Team (CHST) are currently providing training to all management levels, and where required specific 1-2-1 training on manager responsibilities, risk assessment and reporting/investigating incidents.
- 3.22** The actions identified as requiring action are recorded in the compliance action log sheets and each is given a compliance date. Where actions in any audit or compliance process are not closed out on time these are initially raised with the relevant Chief Officer and reported through the relevant Risk and Performance Boards.

Health and safety policies, procedures, and guidance

- 3.23** There were no corporate procedures reviewed this quarter.
- 3.24** When procedures are completed, they require to be approved by the relevant Chief Officer. Where the procedure is corporate these are communicated with the relevant services and step by step guidance is developed and made available to inform managers of what is required to be compliant.

4 FINANCIAL IMPLICATIONS

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

5 LEGAL IMPLICATIONS

- 5.1** The Health and Safety at Work etc Act 1974 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 a requirement to report these under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 which provides a potential for the Enforcing Authorities to 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 employee.

6 ENVIRONMENTAL IMPLICATIONS

6.1 There are no direct environmental implications because of this report.

7 RISK

Risk Appetite

The assessment of risk contained within the table below is consistent with the Council's Risk Appetite Statement

Management Of Risk

Category	Risks	Primary Controls/Control Actions to achieve Target Risk Level	*Target Risk Level (L, M or H) *Considering controls/control actions	*Does Target Risk Level Match Appetite Set?
Strategic Risk	N/A	N/A		
Compliance	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.	Corporate Procedures require all tasks to be risk assessed and the controls implemented and supervised by line managers. All employees are trained to a level where they are competent to carry out the work. Analysis of the causes of the incidents, near misses and work-related absences and resultant improvements to prevent, where possible, reoccurrences, can reduce the financial	L	Yes

		<p>exposure to the Council.</p> <p>This 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>		
Operational	<p>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 and/or their life.</p> <p>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</p>	<p>The task has been risk assessed; employees are trained, competent and supervised then there should be less likelihood of incidents.</p>	L	Yes

	budget due to the associated financial costs.			
Financial	The risk is that any incident has the potential to bring a reduction in the overall budget in place to provide service delivery.	As per compliance above	L	Yes
Reputational	Local and National press coverage of any incident can present reputational damage to the organisation.	Each Function should have 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 employees are up to carrying out investigation of near misses to ensure controls are reviewed to consider whether remedial actions are required.	L	Yes
Environment / Climate	N/A	N/A	N/A	

8 OUTCOMES

<u>Aberdeen City Local Outcome Improvement Plan</u>	
Prosperous Economy Stretch Outcomes	A healthy and safe workplace assists the overarching principles of the stretch outcomes within the LOIP (Local Outcome Improvement Plan) by ensuring that resource is directed at the services required by the city. Removing the level of lost resource to the financial penalties incurred through the Civil and Criminal Courts and from the Regulators will allow the available resource to be best used to ensure funding of the growth sectors of the local economy.

Prosperous People Stretch Outcomes	The areas reported on within this report allow Clusters a further opportunity to recognise areas which when acted upon can assist with engagement of staff and service users to support the meaningful educational progress of children and young people.
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9 IMPACT ASSESSMENTS

Assessment	Outcome
Integrated Impact Assessment	No assessment required. I confirm this has been discussed and agreed with Vikki Cuthbert, Chief Officer Governance in October 2023.
Data Protection Impact Assessment	Not required

10 BACKGROUND PAPERS

10.1 N/A

11 APPENDICES

11.1 Quarterly staff governance Health and safety dashboard April to July 2024

12 REPORT AUTHOR CONTACT DETAILS

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