

## ABERDEEN CITY COUNCIL

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<b>COMMITTEE</b>	Staff Governance Committee
<b>DATE</b>	13 March 2023
<b>EXEMPT</b>	No
<b>CONFIDENTIAL</b>	No
<b>REPORT TITLE</b>	Corporate Health and Safety – October - December 2022
<b>REPORT NUMBER</b>	COM/23/078
<b>DIRECTOR</b>	Gale Beattie
<b>CHIEF OFFICER</b>	Jenni Lawson (acting)
<b>REPORT AUTHOR</b>	Colin Leaver
<b>TERMS OF REFERENCE</b>	3.3

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### 1. PURPOSE OF REPORT

- 1.1 The appendix to this report summarises statistical health and safety performance information for the 3-month reporting period October to December 2022 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 reporting of incidents and near misses moved to Core HR from 1 October 2022 to replace the then-existing reporting system on Your HR. This report is the first to be made from the new corporate system. 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 October – December 2022. The statistical information also contains an analysis of the key figures in each of the incident and near miss sections.

The Reporting of Injuries, Diseases and Dangerous Occurrences 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, 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 (Oct-Dec 2022)**

All incident and near miss information in the appendix to this report has been provided to Cluster level in the appendix. However, within the Operations Function these have been reported to Service area level.

#### **Incident information**

- 3.3** 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 comparison for each of the three years prior to this reporting period so the Committee has sight of the last reporting year prior to the pandemic. The comparative figures for this year are in a separate chart due to the change of system. Work is continuing to develop the reporting process on Power BI to have all of the figures in 1 chart.
- 3.4** When an incident is reported the corporate system generates an investigation report which the reporting officer is required to complete. This investigation report highlights categories of criteria which require to be considered including root cause, actions identified and completion dates.
- 3.5** Page five of the appendix details the breakdown of incidents within the Operations function which shows that the largest number of incidents within Operations occur within the Education Service.

These incidents often involve children/young people where a social, emotional, mental health need (SEMHN) has been identified.

Schools follow the staged intervention procedure, whereby support is accessed using school-based, community, and city-wide supports.

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 (Oct-Dec 2022)

- 3.6** The table in the Appendix also shows the number of RIDDOR reportable incidents. During the reporting period between October and December 2022 11 incidents involving an employee required to be reported to the Health and Safety Executive, which was for an over 7-day injury.
- 3.7** All RIDDOR incidents are followed up by the Corporate Health and Safety Team 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
Oct-Dec 2022	1.02	2022/23

- 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 (Oct -Dec 2022) was 4 RIDDOR reportable incidents and a reportable incident rate of 0.5.

### 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.
- 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.
- 3.14** Page eight 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.

### **Four-year comparison**

- 3.15** The annual comparative figures are displayed to show a comparison across the period which also included those years through the Covid pandemic. The figures are increased as the figures are representative of a return to full face to face interactions with service users post pandemic; but could also be as a result of work done by senior managers and Trade Unions to encourage staff to report all issues. Work continues to be undertaken in consultation with Clusters to reduce these incidents where trends are identified.

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

- 3.16** 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.
- 3.17** The HSE carried out 3 visits to assess the management of asbestos in schools during this reporting period. HSE served an improvement notice on two of the sites requiring them to have building specific asbestos management plans on site. The Council has a central digital database which covers every Council building and identifies locations of asbestos on each site with actions required for the management of identified asbestos. However, the HSE required a written management plan to be in place at each building. Management plans have since been submitted to HSE who have reviewed the management plans and confirmed that they are satisfied that the Council has complied with the notices served.
- 3.18** SFRS carried out 3 site visits as part of their annual audit of ACC (Aberdeen City Council) care properties, homelessness accommodation and educational establishments and provided letters of their recommendations.
- 3.19** The identified actions from these audit visits have been added to the fire risk actions database and allocated to the responsible manager. These will be followed through the fire action dashboard to close out. Any actions which pass their compliance date are raised with the relevant Chief Officer and reported to the Risk Board.

### **Fire risk assessments**

- 3.20** Fire risk assessments are completed on a rolling 5-year programme. A total of 39 fire risk assessments, including 4 Bon Accord Care sites, were completed during this reporting period. The overall average compliance score was 84%. The issues identified are across the range of topics considered in the assessment process. These issues are given a priority level dependant on the

resultant risk which requires an action within a timeframe. No building is left at risk during this process.

- 3.21** 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.

### **Health and Safety Audits**

- 3.22** Compliance visits have been undertaken on several topics / premises within the ACC estate. Topics included Management of Contractors and Manual Handling 100% with an overall compliance respectively, Lone Working with an overall compliance of 93% and, Line manager Responsibilities 96%. 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.

- 3.23** 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 overall score on average is 96% across this quarter. 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.

- 3.24** 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**

- 3.25** There are no health and safety procedures requiring approval during this reporting period. Health and safety procedures are scheduled for review across the year. Corporate procedures are reviewed by the CHST whilst local

procedures, specific to a service, are reviewed by the service with advice and input from the CHST.

- 3.26** 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**

<b>Category</b>	<b>Risks</b>	<b>Primary Controls/Control Actions to achieve Target Risk Level</b>	<b>*Target Risk Level (L, M or H)</b>  <small>*Taking into account controls/control actions</small>	<b>*Does Target Risk Level Match Appetite Set?</b>
<b>Strategic Risk</b>	N/A	N/A		
<b>Compliance</b>	There is the risk that any injury or serious	Corporate Procedures require all tasks to be risk assessed and the controls implemented	L	<b>Yes</b>

	<p>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.</p>	<p>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>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>		
<b>Operational</b>	<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</p>	<p>The task has been risk assessed; employees are trained, competent and supervised then there should be less likelihood of incidents.</p>	<b>L</b>	<b>Yes</b>

	<p>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.</p>			
<b>Financial</b>	<p>The risk is that any incident has the potential to bring a reduction in the overall budget in place to provide service delivery.</p>	<p>As per compliance above</p>	<p>L</p>	<p><b>Yes</b></p>
<b>Reputational</b>	<p>Local and National press coverage of any incident can present reputational damage to the organisation.</p>	<p>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</p>	<p>L</p>	<p><b>Yes</b></p>



		remedial actions are required.		
<b>Environment / Climate</b>	N/A	N/A	N/A	

## 8. OUTCOMES

<a href="#"><u>Aberdeen City Local Outcome Improvement Plan</u></a>	
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.

## 9. IMPACT ASSESSMENTS

Assessment	Outcome
<b>Integrated Impact Assessment</b>	Full Impact assessment not required
<b>Data Protection Impact Assessment</b>	Not required

## 10. BACKGROUND PAPERS

10.1 N/A

## 11. APPENDICES

11.1 Quarterly staff governance Health and safety dashboard July to September 2022

## 12. REPORT AUTHOR CONTACT DETAILS

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