

ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance Committee
DATE	25 August 2025
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Corporate Health and Safety – April to June 2025
REPORT NUMBER	CORS/25/195
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 June 2025 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 June 2025. 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 (April to June 2025)

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.

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 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.
- 3.4** Pages 2 and 6 of the appendix now show the comparison figures for corresponding quarters for injury incidents and near misses.
- 3.5** 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.
- 3.6** 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 from the corresponding period last year to 363 from 305 the corresponding quarter the year before.
- 3.7** Whilst it is difficult to identify exact reasons for incident increase, it would be reasonable to conclude it is possibly due to an increase in reporting following encouragement from Senior Managers and Trade Unions, a possible increase in the level of incidents or more likely a mix of both.
- 3.8** The trend from the last quarter has again dropped similarly to previous years. This seems to happen every time it is a full quarter without any lengthy school holidays. Anecdotally this could be because the children are better settled and regulated for the 3 months in school.
- 3.9** On page 11 of the appendix, the charts represent incident figures in primary and secondary schools to show whether there was a reduction in reporting during school holiday periods. The charts show that in each of the last two years the incident reporting levels drop at the same time during the year and coincide

with the school holiday periods. This would be as expected as most incidents are pupil behaviour related.

- 3.10** The main categorisation of the incidents is either as 'physical injury and violence', unacceptable behaviour or 'externalising behaviour' and are mainly due to pupil behaviours. There are no differences in the consequences of these incidents to the staff involved in the different categorisations. The choice on where to report the incident should be done following a consultation between the line manager and the affected member of staff.
- 3.11** The support provided by the staff continues to play 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. This consistent, positive, and supportive guidance 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 continue to 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.

HSE Reportable incidents (April to June 2025)

- 3.12** The table in the Appendix also shows the number of RIDDOR reportable incidents. During the reporting period between April and June 2025 9 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.
- 3.13** 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 - Jun 2025	1.1	2025/26

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

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

- 3.15** The figure for the corresponding period last year (Apr - Jun 2024) was 10 RIDDOR reportable incidents and a reportable incident rate of 1.29.

Reportable Diseases

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

Near Miss Information

- 3.17** Near-miss incidents help to identify potential hazards and mitigation strategies before an injury occurs. Recognising and reporting near-miss incidents can significantly improve employee safety before an incident occurs.
- 3.18** 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. These elements of a health and safety management system are now monitored daily when a manager reports an incident or near miss to ensure that reporting managers have both elements in place.
- 3.19** The figures have reduced slightly to last year's corresponding quarter from 207 to 205 for all areas and within Families and Communities from 195 to 192.
- 3.20** 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.
- 3.21** Page eight of the appendix gives a breakdown of near misses within the Families and Community 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.

Administering of Medication

- 3.22** Within Aberdeen Health and Social Care Partnership staff are required to administer medication to service users. On occasion errors are made and these are required to be reported both within the corporate incident reporting system and to the Care Inspectorate.
- 3.23** Depending on the type of medication error, staff may seek medical advice and guidance from either the GP or Out of hours services.
- 3.24** If any staff member makes further errors then they are removed from the rota until they have been retrained in the procedures. This includes a period of supervisory observation to ensure the retraining has been effective.
- 3.25** The Service and reps from the Corporate H&S Team will now be meeting on a monthly basis to look at incidents, accidents etc and will be recording/mapping any trends etc .A detailed meeting and action plan will be part of this regular meeting which will allow all relevant data to be captured to ensure the required actions are tracked and implemented.
- 3.26** In addition to this a new system Electronic Medication Administration Record (EMAR) was run as a pilot at Back Hilton Road and this reduced the amount of

medication errors at that location and the Service is now in the planning stages of implementing this system across all remaining in house service.

Regulator interventions (HSE / SFRS)

- 3.27** 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.
- 3.28** HSE Chemical division conducted an inspection of Environmental Services depots on the transportation and use of pesticides. There were no issues identified except 2 missing warning signs on a locked door to a restricted access area.
- 3.29** SFRS carried out no audit visits of any ACC (Aberdeen City Council) owned or managed buildings during this reporting period which resulted in action being taken.

Fire risk assessments

- 3.30** 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 issues identified are across the range of topics considered in the assessment process. These issues are given a priority level requiring an action by a specified date dependent on the resultant risk. No building is left at risk during this process.
- 3.31** There were 298 identified actions allocated to Managers, these are inserted into the fire risk actions database and monitored to a close. This database is available to all Chief Officers and Service Managers on the managers' portal, which shows live data on open, closed, and overdue actions. Should an action pass the compliance date a reminder is sent to the responsible manager and the Service Manager. They are also taken to the next relevant senior management team meeting to make everyone is aware of the need to close these off.

Health and Safety Audits

- 3.32** Compliance visits have been undertaken on several topics / premises within the ACC estate; Line Managers Health & Safety Responsibilities; Risk assessment; Workplace Inspections; Lifting Operations & Lifting Equipment Operations.
- 3.33** There were 18 actions raised against Managers in this period, which are recorded in an action log. 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. This action log is reviewed monthly and where they become overdue then the responsible manager is reminded of the action and the Service manager also made aware of the need to close it off.

- 3.34** Follow up visits are also carried out on several of the completed actions which have the potential to result in more serious consequences and to audit that controls continue to be suitable and sufficient and are being followed.

Health and safety policies, procedures, and guidance

- 3.35** There were no corporate procedures reviewed this quarter.

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) <small>*Considering controls/control actions</small>	*Does Target Risk Level Match Appetite Set?
Strategic Risk	N/A	N/A		
Compliance	There is the risk that any injury or	Corporate Procedures require all tasks to be risk assessed and the	L	Yes

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

	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.			
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	L	Yes

		consider whether remedial actions are required.		
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.

9. IMPACT ASSESSMENTS

Assessment	Outcome
Integrated Impact Assessment	No assessment required. I confirm this has been discussed and agreed with Vikki Cuthbert, acting Chief Officer Governance in March 2025.
Data Protection Impact Assessment	Not required

9 BACKGROUND PAPERS

9.1 N/A

10 APPENDICES

10.1 Quarterly Staff Governance Health and safety dashboard April - June 2025

11 REPORT AUTHOR CONTACT DETAILS

Name	Colin Leaver
Title	Corporate Health and Safety Lead
Email Address	cleaver@aberdeencity.gov.uk