

**Open Report on behalf of Pete Moore, Executive Director Finance and Public Protection**

Report to:	<b>Value for Money Scrutiny Committee</b>
Date:	<b>27 September 2016</b>
Subject:	<b>Corporate Health and Safety Annual Report 2015/16</b>

**Summary:**

One of the key roles of the Value for Money Committee is to review and scrutinise the performance plans for resource management, of which health and safety management is an integral part.

This report assists the committee in fulfilling that role, by providing an overview of the health and safety performance of the Council for the period April 2015 to March 2016.

**Actions Required:**

That the Committee note the performance for the past year and comment on any areas which it is felt officers should focus on over the coming year.

## **1. Background**

It is important that the health and safety performance of the Council is brought to the attention of scrutiny members. The Corporate Health and Safety Annual Report 2015/16, which can be found in Appendix A, serves this purpose.

The Annual Report, which has been written in collaboration with the management led Corporate Risk and Safety Steering Group, includes the following:

- Risks
- Performance for 2015/16
- Accident Statistics – Key Issues and Outcomes
- Plans and Targets for 2016/17

## **2. Conclusion**

Overall, during the period being reported, the council continued to pro-actively manage its health and safety risks.

The Committee should note and gain comfort from the successes highlighted within the report.

### **3. Consultation**

#### **a) Policy Proofing Actions Required**

N/A

### **4. Appendices**

These are listed below and attached at the back of the report	
Appendix A	Corporate Health and Safety Annual Report 2015/16

### **5. Background Papers**

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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**Corporate Health and Safety Annual Report 2015-16**

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## 1. Introduction

- 1.1 Welcome to our Corporate Health and Safety Annual Report for 2015-16. In this report we highlight the key achievements and progress made during the period 1<sup>st</sup> April 2015 to 31<sup>st</sup> March 2016. The aim is to provide the public of Lincolnshire, and others interested in health and safety, with information on what we are doing to protect our employees, volunteers, contractors, clients, service users, pupils and members of the public.
- 1.2 Health and safety forms part of our overall Risk Management Strategy, which aims to identify and manage our risks and risks to the services we provide to the public. It focuses on the risks of injury and ill health that can arise from the wide range of activities necessary to deliver services to the people of Lincolnshire.
- 1.3 We are committed to managing our risks in a balanced and proportionate way that supports the delivery of services in Lincolnshire. Our approach of "*Risk aware, not risk averse*" allows us to protect people without stopping them from enjoying their lives.

## 2. Risks

- 2.1 An organisation such as Lincolnshire County Council, with its broad range of activities, needs to manage an equally wide variety of risks. The following list represents some of the most common health and safety risks encountered across the Council:
  - Lone working
  - Violence and aggression
  - Musculoskeletal injuries
  - Slips and falls
  - Transport and road risk
  - Work-related ill health, including work-related stress
- 2.2 To ensure that risks are identified and managed proportionately, we develop policies, procedures and guidance to assist managers and staff with achieving this target.

Our approach to managing risk is concerned not only with protecting our staff, but also other parties who may be affected by - or who assist us directly in delivering our activities, e.g. pupils, members of the public, volunteers and contractors.

Examples of some of the ways in which we manage and monitor our risks to 'others' include:

- Through our high standards of volunteer management - including comprehensive guidance, training and support for our volunteers to help keep them safe in their activities;
- A monitoring regime of standards for health and safety within our Lincolnshire County Council Highways Alliance;
- The continued development of our schools' health and safety Self-Assessment Programme that allows us to actively monitor health and safety standards within LCC controlled schools.
- Joint working with our health, education and emergency services partners to ensure an integrated approach to the management of moving and handling risks to people, including vulnerable adults, children and their carers;
- Sharing of best practice with partners and other interested parties – e.g. all of our corporate health and safety policies, guidance and templates are freely downloadable from the Council's website.
- We continue to produce and issue health and safety bulletins covering various subjects. Since the introduction of this process we have developed over 60 various bulletins on key health and safety issues, areas of concern or point of interest. All of which are available to view and download on our web site.

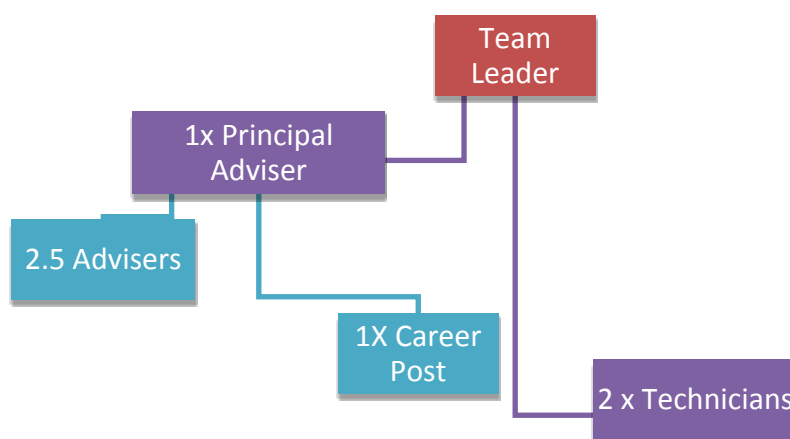
### **3. Performance for 2015-2016**

- 3.1 This year started with the transfer of six members of the old Mouchel health and safety team into Corporate Audit and Risk Management (CARM). This was followed by a fundamental review on the delivery of internal operational health and safety services to assist us with the restructuring of the team based on the needs of the Council.

The review resulted in:

- *The implementation of a hieratical structure to the new team which allowed us to create two technician posts to provide day to day support and guidance to managers on basic health and safety requirement allowing advisers time to be used on more complex issues.*

## The New Corporate Health & Safety Team Structure



- *The new structure gave us the opportunity to offer a career development role within the team, the chance for a newly qualified, inexperienced individual to get their first role within health and safety and develop within a local authority environment.*
- *A review of how health and safety support services would be allocated in 2016-17 based on the resources of the new team structure.*

3.2 This period presented us with a number of very difficult and challenging issues. We tried to balance the needs of new team members, the implementation of a new structure alongside a fundamental change in the method of service delivery with manager's expectations, existing support requirements and continued compliance with health and safety legislation. Key issues during this period were:

- *The restructure resulted in three very experienced advisers taking the opportunity for voluntary redundancy (VR) and the team losing knowledge and experience in a very short period of time.*
- *The TUPE staff having to deal with coming into a new employer, with a different culture and new system/processes, combined with a level of uncertainty over job security during the consultation period and loss of friends/colleagues, did have a negative effect on team moral.*
- *The job evaluation and recruitment process resulted in several posts remaining vacant for a prolonged period of time, having a direct effect on the team resources and the delivery of health and safety services.*
- *Managers expecting the same type and method of support they would have historically received and not fully embracing the new support service model.*

- *Getting the responsible parties to take more ownership of health and safety management within their service areas.*

**Key remedial actions taken by us:**

- **The VRs gave us the opportunity to assimilate the remaining officers into posts within the new team structure without the need for selection interviews. This give the re-assurance of job security and helped with improving team moral**
- **The assimilation of officers ensured the new team structure was successfully implemented quickly and began operating from 1<sup>st</sup> Oct 2015.**
- **We ran an internal recruitment drive, resulting in one of the newly created health and safety technician posts being filled in January 2016.**
- **We worked with Directorate leads to establish a more risk based approach for the development of Directorate health and safety work plan for 2016-17.**
- **We produced a number of “self-help” style health and safety guidance documents for employees and managers in several key areas.**

3.3 Although this was a difficult period we are pleased to report that we did continue to maintain good standards for health and safety. Our resources focused on and supported areas of greatest need, reviewing and making recommendations for improving existing systems to ensure an acceptable level of compliance but with an ever-greater efficiency.

**3.4 Main Achievements in 2015-2016**

Due to the restructuring process only minimal specific Directorate health and safety targets were set for 2015-16. The focus was on ensuring that sufficient levels of health and safety support to service areas were maintained during this transition period. Work to ensure this was achieved can be seen as follows:

- 3.4.1 – 3.4.3 : Strategic Safety
- 3.4.4 – 3.4.6 : Audit/Monitoring
- 3.4.7 – 3.2.9 : Training and Resources

**3.4.1 What we said**

We would provide the Directorate health and safety leads a full quarterly PO3 accident statistics report. The reports will be divided into Directorates areas along with an overview of employee and non- employee incidents and have the ability to use filters within the report for identifying services areas, buildings, individuals, type of injury and the causes.

## What went well?

- *Quarterly PO3 accident statistic reports are now issued to relevant Directorate health and safety leads.*
- *Filters are included within the report to allow Directorates to identify problems, pattern or trends within specific services areas, buildings, individuals, causes or injuries, etc.*
- *We continue to amended and improve the options that are available for officers to choose when completing an on-line incident form to improve accuracy.*
- *We have worked with Lincolnshire County Council controlled schools to move them away from the paper-based accident reporting system onto our on-line system. Throughout the year we have promoted its use with letters, guidance and re-enforced this message via the annual self-assessment process.*

## What were the blocks and barriers?

- *We have identified an issue with how RIDDOR<sup>1</sup> reportable incidents are recorded in the system that could potential result in "over 7 days"<sup>2</sup> incidents not getting reported to the Health and Safety Executive (HSE)*
- *The system is still operating on an old organisational structure and Directorate names and is run from our Insurance Claims system. The company is working on trying to make the necessary updates.*
- *The company failed to fully deliver on their promise of a "Managers Portal" into the PO3 system, which would have allowed managers to access the system directly and view relevant incident data. Although not critical to the operation of the system or Lincolnshire County Council's compliance with legislation, its introduction would have been an additional health and safety resource to assist managers.*

## The impact/outcomes/actions

- **Enables Directorates to better target health and safety support services by using the stats to identify areas of concern.**
- **Gives managers more information on whether any additional training, supervision or support may be required to reduce the potential risk of incident and injuries.**

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<sup>1</sup> RIDDOR – Reporting Injuries Diseases & Dangerous Occurrences Regulations

<sup>2</sup> Over 7 days incident – if the incident results in an employee having 7 days or more off work it becomes RIDDOR reportable.



- **We improved the system automated email to managers to include a direct link to the RIDDOR reportable flowchart guidance to reduce the chance of potentially notifiable incidents not getting reported to the HSE.**
- **We are working with the Insurance Team to look for possible alternative systems for the recording and management of claims and incident records.**

### 3.4.2 What we said

Review of the corporate G5 Fire Safety / Risk assessment policy, taking into account our new approach to undertaking Fire Risk Assessment and improving the current managers' guidance in relation to Personal Emergency Evacuation Procedures (PEEP's).

#### **What went well?**

- *Full review, re-write, consultation and implementation of the G5 Fire Safety Policy, taking into account that Lincolnshire Fire & Rescue Service are now our "competent persons" for undertaking fire risk assessments within all our properties.*
- *Implementation of new guidance for managers on undertaking and implementing PEEP's. This process allows managers to identify the need for any individual controls i.e. specialist equipment, assistance; etc. The implementation of the PEEP will ensure the individual can safely evacuate the building in the event of an emergency.*

#### **What were the blockers and barriers?**

- Property Services went to the Corporate Risk and Safety Steering Group with a risk fund bid towards the costs of a "Deaf Alerter" system for several building on the County Office Complex. However it wasn't successful as the group felt this should not be funded corporately but instead services areas/line manager should be implementing the PEEP process. This would identify if any specialist equipment is required for safe evacuation of an individual, the service area would then need to fund or request funding via a risk fund bid process on a cases by cases bases.

#### **The impact/outcomes/actions**

- **The implementation of fire policy that ensures an appropriate level of competence is used when undertaking fire risk assessment.**

- **The introduction of a PEEP process that ensures the individual's needs are suitable assessed and bespoke/individual control measures are implemented rather than a blanket corporate approach.**

### **3.4.3 What we said**

To continue reviewing the risk based approach/methods for undertaking health and safety site inspections of highway maintenance operations. To monitor the impact of this processors and use this information to assist the development of the inspection programme in 2016-17.

#### **What went well?**

- *We still undertook on average 6 site inspections a week.*
- *As with previous years, this new risk based approach resulted in fewer than 10% of these inspections requiring an adverse report being made against a contractor on site.*
- *Fewer than 2% of these inspections required immediate corrective action (within 2 hours) by the contractors on site.*
- *2 of our adverse reports led to prosecutions of the contractors (utilities).*
- *8 contractor approvals were undertaken to ensure that their health and safety systems met the high standards of Lincolnshire County Council.*

#### **What were the blockers and barriers?**

- *We lost an adviser with significant highway inspection experience, resulting in the need to establish a revised approach to highway inspection sooner than planned.*
- *Owing to the reduction in the team, the new targeted approach to inspections and the need to return the two old inspection vehicles at the end of the Mouchel contract, we now only require one highway inspection vehicle.*
- *This new targeted/risk based approach resulted in the total number of inspections undertaken compare to pervious year was reduced.*

#### **The impact/outcomes/actions**

- **Despite the changes, we still undertook over 300 inspections and the percentage of adverse inspections continued to fall.**

- **The fall in the number of adverse site inspections and the successful prosecution reflects that we can continue to ensure adequate levels of health and safety but still enable us to target contractors who give us cause of concern. By introducing new methods of work and joint working across service areas we can minimise the impact and work smarter.**
- **This data confirms that a more focused risk based approach to the inspection regime with fewer site visits and continued contractor approval is an important tool for maintaining adequate levels of compliance.**

#### 3.4.5 What we said

With the need to improve efficiency and accuracy we would work towards fully replacing the old paper based accident reporting system in our controlled schools by introducing the on-line PO3 accident reporting system to them.

#### **What went well?**

- *We produced a simple guidance letter that was sent to all schools informing them of a deadline date for the use of paper copies accident forms. It explained we would no longer accept paper forms and all accidents must now be recorded on the on-line system. We also included the necessary links to our policy, the on-line reporting system and the user guidance.*
- *After the deadline date any school sending a paper copy was reminded of the new system. We inputted this initial form into the system but informed them any further paper forms sent to us would be returned to them for entry onto the on-line system. Only a handful of schools required this action with the majority now using the system very successfully with minimal support or guidance.*

#### **What were the blockers and barriers?**

- *With all controlled schools now instructed and expected to centrally record all accidents/injuries on the corporate on-line system we're expecting to see an initial increase in the number of reported incidents. This is not due to the number of actual incidents increasing, but an improvement of the reporting process. By centralising this, making it available to all controlled schools and giving individual schools responsibility for entering directly into this system, the potential for paper report forms to remain on site and not be forwarded to the health and safety team for entry onto the system is completely removed.*

*The forms are not triaged prior to submission which has resulted in the system being used for recording all manner of incidents on school premises. This isn't an issue because the system has the ability to filter and sort the*

*completed PO3 forms allowing Children's Services to monitor and review only the relevant information.*

### **The impact/outcomes/actions**

- **All controlled schools are inputting into one single centralised system.**
- **A significant resource saving by removing the need for separate paper forms which needed to be completed and then sent to the health and safety team for individual input into the system.**

### **3.4.6 What we said**

A review of the G13 Display Screen Equipment (DSE) Policy and the on-line work station assessment system to simplify the process and reduce the existing resource pull required to meet legislation.

#### **What went well?**

- Reduced the number of questions contained within the on-line work station assessment from 32 to 22. These now focused primarily on the legal requirements of the DSE Regulations.
- Introduced scenarios based questions with several options in key areas that historically had been miss-interpreted. This allows the advisers to ensure the correct guidance is given to the individual saving time and resources.
- The system now automatically signs off completed work station assessments once all identified actions have been completed. Removing the requirement for both line managers and employees to manually agree sign off.
- We've developed 11 new manager and employee self-help guidance documents focusing on the main issues and problems identified in the work station assessments.

#### **What were the blockers and barriers?**

- The old policy required both managers and employees to manually sign off completed assessments resulting in a back log on the system. The automation of the system will slowly improve this situation over time, along with resources being allocated to data cleansing in 2016-17.
- We identified that employees are using display screens more and more in their private lives i.e. smart phones, tablets, PCs and laptops which the DSE regulation does not cover and over which the employer has no control. However the potential health effect on the individuals using this type of equipment remains the same. So to ensure that our employees have all the relevant information in relation to the safe use of mobile devices we included a question around the

issue within the workstation assessment and produced simple employee guidance.

#### **The impact/outcome/actions**

- **Fewer resources required to achieve continued compliance with the regulation.**
- **Acknowledges the changing culture of display screen usage within employee's private lives due to fast paced technical advances in recent years by provided useful guidance and information.**

#### **3.4.7 What we said**

Undertake follow up audits of the Training and Learning Centres (TLC). We initially audited these in 2014-15 after serious concern over the competence of the third party inspections and safety standards at the TLCs.

#### **What went well?**

- *Recommendations were identified as part of the initial audits undertaken in 2014-15. This included several safety critical items resulting in several TLCs being unable to operate. We undertook re-inspections of the TLCs to evaluate implementation of these recommendations and confirm that all safety critical actions had been complete and they could now re-start operations.*

#### **What were the blocks and barriers?**

- *The root cause that resulted in several TLCs being allowed to operate in unsafe conditions was due to the principal contractor employing an incompetent health and safety adviser. The Corporate Health and Safety Team has offered guidance and support to the clients in the future to reduce the risk of this happening again.*

#### **The impact/outcomes/actions**

- **Ensured that the TLCs were brought up to acceptable health and safety operational standards.**
- **Identified serious failing within the existing health and safety monitoring systems and contractor control.**

#### **3.4.8 What we said**

We'd work to increase awareness of LCC's bomb threat procedures and actions to take in the event of a suspicious package being delivered.

### **What went well?**

- *We produced promotional "Int\_Comms" messages which ran over several months. Raising general awareness of our procedures and the key messages in relation bomb threats within our buildings.*
- *We worked with Lincolnshire Police to provide suspicious mail training for our employees, targeting those who deal with mail on a regular bases i.e. mail room and reception staff.*
- *We've agreed with Lincolnshire Police for them to provide suspicious package training in the future. This course now forms part of our Corporate Health and Safety training programme and will be delivered following an adequate number of requests.*

### **What were the blockers and barriers?**

- *Due to the recent changes within the Emergency Planning team it's still not been possible to co-ordinate a bomb evacuation drill of the main county complex with a Local Resilience Forum (LRF) exercise.*

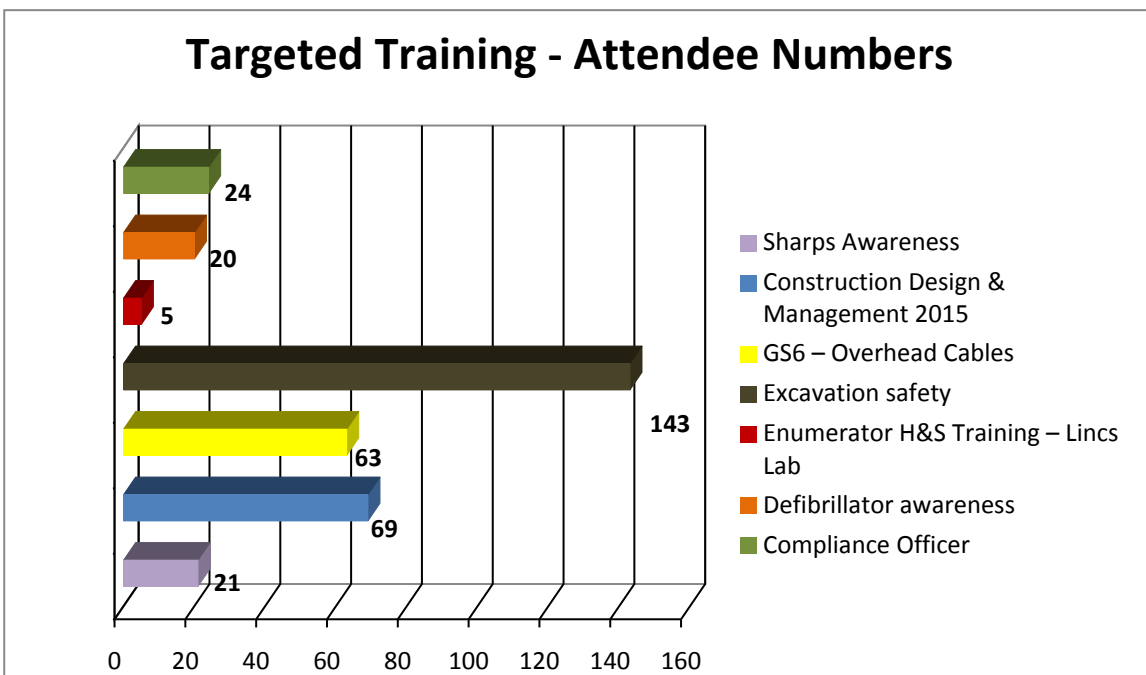
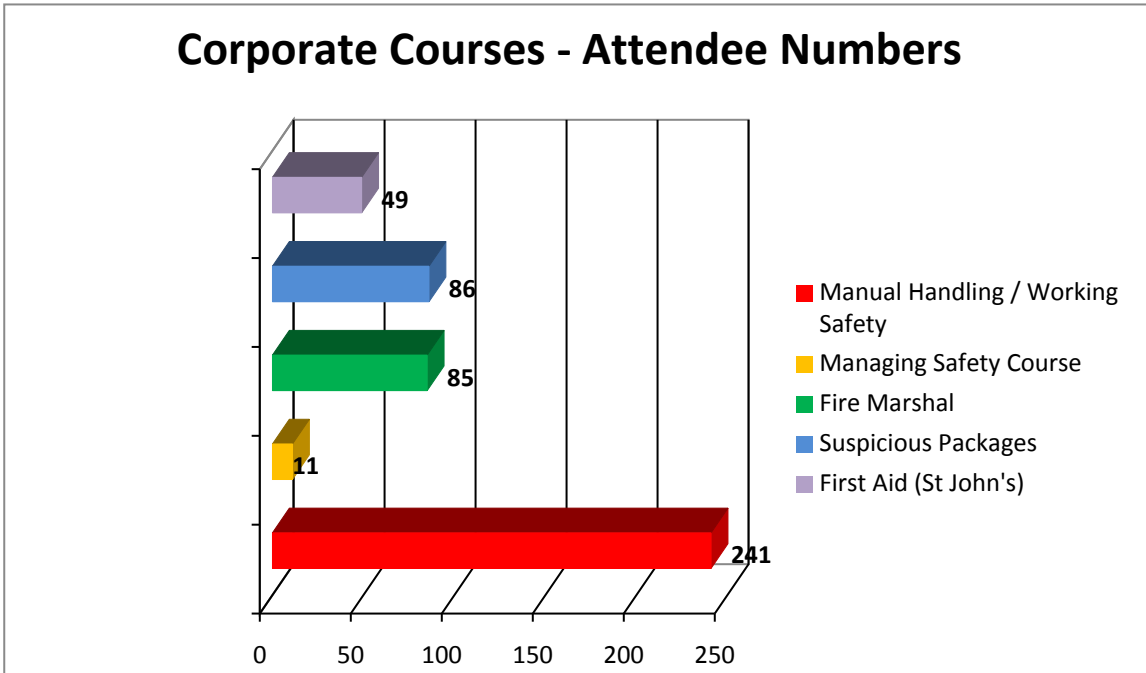
### **The impact/outcomes/actions**

- **Helped to rise the generally awareness of what to do in the event of this type of emergency situation.**
- **Given the staff in key roles where there's a higher risk of potentially coming into contact with suspicious packages the knowledge and confidence to take action and more importantly, what is the correct action to take.**

#### **3.3.9 What we said**

We'd continue to target training in key health and safety areas, high-risk service areas and specific high-risk operations.

**What went well**



**What were the blockers and barriers?**

- *The courses required reviewing and updating to bring them into line with Lincolnshire County Council standards following the transfer of the old training material from the Mouchel I.T system.*

- *The ability to provide classroom based training in the first 2 quarters of 2015-16 was limited due to the TUPE and restructuring process.*

### **The impact/outcomes/actions**

- **The creation of the new internal health and safety team has given us the ability to start providing more in-house training which can be centrally managed.**
- **The costs associated with providing in-house health and safety courses delivered by the health and safety team are reduced. For example when Mouchel delivered the 4 day managing safety course it cost £300 per attendee. Now, other than the time resource, we deliver the course free of charge to our employees.**

### **3.5 Accidents/incidents data**

3.5.1 The accident / incident statistics have shown improvements in a number of key areas:

- With the introduction of the on-line PO3 system within all our controlled schools.
- Although we have seen a very small increase in the overall number of reported "over 3 day" injuries of our employees from 7 to 11, the average time off per accident reduced from 13 days to 9.5 days.
- We've seen a 17% reduced in the total number of days lost as a result of "over 7 day" RIDDOR<sup>3</sup> reportable injuries recorded on the system.
- We saw a continued reduction (32%) in the number of reported injuries related to all types of manual handling.
- The total number of reported employee injuries related to slips, trips or falls fell by 35%.
- No fatalities, reportable diseases or reportable dangerous occurrences.

3.4.2 The percentage split of submitted PO3s within each Directorate (Fig. 1).

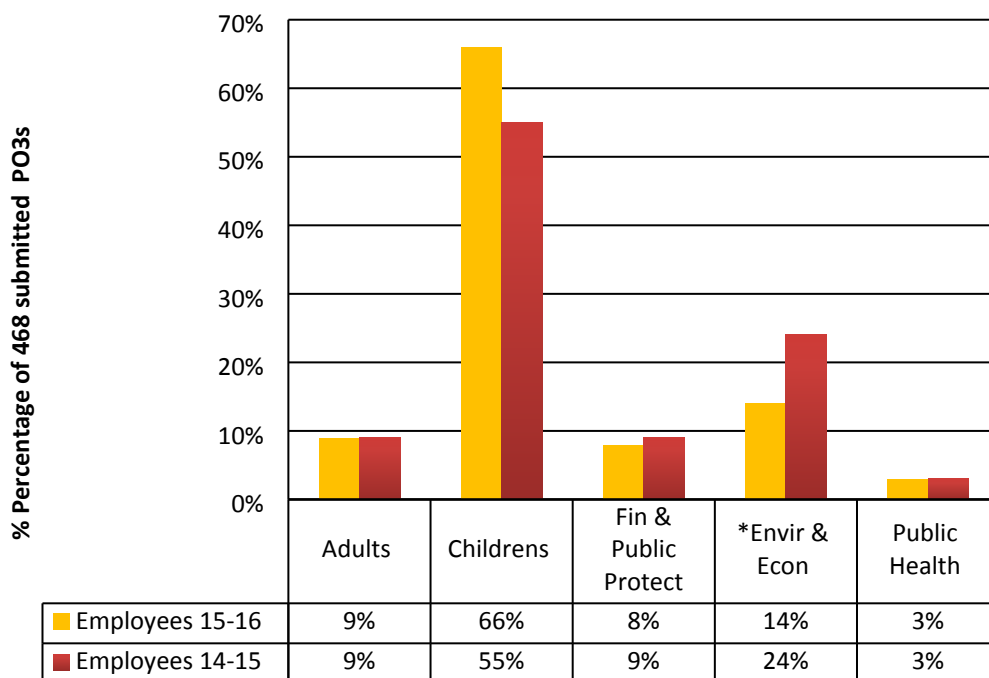
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<sup>3</sup> RIDDOR – Reporting of Diseases, Injuries and Dangerous Occurrences Regulations



Fig.1

## Employees PO3 Incident Reports 2015-16



\* The Environment & Economy Directorate figures still contain the Libraries & Heritage statistics.

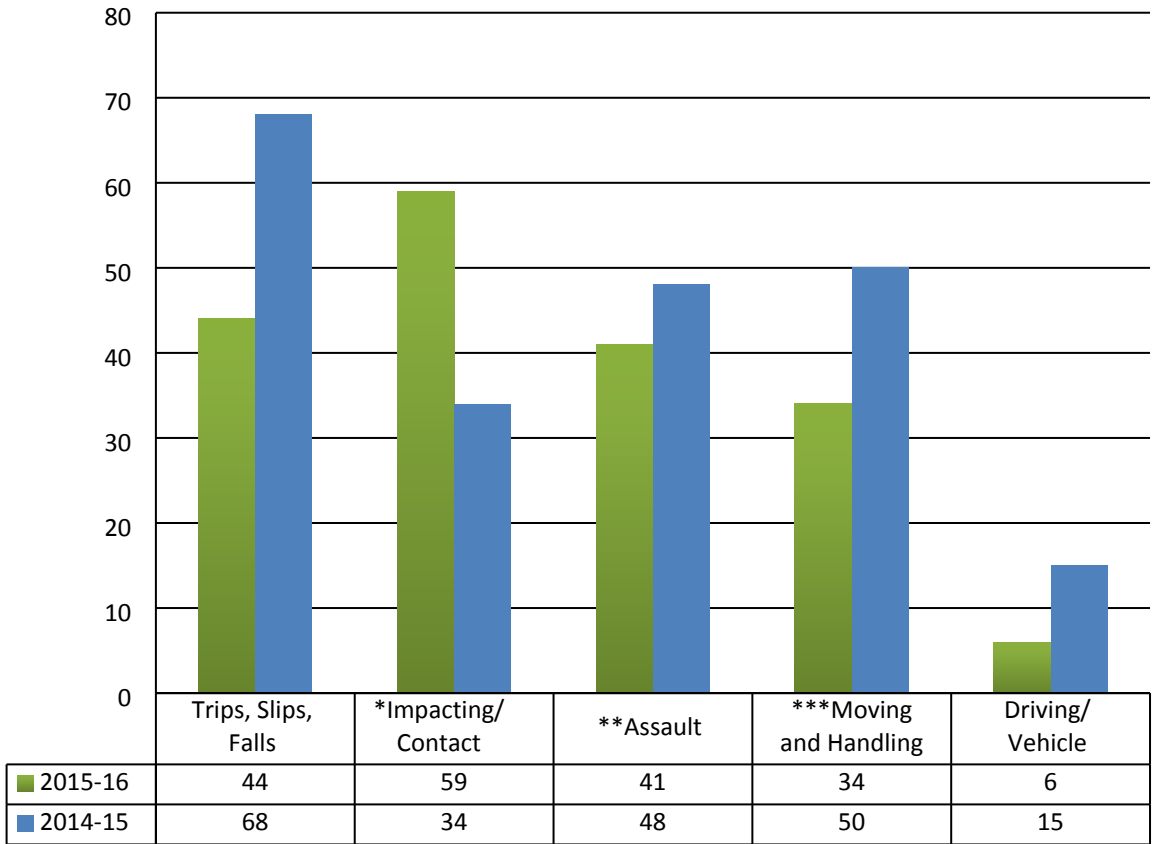
3.5.3 With Children's Services (CS) still accountable for the highest number of employees and still directly responsible for delivering a larger number of services, it's no surprise to see they have again submitted the highest number of PO3 forms. This figure has increased by 11%, but mainly due to our controlled schools now being expected to use the centralised on-line system.

3.5.4 One of the positives from the stats is the 10% reduction within the Environment and Economy (E&E) Directorate, especially as this area still contains most of the higher risk operations. There's no one service area that's been responsible for this reduction, but a general reducing pattern across several services areas.

3.5.5 The Top 5 submitted PO3's incidents and Injuries (Fig. 2).

Fig.2

### Top 5 submitted PO3s



\* These figure now include the new "knock, bumps and bangs" statistics for 2015-16,

\*\*Assault stats for Children with disabilities are not included within this table, these are recorded separately

\*\*\* These stats also included M&H of people and injuries to services users.

3.5.6 With the continuation of the Corporate Slip, Trip and Fall (STF) campaign throughout 2016-17 we've seen reductions in the number of reported employee incidents related to STF's. Along with significant reductions in the manual handling and driving/vehicle related employee incidents, with several possible factors contributing to this:

- An increasing "classroom based" manual handling training programme for relevant employees.
- The manual handling e-learning course being placed in the "Must Do/ Best Practice" section on Lincs 2 Learn for all employees.
- Continued review and amendments to the G12 Moving and Handling of People policy and joint agency protocols.
- An improved protocol for checking employee's vehicle documentation.
- Improvements to employee lease car scheme insurance protocols.

3.5.7 There is one area where we show a noticeable increase in the number of reported employee incident. The Impact/Contact category saw a 74% increase compared to the previous year. However the main reasons for this are:-

- the inclusion on schools within the system, as explained above
- the introduction of a new option within the PO3 system, "knocks, bangs and bumps" for very low level injuries that result in minimal injury with no time off work or any significant impact on performance.

We've always encourage all employees to report all work related injuries, regardless of how small, but it became clear that for low level injuries employees were either not reporting or finding a "best fit" within the existing options on the PO3 system. The ongoing use and promotion of this new option will enable managers to identify simple, low costs solutions to these small day to day low risks.

## **4 Plans and Targets for 2016-17**

4.1 We have identified the following key priorities for 2016-17:

- To continue with the introduction of the corporate Health and Safety Training programme, increasing the number of subjects available to employees.
- Continue to grow and extend our client base i.e. schools, academies, agencies through either Assurance Lincolnshire or the Offer to schools project.
- Appoint into the two vacant roles to bring to team up to full strength<sup>4</sup>.
- Make further improvement to how internal health and safety service is delivered. To evaluate the benefits of introducing an assurance mapping approach to better evaluate the health and safety priorities within each Directorate.

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<sup>4</sup> In October 2016 we successfully appointed 2 new officers into the Corporate Health and Safety Team

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