

Audit Committee

20 May 2024

Health, Safety and Wellbeing Performance
report Quarter four 2023/24



Ordinary Decision

Report of Amy Harhoff, Corporate Director, Regeneration, Economy, and Growth

Report of Paul Darby, Corporate Director Resources.

Electoral division(s) affected:

Countywide.

Purpose of the Report

1. To provide an update to Audit Committee on the council's Health, Safety and Wellbeing (HSW) performance for quarter four 2023/24.

Executive summary

2. There were 361 accidents, incidents and near misses compared to 439 in the previous quarter. Compared to 2022/23 there is a 9.45% decrease in accidents, incidents and near misses and a decrease in employee accident rates per Full Time Equivalent for the year also.
3. In terms of more serious reportable accidents there were only two Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) specified injuries and two over seven-day absences in quarter four which are again a significant decrease from the previous quarter. There was however a RIDDOR reportable dangerous occurrence in relation to a wall collapse during demolition works.
4. There were two fire related incident during quarter four. These occurred at a waste transfer station and children's home premises. Although there were no injuries associated with the incidents and limited damage to equipment and property, a range of recommendations were made in relation to safe working procedures, training and risk assessment.
5. The Health and Safety Executive (HSE) issued a notification of contravention in relation to Shildon Sunnydale School and Framwellgate Moor primary school. The incident at Shildon Sunnydale involved a contractor working on behalf of the council sub-contracting works for the removal of a biomass boiler from the vacant building prior to demolition. The second notification of contravention resulted from an HSE inspector visiting

Framwellgate moor primary school to review the school's asbestos management standards. The inspector found a number of issues in relation to some outstanding works, training, contractor management, supervision and information provision on site.

6. There were 175 Health and Safety (H&S) and fire safety audits and inspections of council premises and work activities during the quarter which resulted in an overall compliance rate of 93.98%. Once again, the majority of noncompliance issues were of a low priority and almost 500 opportunities for improvement were identified.
7. The radon testing assurance programme progressed and results for almost 37% of properties in scope are now received and are being actioned where appropriate.
8. A number of incidents occurred at Durham Bus Station during quarter four which related to the surfacing that had been applied by a sub-contractor. Further investigations and independent testing showed that the surface was defective in parts and short and long term remedial actions were taken promptly to rectify the defectiveness of the surface and further assurance testing has been arranged.

Recommendation(s)

9. Audit committee is recommended to:
 - (a) note and agree the contents of this report.

361

Accidents, incidents and near misses reported.
(439 Q3 2023/24, 348 Q2 2023/24, 366 Q1 2023/24)

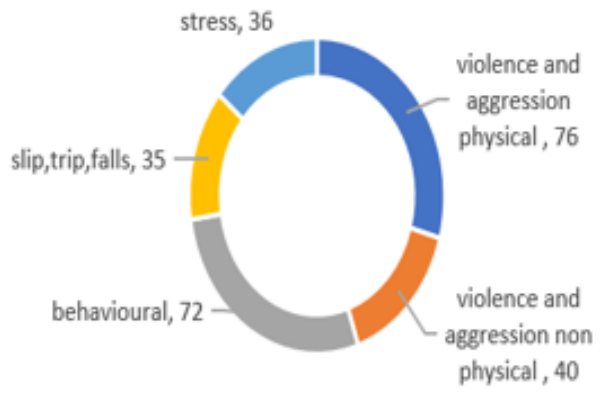


94%

Of all reported accidents are either no injury or near miss



**Main Accident/Incident Causes
Q4 2023/24**



2 RIDDOR 'specified' injury, and 2 over 7 days absence RIDDOR injuries.



**Better Health
at Work Award**

Better Health at Work Maintaining Excellence Status achieved, working towards ambassador status



32 psychological work-related incidents in Q4 2023/24.
(36 in Q3 2023/24, 49 in Q2 2023/24, 43 in Q1 2023/24)

2 fire related incidents



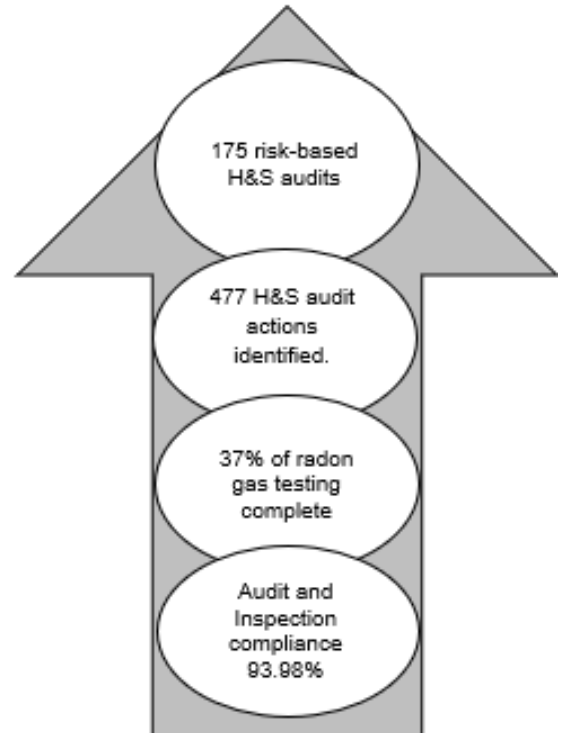
0 CDDFRS inspections of council premises



Construction Design and Management duty holder training delivery commenced across council

2

Enforcement related actions or advice from HSE following inspections and audit activity.



Background

- 9 The Health Safety and Wellbeing Strategic Group has been established to ensure that suitable priority is given to the management of HS&W within the council. The group monitors the development, implementation and review of the Corporate H&S Policy to ensure that it is consistently applied throughout the council and that performance standards are achieved. Key reporting topics are detailed below.

Consultation/Communication

- 10 Trade Union H&S representatives continue to actively participate in the corporate and service specific H&S meetings. Each service grouping has an established H&S forum that meets on a regular basis. The H&S team continue to undertake, on a priority basis, a range of joint audit and inspection programmes in conjunction with trade union H&S representatives.
- 11 There were two joint visits undertaken between H&S and trade union safety representatives in quarter four. These involved bereavement services and refuse and recycling.

Audits and Inspections

- 12 There were a total of 175 audits and inspections undertaken by the H&S team during quarter four. The audit and inspection activity provided almost 500 opportunities for improving H&S performance.

Chart 1 – Audit and Inspection Activity for Quarter 4.



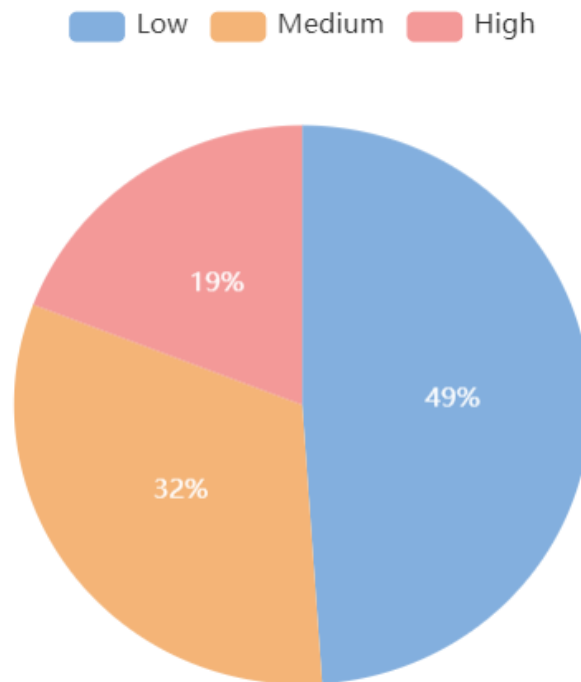
- 13 From the audits undertaken the following headline percentage compliance scores can be determined for each service area where audits took place:

Table 1 Compliance scores

Audit Area	INSPECTIONS	SCORE (%)
	Total	Average
Schools Audit	47	94.94%
Civil Engineering and Construction Sites	22	83.08%
Refuse and Recycling	18	95.41%
Culture & Sport	7	90.16%
Clean & Green	5	88.81%
Crematoria	2	97.79%
CYPS General Audit (non-schools)	4	96.28%
Demolition Sites	3	90.08%
Sub Depot Audit	2	86.21%
Waste Transfer Stations	1	98.25%

14 From the compliance scoring it must be noted that the majority of non-compliance related issues identified were low to medium low as per below chart 2.

Chart 2 Compliance Actions by Priority



Audit High Priority Action Areas

Site	High Priority Actions Allocated
Schools	24
Buildings Construction Site	16
Demolition Works	13
Abbey Leisure Centre	4
Highways Construction Site	4
Seaham Leisure Centre	3
Allotments	3
Durham Crematorium	1

Table 2- Audit Actions completion statistics

Summary	Low		Medium		High		Totals			
	To do	Complete	To do	Complete	To do	Complete	To do	Complete	Total	% Complete
AHS	15	1	0	0	0	0	15	1	16	6%
CYPS	25	4	8	1	1	0	34	5	39	13%
Schools	79	51	20	24	7	2	196	77	183	42%
NACC	36	21	26	25	3	5	65	51	116	44%
REG	46	30	53	38	27	19	126	87	213	41%
RES	0	11	0	0	0	0	0	11	11	100%
Corporate Affairs	0	0	0	0	0	0	0	0	0	n/a
Total	201	118	107	88	38	26	346	232	578	40%

- 15 The audit completion statistics overall continue to show areas of concern in relations to managers providing assurance that actions have been closed out. Audit completion statistics were provided to each corporate director upon request for their service following quarter three. Service specific H&S forums are provided with statistics for their service also and clear information and instruction is provided to manager who are the recipients of audit and inspection outcomes.

Fire Incidents

- 16 There were three fire related incidents at Durham County Council owned premises during quarter four. They occurred at Thornley waste transfer station and Chester View Extra Care Home

Thornley Waste Transfer Station

- 17 It was reported that at approximately 10:40am on 23 January 2024 the fire alarm activated within the waste hall, upon investigation by the loading shovel driver he discovered that the cause of the activation was due to a fire in the co-mingles waste pile. The driver quickly extinguished the fire using the portable fire extinguisher from his vehicle. It was believed that the cause

of the fire was due to a battery within a child's toy car. No further action was required, and normal work activities commenced with minimal service disruption.

- 18 At approximately 13:00pm the same day another fire occurred in the co-mingles waste, the loading shovel driver on this occasion could not identify the cause of the fire, so picked up the waste plie in the bucket of the loading shovel and took it to the hot load bay outside. The waste was then covered with road sweepings and left for 24 hours, before it was taken away the next day. Despite searching through the waste pile, it was not possible to identify the ignition source for the fire.

Chester View Extra Scheme

- 19 Chester View is a three storey 'Extra Care scheme' premises, whereby the property is owned and maintained by Hanover Housing with a tenancy agreement in place for each resident. DCC Staff provide a 24-hour care service for the residents. Each of the 36 flats has a Tunstall BS5839 part 6 smoke detectors fitted within the hall. In addition, there is also a detector linked to the premises as per BS5839 part 1 system These detectors are linked to the main fire alarm panel located in the entrance lobby.
- 20 On 11 February 2024 staff were alerted by the Tunstall system at 20:20pm which detected smoke and directed them to Flat, number 29. Two staff members responded immediately and on opening the door to the flat discovered excess smoke. They noticed a perching stool in the corner of the hallway straight ahead of them. The stool had pile of papers on it, which were at this point alight. The flat tenant was in bed and was unaware of the smoke/fire. One member of staff immediately went into the bedroom and escorted the tenant to his feet and out of the flat at speed. Whilst the other staff member waited outside the door in the hallway. At this point another member of staff arrived, entered the flat, went into the kitchen, filled a bucket with water and doused the flames. Once everyone was out of the flat the staff closed the flat door. The tenant was led to safety.
- 21 As a result of this incident the fire alarm for the premises was fully activated, and Anchor on-call were informed by staff via the fire panel and Anchor On-call button. When the fire service arrived, the fire in the flat was extinguished and made safe.
- 22 It is believed the fire started due to a lit cigarette on the pile of papers. The tenant is a known smoker, he is known to the fire service and a representative from the fire service visited him on 07 April 2024 prior to the fire to assess his flat, and to spray his furniture and carpets. Another visit took place post the fire and a suggestion was made that the tenant try to use vapes instead of cigarettes, staff now regularly move the letters, papers and other post to avoid any accumulation of flammable material in the flat.

- 23 A meeting has taken place with the tenant his social worker and representatives of Anchor to discuss his behaviours and the fact that due to the incident the tenancy agreement for the flat is at risk of being terminated. The personal risk assessments for the individual have been reviewed and more robust strategies have been put into place to further minimise the fire risks around smoking.

Enforcement Body Activity and Interventions

- 24 There were no County Durham and Darlington Fire and Rescue Service (CDDFRS) inspections of council premises during quarter four.
- 25 There were two notification of contravention (NOC) Health and Safety Executive actions issued in Quarter four. These were as follows:

Shildon Sunnydale

- 26 The HSE NOC was issued following an incident in August 2022 and referenced the council and two other contractors. This related to material breaches of H&S legislation associated with the removal of a biomass boiler by a council appointed contractor at Shildon Sunnydale site in August 2022. The removal methods used resulted in asbestos containing materials being disturbed in an uncontrolled manner and contamination of plant and materials. Contractors working on site were also put at risk from exposure to asbestos as a result of their unsafe working practices. The appointed contractors also breached Construction Design and Management (CDM) and work at height regulations whilst the council was deemed to have breached CDM regulations in relation to planning, project management, monitoring of works and principal contractor appointment.
- 27 The council services and processes cited in the HSE Inspectors letter related to the low carbon energy team, corporate procurement and the construction consultancy service. The councils H&S team undertook a thorough and timely investigation and produced a report of which the recommendations have been implemented. This information has been provided to the HSE.
- 28 Following the HSE NOC in relation to Shildon Sunnydale school, the councils corporate training and H&S team have worked together to arrange a repeat of CDM duty holder training. The council, by virtue of its activities has CDM duty holders across all services and therefore there is a responsibility to ensure that these duty holders are fully aware and are able to discharge their statutory responsibilities. Duty holders are identified in the regulations as follows:

Commercial clients –Services and/or individuals for whom a construction project is carried out that is done as part of council business.

Designers – Services and/or individuals who as part of council business, prepare or modify designs for a building, product or system relating to construction work.

Principal designers - Designers appointed by the client in projects involving more than one contractor. They can be a service and/or an individual with sufficient knowledge, experience and ability to carry out the role.

Principal contractors – Contractors appointed by the client to coordinate the construction phase of a project where it involves more than one contractor.

Contractors – Those who carry out the actual construction work, contractors can be an individual or a company.

Workers – Those working for or under the control of contractors on a construction site.

29 This training commences in May 2024 and focuses firstly on principal contractor and contractor duty holders within the council. Work has commenced on the identification of client duty holders within the council and training will be provided to that cohort next. There will also be a consideration as to most effective method with regards to maintained schools who can be clients as defined by the regulations and will therefore require appropriate training.

Framwellgate Moor Primary School

30 As indicated in the Quarter three report, the HSE launched their annual asbestos management campaign which involves HSE inspector visits to various premises across all sectors. This activity focuses anyone with responsibilities for buildings to do everything they must do to comply with the law and prevent exposure to this dangerous substance.

31 An HSE inspector visited Framwellgate Moor primary school on 6 March 2024 and issued a NOC following finding material breaches of The Control of Asbestos Regulations 2012. These breaches involved schools management of contractor selection, supervision and monitoring on site, staff training, asbestos management plan content and an outstanding action from the asbestos management plan. A response has been prepared for the HSE inspector so that the NOC can be completed and assurances provided. A series of further actions have been identified and communications with all schools will take place regarding roles and responsibilities in relation to asbestos management.

Kelly's Bakery, Annfield Plain.

- 32 A significant incident occurred during the demolition phase of Kelly's bakery, Clavering Place, Annfield Plain on Sunday 21 January 2024. The demolition of the building was being undertaken by an externally appointed contractor, A Buckler (Haulage) Ltd. On Friday 19 January 2024 at 1000 hrs the Met Office issued an amber severe weather warning (Storm Isha) with areas of particular concern including much of northern England. On the day of the incident, Storm Isha was delivering strong winds and heavy rain across the northern half of the UK. On Sunday the 21 January 2024 a resident heard a loud noise and upon investigating discovered that large amounts of debris had fallen from the structure and into the street which was segregated, pushing the fence over, across the designated footway and into a garage door.
- 33 The resident reported these concerns to the council and it was established that the contractor had not reported this to the council, which was required as part of their contract. The council then undertook an investigation into the incident and has since reported this incident to the HSE, on behalf of the contractor, as a dangerous occurrence in accordance with RIDDOR reporting regulations. Further action is being taken with the contractor regarding the incident and failure to report this.

Durham Bus Station

- 34 A number of pedestrian and vehicle related incidents were reported following the opening of the bus station in January 2024, which indicated possible defects with some areas of the tarmac surfacing. Bus operators also raised concerns following indications that buses were 'skidding' after applying their brakes on the surface at the northern entrance to the bus station where drop off points are situated. An investigation into the incidents showed that whilst the vehicle incidents were predominantly down to driver errors, the pedestrian slip, trip fall incidents and videos provided by bus operators supported the theory that the surface applied by Tarmac was defective in terms of slip and skid resistance.
- 35 Whilst assurance testing was being arranged, short term actions were taken to put control measures in place, which included provision of sand to surfacing, rubber matting to pedestrian crossing points and additional slip resistant surfacing being applied. Independent slip and skid resistance assurance testing was then undertaken and this confirmed that the surface finish was defective and further works had to be undertaken to prevent further incidents taking place.
- 36 An action plan was then developed in response to the independent slip and skid resistant testing results and this included remedial works to the surface, starting at priority areas where incidents had taken place and where risks of footfall and vehicle movement were foreseeably the highest. Following remedial surface works being undertaken, immediate independent slip and skid resistant assurance testing was then repeated and it is positive that this now indicates this now meets the required standards and controls risks

accordingly. Further independent assurance testing will take place for the remainder of the site to decide if further remedial surfacing works are required.

Employee Health and Wellbeing

- 37 The employee better health at work group, chaired by Corporate Director Adult and Health Services, convened again during this quarter and identified ongoing interventions and communications which were again aimed at raising awareness of support and interventions available and ensuring employees were able to access this where required.
- 38 Some of the main activities during the quarter involved employee communications associated with the resources provided to support better health at work, time to talk day on 1 Feb 2024, blue Monday, dry January and alcohol awareness sessions.
- 39 There was also progression towards the council achieving better health at work ambassador status having already achieved the maintaining excellence standard for the award. This will involve a further staff health and wellbeing survey which is due to be delivered in 2024. There was also a review of mental health first aid provision across the council to ensure that there is adequate coverage across sites.

Open Water Safety

- 40 The City Safety Group met during the quarter and continued to review the city centre related open water safety related risks amongst other key city centre issues. It was agreed that the Royal Society for the Prevention of Accidents should return once the new Milburngate development is open and it is clear how the new infrastructure is going to be used by members of the public, giving time for behaviours to develop so that a further assessment can be carried out to see if any additional risks are identified. Although there were no significant incidents reported and reviewed, there continued to be a number of incidents within the city centre, primarily near various bridges, associated with mental health and emergency services being called out to assist individuals in mental health crisis requiring support which was provided. There was only one river incident where persons had entered the water and staff from Jimmy Allen's assisted two students out of the river after falling in whilst 'messaging about'. Both were treated for the effects of the cold water but fine afterwards.
- 41 The County wide open water safety group also convened during quarter four. The group reviewed incident data and concluded that once again the majority of incidents were city centre related. There have been no reported water safety incidents on the online incident reporting system for areas other than the city centre. A total 13 open water safety risk assessments were undertaken during quarter four across high priority sites.

42 In terms of awareness and education activities planned, CDDFRS and partners will be promoting national water safety week which commences 22 April 2024. The councils communications team will link with counterparts at the Police and CDDFRS communications teams around this. There are also activities planned for world drowning prevention day on 25 July 2024 and world drowning prevention week in June 2024. The council, via its schools aquatic manager, has been involved in a national group in developing the information for water safety to be added into the school's curriculum. It is anticipated this may be completed prior to the summer school holiday period.

Radon Gas Management

43 Following the review of Radon gas management across corporate property the delivery programme progressed during the quarter against schedule. A systematic approach to assessment of buildings was agreed and the initial programme of assessments commenced from October 2023.

44 Building compliance team have managed and arranged placement of monitors in 803 buildings in total. Of those building compliance team have received 298 returns, three of which have readings in excess of the thresholds for radon. Those are Cassop Primary, St Helen Auckland Primary (now an academy), Ferryhill the Woodlands.

45 Remedial actions have already been completed in Cassop primary with engineering controls being installed in the basement area. Work with the radiation protection adviser is continuing to ensure control measures are implemented across the other two sites with elevated levels. There are a total of 37% of building fully tested to date with results being provided, recorded and actioned on an ongoing basis.

Violence and Aggression – Potentially Violent Persons Register (PVPR)

46 At the close of this quarter, there were 199 live entries on the PVPR register.

The total number of **live entries** at the end of each quarter are as follows:

The total number of live entries at the end of each quarter are as follows:				The total number of additions at the end of each quarter are as follows:			
	21-22	22-23	23 - 24		21-22	22-23	23 - 24
Q1	55	85	137	Q1	12	22	41
Q2	47	89	173	Q2	8	21	50
Q3	66	100	199	Q3	30	35	50
Q4	75	113	191	Q4	24	38	23
				Total	74	116	164

The total number of **extensions** at the end of each quarter are as follows:

	21-22	22-23	23 - 24
Q1			10
Q2			21
Q3		9	18
Q4		8	7
Total		17	56

**Data was not recorded pre Q3 (22-23)*

The total number of **removals** at the end of each quarter are as follows:

	21-22	22-23	23 - 24
Q1	20	12	17
Q2	16	17	17
Q3	11	24	19
Q4	14	29	40
Total	61	82	93

The total number of **warning letters** sent at the end of each quarter are as follows:

	21-22	22-23	23 - 24
Q1	3	12	10
Q2	0	4	13
Q3	12	11	18
Q4	8	10	12
Total	23	37	53

The total number of **appeals** at the end of each quarter are as follows:

	21-22	22-23	23 - 24
Q1	0	1	0
Q2	0	0	2
Q3	0	3	2
Q4	1	1	0
Total	1	5	4

The appeals during 23-24 were all rejected.

Occupational Health

Management Referrals

- 47 During Quarter 4, 267 employees participated in clinical consultations with the OHS, following management referral in relation to Long Term Sickness Absence (LTSA), Short Term Sickness Absence (STSA), Management Concerns (Man Con) Reviews, and Re referral appointments, Long Term Sickness Absence/Short Term Sickness Absence (LTSA/STSA) and Covid.
- 48 During Q4, 54 employees did not attend their allocated appointment following management referral. This represents a 17% non-attendance rate and equates to 11 days of clinic time. See Charts 3 & 3a

Chart 1

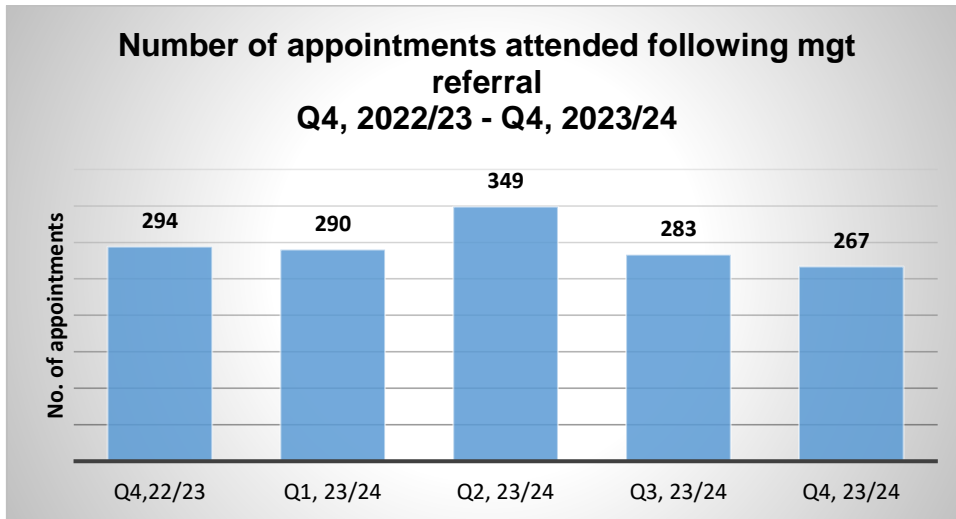


Chart 2 shows the categorisation of management referral appointments attended.

Chart 2

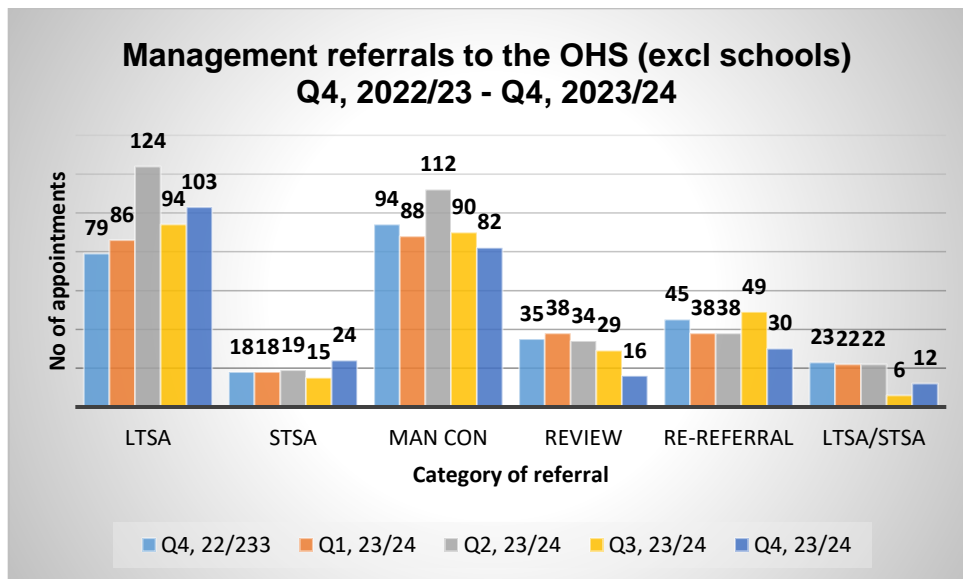


Chart 3

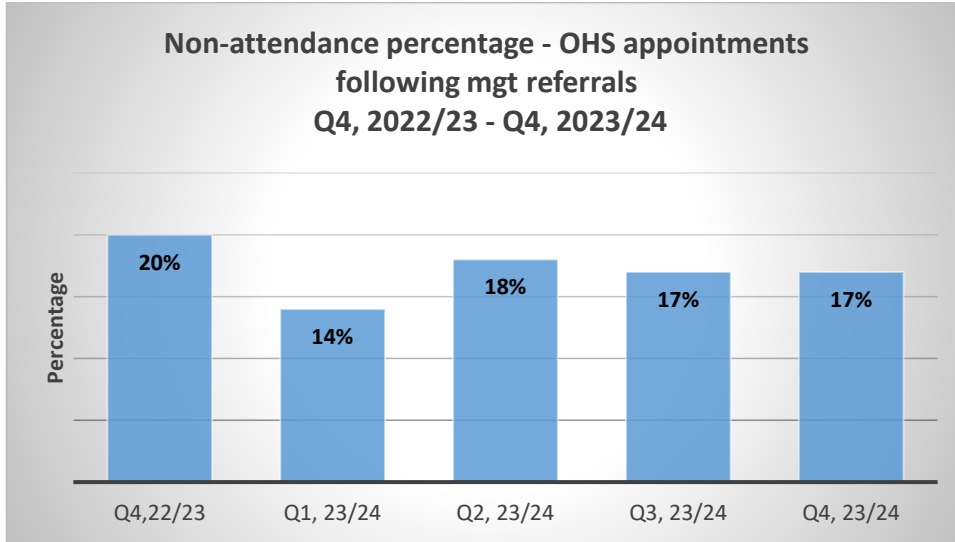


Chart 3a

Non-attendance - OHS appointments following mgt referral by Service	AHS	CYPS	NCC	REG	Res	Q4	Q3	Q2	Q1	Q4
						23/24	23/24	23/24	23/24	22/23
Q4, 2023/24						Total	Total	Total	Total	Total
Number failed to attend	7	21	12	9	5	54	47	67	47	72

49 During Quarter 4, 103 employees were seen for LTSA of which 20% (n=21) stated to the OHS that they consider the underlying cause to be due to work related factors. Of the employees, 86% (n=18) identified this was due to 'psychological' reasons and 14% (n=3) identified as 'musculoskeletal' See Charts 4 & 5. Chart 6 shows the cause of absence categories for non-work related LTSA seen in the OHS, 17% (n=14) were due to psychological reasons; 34% (n=28) were due to musculoskeletal problems and 49% (n=40) were due to other reasons.

Chart 4

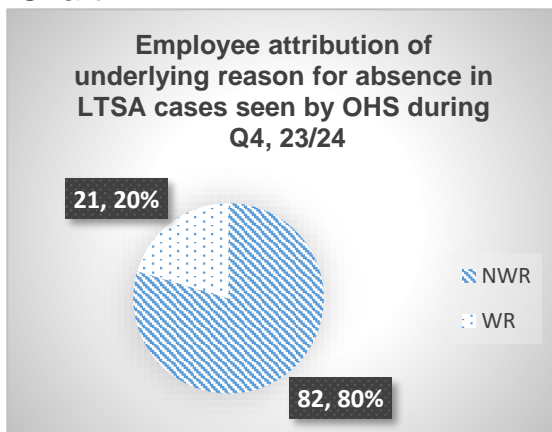


Chart 5

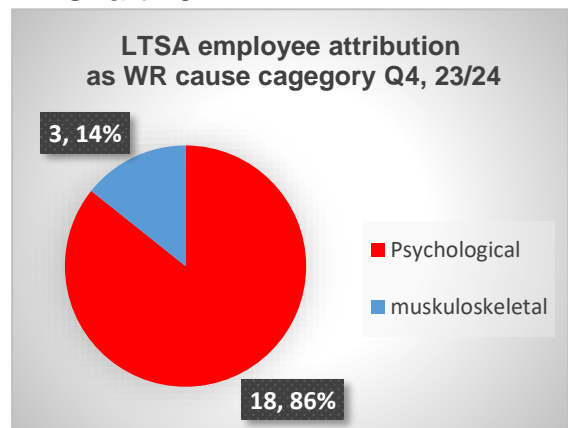
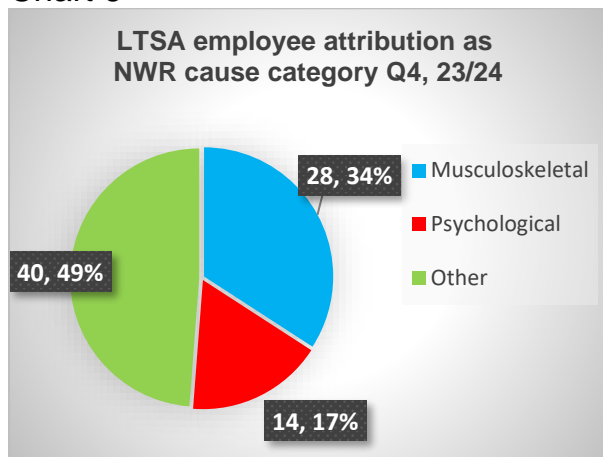


Chart 6



- 50 During Q4, 82 employees were seen as a management concern, 18% (n=15) of these referrals stated to the OHS that they consider the underlying cause to be due to work related factors. (Chart 7) Of the employees seen 67% (n=10) of the work related and 15% (n=10) of the non-work related were due to psychological reasons, by referring to the OHS support, advice and signposting to EAP can be given at an early stage and hopefully prevent an absence from work. Musculoskeletal problems accounted for 25% of non-work related and 13% of work-related management concern referrals, identifying these issues before they result in an absence from work and allow early intervention which could include referral to physiotherapy. Although not all Absences are work related, they can have an impact on work and the wellbeing of employees. (Chart 8 & 9)
- 51 Further analysis of the data relating to management concern referrals identified that 7% of the LTSA referrals received in Q4 were seen in the previous 12 months as a management concern referral.
- 52 During Quarter 4, the OHS provided the following additional support services. See Table 1.

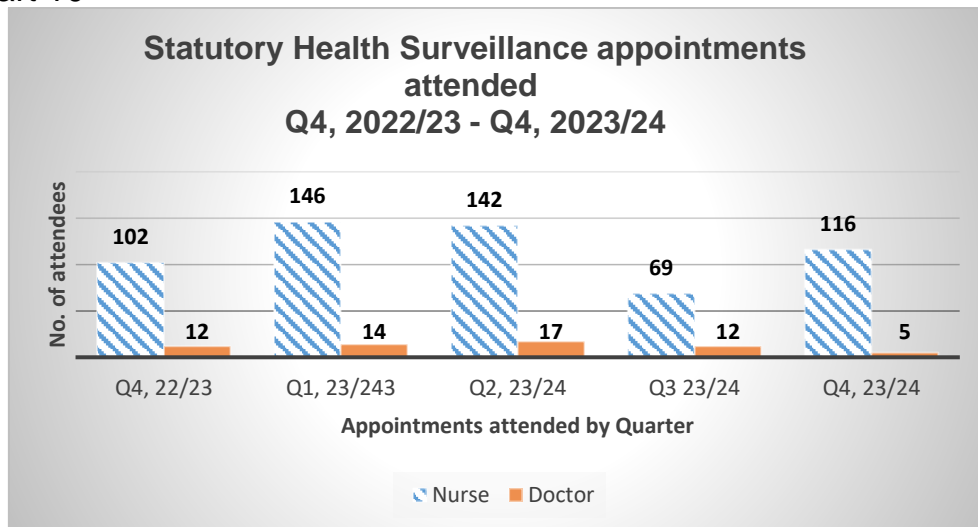
Table 1

Additional Support services accessed via the OHS	A& HS	CYP S	NCC	REG	Res	CE	Service not detailed	Q4	Q3	Q2	Q1	Q4
								23/24	23/24	23/24	23/24	22/23
								Total	Total	Total	Total	Total
Number of routine physiotherapy referrals	14	21	10	12	13	0	-	70	48	65	70	74
Number of routine physiotherapy sessions	30	41	39	20	29	0	-	159	123	150	144	174
Number of 'face to face' counselling referrals	0	1	4	2	1	0	-	8	7	6	2	6
Number of 'face to face' counselling sessions	0	11	7	1	0	0	-	19	7	30	6	15
Total number of calls to the EAP	16	32	14	0	16	0	37	115	104	150	134	160
Telephone EAP structured counselling cases	0	0	0	0	0	0	0	0	2	10	4	5
Telephone EAP structured counselling sessions	0	0	0	0	0	0	0	0	27	52	7	40
Employees referred to online counselling	1	3	1	0	3	0	2	10	3	3	6	13
Online Counselling Sessions	6	20	0	0	4	0	8		7	23	37	49
Employees referred to online CBT	0	1	0	0	0	0	1		4	5	3	0
Online CBT sessions	0	0	0	0	0	0	3		4	5	2	0

53 The OHS continues to provide statutory health surveillance programmes to employees in line with HSE guidelines. Some health surveillance clinics are carried out on site to minimise the effect on service delivery.

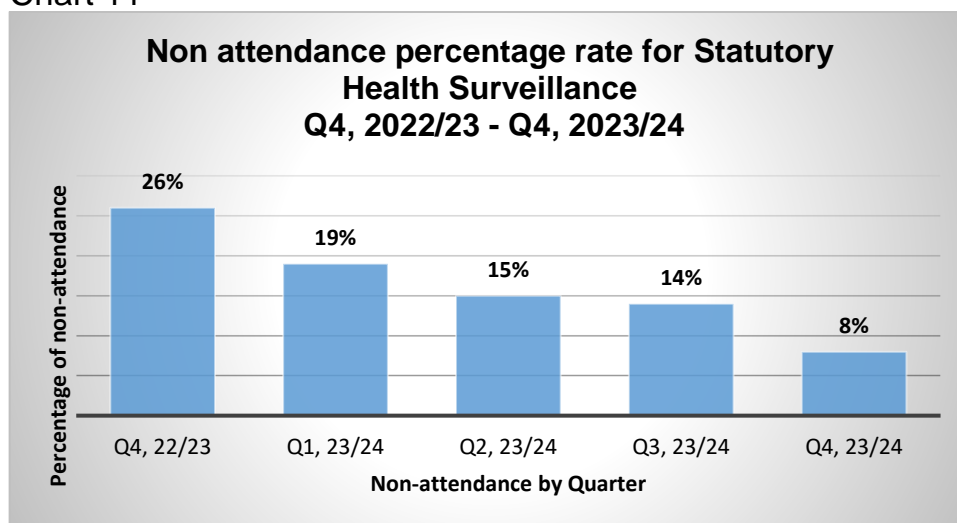
- 54 During Quarter 4, a total of 121 employees attended OHS appointments for routine statutory health surveillance, 116 with an Occupational Health Nurse and 5 with an Occupational Health Doctor

Chart 10



- 55 During Quarter 4, 8% (n=11) employees failed to attend their appointment with the OHS in relation to statutory health surveillance. This equates to 1.5 days of clinic time lost. See Chart 11.

Chart 11



- 56 During Q4 the OHS have continued to provide Hepatitis B immunisation to employees whose job role has been identified via risk assessment as requiring an offer of Hepatitis B immunisation, administering a total of 13 vaccines. During Q4 there were no inoculation incidents reported to the OHS

Occupational Health Activity Data DCC related activity (note this data does not include Local Authority Maintained Schools).	Q4 2023/2 4 Total	Q3 2023/2 4 Total	Q2 2023/2 4 Total	Q1 2023/2 4 Total	Q4 2022/2 3 Total
Appointment category	Total	Total	Total	Total	Total
Pre-Employment/Pre-Placement assessments Of which attended an appointment	367 172	533 117	625 13	564 38	458 22
Management referrals seen – Long Term Sickness	103	94	124	86	79
Management referrals seen – Short Term Sickness	24	15	19	18	18
Management Referrals seen -Long/Short Term Sickness	12	6	22	22	23
New Management Concern referrals seen	82	90	112	88	94
Review appointments seen	16	29	34	38	35
Re-referrals seen	49	49	38	38	45
Statutory Health Surveillance Assessments Attended (Nurse)	116	69	144	127	102
Music Service audiometry attended	1	0	14	19	10
School Crossing Patroller Routine Medicals	11	11	1	3	10
Driver Medicals (DVLA Group 2) e.g. HGV	41	32	14	26	18
Night Worker assessments (Working Time Regs 1998)	0	0	15	2	0
Immunisations against occupationally related infections	13	2	20	12	9
'Flu' Immunisations	1	261	0	0	0
Inoculation injury OHS Assessments – where injury has been reported to the OHS	0	1	0	2	0
HAVS Postal Questionnaires sent	13	95	107	125	128
HAVS Postal Questionnaires returned percentage rate	100%	27%	56%	86%	30%
Did Not Attend (DNA) for statutory health surveillance appointment	11	13	14	17	36
Music Service DNA	0	1	2	0	1
DNA – Management Referral appointments with the OHS (excluding health surveillance)	54	47	67	47	72

Corporate risks that may have an impact on Health and Safety

57 The below tables detail the corporate risk that may have an impact on Health and Safety at the end of December 2023.

Health and Safety Related Strategic Risks

Ref	Service	Risk	Treatment
1	CYPS	Failure to protect a child from death or serious harm (where service failure is a factor or issue).	Treat
2	REG	Serious injury or loss of life due to Safeguarding failure (Transport Service).	The current controls are considered adequate.
3	AHS	Failure to protect a vulnerable adult from death or serious harm (where service failure is a factor or issue).	Treat
4	NCC	Breach of duty under Civil Contingencies Act by failing to prepare for, respond to and recover from a major incident , leading to a civil emergency.	Treat
5	RES	Serious breach of Health and Safety Legislation	The current controls are considered adequate.
6	REG	Potential serious injury or loss of life due to the council failing to meet its statutory, regulatory and best practice responsibilities for property and land .	Treat
7	RES	Potential violence and aggression towards members and employees from members of the public	The current controls are considered adequate.
8	NCC	Demand pressures on the Community Protection inspections and interventions	Treat

		arising from the UK exit from the EU may lead to an adverse impact on public health and safety in Co Durham.	
9	NCC	Potential impacts of the spread of Ash Dieback Disease on the environment, public safety, and council finances.	Treat
10	NCC	Risk that the council is unable to meet its responsibilities under the Terrorism (Protection of Premises) Bill when enacted, which sets to improve protective security and organisational preparedness at publicly accessible locations.	The current controls are considered adequate.

Main implications

Legal

- 58 Compliance with statutory legislative requirements reduce risks of enforcement action and/or prosecution against the council or individuals. It will also assist in defending civil claims against the council from employees and members of the public, including service users.

Finance

- 59 Compliance with legislative requirements will reduce increased service delivery costs, financial penalties associated with H&S sentencing guidelines 2016 and successful civil claims against the council. Financial costs may be insured to some degree and uninsured in some cases, with poor outcomes possibly leading to increased insurance premiums. Financial implications also include staff absence associated with physical and mental ill health, staff training, retention, recruitment, and productivity.

Staffing

- 60 In relation to impact on staffing due to employee absence from injury or ill health, attendance management, employee complaints and grievances, recruitment, selection, and retention of employees.

Conclusions

- 61 Accident statistics in general for quarter four showed a decrease from previous quarters and 2023/24 indicates a 9.45% decrease in accidents and incidents over across the council. Whilst a further two RIDDOR reportable specified injuries occurred during quarter, these remain relatively low given the council activities and risks. There have been 10 RIDDOR reportable specified injuries in 2023/24 and this is the highest return across a four year period so further risk analysis and review is required in relation to these. It is positive however that the majority of accidents and incidents reported are either no or minor injuries.
- 62 Whilst disappointing to receive two notification of contravention letters in the quarter, these provide further opportunities to review and improve processes and management standards within the council relating to asbestos management and CDM.
- 63 The radon gas management programme continues to progress well and the return of almost 37% of results in the priority premises enables a good level of assurance to be evidenced.
- 64 Positive action was taken in relation to the poor performance of a demolition contractor and this approach should be considered and adopted for future high risk and high-cost contracts where contractors are not meeting their contractual obligations and working to the required standards.
- 65 The continued proactive audit and inspection activity by the H&S team continues to provide opportunities for improvement in relation to the working practices and procedures, with 175 audits resulting in almost 500 flagged items for improvement being identified during the quarter. Most items identified continue to be low priority which is positive.
- 66 In terms of fire safety, it was positive that the outcomes of the fire incidents did not involve any injuries and significant property damage. That said, there were recommendations made following the incidents in terms of procedures, risk assessments and training.

Other useful documents

- Occupational Health Quarter four 2023/24 Report.
- Health, Safety and Wellbeing statistical Quarter four 2023/24 report.

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Appendix 1: Implications

Legal Implications

Failure to comply with statutory legislative requirements may result in enforcement action and/or prosecution against the council or individuals. There are risks from civil claims against the council from employees and members of the public, including service users.

Finance

Failure to comply with statutory legislative requirements may result in enforcement action, including prosecution against the council or individuals. These enforcement actions may result in increased service delivery costs, financial penalties associated with H&S sentencing guidelines 2016 and successful civil claims against the council. Financial costs may be insured to some degree and uninsured in some cases, with poor outcomes possibly leading to increased insurance premiums.

Consultation

Service Grouping strategic managers and operational management staff have been consulted in the preparation of this report.

Equality and Diversity / Public Sector Equality Duty

Equality Act compliance ensures consistency in what the council and its employees need to do to make their workplaces a fair environment and workplace reasonable adjustments are required.

Climate change

None

Human Rights

The right to a safe work environment, enshrined in Article seven of the International Covenant on Economic, Social and Cultural Rights, links with numerous human rights, including the right to physical and mental health and well-being and the right to life.

Crime and Disorder

None.

Staffing

Potential impact on staffing levels due to injury and ill health related absence, staff retention and replacement staff.

Accommodation

The report references H&S related risks associated with workplaces some of which may have impact on accommodation design and provision of safety systems and features.

Risk

This report considers physical and psychological risks to employees, service users and members of the public. Risks also relate to the failure to comply with statutory legislative requirements, which may result in civil action being brought against the council and enforcement action, including prosecution against the council or individuals. These enforcement actions may result in financial penalties, loss of reputation and reduction in business continuity.

Procurement

None