



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

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 two 2022/23.

Executive summary

2. There were 286 accidents and incidents during quarter two which was a decrease from the previous quarter (386). Of these there was 1 RIDDOR reportable over 7 days incidents and 1 RIDDOR specified injury related incident, which was a significant decrease from the previous quarter.
3. A CDDFRS audit of Hawthorn House resulted in major deficiencies being identified. These related to inadequate fire-resistant materials being used on electrical cables and insufficient numbers of staff on night-time duty to enable safe evacuation. Both issues have been resolved with amendments to the fire-resistant materials and additional staff member being on duty until additional compartmentation work is completed to support safe evacuation.
4. There was 1 fire related incident at Moorside children's unit in July 2022. This involved a young person burning items in their bedroom and has resulted in a referral to the community fire safety team in CDDFRS.
5. There were in excess of 110 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 92.74%. Once again, the majority of noncompliance issues were of a low priority and over 300 opportunities for improvement were identified during auditing as well as best practice being evidenced in many areas.
6. Preparations for a second employee working well survey were completed and authorised by CMT. Timelines for the survey were established and the

survey will be launched on 10 October 2022 which coincides with World Mental Health Day.

7. A Multi Agency Action Review (MAAR) took place following the recovery of a body from the River Wear in the city centre on 22 September 2022. Further support will also be provided to family/workplaces/professionals involved via commissioned services that is targeted to the specific case. The outcome of the coroner inquest will also be noted, and any appropriate actions will be taken forward by the City safety group.

Recommendation(s)

8. Audit Committee is recommended to note and agree the contents of this report.

286

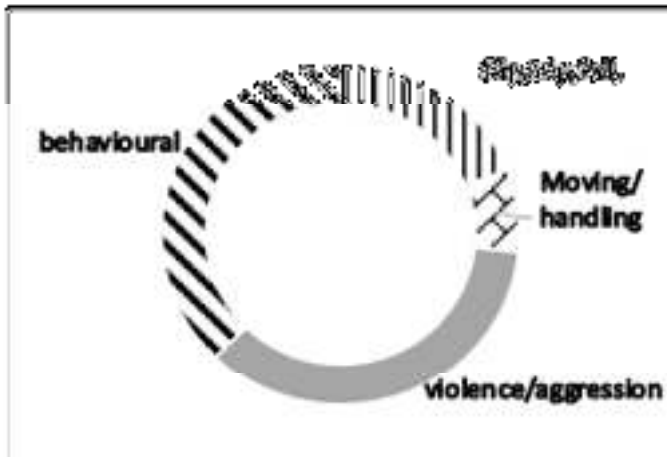
Accidents, incidents and near misses reported (386 in quarter 1 2022/23)



95%

Of all reported accidents are reported immediately to the relevant person

Main Accident/Incident Causes



1 fatality 'significant' injury, and 1 over 3 days absence POTENTIAL injuries

Employee working well survey finalised and ready for launch Quarter 3 2022/23.



Better Health at Work Maintaining Excellence Status and working towards ambassador status



25 psychological work-related incidents in Q2 2022/23 compared to 30 in quarter 1 2022/23.

1 fire related incident



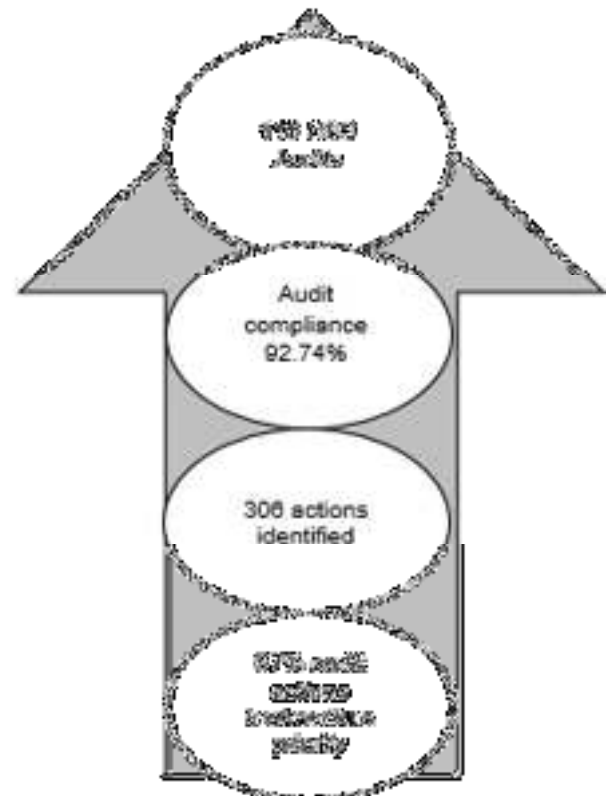
1 COVID-19 inspection of control procedure resulting in major improvements underway



Workplace influenza vaccine delivery commenced in September

0

Enforcement related action or advice from HSE/OPW/PA following inspections and audit activity



Background

- 1 The HSWSG 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, including COVID, are detailed below.

Health, Safety and Wellbeing Strategy 2022-2025

- 2 A revised [Health, Safety and Wellbeing Strategy](#) for 2022-2025 has now been introduced following consultation and agreement at CMT in August 2022. The revised strategy now focuses on six key areas which are control, compliance, culture, cooperation, competence, and communication. A series of key milestones for each of the indicators has been attributed and will be implemented and monitored through the HSWSG group on a quarterly basis.
- 3 One of the early milestones in the revised strategy is the launch of the second employee working well survey which is due to be launched on 10 October 2022 and will be live until 7 November 2022. The results of this survey will be produced and communicated during the early part of 2023.

Consultation/Communication

- 4 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.
- 5 A schools trade union consultation meeting continues to be held on a monthly basis. This meeting is attended by H&S representatives along with officers from CYPS and HR.
- 6 Following further consultation regarding the welding activity action plan took place during the quarter in response to the revised guidance, which was published by the Health and Safety Executive, environmental monitoring was completed for operatives undertaking welding activities to ensure that the existing controls measures provide sufficient protection for them. The final report was received, and a review of the recommendations will be carried out.

Audits and Inspections

- 7 There were a total of 116 audits and inspections undertaken by the H&S team during quarter two.

Chart 1 – Audit and Inspection Activity for Quarter 2.



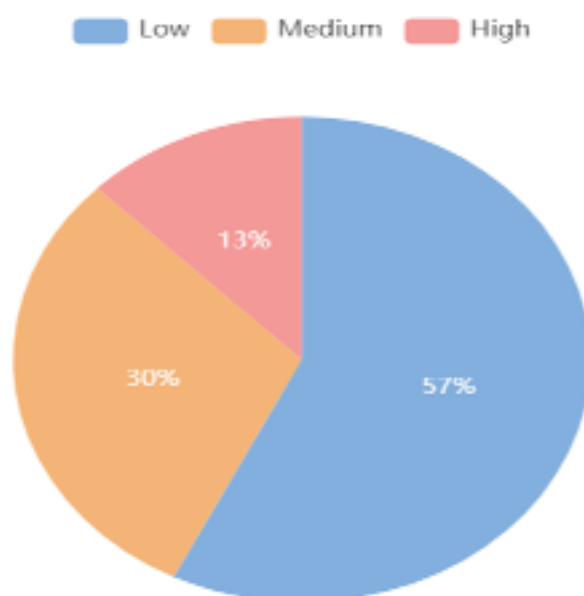
8 From the audits undertaken the following headline percentage compliance scores can be determined for each area:

Table 1 Compliance scores

| TITLE | INSPECTIONS | SCORE (%) |
|------------------------------------------|-------------|-----------|
| | Total | Average |
| AHS General Audit 2022 | 7 | 93.61% |
| Civil Engineering and Construction Sites | 21 | 79.94% |
| CYPS General Audit 2022 | 13 | 93.08% |
| Extra Care Audit 2022 | 4 | 99.26% |
| Fire Safety Audit | 8 | 97.25% |
| Refuse and Recycling | 18 | 92.93% |
| School Audit 2021/2022 | 17 | 93.44% |
| Waste Transfer Stations | 2 | 89% |
| Workshops Monitoring | 2 | 95.35% |
| Clean and Green | 4 | 91.77% |

9 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



High Priority Action Areas

| Site | High Priority Actions |
|------------------------------------|-----------------------|
| Schools | 19 |
| Buildings Construction Site | 9 |
| Highways Construction Site | 5 |
| Building And Facilities Management | 3 |
| Hawthorn House | 3 |
| Hope Wood Academy | 3 |
| Coxhoe Joint Stocks | 2 |
| Durham Works | 1 |
| Woodhouse Close Family Centre | 1 |
| Meadowfield Depot | 1 |
| Other Site | 4 |

Fire Incidents

- 10 There was 1 fire related incident at Council premises or staffed premises during Quarter two. This was at Moorside Children’s Unit, Spennymoor.

Moorside Children’s Unit

- 11 It was reported that at 12.30am on Saturday 23 July 2022 there was a strong smell of smoke in the bedroom corridor and two young people came out of their rooms and knocked on the staff sleep in room to alert the member of staff. The staff member went to investigate and identified that there was a strong smell of smoke coming from bedroom one. The member of staff knocked on the door to ask what the smell was and when she opened it the young person had tried to mask the smell by spraying deodorant. The member of staff looked around the room and noticed a

plastic drinking beaker had been burned. The young person was asked how it had happened and she reported that she lit it days ago. The young person was asked for the lighter however the young person said she no longer had it and the lighter was not found.

- 12 The home is fitted with automatic smoke detection in every bedroom and corridor areas, however the amount of smoke produced by the young person burning the plastic beaker was not enough to activate the smoke detector in the bedroom and the home did not need to be evacuated. Following the incident, the young person was referred to the Community Fire Safety team via the Fire Play intervention scheme.

Fire Inspections – County Durham and Darlington Fire and Rescue Service

- 13 There was one Fire and Rescue Service inspection of Council premises during Quarter two. This was at Hawthorn House Durham. The outcome of the inspection of the premises was that the premises was deemed to have major deficiencies with current fire safety legislation. The deficiencies identified at the time of the audit were that the material used to conceal the electrical cables was not 30-minute fire resistant materials. There were insufficient numbers of staff on night-time duty to evacuate the largest sub compartment in the premises which contained 7 bedrooms and it was recommended that the largest sub compartment should be sub-divided to make a smaller compartment to allow for safe evacuation of service users if a fire were to occur in the sub – compartment of origin. It was also recommended that the fire doors within the premises should be inspected by a competent person to ensure that each door was 30-minute fire resistant and be fitted with cold smoke seals, intumescent strips and be self-closing as there were concerns that the current cold smoke seals would not be effective in a fire situation.
- 14 Senior management have raised an order with Construction Consultancy Service and a building surveyor is preparing a scope of work to ensure that the remedial building work required is carried out in a timely manner. An additional member of night -time staff is also on duty until the remedial work is completed. The Senior H&S (Fire) Advisor has updated the Fire Service and will liaise with the home management to update the fire risk assessment and emergency plan once the work is complete.

Employee Health and Wellbeing

- 15 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.

- 16 The employee working well survey was finalised by the group members ahead of its approval at CMT. Work continued on the survey delivery plan in terms of ensuring resources were allocated for hard copies of surveys to be delivered to council depot facilities. Secure ballot boxes were also sourced to ensure that completed hard copy surveys could be stored securely until they were retrieved and transported to County Hall for manual input.
- 17 The Council Mental Health Policy and Toolkit has been revised. The document has now been split into 3 documents (policy, managers guidance and toolkit) in line with current policy templates. The Council OPEN values have been incorporated into the revised policy along with the Keeping Well at Work Plan key principles.
- 18 In January 2017 an independent review was commissioned into how employers can better support the mental health of all people currently in employment, including those with mental health problems or poor well-being, to remain in and thrive at work. The *Thriving at Work* review into workplace mental health was led by Lord Dennis Stevenson and Mind CEO Paul Farmer. Drawing on the accounts of over 200 employers, people with mental health problems and leading experts in mental health and work, Thriving at Work sets out core principles and standards to which all employers should commit. These have been incorporated into the revised Council Mental Health Policy and Toolkit.
- 19 The better Health at Work group are also progressing the options relating to a Menopause Workplace Pledge. This pledge was launched in 2021 by Wellbeing of Women, in collaboration with various media outlets. The campaign is calling on every employer to take the Menopause Workplace Pledge and commit to providing menopause support.
- 20 Over 1000 employers including the BBC, AstraZeneca, Royal Mail, Co-op, Tesco, John Lewis, and many hospitals, schools, universities, and other organisations have signed up, covering over 11 million workers across the country. Many organisations are introducing menopause policies, guidance, advice, training, workshops and peer-to-peer support groups.
- 21 Based on the positive impact of the menopause pledges by large organisations to date, a report with recommendation will be submitted to CMT in quarter three with a view to progressing to sign up by the Council. In signing the Menopause Workplace Pledge, the Council would be committing to:
 - Recognising that the menopause can be an issue in the workplace and women need support
 - Talking openly, positively and respectfully about the menopause
 - Actively supporting and informing employees affected by the menopause

Open Water Safety

- 22 The City Safety Group and county wide Open Water Safety Group both met during the reporting period. Both groups were supported by multi agency attendance and reviewed plans for risk assessment and controls for open water across the county, including the city centre.
- 23 The City Safety Group has been making further progress following the independent re-assessment of the city's river corridor by RoSPA in 2021. Relevant action owners and landowners have progressed additional infrastructure improvements as per assessment recommendations. Monitoring of recommendations progress will be undertaken to ensure delivery.
- 24 Licensed premises in close proximity of the city centre river corridor are also going to be approached as part of the revised action plan to revisit guardianship and emergency response training and review risk assessments of their public realm spaces in relation to water safety.
- 25 There was an incident in Durham City on 20 September 2022 where a body was recovered from the river in the city centre. Police confirmed a man had died after a body was recovered from the River Wear after emergency services were called to the scene just 5pm after the alarm was raised. Specialist officers from Durham Constabulary were working to identify the man and notify his family. Durham Constabulary said an investigation will be carried out before a file is prepared for the coroner. Furthermore, as part of internal post incident processes the Council will also convene a Multi-Agency Action Review (MAAR) in which intelligence is collated around the incident from involved partners. Following this further support is provided to family/workplaces/professionals involved via commissioned services that is targeted to the specific case.
- 26 Reassessments of previous open water safety risk assessments were completed during this quarter for the higher risk locations across the county to ensure that public safety control measures are in place as we approach increased periods of footfall and seasonal warmer weather.
- 27 Work was completed in relation to Shotton pond location to address regular anti-social behaviour that has been affecting provision of public rescue equipment. Local youths have, over a prolonged period of time, been deliberately setting fire to life rings installed at the pond and rendering them undeployable in an emergency. Clean and green colleagues have been replacing this equipment on an ongoing basis for a number of years and such has been the frequency of damage, a decision was taken to install alternative vandal resistant equipment in the form of throw lines which are secured within metal cabinets, in order to prevent arson attacks. These were installed in September 2022 and users of the equipment will be required to call 999 and ask for the fire and rescue service to provide a code to gain entry and access to the lifesaving equipment. Work with CDDFRS

has been completed prior to installation to ensure that the call handlers are able to pass on the code for the cabinets in the event of emergency.

- 28 From a statistical perspective and compared to national statistics, County Durham continues to have a significantly lower fatality rate of 0.19 per 100,000 compared to 0.41 per 100,000 at a UK level in 2021. County Durham has an average 3-year accidental drowning fatality rate of 1 per year compared to 6 in the Northeast as a region and 244 overall in the UK. The recent increase in fatalities across the UK as a result of extreme weather temperatures is a reminder that open water safety remains a priority area of focus across the County.
- 29 It is apparent from analysis of incident statistics that mental health and self-harm continue to be a lead cause of water related incidents within the city centre and county wide. Work with public health mental health and suicide prevention colleagues has been undertaken to ensure that multiagency support and interventions are in place and continue to be reviewed for any specific locations or cohorts in the county. There is a known number of hotspots across the County where suicides tragically occur and work continues with public health and other partners regarding these locations within the County.

Occupational Health

- 30 During Quarter 2, 296 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. The number of appointments attended in Q2 this year has decreased from the Q2, 2021/22, a decrease of 31 referrals which represents a 12% decrease.

Chart 1

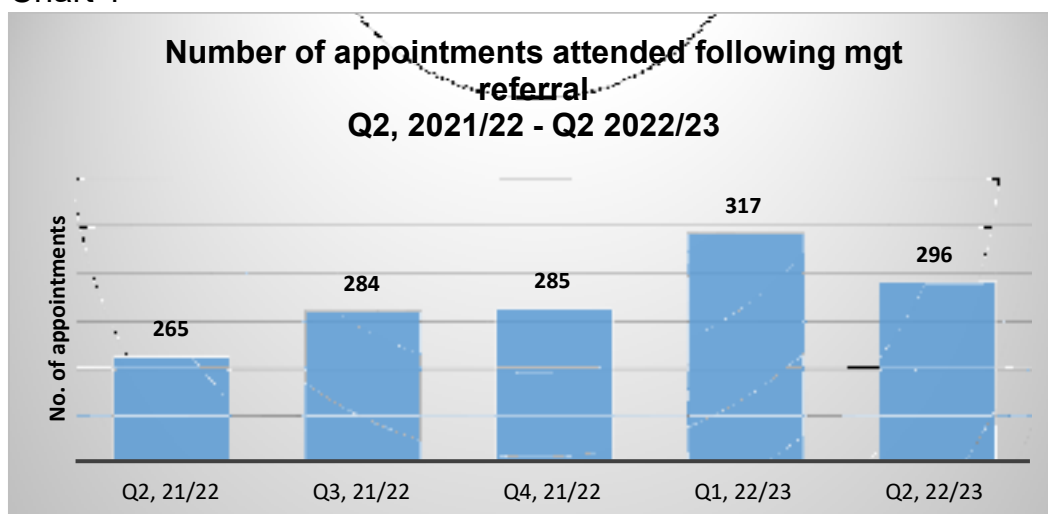
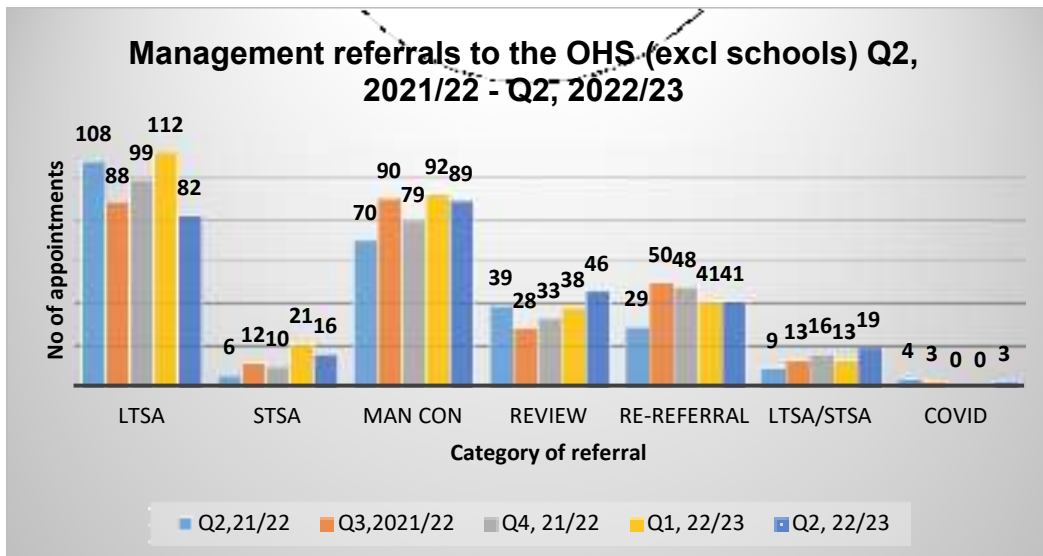


Chart 2 shows the categorisation of management referral appointments attended.

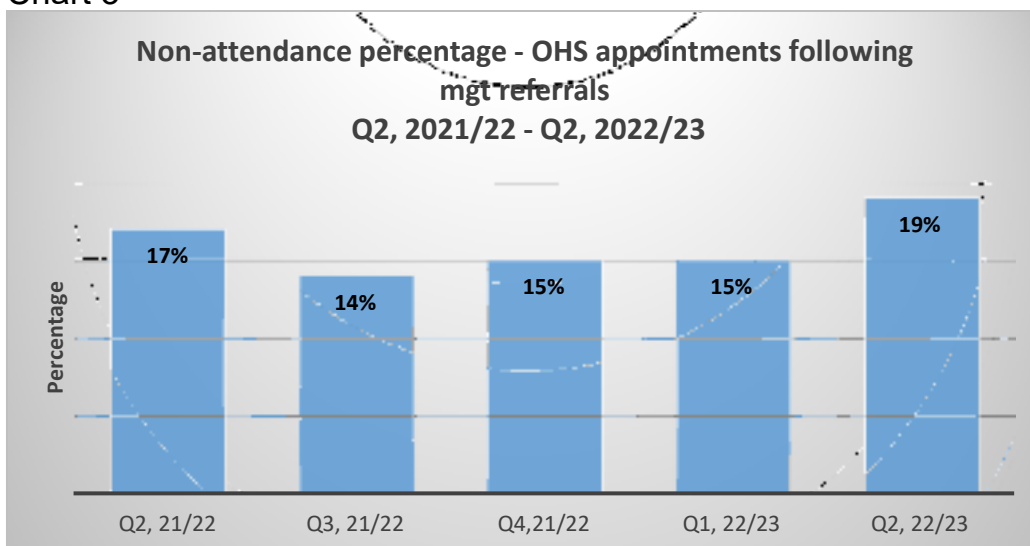
Chart 2



Management Referrals - Non Attendance

- 31 During Q2, 69 employees did not attend their allocated appointment following management referral. This represents a 19% non-attendance rate. See Chart 3

Chart 3



Management Referrals – Employee Attribution

- 32 During Quarter 2, 82 employees were seen for LTSA of which 26% (n=21) stated to the OHS that they consider the underlying cause to be due to work related factors. Of the 21 employees, 95% (n=20) identified this was due to

'psychological' reasons and 5% (n=1) identified as 'musculoskeletal' See Charts 4 & 5

- 33 Chart 6 shows the cause of absence categories for non-work related LTSA seen in the OHS, 29% (n=18) were due to psychological reasons; 33% (n=20) were due to musculoskeletal problems; 1% (n=1) was due to respiratory problems; 2% (n=1) were due to hearing problems; 2% (n=1) were due to Covid and 33% (n=20) was due to

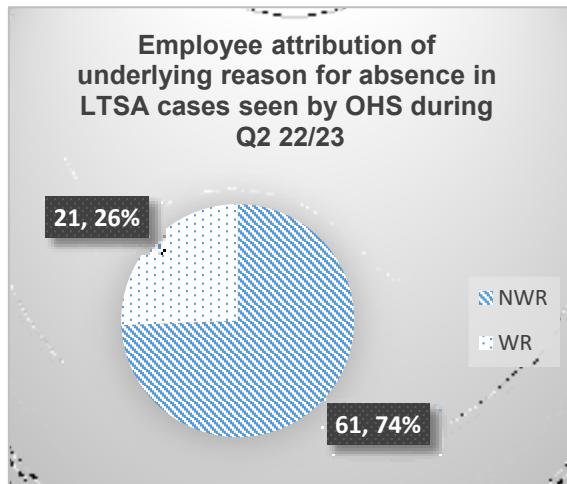


Chart 4

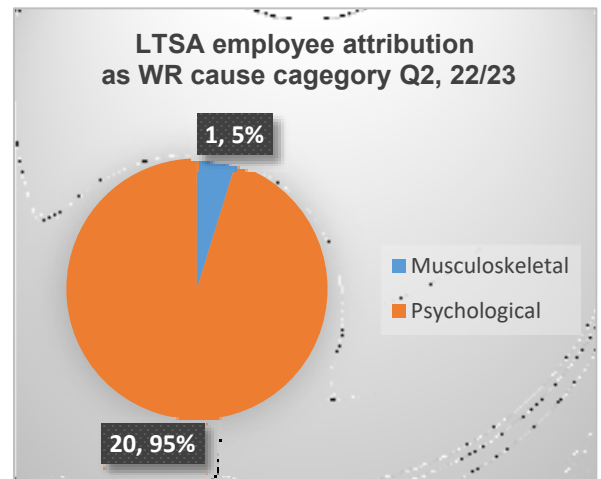
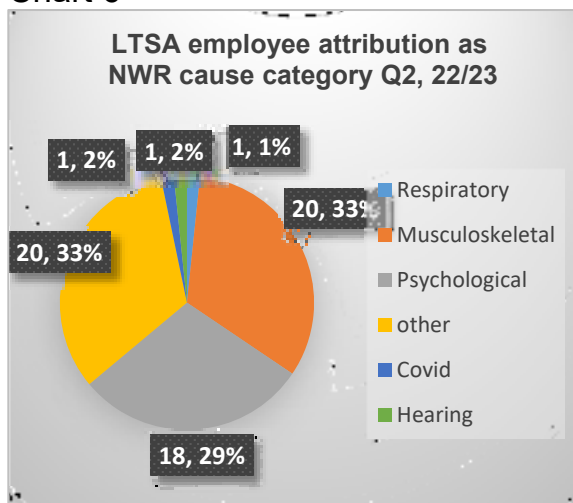


Chart 5

Chart 6



- 34 Management concern referrals are made when the employee is not absent from work and advice is required relating to work that is affecting the employees' health or their health is affecting their work.
- 35 During Q2, 89 employees were seen as a management concern, 28% (n=25) of these referrals stated to the OHS that they consider the underlying cause to be due to work related factors. (Chart 7) Of the 89 employees seen 72% (n=18) of the work related and 14% (n=9) 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 34% of non-work related and 16% 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.

- 36 Further analysis of the data relating to management concern referrals identified that 11% of the LTSA referrals received in Q2 were seen in the previous 12 months as a management concern referral.

Chart 7

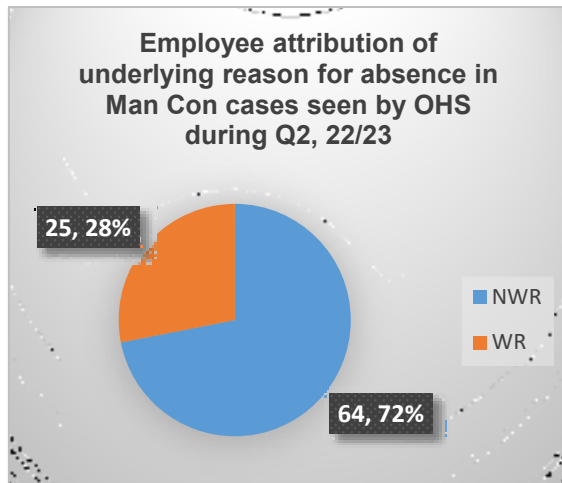


Chart 8

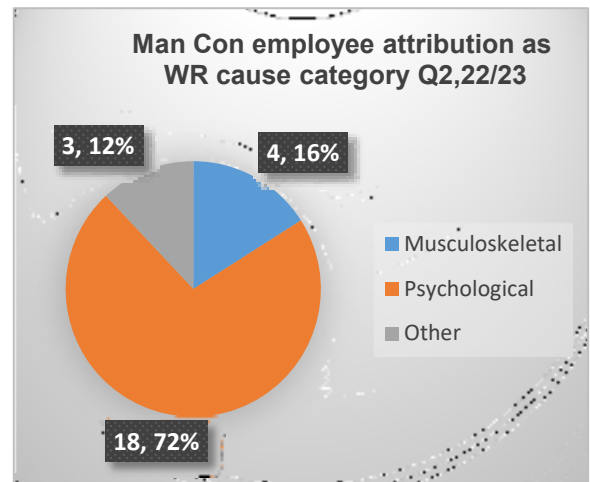
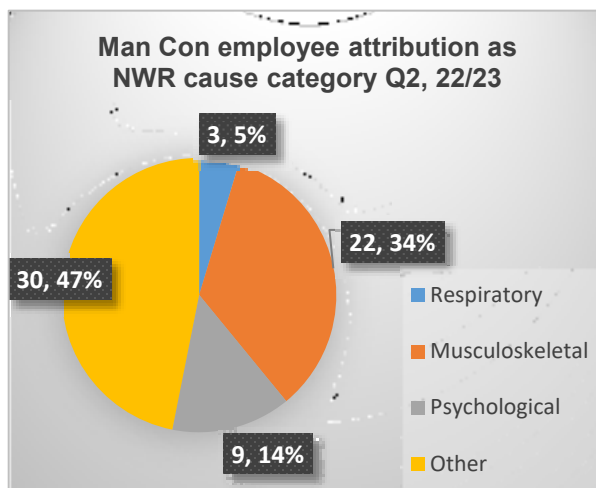


Chart 9



Support Services

37 During Quarter 2, the OHS provided the following additional support services. See Table 1.

Table 1

| Additional Support services accessed via the OHS | A&H S | CYP S | NCC | REG | Res | Cex | Service not detailed | Q2 22/2 3 Total | Q1 22/2 3 Total | Q4 21/2 2 Total | Q3 21/2 2 Total | Q2 21/2 2 Total |
|---------------------------------------------------------|------------------|--------------|------------|------------|------------|------------|-----------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Number of routine physiotherapy referrals | 8 | 7 | 22 | 13 | 10 | 0 | - | 60 | 65 | 57 | 59 | 46 |
| Number of routine physiotherapy sessions | 11 | 56 | 69 | 46 | 41 | 0 | - | 223 | 214 | 188 | 176 | 126 |
| Number of 'face to face' counselling referrals | 0 | 1 | 1 | 3 | 1 | 0 | - | 6 | 6 | 2 | 0 | 1 |
| Number of 'face to face' counselling sessions | 0 | 0 | 3 | 8 | 0 | 0 | - | 11 | 13 | 0 | 0 | 5 |
| Total number of calls to the EAP | 22 | 50 | 5 | 7 | 6 | 0 | 20 | 110 | 92 | 159 | 125 | 114 |
| Telephone EAP structured counselling cases | 2 | 3 | 1 | 0 | 0 | 0 | 1 | 7 | 0 | 0 | 77 | 15 |
| Telephone EAP structured counselling sessions | 11 | 14 | 6 | 0 | 0 | 0 | 7 | 38 | 0 | 0 | 62 | 29 |
| Employees referred to online counselling | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 2 | 5 | 5 | 5 | 3 |

| | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|----|----|----|----|----|
| Online Counselling Sessions | 0 | 5 | 0 | 0 | 0 | 0 | 6 | 11 | 7 | 9 | 10 | 93 |
| Employees referred to online CBT | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 2 | 32 | 9 | 15 | 0 |
| Online CBT sessions | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 22 | 72 | 46 | 0 |

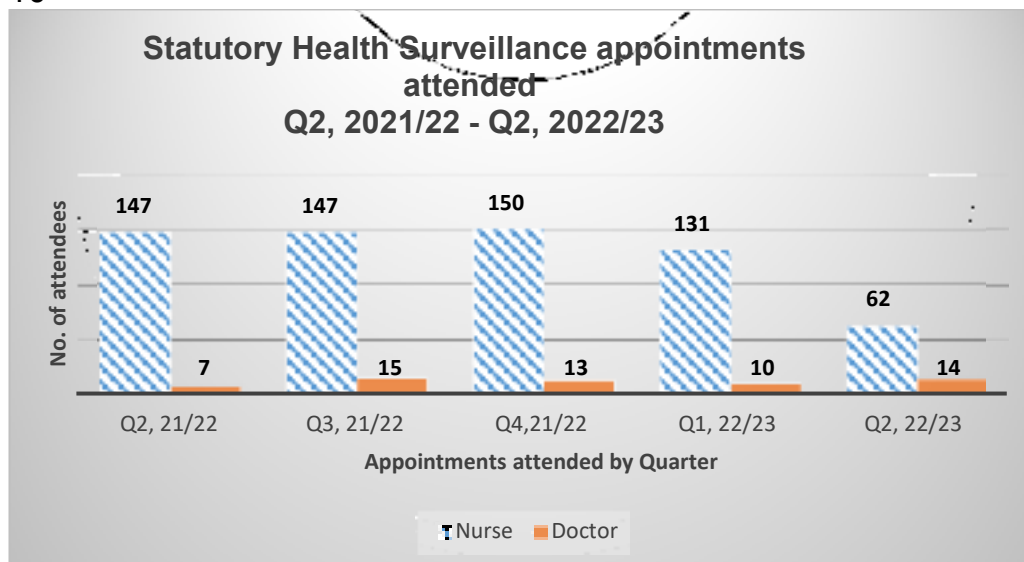
Physiotherapy

- 38 Routine physiotherapy clinics operate two days per week in the OHS at Annand House under contract with the OHS, the clinics are a combination of telephone assessments and face to face physiotherapy appointments, should following the physiotherapy initial assessment by telephone the physiotherapist deem this to be clinically required.
- 39 Q1 data provided by the contracted service has identified that 40% of the referrals for physiotherapy were related to work, it was also reported that 3 of the referrals were reported by the employee to be following a work accident. The 3 referrals reported this quarter were from different services therefore no potential hotspots were identified. At the time of preparing this report (25/10/22) there was no waiting time for an initial assessment. The OHS will continue to monitor this waiting time and report to this group.

Health Surveillance

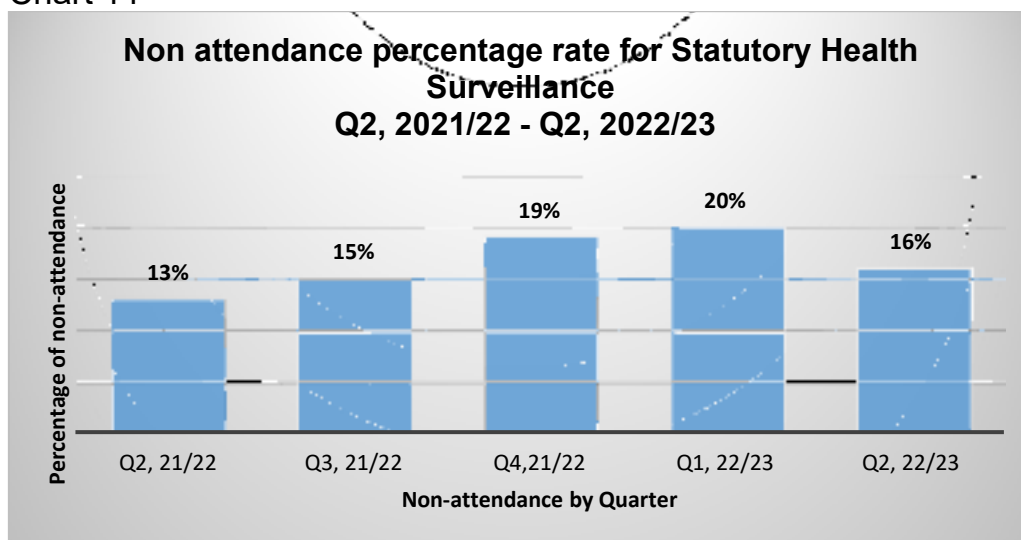
- 40 The OHS continues to provide statutory health surveillance programmes to employees in line with HSE guidelines. The OHS has addressed the backlog of health surveillance created by the pandemic and face to face health surveillance is up to date with the exception of one depot that requires an onsite clinic and is currently not suitable due to building work. Some health surveillance clinics have been carried out on site to minimise the effect on service delivery.
- 41 During Quarter 2, a total of 76 employees attended OHS appointments for routine statutory health surveillance, 62 with an Occupational Health Nurse and 14 with the Senior Occupational Health Physician.

Chart 10



42 During Quarter 2, 16% (n=15) employees failed to attend their appointment with the OHS in relation to statutory health surveillance. See Chart 11.

Chart 11



Immunisation

- 43 During Q2 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 25 vaccines.
- 44 During Q2 there were 2 inoculation incidents, 1 involving spitting into the employees face by a client and 1 needlestick injury. Appropriate action was taken to support the employees involved including immunisation, follow up blood tests, advice and signposting to the EAP. Planning for the staff flu vaccination programme for 2022/2023 has also commenced during the quarter.

| Occupational Health Activity Data DCC related activity (note this data does not include Local Authority Maintained Schools). | Q2 2022/23 Total | Q1 2022/2 3 Total | Q4 2021/2 2 Total | Q3 2021/2 2 Total | Q2 2021/2 2 Total |
|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Appointment category | | | | | |
| Pre-Employment/Pre-Placement assessments | 681 | 687 | 588 | 443 | 529 |
| Management referrals seen – Long Term Sickness | 82 | 112 | 99 | 88 | 108 |
| Management referrals seen – Short Term Sickness | 16 | 21 | 10 | 12 | 6 |
| Management Referrals seen -Long/Short Term Sickness | 19 | 13 | 16 | 13 | 9 |
| New Management Concern referrals seen | 89 | 92 | 79 | 90 | 70 |
| Review appointments seen | 46 | 38 | 33 | 28 | 39 |
| Re-referrals seen | 41 | 41 | 48 | 50 | 29 |
| Covid | 3 | 0 | 0 | 3 | 4 |
| Statutory Health Surveillance Assessments Attended (Nurse) | 62 | 131 | 150 | 147 | 147 |
| Music Service | 1 | 0 | 0 | 0 | 1 |
| School Crossing Patroller Routine Medicals | 7 | 9 | 40 | 7 | 2 |
| Driver Medicals (DVLA Group 2) e.g. HGV | 19 | 18 | 14 | 33 | 20 |
| Night Worker assessments (Working Time Regs 1998) | 0 | 1 | 2 | 0 | 0 |
| Immunisations against occupationally related infections | 25 | 25 | 46 | 8 | 5 |
| 'Flu' Immunisations | 0 | 0 | 0 | 415 | 0 |
| Inoculation injury OHS Assessments – where injury has been reported to the OHS | 2 | 3 | 2 | 2 | 0 |
| HAVS Postal Questionnaires sent | 126 | 62 | 163 | 175 | 52 |
| HAVS Postal Questionnaires returned percentage rate | 70% | 32% | 42% | 50% | 50% |
| Did Not Attend (DNA) for statutory health surveillance appointment (Nurse) | 15 | 36 | 37 | 29 | 19 |
| Music Service DNA | 0 | 0 | 0 | 0 | 0 |
| DNA – Management Referral appointments with the OHS (excluding health surveillance) | 69 | 58 | 53 | 46 | 53 |

Violence and Aggression – Potentially Violent Persons Register (PVPR)

45 At the close of Quarter Two 2022/23, there were 89 live entries on the PVPR register. The 12 month rolling figures for PVPR live entries are as follows:

| Year | Quarter | PVPR live entries |
|--------------------------------|---------|-------------------|
| 2021/22 | 3 | 66 |
| 2021/22 | 4 | 75 |
| 2022/23 | 1 | 85 |
| 2022/23 | 2 | 89 |
| Number of Live Records | | 89 |
| Number of Additions | | 21 |
| Number of Removals | | 17 |
| Number of Warning Letters Sent | | 4 |
| Number of PVPR Appeals | | 0 |

46 Breakdown by service of PVPR views in the last quarter is as follows:

- CYPS - 51 viewed 63 times
- AHS - 34 viewed 52 times
- N&CC - 39 viewed 87 times
- REG - 91 viewed 194 times
- RES - 73 viewed 498 times
- Members - 2 viewed 2 times

Corporate risks that may have an impact on Health and Safety

47 The below tables detail the corporate risk that may have an impact on Health and Safety at the end of October 2022.

| 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 | <i>Demand pressures on the Community Protection inspections and interventions arising from the UK exit from the EU may lead to an adverse impact on public health and safety in Co Durham.</i> | Treat |
| 9 | NCC | Potential impacts of the spread of Ash Dieback Disease on the environment, public safety, and Council finances. | Treat |

- 48 Since the last update, the description of the Community Protection risk has been tweaked to remove reference to Covid19. Although five new risks have been added, none of them have health and safety impacts (business failures, declines in biodiversity, liberty protection safeguards legal challenge, reduced public transport coverage, recruitment and retention).

Statistical Information

- 49 The H&S team in conjunction with service H&S providers continue to record, monitor and review work related accidents, incidents and ill health. This data is captured through internal reporting procedures and the Corporate H&S Accident Recording Database (HASARD). It is important to note that when setting future performance targets this data should be utilised.

Main implications

Legal

- 50 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

- 51 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

- 52 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

- 53 Accident statistics indicate that rates continue to return to pre pandemic levels, with a total of 286 accidents during this quarter. There was only 1 RIDDOR specified injury and 1 over RIDDOR 7-day related incidents which are below average for a quarter.

- 54 The continued audit and inspection activity by the H&S team continues to provide opportunities for improvement in relation to the working practices and procedures, with in excess of 110 audits resulting in over 300 flagged items being identified during the quarter. The majority of items identified continue to be low priority which is positive.
- 55 Whilst the outcome of the County Durham and Darlington rescue service audit at Hawthorn House was disappointing, this has provided an opportunity to improve on two aspects of fires safety within the premises and work commenced immediately to ensure these deficiencies were resolved.
- 56 The completion of the planning for the revised employee working well survey provides the Council with an excellent opportunity to gain insight into employees views on a range of key issues regarding workplaces, working practices and working conditions across the organisation. This is timely given the volume of organisational change that has occurred pre and post pandemic and the launch coincides perfectly with World Mental Health day on 10 October 2022.
- 57 Further proactive promotion and campaigns were undertaken which will support of employee health and wellbeing further. These included information on financial advice, world mental health day, world menopause awareness day and various physical related campaigns such as cycle to work September.
- 58 It was important that a prompt review and response was provided regarding the recovery of a body in the river within Durham City in order to ensure that any associated actions and re-assessments were put in place accordingly.

Other useful documents

- Occupational Health Quarter two 2022/23 Report
- Health, Safety and Wellbeing statistical Quarter two 2022/23 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 7 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