

Audit Committee

27 November 2023

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



Ordinary Decision

Report of Amy Harhoff, Corporate Director, 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 2023/24.

Executive summary

2. There were 322 accidents, incidents and near misses compared to 373 in the previous quarter. Quarter two statistics indicate a lower than average number following a quarterly average of 418 in 2022/23.
3. In terms of more serious accidents there were two Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) specified injuries and six over seven day absences in quarter two. These are both lower than average for a quarter based on previous quarterly statistics.
4. There was one fire related incident during quarter two. This occurred at Addison Park bowls pavilion, Browney, Meadowfield, Durham. Whilst there were no injuries to persons, this arson attack resulted in significant property damage and will result in the building being demolished.
5. There were 98 health and safety and fire safety audits and inspections of council premises and work activities during the quarter which resulted in an overall compliance rate of 92.92%. Once again, the majority of non-compliance issues were of a low priority and almost 300 opportunities for improvement were identified.
6. Positive work continued in relation to Reinforced Autoclaved Aerated Concrete (RAAC) surveying with all local authority maintained school sites now completed, resulting in a zero return regarding the presence of RAAC. A small number of non-school sites remain to be surveyed in quarter three and are scheduled to be completed by the end of 2023.

7. The Radon Testing Assurance Programme progressed well during this quarter. All testing devices have now been delivered and installed in highest priority sites as part of phase one. Results will be obtainable in early 2024 and all other sites will have testing devices installed as part of phase two which is scheduled for quarter one of 2024/25.
8. The number of individuals on the potentially violent persons register has again increased in quarter two. This is as a result of improved reporting and intelligence sharing from multi agency groups. The Corporate Health and Safety team have supported a number of Councillors in relation to individual risk assessments and risk control measures put in place to mitigate risks associated with individuals. Councillors continue to access to the potentially violent persons register and employee assistance programme.

Recommendation(s)

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

322

Accidents, incidents and near misses reported.
(373 Q1 2023/24, 457 Q4 2022/23, 527 Q3 2022/23, 306 Q2 2022/23)

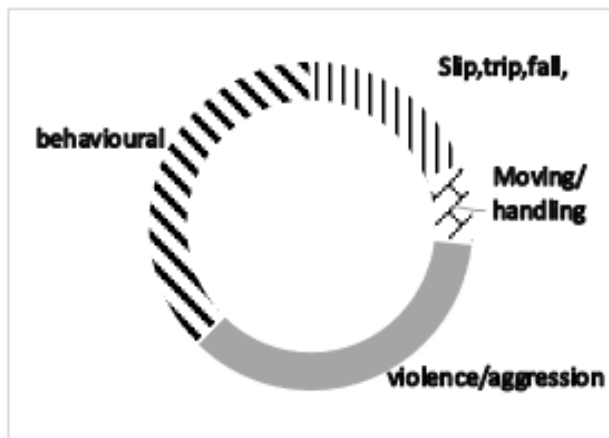


95%

Of all reported accidents are either no injury or near miss



Main Accident/Incident Causes



2 RIDDOR 'specified' injury, and 6 over 7 days absence RIDDOR injuries.

159 Employees attended statutory Health Surveillance



35 psychological work-related incidents in Q2 2023/24. (43 in Q1 2023/24)



• Better Health at Work Maintaining Excellence Status

1 fire related incidents



3 CDDFRS inspections of council premises



Radon testing devices installed across all priority sites as part of phase 1 assurance programme.

0

Enforcement related action or advice from HSE/CDDFRS following inspections and audit activity.



Background

- 9 The HSW Support Group (HSWSG) has been established to ensure that suitable priority is given to the management of health, Safety and Wellbeing within the council. The group monitors the development, implementation and review of the Corporate Health and Safety 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 health and safety representatives continue to actively participate in the corporate and service specific health and safety meetings. Each service grouping has an established health and safety forum that meets on a regular basis. The health and safety team continue to undertake, on a priority basis, a range of joint audit and inspection programmes in conjunction with trade union health and safety representatives. Two joint visits were carried out on various refuse and recycling rounds during quarter two. Both union representatives were satisfied with the outcome of the visits.

Audits and Inspections

- 11 There were a total of 98 audits and inspections undertaken by the health and safety team during quarter two.

Chart 1 – Audit and Inspection Activity for Quarter 2.



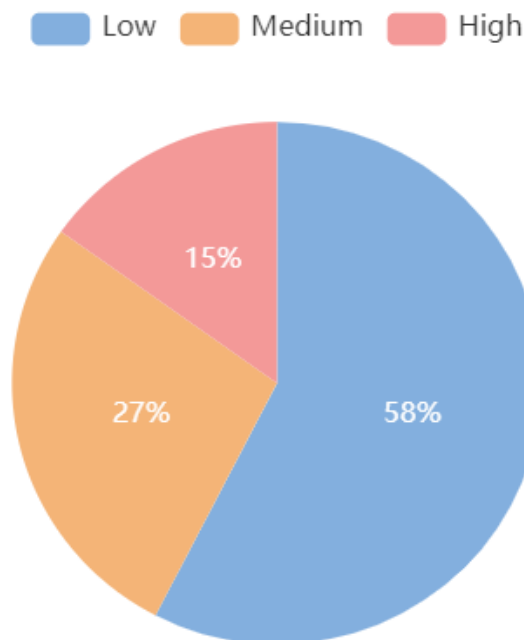
- 12 From the audits undertaken the following headline percentage compliance scores can be determined for each service area where audits took place:

Table 1 Compliance scores

TITLE	INSPECTIONS	SCORE (%)
	Total	Average
Adults Health Service (AHS) General Audit	5	96.44%
Arbor Work	2	96.30%
Civil Engineering and Construction Sites	15	83.21%
Clean & Green	2	93.75%
Culture & Sport - Equipment Compliance	1	100%
Children's and Young People's Service (CYPS) General Audit	11	92.63%
Demolition Sites Monitoring	2	87.03%
Extra Care Audit	4	100%
Fire Safety Audit	6	93.09%
Meadowfield Waste Transfer Station	1	84.38%
Refuse and Recycling	18	88.09%
School Audits	13	96.28%
Waste Transfer Stations	2	97.79%

- 13 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
Buildings Construction Site	18
Education Development Centre, Spennymoor	7
Seaham Contact Centre	5
Building And Facilities Management	5
Moorside Children's Centre	3
Beechburn Depot	2
Highways Construction Site	2
Southfield Lodge Extra Care	2
Comeleon House	2
Escomb Primary School	1
South Hetton Primary School	1
Annand House	1

Table 2- Audit Actions completion statistics

Summary	Low		Medium		High		Totals			
	Outstanding	Completed	Outstanding	Completed	Outstanding	Completed	Outstanding	Completed	Overall	Overall %
AHS	6	1	1	1	2	0	9	2	11	18%
CYPS	5	6	4	1	10	0	19	7	26	27%
Maintained Schools	61	22	10	11	11	1	82	34	116	29%
NACC	7	36	4	6	4	12	15	54	69	78%
REG	8	1	13	12	11	12	32	25	57	44%
Resources	0	0	0	0	0	0	0	0	0	N/A
Corporate Affairs	0	0	0	0	0	0	0	0	0	N/A
<i>Total</i>	87	66	32	31	38	25	157	122	279	44%

Fire Incidents

- 14 There was one fire related incident at a Durham County Council owned premises during quarter two. This occurred at Addison Park bowls pavilion, Browney, Meadowfield, Durham.
- 15 It was reported that at approximately 21:18 hours on 15 July 2023 the fire service were alerted by the police of a fire at Addison Park bowls pavilion. Two appliances were dispatched from Durham station and upon arrival found the building to be well alight. Firefighting activities were commenced, and it took just under two hours to extinguish the fire. It was confirmed that fire was started deliberately. The building sustained significant fire damage both internally and to the roof joists.

- 16 It was reported that two male youths were sitting on the bench to the front of the building looking suspicious, one to two hours before the fire was reported. Investigations revealed the fire was caused by flammable material being placed on top of the right front window roller shutter and set alight. This burnt through the painted plywood board above and entered the roof void of the building. As the fire intensified the ceiling collapsed into the middle and right rooms that were fully engulfed in flame along with their contents. Police enquiries regarding this incident are ongoing but to date the preparators have not been identified. Due to the damage sustained the building will have to be demolished.

Fire Inspections – County Durham and Darlington Fire and Rescue Service (CDDFRS)

- 17 There were three CDDFRS inspections of council premises during quarter two. These were at Stanley Education Centre, Comeleon House and Bishop Auckland Town Hall.
- 18 In terms of Stanley Education Centre and Comeleon House the premises were deemed to be broadly compliant with fire safety legislation. In terms of Bishop Auckland Town Hall, the premises were identified as having deficiencies of fire safety legislation which was that fire safety training was insufficiently recorded, this was to do with evacuation chair training.
- 19 The Health & Safety (fire) advisor has visited the premises and advised the manager on site with regards to the training records and assisted with the updating of the premises fire risk assessment.

Employee Health and Wellbeing

- 20 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. Some of the main activities involved promotion and information sharing regarding world mental health day, menopause day and other health and wellbeing related topics.
- 21 Planning for the delivery of the staff flu vaccination programme progressed. Staff teams that routinely provide personal care to vulnerable clients will be offered a free flu vaccination at their place of work by occupational health during October 2023. Adult social workers co-located with National Health Service (NHS) staff will be offered a flu vaccination by the NHS. For all other staff, Public Health will commission community pharmacies in County Durham to offer a free flu vaccination from 1 October 2023 to staff aged 18-64 years. Planned staff communications are in place, starting with Chief Executive on 6 September 2023 to all staff, followed by members, trade union and school briefings.

- 22 The Better Health at Work Group is also supporting the White Ribbon accreditation for the council. Violence against women, whether it occurs within the workplace, or outside of an organisation, is a serious, prevalent, and preventable issue. Gaining White Ribbon Accreditation helps the council make a difference in workplaces and communities to reduce violence against women. An action plan to gain accreditation has been agreed and working group to support this with further work being undertaken in quarter three to progress.
- 23 Further work undertaken to refresh and engage the better health at work networks. Since signing up to the better health at work award in 2016, Durham County Council (DCC) has progressed through the Better Health at Work Awards (BHAWA) levels, and has achieved 'Maintaining Excellence' status, which is being worked towards for the third consecutive year. To support this, the council has developed network of champions who assist with the delivery of annual campaigns. A health and wellbeing champion record and training database will be developed to ensure records kept and bespoke training will be developed to ensure champions needs are met.

Occupational Health Service (OHS)

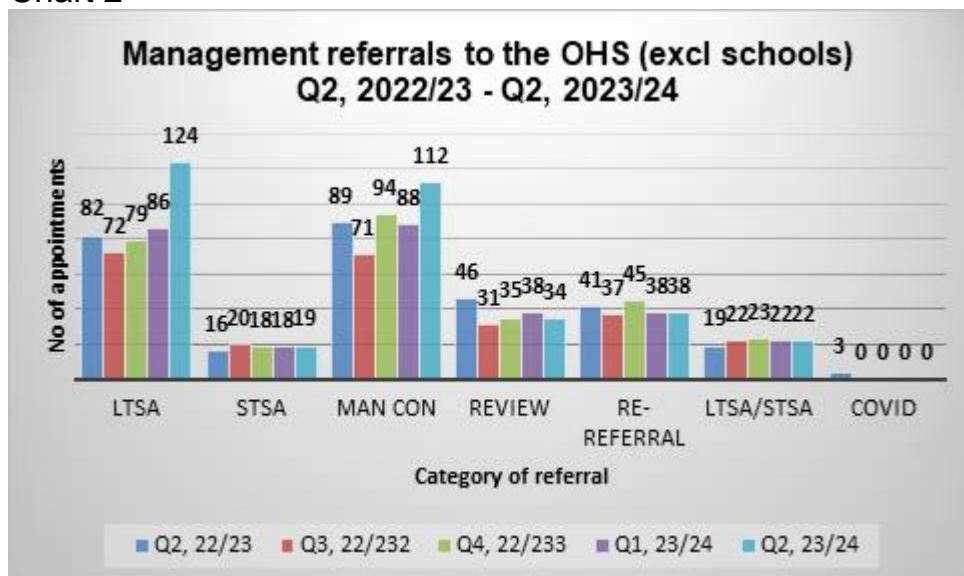
- 24 During quarter 2,349 employees participated in clinical consultations with the OHS, following management referral in relation to Long Term Sickness Absence (LTSA), Short Term Sickness Absence (STSA), Management Concerns (Man Con) Reviews, and Re referral appointments, Long Term Sickness Absence/Short Term Sickness Absence (LTSA/STSA) and Covid. The number of appointments attended in Q2 this year has increased from Q2, 2022/23, an increase of 53 referrals which represents an 18% increase.

Chart 1



Chart 2 shows the categorisation of management referral appointments attended.

Chart 2



Management Referrals - Non Attendance

- 25 During Q2, 67 employees did not attend their allocated appointment following management referral. This represents a 18% non-attendance rate and equates to 13.5 days of clinic time. See Charts 3 & 3a.

Chart 3

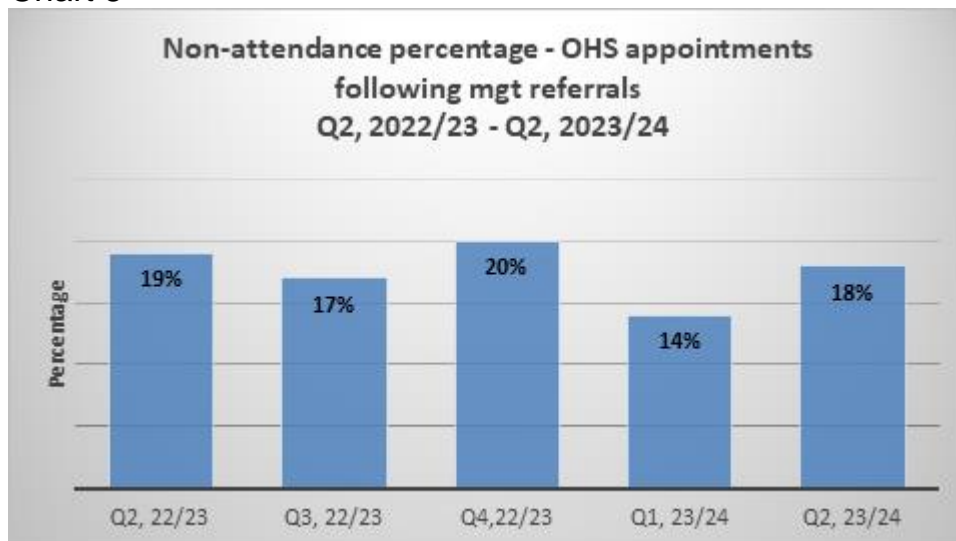


Chart 3a

Non-attendance - OHS appointments following mgt referral by Service. Q2, 2023/24	A&HS	CYPS	NCC	REG	Res	Q2	Q1	Q4	Q3	Q2
						23/24	23/24	22/23	22/23	22/23
						Total	Total	Total	Total	Total
Number failed to attend	7	17	15	17	11	67	47	72	51	69

Management Referrals – Employee Attribution

- 26 During Q2, 112 employees were seen as a management concern, 18% (n=20) of these referrals stated to the OHS that they consider the underlying cause to be due to work related factors. (Chart 7) Of the 112 employees seen, 75% (n=15) of the work related and 16% (n=15) of the non-work related were due to psychological reasons, by referring to the OHS support, advice and signposting to the Employee Assistance Programme can be given at an early stage and hopefully prevent an absence from work. Musculoskeletal problems accounted for 26% of non-work related and 10% 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.
- 27 During Quarter two, the OHS provided the following additional support services. See Table 1.

Table 1

Additional Support services accessed via the OHS	A&HS	CYPS	NCC	REG	Res	Service not detailed	Q2 23/24 Total	Q1 23/24 Total	Q4 22/23 Total	Q3 22/23 Total	Q2 22/23 Total
Number of routine physiotherapy referrals	10	19	9	14	13	-	65	70	74	52	60
Number of routine physiotherapy sessions	22	44	27	24	33	-	150	144	174	189	223
Number of 'face to face' counselling referrals	2	0	2	0	2	-	6	2	6	8	6
Number of 'face to face' counselling sessions	8	1	9	4	8	-	30	6	15	6	11
Total number of calls to the EAP	21	36	12	10	28	43	150	134	160	134	110
Telephone EAP structured counselling cases	2	1	2	1	2	2	10	4	5	3	7
Telephone EAP structured counselling sessions	7	12	1	4	7	21	52	7	40	0	38
Employees referred to online counselling	1	0	0	0	0	2	3	6	13	10	2
Online Counselling Sessions	6	7	0	0	1	9	23	37	49	7	11
Employees referred to online CBT	0	1	0	0	0	4	5	3	0	23	2
Online CBT sessions	0	1	0	0	0	4	5	2	0	31	0

Physiotherapy

- 28 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. Employees can self-refer or be referred by their manager.
- 29 At the time of preparing this report on 12 October 2023 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

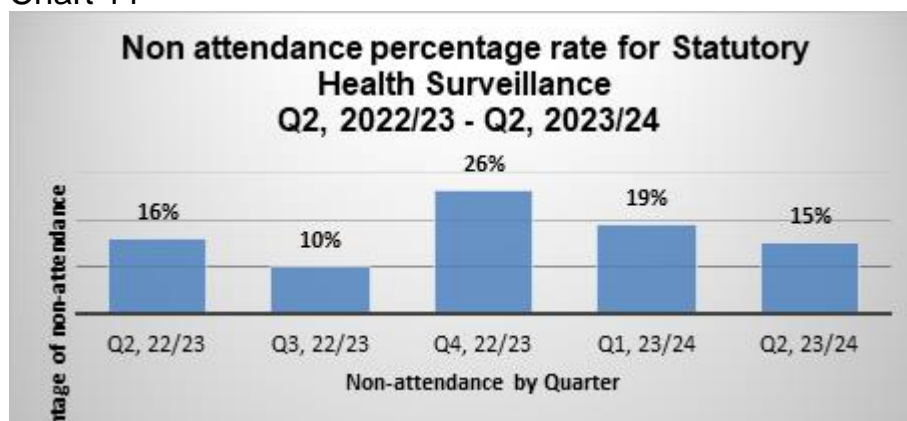
- 30 The OHS continues to provide statutory health surveillance programmes to employees in line with Health and Safety Executive (HSE) guidelines. Some health surveillance clinics are carried out on site to minimise the effect on service delivery.
- 31 During Quarter two, a total of 159 employees attended OHS appointments for routine statutory health surveillance, 142 with an Occupational Health Nurse and 17 with an Occupational Health Doctor.

Chart 10



- 32 During quarter two, 15% (n=19) employees failed to attend their appointment with the OHS in relation to statutory health surveillance. This equates to two and a half days of clinic time lost which is an improvement from quarter one (four and a half days). See Chart 11.

Chart 11



Occupational Health Activity Data DCC related activity (note this data does not include Local Authority Maintained Schools).	Q2 2023/24 Total	Q1 2023/24 Total	Q4 2022/23 Total	Q3 2022/23 Total	Q2 2022/23 Total
Appointment category					
Pre-Employment/Pre-Placement assessments Of which attended an appointment	625 13	564 38	458 22	669 139	681 142
Management referrals seen – Long Term Sickness	124	86	79	72	82
Management referrals seen – Short Term Sickness	19	18	18	20	16
Management Referrals seen -Long/Short Term Sickness	22	22	23	71	19
New Management Concern referrals seen	112	88	94	31	89
Review appointments seen.	34	38	35	37	46
Re-referrals seen	38	38	45	22	41
Statutory Health Surveillance Assessments Attended (Nurse)	144	127	102	44	62
Music Service audiometry attended	14	19	10	1	1
School Crossing Patroller Routine Medicals	1	3	10	10	7
Driver Medicals (DVLA Group 2) e.g., HGV	14	26	18	6	19
Night Worker assessments (Working Time Regs 1998)	15	2	0	0	0
Immunisations against occupationally related infections	20	12	9	30	25
'Flu' Immunisations	0	0	0	342	0
Inoculation injury OHS Assessments – where injury has been reported to the OHS	0	2	0	0	2
HAVS Postal Questionnaires sent	107	125	128	143	126
HAVS Postal Questionnaires returned percentage rate	56%	86%	30%	63%	70%
Did Not Attend (DNA) for statutory health surveillance appointment (Nurse)	14	17	36	4	15
Music Service DNA	2	0	1	0	0
DNA – Management Referral appointments with the OHS (excluding health surveillance)	67	47	72	51	69

Open Water Safety

- 33 The City Safety Group (CSG) has continued to oversee the risk mitigation measures identified from the previous independent review of the city centre river corridor by the Royal Society for the Prevention of Accidents (RoSPA). A series of additional infrastructure works have been completed along the various sections of the river corridor, including fencing, additional rescue

equipment and safety signage. A programme of monthly inspections of the risk mitigation measures and public rights of way continue to take place within the city centre river corridor.

- 34 Linked to the work of the City Safety Group, arrangements were put in place to mitigate and manage risks regarding the student welcome and orientation week (formerly freshers' week). A multi-agency group was established to review student activity during the week (25 September to 1 October) and ensure that appropriate control measures were put in place to manage night-time economy related activities and any associated risks such as the river corridor. The group worked with university representatives to understand the volume of students during each particular day of the week and key factors such as the capacity of licensed premises, security, and queue management arrangements in place. Guardianship and safeguarding arrangements were also reviewed to ensure safety controls were in place.
- 35 Following delivery of emergency throw line training to various CSG partners in the previous quarter via CDDFRS it was reported that during an incident in the river a throw line was deployed by a member of staff from a nearby licensed premises. Although not required given the depth of water where the incident took place it was positive to evidence that the training had been successful and deployment of emergency rescue equipment which had been provided was in place for this and any future incidents where first responders were required to react swiftly.
- 36 From a county wide perspective, the reassessments of priority risk open water locations continued and were completed prior to the peak footfall holiday period which increases risk in terms of young persons in particular. Work was also completed in terms of the development of a new water safety awareness video which was issued to all schools and could be utilised by them for educational and awareness purposes ahead of the summer holiday period. Further work was also undertaken by the council and its partners to educate the general public via social media ahead of how weather periods during this quarter.

Radon Gas Management

- 37 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 has now been planned for, with initial assessments commencing at the beginning of quarter three 2023/24.
- 30 Work with United Kingdom Health Security Agency (UKHSA) continued to ensure that arrangements for the delivery of radon testing devices were in place and ready for the commencement of testing over a three-month period starting in October 2023. A series of stakeholder communications were also agreed to inform that testing would be taking place and the

rationale for this. These communications would be issued prior to testing device being placed in buildings.

- 31 Further updates regarding the progress of testing for radon will be provided through the HSWSG, Regeneration, Economy, and Growth Management Team and CMT accordingly. When results are known in early 2024 these will be provided also any associated implications.

Reinforced Autoclaved Aerated Concrete (RAAC)

- 32 Following incidents in other parts of the UK, the Local Government Association (LGA) and the Department for Education (DfE) have issued further alerts and changes to previous guidance, drawing attention to the revised known risk of RAAC in buildings.
- 33 Corporate Property and Land are reviewing the risk of RAAC being present across a total of 1,271 buildings where the council is the responsible body. To date, no RAAC has been identified in any building to date. There are 61 no. school buildings and 229 council buildings left to review. The costs incurred to date amount to £93,567.
- 34 To date the council has been undertaking assessments in line with guidance first issued February 2021 and then updated in December 2022. New guidance has since been published on the gov.uk website dated 30th August 2023 and further updated in September 2023. As of 31 September 2023, there were 164 council buildings remaining and all school sites had been completed with a zero return for the presence of RAAC. All remaining inspections are scheduled to be completed by the end of 2023.

Item	Particulars	School Buildings	Non-School Buildings	Academies	Total
1	Total DCC buildings	382	889	29	1300
2	Total buildings remaining to survey	0	164	0	164

- 35 The council is actively supporting County Durham academy schools affected by RAAC in their buildings. There has been a transfer of pupils from St Benet's primary academy school to Stanley Education Centre and support has been provided to the other three academy schools in the county in terms of options for relocation of pupils and teaching staff.

Violence and Aggression – Potentially Violent Persons Register (PVPR)

- 36 At the close of this quarter, there were 173 live entries on the PVPR register.

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

	2021 - 2022	2022 – 2023	2023 - 2024
Q1	55	85	137
Q2	47	89	173
Q3	66	100	
Q4	75	113	

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

	2021 - 2022	2022 – 2023	2023 - 2024
Q1	12	22	41
Q2	8	21	50
Q3	30	35	
Q4	24	38	

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

	2021 - 2022	2022 – 2023	2023 - 2024
Q1			10
Q2			21
Q3		9	
Q4		8	

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

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

	2021 - 2022	2022 – 2023	2023 - 2024
Q1	20	12	17
Q2	16	17	17
Q3	11	24	
Q4	14	29	

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

	2021 - 2022	2022 – 2023	2023 - 2024
Q1	3	12	10
Q2	0	4	13
Q3	12	11	
Q4	8	10	

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

	2021 - 2022	2022 – 2023	2023 - 2024
Q1	0	1	0
Q2	0	0	2
Q3	0	3	
Q4	1	1	

The appeals during this quarter were both rejected.

37 During the quarter there has been a number of individual risk assessments and risk management control measures provided to councillors in relation to potential violence and aggression risks from individuals. Councillors continue to have access to the PVPR and the employee assistance programme which offers a range of support services.

Corporate risks that may have an impact on Health and Safety

38 The below tables detail the corporate risk that may have an impact on Health and Safety at the end of July 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 arising from the UK exit from the EU may lead to an adverse impact on public health and safety in Co Durham.	Treat
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.
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39 Officers are developing risk assessments in relation to the following issues:

- a) Potential exposure of employees and service users to radon gas.
- b) Potential safety issues in relation to buildings constructed using reinforced autoclaved aerated concrete.

Main implications

Legal

40 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

41 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

42 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

43 Accident statistics in general for quarter showed a decrease on previous quarters. A further two RIDDOR specified injuries occurred during quarter two which were attributed to Children and Young Peoples Services, and both were attributable to slips, trips, and falls.

44 The continued proactive audit and inspection activity by the health and safety team continues to provide opportunities for improvement in relation to the working practices and procedures, with 98 audits resulting in almost 300 flagged items for improvement being identified during the quarter. Most items identified continue to be low priority which is positive.

- 45 In terms of fire safety, it was positive that the outcomes of the fire incident did not involve any injuries however there was significant property damage. Once again arson incidents are the cause, and it emphasises the requirements for a multi-agency approach to this issue. The outcomes of the CDDFRS audits again provided assurance in high profile and risk sites such as Comeleon House.
- 46 The delivery of water safety awareness and rescue equipment training for council staff, partners and licensees within the city centre provided a timely refresh on key risk areas ahead of the Durham university freshers week. Significant planning also was put in place to mitigate risks around freshers' week and council officers contributed to a safe week.
- 47 Positive progress continued in relation radon gas management programme which enables the Council to evidence risk management in this key developing risk area across its corporate property and land portfolio. The delivery and installation of radon testing devices for phase of the testing programme has now been completed, with results due in early 2024 from this cohort of buildings.
- 48 In relation to RAAC, good progress was made against the remaining outstanding assets to be surveyed. There are no school sites left to survey and a low number of remaining inspections entering into quarter three, all of which are lower in terms of risk as priority sites with foreseeable risks have already been surveyed.
- 49 Whilst the numbers of individuals added to the PVPR should be noted due to an ongoing increase, this enables council officers and councillors to have and improved level of risk related information as part of their risk management arrangements. An improved level of information and intelligence from multiagency groups is mainly behind the increase and this is positive in terms of council risk management. It still remains important that officers and councillors continue to report all incidents of violence and aggression so that investigations can be undertaken, and support provided to mitigate risk.

Other useful documents

Occupational Health Quarter two 2023/24 Report.

Health, Safety and Wellbeing statistical Quarter two 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 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