

Audit Committee

29 February 2024

Health, Safety and Wellbeing Performance
report Quarter Three 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 three 2023/24.

Executive summary

2. There were 417 accidents, incidents and near misses compared to 348 in the previous quarter. Quarter three statistics indicate a lower than average number following a quarterly average of 418 in 2022/23.
3. In terms of more serious reportable accidents there were three Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) specified injuries and 14 over seven-day absences in quarter three. All three of the specified injuries related to slips, trips and falls and resulted in fractures.
4. There was two fire related incident during quarter three. These occurred at an operational depot and children's home. 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. There were 143 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 92.27%. Once again, the majority of noncompliance issues were of a low priority and almost 500 opportunities for improvement were identified.
6. Positive work continued in relation to Reinforced Autoclaved Aerated Concrete (RAAC) surveying and all of the councils property stock will have

been assessed for the presence of RAAC at the end of 2023. There remains no council buildings with presence of RAAC to date.

7. The radon testing assurance programme progressed well during this quarter. All of the buildings within scope of phase one assessments had measuring devices placed within them during the quarter with results expected to be available in February 2024.

Recommendation(s)

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

Health, Safety & Wellbeing Quarter 3 2023/24 in Numbers

417

Accidents, incidents and near misses reported. (348 Q2 2023/24, 366 Q1 2023/24, 457 Q4 2022/23, 527 Q3 2022/23)

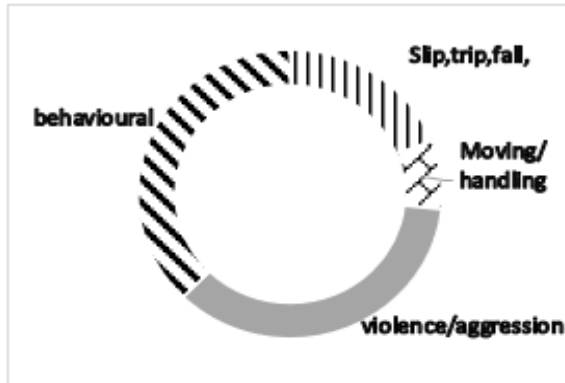


94%

Of all reported accidents are either no injury or near miss



Main Accident/Incident Causes



3 RIDDOR 'specified' injury, and 14 over 7 days absence RIDDOR injuries.

Domestic Abuse White Ribbon Accreditation achieved



• Better Health at Work Maintaining Excellence Status achieved



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

2 fire related incidents



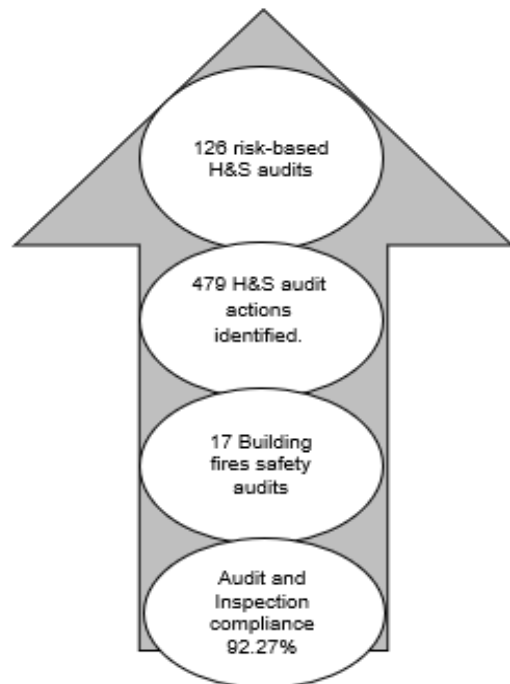
0 CDDFRS inspections of council premises



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 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 three joint visits undertaken between H&S and Trade union safety representatives in quarter three. These involved work activities in refuse and recycling, clean & green, and bereavement services.

Audits and Inspections

- 12 There were a total of 143 audits and inspections undertaken by the H&S team during quarter three.

Chart 1 – Audit and Inspection Activity for Quarter three.



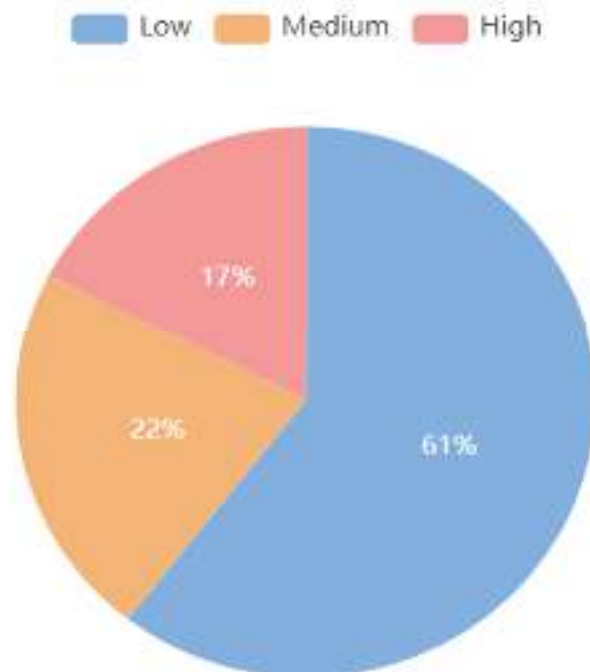
- 13 From the audits undertaken the following headline percentage compliance scores can be determined for each service area where audits took place:

Table 1 Compliance scores

TITLE	INSPECTIONS	SCORE (%)
	Total	Average
School Audits	36	94.82%
Civil Engineering and Construction Sites	27	87.17%
Fire Safety Audit	16	94.55%
Refuse and Recycling	12	89.10%
CYPS	8	91.05%
AHS	5	90.66%
Leisure	5	79.93%
Waste Transfer Stations	3	95.77%
Arbor Work	2	94.67%
Workshops Monitoring	2	94.32%
Clean & Green	2	89.23%
Crematoria	1	97.06%
Demolition Sites Monitoring	1	97.83%
Extra Care Scheme Audit	1	100%
Depot	1	82.98%

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
Refuse and Recycling	55
Buildings Construction Site	19
Refuse and Recycling East	15
Leisure Centres	13
Schools	11
Demolition Works	6
Green Lane Offices	5
Depots	3
Crematorium	3
Thornley Waste Transfer Station	4
Repairs and Maintenance	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	7	0	6	0	0	0	13	0	13	0
CYPS	44	14	15	4	1	0	60	18	78	23%
Schools	100	16	38	4	2	1	140	21	161	13%
NACC	1	33	6	13	9	48	16	94	110	85%
REG	17	16	29	25	16	18	62	59	121	49%
RES	0	0	0	0	0	0	0	0	0	n/a
Corporate Affairs	0	0	0	0	0	0	0	0	0	n/a
Total	169	79	94	46	28	67	291	192	483	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. In relation to high priority actions 42% of these have been resolved within timescales. Audit completion statistics were provided to each corporate director for their service following quarter two. 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 two fire related incidents at Durham County Council owned premises during quarter three. They occurred at Meadowfield Depot workshop and New Lea House Residential Childrens Home.

Meadowfield Depot Workshop

- 17 At approximately 08:45 hours on 11 October 2023, a pedestrian lawn mower was being repaired and a member of staff needed to weld a bolt on the bottom, they tilted the mower back and didn't remove the fuel from the mower which caused fuel to leak from the carburettor onto the floor causing it to ignite with the sparks from a welding task. The fire was extinguished with a portable fire extinguisher. Fortunately, the member of staff did not receive any injuries and the prompt action of extinguishing the fire did not result in the activation of the fire detection and warning system.
- 18 The incident has been fully investigated and several recommendations have been made in terms of updating risk assessments, safe working procedure's, training and supervision.

New Lea House Residential Children's Home

- 19 At approximately 02:40 hours on 13 November 2023, staff members at the home were awoken by the fire alarm. Upon investigating the cause of the alarm, they found a young person standing in the doorway of their bedroom, who stated that there was a fire in the sink of the en-suite bathroom. The member of staff checked the door for signs of heat and slightly opened the door, they discovered that a wicker cabinet was alight. They quickly extinguished the fire with a cup of water. The Fire Service were not contacted.
- 20 Further investigations into the cause of the incident revealed that the young person involved had been smoking a bong in the en-suite of his bedroom and had placed it on the top of the wicker cabinet. The plastic bong had melted and thus set fire to the wicker cabinet, the young person then panicked and placed the cabinet in the sink and tried to extinguish the flames, in doing so this produced lots of smoke which in turn activated the fire alarm. The staff member on investigating the fire found a very small fire and was able to extinguish it safely. The young person involved in this incident has subsequently moved from the home. A full fire safety audit of the home was carried out by the council fire safety advisor, and the home was deemed to be fully compliant with current fire safety legislation.

Enforcement Body Activity and Interventions

- 21 There were no County Durham and Darlington Fire and Rescue Service (CDDFRS) inspections of council premises during quarter three.
- 22 Health and Safety Executive (HSE) inspectors visited Shildon Sunnydale School demolition site during Quarter three. The outcome of the visit was that no interventions/ actions were required however advise was given to the contractor that they should follow the methodology described by the

council to remove asbestos from the structural columns rather than the method being proposed by the contractor themselves.

- 23 The HSE will also be launching their annual campaign in quarter four which emphasises legal duties to manage asbestos. The HSE wants anyone with responsibilities for buildings to do everything they must do to comply with the law and prevent exposure to this dangerous substance, which was widely used in post-war construction before it was completely banned in 1999. The legal duty to manage asbestos covers a wide range of buildings such as museums, schools, hospitals, and places of worship, as well as workplaces like offices and factories.
- 24 HSE are highlighting again that businesses and organisations responsible for premises built before the turn of the century, and especially those between 1950 and 1980 when the use of asbestos in construction was at its peak, must carry out the necessary checks and understand their legal responsibilities. People who visit or work in these buildings will not be exposed if asbestos is properly contained. But it can become dangerous when disturbed or damaged.
- 25 This will mean that HSE inspectors will be inspecting council buildings, with particular focus on schools again. There will be scrutiny of asbestos management processes as in previous years, which have previously resulted in positive feedback about how the council manages this.

Employee Health and Wellbeing

- 26 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 cycling benefits and cycling skills, world mental health day and general wellbeing, carers rights day, smoking related Stoptober, and other health and wellbeing related topics.
- 27 The delivery of the staff flu vaccination programme progressed and staff teams that routinely provide personal care to vulnerable clients were offered a free flu vaccination at their place of work by occupational health (OHS) during October 2023. Following the success of our recent flu clinic at Green Lane where 203 staff were vaccinated, all employed staff aged 18-64 years were able to get their free flu jab at drop-in clinics in the workplace
- 28 The Better Health at Work Group supported the white ribbon accreditation for the Council which was achieved in this quarter. As a follow up to achieving the accreditation, the council also promoted white ribbon day where workplace champions were out and about delivering drop in sessions for staff to attend.

Open Water Safety

- 29 The City Safety Group 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). Whilst the previous RoSPA action plan has now been completed, a further independent review will be commissioned when the Milburngate development opens to the public, taking into account the change of use of this part of the river corridor and introduction of nighttime economy. 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.
- 30 The delivery of the Lumiere 2023 event in the quarter resulted in another high level of footfall in the city centre and no reported incidents relating to the river corridor. There will be a Lumiere safety advisory group debrief exercise in quarter four which will consider feedback from the event and any lessons learned to be taken into future events.
- 31 During the quarter the city centre hub continued to support members of the public and predominantly users of the city's nighttime economy. The hub remains open Wednesday, Friday and Saturday nights, and is staffed by multi agency security and support workers who provide crucial assistance or offer a safe haven if a crime has taken place. During the quarter there in excess of 200 hub interventions and contacts for a range of issues.
- 32 From a city centre incident perspective, there were again no significant incidents to report during this quarter. There were however a number of minor incidents relating to the river corridor or persons in distress on city centre bridges which required either city centre hub staff, fire and rescue service and or police attendance.
- 33 There was a social media launch of the Royal Life Saving Society's national Don't Drink and Drown water safety campaign during December 2023. The campaign which was supported by the city safety group members and promoted directly by the council, encourages smart decision-making whilst being drunk or under the influence of alcohol in and around water. It is aimed at targeting individuals to be responsible for their friends if they have had too much to drink; helping them to return home safely.

Radon Gas Management

- 34 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. It is anticipated that the initial results from priority assessments will be available in February 2024.

- 35 Further updates regarding the progress of testing for radon will be provided through the HSWG, REG management team, CMT and audit committee accordingly. When results are known in early 2024 these will be provided and any associated implications or actions required.

Reinforced Autoclaved Aerated Concrete (RAAC)

- 36 Following incidents in other parts of the UK, the Local Government Association (LGA) and the Department for Education (DfE) issued updated guidance regarding RAAC in September 2023.
- 37 Corporate Property and Land service continued with the assessment of remaining council buildings and identification of any RAAC presence. As in previous quarters it remains the case that no RAAC has been identified in any council buildings to date. All council maintained schools have been assessed and there remains only eight buildings left to survey.
- 38 The council is continuing to support County Durham academy schools affected by RAAC in their buildings. There has been a transfer of additional pupils from St Benet's primary academy school to Stanley education centre with further building adjustments being made to accommodate the additional pupils and teaching staff.

Violence and Aggression – Potentially Violent Persons Register (PVPR)

- 39 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:

	2021 - 2022	2022 – 2023	2023 - 2024
Q1	55	85	137
Q2	47	89	173
Q3	66	100	199
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	50
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	18
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	19
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	18
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	2
Q4	1	1	

The appeals during this quarter were rejected.

PVPR Viewing Statistics

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

Service	People Viewed	How many times
NACC	77	450
REG	136	2006
Resources	121	2612
CYPS	94	692
AHS	81	574
Members	2	4

Occupational Health

Management Referrals

- 40 During quarter three, 283 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.

Chart 1

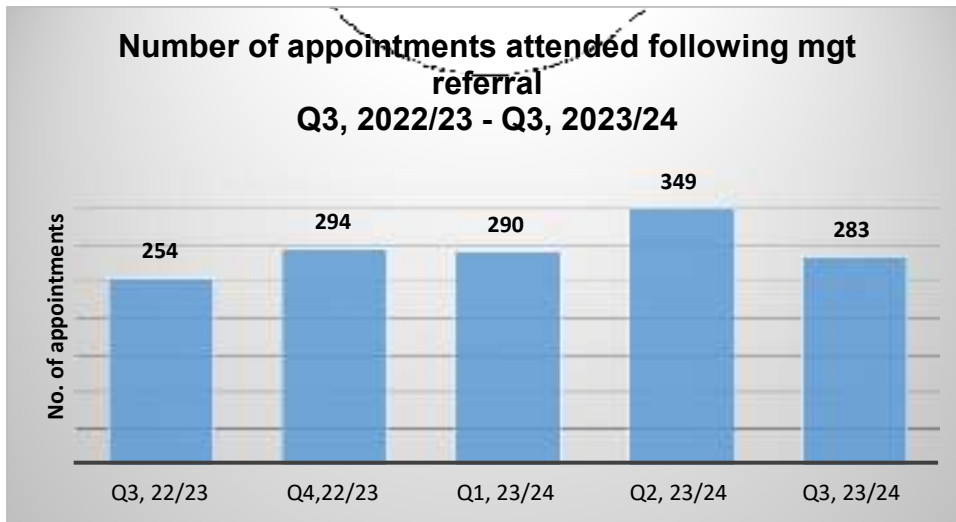
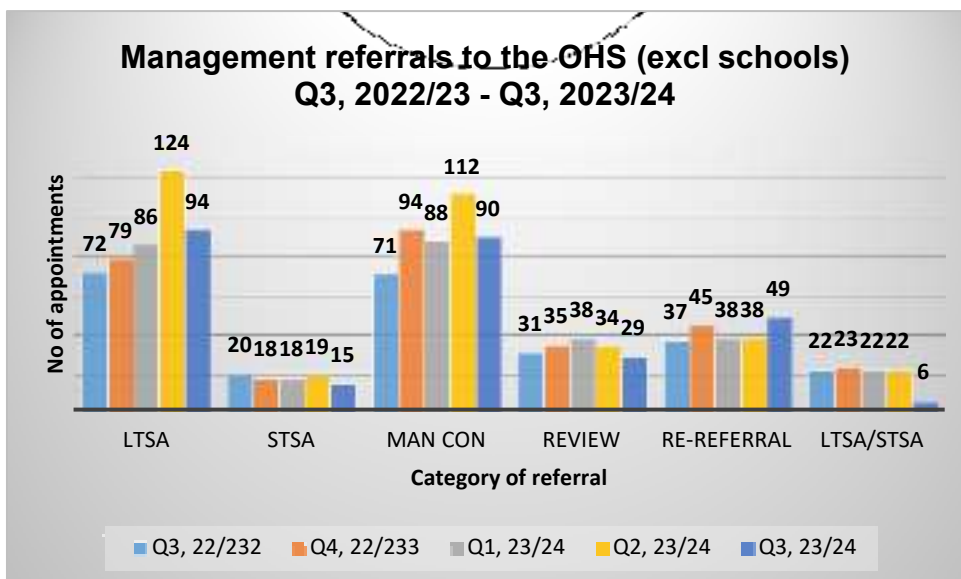


Chart 2 shows the categorisation of management referral appointments attended.

Chart 2



Management Referrals - Non Attendance

- 41 During quarter three, 67 employees did not attend their allocated appointment following management referral. This represents a 17% non-attendance rate and equates to 13.5 days of clinic time. See Charts 3 & 3a

Chart 3

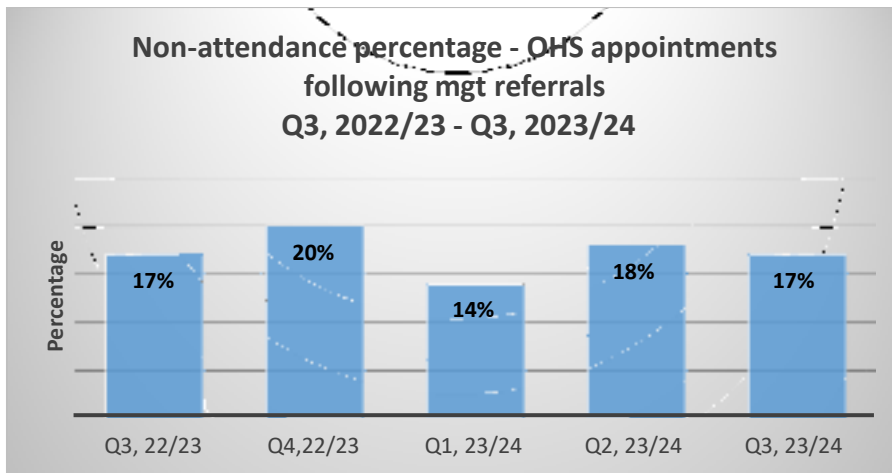


Chart 3a

Non-attendance - OHS appointments following mgt referral by Service	A&HS	CYPS	NCC	REG	Res	Q3	Q2	Q1	Q4	Q3
						23/24	23/24	23/24	22/23	22/23
Q3, 2023/24						Total	Total	Total	Total	Total
Number failed to attend	8	10	16	7	6	47	67	47	72	69

Management Referrals – Employee Attribution

42 During Quarter three, 99 employees were seen for LTSA of which 25% (n=25) stated to the OHS that they consider the underlying cause to be due to work related factors. Of the 30 employees, 79% (n=19) identified this was due to ‘psychological’ reasons and 21% (n=5) identified as ‘musculoskeletal’ See Charts 4 & 5

Chart 4

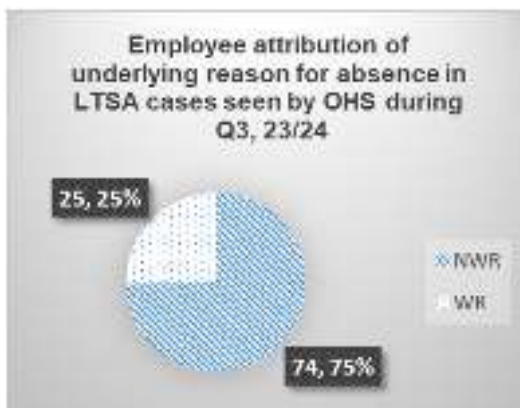
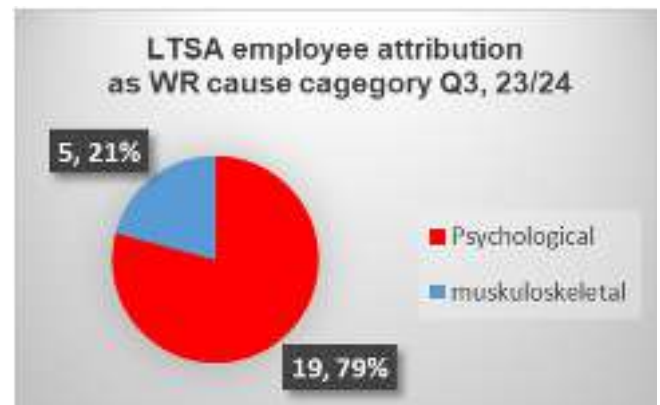
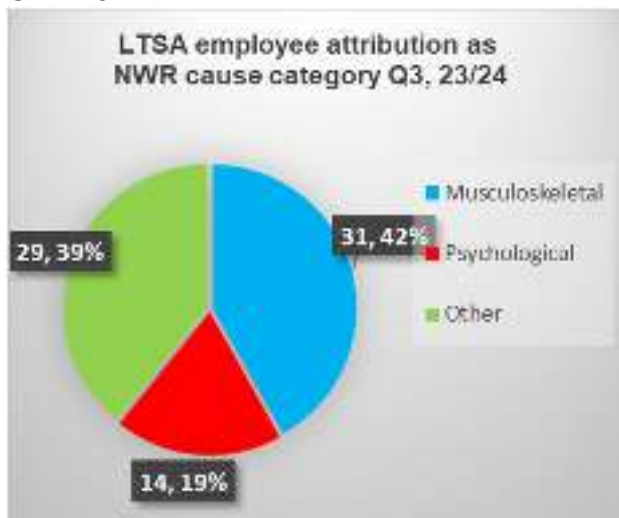


Chart 5



- 43 Chart 6 shows the cause of absence categories for non-work related LTSA seen in the OHS, 19% (n=14) were due to psychological reasons; 42% (n=31) were due to musculoskeletal problems and 39% (n=29) were due to other reasons.

Chart 6



- 44 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.
- 45 During quarter three, 90 employees were seen as a management concern, 24% (n=22) 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 73% (n=16) of the work related and 19% (n=13) 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 15% of non-work related and 9% 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)
- 46 Further analysis of the data relating to management concern referrals identified that 7% of the LTSA referrals received in quarter three were seen in the previous 12 months as a management concern referral.

Chart 7

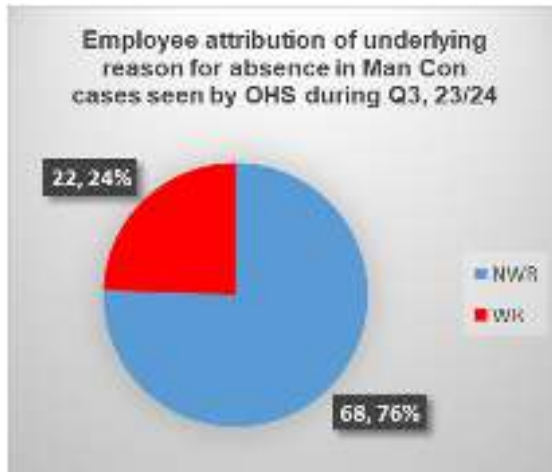


Chart 8

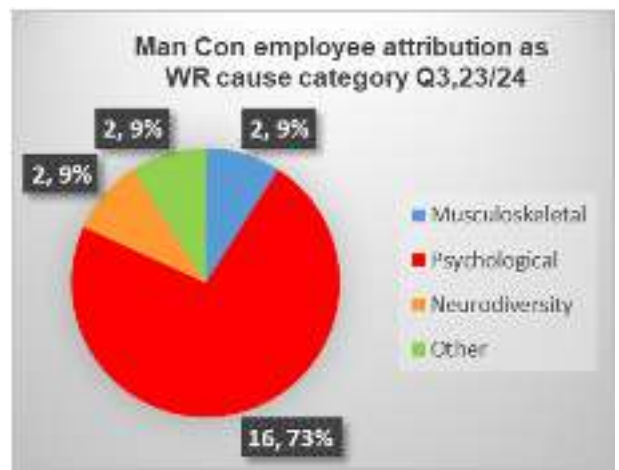
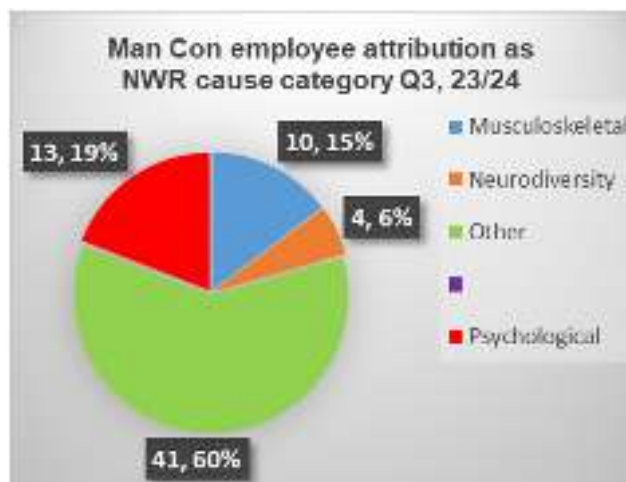


Chart 9



Support Services

- 47 During Quarter three, 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	Corp	Service not detailed	Q3	Q2	Q1	Q4	Q3
								23/24	23/24	23/24	22/23	22/23
								Total	Total	Total	Total	Total
Number of routine physiotherapy referrals	6	10	9	9	14	0	-	48	65	70	74	52
Number of routine physiotherapy sessions	7	25	29	28	34	0	-	123	150	144	174	189
Number of 'face to face' counselling referrals	1	2	0	1	3	0	-	7	6	2	6	8
Number of 'face to face' counselling sessions	0	0	0	6	1	0	-	7	30	6	15	6
Total number of calls to the EAP	14	45	4	10	7	8	16	104	150	134	160	134
Telephone EAP structured counselling cases	0	1	0	0	0	0	1	2	10	4	5	3
Telephone EAP structured counselling sessions	2	6	7	0	3	0	9	27	52	7	40	0
Employees referred to online counselling	1	2	0	0	0	0	0	3	3	6	13	10
Online Counselling Sessions	0	4	0	0	0	0	3	7	23	37	49	7
Employees referred to online CBT	0	3	0	0	0	0	1	4	5	3	0	23
Online CBT sessions	0	4	0	0	0	0	0	4	5	2	0	31

Physiotherapy

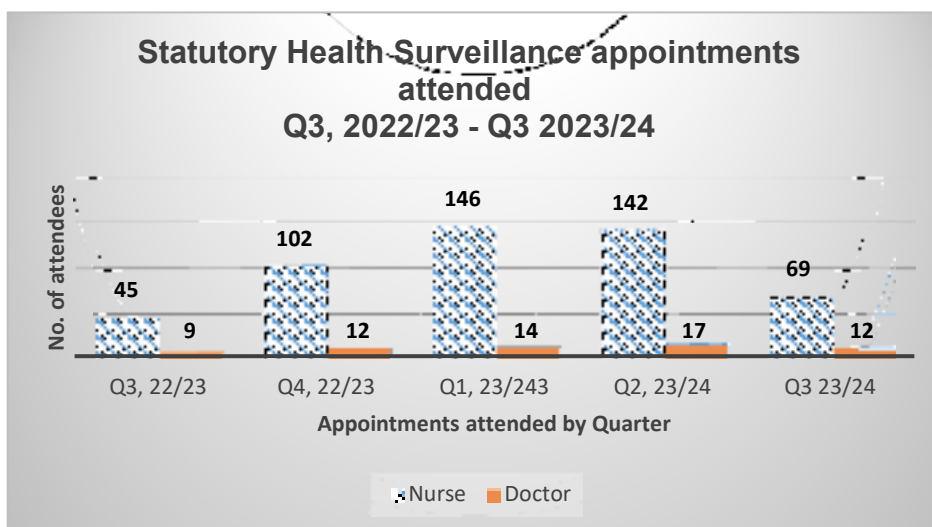
- 48 Routine physiotherapy clinics operate two days per week in the OHS at Annand House under contract with the OHS, the clinics are a combination of telephone assessments and face to face physiotherapy appointments, should following the physiotherapy initial assessment by telephone the physiotherapist deem this to be clinically required. Employees can self-refer or be referred by their manager.

- 49 At the time of preparing this report (02/02/2024) 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

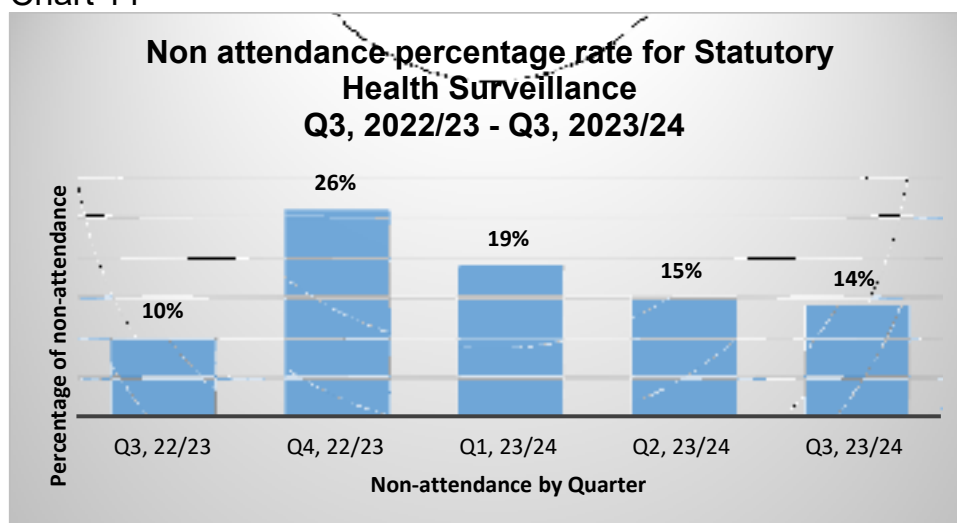
- 50 The OHS continues to provide statutory health surveillance programmes to employees in line with HSE guidelines. Some health surveillance clinics are carried out on site to minimise the effect on service delivery.
- 51 During Quarter three, a total of 81 employees attended OHS appointments for routine statutory health surveillance, 69 with an Occupational Health Nurse and 12 with an Occupational Health Doctor

Chart 10



- 52 During Quarter three, 14% (n=13) employees failed to attend their appointment with the OHS in relation to statutory health surveillance. This equates to 2 days of clinic time lost which is an improvement from quarter two (2.5 days). See Chart 11.

Chart 11



Immunisation

- 53 During quarter three 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 two vaccines.
- 54 During quarter three there was one inoculation incident reported to the OHS, this was due to a discarded needle being sucked into the gully cleaner and stabbing the employee when he was clearing a blockage. Appropriate reporting and follow-up has taken place.

Occupational Health Activity Data DCC related activity (note this data does not include Local Authority Maintained Schools).	Q3 2023/24 Total	Q2 2023/24 Total	Q1 2023/24 Total	Q4 2022/23 Total	Q3 2022/23 Total
Appointment category					
Pre-Employment/Pre-Placement assessments Of which attended an appointment	533 117	625 13	564 38	458 22	669 139
Management referrals seen – Long Term Sickness	94	124	86	79	72
Management referrals seen – Short Term Sickness	15	19	18	18	20
Management Referrals seen -Long/Short Term Sickness	6	22	22	23	71
New Management Concern referrals seen	90	112	88	94	31
Review appointments seen	29	34	38	35	37
Re-referrals seen	49	38	38	45	22
Statutory Health Surveillance Assessments Attended (Nurse)	69	144	127	102	44
Music Service audiometry attended	0	14	19	10	1
School Crossing Patroller Routine Medicals	11	1	3	10	10
Driver Medicals (DVLA Group 2) e.g. HGV	32	14	26	18	6
Night Worker assessments (Working Time Regs 1998)	0	15	2	0	0
Immunisations against occupationally related infections	2	20	12	9	30
'Flu' Immunisations	261	0	0	0	342
Inoculation injury OHS Assessments – where injury has been reported to the OHS	1	0	2	0	0
HAVS Postal Questionnaires sent	95	107	125	128	143
HAVS Postal Questionnaires returned percentage rate	27%	56%	86%	30%	63%
Did Not Attend (DNA) for statutory health surveillance appointment	13	14	17	36	4
Music Service DNA	1	2	0	1	0
DNA – Management Referral appointments with the OHS (excluding health surveillance)	47	67	47	72	51

Corporate risks that may have an impact on Health and Safety

55 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 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.

Main implications

Legal

- 56 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

- 57 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

- 58 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

- 59 Accident statistics in general for quarter three showed an increase on previous quarters although still below the quarterly average. A further three RIDDOR specified injuries occurred during quarter three which were attributed to Neighbourhoods and Climate Change, REG and Children and Young People's Service services, and were attributable to slips, trips and falls.
- 60 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 143 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.
- 61 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.
- 62 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 priority buildings.

- 63 In relation to RAAC, good progress was made against the remaining outstanding assets to be surveyed. At the end of 2023 there were no council buildings requiring a survey and the council has a nil return for corporate property. The council is still supporting affected academies with temporary arrangements.
- 64 In relation to the PVPR there are a number of areas which require further communications and awareness to increase user access and use. In particular given the number of councillor related support being provided in relation to violence and aggression related risks, contact will be made with member support to promote the PVPR.
- 65 Occupational health service continues to evidence a consistently concerning number of non-attendance figures for statutory health surveillance and management referrals which is equating to approximately 15 days of lost clinic time during the quarter. Further work is required to analyse the appointment booking process and also raise awareness amongst managers to ensure that employee attend appointments wherever possible. Managers and their employees will also be reminded of the statutory importance of completing hand arm vibration questionnaire and return them to occupational health. During quarter three only 27% of questionnaires sent out were completed and returned.

Other useful documents

Occupational Health Quarter three 2023/24 Report.
Health, Safety and Wellbeing statistical Quarter three 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