

## Audit Committee

30 September 2024

### Quarter one 2024/25 Health, Safety and Wellbeing Performance Report



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## Report of Amy Harhoff, Corporate Director, Regeneration, Economy and Growth and 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 one 2024/25.

### Executive summary

2. There were 383 accidents, incidents and near misses which was a minor increase from the previous quarter but average for the year. There was a low level of more serious incidents with only two RIDDOR specified injuries and eight incidents which caused an over 7 day absence from work for employees.
3. During Quarter one there were six fire related incidents involving council premises and vehicles. Once again, the majority of these involved discarded batteries and it was positive to see that emergency procedures were used appropriately to result in no personal injury or significant property damage, other than a single incident where a loading shovel was completely destroyed.
4. Enforcement related action was taken by County Durham and Darlington Fire and Rescue Service (CDDFRS) at Netpark. This followed concerns being raised regarding a tenant at Discovery 2 by other tenants and Netpark business durham managers. Following a further inspection by corporate H&S a decision was taken to notify CDDFRS given the potential seriousness of the issues and previous poor standards of management and risk control. Further work is still required to meet legislative and enforcement requirements continues in quarter two to address the key issues identified.
5. There were 127 Health and Safety (H&S) and fire safety audits and inspections of council premises and work activities during the quarter

which resulted in an overall compliance rate of 93.76%. Once again, the majority of noncompliance issues were of a low priority and almost 300 opportunities for improvement were identified.

6. Radon gas management programme continues to make progress against schedule. The total number of buildings in scope requiring radon gas assurance testing was 691, 72% of sites have had testing devices installed and 500 results returned via the UK Health Security Agency (UKHSA). Only 5 sites have showed higher readings and engineering controls have or will be installed in the form of ground sump pumps in addition to other management controls.

### **Recommendation(s)**

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

Health, Safety & Wellbeing Quarter 1 2024/25 in Numbers

**383**

Accidents, incidents and near misses reported.  
(361 Q4 2023/24, Q3 2023/24, 348 Q2 2023/24,

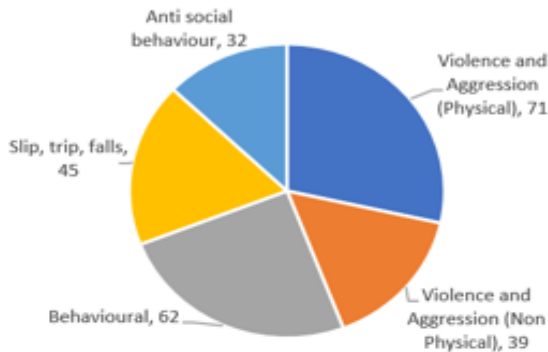


**95%**

Of all reported accidents are either no injury or near miss



**Main Accident/Incident Causes Q1 2024/25**



**2 RIDDOR 'specified' injury, and 8 over 7 days absence RIDDOR injuries.**



**Better Health at Work Award**

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



15 psychological work-related incidents in Q1 2024/25.  
(32 in Q4 2023/24, 36 in Q3 2023/24, 39 in Q2 2023/24)

6 fire related incidents



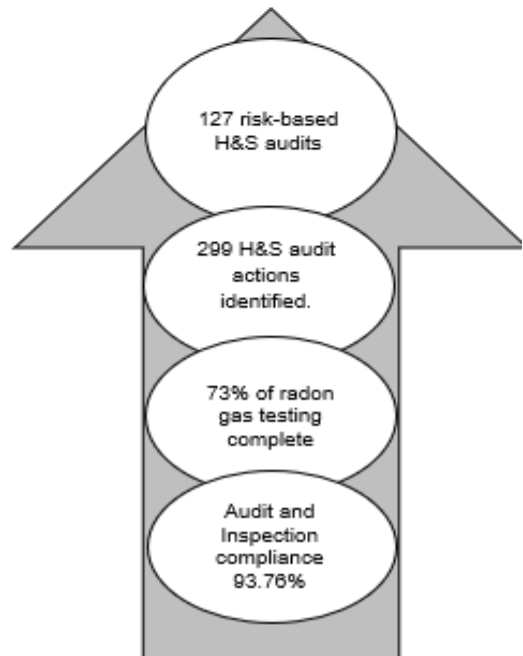
2 CDDFRS inspections of council premises



H&S/Fire Safety management audit action completions rates improved from 40% to 77% in Quarter 1 2024/25

**1**

Enforcement related action from CDDFRS following inspections and audit activity.



## Background

- 10 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 are detailed below.

## Management of Health and Safety Procedures

- 11 Between April and June 2024, reviews of various current H&S procedures have commenced and are in various stages of development. Below is the table of the procedures and status of the review.

Procedure	Status
Fire Procedure	Under Review
Contractors	Under Review
Asbestos Management	Under Review
Homeworking	Under Review
Radon Gas	Reviewed
Young Employees	Reviewed
Open Water Safety Policy	Reviewed

## Consultation/Communication

- 12 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.
- 13 There was one joint visit undertaken between H&S and trade union safety representatives in quarter one. This was for the Clean and Green Arbor team which is based in the East of the county. Two actions were identified on site.

## Audits and Inspections

- 14 There were a total of 127 audits and inspections undertaken by the H&S team during quarter one . The audit and inspection activity provided almost 299 opportunities for improving H&S performance.

Chart 1 – Audit and Inspection Activity for Quarter 1.



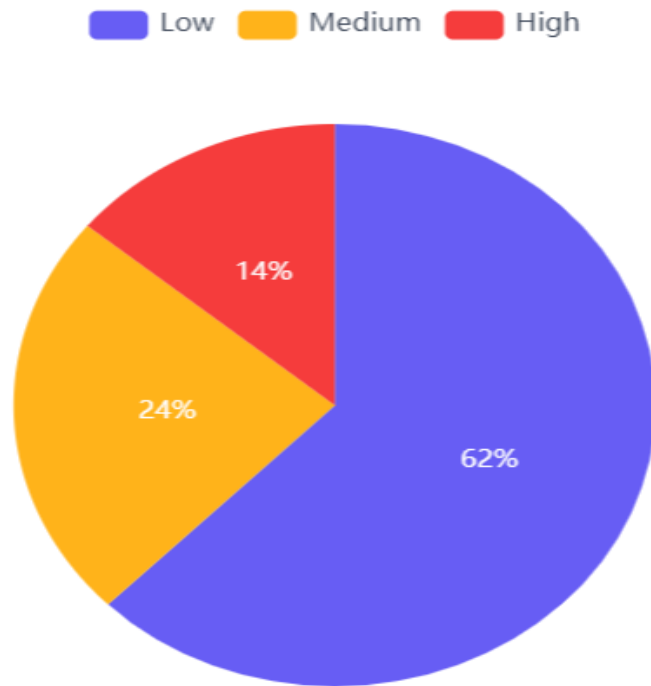
- 15 From the audits undertaken the following headline percentage compliance scores can be determined for each service area where audits took place:

**Table 1 Compliance scores**

Audit Area	INSPECTIONS	SCORE (%)
	Total	Average
School Audit	34	96.61%
Civil Engineering and Construction Sites	26	82.12%
Fire Safety Audit	18	95.24%
Refuse and Recycling	16	95.05%
Arbor Work	3	94.87%
Clean & Green	3	87.37%
CYPS Audit	4	98.54%

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

## Chart 2 Compliance Actions by Priority



### Audit High Priority Action Areas

Site	High Priority Actions Allocated
Schools	28
Buildings Construction Site	15
Roofing Works	13
Demolition Works	2

**Table 2- Audit Actions completion statistics**

Summary	Low		Medium		High		Totals			
	Outstanding	Completed	Outstanding	Completed	Outstanding	Completed	Outstanding	Completed	Overall	Overall %
AHS	1	11	0	0	0	0	1	11	12	92%
CYPS	4	10	0	1	0	1	4	12	16	75%
Maintained Schools	11	42	9	25	8	9	28	76	104	73%
NACC	10	35	6	18	4	0	20	53	73	73%
REG	13	22	10	47	1	30	24	99	123	80%
Resources	0	1	0	0	0	0	0	1	1	100%
Corporate Affairs	0	0	0	0	0	0	0	0	0	N/A
<i>Total</i>	39	121	25	91	13	40	77	252	329	77%

## Fire Incidents

- 17 There were six fire related incidents at Durham County Council owned premises or on vehicles during quarter one. They occurred at Chester-le-Street library, Thornley waste transfer station, Heighington waste transfer station and on board two refuse and recycling vehicles.

### Chester-le-Street Library

- 18 It was reported that the cleaner came into work and discovered that the premises had been broken into with entry being gained to the first-floor workroom from the roof. The intruders attempted to set fire to books, which fortunately did not ignite.
- 19 The police were called, and crime scene investigators attended and took fingerprints. Buildings and Facilities Management repaired the window and arrangements have been made to have to window that was accessed fitted with metal bars to prevent any further entry to the premises. To date police investigations are ongoing and the preparators have not yet been identified.

### Thornley Waste Transfer Station

- 20 It was reported that on 7 May 2024, the loading shovel operator identified that a small fire had occurred in the co-mingle pile of waste. This was immediately extinguished by the operative by stamping on it with his boot. The waste was taken to the hot load bay and doused with

water and left for 24 hours before being taken away. The source of the fire was believed to be from a battery in a vape.

#### Thornley Waste Transfer Station

- 21 It was reported that on 9 May 2024 a loading shovel was parked outside transfer station after staff had left for the day. The waste station transfer coordinator for the site received a phone call from the fire service stating that they had attended the site and extinguished a fire on the loading shovel vehicle. The call to the fire service was made by staff at the neighbouring household waste recycling centre, who identified large quantities of smoke coming from the waste transfer station and initially thought the premises was on fire. The fire service deemed the cause of the fire to be accidental, however the machine was destroyed by the fire.
- 22 Further investigations were carried out and CCTV was also viewed and it was identified that the fire started in the left axle of the vehicle. It is believed that flammable material became lodged around the axle/bearings and was heated until it caught fire. This melted the seals allowing hydraulic fluid to leak and fuel the fire further. The CCTV footage shows that flames went up the left of the vehicle causing the sight glass of the hydraulic tank to break, spilling the contents and creating a fully developed fire. It was recommended that after every shift the loading shovel driver visually inspect the axle of the vehicle to ensure that no material has wrapped around the axle/bearings.

#### St Marys Drive West Rainton

- 23 On 14 May 2024 the driver of a refuse and recycling vehicle noticed smoke coming from the refuse hopper of the vehicle. The driver used the portable fire extinguisher from the vehicle to tackle the fire and then travelled to Thornley waste transfer station where the load was tipped into the hot load bay. It was doused in water and monitored as per the hot load procedure before being taken away. It is believed that the cause of the fire was discarded batteries from vapes.

#### Lingfield Court Bishop Auckland

- 24 On 5 June 2024 the driver of a refuse and recycling vehicle who was working in Bishop Auckland put a recycling bin into the vehicle and noticed smoke and flames in the hopper. The driver tipped part of the load on the street then travelled to Heighington Transfer Station and tipped the rest of the load in the fire bay where it was monitored as per the hot load procedure. Clean and Green services removed the rubbish from the street. It is believed that the fire was started by a discarded battery in the recycling waste.



## Heighington Waste Transfer Station

- 25 On 12 June 2024 a refuse and recycling vehicle tipped the recycling materials onto the hall floor of the station and as the material hit the floor, the loading shovel driver noticed something on fire. The driver immediately put out the fire using his foot and then the rest of the load was put into the hot load as per the procedure. It is believed that the fire was started by a lithium battery.

## Enforcement Activity and Interventions

- 26 There were two County Durham and Darlington Fire and Rescue Service (CDDFRS) inspections of council premises during quarter one. One of these visits was undertaken at Net Park Discovery Two, as detailed below. This resulted in a major deficiencies letter being issued to the managing director of an organisation. This followed a range of health and safety and fire safety concerns being raised by Net Park Business Durham management regarding fire safety concerns and the manufacturing process and storage of Ethanol. The other inspection took place at Green Lane Offices and the premises were deemed to be broadly compliant with current Fire Safety Legislation.

## Netpark Discovery Two

- 27 CDDFRS intervened during the quarter regarding production activities being undertaken by a tenant of Discovery 2 area of Netpark. Initial concerns were raised from Netpark business durham management and neighbouring tenants in relation to safety of production activities, traffic management, storage and large quantities of ethanol based products on site. Following visits from corporate health and safety and fire safety advisers, further advice was sought from CDDFRS hazardous chemical safety advisers. This resulted in formal action being taken regarding fire safety control measures which were required to be put in place in accordance with the Dangerous Substances and Explosive Atmospheres Regulations (DSEAR). A further review is taking place in quarter two to establish if there are alternative premises for this particular business which are more appropriate for their production activities.
- 28 Following HSE enforcement visits across the region, an enforcement notice was issued in May 2024 in relation to breaches of the Plant Protection Products (Sustainable Use) Regulations 2012. Unauthorised chemical products which were found within the Clean and Green Stores at Morrison Busty Depot.

- 29 The requirements of the enforcement notice were met and a response provided to the HSE inspector. The products were disposed of via a licensed waste contractor. There was also a recommendation in the enforcement notice pertaining to inspection of application equipment in line with the national sprayer testing scheme and assurance was also provided on this. Further assurance checks have been undertaken across other council sites to ensure they remain compliant.

## **Employee Health and Wellbeing**

- 30 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.
- 31 As part of the council achieving better health at work ambassador status A health needs assessments survey was launched during quarter one. As part of the Better Health at Work Award the council produces campaigns and events on different health and wellbeing topics. The employees who help organise these campaigns are called "health advocates" and part of their role is to identify health issues which are important to council employees and the ways they would like to receive information or participate in health improvement activities. By completing this survey it helps the council and future health advocates identify and address the health and wellbeing issues that are important to the workforce.
- 32 There was again a wide range of activities and promotions of health and wellbeing related topics during the quarter. These included mental health awareness week, healthy eating week, five ways to wellbeing, carers week and awareness for employees on how to sign up to inductions to become domestic abuse workplace champions.

## **Open Water Safety**

- 33 The City Safety Group met during the quarter and continued to review the city centre related open water safety related risks amongst other key city centre issues. Although there were no significant incidents reported and reviewed, there continued to be a number of incidents within the city centre, primarily near various bridges, associated with mental health and emergency services being called out to assist individuals in mental health crisis requiring support which was provided. There were no other incidents to report on.

- 34 Ahead of the summer period the city centre river corridor continues to undergo monthly public rights of way inspections and also weekly inspections of public rescue equipment provided. During quarter one the regatta event was held and went without any incidents to report.
- 35 The County wide open water safety group also convened during quarter one. The group reviewed incident data and concluded that once again the majority of incidents were city centre related. A review of priority risk assessments at higher risk locations across the county has been completed ahead of the summer holiday period to ensure that control measures remain and in place and are effective.
- 36 In terms of awareness and education activities planned, CDDFRS and partners promoted national water safety week which commenced on 22 April 2024. The councils communications worked with counterparts at the Police and CDDFRS communications teams around this. There are also activities planned for world drowning prevention day on 25 July 2024 and world drowning prevention week in June 2024. The council, via its schools aquatic manager, has been involved in a national group in developing the information for water safety to be added into the school's curriculum. It is anticipated this may be completed prior to the summer school holiday period.

## **Radon Gas Management**

- 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 the initial programme of assessments commenced from October 2023.
- 38 The total number of buildings in scope requiring radon gas assurance testing was 691. Radon monitors have been installed in 636 buildings with 55 remaining due to problems with accessibility. At the end of quarter one, 72% of sites have had testing devices installed and 500 results returned via the UK Health Security Agency (UKHSA).
- 39 There are five sites have been returned with above threshold readings. These are at Cassop Primary school, St Helen Auckland Primary, Ferryhill the Woodlands, Sherburn Hill Hub and Sherburn Hill former Childrens centre. Remedial actions have already been completed in Cassop, Ferryhill and advice provided to St Helens as they are now an academy school. Work to identify required controls in Sherburn sites is also underway following results being obtained at the end of quarter one.

## Violence and Aggression – Potentially Violent Persons Register (PVPR)

The total number of **live entries** at the end of Q1 was 178.

Live Entries	21-22	22-23	23-24	24-25
<b>Q1</b>	55	85	137	178
<b>Q2</b>	47	89	173	
<b>Q3</b>	66	100	199	
<b>Q4</b>	75	113	191	

The total number of **additions** at the end of Q1 was 36.

Additions	21-22	22-23	23-24	24-25
<b>Q1</b>	12	22	41	36
<b>Q2</b>	8	21	50	
<b>Q3</b>	30	35	50	
<b>Q4</b>	24	38	23	
<b>Total</b>	<b>74</b>	<b>116</b>	<b>164</b>	

The total number of **extensions** at the end of Q1 was 21.

Extensions	21-22	22-23	23-24	24-25
<b>Q1</b>			10	21
<b>Q2</b>			21	
<b>Q3</b>		9	18	
<b>Q4</b>		8	7	
<b>Total</b>		<b>17</b>	<b>56</b>	

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

The total number of **removals** at the end of Q1 was 41.

Removals	21-22	22-23	23-24	24-25
<b>Q1</b>	20	12	17	41
<b>Q2</b>	16	17	17	
<b>Q3</b>	11	24	19	
<b>Q4</b>	14	29	40	
<b>Total</b>	<b>61</b>	<b>82</b>	<b>93</b>	

The total number of **warning letters** sent at the end of Q1 was 9.

Warning Letters	21-22	22-23	23-24	24-25
<b>Q1</b>	3	12	10	9
<b>Q2</b>	0	4	13	
<b>Q3</b>	12	11	18	
<b>Q4</b>	8	10	12	
<b>Total</b>	<b>23</b>	<b>37</b>	<b>53</b>	

The total number of **appeals** at the end of Q1 was 2.

Appeals	21-22	22-23	23-24	24-25
<b>Q1</b>	0	1	0	2
<b>Q2</b>	0	0	2	
<b>Q3</b>	0	3	2	
<b>Q4</b>	1	1	0	
<b>Total</b>	<b>1</b>	<b>5</b>	<b>4</b>	

The appeals during Q1 were all rejected.

## PVPR Viewing Statistics

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

Service	People Viewed	How many times
NACC	20	70
REG	54	256
Resources	84	1102
CYPS	27	84

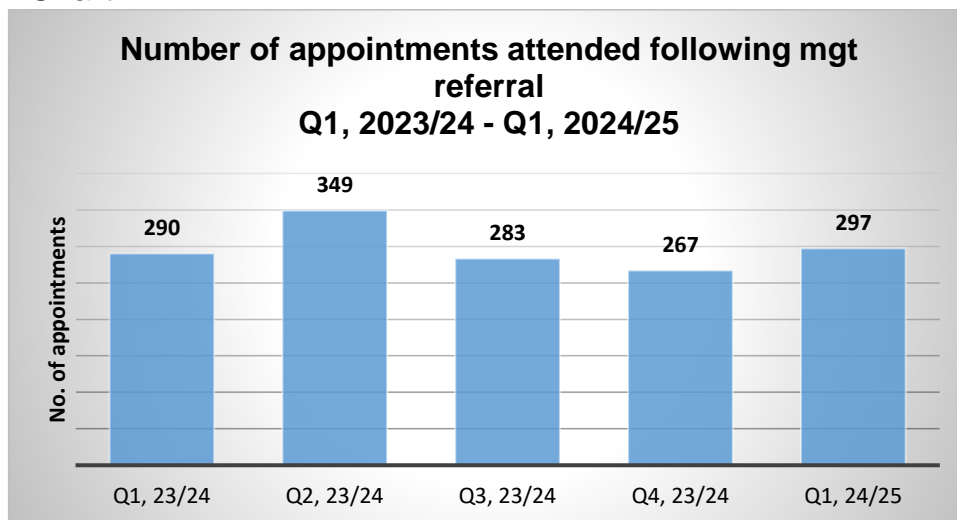
AHS	25	72
Corporate Affairs	0	0
Unions	0	0
Members	2	4

## Occupational Health Service

### Management Referrals

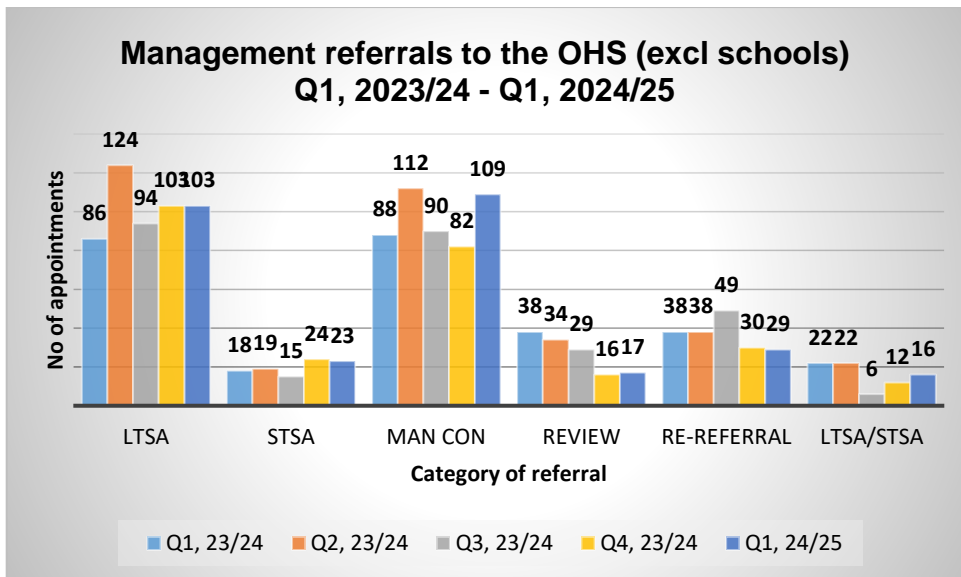
40. During Quarter 1, 297 employees participated in clinical consultations with the OHS, following management referral in relation to Long Term Sickness Absence (LTSA), Short Term Sickness Absence (STSA), Management Concerns (Man Con) Reviews, and Re referral appointments, Long Term Sickness Absence/Short Term Sickness Absence (LTSA/STSA) and Covid.

Chart 1



41. Chart 2 shows the categorisation of management referral appointments attended.

Chart 2



### Management Referrals - Non Attendance

42. During Q1, 59 employees did not attend their allocated appointment following management referral. This represents a 17% non-attendance rate and equates to 11 days of clinic time.

Chart 3

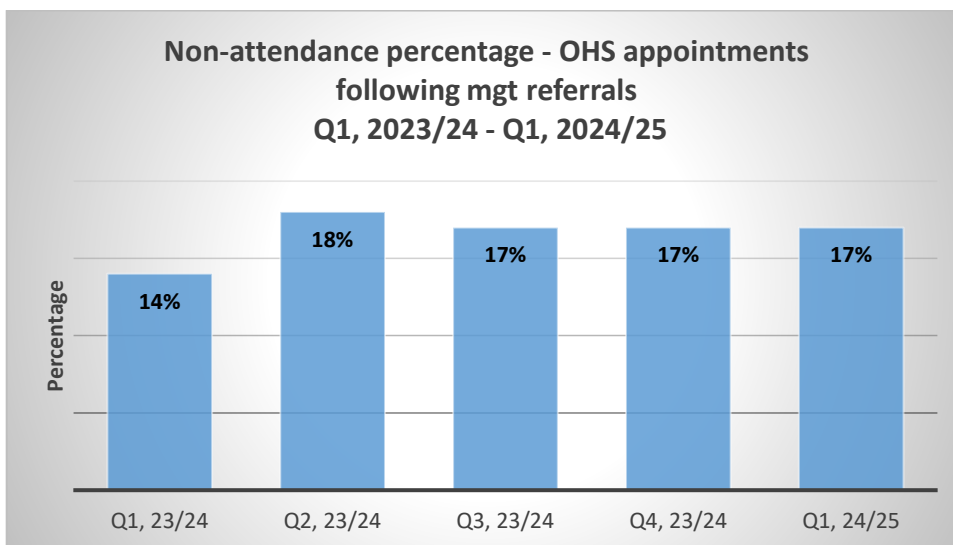


Chart 3a

Non-attendance - OHS appointments following mgt referral by Service Q1, 2024/25	AHS	CYP S	NC C	RE G	Res	Q1	Q4	Q3	Q2	Q1
						24/25	23/24	23/24	23/24	23/24
						Total	Total	Total	Total	Total
Number failed to attend	9	15	15	12	8	59	54	47	67	47

### Management Referrals – Employee Attribution

43. During Quarter 1, 103 employees were seen for LTSA of which 18% (n=19) stated to the OHS that they consider the underlying cause to be due to work related factors. Of the employees, 74% (n=14) identified this was due to 'psychological' reasons, 21% (n=4) identified as 'musculoskeletal' and 5% (n=1) identified as other. See Charts 4 & 5

Chart 4

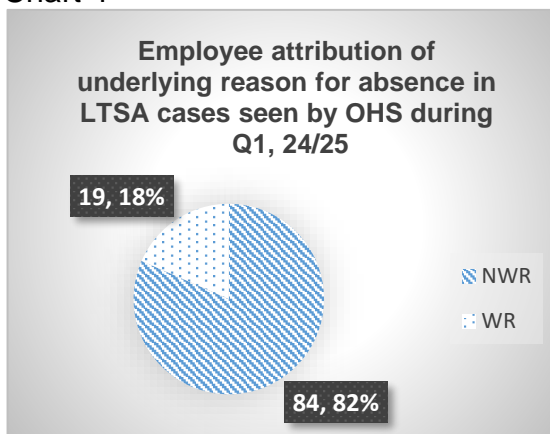
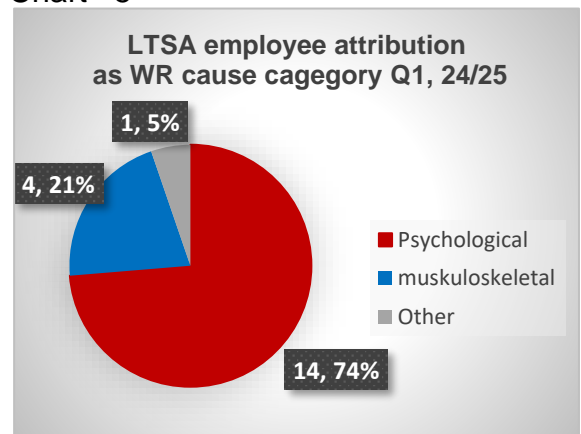


Chart 5



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 Q1, 109 employees were seen as a management concern, 15% (n=16) of these referrals stated to the OHS that they consider the underlying cause to be due to work related factors. Of the employees seen 75% (n=12) of the work related and 24% (n=21) of the non-work

related were due to psychological reasons, by referring to the OHS support, advice and signposting to EAP can be given at an early stage and hopefully prevent an absence from work. Musculoskeletal problems accounted for 25% of non-work related and 13% of work-related management concern referrals, identifying these issues before they result in an absence from work and allow early intervention which could include referral to physiotherapy. Although not all absences are work related, they can have an impact on work and the wellbeing of employees.

## Support Services

46. During Quarter 1, 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	CE	Service not detailed	Q1	Q4	Q3	Q2	Q1
								25/25	23/24	23/24	23/24	23/24
								Total	Total	Total	Total	Total
Number of routine physiotherapy referrals	13	22	9	9	14	0	-	67	70	48	65	70
Number of routine physiotherapy sessions	48	63	33	35	53	0	-	232	159	123	150	144
Number of 'face to face' counselling referrals	0	2	1	1	1	0	-	5	8	7	6	2
Number of 'face to face' counselling sessions	0	15	13	1	0	0	-	29	19	7	30	6
Total number of calls to the EAP	5	19	2	2	15	0	69	112	115	104	150	134
Telephone EAP structured counselling cases	0	0	0	0	0	0	0	0	0	2	10	4
Telephone EAP structured counselling sessions	0	0	0	0	0	0	0	0	0	27	52	7
Employees referred to online counselling	0	4	0	0	1	0	7	12	10	3	3	6
Online Counselling Sessions	0	24	5	0	17	0	28	74	38	7	23	37
Employees referred to online CBT	0	0	0	0	0	0	0	0	2	4	5	3



Online CBT sessions	0	0	0	0	0	0	3	3	3	4	5	2
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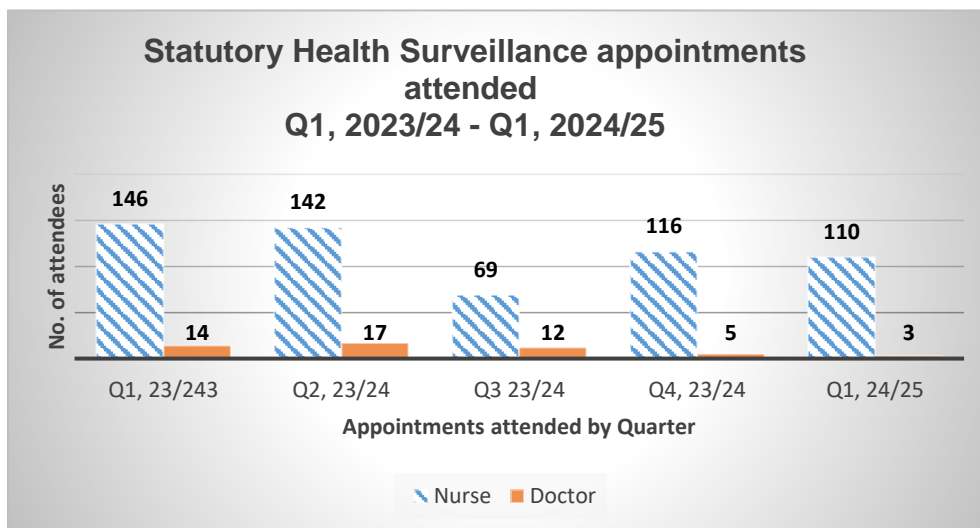
## Physiotherapy

47. 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.
48. At the time of preparing this report (17/07/2024) 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

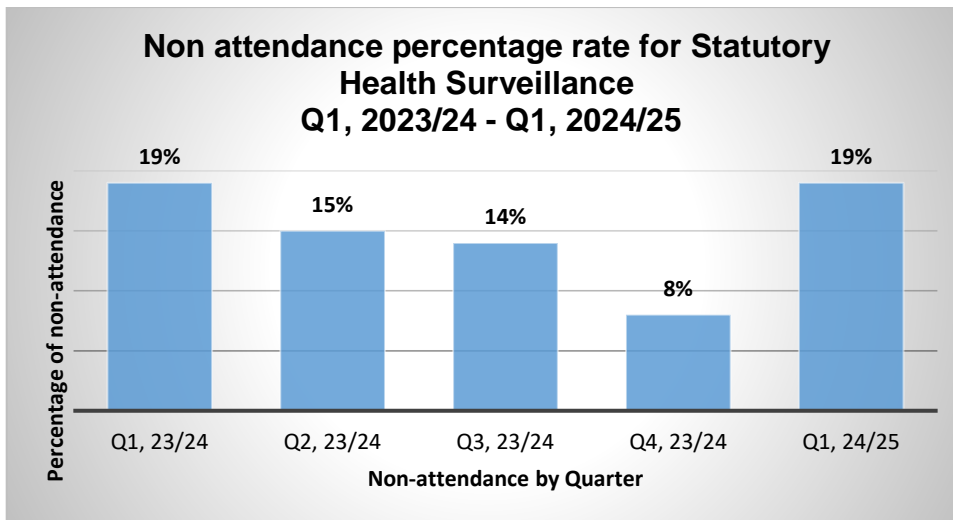
49. The OHS continues to provide statutory health surveillance programmes to employees in line with HSE guidelines. Some health surveillance clinics are carried out on site to minimise the effect on service delivery.
50. During Quarter 1, a total of 113 employees attended OHS appointments for routine statutory health surveillance, 110 with an Occupational Health Nurse and 3 with an Occupational Health Doctor

Chart 10



51. During Quarter 1, 19% (n=27) employees failed to attend their appointment with the OHS in relation to statutory health surveillance. This equates to 3.5 days of clinic time lost. See Chart 11.

Chart 11



## Immunisation

52. During Q1 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 12 vaccines.
53. During Q1 one inoculation incident was reported to the OHS, appropriate advice and follow-up was provided to the employee.

<b>Occupational Health Activity Data DCC related activity (note this data does not include Local Authority Maintained Schools).</b>	<b>Q1 2024/25 Total</b>	<b>Q4 2023/24 Total</b>	<b>Q3 2023/24 Total</b>	<b>Q2 2023/24 Total</b>	<b>Q1 2023/24 Total</b>
<b>Appointment category</b>					
Pre-Employment/Pre-Placement assessments Of which attended an appointment	<b>391</b> <b>41</b>	<b>367</b> <b>172</b>	533 117	625 13	564 38
Management referrals seen – Long Term Sickness	<b>103</b>	<b>103</b>	94	124	86
Management referrals seen – Short Term Sickness	<b>23</b>	<b>24</b>	15	19	18
Management Referrals seen -Long/Short Term Sickness	<b>16</b>	<b>12</b>	6	22	22
New Management Concern referrals seen	<b>109</b>	<b>82</b>	90	112	88
<i>Review appointments seen</i>	<b>17</b>	<b>16</b>	29	34	38
Re-referrals seen	<b>29</b>	<b>49</b>	49	38	38
Statutory Health Surveillance Assessments Attended (Nurse)	<b>10</b>	<b>116</b>	69	144	127
Music Service audiometry attended	<b>0</b>	<b>1</b>	0	14	19
School Crossing Patroller Routine Medicals	<b>6</b>	<b>11</b>	11	1	3
Driver Medicals (DVLA Group 2) e.g. HGV	<b>20</b>	<b>41</b>	32	14	26
Night Worker assessments (Working Time Regs 1998)	<b>0</b>	<b>0</b>	0	15	2
Immunisations against occupationally related infections	<b>12</b>	<b>13</b>	2	20	12
'Flu' Immunisations	<b>0</b>	<b>1</b>	261	0	0
Inoculation injury OHS Assessments – where injury has been reported to the OHS	<b>1</b>	<b>0</b>	1	0	2
HAVS Postal Questionnaires sent	<b>30</b>	<b>13</b>	95	107	125
HAVS Postal Questionnaires returned percentage rate	<b>93%</b>	<b>100%</b>	27%	56%	86%
Did Not Attend (DNA) for statutory health surveillance appointment	<b>27</b>	<b>11</b>	13	14	17
Music Service DNA	<b>0</b>	<b>0</b>	1	2	0
DNA – Management Referral appointments with the OHS (excluding health surveillance)	<b>59</b>	<b>54</b>	47	67	47

## Corporate risks that may have an impact on Health and Safety

54 The below tables detail the corporate risk that may have an impact on Health and Safety at the end of July 2024.

### Health and Safety Related Strategic Risks

Ref	Service	Risk	Treatment
1	CYPS	<b>Failure to protect a child</b> 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 ( <b>Transport Service</b> ).	The current controls are considered adequate.
3	AHS	Failure to protect a <b>vulnerable adult</b> 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 <b>major incident</b> , leading to a civil emergency.	Treat
5	RES	Serious <b>breach of Health and Safety</b> 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 <b>property and land</b> .	Treat
7	RES	Potential <b>violence and aggression</b> towards members and employees from members of the public	The current controls are considered adequate.

8	NCC	<b>Demand pressures on the Community Protection</b> 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 <b>Ash Dieback Disease</b> on the environment, public safety, and council finances.	Treat
10	NCC	Risk that the council is unable to meet its responsibilities under the <b>Terrorism (Protection of Premises) Bill</b> when enacted, which sets to improve protective security and organisational preparedness at publicly accessible locations.	The current controls are considered adequate.

## Statistical Information

- 55 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

- 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 one showed a similar number and average against previous quarter and financial year. There remained a high prevalence of no injury and minor injury incidents which is positive. Whilst a further two RIDDOR reportable specified injuries occurred during this quarter, these remain relatively low given the council wide risks and activities undertaken.
- 60 There were a higher number of fire related incidents during quarter one. As in previous quarters it is clear that there is a recurring theme of fire causes relating to discarded batteries. It was positive to see that council employees invoked emergency procedures effectively and appropriately to result in no personal injury or significant property damage, other than a single incident where a loading shovel was completely destroyed.
- 61 There were no HSE related enforcement actions following two in quarter four of 2023/24. It was however disappointing that CDDFRS intervention was required in relation to Netpark discovery two site. This was important to enable significant fire safety and health and safety risks to be controlled, managed and mitigated. Whilst work is still required to meet legislative and enforcement requirements positive action has been taken to start the process of improvements.
- 62 The radon gas management programme continues to progress well and there are now in excess of 70% results returned from the 691 buildings in scope. Whilst there have been five sites requiring further actions to reduce radon levels its remains positive that the majority of results remain below the legal thresholds.
- 63 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 127 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.
- 64 In relation to audit action completion statistics, it is clear that there has been a significant improvement from previous quarters across services. The previous quarter indicated that only 40% of actions from H&S and

fire safety audits had been completed compared to a 74% completion rate in quarter one 2024/25. Whilst there is still room for further improvement collectively, this remains positive progress.

### **Other useful documents**

- Occupational Health Quarter one 2024/25 Report
- Health, Safety and Wellbeing statistical Quarter one 2024/25 report

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## **Appendix 1: Implications**

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### **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