

Audit Committee

28 February 2025

Quarter three 2024/25 Health, Safety and Wellbeing Performance Report



Report of Paul Darby, Corporate Director of 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 2024/25.

Executive summary

- 2 There were 537 accidents, incidents and near misses which was an increase from the previous quarter but statistics for quarters one to three indicate an average for the year so far. The increase in reports in quarter three was predominantly caused by reports being submitted from special educational needs establishments and a number of challenging young persons in children's homes. There were four Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) specified injuries and nine incidents which caused employees over seven day reportable absence from work. The main causes of these specified injuries were slips, trips and falls.
- 3 A RIDDOR reportable dangerous occurrence occurred in quarter three. This followed the collapse of a scaffold at Stanhope wear bridge in October 2024. The scaffold, which was erected by an external contractor, collapsed following high rainfall and rising river levels which it was partially situated in. A recovery operation was put in place to recover the scaffold and further works on the bridge will take in place in spring 2025 due to ecology factors on site delaying an immediate restart. A full investigation has been completed in relation to the incident and provided to highways operational services management.
- 4 During Quarter three there were seven fire related incidents. Once again, a trend of fires in refuse and recycling vehicles continues with three incidents reported as a result of discarded batteries in waste. Once again it was positive to see that emergency procedures were

again used appropriately to result in no personal injury or significant property damage.

- 5 There was County Durham and Darlington Fire and Rescue Service (CDDFRS) enforcement related activity at Freemans Quay leisure centre which resulted in an outcome of major deficiencies of fire safety legislation. Several issues were identified by the CDDFRS inspecting officer and whilst some have been resolved immediately a number of findings have been challenged by council fire safety officers. Dialogue with CDDFRS continues regarding the findings.
- 6 There were 146 risk based 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 95.36% which is an increase from quarters one and two. Once again, the majority of noncompliance issues were of a low priority and almost 300 opportunities for improvement were identified. H&S and fire safety audit actions completion statistics were improved for the third consecutive quarter with 815 of actions being completed within timescales.
- 7 The completion of the radon gas management assessment programme has been achieved on target which was the end of 2024. A small number of results are awaited from the UK Health Security Agency (UKHSA) laboratories and sites will now be subject to further tests within 10 years, part from one site which had elevated levels and will be subject to annual testing.

Recommendation(s)

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

Health, Safety & Wellbeing Quarter 3 2024/25 in Numbers

537

Accidents, incidents and near misses reported. (406 Q2 2024/25, 399 Q1 2024/25)

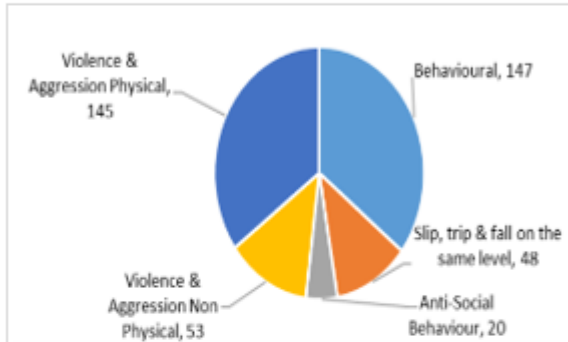


93.37%

Of all reported accidents are either no injury or near miss



Main Accident/Incident Causes Q3 2024/25



5 RIDDOR 'specified' injury, and 10 over 7 days absence RIDDOR injuries.



Better Health at Work Award

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



27 psychological work-related incidents in Q3 2024/25. (25 in Q2 2024/25, 27 in Q1 2023/24)

7 fire related incidents



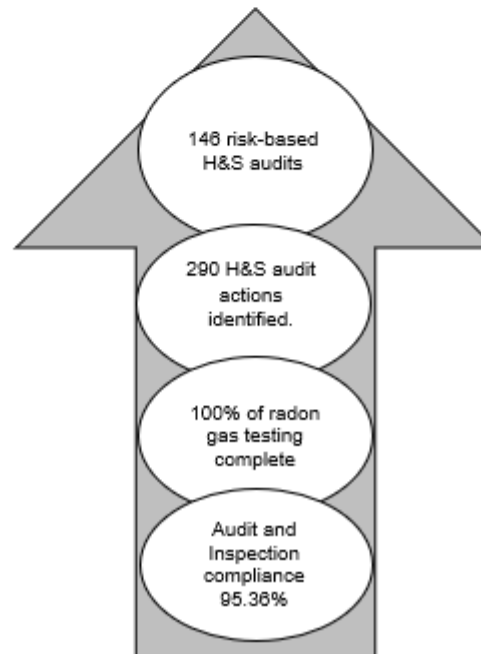
1 CDDFRS inspection of council premises



H&S/Fire Safety management audit action completions rates remained at 81% in Quarter 3 2024/25, an increase from 77% in Q2.

1

Enforcement related action from CDDFRS following inspections and audit activity.



Background

- 9 The Health, Safety and Wellbeing Strategic Group (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.

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. There were no joint inspections undertaken in quarter three.
- 11 A working group has been established to review the requirements of the Worker Protection (Amendment of Equality Act 2010) Act 2023. The law came into effect on 26 October 2024. H&S input has been provided regarding the approach to risk assessment across the council, as required by the act. Organisational and service based risk assessment templates have been developed along with guidance for completion. These will be distributed to strategic managers for completion by April 2025 to ensure the requirements of the act are met.

Audits and Inspections

- 12 There were a total of 146 audits and inspections undertaken by the H&S team during quarter three. The audit and inspection activity provided almost 300 opportunities for improving H&S performance.

Chart 1 – Audit and Inspection Activity for Quarter three.



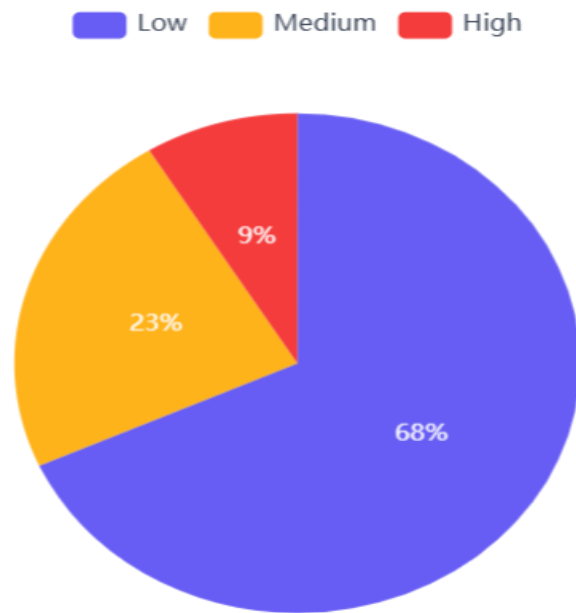
- 13 From the audits undertaken the following headline percentage compliance scores can be determined for each service area where audits took place:

Table 1 Compliance scores

Audit Area	INSPECTIONS	SCORE (%)
	Total	Average
Arbor Work	1	100%
Fire Safety Audit	26	96.88%
Waste Transfer Stations	1	96.83%
School Audit	45	96.80%
Refuse and Recycling	13	96.25%
AHS General Audit	8	93.35%
CYPS General Audit	9	93.27%
Clean & Green Activities Audit	5	88.86%
Civil Engineering and Construction Sites	18	86.39%
Fleet Workshops Audit	3	83.21%

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

Chart 2 Compliance Actions by Priority



Audit High Priority Action Areas

Site	High Priority Actions Allocated
Buildings Construction Sites	23
Schools	14
Leisure Centre	3
Refuse and Recycling East	2
Family Hubs	2

Table 2- Audit Actions completion statistics

Summary	Low		Medium		High		Totals			
	To Do	Done	To Do	Done	To Do	Done	To Do	Done	Overall	Overall %
AHS	3	16	7	4	0	2	10	22	32	69%
CYPS	10	23	9	13	1	5	20	41	61	67%
Maintained Schools	8	98	11	13	6	5	25	116	141	82%

NACC	5	40	0	16	0	3	5	59	64	92%
REG	8	8	2	24	1	26	11	58	69	84%
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>	34	185	29	70	8	41	71	296	367	81%

Fire Incidents

- 15 There were seven fire related incidents at Durham County Council owned premises or on vehicles during quarter three.

Maften Court Sedgfield

- 16 At approximately 14:00 hours on Tuesday 1 October 2024, the refuse crew were carrying out normal household waste bin collection duties in Maften Court. They observed smoke coming from the hopper of the vehicle and shortly afterwards flames appeared. There is large green area nearby, so the driver reversed the Refuse Collection Vehicle (RCV) onto the green area and ejected the load. At the time it was raining, and the ground was very wet, so once the load was ejected the flames went out. Due to the fire being extinguished, the crew did not summon the Fire service. Arrangements were then made to have the rubbish removed from the area the RCV vehicle was inspected and there was no damage to the vehicle, normal collection duties were resumed. The rubbish was examined to identify what caused the fire, but it was not possible to identify the cause, however on the balance of probability it was believed to be a discarded battery.

Bank Top Terrace Trimdon Village

- 17 At approximately 08:15 hours on Tuesday 22 October 2024 the refuse crew were collecting 240 litre recycling bins in the above location, when one of the crew observed smoke coming out of the hopper. He immediately informed the driver, who used the fire extinguisher from the vehicles cab and deployed it, which knocked down the fire. The driver contacted his team leader, who advised him to drive the vehicle to a nearby lay-by, the driver proceeded to the lay-by and tipped the load, the remainder of the contents of the fire extinguisher was used on the waste, as well as some water which extinguished the fire.

- 18 A short time later the team leader arrived on site and due to the fire being extinguished the fire service were not summoned. The team leader ensured that the crew were okay, and the vehicle was safe to use. The crew carried on with their normal duties, without any further incident. The waste pile was monitored until it was removed a few hours later and taken to Thornley waste transfer station. The cause of the fire was believed to be a discarded battery.

Village Green Gainford

- 19 At approximately 08:56 hours on Friday 21 November 2024 the refuse crew were collecting recycling materials in Gainford main street when they observed a fire in the hopper. The driver contacted his team leader who contacted the fire service. Whilst awaiting the fire service, the driver of the vehicle deposited the hot load onto the village green. The fire service arrived a short time later and extinguished the fire. The crew carried on with their normal duties for the rest of the day.
- 20 Arrangements were made to have the recycling material removed approximately five tonnes, this was removed within an hour and taken to Stainton Grove waste transfer station. Although it was not possible to identify the cause of the fire it is strongly believed to be due to a discarded battery.

Durham Light Infantry Museum Construction Site

- 21 The works to the museum are being carried out by Willmott Dixon who are the principal contractor for the works. Hewitson limited have been contracted by Willmott Dixon to carry out the civil works on the project. On Monday 9 December 2024 at approximately 12:50 hours two site operatives were tasked with pumping out water from the lift shaft to allow for waterproofing works to take place within the shaft. To dry out the area it was decided that a propane gas torch would be used. A hot works permit was issued by the principal contractor for the task and the operatives also had a foam and dry powder fire extinguisher to hand. One of the site operatives started using the torch to dry off sheet metal piles when they observed that flames were present around the valve attached to the cylinder. The operative attempted to turn off the valve but was prevented from doing so by the fire. The other site operative used the foam extinguisher to try and put the fire out but was unsuccessful. The fire alarm was raised by a nearby site operative, and one of the Hewitson operatives got into the excavator and placed the bucket over the gas bottle to give some protection if the propane bottle did explode.

- 22 The site gateman rang the fire service and informed them that a propane cylinder was on fire, a full site evacuation took place, and all site operatives were accounted for. They arrived approximately five minutes later who extinguished the fire. The officer in charge confirmed that the fire was due to a faulty regulator attached to the cylinder.
- 23 A subsequent investigation by Hewitsons H&S manager identified that the root cause of the incident was leaking gas valve regulator fitted to the cylinder and that it was positioned too close to the torch. It was also identified that the wrong type of fire extinguisher was used to try and extinguish the fire. The use of a dry powder extinguisher would have been the correct type to use.

Copeland Barns Residential Children's Home

- 24 It was reported that at approximately 22:00 hours on Friday 15 November 2024 the young person (YP) who resides there returned to the home and had in his possession a lighter, after repeated requests by staff to hand it over he refused and went to his bedroom. A short time later staff could smell smoke and upon entering the bedroom, staff observed the YP burning sheets of paper in the plastic bin. The police were called to assist the staff to obtain the lighter, however before they arrived the YP had smashed the lighter and were cancelled. The YP was warned about his behaviours, and a referral was made to community fire safety team to arrange a visit to the home.
- 25 A further incident took place on Thursday 12 December 2024 at 22:55 hours whereby the YP stated to staff that he intended to burn the house down, with two lighter he had brought into the house. Staff tried to get the lighters from the YP but had placed them down their tracksuit bottoms. Staff followed the YP around the house to ensure they didn't set a fire. They then ran upstairs into their bedroom and locked the door. Shortly afterwards staff opened the door and discovered that they had set fire to a birthday card. Staff phoned 999 for the fire service and police as the YP was still making threats to burn the house down. Staff managed to stamp it out the card that had been set alight. The YP was arrested at 23.30 for arson and assault of a police officer.
- 26 The YP has subsequently been charged with arson and is due to appear in court next month. Arrangements are in place to have to YP moved to secure accommodation and the premises fire risk assessment has also been updated to include the arson risk presented by the YP and a lighter action plan has been introduced, as well as the removal of most of the fuel sources from the YP's bedroom.

Stanley Education Centre

- 27 It was reported that at approximately 06:30 hours on Friday 13 December 2024 the cleaner on site reported via telephone to the premises assistant/caretaker that she could smell smoke. The premises assistant arrived six minutes later and called the fire service, as it was identified that a zip water boiler within the west corridor had developed an electrical fault, the resulting smoke produced was significant enough to activate the premises fire warning and detection system. The fire service arrived on site within five minutes and isolated the water heater from the electrical supply. Once they were satisfied that there was no risk of fire they left site.
- 28 An in-house electrician attended site and removed the water boiler from the site. There were no reported injuries, and the site was opened for normal working activities the same morning.

Significant Incidents, Enforcement Activity and Interventions

- 29 There was one CDDFRS inspection of council premises during quarter three. This was at Freemans Quay Leisure Centre. The outcome of the inspection was that it was considered by the inspecting officer that there were major deficiencies of fire safety legislation. The items highlighted were that the fire risk assessment had not been completed by a competent person and that the issues regarding breaches of fire stopping had not been identified in the risk assessment, the pool plant room had some breaches of fire stopping, there were sources of ignition within a protected corridor and that two fire doors in the pool plant room required self – closing devices fitting. And a more suitable Personal Emergency Evacuation Plan (PEEPS) system was required for persons with disabilities using the centre.
- 30 The senior fire safety advisor has revisited the premises and rewritten the premises fire safety risk assessment to address the points raised from the inspection. In addition, the senior fire safety advisor has challenged some of the deficiencies identified within the letter and raised this with the fire safety manager at CDDFRS. The premises are due to be revisited by the inspecting officer on or after the 3 February 2025 to check that the requirements of the actions required have been carried out.

Durham Bus Station

- 31 Progress has been made in quarter three regarding solutions for further works to be undertaken in quarter four following concerns being raised via an independent inspection of the external cladding structure in July 2024. These solutions which involve replacement of small vertical

sections of stone to all external elevations of the cladding system have been agreed and with input from various stakeholders including designers, structural engineers, installers, and the council's construction consultancy service. It is envisaged that the works will be undertaken in February 2025.

- 32 Until the works have been completed and in the continued interest of public safety, the current controls measures will remain in place which include pedestrian diversion, protective scaffold and segregation of footpaths. When the works have been successfully completed all temporary protective measures will be removed.

Stanhope Bridge Scaffold Collapse

- 33 On 17 October 2024, a scaffold collapsed at Stanhope wear bridge. The scaffold was erected by an external contractor working for the council. Fortunately, there were no operatives working on the scaffold at the time of the collapse. The work to the bridge was required following a series of vehicle strikes to the parapet of the bridge. The first incident occurred in August 2023, but there were subsequent strikes in October 2023 and January 2024 which increased the scope of works and length of parapet that needed to be repaired.

- 34 The immediate cause of the collapse was due to high levels of rainfall and subsequent river levels rising and fast flowing water where the untied scaffold was partially situated. A recovery operation was put in place to recover the scaffold from the river using lifting cranes. A full investigation was undertaken by the H&S team in conjunction with the councils highways service and external contractors involved to identify the immediate, root and underlying causes. Numerous lessons learned have been identified relating to risk assessments and method statements, temporary works, construction design and management regulations, design risk assessments and work at height. Contractor management and performance monitoring was also identified as an area requiring improvement.

- 35 The incident was reported in accordance with RIDDOR reporting requirements as a dangerous occurrence to the Health and Safety Executive. Further works to the bridge have now been deferred to spring 2025 as a result of ecological issues on the bridge. A full investigation report has been completed and provided to highways services operational strategic management for action.

Employee Health and Wellbeing

- 36 The employee better health at work group, chaired by Interim 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.

- 37 There was again a wide range of activities and promotions of health and wellbeing related topics during the quarter. During the months of October, November and December there were a range of awareness activities and promotions.
- 38 Promotion and awareness of world mental health day on 10 October was undertaken and included various activities across council sites. There was also extensive coverage of national white ribbon day which included 16 days of action across various council sites to raise awareness of domestic abuse.
- 39 The Flu vaccination programme commenced during quarter three with flu jab clinics set up across various workplaces for prioritised staff to attend. These clinics also included stop smoking and blood pressure checks. World menopause day was also promoted along with men's health events and drop-in sessions and information stands at strategic sites.

Open Water Safety

- 40 The City Safety Group met during the quarter and continued to review the city centre related open water safety related risks amongst other key city centre issues. There were no significant incidents reported and reviewed during quarter three.
- 41 The city centre river corridor continues to undergo monthly public rights of way inspections and also weekly inspections of public rescue equipment provided.
- 42 The County wide open water safety group also convened during quarter three. The group reviewed incident data and concluded that there were no incidents of significance requiring investigation during quarter three. A process of continuous review of priority risk assessments at higher risk locations across the county is ongoing. Winter related proactive awareness campaigns and initiatives are being planned via the group.
- 43 Work is progressing in relation to coastal risk assessments with initial discussions being held with the Royal National Lifeboat Institution (RNLI) regional safety team who have historically been responsible for assessments of the coastline areas. Discussions have taken place following confirmation that RNLI are not routinely undertaking these inspections anymore and to establish a revised process taking into

account significant changes since the previous assessments were undertaken.

- 44 Further work was undertaken in December 2024 to review the landowner licence to occupy process following an independent review of Durham safety advisory group in relation to events. Strategic Property and Land officers have identified several improvements opportunities for external event organisers in relation to signposting key event safety related information and also the extent of assurance checks required for Council land prior to a license to occupy being granted. Further work will continue in quarter four in relation to improvements.

Radon Gas Management

- 45 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.
- 46 The total number of buildings in scope requiring radon gas assurance testing was 650. Radon monitors were installed in all of the buildings in scope at the end of quarter three all of the monitors have now been collected from sites and results are now awaited for only 14 monitors via UKHSA.
- 47 It remains that from the 985 of results returned, 99.2% are all under the radon gas thresholds. For all buildings not above the thresholds, these will revert to a further radon monitoring test within the next ten years.

Violence and Aggression – Potentially Violent Persons Register (PVPR)

The total number of live entries at the end of Q3 was 154.				The total number of additions at the end of Q3 was 29.			
Live Entries	22-23	23-24	24-25	Additions	22-23	23-24	24-25
Q1	85	137	178	Q1	22	41	36
Q2	89	173	157	Q2	21	50	25
Q3	100	199	154	Q3	35	50	29
Q4	113	191		Q4	38	23	

Total	116	164	
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The total number of **extensions** at the end of Q3 was 21.

Extensions	22-23	23-24	24-25
Q1		10	21
Q2		21	16
Q3	9	18	21
Q4	8	7	
Total	17	56	

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

The total number of **removals** at the end of Q3 was 36.

Removals	22-23	23-24	24-25
Q1	12	17	41
Q2	17	17	50
Q3	24	19	36
Q4	29	40	
Total	82	93	

The total number of **warning letters** sent at the end of Q3 was 17.

Warning Letters	22-23	23-24	24-25
Q1	12	10	9
Q2	4	13	11
Q3	11	18	17
Q4	10	12	
Total	37	53	

The total number of **appeals** at the end of Q3 was 2.

Appeals	22-23	23-24	24-25
Q1	1	0	2
Q2	0	2	4
Q3	3	2	2
Q4	1	0	
Total	5	4	

The appeals during Q3 were all rejected.

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

Service	People Viewed	How many times
NACC	40	220
REG	106	984
Resources	132	2972
CYPS	72	224
AHS	84	306
Corporate Affairs	0	0
Unions	0	0
Members	3	10

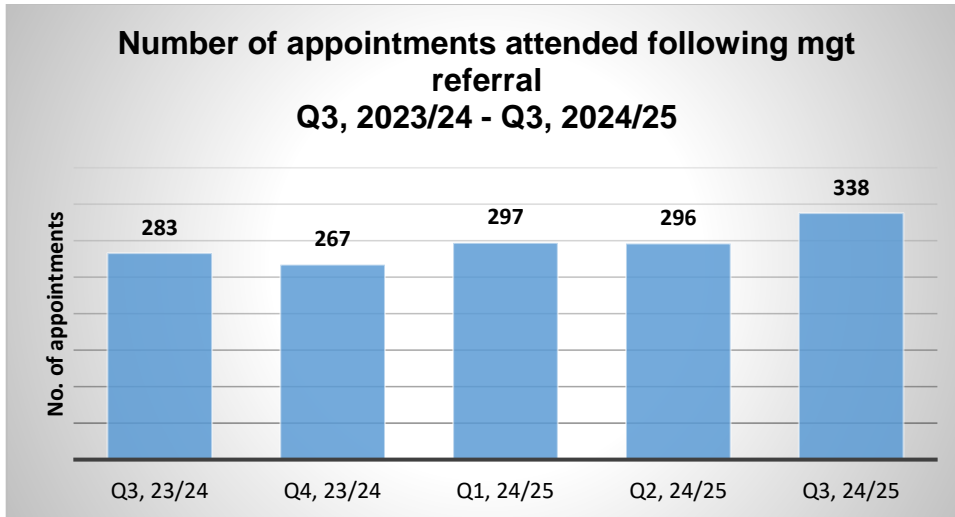
Occupational Health Service (OHS)

- 48 The OHS have reaccredited with Safe Effective Quality Occupational Health Service (SEQOHS) following a five yearly submission of evidence and an assessment visit. Some of the comments made by the assessors in the final report included reference to a high standard of service delivery, knowledge, leadership and a committed team with excellent clinical governance.
- 49 An Occupational Health physiotherapist has been recruited to join the Occupational Health clinical team to enhance the provision available to support musculoskeletal health in the workplace.
- 50 Dr Wynn, Senior Occupational physician retired at the end of the year and a recruitment of an Occupational Health Physician has been completed and Dr Mark Leeming was appointed to start in post on 1 December 2024.

Management Referrals

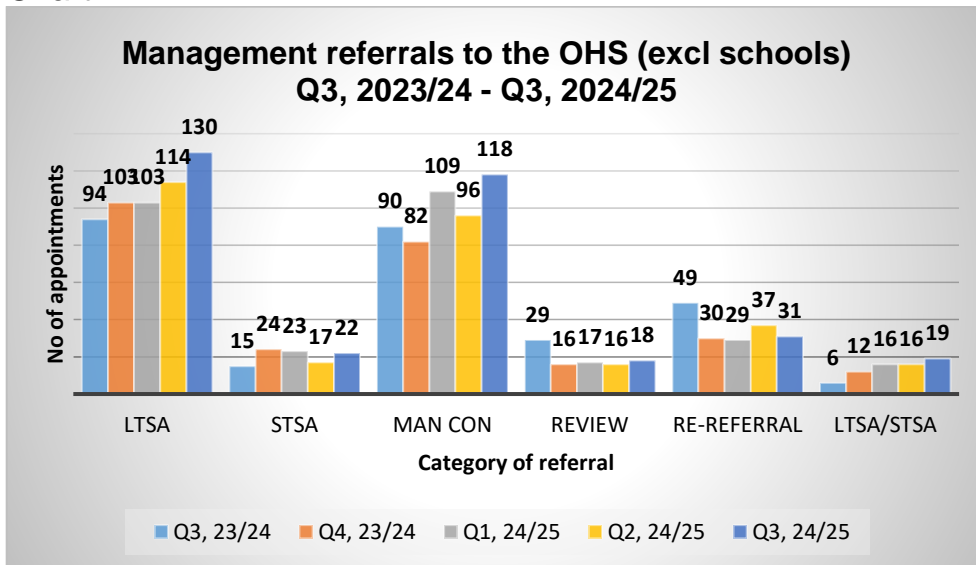
- 51 During Quarter three, 338 employees participated in clinical consultations with the OHS, following management referral in relation to Long Term Sickness Absence (LTSA), Short Term Sickness Absence (STSA), Management Concerns (Man Con) Reviews, and Re referral appointments, Long Term Sickness Absence/Short Term Sickness Absence (LTSA/STSA) and Covid.

Chart 1



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

Chart 2



Management Referrals - Non Attendance

53 During quarter three, 51 employees did not attend their allocated appointment following management referral. This represents a 13% non-attendance rate and equates to 10.2 days of clinic time. See Charts 3 & Table 1.

Chart 3

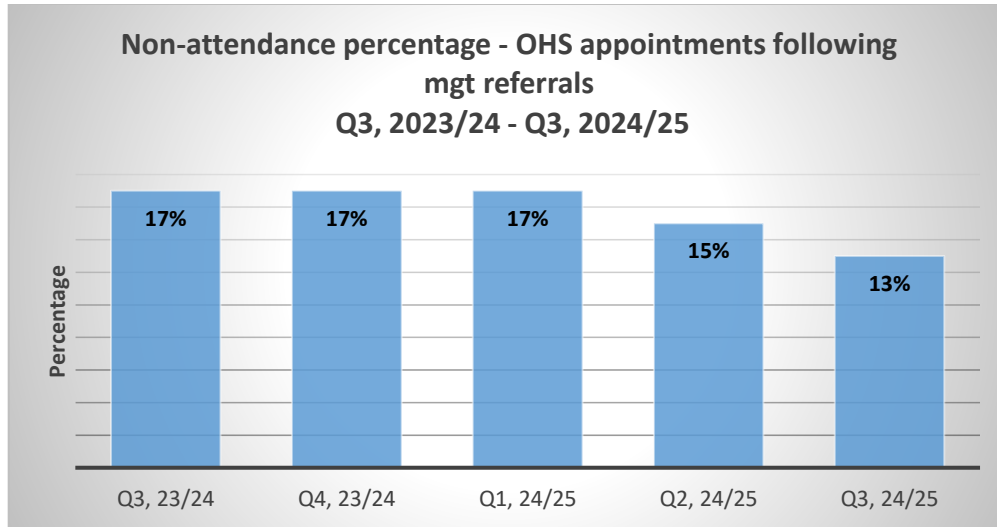


Table 1

Non-attendance - OHS appointments following mgt referral by Service	AHS	CYPS	NCC	REG	Res	Q3	Q2	Q1	Q4	Q3
						24/25	24/25	24/25	23/24	23/24
Q3, 2024/25						Total	Total	Total	Total	Total
Number failed to attend	4	18	8	12	9	51 (13%)	53 (15%)	59	54	47
Days Clinic time lost	0.8	3.6	1.6	2.4	1.8	10.2	10.8	11.8	10.8	9.4
Of which										
Doctor	0	3	2	4	3	12	14	-	-	-
Nurse	4	15	6	8	6	39	39	-	-	-

Management Referrals – Employee Attribution

54 During Quarter three, 130 employees were seen for LTSA of which 25% (n=32) stated to the OHS that they consider the underlying cause to be due to work related factors. Of the employees, 84% (n=27) identified

this was due to 'psychological' reasons, 13% (n=4) identified as 'musculoskeletal' and 3% (n=1) identified as other. See Charts 4 & 5

Chart 4

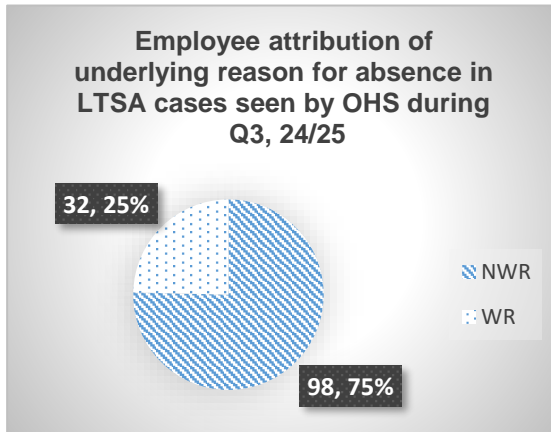
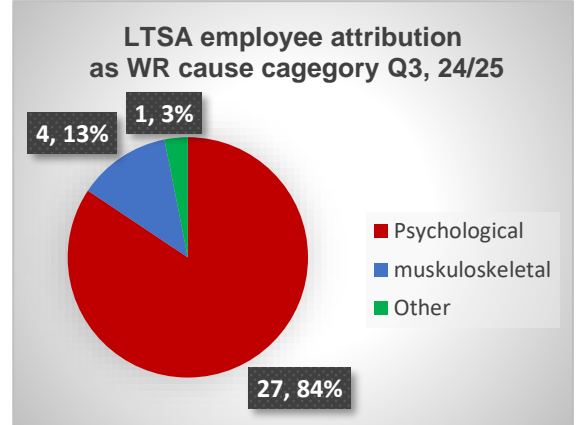
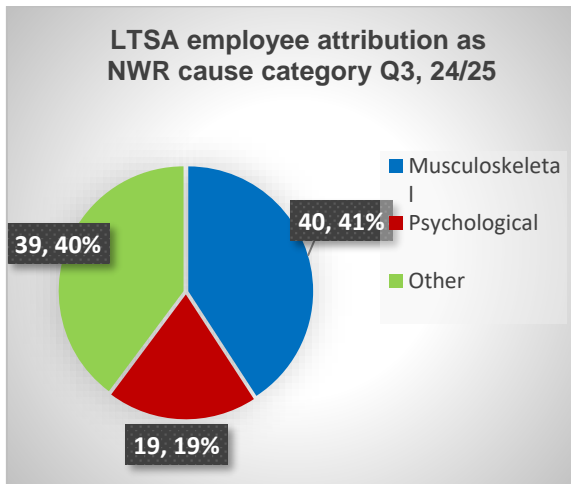


Chart 5



- 55 Chart 6 shows the cause of absence categories for non-work related LTSA seen in the OHS, 19% (n=19) were due to psychological reasons; 41% (n=40) were due to musculoskeletal problems and 40% (n=39) were due to other reasons.

Chart 6



- 56 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.
- 57 During quarter three, 118 employees were seen as a management concern, 15% (n=18) 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 72% (n=13) of the work related and 22%

(n=22) 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 26% of non-work related and 6% 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)

- 58 Further analysis of the data relating to management concern referrals identified that 18% of the LTSA referrals received in quarter three were seen in the previous 12 months as a management concern referral.

Chart 7

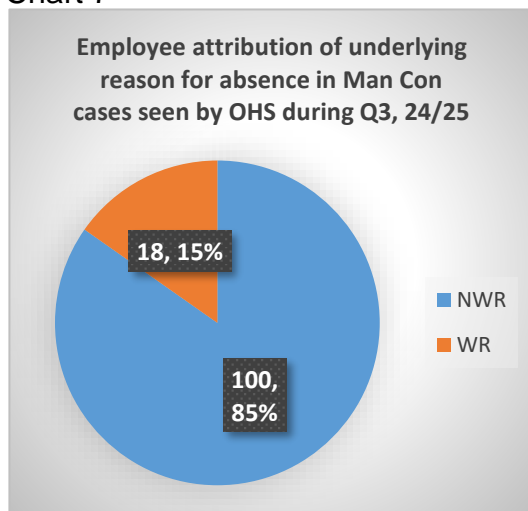


Chart 8

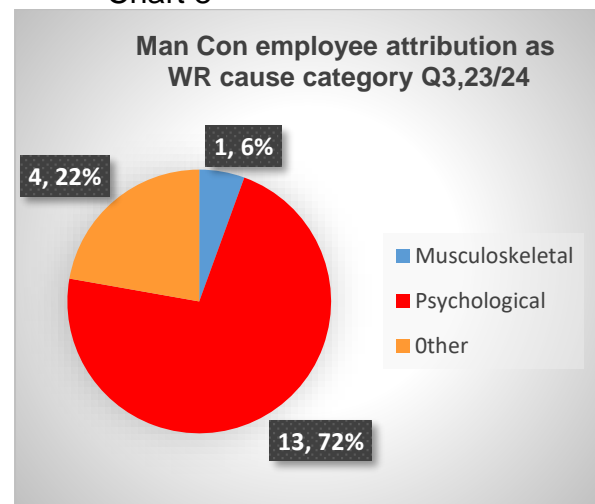
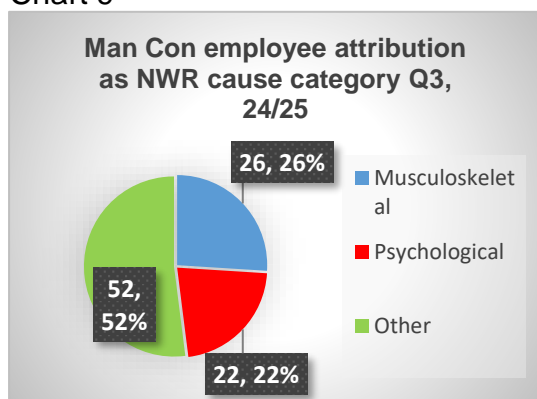


Chart 9



Support Services

- 59 During Quarter three, the OHS provided the following additional support services. See Table 2.

Table 1

Additional Support services accessed via the OHS	AHS	CYPS	NCC	REG	Res	CE	Service not detailed	Q3	Q2	Q1	Q4	Q3
								24/25	24/25	24/25	23/24	23/24
								Total	Total	Total	Total	Total
Number of routine physiotherapy referrals	11	16	11	15	14	1	-		48	67	70	48
Number of routine physiotherapy sessions	22	50	44	41	26	3	-		188	232	159	123
Number of 'face to face' counselling referrals	0	1	0	1	0	0	-		4	5	8	7
Number of 'face to face' counselling sessions	0	7	0	6	0	0	-		14	29	19	7
Total number of calls to the EAP									124	112	115	104
Telephone EAP structured counselling cases									0	0	0	2
Telephone EAP structured counselling sessions									0	0	0	27
Employees referred to online counselling									17	12	10	3
Online Counselling Sessions									81	74	38	7
Employees referred to online CBT									0	0	2	4
Online CBT sessions									0	3	3	4

Physiotherapy

60 Routine physiotherapy clinics operate four days per week in the OHS at Annand House, the clinics are a combination of telephone assessments

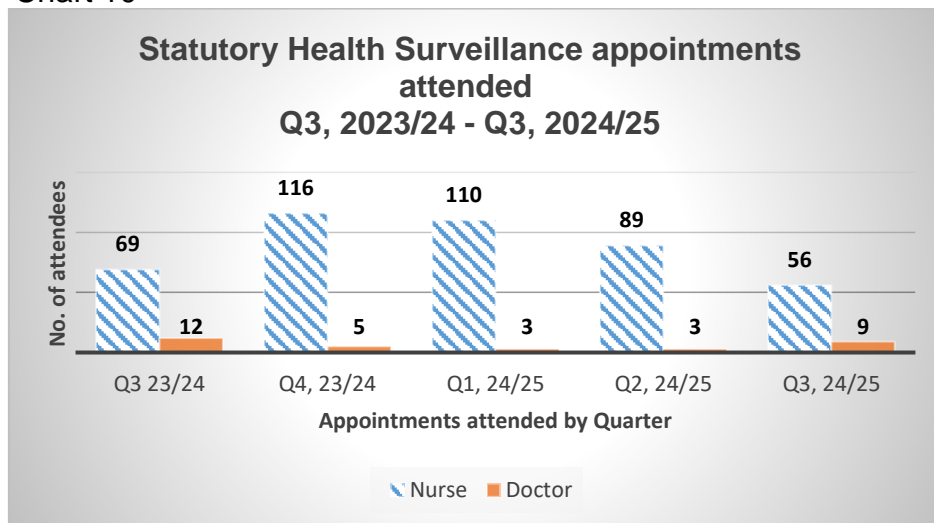
and face to face physiotherapy appointments, should following the physiotherapy initial assessment by telephone the physiotherapist deem this to be clinically required. Employees can self-refer or be referred by their manager.

- 61 At the time of preparing this report (15/01/2024) there were two working days for an initial assessment.

Health Surveillance

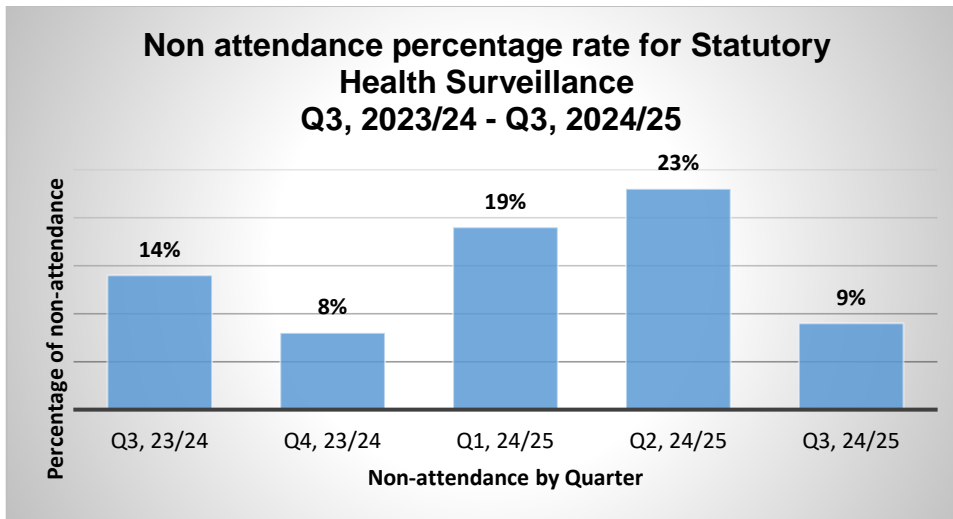
- 62 The OHS continues to provide statutory health surveillance programmes to employees in line with Health and Safety Executive guidelines. Some health surveillance clinics are carried out on site to minimise the effect on service delivery.
- 63 During Quarter three, a total of 65 employees attended OHS appointments for routine statutory health surveillance, 56 with an Occupational Health Nurse and 9 with an Occupational Health Doctor

Chart 10



- 64 During Quarter three, nine per cent (n=six) employees failed to attend their appointment with the OHS in relation to statutory health surveillance. This equates to one day of clinic time lost. See Chart 11.

Chart 11



Immunisation/Inoculation Injuries

65 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 11 vaccines. There were no inoculation incidents were reported to the OHS.

Occupational Health Activity Data					
DCC related activity (note this data does not include Local Authority Maintained Schools).	Q3	Q2	Q1	Q4	Q3
	2024/25	2024/25	2024/25	2023/24	2023/24
Appointment category	Total	Total	Total	Total	Total
Pre-Employment/Pre-Placement assessments	357	382	391	367	533
Of which attended an appointment	77	45	41	172	117
Management referrals seen – Long Term Sickness	130	114	103	103	94
Management referrals seen – Short Term Sickness	22	17	23	24	15
Management Referrals seen -Long/Short Term Sickness	19	16	16	12	6
New Management Concern referrals seen	118	96	109	82	90
<i>Review appointments seen</i>	18	16	17	16	29
Re-referrals seen	31	37	29	49	49
Statutory Health Surveillance Assessments Attended (Nurse)	56	89	10	116	69
Music Service audiometry attended	1	0	0	1	0
School Crossing Patroller Routine Medicals	14	4	6	11	11
Driver Medicals (DVLA Group 2) e.g. HGV	21	21	20	41	32
Night Worker assessments (Working Time Regs 1998)	0	0	0	0	0
Immunisations against occupationally related infections	11	12	12	13	2

'Flu' Immunisations		0	0	1	261
Inoculation injury OHS Assessments – where injury has been reported to the OHS	0	0	1	0	1
HAVS Postal Questionnaires sent	26	42	30	13	95
HAVS Postal Questionnaires returned percentage rate	100%	100%	93%	100%	27%
Did Not Attend (DNA) for statutory health surveillance appointment	6	27	27	11	13
Music Service DNA	0	0	0	0	1
DNA – Management Referral appointments with the OHS (excluding health surveillance)	51	53	59	54	47

Corporate risks that may have an impact on Health and Safety

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

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.

Statistical Information

67 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.

Conclusions

68 Accident statistics in general for quarter three showed an increase from the first two quarters of 2025. It was positive that there remained a high

prevalence of no injury and minor injury incidents which is positive. Following an increase in specified RIDDOR reportable incidents in quarter two there was a reduction in quarter three.

- 69 In terms of fire related incidents, the trend continues in terms of causes relating to discarded batteries. Another three incidents occurred involving batteries catching fire in amongst waste in the rear of refuse and recycling vehicles. It is positive that the emergency fire procedures are continuing to be effective in keeping employees and the public safe when incidents occur.
- 70 It was disappointing that CDDFRS intervention was required in relation to Freemans Quay leisure where a major deficiencies letter was issued in relation to a number of fire safety issues. Whilst some issues raised have been resolved promptly there remains some challenge regarding findings and it is important that this is undertaken where the council has a differing interpretation of fire safety legislation and how it is applied.
- 71 The radon gas management programme has been completed on schedule with a small number of test results to be returned from UKHSA. As a result of this intensive work to undertake testing the councils buildings will revert to a further review period of within 10 years and only one site will be subject to annual testing from the 650 buildings tested.
- 72 There are numerous lessons learned following an investigation into the scaffold collapse at Stanhope bridge in quarter three. It is important these investigation recommendations are acted upon to ensure that future projects of this nature are planned, managed and monitored appropriately to ensure site safety standards are compliant. Further auditing of similar schemes will continue to be undertaken to ensure compliance is being achieved.
- 73 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 146 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.
- 74 It is positive that for the third quarter in succession, audit action completion statistics have now reached 81%. However there still remains opportunity for improvement, particularly within AHS and CYPS.

Other useful documents

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