## Quarterly Health & Safety Performance Report 1<sup>st</sup> April – 30<sup>th</sup> June 2013

EXECUTIVE MEMBER:	Councillor Peter Kane Portfolio Holder for Environment
LEAD OFFICER:	Pat Graham - Corporate Director People & Places
<b>REPORT AUTHOR:</b>	Jackie O'Reilly, Environmental Health Manager

#### WHAT BENEFITS WILL THESE PROPOSALS BRING TO COPELAND RESIDENTS?

All Council activities have the potential to impact on Copeland Residents therefore it is important that activities are managed so they are carried out in a safe manner.

#### WHY HAS THIS REPORT COME TO THE EXECUTIVE?

The Executive have asked to be kept informed of the management of health and safety for all Copeland Borough Council employees and the impact the activities of the Council have on residents and visitors to the Borough.

#### **RECOMMENDATIONS:**

a) The Executive note report and the actions of the health and safety advisor post as an essential part of ensuring that Copeland as an employer complies with all relevant health and safety legislation.

#### **1.0 INTRODUCTION AND QUARTER 1 REPORTS**

- 1.1 This is the first quarterly report on the health and safety activities of the organisation and includes the planned actions for 2013 2014.
- 1.2 The planned actions for 2013 2014 are summarised in Appendix 1. The plan covers the areas for successful health and safety management of policy, organising, planning, measuring performance and auditing and reviewing performance of identified risks.
- 1.3 Of particular note for this report the corporate safety role was subject to a review by internal audit in the first quarter of the year.

The scope of the audit included:

- A review of the organisation's health and safety policy, policy statement, procedures and action plans;
- General and specific health and safety responsibilities;
- Health and safety risk identification and minimisation procedures;
- General, specific and specialist health and safety training;
- Reporting of accidents, incidents and near misses;
- Corporate reporting to senior management/Members;
- Health and safety compliance and monitoring; and
- Data security and Data protection.

The audit concluded that there was reasonable assurance - procedures are in place, but may need updating, but the impact overall is not significant.

The report made 7 recommendations – 5 grade 2's (recommendation which should be addressed in order to establish a satisfactory level of internal control) and 2 grade 3's (minor recommendation made to improve the system under review)

Appendix 2 details the agreed action plan in response to the recommendations.

# 1.4 HEALTH AND SAFETY PERFORMANCE REPORT

Health and Safety activities are reported under key activity headings of policy, communication and consultation, information and training, monitoring and reviewing performance which includes accident reports.

# 1.4.1 Policy Activities

# 1.4.1.1 Review of existing policies and systems (rolling programme)

# Display Screen Equipment (DSE)

The existing policy was reviewed and the self-assessment checklist and record amended to include improved guidance for DSE users to make simple self-adjustments.

# Fire Safety Arrangements

Existing arrangements reviewed following the fire risk assessments and fire warden duties amended to include fire alarm checks for Moresby and the Crematorium. Progress on the work arising from the Fire Risk assessments reported in the previous Q4 H&S report can be summarised as:-

- Additional fire information and exit signage additional exit signage in place, where other structural alterations are pending signage is in temporary format.
- Petrol containers and fire document boxes all petrol containers are now contained in fire proof boxes
- Fire detection alarm system upgrades the procurement of and planning for additional fire detection works were completed in quarter 1 with installation scheduled for quarter 2
- Emergency lighting improvements the procurement of and planning for additional emergency lighting improvements were completed in quarter 1 with installation scheduled for quarter 2
- Training fire safety training for fire wardens completed

## Accident and incidents

Existing policy reviewed and internal reporting and recording arrangements changed to use Covalent as a central reporting system. For Q.1 corporate safety trialled the use of covalent inputting reports and will continue this for Q.2 and Q.3 – during this period service managers will be briefed and provided with training notes for the future direct input of accidents and incidents.

Covalent provides an improved method of central recording of accidents and incidents with information easily extracted for quarterly reports. Details of incidents and accidents in Q.1 are reported in 1.4.4.2.

# 1.4.1.2 New Policy and systems (if required)

The draft lone worker and safety in interviews procedure which had not been completed has been completed and includes a pocket summary guide. The new guidance and pocket summary guide has been provided housing options and customer services for comments. The final guide will be completed in Q.2.

# 1.4.2 Communication and Consultation

Regular communications with staff will take place by a variety of methods including team brief and attending, by invitation, service team meetings.

In quarter 1 the following health and safety communications were provided:

Presentation to Leadership and Management Group

- Team Brief items
- Invites send requesting representatives for an employee consultation group

## 1.4.3 Training and Information

Service specific and information to individuals was provided for the following areas:

- Display screen assessments
- Accident and incident reporting
- Risk assessments
- Event safety
- Health Surveillance
- Fire Safety

## 1.4.4 Monitoring and reviewing Performance

## 1.4.4.1 Work place audits and inspections

Workplace transport arrangements at Moresby inspected identifying that segregation routes required repainting to define clearly vehicle and pedestrian routes in the area. The identified work will be completed by Q.3.

# 1.4.4.2 Accident/Incident Reports for 1<sup>st</sup> April – 30<sup>th</sup> June 2013

There were no reportable incidents to employees or members of the public under Reporting of Injuries, Disease and Dangerous Occurrences Regulations (RIDDOR). Equally there were no RIDDOR reportable incidents in relation to North Country Leisure's operation, regulated by our Environmental Health team.

There were 6 incidents which were not reportable under RIDDOR which were recorded and investigated

Reference ID	Title	Description	Team Description	Date incident/accident occurred
INC2054	Manual Handling	Trapper fingers - cut and swollen	Parks	17-Apr-2013
INC2055	Manual Handling	Bruising/swelling to foot from attempting to move a grass cutting machine	Parks	19-Apr-2013
INC2056	Manual Handling	Back pain while moving boxes	Customer Services	24-Apr-2013
INC2057	Manual Handling	hurt lower back	Waste Services	08-May-2013

Reference ID	Title	Description	Team Description	Date incident/accident occurred
		moving bin		
INC2059	Striking Object	Punctured left shin with nail	Parks	22-May-2013
INC2060	Member public - non work related illness	Member of public attended Copeland Centre for interview however suffered seizure before the interview - ambulance called/person taken to WCH		23-May-2013

(note: RIDDOR requires the following types of incidents and accidents to be reported:

- Deaths
- Major injuries list of injuries includes fractures (other than to fingers, thumbs and toes), amputation; injury requiring resuscitation or admittance to hospital for more than 24 hours
- Over-seven-day injuries
- Occupational diseases
- Dangerous Occurrences list of occurrences includes collapse, overturning or failure of loadbearing parts of lifts and lifting equipment; collapse or partial collapse of a scaffold over five metres high, or erected near water where there could be a risk of drowning after a fall)

## 2. PROPOSALS

- 2.1 Actions to manage health and safety for the many areas of works undertaken by Copeland will continue as part of a robust management and governance system and will be reported to Executive quarterly.
- 2.2 Quarterly monitoring reports will continue to be submitted to Executive
- 2.3 Quarter 1 monitoring reports will include a plan of proposed key actions
- 2.4 Quarter 4 monitoring will include a summary of completed key actions and in line with HSE best practice guidelines will also include an annual report detailing management systems, policy, organisation, planning and implementing, monitor and measuring performance and audit and review with statistical information.

## 3. ALTERNATIVE OPTIONS TO BE CONSIDERED

3.1 There are no alternative options

## 4. CONCLUSIONS

- 4.1 **Statutory Legislation** We currently, and will continue to, comply with the Health & Safety at Work etc Act 1974, and the many associated Regulations.
- 4.2 Corporate Safety and investigative work is an on-going process of management of health and safety

## 5. STATUTORY OFFICER COMMENTS

- 5.1 The Monitoring Officer's comments are: Report sets out quarterly progress on health and safety as requested by Executive.
- 5.2 The Section 151 Officer's comments are: No further comment

## 5.3 EIA Comments

Health and safety fully supports EIA principles. One of the main aims of health and safety is to provide a safe working environment for all staff, and to ensure that others are not put at risk by our activities. The Health and safety Advisor role plays an essential role in identifying workplace and other adaptations that may be needed to support people to start, remain, or return to work.

- 5.4 Policy Framework Comment: The Health and Safety policies are part of our corporate policy framework.
- 5.4 Other consultee comments, if any:

No other comments

# 6. HOW WILL THE PROPOSALS BE PROJECT MANAGED AND HOW ARE THE RISKS GOING TO BE MANAGED?

6.1 This is not a project report, health and safety is an on-going process of health and safety management and this report provides a summary of activities during 1<sup>st</sup> April to 30<sup>th</sup> June 2013

#### 7. WHAT MEASURABLE OUTCOMES OR OUTPUTS WILL ARISE FROM THIS REPORT?

7.1 The report is a report of the continual work to review and where possible improve health and safety performance across the organisation.

## List of Appendices

Appendix 1 - Corporate Safety Action Plan – 2013 – 2014

Appendix 2 - Internal Audit – Action plan

# List of Background Documents:

- Shared Internal Audit Service Report for Copeland Borough Council on Health and Safety 2013/14
- Health and Safety Executive Successful Health and Safety Management (HSG 65)
- Health and Safety Executive Report 506 Defining Best Practice in corporate occupational health and safety governance

COPELAND BOROUGH COUNCIL - CORPORATE SAFETY 2013 - 2014 ACTION PLAN

Work Area	Quarter 1			Quarter 2			Quarter 3			Quarter 4		
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
POLICY												
Review existing (annual rolling programme)	<ul> <li>– self arran</li> <li>2. Accid interr arran</li> </ul>	ay Screen E assessmen gements ent and inc nal reportin gements afety – fire ges	idents – g	<ol> <li>Display Screen Equipment</li> <li>Manual Handling</li> <li>Personal protective equipment</li> </ol>			<ol> <li>Working at height</li> <li>Workplace transport</li> <li>Noise at Work</li> </ol>			<ol> <li>Contractors</li> <li>Asbestos</li> </ol>		
New Policy – if required		remote wo	orking	As require	ed		As requi	As required		As required		
COMMUNICATION AND CONSULTATION	Team Bri	ef		Team Brief Employee/union consultation Intranet improvements Share point improvements			Team Brief Employee/union consultation Managers Group briefing Intranet and SharePoint		Team Brief Articles Employee/union consultation Intranet and SharePoint			
TRAINING AND INFORMATION	Fire Safet	ty		Accident and incident reporting (using Covalent)		Accident and incident H/S awareness for Service		First Aid H/S awar Mangers Risk Asse	eness for Se ssment	ervice		
MONITORING AND REVIEWING PERFORMANCE												
Workplace inspections and systems audits	Workplac Fire Safet	ce transpor ty	t	Open spaces – beck work Workplace Transport		vork Bereavement services		es	Property Services			
Accident and Incident Investigations OTHER				Investigation of reported ac			ccidents a	cross all qu	arters			
Event safety	Whiteba	ven Festiva		Lakes Aliv	(a avents		As requir	ed - no kn	own	Festival p	lanning sur	port
	vviitellav	VEII FESLIVA	1	Lakes Ally	e events		As required – no known events			Festival planning support		





REPORT REF	RECOMMENDATION	GRADE	PERSON RESPONSIBLE	AGREED/INTENDED ACTION (to be completed by client)	IMPLEMENTATION DATE (to be completed by client
R1	The Health and Safety Manual, Policy and all associated Procedures/Documents should be reviewed and updated in a timely manner	2	S Graham Health and Safety Advisor Supported by	Agreed with the following intended actions: Out of date policies and associated documents to be	06/09/13
			policy and performance for corporate document and version control.	removed from the intranet. All policies and associated documents to be reviewed and amended as required.	31/01/14
			Supported by IT and communications	Replaced documents to be replaced with current versions.	31/01/14
			for intranet changes.	Document and version control system to be implemented – in line with corporate document control.	31/01/14
R2	Current versions of The Health and Safety Manual, Policy and all associated Procedures/Documents should be made	2	S Graham Health and Safety Advisor	Agreed with the following intended actions:	06/09/13
	readily available to all employees.		Supported by IT and communications.	Health and Safety policy to be published on the intranet and website.	06/09/13





			·		APPEND
R3	Ensure all noticeboard information is up to date and consistent including the Health and Safety at Work Law Poster.	2	S Graham Health and Safety Advisor	Agreed with the following intended actions: Designated notice boards in by the main entrances to Copeland Centre and Moresby Parks will contain the Health and Safety at Work poster and fire safety arrangements and first aid arrangements.	04/10/13
R4	Health and Safety documents should be held in only one location on the intranet, with other pages linking to this main reference page.	2	S Graham Health and Safety Advisor Supported by IT and communications for intranet changes.	Agreed with the following intended actions: Create one health and safety page accessible from a link on the front opening page. Transfer existing relevant H/S documents to the single page.	04/10/13 01/11/13
R5	The induction process should be updated to ensure that the health and safety information given to each new starter is sufficient and consistently given.	2	S Graham Health and Safety Advisor Supported by HR.	Agreed with the following intended actions: H/S summary information to be provided to HR for inclusion in the induction process.	06/09/13





R6	A timetable and work plan should be established and followed to ensure that all procedures/documents are reviewed on a	2	S Graham Health and Safety Advisor	Agreed with the following intended actions:	
	regular basis.			The timetable and action plan will be reported to Executive as a part of the quarterly reports to Executive on health and safety - continuing the system of reports of 12/13. Any variance(s) and the reason(s) will be reported as part of the quarterly health and safety monitoring reports.	06/09/13
R7	All completed and future Risk Assessments should be made available to the Health and Safety Advisor.	3	J O'Reilly Environmental Health Manager	Agreed with the following intended actions:	
				Managers requested to provide copy of risk assessments.	31/07/13
				Received risk assessments to be stored in central location – covalent or intranet.	06/09/13
				If required reminder and follow up action with any services that have not provided a risk assessment.	06/09/13





#### **APPENDIX 2**

R8	In line with HSE best practice guidelines an annual report to Executive should include the	3	J O'Reilly Environmental	Agreed with the following intended actions:	
	minimum health and safety policy content and statistical information.		Health Manager	Annual report to include HSE best practice guidelines.	31/03/14