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**Report to**                      **Audit Committee**

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**Date of Meeting:**    **20<sup>th</sup> June 2019**

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**Subject:**                      **Health & Safety Annual Report**

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**Report by:**                      **Strategic Director – Partnerships & Performance**

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## **1.0 Purpose**

- 1.1. This report provides the 2018/19 annual report on Health & Safety performance across the Council and sets out a plan of work in this area for the coming year.

## **2.0 Recommendations**

- 2.1. That Committee notes the report, commenting and challenging as appropriate.

## **3.0 Considerations**

- 3.1 The Council has a legal duty to ensure the health and safety of the staff it employees and anyone who comes into contact with the services we provide. As well as ensuring no person comes to harm, this also helps prevent loss or damage to property, disruption due to incidents and claims being made against the Council.
- 3.2 In 2016 an audit of Health & Safety management was undertaken by the Council's Insurers Gallagher and Bassett. This outlined a number of issues which required action to address. Good progress is being made with this and regular updates are provided to the Senior Leadership Group and Tripartite.
- 3.3 Significant work has been undertaken over the last year to improve the health and safety culture across the organisation and the report provides detail of this activity and performance measures.
- 3.4 However, there is still work to be done to ensure the Council fully meets its legal obligations. The report also sets out a plan of work for the 2019/20 financial year to ensure that progress continues.

## **4.0 Sustainability Implications**

- 4.1. None noted.

## **5.0 Resource Implications**

### *5.1. Financial Details*

- 5.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate.                      Yes

5.3. Finance have been consulted and have agreed the financial implications as set out in the report. Yes

5.4. *Staffing*

## 6.0 Exempt Reports

6.1. Is this report exempt? Yes  (please detail the reasons for exemption below) No

## 7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities** (Please double click on the check box )

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

(2) **Council Policies** (Please detail)

Health & Safety Policy

## 8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations? Yes  No

## 9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

## 10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

- **Appendix 1:** Health & Safety Annual Report

## 11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered) Yes  (please list the documents below) No

Author(s)

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Stuart Crickmar	Strategic Director – Partnership & Performance	





# Health and Safety

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# Annual Report 2018–2019

Be the  
Future

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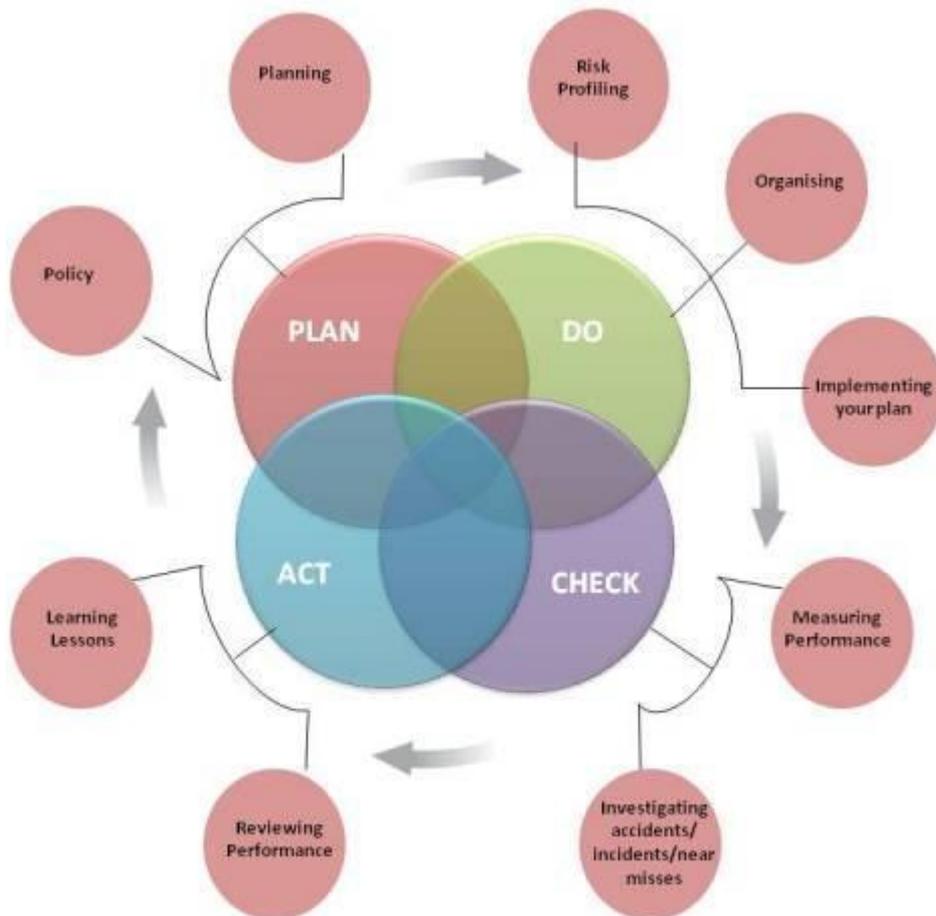
# 1. INTRODUCTION

## 1.1 Aims and Objectives

In order to manage Health and Safety (H&S) effectively, it is essential to carry out and report on periodic reviews of H&S performance. This report aims to provide senior management and Elected Members with insight into the deployment of H&S across the Council in order to assess performance. Management information is included for the period between 1<sup>st</sup> April 2018 and 31<sup>st</sup> March 2019. Information relating to the use and performance of the Occupational Health contract is also considered.

The report also provides information on H&S risks and any enforcement action / Health and Safety Executive (HSE) involvement where the effectiveness of internal controls and H&S risk management have not achieved their intended aim(s).

The Council uses the system set out in the HSE publication *Managing for Health and Safety (HSG65:2013)* as the basis for its H&S Management System. This is based on principles of Plan, Do, Check and Act which are common to many management systems.



The ultimate objective of this report is to monitor performance and to provide an indication of the level of assurance on the achievement of statutory compliance.

## **1.2 H&S Team goals**

The H&S Team aims to ensure, as far as is reasonably practicable, that Council business is conducted and services are delivered without causing harm or ill health to our staff, or any others affected by our activities. Advice provided on the management of H&S will be reasonable, proportionate to the level of risk and benchmarked with similar organisations. The team also manages the Council Occupational Health Services contract. The H&S service contributes to maintaining a healthy workforce, improving efficiency, reducing costs and claims, managing risk and reducing absence.

The central H&S Team satisfies the statutory requirement to appoint an adequate number of competent persons to assist the Council to comply with its legal duties, without removing the direct responsibility on Services to assess risk and operate in a safe manner.

## **2. EXECUTIVE SUMMARY**

Highlights from the broad range of work undertaken from the period 2018-19 include:

- Compliance with a Notice of Contravention on Traffic Management at Forthbank Home Waste Recycling Centre,
- Development or review of 14 policies,
- Completion of 2517 Health and Safety training activities,
- Completion of General Health & Safety Audit visits to 61 Council properties,
- Completion of 755 Health Surveillance checks with significantly improved attendance rates,
- Support provided through 414 contacts with PAM Assist and 14 referrals to Physiotherapy,
- Completion of the analysis of 70 Stress Risk Assessments.

All of the above support the Council in achieving statutory compliance and enhancing the health, safety and wellbeing of staff.

### 3 PERFORMANCE - H&S MANAGEMENT SYSTEM

#### 3.1 Key Performance Indicators

In March 2018 a set of Key Performance Indicators were agreed for Health and Safety Performance across the Council.

Objective	Description	Measure	2018/19 Actual (%)	2019/20 Target
Monitor and review risk assessment programmes	Monitor the implementation of risk assessment procedures	Number of assessments completed against the number expected as a %	Compilation of data not possible	70%
Ensure effective communication of Policies and Guidance	Measure of how well policies have been disseminated through the organisation	Number of employees receiving a toolbox talk on new H&S policies expressed as a % of those who should have received such a talk.	H&S – 17.1 Risk – 6.9 CDM – 3.6 Accident- 1.4 Asbestos – 1.5 Contractors – 0.6 Fire – 1.5 LOLER – 1.1	90%
Ensure employees have completed basic H&S training recently	Measure of implementation of core H&S Training (H&S Intro, Electricity, First Aid, Fire, Slips & Trips MicroLearn or Toolbox Talk)	Number of employees completing core H&S Training (refreshed each year) expressed as a % of total number of employees	H&S – 9.9 Electricity – 2.9 Fire – 6.2 First Aid – 3.3 Slips – 3.3	90%
Ensure appropriate controls are in place to protect employees from violent behaviour	Measure of the number of violent incidents experienced by employees	Number of violent incidents to employees expressed as a % of the overall number of employees.	3.14%	5%*
Ensure Incidents are reported promptly	Measure the implementation of accident reporting procedures	Number of incidents reported within 5 working days expressed as a % of incidents reported.	82.2%	90%
Ensure Health Surveillance is carried out in line with statutory requirements.	Monitor implementation of the health surveillance programme	Number of HS appointments attended expressed as a % of the number of appointments offered by OH.	86.1%	90%
Ensure that Health & Safety is embedded throughout the organisation	Monitor how well employees feel health and safety is being managed using an HSE tool	Score out of 100 provided.	No data available	60

\*This is set at a higher figure because there is evidence that violent incidents are significantly under reported, with some employees seeing this as “part of the job”.

Significant work is ongoing to work towards these targets but better engagement with the services is required to enable these to be met.

## **3.2 Statutory Breaches & Enforcement Action**

### **a. HSE Inspection – Forthbank Home Waste Recycling Centre**

Statutory breaches were identified following a proactive inspection by HSE Inspector looking at H&S issues in the Waste industry. The site had come to their attention due to an incident reported to them.

The HSE investigation resulted in a 'Notice of Contravention' letter. The Statutory breach identified was:

- The Council are failing to ensure that their site is organised in such a manner that pedestrians and vehicles can circulate in a safe manner as required by the Workplace (Health, Safety and Welfare) Regulations 1992, Regulation 17(1)

This attracted a Fee for Intervention but as yet the invoice has not been received. The fee is likely to be under £1000. Had work to improve the situation not already been planned it is likely that we could have been prosecuted with a minimum fine of £20,000.

## **3.3 Significant Incidents/Accidents**

During 2018/19 there were no full HSE investigations following the reporting of accidents under the RIDDOR Regulations, although further detail was requested on the incident detailed in b. below. Police Scotland investigated the incident in a. below and a report was submitted to the Procurator Fiscal. Other significant accidents are detailed below.

### **a. Refuse Collection vehicle – overturn on approach to Polmaise Waste Transfer Station**

On 7<sup>th</sup> May 2018 a refuse collection vehicle overturned on the approach road to Polmaise Waste Transfer station. The crew were evacuated with some minor injuries, but there was significant damage to the vehicle. The incident was investigated and recommendations were submitted. In addition, the police investigation lead to a report being submitted to the Procurator Fiscal in relation to the driver of the vehicle.

### **b. Craigbank Garages – discovery of Asbestos**

On 6th July 2018 three employees from Land Service were demolishing wooden garages at Craigbank when they discovered asbestos within the debris. Due to holidays, a number of key people were not available and there were questions about action taken by several key people. The incident was investigated and recommendations were submitted in relation to the management of asbestos and control of projects under the Construction (Design and Management) Regulations.

### **c. Forthbank HWRC – vehicle reversed over member of the public's foot**

On 20<sup>th</sup> September 2018 a JCB loader reversed away from a skip and ran over the foot of a member of the public who was using the neighbouring skip causing crush injuries to the foot. The incident was investigated and recommendations were submitted.

### 3.4 Accident Data

Table 1 below summarises the accident data for employees for the financial year 2018/19, previous years are included for comparison. Due to capacity issues within the H&S team no statistics are available for incidents to service users or other members of the public although records are held.

<b>TABLE 1 - COUNCIL ACCIDENT STATISTICS – 2016/17, 2017/18 and 2018/19</b>			
<b>Number of Reports</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
<b>Staff</b>	357	359	187
<b>RIDDOR (HSE) reportable accidents within the above</b>			
<b>Staff</b>	19	14	16
<b>Staff accident incidence rate (AIR)</b> Total riddor reportable x 100,000 / FTE employees.	19 x 100000 / 2047 =928	14 x 100000 / 2034 = 688	16 x 100000 / 1961 =816

There has been a significant reduction (48%) in the number of incidents reported by staff in the most recent year. Table 2 illustrates that this reduction is across all services areas and is possibly due to under reporting rather than a significant increase in the safety culture in the organisation, as the nature of incidents reported remains similar.

<b>TABLE 2 - COUNCIL STAFF ACCIDENT STATISTICS - by Directorate</b>												
	<b>D&amp;E</b>		<b>Edu</b>		<b>H&amp;CS</b>		<b>R&amp;G</b>		<b>Soc</b>		<b>S&amp;CS</b>	
	<b>17/18</b>	<b>18/19</b>	<b>17/18</b>	<b>18/19</b>	<b>17/18</b>	<b>18/19</b>	<b>17/18</b>	<b>18/19</b>	<b>17/18</b>	<b>18/19</b>	<b>17/18</b>	<b>18/19</b>
<b>Non RIDDOR</b>	46	24	193	85	63	29	5	3	27	26	10	3
<b>RIDDOR</b>	5	7	3	4	4	4	1	0	1	0	0	1
<b>Total</b>	<b>51</b>	<b>31</b>	<b>196</b>	<b>89</b>	<b>67</b>	<b>33</b>	<b>6</b>	<b>3</b>	<b>28</b>	<b>26</b>	<b>10</b>	<b>4</b>

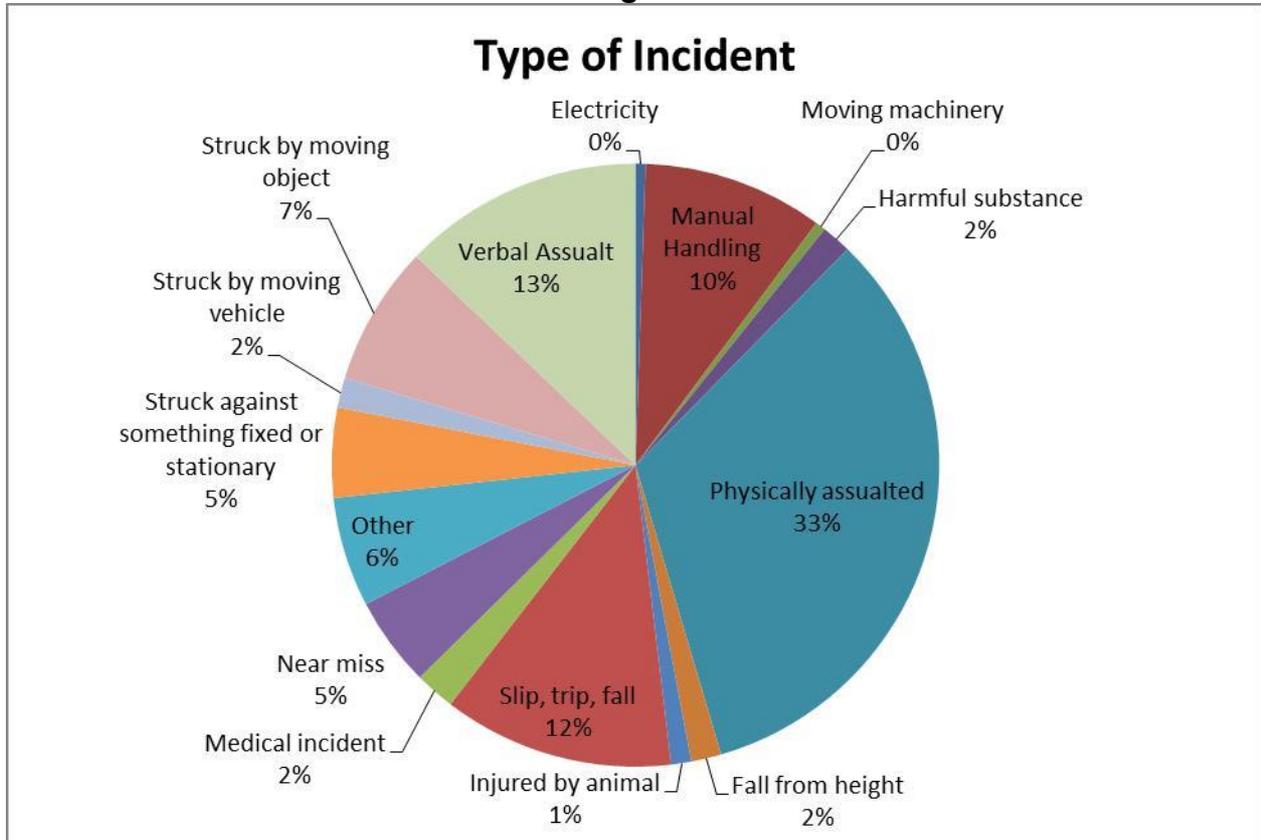
All accident reports are scrutinised by the H&S team and action taken where required in the identification of trends and the provision of recommendations in order to prevent a reoccurrence. Itrent, the Council's Human Resource Management System, is now embedded as the tool for recording accidents and developments are taking place to allow employees to enter information onto iTrent directly.

Serious incidents, including accidents resulting in significant injury and staff absence from work, must be reported to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. 16 accidents involving staff were RIDDOR reportable and 3 for non staff. These figures have remained fairly static over recent years.

The number of RIDDOR reports for staff is benchmarked with 11 other Scottish Local Authorities using the Accident Incidence Rate (AIR - RIDDOR reports per 100,000 FTE). This shows that the accident rate reported for Clackmannanshire Council is consistently higher than other Local Authorities. However, there are increasing differences between the services being offered by each Council which makes comparison difficult.

Figure 1 displays accident types 2018/19 for staff. The top 3 accident types for staff were physical assault 33%, verbal assault 13% and slips trips and falls 12%. This is similar to previous years. A revised Personal Safety & Lone Working policy and Slips, Trips and Falls policy are being developed to help address this.

**Figure 1**



### 3.5 Audits

A programme of general Health & Safety Audit visits to 105 identified Council properties commenced in October 2017. These are believed to be the properties where the Council maintains the responsibility for safety and upkeep of the building. 61 buildings (58%) have been visited. 5 buildings have been removed due to changes in their ownership, so 39 buildings remain. All visits are due to be completed by December 2019. Basic Health & Safety management arrangements are in place for most buildings, although some issues with the building fabric are now being addressed by the Planned Works & Compliance Team.

In addition to this the Health & Safety Officer (Place) completed a number of visits to worksites where employees are working. The main issue raised in these visits was been failure to wear Personal Protective Equipment (PPE). A revised PPE policy has recently been introduced to address this.

### 3.6 Training

H&S training plays a significant role in reducing overall H&S risk. Figure 2 details the attendance at H&S training courses organised by the H&S Team during the financial year 2018/19. There were 352 attendances by staff on the centrally organised courses.



\*the above includes only the H&S courses organised by the Corporate H&S team. Other courses are organised at service level including first aid and other topic specific courses i.e. ladder safety etc.

The IOSH Working Safely and IOSH Managing Safely courses were supported by funding through the Flexible Workforce Development Fund. This is also supporting City & Guilds Education & Training courses and NEBOSH Certificate in Occupational Safety and Health qualifications which will take place within the 2019/20 financial year.

A growing number of courses are being run as e-learning, allowing employees to choose where and when they access the course. Table 3 shows the number of employees completing key courses in 2018/19. These were deemed to be mandatory courses for all employees.

Course	No. completed	No. in progress
H&S Intro	248	63
Electricity	74	7
First Aid	84	18
Fire	153	23
Slips & Trips	74	7
<b>Total</b>	<b>1233</b>	<b>118</b>

In addition, Toolbox Talks have been developed for H&S policies which have been created or reviewed. Table 4 shows the number of employees who have received these in 2018/19. The KPI data above shows this as a percentage of the workforce.

<b>TABLE 4 – H&amp;S Toolbox Talks – 2018/19</b>	
<b>Toolbox Talk</b>	<b>No. completed</b>
H&S Policy	471
Risk Assessment Policy	192
Fire Safety Policy	41
Construction (Design & Management) Policy	100
Accident Reporting & Investigation Policy	38
Management of Asbestos Policy	42
Management of Contractors	19
Lifting Operations and Lifting Equipment Policy	29
<b>Total</b>	<b>932</b>

This confirms that there is much work to be done to ensure that H&S policies are understood by employees.

A Training Needs Analysis for Health & Safety training is underway and from this a matrix will be developed showing what training is required for different types of roles across the organisation. This will then inform the development of a training programme over the next few years.

## 4 OCCUPATIONAL HEALTH PROVISION

The Occupational Health Provision (OHP) is a significant risk/absence management tool, allowing the Council to optimise productivity whilst reducing costs related to health issues. OHP's perform the following functions:

- Identification of the legacy of impairment/disease in new employees and the establishment of a 'baseline' of health.
- Pre employment health assessment.
- Advising on adjustments as required to comply with the Equality Act 2010.
- Identification of work-related disease and defence in the event of legal challenge.
- Provision of advice on preventing/minimising work-related illness.
- Compliance with statutory health surveillance requirements.
- Assessment of fitness for work during and after illness/disease onset and recommending adjustments and restrictions to reduce absence costs.
- Employee Assistance such as Counselling, CBT, EDMR.
- Physiotherapy.

The main OHP is currently delivered by Optima Health, with Employee Assistance provided by PAM Assist and Physiotherapy provided by Framework. The value of these contracts is £84,000 per annum, with some additional costs agreed separately for more specialist services. The OH Contract runs until 31<sup>st</sup> March 2021, with the option to extend for up to 2 years after this.

### 4.1 OH (Management) referrals

Table 5 below shows the number of referrals made to our OHP. These are mainly made by managers in relation to employee attendance issues, but occasionally may be made to request advice in cases where there has not been any absence.

Referral Type	Number of referrals 2017/18	Number of referrals 2018/19
Management referrals	672	381
Pre employment screening	420	400
Case conferences	10	1

The number of management referrals has decreased significantly as changes to the Maximising Attendance policy have been implemented.

### 4.2 Health surveillance

Health surveillance checks are required by legislation and include checks for:

- Noise Induced Hearing Loss;
- Hand Arm Vibration Syndrome;
- Occupational Asthma / lung function;
- Occupational Dermatitis (skin );
- Night worker medicals;

Table 6 below shows the number of staff attending OH for statutory health surveillance appointments to be higher than in previous years. The process for making appointments

was revised for the 2018/19 year, and for the first time in many years all employees were offered an appointment for all surveillance due to them.

There are 246 individual staff members currently included in the health surveillance programme and 36 staff on the night worker medicals programme.

TABLE 6 - Health Surveillance Appointments – 2017/18 and 2018/19		
	2017/18	2018/19
<b>HAVS</b>	67	122
<b>Audiometry</b>	109	109
<b>Skin checks</b>	130	244
<b>Lung checks</b>	130	262
<b>Night worker assessment</b>	11	18

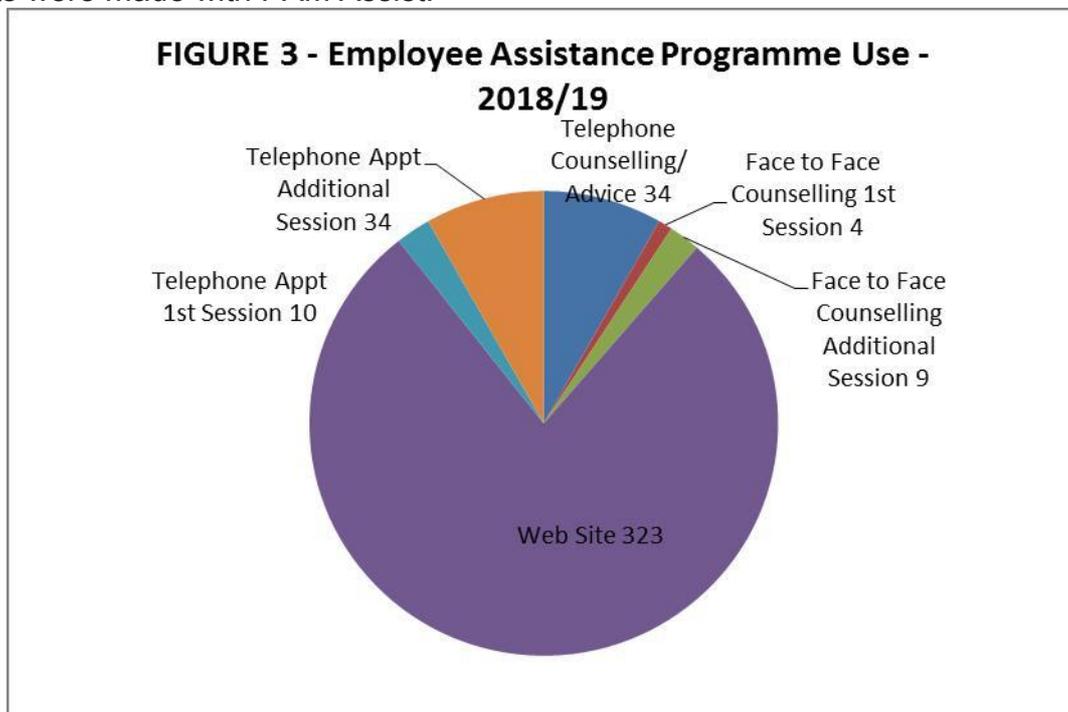
\* Health surveillance checks are cyclical, some of which take place on a 3 year rotation. These figures highlight the usage of the contract and are not performance indicators.

If symptoms are identified during health surveillance managers are provided with recommendations from OH in order to ensure exposures are reduced. A structured feedback form is now used to ensure the outcome of health surveillance appointments is formally passed to staff.

### 4.3 Employee Assistance Programme

The Employee Assistance Programme was reintroduced from 1 May 2018 following several years' absence due to the collapse of the previous supplier. The contract provides for online and telephone assistance on a wide range of topics. If more specific support is provided such as counselling, CBT or EDMR this is charged separately to the relevant service.

Figure 3 shows the use made of this provision in the 2018/19 financial year. A total of 414 contacts were made with PAM Assist.



The main topic for phone contact was Mental Health Issues (23). Table 7 shows the topics viewed on the website by Council employees.

<b>TABLE 7 – EAP Website Topics – 2018/19</b>	
<b>Topic</b>	<b>Views</b>
Drugs and Alcohol	6
Legal Advice	6
Managing Money	101
Medicine Chest	21
Mental Health	116
No Topic Viewed	66
On-line Counselling	24
Support	41
Web Site Navigation only	2
<b>Total</b>	<b>383</b>

#### 4.4 Physiotherapy

The primary purpose of the Physiotherapy Service is to either prevent absence or to facilitate a return to work as a result of a musculo-skeletal injury or illness. The Service was set up as part of the Council's absence management toolkit, with the aim being to provide faster access to physiotherapy as staff could wait eight to twelve weeks for NHS provision. The physiotherapy provision is delivered by 'Frameworks Clinics'.

There were 14 referrals to Physiotherapy, 5 of whom had absence as a result of their injury.

### 5 STRESS RISK ASSESSMENT

Stress risk assessments aim to assist managers in the identification of stressors and the subsequent identification of risk control measures. Table 8 below summarises the demand for assessments from each Service. In 2018/19, 70 assessments were requested – an increase of 30 (175%) from the previous year.

<b>TABLE 8 - STRESS RISK ASSESSMENT BY SERVICE – 2017/18 and 2018/19</b>		
	<b>2017/18</b>	<b>2018/19</b>
Housing & Community Safety	9	17
Social Services	10	10
Education	15	33
Development & Environment	4	5
Strategy & Customer Services	1	0
Resources & Governance	1	5
<b>Total</b>	<b>40</b>	<b>70</b>

During the course of the year a Mental Health Policy was approved. This set out arrangements for proactive team stress risk assessments to be carried out. This should see the number of individual assessments required decrease, but more importantly should also see a decrease in the level of absence from work related stress.

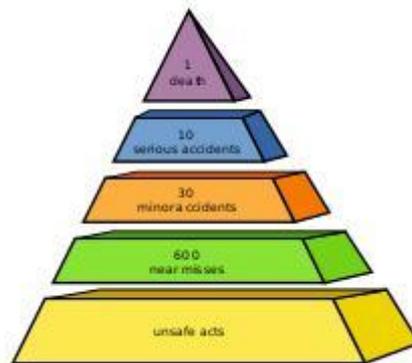
## 6. PRIORITY AREAS FOR IMPROVEMENT

There is generally good progress in health and safety performance. Using the information provided above, and the analysis of performance against HSG65 in Appendix 1 suggests there are still a number of areas for improvement. Four of these areas are identified as a priority to ensure that performance continues to improve.

### 6.1 Incident Reporting

The level of incident reporting by staff shows a significant drop over the last year. This is likely to be due to under reporting, rather than a significant improvement in safety culture. In Accident causation theory, it is expected that the number of near misses should be significantly higher than the number of minor incidents recorded, as shown in Figure 4 below. However, the number of near misses recorded across the Council are nowhere near the level expected – an additional 3500 near misses would be required to come close to this.

Figure 4: Bird's Accident Triangle



The current method of incident reporting is labour intensive. In some services an employee will hand write an incident form, which is then typed up by another member of staff before being sent to the H&S team where the same information is retyped in to iTrent. This is clearly inefficient. Work is progressing well to allow key employees in all services to input the information directly to iTrent. This then triggers a workflow to allow managers and H&S team to review the information and provide updates as they would now.

Work is also starting to simply reporting for near miss events to encourage better reporting of these. This would allow identification of potential issues at an earlier stage and allow them to be rectified BEFORE injury or property damage occurs.

### 6.2 Risk Assessment

The Gallagher & Bassett Audit of Health and Safety carried out in 2016 raised concern about the quality of risk assessments and the lack of any quality assurance process for this. While a number of risk assessments have been viewed as part of the General Health & Safety Audit programme, it is recognised that a more systematic approach is required to provide assurance that risk assessment is a routine part of Council work.

With the resources available in the Health & Safety Team limited to 4 FTEs it is important that work progresses on a central storage mechanism for all risk assessments to allow easy access to these. This would also provide other benefits in reducing duplication of effort across the Council, as managers will be able to access similar risk assessments and change them for their use, rather than having to start from scratch with each new task.

### **6.3 Health & Safety Training Programme**

Over the last year, the focus of the H&S Team has been on developing policies to ensure that a set of guidance exists for all hazards facing the Council which is understandable for employees and practical to implement across the many different teams across the Council. Now that this work is drawing to a close, the focus for the team is now on ensuring that employees are aware of the guidance and their role in improving health and safety standards.

A systematic approach will be taken, working in conjunction with Organisational Development, to ensure that the health and safety training required within different roles are identified and documented.

### **6.4 Health & Safety Communication**

For Health & Safety to improve, the elements of the Health & Safety Management System need to mean something to the employees who carry out the work of the Council. There is no point on a policy which sits on a shelf, or a risk assessment which sits unread in a folder. The Health & Safety Executive have developed the Safety Climate Tool to help measure how well employees feel health and safety is managed across the organisation.

A programme of using this tool with different teams is being developed to help identify what work is required to improve the Health & Safety culture across the organisation. This will then feed in to the Health & Safety Team workplan.

## 7 HEALTH & SAFETY TEAM WORKPLAN 2019/20

The key tasks for the Health & Safety Team over 2019/20 are set out in Table 9.

<b>TABLE 9 – Health &amp; Safety Team Workplan 2019/20</b>		
<b>Ref</b>	<b>Task</b>	<b>Target Date</b>
<b>Plan</b>		
P1	Complete programme of policy development/review	September 2019
P2	Carry out further toolbox talks to ensure all employees are aware of H&S policies and their responsibilities	December 2019
P3	Lead work to collaborate on Health & Safety with other organisations with which we work	March 2020
P4	Ensure that appropriate Health & Safety information is provided to contractors to allow work to be carried out safely.	March 2020
<b>Do</b>		
D1	Carry out systematic risk profiling exercise so that all managers are clear of the key hazards in their area	March 2020
D2	Develop H&S Training matrix to ensure all employees have suitable training for the work they are required to do	December 2019
D3	Develop central system for recording risk assessments to allow better quality assurance.	December 2019
D4	Work with services to embed the concept of Competence rather than using training as a tick box.	March 2020
<b>Check</b>		
C1	Roll out service input of incidents into iTrent	December 2019
C2	Develop systems to allow easy reporting of near misses	September 2019
C3	Roll out Safety Climate Tool to gauge employee engagement on Health & Safety	March 2020
C4	Develop programme of thematic audits on particular issues	March 2020
<b>Act</b>		
A1	Ensure reports to H&S Forums and SLG contain measurable timescales with ongoing tracking of actions	June 2019
A2	Ensure that more in-depth analysis of incidents is provided to Operational Health & Safety Forum	June 2019

Clackmannanshire Council is a member of the Authorities Benchmarking Club (ABC). This involves benchmarking with 11 other Scottish local authorities. Part of this membership includes involvement in a regular Peer Review H&S Management System Audit every three years. The next round of audits will take place by September 2019. The results of this will also influence the work identified for the team.

## 8 CONCLUSIONS

The aim of this report is to monitor H&S performance and to provide general assurance on the level of compliance with statutory requirements. From the performance of the H&S Management System in 2018/19, it is evident that limited assurance can be provided on the uniform compliance with statutory H&S duties across the Council.

Significant work has been undertaken to build the foundations of a strong Health and Safety Management System. 14 policies have been developed over the past year, in addition to the 5 which were agreed in the previous year. 61 General Health & Safety Audit visits have been carried out, building up a picture of compliance levels across the Council. A total of 2517 training activities were undertaken during the year.

However, the sharp drop in incident reporting and the rise in stress risk assessments suggest that there are still issues which require to be addressed to ensure that health and safety culture is embedded across the organisation.

Pockets of good practice exist within the Council and a key role for the Health & Safety Team is to share this good practice to help those who may not be performing as well. The development of a central risk assessment store will be a key step forward to assist with this.

A key challenge for the team over the next year will be to ensure that Health & Safety remains a priority in all areas of the Council as the new management structures are developed and implemented. This also presents opportunities as the changing structures lead to reviews of working practices across different teams.

The H&S Team will continue to closely monitor performance and work towards reducing the key risks facing the Council as detailed above; adjusting priorities as required in order to safeguard the health, safety and wellbeing of staff, as far as is reasonably practicable.

Key Areas of Strength	Key Areas for Development
<b>Plan</b>	
Policy with clear statement of intention, responsibilities and performance measures signed by Chief Executive.	Communication of policies so that everyone knows what is required.
Arrangements for Trade Union involvement in policy development and Health & Safety planning and monitoring.	Share good practice with those with whom we share buildings or work closely with.
<b>Do</b>	
Management of Contractors in relation to Health & Safety has improved dramatically.	Carry out systematic risk profiling to ensure that all risks are appropriately controlled.
Clear arrangements in place for employees to raise H&S issues.	Ensuring that health and safety is seen as a key part of “getting the job done”.
Specialist help engaged and managed effectively in areas such as asbestos.	Making sure all workers have the necessary skills, knowledge and experience to carry out their job safely and without risk to their health.
<b>Check</b>	
Good systems to report and discuss health and safety performance in a systematic way.	Accident reporting and investigation is not carried out as systematically as it could be.
<b>Act</b>	
Senior Managers open to learning lessons from previous incidents.	Ensure momentum is not lost on Health & Safety actions identified.

