

QUARTERLY HEALTH AND SAFETY REPORT Q2 2022/23

1. RECOMMENDATIONS

- 1.1 That HR Committee note the contents of this quarterly report and be aware of the accidents and incidents recorded in Q2, and the merged action plan from the safety panels.
- 1.2 To note the updated Warning Marker Register (**Appendix 3**), Corporate Legionella Policy (**Appendix 4**) and Control of Substance Hazardous to Health (COSHH) Policy (**Appendix 5**), which have been circulated at the three Safety Panels for consultation. The changes to the previous policies in place have not been significant and it is proposed they receive sign-off at the HR Committee.

2. INTRODUCTION

- 2.1 This report highlights the significant health, safety, and welfare work across the Council from July to September 2022, Q2. Feedback from the three Safety Panels is covered in section 4, and the accident, incident and near miss statistics are detailed with further information in the appendix.
- 2.2 Q2 accidents, incidents and near misses reported are within normal parameters, down on the last quarter at 45, there was one RIDDOR incident (an over 7-day injury). Near miss reports were up on the previous Q2 report (2021/22) at 25. The significant issues are summarised in section 6.

3. HEALTH & SAFETY MATTERS

3.1 COVID-19 Risk Assessments:

There is no longer a legal requirement to have Covid-19 risk assessments in place and these have now been included within Respiratory Infections risk assessments. When staff return a positive LF test they are expected to spend 5 days away from work while they are at their most infectious. In line with Government guidance if on day 6 they are well they can return to work, there is no requirement to continue testing. Those members of staff who continue to have symptoms and feel unwell on day 7 and cannot work from home, will need to contact their GP who may issue a *Fit Note* or an *Isolation Note* which will need to be provided to their manager and HR. Staff are still expected to clean down their desk at the end of the day.

3.2 Health and Safety Team Work Programme:

The Corporate Health and Safety Team work across the Services focused on priority projects, and have made progress on the Lone Working review, COSHH reviews, HAVs monitoring, Housing Risk Assessments and Manual Handling reviews. The health and safety auditing targeted to start in Q2 will now commence in Q3, with the preparatory work for the Waste Services audit having started. The internal risk assessor training started in September through to November.

3.3 Lone Working and Warning Marker Register:

A working group has been organised with representation from a number of services who have staff undertaking lone visits, with the objective of reviewing current arrangements and identifying the characteristics of a corporate system which would be of greatest benefit to the largest number of staff. It is also necessary to review the conflict management training which can be made available to relevant staff and ensure that a sustainable training programme is put in place and managed. The conclusions from the working group will be brought back to EMT and covered in a future quarterly report.

Warning Marker Register Policy update: in order to meet the duty of care the organisation has to protecting the safety of staff a list of individuals/ properties has been managed in order to inform staff where there could be a personal risk due to a previous event(s), or threats from the property or an individual. Where there is a WMR entry then safety procedures need to be followed. Information on the list may be provided by a 3rd party public sector agency, e.g. Probation Service. In line with Information Commissioner guidance individuals being added to the list are likely to be informed and given a chance of appeal. The updating of the Policy was undertaken as part of a routine review, and the update has been publicised to staff in the October edition of the Safety Matters Newsletter. Training will be rolled out in the coming months. To enable users to access the WMR on work mobile devices there are discussions with ICT taking place to hold the data on Sharepoint, which will enable remote access, data is currently held on the e-base e-form system.

3.4 Legionella Management:

There has been a recent review of legionella management across the organisation, with an updated corporate Legionella Management Policy being drafted. A review of the 2020 Legionella Risk Assessment/ Inspection Reports for LTH & ATC has been completed. Once the Corporate Legionella Management Policy has been ratified then a further review of the local Policies held by the Housing Service and Facilities Team will be reviewed, to ensure they are consistent and up to date.

3.5 COSHH Reviews:

As previously detailed, COSHH reviews have taken place across a number of teams and actions/ improvements were highlighted: Grounds Maintenance; Street Scene; Pest Control; Workshops. The reviews are currently being completed for: Housing Maintenance; Cleaning team; and Facilities. This work is likely to continue into Q4.

3.6 Health and Safety Audits:

The start date for the audits detailed in the work programme will now start in Q3. In addition to Waste Services there needs to be a highlight on medium risk Services/functions of the Council which have not been part of audits or review for some time, and include: Coastal Service; parts of Planning (Planning Enforcement, Building Control); Housing Development; & Environmental and Regulation. The Waste Service audit has recently started with staff H&S questionnaires circulated.

3.7 Other Health and Safety Policies:

Other Policies currently in draft and likely to be circulated for consultation at the next round of Safety Panels include:

- Lone Working Policy;
- Occupational Road Risk (Greyfleet);

- Working at Height.

4. TASK AND FINISH GROUPS: CDM, & ASBESTOS MANAGEMENT

- 4.1 The **Construction Design Management group** had their quarterly meeting in October where the focus was rolling out the Housing Standard Operating Procedures (SOPs) to the group. Housing SOPs require some additional information before completion, with one area being the definition of notifiable projects following feedback from HSE. Meetings will take place over Q3 between the Health and Safety Advisor and the service leads so that local SOPs can be drafted using the Housing documents as a template. Training on the Housing SOPs via toolbox talks expected to start in Q3.
- 4.2 CDM training for those staff previously identified by the group will start in Q3, with an online accredited course to be delivered by First4Safety. Health & Safety Advisor to attend the course to ensure suitability for others. An Actions Table is in place for the Group.
- 4.3 The **Asbestos Management group** met in October and the completed Housing Asbestos SOPs were presented. The Corporate Asbestos Manager provided a report to the group detailing the breakdown of data from the Keystone Asbestos Register, % of property types held on keystone register, which will help to formulate KPI's over the short-term to provide a focus for the group, e.g. which type of properties asbestos surveys need to be target at. The surveying of voids will be reviewed in more detail at the next group meeting, when there will be more details on turnaround times for the asbestos bulk samples by Allium Ltd (contracted asbestos surveyors).
- 4.4 The use of Keystone Mini was discussed, which will provide remote access to the database by operatives, which has been delayed due to ICT issues which need to be resolved – update at next meeting. The list of staff to receive asbestos training is in place and this is planned to be delivered by Allium (who also undertake the asbestos surveys). An Actions Table is in place for the Group.

5. SAFETY PANEL FEEDBACK

- 5.1 All Action Tables were reviewed prior to the April meetings for the year ahead and the target dates for some of the projects/actions were reviewed. See **Appendix 2** for the merged Action Table for the three Safety Panels.

5.2 Operational Services Safety Panel:

Vehicle incidents: there have been a number of wing mirror hits in the last quarter for the larger vehicles (refuse vehicles), along rural routes, some of which have resulted in window breaks. Drivers have reported the need for vegetation to be cut back along narrower tracks. Solutions to be investigated by Waste Operations Manager/ Senior Supervisor: route assessments; wing mirror protectors; need for foliage to be cut back – liaise with HCC highways or others. Issue to be raised by Supervisors in toolbox talks, to ensure speeds are appropriate.

Incident reports to operatives are down compared to the previous quarter (including cuts), which may have been influenced by the toolbox talks on safe manual handling. One cut to waste operative from waste bag incident occurred on inside of leg where ballistic trousers provide less protection.

Excavator examinations: need to get confirmation on when the Lifting Operations and Lifting Equipment Regulation (LOLER) examinations were last completed, as vehicles do not appear on the insurance list.

Sun-cream dispenser in depots: agreement that this was a positive development and demonstrated a commitment to staff well-being. However, because the dispensers were not installed until July it was felt that it was not as well marketed to staff as it could have been, and not as well used as expected. If repeated in 2023 there is a need to publicise the provision for all operation staff who may have significant sun exposure as part of their roles.

Update on New Waste Strategy and Hardley Deport site given to those present.

Hand Arm Vibration work: recent HAVs monitoring of trigger times of equipment being used by Grounds Maintenance, with roll out of monitoring to workshops staff next. No concerns identified.

Depot housekeeping flagged at previous Safety Panel: outstanding items are on a maintenance log. H&S Advisor to monitor.

Fire Safety Policy/ Evacuation Procedure: recent meeting and draft policy to be updated and circulated to managers to confirm responsibilities.

Drivers Handbook: awaiting the final amendments from the design team before issuing.

5.3 **Office Based Panel:**

Additional fire marshals training is to be offered for those staff who have been missed. 45 staff trained as fire marshals to date. ATC Fire Evacuation drill is outstanding.

LTH: The replacement of the fire alarm zonal chart has been completed. The Electrical installation inspection report from February was raised and majority of items have been actioned. Further meeting to be arranged to finalise items to be closed off or actioned. NPA member of staff trapped in lift in September, released when a colleague heard the alarm. Lift engineer attended the following day and fault believed to have been remedied.

Two minor incidents were reported in Q2 for office staff/ visitors to the offices.

Concern raised about desks not being booked and staff not cleaning desks at the end of the day. Agreed that there may be the need to remind staff off the expectations on them when working in the office, *e.g. to clean desks with the items provided.*

Annual workplace inspections by Safety Reps to be organised in Q3.

5.4 **Housing Panel:**

Accidents and incidents reviewed: Q2 incidents reported slightly up on 2021/22 numbers; decrease in days lost compared with the Q1 figure; increase in contractor incidents (3) possibly due to greater awareness of need to report, reviewed by CDM Working Group.

Vehicle incidents: 3 reported for the quarter. Request to have breakdown on costs, what is the mean cost for a claim, to be reported back at next Safety Panel.

Sarum House electrical incident: electrical fire started by an AA Woods (Principal Contractor) transformer/ cable arching which led to plastic sheeting being melted, no-one injured. Electricians isolated by contractor staff onsite. See 6.3

Lexby Road kitchen refurbishment: Gas leak caused by contractor at a tenanted flat during a planned kitchen refurbishment. Gas pipe was encapsulated in the kitchen concrete floor. As part of works to install a door threshold the gas pipe was drilled into. Unusual to have the gas pipe encapsulated and checks confirm unique to this site.

Warning marker register updated Policy discussed and feedback sought. Training to be provided by Corporate H&S Team. Future meeting to discuss the changes to the PNC7 (Pin) Lone Worker system, and the potential Appello replacement option. Confirmed that PNC7 does not have an end date currently.

Sharepoint: discussion about the use of the different folders to hold H&S Records. Need for each of the Service/ Team sites to have a link to the external Corporate H&S pages.

6. ACCIDENTS, INCIDENTS AND NEAR MISSES (INCLUDING RIDDOR)

6.1 The accidents, Incidents and near misses reported in quarter 2 are detailed in Table 1 below, the numbers in brackets are the 2021/22 quarterly figures.

Table 1. All reported Accidents, Incidents and Near Misses

Table 1.	Q1	Q2	Q3	Q4	Total
Total Reports	79 (57)	45 (47)	(43)	(53)	(198)
Non-reportable Accidents	24 (26)	19 (25)	(25)	(40)	(116)
RIDDOR	2 (4)	1 (5)	(7)	(5)	(21)
Near Miss	54 (27)	25 (17)	(11)	(8)	(64)

6.2 The graphical report in **Appendix 1** details the accidents, incidents, near misses in more detail. There was a total of 45 accidents/ incidents/ near misses reported across the Council, down from Q1 (79) and slightly down on last year's Q2 figure (47). As discussed during the presentation of the Q1 H&S quarterly report in August to EMT *damage to building incidents* will be taken out of the main "incident" figures. However, the spate of vandalism to public conveniences seen in Q1 has thankfully not carried over to Q2.

6.3 There was 1 incident which was reported under RIDDOR to the Health and Safety Executive. The RIDDOR and other significant incidents are detailed in the paragraphs below:

- i. **RIDDOR 1** (reported on 10/6/22): 7-day injury to a Waste Services employee. Driver/ loader was emptying garden waste into the hopper of a refuse vehicle and aggravated an existing injury to his left shoulder. No environmental or other factors identified in the incident.
- ii. **Incident 2** (19/7/2022): Near miss. The cable from an electrical transformer was damaged and started to arc causing damage to the plastic asbestos enclosure on the site managed by Principal Contractor AA Woods. Asbestos removal works had been completed shortly before the incident. Electrical equipment used was owned by the contractor. Initial investigation undertaken by AA Woods, with

Corporate H&S Team overview, which proved inconclusive as to the cause. Electrical equipment involved had been part of a routine inspections.

iii. **Incident 3 (7/6/2022):** As part of a planned kitchen refurbishment of a tenanted two-bedroom flat a gas pipe was accidentally drilled into by the contractor operative onsite, which was situated below the kitchen door threshold, encapsulated in the concrete floor. Principle Contractor (Novus Property Solutions Ltd) needed to clear the property and shut off the gas supply. Operative who caused the incident was a subcontractor and was not following the documented risk assessment and method statements, which detailed that threshold should have been glued and not drilled. New external gas pipework installed so that a similar incident cannot occur.

6.4 There were 19 vehicle incidents during the quarter (see Table 2), down on Q1, which were reviewed as part of the routine quarterly vehicle accident review meeting. Significant issues are reviewed by Insurance Officer, Transport Manager and Health and Safety Advisor. In addition to this another cross-service meeting was held to discuss slow moving manoeuvres incidents and driver training took place, following an increase in incidents over 2021/22 (meeting on 17th October).

Table 2. Vehicle Incidents Q2 2021/22

	2018/19	2019/20	2020/21	2021/22	Q1 2022/23	Q2 2022/23
Waste	24	40	52	71	25	13
Housing Maintenance	12	7	13	17	4	3
Street Scene	11	10	13	13	1	1
Engineering Works	0	1	0	1	0	0
Open Spaces	5	4	6	10	1	2
Transport	2	1	1	0	0	0
Parking Enforcement*	-	-	-	1	0	0
Other	1	4	2	1	1	0
TOTAL	55	67	87	114	32	19

7. PROPOSED HEALTH AND SAFETY KEY PERFORMANCE INDICATORS F.L.A.G.S

7.1 The F.L.A.G.S proposal put forward by H&S Manager requires further internal discussions. The proposal is for a set of health and safety KPI's be set up under the **F.L.A.G.S.** acronym: Fire Safety; Legionella/ Lifts; Asbestos; Gas Safety; and Safety mandatory training. Other Hampshire LA's do not have corporate H&S KPI's in place, so there isn't the option to align performance management targets with another local authorities' standards. An opportunity to use national targets may be through the new Social Housing Regulations requirements soon to become law. The Asbestos Management Working Group have started to review data from the Keystone Asbestos Register.

8. HEALTH AND SAFETY TRAINING

8.1 The Health and Safety Team provide 4 mandatory e-learning courses for all staff through the Seminar software system: Office Safety; Fire Safety; Manual Handling; and Display Screen Equipment. Additionally, there is Driving on Council Business, and COSHH training for relevant staff. Staff are required to undertake refresher training for the four mandatory courses every two years.

- 8.2 The Health and Safety Team have produced a 3-hour Risk Assessor training presentation which is offered to managers, supervisors, and H&S Reps over MS Teams from September to November. It is hoped that this training can be delivered long term in an e-learning module as a refresher.
- 8.3 The project group reviewing the options for a corporate Learning Management System is ongoing with a member of the H&S Team part of the group.
- 8.4 Table 3 Health and Safety Training courses in Q2 by the Housing Service.

Ref.	H&S related course in Q2	Numbers attending.
1	Abrasive Wheels.	50
2	Asbestos Awareness.	37
3	Asbestos Task Training.	10
4	Fire Safety Training (Aug)	65

9. FINANCIAL IMPLICATIONS

- 9.1 None. No significant changes to the current practices being considered.

10. CRIME & DISORDER IMPLICATIONS

- 10.1 There are none.

11. ENVIRONMENTAL IMPLICATIONS

- 11.1 There are none.

12. EQUALITY & DIVERSITY IMPLICATIONS

- 12.1 No new requirements or issues identified.

13. DATA PROTECTION IMPLICATIONS

- 13.1 No new requirements or issues identified.

14. EMT COMMENTS

- 14.1 For health and safety KPI's EMT suggested that consideration be given to how health and safety indicators should function across the whole Council, with appropriate interaction with both performance management and statutory compliance drivers. The targets being introduced by the Regulator for Social Housing, the Tenant Satisfaction Measures in 2023, may be one opportunity for introducing new internal targets;
- 14.2 It was noted that there are some items in the Merged Safety Panel Action Table which have missed their target date, with follow up actions to be pursued by relevant risk leads;
- 14.3 EMT noted a welcome improvement in vehicle incidents, with training contributing towards this.

15. Appendix:

- 1. Accident, incident, and near miss reporting for quarter 2 (2022/2023);*
- 2. Merged Safety Panels Actions Table;*
- 3. Warning Marker Register Policy;*
- 4. Corporate Legionella Policy;*
- 5. Control of Substances Hazardous to Health Policy.*

For further information contact:

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Background Papers:

"None".