

**TELFORD & WREKIN COUNCIL**

**CABINET - 14<sup>th</sup> JULY 2008**

**ANNUAL REPORT ON HEALTH AND SAFETY 2007-8**

**REPORT OF THE HEAD OF HUMAN RESOURCES**

**1. PURPOSE**

- 1.1 This is an information report that outlines the overall health and safety performance of the Council between April 2007 and March 2008.

**2.0 RECOMMENDATIONS**

**That the contents of the report are noted and the following proposed key actions for 2008-9 be endorsed:**

**Promotion of employee health and wellbeing.  
Embedding the health and safety strategy across the Council.**

**3.0 SUMMARY**

- 3.1 The key findings of the report are:

- There has been a slight reduction in the number of accidents reported to employees and a significant reduction in the number of days lost due to accidents.
- There has been a slight reduction in the number of violent incidents reported by employees.
- The Occupational Health Service is increasingly well used and is now able to offer mini health checks for employees.
- A further five corporate health and safety awards for good performance were presented.
- A corporate health and safety strategy has been developed to enable consistent management of health and safety.
- The uptake of health and safety training by managers remains encouragingly high.

### 3.2 Proposed key actions for 2008/2009

The key actions proposed by the Chief Executive's health and safety group are as follows:

- Promotion of employee health and wellbeing.
- Embedding the health and safety strategy across the Council.

### 4.0 PREVIOUS MINUTES

4.1 The previous annual report on health and safety performance was considered by Cabinet at the meeting on 16th July 2007 minute number CB20 2007.

### 5.0 INFORMATION

5.1 The health and safety performance information is given both in terms of reactive monitoring where incidents have occurred and proactive monitoring to show what is being done to ensure that we have robust systems in place to prevent injury and ill health. The detail of this information is set out in the three appendices attached:

- **Appendix 1 Reactive safety performance** This covers accidents, violent incidents and enforcement.
- **Appendix 2 Health performance** Covering occupational health, counselling services and stress related sickness absence.
- **Appendix 3 Proactive health and safety performance** Includes detail on training, reviews, consultation, awards, safety of buildings and progress on the corporate plan for health and safety.

5.2 Some comparison with other comparable local authorities is included.

#### 5.3 **Background**

The Health and Safety Commission encourage employers to include reporting on health and safety performance in their annual reports as part of the drive to achieve the targets set in strategy statement "Revitalising Health and Safety".

#### 5.4 **Equal opportunities**

Some health and safety issues are gender specific, for example the safety and health of new and expectant mothers.

#### 5.5 **Environmental impact**

None.

#### 5.6 **Legal comment**

The key actions discussed in this report are needed to continue to comply with current health and safety law.

## **5.7 Link with corporate priorities**

5.7.1 Promoting employee health and wellbeing links to the priority of promoting healthier communities and also to the priority of providing and efficient, effective and customer focussed Council that delivers value for money to the community

5.7.2 Embedding our health and safety strategy links to the priority of being an efficient, effective and customer focussed Council that delivers value for money to the community.

## **5.8 Financial implications**

The Health & Safety and Occupational Health service are both support services funded from within existing resources. The cost of counselling services are borne by service budgets according to usage.

## **5.9 Opportunities and Risks**

The opportunities and risks associated with these actions have been identified and assessed. Arrangements will be put in place to manage the risks and maximise the opportunities that have been identified.

## **6 Ward Implications**

District wide implications.

## **7. Background papers**

Annual reports of health and safety performance for 2005-2006 and 2006-7

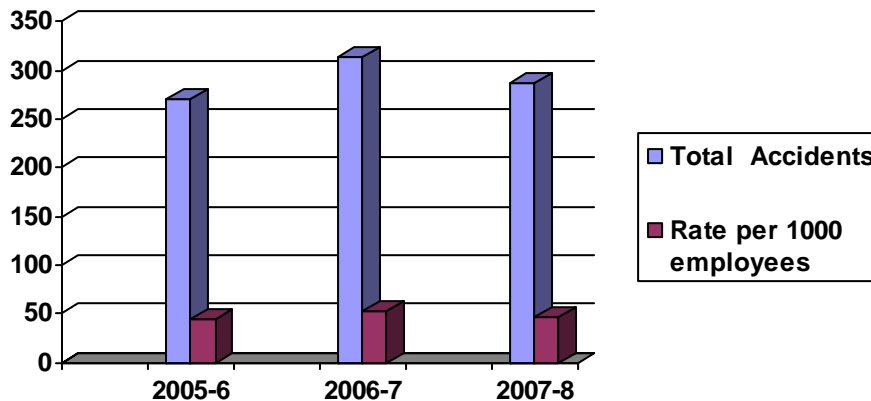
Any queries regarding this report please contact: Jo Revell Health and Safety Manager 383625

## Appendix 1

### REACTIVE SAFETY PERFORMANCE –Accidents, Violent Incidents and Enforcement

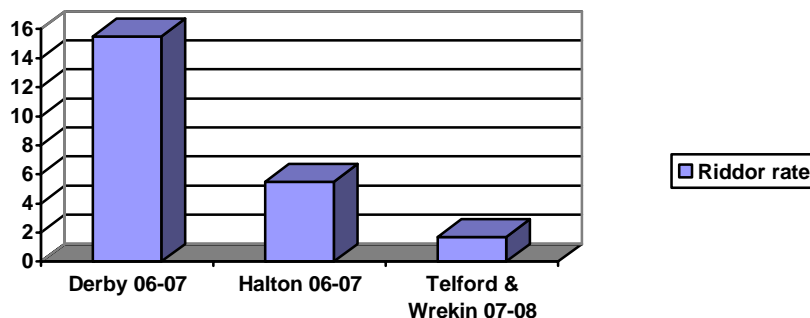
#### 1.1 ACCIDENTS TO EMPLOYEES: April 2007 –March 2008

Chart 1 Total employee accidents and accident rate



1.1.2 Our notifiable accident rate (ie serious accidents reportable under the Reporting of Incidents, Disease and Dangerous Occurrences Regulation (RIDDOR)) to employees is 1.7 per 1000 (2.9 last year) whilst our overall accident rate 46 per 1000 which is also decrease from last year.

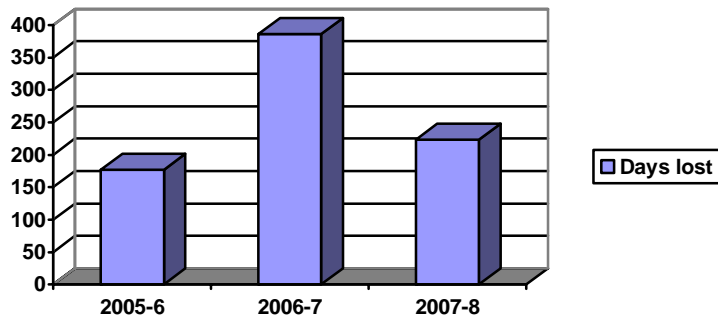
Chart 2 Comparison of Telford & Wrekin notifiable accident rate to employees with that of other excellent authorities from our family group.



1.1.3 The causes of accidents resulting in any time lost were as follows:

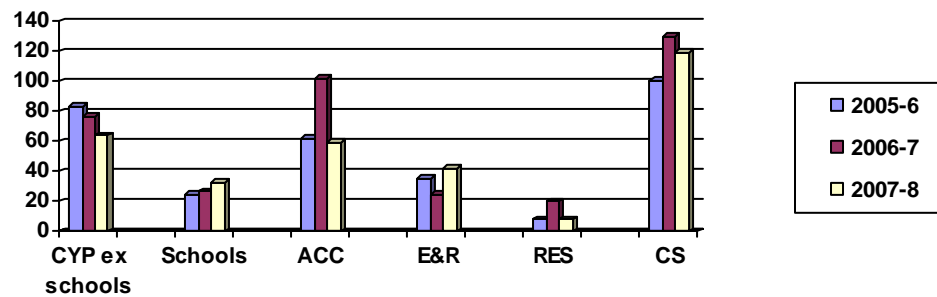
- 7 were due to slips trips or falls on the same level
- 3 whilst lifting and carrying (a manhole cover, a safe and a mop bucket)
- 2 falls from height (both down stairs)
- 2 being struck by a falling object (a window and a table)
- 1 was affected by fumes

**Chart 3 Employee days lost due to accidents**



1.1.4 Days lost due to accidents have stabilised again after the rise experienced last year, a reduction to 223 from 386.

**Chart 4 employee accidents rate by portfolio over the last three years**



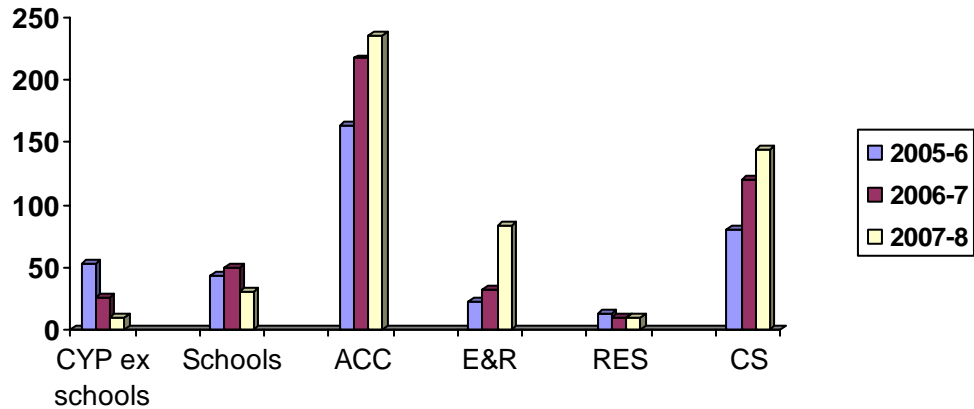
**Key to chart abbreviations**

Abbreviation	Portfolio
CYP ex schools	Children and Young People (excluding schools)
Schools	Children and Young People (schools only)
ACC	Adult & Consumer Care
E&R	Environment & Regeneration
RES	Resources
CS	Community Services

1.1.6 Accident rates vary widely between portfolios due to the nature to the work carried out.

## 1.2 VIOLENT INCIDENTS towards employees:

**Chart 6 Rate of violent incidents to employees by portfolio over the last three years**



1.2.1 A violent incident is any incident in which an employee is verbally or physically abused, threatened or assaulted in circumstances arising out of the course of his/her employment. 68% of the incidents reported in 2007-8 involved physical assault.

1.2.2 There were 340 violent incidents reported 2007-8

1.2.3 50% of the reported violent incidents in Adult & Consumer Care were perpetrated by just twelve clients. Further investigatory work is being carried out to identify ways to reduce these incidents. Given the increasingly complex nature of adult social care clients' needs, managing these in a way that also protects employees will be an ongoing issue.

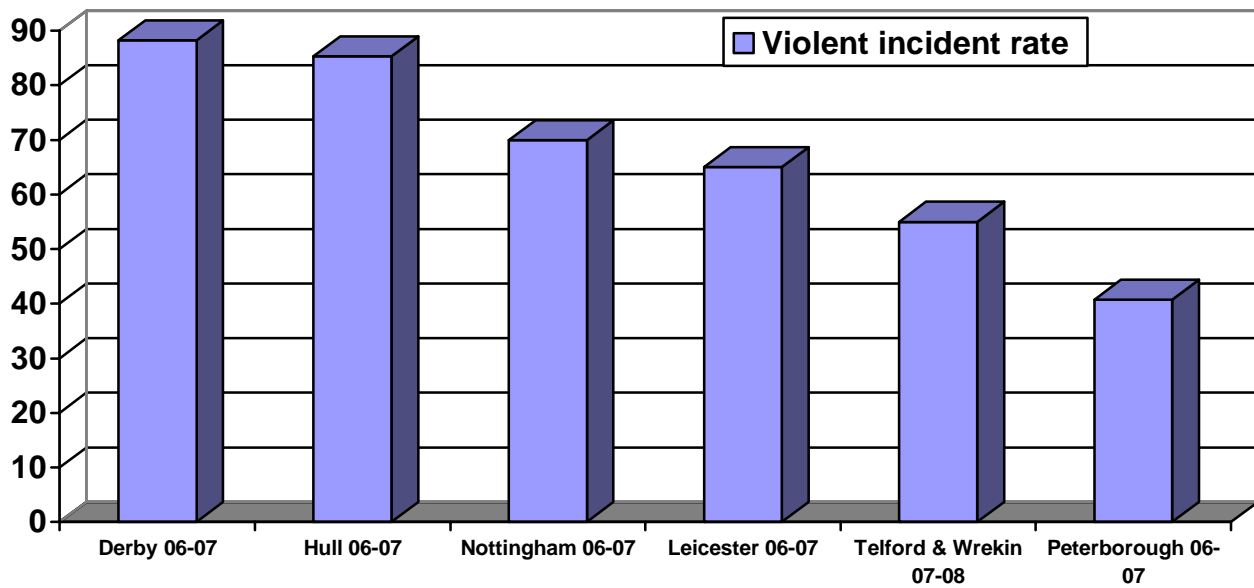
1.2.4 During 07-08 one violent incident in ACC resulted in 3 days being lost. No other days were lost as a result of violent incidents.

1.2.5 Many of the violent incidents arise out of interactions with vulnerable service users who often are unable to appreciate the effect of their actions. In these cases work is done to try to identify and control the triggers of this unacceptable and inappropriate behaviour rather than taking a punitive approach which would not be understood and would be ineffective.

1.2.6 Where the violent incident is perpetrated by someone who should be well able to understand and control their actions then the course of action taken can range from warning them about their behaviour to reporting them to the Police so that legal action can be taken if appropriate. In some cases persons are placed under restrictions as to their access to Council buildings or Council officers and in extreme cases of continuing problems a court

injunction may be sought. Details of such individuals who are likely to pose an ongoing risk to employees are shared via a secure, confidential system with other staff who need to have contact with them. This system allows specific advice to be given on the protective measures that employees need to take when providing a service to that person.

**Chart 7 Comparison of Telford & Wrekin violent incident rate to employees with that of other local authorities**



### **1.3 ENFORCEMENT ACTION AND HEALTH AND SAFETY EXECUTIVE INVOLVEMENT (HSE)**

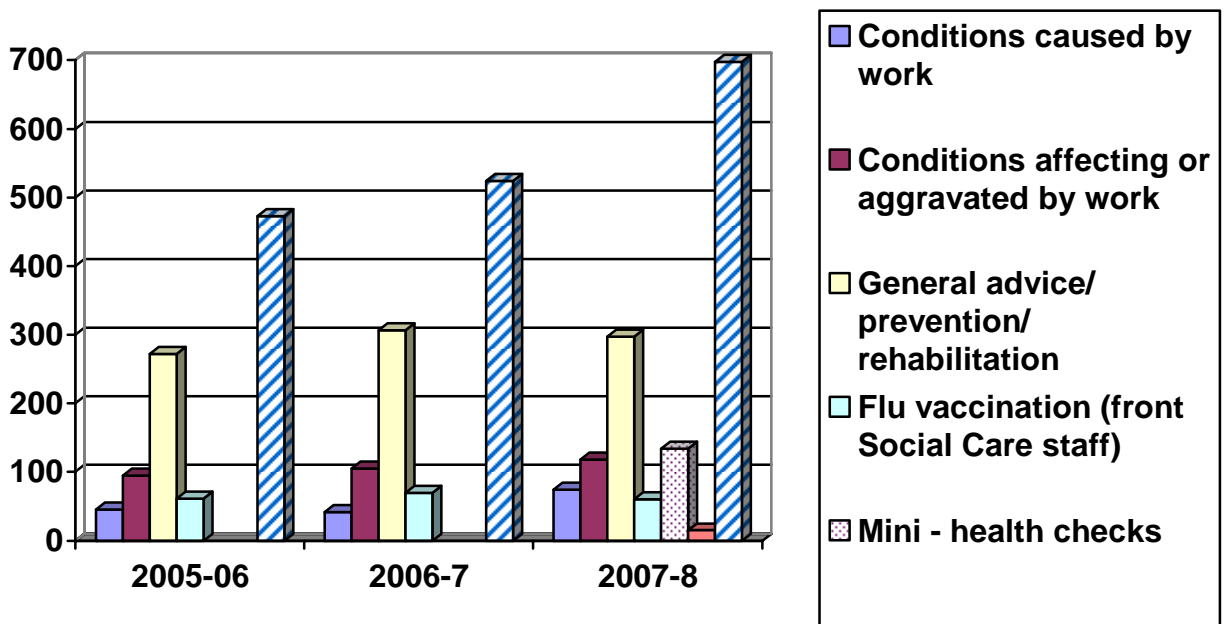
There has been no HSE involvement or enforcement this year.

## APPENDIX 2

### HEALTH PERFORMANCE - Occupational Health, Counselling Services and stress related sickness absence

#### 2.1 CONSULTATIONS WITH OCCUPATIONAL HEALTH:

Chart 8: Reasons for consultations with occupational health



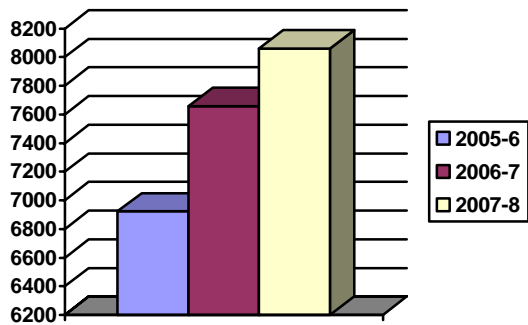
2.1.1 3.1 The Occupational Health Service continues to be increasingly well used. Recent changes have enabled more proactive health promotion to be carried out in the form of mini health checks.

3.2 In 2007-8 1488 pre employment medical questionnaires were processed ie 124 per month. The system for processing these has recently been streamlined to enable more time to be devoted to consultations and proactive health promotion work.

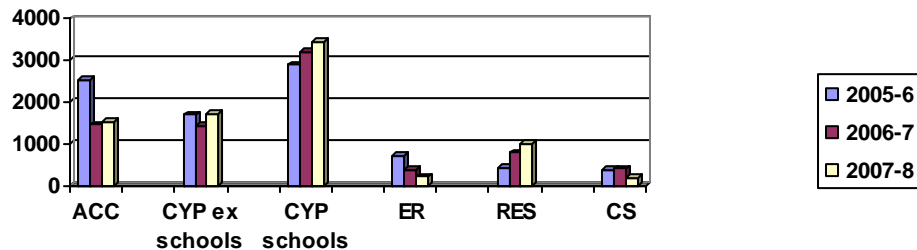
#### 2.2 CONFIDENTIAL COUNSELLING SERVICE

2.2.1 Non physical causes of sickness absence (which include stress and anxiety) are one of the major causes of sickness absence across the Council (see chart 9). The variations over time by Portfolio of sickness absence due to stress, anxiety or depression are shown in chart 10 below. In the Portfolios showing a rise in this type of sickness absence work is being done to examine how employees can be further supported.

**Chart 9 Days absent due to non physical illness**



**Chart 10: Full Time Equivalent (FTE) days lost due to non physical causes by portfolio in the last three years**



2.2.2 Confidential counselling sessions are available for employees who need some support to resolve difficulties at home or at work that may be causing stress.

2.2.3 In 2007-8 221 employees used the service on average using 2.7 sessions. 62% of those using the service kept working. Chart 11 shows the breakdown of usage of the employee counselling service by Portfolio.

2.2.4 The reasons for seeking counselling were given as work related in 28% of cases, home related in 49% and both in 23%. This is a significant shift from a stable pattern over previous years where the breakdown was typically a third in each category.

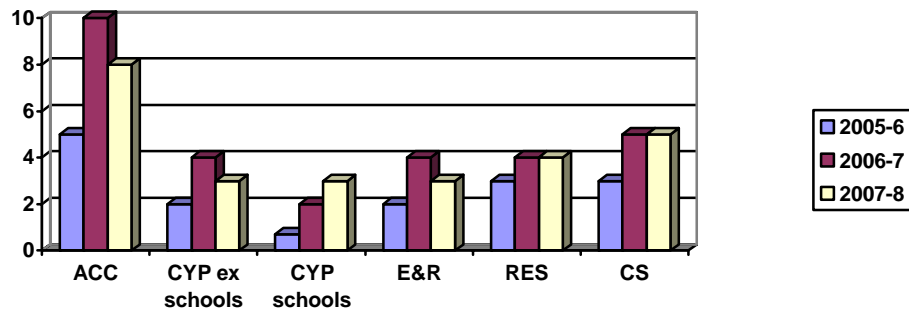
2.2.5 The counselling service is valued by employees and some typical comments from evaluation of the service include:

*“Initially I was reluctant to take part, concerned about impartiality and confidentiality but these fears were soon allayed. Very empathetic and supportive counsellor”*

*“The counsellor has been brilliant and supported me through a very anxious and stressful time. This has enabled me to return to work.”*

*“I found the counsellor to be very approachable, put me at ease, showed me ways of helping me through a traumatic life event. At the time, my line manager was on long term sick leave, I didn’t want to disturb other colleagues. This service was a saviour to me getting on with work and life despite everything life threw at me.”*

**Chart 11: Percentage of employees using the counselling service over the last three years**



## APPENDIX 3

### PROACTIVE HEALTH AND SAFETY PERFORMANCE

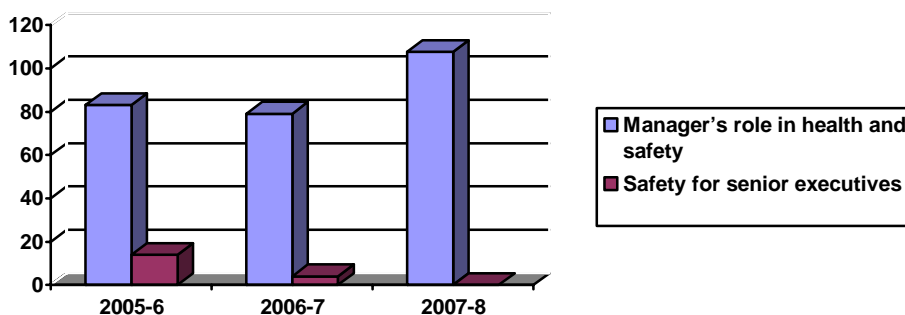
#### 3.1 HEALTH AND SAFETY TRAINING

3.1.1 Health and safety training is itself a legal requirement and the key to achieving health and safety compliance in other areas as well. It can empower employees to take action to make their work places safer for themselves, their colleagues and anyone else affected by their work.

3.1.2 In 2007-8 248 new employees attending Welcome to Telford & Wrekin received induction health and safety training.

3.1.3 Due to their roles and responsibilities some employees will require formal training in some aspects of health and safety. Managers' competence in managing health safety is key to maintaining and improving health and safety standards throughout the Telford & Wrekin Council. It was encouraging that the level of up take on this training has remained at a high level below senior executive level (see chart 12). An additional 24 managers received training on the manager's role in health and safety via the Adult Consumer Care health and safety training programme.

**Chart 12 Attendance by managers on corporate health and safety training**



3.1.4 As many of the senior managers had received training in 2005-6 there was a lower demand in subsequent years. The training will be re-offered annually for the benefit of new Directors and Heads of Service.

3.1.5 A wide range of other health and safety training has been undertaken by employees including legionella, ladder safety and manual handling.

3.1.6 Employees are trained as first aiders to provide first aid cover in the majority of the Council's operational buildings. For larger establishments, especially where there will be large numbers of the public present, defibrillator training is also provided to enable assistance to be given promptly in case of collapse from a heart attack.

## **3.2 REVIEWING HEALTH AND SAFETY**

3.2.1 A corporate programme of reviews of health and safety management has focussed part of the Children and Young People portfolio and on Environment & Regeneration portfolio in the last year. Managers are asked to carry out a detailed health and safety audit to inform this process. Action plans for improvements have been drawn up and agreed with managers where necessary.

3.2.2 Schools also carry out a detailed safety audit at least once a year, which is used to target help and advice to enable them to comply with health and safety regulations.

## **3.3 EMPLOYEE CONSULTATION**

3.3.1 During the year the Corporate Health and Safety Committee met four times to consider health and safety issues of Council wide significance. The Trade Unions health and safety representatives raised a number of issues of concern to their members including thermal comfort, domestic violence, risk assessment, voice care, consultation arrangements and building security.

## **3.4 MAINTAINING SAFE PREMISES/STRUCTURES**

3.4.1 The Council is continually active in trying to ensure the safety of the buildings and structures it is responsible for. The work is prioritised by means of risk assessment and includes a wide range of activities. A few examples are given below:

- Managing asbestos
- Maintaining water systems to ensure they pose no risk from Legionella.
- Improvements to fire detection, warning and evacuation systems.
- Road safety improvements.
- Land stability works.

## **3.5 HEALTH AND SAFETY AWARDS**

3.5.1 Much good work is carried out on a daily basis to try to ensure legal compliance and good practice in health and safety. This is helped by the activities of the network of health and safety advisors and co-ordinators across the Council who support managers dealing with a wide range of health and safety issues.

3.5.2 During the year a further five awards have been made to:

- Windmill Primary School
- Lilleshall Primary School
- Building Services
- Community Services at Tan Bank
- Community Centres team

### **3.6 CORPORATE OCCUPATIONAL HEALTH AND SAFETY TEAM**

3.6.1 The Council's occupational health service has continued to make efficiencies to free up more time to devote to provocative consultation work.

3.6.2 In the last year, with contributions from the net work of health and safety advisers and co-ordinators in the Portfolios the Occupational Health and Safety team has produced or revised a number of policy and guidance documents. These include; the Council's health and safety management strategy, managing health and safety in construction, domestic violence, thermal comfort and a health and safety policy for suppliers.

### **3.7 PROGRESS ON THE TELFORD & WREKIN COUNCIL PLAN FOR HEALTH AND SAFETY**

**3.7.1 The key actions selected for 2007/2008 are shown below with a comment on the progress made in italics.**

- Monitor the health and safety performance of construction related consultants and contractors. *This is being achieved via in house monitoring as part of project management and buying in external monitoring services. Any poor performance on site is followed up with the contractor concerned.*
- Embed our expectations on health and safety standards with all contractors. *Work has been done with procurement to embed the use of CHAS (Contractors Health and Safety Scheme) standards and develop a health and safety policy for suppliers too.*
- Promote employee health. *134 employees took up mini health checks. Employees are also encouraged to make use of health and fitness facilities provided by the Council's leisure services.*
- Support actions needed to follow up employee survey to improve health, safety and wellbeing. *Action plans are being developed in each portfolio.*
- Monitor health and safety performance on at least a quarterly basis throughout the council, taking corrective action where appropriate. *Arrangements have been made for the senior management teams in all Portfolios to receive and act on these reports.*

**3.7.2 Proposed key actions for 2008/2009 are as follows:**

- Promotion of employee health and wellbeing.
- Embedding the health and safety strategy across the Council.