

| Report for: | Governance, Audit and Risk Management Committee |
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| Date of Meeting: | 21st September 2022 |
| Subject: | Annual Health and Safety Report for 2021-2022 |
| Responsible Officer: | Tracey Connage, Director of HR&OD |
| Exempt: | No |
| Wards affected: | N/A |
| Enclosures: | Appendix 1 – Analysis Report for Accidents and Incidents Quarter 1 To Quarter 4 (1st April 2021 – 31st March 2022)  Appendix 2 – Accident/Incidents Trends Appendix 3 – H&S Strategy 2021-2022 and Corporate H&S Performance Plan 2021-2022  Appendix 4 – Occupational Health Overview 2021-2022 Appendix 5 – Terms of Reference Appendix 6 – Corporate Health and Safety Policy 2021-2022 |

| Section 1 – Summary and Recommendations |
| --- |
| This report summarises the Council’s health and safety performance for the year 1st April 2021 to 31st March 2022, providing an update of activities and giving information on outcome measures –Covid-19 response, training, audits and accidents. This report also includes the Health & Safety Strategy, Corporate Health and Safety Performance Plan and Policy. Information about Occupational Health is additionally provided as this does not sit within the Corporate Health & Safety.  **Recommendations:**  The Committee is requested to:   1. Note the Accidents and Incidents report for information 2. Note the Health & Safety Strategy and corporate health and safety plan as set out in Appendix 4 3. Note the approved Corporate Health & Safety Policy in Appendix 6 4. Note the information on Occupational Health |

## Section 2 – Report

## **Executive Summary**

1. 1. The Corporate Health and Safety Service has continued to develop the health and safety management system and to provide support and guidance across the organisation during the period April 2021 to March 2022.
   2. This same period forms the third and final year of the April 2019 - March 2022 strategy plan which has now concluded. The successful implementation of this strategy has had a significant effect with both raising safety performance standards and providing assurances that the safety management system is fit for purpose.
   3. Safety compliance data and performance measurement have undoubtably been affected by the Covid 19 pandemic during this period but there remains strong indicators within this report to suggest the growing effectiveness of the safety management system and of improvement with associated health and safety behaviours.
   4. An assurance of continued resilience with the Corporate Health and Safety Service and with the management and mitigation of foreseeable risk comes with the new Corporate Occupational Health/Safety and Wellbeing Strategy for April 2022 - March 25 which has now been developed and will be released in April 2022.
   5. The key work streams during the period have been:

* Leading on plans to monitor operational and occupational risk assessments with respect to Harrow Council’s Coronavirus (Covid-19) control plans which involved:
* Developing a risk assessment template that was used across the Council and was tailored to suit specific needs in response to the Covid-19 pandemic.
* Developing and supporting managers to undertake risk assessments

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* Gold delegated to Silver the responsibility for approving all the pandemic risk assessments as a key part of the governance on this matter. Reviewed risk assessments are recorded on a tracker and monitored by the Corporate Health and Safety Board (CHSB)
* The annual review of the Corporate Health & Safety Policy (**see Appendix 6)**
* Reviewed a number of health and safety policies and Codes of Practice.
* Provision of health and safety support, advice and guidance across resources, community and people directorates.
* Reviewed and amended of the Corporate Health and Safety Handbook.
* Continued delivery of health and safety training (Please refer to Health and Safety Training section on page 10 for detailed information)
* 30 staff have completed level 3 health and safety (Highfield accredited)- 3-day course
* 51 employees completed a level 3 risk assessment (Highfield accredited)-3 days course
* 90 employees completed a training on accident reporting, undertaking audits and risk assessments using the health and safety management software (SHE Assure)
* Inspections, audits, site visits, monitoring and investigation of accidents/incidents
* 34 audits were undertaken on schools and children centres in 2021-2022 with an average score of 70% and 82% respectively.
* Raised action are Ongoing.
  1. The management of the occupational health service and employee assistance programme has stayed with HR, due to direct links with employment and sickness.
  2. Key incident indicators from the period April 2021 to March 2022 are as follows:
* No enforcement action from the HSE.
* There has been a 53% increase in the number (646) of accidents/incidents reported in comparison with the previous year. These increases are attributed to the full resumption of schools in 2021 -2022 after their partial closures during lockdowns and some staff were also able to work in offices compared to the Covid-19 pandemic period in 2020-2021 which saw schools closed to the vast majority of children and a majority of staff working from home. This can account for the increase in the number of accidents reported.
* There has been a decrease in the number of incidents reported as a RIDDOR from data compared from last year.

Data compared across 3 years shows 2019/20 had (9 out of 1105), 2020/21 had (15 out of 298), while 2021/22 had (13 out 646).

* Lost time injuries (LTI[[1]](#footnote-1)) made up 2.2% of all incidents reported within this time period. Compared with the previous year, this is a decrease (2020/21 had13 LTI in 298 incidents, 2021/2022 had 14 LTI out of 646 incidents,). There were no lost time injuries in the People and Resources directorates. There is no quantified trend that accounts for this decrease in LTI.
* Academies and Voluntary Aided Schools do not report accident/incidents to the corporate health and safety team. Their governing bodies have a legal duty under the Health and Safety at Work etc. Act 1974 to approve the strategic vision for the school. For community schools who buy into the SLA, The Corporate Health and safety has been working in partnership with the headteachers and promoting continuous improvement in the performance of each school’s health and safety arrangements. The audits program is key for promoting continuous improvement.
* The accident/incident data for community schools is generated from the incident reports on SHEAssure system. This is only available for schools that buy into the Corporate Health and Safety level service agreement.

## **Background**

* 1. This report details the annual safety review of health and safety performance to enable the Council to determine its effectiveness in managing risk and address any shortcomings.

## **External Assurance**

* 1. In 2016 an external audit was conducted, leading to a full review of all aspects of Corporate Health & Safety including the governance, resulting in an initial action plan that was taken to Corporate Strategic Board in 2017 and GARMS in 2018.

The Corporate Health and safety structure was developed to support the council and meet specific aims listed below. This will fulfil some of the areas highlighted by the external auditor in the 2016 audit:

* To ensure future service is robust, fit-for-purpose, high calibre team
* Integrate all H&S functions into single corporate H&S function (CH&S)
* CH&S to be part of Corporate Resources Directorate – HR and OD
* New job profiles with essential professional qualifications and credentials

## **Improvement Plan**

* 1. Following the completion of the external audit in January to March 2016, a series of actions were approved by the Corporate Strategic Board in September 2017 and Governance, Audit and Risk Management Committee (GARMSC) in October 2017. Subsequently, in 2022, a three year Health and Safety strategy document including a Corporate health and safety performance plan was produced setting out the aims and objectives for the Council.
  2. The action plan is monitored by the Corporate Health & Safety Board that meets on a 6 weekly basis to ensure implementation. Focus is on transparency and ensuring all are leaders and staff are aware of their responsibilities and that effective governance is in place.
  3. As part of this, and in line with legislative requirements, the Corporate Health & Safety Policy for the Council has been amended and updated, and is included in Appendix 6
  4. High priority will be placed on outstanding actions from the corporate health & safety performance action plan, ensuring they are implemented. In particular;
  + Management self-audits
  + Introduction to incident investigation course for first line managers
  + General Health and safety audits corporately and for schools

## **Health and Safety Policy and Guidance**

* 1. A review of existing policies and codes of practice was undertaken this year, including the overarching health and safety policy which was signed off by the Council Leader and Chief Executive. This is to ensure Harrow Council meets its obligations under the Health and Safety at Work Act (HASAWA)1974.
  2. The following documents were reviewed.
* Asbestos policy
* Legionella Policy
* PPE Policy
* Lone working policy
* Manual Handling
* Corporate Health and Safety Policy
* H&S Handbook
* Accident & Incident Code of practice

**Health and Safety Groups**

* 1. Due to the Covid-19 pandemic, there were few opportunities for face-to-face Health and Safety meetings. The Corporate Health and Safety Board (CHSB) continued to hold meetings on Microsoft Teams, Silver group met weekly to discuss building secure risk assessment, and the Head of Corporate Health & Safety met with stake holders and unions monthly to discuss building secure risk assessment.

## **Safety Culture**

* 1. Due to the pandemic, there was an instruction from government which led to a majority of staff working from home. Safety circles have now restarted in some directorates. Not all directorates have carried out all quarterly safety circle meetings, principally because they are not on the corporate estates. Corporate communications and briefing on covid19 happened on a quarterly basis. School newsletters were also sent out regularly.
  2. The Health and Safety Handbook is available to all staff. However, there has been an update to its design and contact numbers. This is in the approval stage. A copy of the handbook can be downloaded from SHEAssure document library, [reference 133](https://app.uk.sheassure.net/harrow/p/portal/documents/Policy).

## **Risk Assessments, Health and Safety Visits, Inspections and Audits**

* 1. Site visits, Risk Assessments, Audits, Inspections and Accident investigations have continued to be performed by the Corporate Health and Safety Service through the organisation.
  2. Internal Health and Safety Audits were undertaken

34 audits have been carried out in Children Centres and in Schools who buy into SLA and a couple of those who didn’t buy into SLA also 20 Schools bought the SLA service in 2021-22

An overall average score of 70% was obtained in Schools while Children Centres had an average of 82%.

26 audits were carried out in Environmental services, teams included are Facility management, Refuse, CA Site, Street Cleaning, Parks, Grounds-Maintenance, Gardening – services, Transport, Fleet -Management, Capital-Programme, Highways and in SNT.

* 1. 119 new risk assessments were recorded and uploaded on SHE assure system.
  2. 112 risk assessments have been amended within this period.
  3. Fire Risk Assessments were completed:

47 FRAs on corporate buildings

437 Council Housing Fire Risk Assessment completed.

33 FRA’s was Received from schools. .

* 1. 54 Council Housing Fire Safety Audits completed
  2. Asbestos re-inspection survey was carried out on 50 corporate buildings, 10 community schools and schools with an asbestos SLA. 431 Asbestos Surveys were also completed in Council Housing.

* 1. Senior management safety tours were substituted with COVID building risk assessment due to the pandemic. Heads of Services, senior managers, divisional directors, and the silver group were all part of the review process and offered amendments on the RA process. The Building Risk Assessment covers key areas required for compliance, hence it can serve as a safety tour.
  2. Management Self Audits - Due to the pandemic and government guidelines on a majority of staff working from home, this particular objective was not met.

## **Occupational Health**

* 1. Health Management Limited (HML) continues to provide the occupational health service and the employee assistance programme (EAP). The service is overseen by HR. The services continued to carry out online appointments during the Covid pandemic.
  2. The Occupational Health Service continues to provide adequate health surveillance, return to work rehabilitation, health promotion and reduction of work-related sickness absence. 59 staff members have currently had the Hep B vaccination, there was no target set with numbers of staff to have the vaccination.
  3. **Appendix 4** provides a breakdown of Occupational Health referrals for information
  4. The Employee Assistance Programme (EAP) has continued to be promoted throughout the year. Employees can freely obtain a range of services including specialist counselling and financial advice.

## **Promotion of Health, Safety and Wellbeing**

* 1. Public Health is still leading on the Council’s Outbreak Control Plans for COVID-19 and have provided the Council with advice over this.

* 1. Practical initiatives and steps have also been taken to support staff’s mental health and wellbeing such as support resources on the intranet and the Wellbeing Wednesdays when there is a variety of activities, bereavement drop-in sessions and other events on the wellbeing calendar
  2. As planned a Health and Wellbeing Strategy was put together to support staff mental health. The Council has trained 37 Wellbeing champions in total. 9 from Communities, 3 from People and 15 from Resources .

## **Incidents reported**

* 1. Incident performance is monitored by the Corporate Health and Safety Board (CHSB) every six weeks. The data is considered both in terms of volume and through key performance indicators which allow consideration of the number of employees and number of employee hours worked
  2. There have been 232 employee related incidents in this period (this includes all near misses and not just accidents), which is 36% of all incidents/accidents reported. 8 these incidents have required reporting to the Health and Safety Executive as a RIDDOR. This has resulted in loss of 129 working days.

* 1. Incidents to non-employees where it relates to the organisation’s activities or the use of its facilities has also been recorded. 51% of these incidents relates to pupils, agency employees, member of the public and clients. Others contribute just 13%.
  2. This year the top 5 accident types across the corporate estate, including schools which have signed up to the Service Level Agreement with Corporate Health & Safety, were –
* Physical Assault (Due to challenging behaviour) 176,
* Slipped, Tripped and fell on the same level 128
* Hit Something Fixed or Stationary (39).
* Hit by a moving, Flying or falling object 35
* Other – Please add details 35

Please note, the majority of the above incidents were in special need schools.

* 1. Across the Council, 13 RIDDOR types of incident were recorded. 9 of those were employee incidents while 4 related to Others (Pupils, Clients). A further breakdown is included in **Appendix 1**
  2. **Community directorate accounted for 13% out of 646 incidents recorded for the year 2021/22.** Of the 85 incidents recorded, 5 of the most frequently reported incidents were Slips, Trips and Falls, Physical assault (due to challenging behaviour), Incident with Verbal Abuse, Incident with threatening behaviour, and Hit something fixed or stationary. The severity of a high proportion of the incidents reported is minor.
  3. **Peoples directorate accounted for 10% out of 646 incidents recorded for the year 2021/22.** Of the 62 incidents recorded, 5 of the most frequently reported incidents were Physical contact (Not Assault), Physical assault (due to challenging behaviour), Slips, Trips and Falls, Self Harm, and Hit Something Fixed. The majority of these incidents were in children and young people services-. The severity of a high proportion of the incidents reported is minor
  4. **Resources directorate accounted for 0.2% out of 646 incidents recorded for the year 2021/22**. The 1 incident recorded was slips, trips and fell on same level.
  5. **Schools accounted for 77% out of 646 incidents recorded for the year 2021/22**. Of the 498 incidents recorded, 5 of the most frequently reported incidents were Slips, Trips and Falls, Physical assault (due to challenging behaviour), Hit by a moving, flying or falling object, hit a fixed object and Others. The majority of these incidents were in special education. The severity of a high proportion of the incidents reported is minor.

## **Health and Safety Training**

* 1. The Training programme has continued to be delivered by the Corporate Health and Safety Service, but within the bigger remit of the Training Academy since 2017
  2. The Commercial Safety Team has worked with the Training Academy to ensure it is an accredited training centre for Highfield and Chartered Institute of Environmental Health (CIEH); offering accredited and bespoke courses across all areas of health & safety, food safety and public health matters.
  3. These courses are available on the training calendar and the service will continue to monitor incidence performance, using the improved SHE Assure software arrangements, against delivered training to identify positive impacts and areas where further training is necessary
  4. Trainings completed in this timeframe include.
* 30 supervisors and first line managers completed level 3 health and safety (Highfield accredited)- 3-day course
* 51 employees completed a level 3 risk assessment (Highfield accredited)-3 days course
* 90 employees completed a training on accident reporting, undertaking audits and risk assessments using the health and safety management software (SHE Assure)
  1. Plans are underway to ensure first line managers and supervisors attend the 1-day Introduction to Incident Investigation course. This will be carried out by Highfield at the training academy
  2. It has been noted that the provision of an online induction training course through the learning pool has aided the greater completion of the course.
  3. Work is taking place with the Learning and Development Team to improve the induction training as well as the mandatory online health & safety training course.

## **Legislation Update**

* 1. The period 2021/22 saw some changes in legislation, guidance, codes of practice, health & safety updates and general safety notices as follows:
* **COVID-19: people with COVID-19 and their contacts (24 February 2022) updated on 1 April 2022** - There is no longer a legal requirement for people with coronavirus (COVID-19) infection to self-isolate, however for those with any of the main symptoms of COVID-19 or a positive test result, the public health advice is to stay at home and avoid contact with other people. There is separate guidance for those [working in health and social care settings](https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings)
* **PPE Regulations 1992 (amended 2022)** - Employers with both employees and limb (b) workers will assess the risk and ensuring suitable PPE is provided, when needed, to all people that fall under the definition of worker. The PPE provided must be compatible, maintained and correctly stored. All workers must use the PPE properly following training and instruction in its use from their employer. If the PPE you provide is lost or becomes defective, your worker should report that to you.

Employers with only limb (b) workers will need to ensure that workers are provided with PPE free of charge, where required. This means assessing the residual risk once all other measures (such as engineering controls) have been taken

* **Preventing and mitigating COVID-19 at work: policy brief, 19 May 2021-** Workplaces outside of healthcare facilities can be also settings for transmission of COVID-19. Outbreaks of COVID-19 has been reported in various types of workplaces and job categories. This joint WHO/ILO policy brief provides a summary of the evidence for transmission of COVID-19 in general workplaces and an overview of WHO and ILO recommendations for prevention and mitigation of COVID-19 and for protecting health and safety at work in the context of the pandemic.
* **15th March 2022 – Mandatory Vaccination revoked** - On this date, the government revoked regulations which required workers in Care Quality Commission regulated care homes to be vaccinated against Covid-19 as a condition of employment from 11 November 2021. The statutory requirement for other health and care workers to be vaccinated was due to be introduced on 1 April 2022 but was also revoked
* **ISO 45003:2021 - Occupational health and safety management** - This document gives guidelines for managing psychosocial risk within an occupational health and safety (OH&S) management system based on ISO 45001. It enables organizations to prevent work-related injury and ill health of their workers and other interested parties, and to promote well-being at work.

It is applicable to organizations of all sizes and in all sectors, for the development, implementation, maintenance and continual improvement of healthy and safe workplaces

* **The Ammonium Nitrate Materials (High Nitrogen Content) Safety (Amendment) Regulations 2022-** The Secretary of State, in exercise of the powers conferred by sections 15(1) and (2), and 82(3)(a) of, and paragraphs 1(4) and 2(1) of Schedule 3 to, the Health and Safety at Work etc. Act 1974([1](https://www.legislation.gov.uk/uksi/2022/29/introduction/made#f00001)), following consultation with the Health and Safety Executive, the Office for Nuclear Regulation and such other bodies as appeared to the Secretary of State to be appropriate in accordance with section 50(1AA)([2](https://www.legislation.gov.uk/uksi/2022/29/introduction/made#f00002)) of that Act, makes the following Regulations.
* **The Radiation Emergency and Consultation Regulations 2021 -** The Secretary of State makes these Regulations in exercise of the powers conferred by section 15(1) and (3)(a) of, and paragraph 20 of Schedule 3 to, the Health and Safety at Work etc. Act 1974([1](https://www.legislation.gov.uk/uksi/2021/1110/introduction/made#f00001)) (“the 1974 Act”).

The Secretary of State makes these Regulations independently of any proposals made by the Health and Safety Executive, as provided by section 50(1)(b) of the 1974 Act having consulted, in accordance with section 50(1AA) of that Act([2](https://www.legislation.gov.uk/uksi/2021/1110/introduction/made#f00002)), theExecutive, theOffice for Nuclear Regulation and such other persons as appeared to the Secretary of State to be appropriate.

* **The REACH etc. (Amendment) Regulations 2021 -** The Secretary of State makes these Regulations in exercise of the powers conferred by section 8(1) of, and paragraph 21 of Schedule 7 to, the European Union (Withdrawal) Act 2018(1).
* The requirements of paragraph 3(2) of Schedule 7 to that Act (relating to the appropriate Parliamentary procedure for these Regulations) have been satisfied**.**

## **Stakeholder Feedback**

* 1. The Corporate Health & Safety Board is now chaired by the Director of HR and OD. It was formally chaired by the Corporate Director Community.
  2. The Corporate Health & Safety Board includes both recognised Trade Unions, who continue to be proactive in their approach to health & safety. The terms of reference for this Board is shown in **Appendix 5**
  3. Collaboration with the trade unions by sharing of relevant documents and addressing raised concerns has no doubt impacted positively on the implementation of health and safety within the Council. One notable area is the access to risk assessments, safe systems of works, safety tours, policies, procedures and all other documents available on the SHEAssure software which is the Council’s health and safety management software.

## **Management Assurance**

* 1. Monitoring of health and safety performance within the organisation will continue to sit with the Corporate Health & Safety Board, which will provide updates to the Corporate Strategic Board.
  2. Quarterly updates around performance, Health and safety strategy & Corporate Health and safety performance plan, accident/incidents data, and policies have been presented to the Corporate Strategic Board.

## Plans for April 2022 - March 2023

* 1. The key actions for 2022/23 include the following:
* To implement a new corporate health and safety structure that supports the whole of the Council with qualified health and safety professionals.
* The introduction of agile and flexible working will impact the implementation of health and safety. New policies have been developed and safe working procedures will be developed to reflect new work systems, the display screen equipment (DSE) assessment will be monitored to ensure compliance across the council.
* Corporate Health and Safety will continue to lead on plans to monitor operational and occupational risk assessments with respect to Harrow Council’s Coronavirus (Covid-19) control plans.
* Reviewed risk assessments on the tracker will continue to be monitored by the Corporate Health and Safety Board.
* Corporate take up of the Assure SHE Software as the recognised software system for all health and safety matters including reporting of incidents especially work-related incidents that happen while working from home. Focus will be placed on training individuals and teams on the use of SHE Assure software.
* Health and safety support and advice within Harrow Council.

* Training programme across the Council to ensure all receive the necessary training, this training will be delivered by the training academy, Highfield.
* Implementation of the Health and Safety Strategy and the Corporate Health and Safety Plan

## Legal Implications

* 1. The Health and Safety at Work etc Act 1974 requires employers to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees, and to prepare (and review) a policy in relation to it.
  2. There has been no enforcement action from the HSE in this time frame.

## Financial Implications

* 1. There is a revenue budget of £213k (net) to support health and safety function across the organisation.
  2. There have been no enforcement action/fines in this time frame.

## Risk Management Implications

* 1. Risks included on corporate or directorate risk register? **Yes**
  2. Separate risk register in place? **Yes**
  3. The relevant risks contained in the register are attached/summarised below

The following key risks should be taken into account when agreeing the recommendations in this report:

| Risk Description | Mitigations | RAG Status |
| --- | --- | --- |
| Failure to fulfil the Council’s Health & Safety duties leading to a harmful event for individual/individuals for whom the Council is responsible leading to litigation | Continual monitoring of key measures listed in the corporate risk register 2022/23 to manage risk to ensure they are being implemented and are effective.  Review of the H&S service and also its structure to enable it to be sustainable in the long term for future council requirements  Implementation of the further actions listed in the corporate risk register. |  |

## Equalities implications / Public Sector Equality Duty

* 1. Protected characteristics are constantly measured as part of any health & safety system, especially aspects of age and disability.

## Council Priorities

* 1. The delivery of health and safety management is integral to and supports the achievement of all Corporate Priorities.

## Section 3 - Statutory Officer Clearance

**Chief Officer:** Tracey Connage



Signed by the Divisional Director HR O&D

**Date: 23rd June 2022**

## Mandatory Checks

### Ward Councillors notified:

## Section 4 - Contact Details and Background Papers

**Contact:** John Griffiths, Health and Safety Compliance Manager.

**Background Papers**:

* Analysis Report for Accidents and Incident Report
* Health & Safety Strategy & Corporate Health & Safety Performance Plan,
* Occupational Health Overview
* Corporate Health and Safety Policy

If appropriate, does the report include the following considerations?

1. Consultation NO

2. Priorities NO

**APPENDIX 1**

**Accident / Incident Analysis Report for Quarter 1 to Quarter 4 (1st April 2021 – 31st March 2022) - All Directorates**

**Number of Incidents recorded** **across the council-Including Schools**

|  |  |
| --- | --- |
|  | In 2022, the total incident count across the council was 646 which is an increase of 348 (53%) from the previous year. These increases are attributed to the resumption of schools in 2021 -2022 and some staff were able to work in offices as well when compared to the Covid-19 pandemic period in 2020-2021 which led to schools shutting down and majority of staff working from home. This can account for the increase in the number of accidents reported  Schools had the highest number of incidents with 498 records, Community had 85 incidents while people and resources had 62 and 1 respectively. |

**Classification by Who was Involved**

|  |  |
| --- | --- |
| Pupils incidents topped the charts with 277 reported incidents, incidents involving Employee had 232 records while agency employees 32, Member of the public 13, Client 10, and others had 77. Others refer to incidents where a volunteer, tenant, Service Users, work placement, contractors, no one involved and young people. |  |

**RIDDORS**

|  |  |
| --- | --- |
| Row Labels | Count of RIDDOR Reportable |
| Slipped, Tripped or Fell on The Same Level | 4 |
| Injured While Handling, Lifting Or Carrying | 1 |
| Hit by A Moving, Flying or Falling Object | 2 |
| [Foreign Object in Eye](https://uk.sheassure.net/Harrow/Incident/IncidentEvent/Edit/9614087/0) | 1 |
| Physical Contact (Not Assault) | 2 |
| Physical Assault due to challenging behaviour | 2 |
| Incident Involving a Vehicle | 1 |
| Grand Total | 13 |

| **RIDDOR Type of Incident** | **Directorate** | **What Happened** | **Reason** |  | **Employee** | **Employee-Agency** | **Others** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Slipped, Tripped or Fell on The Same Level** | School | A child was running on the MUGA and tripped by himself and landed on his right arm/wrist. | The pupil was off work for more than 7days |  |  |  | 1 |
| Community | A Cleaner misjudged the top stair he slipped and fell to the bottom of the 1st floor stair landing. Causing a break in one of the bones in his left arm elbow | IP was off work for up to 7 days and sustained a fracture |  |  |  | 1 |
| School | A cleaner caught her foot in a dip in the ground. She fell and hurt her hand/wrist | IP was off work for up to 7 days |  | 1 |  |  |
| Community | A Driver was walking on the pavement and slipped, she could not catch herself. She fell to her knees and hands then onto her hip | IP was off work for more than 7 days |  | 1 |  |  |
| School | An employee helped to raise a member of staff from his chair and lowered him to the floor. The employee started to feel lower back pain. | The IP was off work for more than 7days |  | 1 |  |  |
| School | A ball hard hit a teaching assistant on her forehead above her left eye. | IP was off work for more than 7 days |  | 1 |  |  |
| School | Hinge fell off exit door hitting a 5year old pupil. | The Pupil was taken directly to the hospital and incident resulted to a fracture |  |  |  | 1 |
| **Physical Assault due to challenging behaviour** | School | A teaching assistant was punched on the left cheek/nose area, face by my right eye (left a red mark) by a student | The IP was off work for more than 7days |  | 1 |  |  |
| Community | A member of my staff was assaulted by a tenant while on an inspection of the property which we call void inspection as tenant had moved to permanent accommodation | IP was off work for up to 7 days |  | 1 |  |  |
| **Physical Contact (Not Assault)** | School | A child caught an employee nose which resulting to bleeding heavily. | IP was off work for more than 7 days |  | 1 |  |  |
| School | 2 Children both collided into each other and bumped their heads which led to a bump appearing on a childs forehead. | This is a RIDDOR because the pupil was off school for more than 7 days |  |  |  | 1 |
| [**Foreign Object in Eye**](https://uk.sheassure.net/Harrow/Incident/IncidentEvent/Edit/9614087/0) | School | A school support staff was using the sanitiser by the photocopier, it did not come out of the nozzle correctly and squirted in her right eye | The IP was off work for more than 7days |  | 1 |  |  |
| **Incident Involving a Vehicle** | Community | A third-party vehicle reversed into the moped driven by the Civil Enforcement Officer. | IP was off work for more than 7days |  |  | 1 |  |
|  | | | |  | 8 | 1 | 4 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lost Time Incidents for Q1-Q4 -Employees and Agency Employees**   |  |  |  |  | | --- | --- | --- | --- | | Person Injured |  |  | Days Lost | | Employees |  | 9 | 66 | | Employees-Agency |  | 2 | 9 | |  |  |  | 75 |     **Accident Incident Rate**  Accident Incidence Rate=No of defined accidents per thousand employees  Note, the defined accidents is the number of employee incidents  () | 57.12% of incidents which occurred in this time period were minor incidents and accidents and resulted in cuts, bumps, minor scratches and grazes. Most were treated with first aid. Near misses have been investigated. Major accidents all occurred in schools and were incidents such as a pupil was hit by a moving vehicle, sports injury, staff injured while lifting/handling, slips, trips and falls. |

**Categories of Accidents/Incident across the Council-Including Schools**

| Categories of Accidents/Incidents | Count |
| --- | --- |
| Allergic Reaction/Anaphylaxis | 3 |
| Burns | 4 |
| Choking / Asphyxiation | 5 |
| Contact with Sharp Object | 8 |
| Contact With Electricity | 1 |
| Dangerous Occurrence | 4 |
| Electrical Fault | 1 |
| Feeling faint / Unconsciousness | 1 |
| Fell from A Height (State Height in Notes) | 21 |
| Foreign Object in Ear | 1 |
| Foreign Object in Eye | 3 |
| Fatality | 1 |
| Hit by A Moving Vehicle | 1 |
| Hit by A Moving, Flying or Falling Object | 35 |
| Hit Something Fixed or Stationary | 39 |
| Incident exposure (removal of clothing) | 1 |
| Incident Involving a Vehicle | 6 |
| Incident with Faulty Equipment | 1 |
| Incident with Threatening Behaviour | 12 |
| Incident with Verbal Abuse | 14 |
| Incident With Burglary/Theft | 1 |
| Injured While Handling, Lifting or Carrying | 11 |
| Insect or Animal Bite | 4 |
| Medical Emergency | 5 |
| Near Miss | 12 |
| Nosebleed | 1 |
| Not applicable | 6 |
| Other - Please add details below | 35 |
| Physical Assault (due to challenging behaviour) | 176 |
| Physical Contact (Not Assault) | 42 |
| Physical injury from an unknown origin | 2 |
| Physically Assaulted by A Person | 11 |
| Property Damage | 5 |
| Safeguarding Incident | 5 |
| Security Breach | 1 |
| Seizure | 5 |
| Self-harm | 22 |
| Slipped, Tripped or Fell On The Same Level | 128 |
| Sports Injury | 14 |
| Smoke/Smoke Inhalation | 2 |
| Trapped | 1 |
| Work-related Injury | 3 |
| Grand Total | 646 |

**Frequently Reported Accidents/Incidents across the council-Including Schools**

|  |  |
| --- | --- |
| Physical Assault (due to challenging behaviour) was most frequently reported. Slipped, Tripped or Fell On The Same Level had been the most frequently reported in the previous year. In 2020/21, Challenging behaviour type of incident was changed to physical assault due to challenging behaviour.These incidents are mostly seen with special needs schools like woodlands and kingsley or special needs transport in community and Firs in people services.  In the Least frequently reported incidents category were Contact With Electricity, Electrical Fault, Feeling faint / Unconsciousness, Foreign Object in Ear, Hit by A Moving Vehicle, Incident With Burglary/Theft, Nosebleed, Fatality, Security Breach, and Trapped. |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Types of Accidents/Incidents** | **Other Directorates** | **Schools** | **Grand Total** | 86% of these incidents occurred at Schools. 14% at community and People services. It has been noted that 65% of these incidents occurred in woodland schools as this is a special need school. Majority of these incidents. The severity of majority of these incidents were minor incidents. |
| Physical Assault (due to challenging behaviour) | 25 | 151 | 176 |
| Slipped, Tripped or Fell On The Same Level | 17 | 111 | 128 | 87% of these incidents occurred in schools,-woodlands and Kinsley had accounted for most as they are special schools, 14% in community relating to housing and environmental services, in people service which is mainly FIRS and 1 incident was in Resources Directorate. Severity of this incident resulted mainly in minor incidents |
| Hit Something Fixed or Stationary | 11 | 28 | 39 | 72% of these incidents occurred in schools-woodlands and Kinsley accounted for most as they are special schools. 29% in community mainly housing and environmental services, and in people services-FIRS. Severity of this incident resulted mainly in minor incidents |
| Hit by A Moving, Flying or Falling Object | 1 | 34 | 35 | 97% of these incidents were at schools and 3% in community. None of these type of incident was found in peoples directorates. Severity of this incident resulted mainly in minor incidents |
| Other - Please add details below | 7 | 28 | 34 | 80% occurred in schools, 8% in community Directorates, and 12% of these incident occurred on Peoples services. Severity of this incident resulted mainly in minor incidents |

**Accident / Incident Analysis Report for Quarter 1 to Quarter 4 (1st April 2021 – 31st March 2022) - Community**

**Categories of Accident/Incident across Community**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Categories of Accidents/Incidents | Count | | Allergic Reaction/Anaphylaxis | 1 | | Burns | 1 | | Contact With Sharp Object | 6 | | Dangerous Occurrence | 1 | | Electrical Fault | 1 | | Fatality | 1 | | Fell From A Height (State height in note) | 2 | | Hit Something Fixed Or Stationary | 8 | | Hit By A Moving, Flying Or Falling Object | 1 | | Incident Involving a Vehicle | 4 | | Incident With Threatening Behaviour | 9 | | Incident With Verbal Abuse | 11 | | Incident With Burglary/Theft | 1 | | Injured While Handling, Lifting Or Carrying | 4 | | Insect or Animal Bite | 2 | | Medical Emergency | 1 | | Not Applicable | 1 | | Other - Please add details below | 3 | | Physical Assault (due to challenging behaviour) | 9 | | Physical Contact (Not Assault) | 1 | | Physically Assaulted By A Person | 1 | | Safeguarding Incident | 3 | | Security Breach | 1 | | Self-harm | 1 | | Seizure | 5 | | Slipped, Tripped Or Fell On The Same Level | 8 | | Trapped | 1 | | Grand Total | 85 | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Top 5 Accidents/Incidents - Community** |  |  | 73% of incidents were in Housing services, and 27% were in Libraries. No injuries were recorded. This resulted in Moderate, major and minor incidents. |
| Incident With Verbal Abuse |  | 11 |
| Incident With Threatening behaviour |  | 9 | 78% of incidents were in Housing services, while 22% where in environmental service Special Needs Transport. No injury was recorded. This resulted in Minor and moderate incidents. |
| Physical Assault (due to challenging behaviour |  | 8 | 75% of these incidents occurred in Special Needs Transport, while 25% was in Housing services. They resulted in bruises, Aches, Scratch, No injury, and eye injury |
| Slipped, Tripped Or Fell on same level |  | 8 | 37% of these Incidents happened in Libraries, 50% was in Environmental services, and 13% in housing services. Injuries include fracture and bruising/sweels/bumps, |
| Hit Something Fixed Or Stationary |  | 8 | 50% of these Incidents happened in Libraries, 25% was in Environmental services, and 12.5% in housing services and 12.5% in community. Injuries include Pain, Ache, bruising, fracture, and head injury. |

**Classification by Who was Involved**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Who was involved | Count of Who Was Involved | | Employee | 33 | | Employee - Agency | 17 | | Pupil | 9 | | Service User | **2** | | Others | 16 | | Member of the public | 8 | | Grand Total | **85** | | Note: Others here refers to clients, Volunteers and Tenants. |

**Accident / Incident Analysis Report for Quarter 1 to Quarter 4 (1st April 2021 – 31st March 2022) - People**

|  |  |
| --- | --- |
| 23 employee incidents were recorded, 6 involved agency employees, 9 were with clients, 19 were service users and 7 were others which includes No One Involved, Member of the public, and young persons. |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Top 5 Accidents/Incidents - People** |  |  | 47% of these incidents occurred in Children and Young Peoples Service-The Firs, and 53% occurred in adult social services. They resulted in minor and moderate incident |
| Physical Assault (due to challenging behaviour |  | 17 |
| Slipped, Tripped or Fell on same level |  | 8 | 60% of these incidents were in Children and Young Peoples Service, while 40% was in Adult Social Service. These resulted in minor and moderate accident. |
| Physical Contact (Not Assault) |  | 5 | 100% of these incidents occurred at Children and Young Peoples Service, Injuries were mainly bruising and Minor grazing, |
| Hit Something Fixed Or Stationary |  | 5 | 60% of these incidents were in The Firs, and 40% was in New Bentley NRC. Injury recorded was bruising. |
| Self-harm |  | 4 | 75% of these incidents were in Children and Young Peoples Services-The Firs and 25% in adult social service. These resulted in minor and moderate incident/accident. |

**Accident / Incident Analysis Report for Quarter 1 to Quarter 4 (1st April 2021 – 31st March 2022) – Resources**

**Categories of Accidents/Incidents across Resources**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Accident/Incident Categories | Count | | Slipped, Tripped Or Fell On The Same Level | 1 | | Grand Total | 1 | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Accidents/Incidents - Resources** |  |  |  |
| Slipped, Tripped Or Fell On The Same Level |  | 1 | 100% of Slips, Trips and Falls happened in Legal and democratic services and resulted in bruising |

**Classification by Occupation**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Row Labels | Count of Who Was Involved | | Employee | 1 | | Grand Total | **1** | |  |

**Accident / Incident Analysis Report for Quarter 1 to Quarter 4 (1st April 2021 – 31st March 2022) – Schools**

**Categories of Accidents/Incident across Schools**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Categories of Accidents/Incidents | Count of Type of Incident | | Foreign Object | 1 | | Indecent Exposure (removal of clothing) | 1 | | Not Applicable | 5 | | Work-related Injury/Illness | 3 | | Allergic Reaction/Anaphylaxis | 2 | | Physical injury from an unknown origin | 1 | | Burns | 2 | | Safeguarding Incident | 1 | | Property Damage | 5 | | Other - Please add details below | 27 | | Sports Injury | 13 | | Self-harm | 18 | | Nosebleed | 1 | | Dangerous Occurrence | 2 | | Choking / Asphyxiation | 3 | | Incident With Faulty Equipment | 1 | | Incident With Threatening behaviour | 3 | | Physical Contact (Not Assault) | 36 | | Near Miss | 10 | | Physical Assault(due to challenging behaviour) | 150 | | Contact With Sharp Object | 4 | | Foreign Object in Eye | 2 | | Physically Assaulted By A person | 8 | | Contact With Electricity | 1 | | Fell From A Height (State height in notes) | 19 | | Slipped, Tripped Or Fell from same level | 111 | | Injured While Handling, Lifting or carrying | 6 | | Hit Something Fixed Or Stationary | 28 | | Hit By A Moving Vehicle | 1 | | Hit By A Moving, Flying Or falling object | 34 | | Medical Emergency | 3 | | Foreign Object in Ear | 1 | | Feeling faint / Unconsciousness | 1 | |  |

|  |  |  |
| --- | --- | --- |
| **Top 5 Accidents/Incidents in Schools** | **Type of Incident** | 76% of these incidents occurred in Woodland schools as this is a special needs school. 7% of these incidents occurred in Kingsley High School, 5% in St. Josephs Catholic School and 12% occurred in Longfield, Camrose, cedar, Whitmore High School, West Lodge Primary School, Vaughan Primary School, and Roxbourne Primary School. These resulted to minor, major, and moderate incident/accident. |
| Physical Assault (due to challenging behaviour) | 150 |
| Slipped, Tripped Or Fell from same level | 111 | 21% of these incidents occurred in Woodlands School ,10% in Whitmore High School ,27% in Longfield Primary School ,6% of these incidents occurred in Glebe Primary School, and the rest of 36% occurred in Camrose Primary School, Cedars Manor School, Elmgrove Primary School, Kenmore Park Infant & Nursery, Newton Farm Nursery Infant, Roxbourne Primary School, St. Anselm Primary School, t. John Fisher School, Vaughan Primary School, West Lodge Primary School. These resulted in minor, Nearmiss, Insignificant and major incidents. |
| Physical Contact (Not Assault) | 36 | 36% of these incidents occurred in Woodlands Schools, 25% in Whitmore High School, West Lodge Primary School, Vaughan Primary School, Roxbourne Primary School, Longfield Primary School, Glebe Primary School, Cedars Manor School, and St. Joseph’s Catholic School. These resulted to minor, major, and moderate incident/accident |
| Hit By A Moving, Flying Or falling object | 34 | 28% of these incidents occurred in Woodlands Schools, 17% in Longfield Primary School, and 45% where in Whitmore High School, West Lodge Primary School, Vaughan Primary School, Elmgrove, Cedar, Kingsley, Stag, Roxbourne Primary School, St John fisher, and St Teresa. These resulted in minor, Nearmiss, and Insignificant incidents/accident. |
| Other - Please add details below | 27 | 63% of these incidents occurred in Woodlands School, Whitmore, and 37% were in Vaughan Primary School, St Teresa, St. Bernadettes Primary School, Elmgrove, Kingsley, and Cedars school. Minor, moderate and Major incidents/accidents. |

**Classification by Occupation - Schools**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Who was Involved | Count of Who Was Involved | | Pupil | 272 | | Employee | 181 | | Employee agency | 9 | | No one involved | 7 | | Young persons | 20 | | Others | 9 | | Grand Total | 498 |   Note: Others refers to contractors and member of the public. |  |

**APPENDIX 2 – TRENDS**

We will be comparing accident/incident data across Harrow Directorates over a period of 4 years (2018/2019, 2019/2020 2020/2021 and 2021/2022)

**1.Accident/Incident Records across the council over 4 years**

|  |  |
| --- | --- |
|  | An increase in accident reporting can be observed from this data compared to last year. These increases are attributed to the resumption of schools in 2021 -2022 and some staff were able to work in offices as well when compared to the Covid-19 pandemic period in 2020-2021 which led to schools shutting down and majority of staff working from home. This can account for the increase in the number of accidents reported |

**2. RIDDORS**

|  |  |
| --- | --- |
| There has been a decrease in the number of incidents reported as a RIDDOR compared to last year. Data compared across 4 years shows that in 2018/19 had 0.2%(24 out of 1351), of all reported incidents were RIDDORS, and 2019/20 had 0.8%(9 out of 1105), 2020/21 had 5%(15 out of 298) while 2021/2022 had 2%(13 out of 646). |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |

**3.Lost Time Injuries-** Number of Lost time injuries saw a slight increase, the number working days lost has decreased from last year. The directorate mostly impacted by lost time incidents is schools with 73 cases, community was with 40 cases. We also had very few cases in people and none in resources.

**4.Yearly Comparison across the 4 directorates**

|  |  |
| --- | --- |
| Schools had the highest reported incidents in 2018/19 with 986 records. There was an increase in community directorates this year, this was due to covid pandemic in 2020/2021 which resulted into restrictions which made people work from home. Commercial directorate constantly has the least number of reported incidents. People directorate saw an upward trend in 2018, 2019 and 2021/2022 however, in 2020/2021 a decrease of 117 is noted, that was no doubt due to the Covid pandemic and the stay at home orders. |  |

**5.Top 5 Frequently Reported Incidents**

|  |  |
| --- | --- |
|  | Challenging behaviour was most frequently reported in 2017, 2018 and 2019 across the system with 2018 having the highest number recorded. Physical Assault(due to challenging behaviour) has been consistent across the directorates however, in 2021/2022, it became the most reported incident type, although, fewer incidents were reported compared to 2018 & 20219. It was higher when compared to last year because in 2020/21 there was a general low record of incidents owing to the Covid Pandemic Physically Assaulted By A Person is lowest in this year.  In the Least frequently reported incidents category were Contact With Electricity, Electrical Fault, Feeling faint / Unconsciousness, Foreign Object in Ear, Hit by A Moving Vehicle, Incident With Burglary/Theft, Nosebleed, Fatality, Security Breach, and Trapped. |

**6.Top 5 Frequently Occuring Injuries**

|  |  |
| --- | --- |
| Over the 4-year period, 40% (811) of incidents resulted in no injuries and is the top injury reported. Bruising/bumps/swelling accounted for 31% (633) of injuries. Cuts/Laceration made for 13% (257), Pain/Ache was 12% (237) while Minor Fractures accounted for 4% (85). |  |

**7.Who was Involved**

|  |  |
| --- | --- |
|  | Across the 4 years, the chart shows that majority of the incidents recorded involved employees and pupils. Contractors consistently have low rate and in the four years, 2021/22 had the lowest rate with 2. 2020/22 has the lowest rate of incidents In general as this was as a result of schools shutting down and majority of staff worked from home. Although, staff who worked from home at that period were encouraged to report work related incidents that happen at home, there were very few instances of that report. |

**APPENDIX 3 – H&S Strategy 2021-2022 And Corporate H&S Plan 2021-22**



**OCCUPATIONAL**

**HEALTH AND SAFETY**

**STRATEGY**

**2021 – 2022**

**Corporate and Council Housing**

**Provision of service of:**

* **Health & Safety**
* **Fire Safety**
* **Asbestos Management,**
* **Occupational Health Management**
* **Employees Assistance**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name | Signature | | Date |
| Prepared by: | John Griffiths |  | | 01/03/2020 |
| Checked by: | Richard Lebrun |  | | 06/08/2020 |
| Approved by: | Tracey Connage of HR&OD | Picture 5 | | 07/08/2020 |
| Document Title: | OCCUPATIONAL HEALTH & SAFETY STRATEGY 2019 - 2022 | | | |
| Version Number: | 1 | Date of Next Review: | 01/04/2022 | |

Occupational Health and Safety Strategy

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|  |  |

**MANAGEMENT SUMMARY**

It is essential to the achievement of our strategy for Health and Safety to ensure that access to the right knowledge, skills, and support is available to staff not only when, but also before, they need it, and that this is widely communicated and understood to achieve a culture of health and safety excellence. Key to achieving this is the actions and support of the Corporate Health and Safety Team through continuous improvement and maintenance of the safety management system (SMS) by qualified and competent safety practitioners.

In line with best practice the strategy and model for the safety management system follows the precepts laid down in the Health and Safety Executives guidance ‘Managing for health and safety (HSG (65)’. The strategy therefore is based on the principles of the Plan, Do, Check, Act approach and aims to achieve a balance between the systems and behavioural aspects of management. It also builds in health and safety management as an integral part of good management generally, rather than as a stand-alone system.

To achieve this, in addition to providing systems for policies, organisation planning, arrangements, training, communication and measurement there are clear objectives and monitoring of performance by the Corporate Health and Safety Team through health and safety management plans and proactive audit programmes.

In addition, the strategy looks to ensure all Directors, Managers, Department Management Teams and Service Managers lead by example by demonstrating best practice in health and safety management and ensuring whenever possible, that all management decisions further health and safety objectives.

This strategy is intended to incorporate the whole Council; it is about effective partnerships between managers, staff and trade unions that are all crucial to successful health and safety management. Poor health and safety management is rarely the result of malicious intent. Support by professional safety practitioners, training in health and safety skills and risk management are key to achieving a strong health and safety culture which benefits all staff, service users, pupils, visitors and contractors who work in our premises, and improves the quality of our service.

This strategy is intended to create a safety culture that places a high level of importance on safety beliefs, values and attitudes that is positively shared by the majority of people with the organisation or workplace. A positive safety culture can result in improved workplace health and safety and organisational performance

***INTRODUCTION***

The Health and Safety at Work etc Act 1974 places overall responsibility for health and safety with the employer. In this case the employer is Harrow Council and the expectation is that health, safety and wellbeing are, in turn, the responsibilities of the Chief Executive and Board of Directors. In respect of matters pertaining to Health, Safety, Welfare, Asbestos Management, Wellbeing and Occupational Health; the Chief Executive of Harrow Council is the Duty Holder.

Where suitable and sufficient competent advice and support is not available in organisations there will be clear failings in meeting legal requirements and hence considerable exposure to risk of prosecution to individuals and the organisation. Furthermore, there is additional exposure to moral failings, the cost of expensive litigation and reputational damage.

The Council’s corporate Health and Safety Team provides a Health & Safety, and Fire advisory service. Asbestos Management is managed by facilities management that facilitates risk reduction and helps develop or sustain inbuilt safety management. This should form part of the organisational management system that enables achievement of legal requirements. Specifically, as experienced practitioners, the teams are used to dealing with the processes undertaken by the local authority; they are experienced in the application and requirements of legislation and how it can be effectively applied judicially in this arena. In addition, provision of a comprehensive occupational health service with employee counselling and support service enables the Council to facilitate the well-being of all their employees.

The Council achieves its obligations in a number of ways that includes; a comprehensive system of occupational health support, employee counselling service, asbestos plans and surveys, safety processes, policies, guidance etc. Moreover, they can provide the, more intangible, experienced competent advice tailored to support the organisation.

This document sets out the strategy for Health and Safety, asbestos management and Fire Safety for Harrow Council for the three years between 2019 and 2022. It aims to build on the work already achieved to date in improving the health and safety management systems across the Council and thereby reduce illness, ill-health damage and loss, whilst continuing to deliver services to the people within the London Borough of Harrow.

**1.0 BACKGROUND**

In recent years legislation has reinforced the need for organisations to ensure effective management of safety, health, wellbeing, fire and asbestos. The Health and Safety Offences Act 2008, has increased penalties and provides courts with greater sentencing powers for those who break health and safety law. The Corporate Manslaughter and Corporate Homicide Act 2007 has meant organisations can be found guilty of corporate manslaughter as a result of serious management failures resulting in a gross breach of a duty of care.

Statutory obligations for health and safety arrangements can be found in the Health and Safety at Work etc Act 1974 and Management of Health and Safety at Work Regulations 1999 - specifically regulations 5 and 7 that refer to the need for competent advice and ensuring a suitable and sufficient safety management system exists (see also the Health and Safety Executive (HSE) HSG 65 Guidance).

The HSE, although the enforcing authority, are keen to point out that the many employers who do manage health and safety and wellbeing well, have nothing to fear from legislative requirements.

Harrow Council achieves high standards through the use ofan occupational health provider and established in-house services for health and safety. Harrow Councils Corporate Health and Safety Team consist of a three professional experienced, qualified safety practitioners. The team are fully aware of the impact and need for competent advice to ensure effective delivery of a health and safety management system.

**1.1 The Current Situation**

Corporate Health and Safety sits within the Community and Public Protection Service, being three members of staff with responsivity for the overseeing of the corporate health and safety system and provision of advice.

Occupational Health remained part of the function of the Human Resources Team, including the provision of service by Health Management Ltd (HML) which oversees fitness to work and vaccinations.

In terms of the Corporate Health and Safety Board, this is chaired by the Corporate Director for Community.

The Corporate Director for Community launched a refresh of health and safety within the council, setting up a new meeting hierarchy that put the frontline staff at the heart of health and safety in their areas through the use of safety teams.

The safety teams are a joint worker management team that assists the employer in creating and maintaining a safe workplace. The goal of the team is to enhance the ability of workers and employers to resolve safety and health concerns reasonably and co-operatively.

The strategy seeks to replicate joint worker safety across all directorates and all levels of the council.

The Council Corporate Health and Safety Team have three health and safety advisers that provide an advisory service that covers corporate and schools.

Together the team provides a comprehensive Safety Management System that provides organised processes with planning, policies, monitoring and ongoing review; a wide range of advice, guidance and assistance that includes: management of Asbestos, Occupational Health, Well Being, Health and Safety, Welfare and Fire Safety across the whole Council.

The Corporate Health and Safety Team comprehensive Safety Management System ensures that the Council reduces health and safety risks across the board. This, in turn ensures we meet with statutory obligations, minimise costs from losses or civil litigation and fulfil our moral obligations to all those affected by our undertaking which includes; employees, contractors, school pupils, those who visit, play or use corporate premises, or live in Council Housing. We do this by:

* Ensuring that health and safety remains a vital part of standard management practice across the Council and provide planning for this to be achieved;
* Providing information, advice and training to all employees to help them stay safe at work and understand their own responsibilities to themselves and others;
* Developing strategic and operational initiatives and reviews that properly address any Health, Safety or Fire related risks associated with Council Housing, Council operations, schools and premises;
* Ensuring provision of an Occupational Health Service for all employees;
* Ensuring that risk assessment remains the process by which hazards are identified and risks arising are eliminated or adequately controlled;
* Monitoring standards by undertaking; audits, inspections, asbestos surveys, investigating significant accidents and incidents and providing interpretation of Health and Safety legislation that impacts on the Council;
* Management that ensures protection from exposure to asbestos in or near any of our premises.
* Monitoring of contractors for Health and Safety particularly with regard to Council Housing.
* At the start of each new financial year set out a Corporate Health and Safety Plan detailing the planned programme of auditing that designated safety advisers will undertake.

In all cases, the primary intention is to utilise resources in a way that assists with the development and implementation of systems that proactively reduces risk and gives feedback on performance **before** an accident, incident or ill health.

**2.0 Corporate Health and Safety Governance Overview**

The Council Corporate Health & Safety Policy clearly sets out roles and responsibilities to meet the needs of health and safety.

To ensure a successful culture is the responsibility of all management. To this end, all Heads of Service shall be the primary lead for health & safety in their services, with a nominated person acting as safety representative for that service. This is in conjunction with any Union Health & Safety representative.

Safety circles have been introduced as a means of communication and tackling safety issues at the most appropriate level. They will be chaired by the Safety Circle Lead and involve staff and representatives of all of the services represented. Heads of Service should ensure that suitable representatives are nominated and that all risk areas covered. These meetings shall take place as a minimum every 2 months.

The purpose of these meetings is to:

* Involve managers and employees in achieving a safe and healthy workplace.
* Review safety-related incidents, audits
* Review management and Corporate H&S audits of the workplace, communicate identified hazards, and recommend immediate methods for eliminating or controlling them.
* Introduce and assist with workplace safety and health initiatives and recommend improvements to management.

The Safety Circle is a space to share information and discuss specific risks in the service areas represented and maintain a record of issues raised and actions completed.

All actions shall be recorded on the SHE Assure software, with clear timescales. A review will take place at the directorate management meeting to ensure actions are being followed up and information fed into the directorate risk registers monthly.

Updated risk registers and any areas of key risks are raised quarterly to the Directorate Joint Committee for discussion, including with Unions. Decisions to escalate to the Corporate Health & Safety Board shall be made at this point. All actions recorded on the SHE Assure software.

The Corporate Health & Safety Board will meet on a quarterly basis and will:

• Sign off all health & safety risk registers;

• discusses areas of concern and

• agrees items for future agenda items / areas of concern for DMTs and Safety Circles

Minutes of Corporate Board sent to Corporate Strategic Board and loaded onto SharePoint software. CSB will have the overview of corporate Health & Safety and Occupational Health / Wellbeing, and co-ordinate joint approach.

CSB retains overall governance of corporate health & safety, ensuring the aims and objectives are being met. They shall discuss any areas of concern and identify any issues they want to know more about or provide direction where needed.

Any actions resulting from CSB shall be recorded on the Assure SHE software and fed back to DMTs for action.

The Corporate Health & Safety Team shall oversee the process including being the administrators of the Assure SHE software. They shall also provide the relevant statistics and information to inform safety circles, directorate meetings and the corporate health and safety board

**Meeting Structure**

**3.0 PRIORITIES AND AIMS FOR 2019 - 2022**

Corporate Strategic Board

Corporate Health & Safety Board

Directorate Joint Committee

Directorate Management Meeting

Safety Circle

Employee Responsibilities

To be informed of all risks every 3 months associated with decisions, asked to approve or consider

Overview

Portfolio lead member.

Overall responsible person

for corporate health & safety

within the organisation

Governance

Chief Executive

Delegated Lead for Corporate

Health & Safety, Including

Chair of the Corporate

Health & Safety Board

Governance

Corporate Director - Community

Director responsible for

Corporate Health & Safety

Operational function

Strategy

Divisional Director – Environment & culture

Responsible for Corporate

Health & Safety function

which sits within service

Strategy/Ops

Head of Service – Community & Public protection

Operational Lead for Corporate

Health & Safety, including

Providing corporate policy’s,

Procedures and advice

Operations

Corporate Health & Safety

Commercial Safety Team

Principal EHO – Commercial Safety

Team Leader – Commercial Safety

Over many years the Corporate Safety Team has committed time and resource towards developing a comprehensive set of Corporate Health and Safety policies and supporting guidelines which are kept under review and audited against. These systems and procedures enable departments, in turn, to ensure the development of the necessary health and safety documentation that meets as minimum, statutory obligations together with corporate policies. To build on this, the following priories are highlighted for the next three years:

1. ***Maintaining and improving the Council’s safety management system***

Through supporting the Executive Management Team, Departmental Management Team, managers, with review and monitoring process which support initiatives, remediation and decision making.

1. ***Completing a series of audits, risk assessments and surveys***

This includes schedules for the following health, safety and fire processes:

* Internal fire and health & safety audits on identified teams, premises and processes for corporate and council housing buildings
* Audits in schools and children centres.
* Fire Risk Assessments for corporate, schools and council Housing.
* Fire Risk Audits for Corporate buildings.

1. ***Maintaining an Asbestos survey programme***

To locate, assess and monitor the condition of asbestos containing materials within the council’s corporate and Council Housing portfolio with schedules which includes:

* Corporate Asbestos survey programme
* Council Housing Asbestos survey – common parts (statutory) and void dwellings
* Schools asbestos survey programme (statutory)
* Asbestos awareness training
* Reactive response to Refurbishment & Demolition surveys and incidents

1. ***To support managers and staff in achieving suitable levels of health & safety competency;***

Effective management of health and safety involves people using their skills and knowledge to work safely. A fundamental requirement is for all managers to undertake British Safety Council Training to provide them with a solid grounding in the requirements of Occupational Health and Safety legislative requirements. Undertaking computer based training modules will ensure knowledge is continually professionally developed and reinforced. This will in turn help ensure managers have the basic skills to identify the health and safety competency needed by their staff.

1. ***To ensure the Occupational Health Service continues to provide adequate health surveillance, return to work rehabilitation, health promotion and reduction of work-related sickness absence;***

The Council will continue to work in close partnership with its appointed Occupational Health Service provider to ensure the most efficient use of service resources.

1. ***To build on the communication and consultation arrangements to ensure staff are fully involved and committed to achieving acceptable health and safety standards;***

To achieve success in health and safety management, there needs to be effective communication up, down and across the Council. Front line staffs are involved in communication primarily through the risk to their health and safety identified in their risk assessments, and the preventive and protective measures necessary to control risk. This is supported with safety circles, tool box talks that reinforce a process for direct consultation. Further to this, other means of communication include newsletters, and the council intranet.

At a more strategic level; all Directorates are to have effective health and safety committees with Executive Director Representation on the Corporate Health and Safety Committee. Representatives of each Directorate are expected at attend a Corporate Health and Safety Committee that now has a corporate lead (Corporate Director of Community) and steer on health and safety.

1. ***To encourage greater visible and active leadership on health and safety matters by managers;***

Active leadership is essential if the Council is to foster a positive health and safety culture. The Corporate Health and Safety Team have promoted this through making available British Safety Council training courses for both Senior Managers/Directors and those who managed staff.

1. ***To align health and safety more closely with the overall Risk Management arrangements;***

The Councils Risk Management Strategy aims to establish a culture where risks are understood and managed. Health and Safety management aims to ensure risks to health and safety are identified and managed. While Risk Management covers all business risks and is focused on the major risks to the Council, there are areas where the two strategies meet. Health and safety processes and arrangements should therefore be seen and understood as supporting the Risk Management Strategy. Significant health and safety issues identified during risk management assessments will therefore be communicated to the executive board.

1. ***To ensure good health and safety practice in our relationships with partners;***

As well as setting out to improve our own health and safety performance, the Council will work with its partners to improve health and safety overall in the delivery of its services. The aim will be to share knowledge and experience and at the same time provide managers overseeing contracts with feedback on safety standards.

**3.1 Monitoring Progress against Aims & Priorities**

A number of proactive measurement activities take place to monitor safety performance for the Council. These measures are set out with performance targets in the Corporate Health and Safety Management Plan which is agreed by Executive Management Team at the start of the financial year.

The key measures against which progress will be assessed in meeting the strategic aims and priorities are;

* Number of audits and compliance levels achieved
* Number of Fire Risk Assessments and actions completed
* Number of Asbestos surveys completed
* Number of Asbestos re-inspections completed

Other methods of monitoring the success of the safety management system are**:**

* Review of accidents and statistics and related sick leave.
* Number of staff undergoing health and safety training
* Computer Based Training completed
* Senior managers safety tours completed
* Manager’s self- audits completed.
* Health and Safety performance reports
* Action status of items on risk registers

**4.0 HEALTH AND SAFETY MANAGEMENT SYSTEMS**

The Management of Health and Safety at Work Regulations 1999 – Regulation 5 - requires Harrow Council to have arrangements in place for managing health and safety. Like any management system, it is essential that the Council collects information on the system implemented if it is to be able to make judgements about its adequacy and performance.

The system followed by the Corporate Health and Safety Team is based on that described in HS(G)65 *Successful Health and Safety Management*. Diagram 1 illustrates the system showing the main topic headings and the communication flows by which continuous improvement in health and safety management is achieved. Health and safety audits aim to verify compliance with each aspect of the management system:

Information link

Control link

### Policy

### Organising

### Planning & implementing

### Auditing

### Measuring performance

### Reviewing performance

Diagram 1: HS(G)65 Health and Safety Management System Elements

|  |
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| **POLICY**  Effective health and safety policies set a clear direction for the Council to follow. They contribute to all aspects of business performance as part of a demonstrable commitment to continuous improvement. The Council already has a well-developed set of Corporate Policy Arrangements that are available on the council SHE software system and this is subject of a rolling programme of review. |

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| **ORGANISING**  The Council needs to ensure that it has an effective management structure and arrangements are in place for delivering its health and safety policies. To achieve success, all staff will need to be motivated and empowered to work safely and to protect their long-term health, not simply to avoid accidents. The Council is currently embarking on developing a safety circle safety culture, ensuring robust health and safety management supports this programme and will better shape the way it deals with health and safety issues in the future. The activities necessary to promote a positive health and safety culture are;  ***Control***  Everyone working in the organisation can contribute to controlling health and safety risks. Control is achieved by getting the commitment of employees to clear health and safety objectives. Managers will need to take full responsibility of controlling factors that could lead to ill health, injury or loss thereby helping to create a positive atmosphere and encouraging a creative and learning culture.  ***Co-operation***  Participation is essential to control risks effectively. By encouraging employee ‘ownership’ of health and safety policies this will assist with their better understanding that the organisation as a whole, and people working in it, benefit from good health and safety performance.  The Council has a legal obligation to consult with all employees about those health and safety issues in the workplace that affect them. The Council has already fostered good relationships on health and safety matters with its recognised trade unions.  ***Communication***  All managers need to lead by example. Their visible commitment to, and involvement in, health and safety management should be obvious and consistent. They will need to provide regular and reliable information on health and safety to everyone who needs it.  ***Competence***  If Council employees are to make a maximum contribution to health and safety, the Council will need to have in place robust arrangements to ensure that they are competent. Health and safety is already a mandatory competency for all employees. |
| **PLANNING AND IMPLEMENTING**  This element concerns the adoption of a planned and systematic approach to implementing the health and safety policy through an effective health and safety management system. The aim is to minimise risks. This strategy provides the framework, against which the Council will judge the adequacy of its health and safety management systems to ensure,   * The mitigation of risks; * The ability to react to changing demands; * Sustainability of a positive health and safety culture. |

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| **MEASURING PERFORMANCE**  The Council needs to measure what it is doing to implement its health and safety policy and to assess how effectively risks are controlled. There are many different types of monitoring, but they can generally be categorised as either ‘proactive or reactive’.   * **Proactive** methods monitor the operation of management arrangements and workplace precautions and tend to be preventative in nature, for example; routine inspections and surveys of premises, plant and equipment by staff; * **Reactive** methods monitor evidence of poor health and safety practice but can also identify better practices that may be transferred to other parts of the organisation, for example, investigating accidents and incidents, monitoring cases of ill health and sickness absence records   Where services are delivered on behalf of the Council via contractor relationships, these activities should also be subject to continual health and safety performance monitoring and review. In such circumstances, the level, nature and frequency of monitoring undertaken will be based on an assessment of risk. Evidence of such systems will be required to enable demonstration of due diligence. |

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| **REVIEWING PERFORMANCE**  All control systems tend to deteriorate over time. To provide essential feedback and information to managers, on how effectively plans and the components of the health and safety management systems are being implemented, professional safety and health advisers from the Corporate Health and Safety Team carry out a regime of regular auditing and performance review of ***premises, teams and processes***. The findings on success and failure are then fed back in to the system and should be acted upon to enable continuous improvement to be made. |

**5.0 AUDITS (TEAM, PREMISE & PROCESS AUDITS)**

**5.1 Team Audits:**

Team audits are necessary to verify that appropriate safe systems of work are operating across the division. These audits focus in on staff training, team risk assessments and safe systems of work.

The categorisation of teams will be based on:

* **The activities of the team/service** – front facing staff interacting with the public are generally deemed to be at a higher risk to workplace aggression especially when working alone. Similarly, teams using dangerous equipment e.g. chainsaws, abrasive wheels or engaged in high risk activities such as working at height.
* **Where there is thought to be an absence of suitable team assessments and safe systems of work** the team will be targeted.
* **Any other significant hazards** that may be identified.

**5.2 Premise Audits:**

Premise audits are required to ensure compliance of buildings and assets. These audits focus on statutory requirements and industry good practice relating to aspects of Corporate Landlord. Every corporate building will be audited within an 18 month circle.

The categorisation of premises will be based on;

* **The physical location;**

The location category will be based on known untoward activity in the area of the premises, its remoteness and proximity to essential emergency services.

* **The use and occupiers of the premise/site,**

Use of the building/premises will be based on a sliding scale from office use, being inherently safe, to depots being dangerous because of transport movement. Sites made available to the public especially where there is no onsite supervision will similarly tend to present a higher risk due to factors like vandalism. The amount and variety of mechanical systems in the building will also need to be taken into account, that is water, sanitation, washing systems, air conditioning, (all potential legionella hazards), lifts (goods & passenger) will raise the risk profile on the basis that the more systems the more maintenance is required.

* **Sites where vulnerable persons reside** (i.e. Residential Care and Sheltered Housing Schemes) will need higher levels of oversight,
* **Any other significant hazards that may be identified**.

**5.3 Process Audits:**

Process audits enable us to identify systemic problems within managed processes and enable effective remediation of risk across boundaries.

The categorisation of processes will be based on;

* **Where there is reliance on contractors to fulfil essential aspects**; for example repair and maintenance contracts,
* **The overall success of the process is dependent on input from several teams**; for example the maintenance of play areas.

**6.0 SELF-AUDITS AND SAFETY TOURS**

The program of audits carried out by the Corporate Health and Safety team is supported with ‘Self-audits’ by Managers and ‘Safety Tours’ by Senior Managers.

The managers ‘Self-audit’ comprises of question sets and requires reference to sample inspection of documents and a physical inspection of the premises. The senior managers ‘Safety tours’ are a more general approach relying on observation and talking to staff.

Both audits aim to breach the gap and ensure that all areas of the Council are examined each year. Further information can be found under the Corporate Health and Safety Assure SHE system.

**7.0 SERVICE DELIVERY**

Corporate Health and Safety Team services will be delivered by fully trained, qualified, experienced competent persons with a detailed knowledge of legislative requirements, good practice and understanding of fire safety, Asbestos Management, Occupational Health Management, Employee Counselling and Health & Safety Law. The teams are able to provide support on wellbeing, health and safety issues that can be applied so not as to be onerous in its application to achieve service aims.

**7.1 Health and Safety, Fire and Asbestos Services include**:

* **Auditing** - Essential in the first instance to identify shortfalls and recommend course of action to ensure an effective safety management system. The Safety Management System provides robust and comprehensive audits for Premises, Teams and Processes.
* **Policies and Arrangements** – Developed, updated and reviewed Council Corporate Policies, Processes, Guidance & Briefing Notes providing suitable and sufficient, arrangements, information for Managers and Premises controllers to follow for practical application.
* **Risk Assessments** - A comprehensive set of risk assessment processes (including DSE, work, Stress, Manual Handling, New and Expectant Mothers, etc) that are in line with HSE approved systems together with model assessments and advice on their use. The team will also support and assist managers with the production of specific risk assessments.
* **Fire Risk Assessments** - For Council Housing, experienced qualified fire risk assessor will undertake predominantly Type 1 Fire Risk Assessments over a cyclical programme. High priority buildings, Sheltered Housing Schemes, Community Halls and Converted Street Properties) being risk assessed annually whilst Medium/low priority (purpose built blocks are assessed over a two year cycle. Type 4 assessments in high rise void properties will be undertaken as and when suitable properties become available.
* **Advice/Professional support and guidance** - by expert officers for Health, Safety, Asbestos and Fire related issues.
* **Asbestos Management** – The council facilities management team will provide management policy and guidance, awareness training and offer help in the application of recommended and required management processes.
* **Asbestos register** - Access to an on-line asbestos management suite that holds records and surveys for properties surveyed by specialist asbestos surveyors, via facilities management, Council Housing employ an asbestos surveyor.
* **Asbestos Surveying service and Management Plan**. It is a requirement of the Control of Asbestos Regulations 2012 that premises set out in a detailed plan how asbestos is managed. The Council as the Duty holder has this work carried out by a licenced asbestos contractor.
* **Training** - Provision of health and safety and asbestos training from a range of courses by competent staff. Asbestos awareness training is a requirement of the Control of Asbestos Regulations 2012. This is provided to all those in control of premises and those who may be designated as carrying out any work with asbestos or with the planning or arrangement of that work.
* **Access to a Computer Based Training (CBT)** - A wide range of modules including asbestos management, fire safety, health and safety awareness etc. This is provided to reinforce knowledge and act as an easily accessible way to complete refresher training.

* **Accident/ Incident Reporting** - Provision of an on-line system for reporting and maintaining records (Assure SHE software). The reporting system acts as a tool to provide data, graphs and statistics that enables analysis of trends to aid with risk mitigation, defence in litigation and reduces insurance costs.
* **Accident/ Incident Investigation -** All accidents that may be deemed necessary for an officer to conduct a full accident/incident investigation can be advised and supported to ensure a professional approach and documentation.
* **Support, advice and liaison with enforcing authorities are provided**. Experience has shown that liaison with enforcing authorities using safety professionals has resulted in positive outcomes.
* **Site Inspection/ Visit** – A Health and Safety professional are available to attend sites to monitor and advice on specific issues.
* **Violence at work and Lone working systems** – The team will work alongside management in providing a suitable lone working solution.

**7.2 Occupational Health Service**

The Occupational Health Service provides:

* A Consultant-led team focus on early intervention, executing tried-and-tested approaches that will help to safeguard employees’ health and get them back on their feet as quickly as possible.
* Strategies to assist with managing employees more decisively.
* Development of coordinated plans so staff can return to work as soon as possible.
* Employees can visit the Occupational Health providers clinics where required.

**8.0 RESOURCE ALLOCATION**

A key area of support of the Corporate Health & Safety Team is to undertake external monitoring of the implementation of departmental safety management arrangements. Each Directorate receives a level of professional support from the team of Safety Advisers. The amount of resource allocated to each Directorate is based on the level of risk associated with the undertakings of teams.

A significant amount of work is outsourced to contractors. This equally requires safety monitoring to ensure not only legislative compliance but avoidance of reputational damage. One particular area requiring significant monitoring across the Council concerns compliance with Client duty holder responsibilities under the Construction (Design and Management) Regulations 2015, which takes in construction, repair and maintenance work.

**9.0 CORPORATE HEALTH AND SAFETY PORFORMANCE PLAN 2021/22**

Corporate Health & Safety Management Performance Plan

2021 – 2022

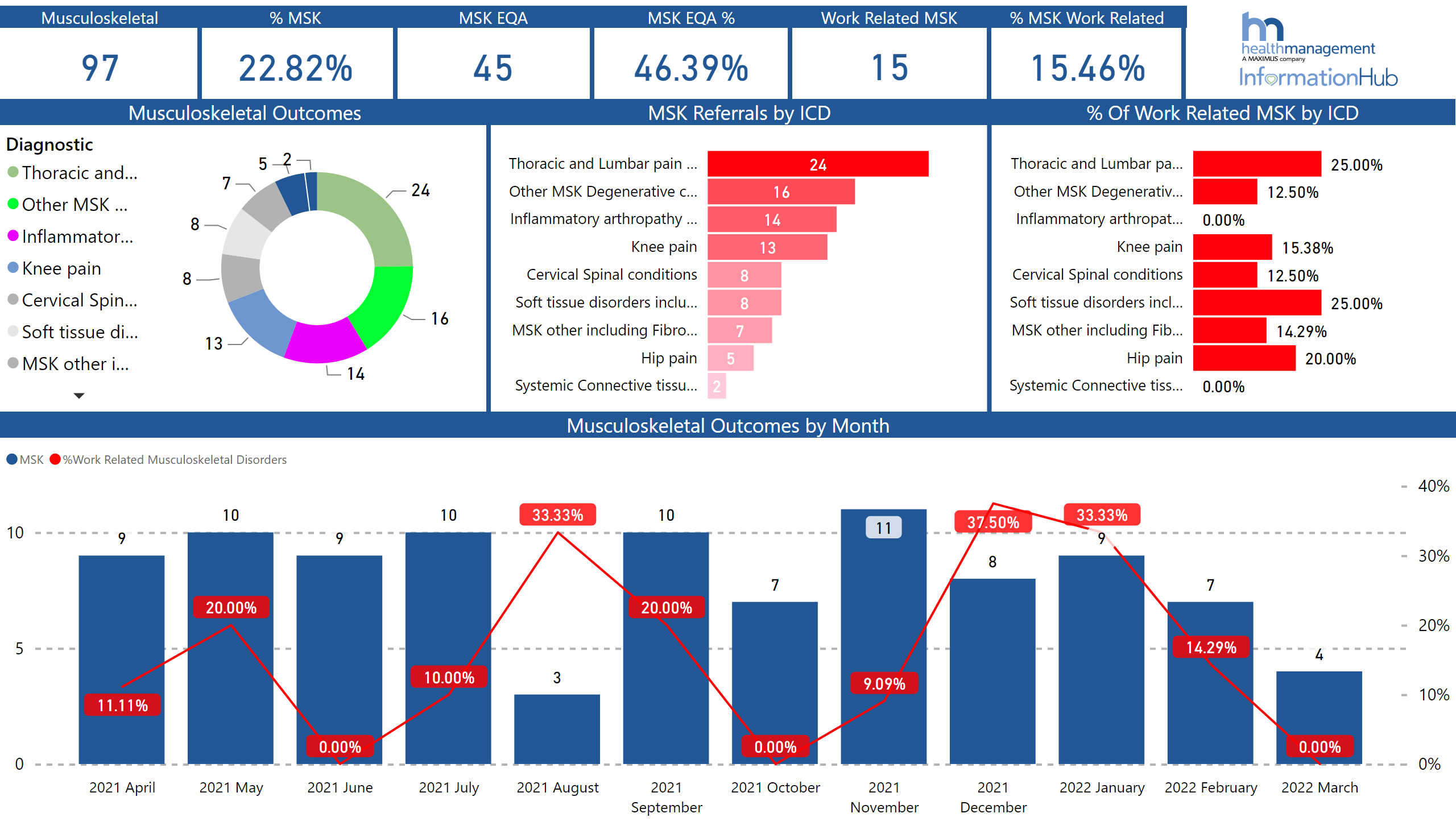
|  |  |
| --- | --- |
| Prepared by: | John Griffiths  Corporate Health & Safety and Compliance Manager |
| Approved by: | Corporate Health and Safety Board (CHSB) |
| Divisional Director Signature | Tracey Connage of HR&OD  Picture 5 |
| Date | 1st April 2021 |

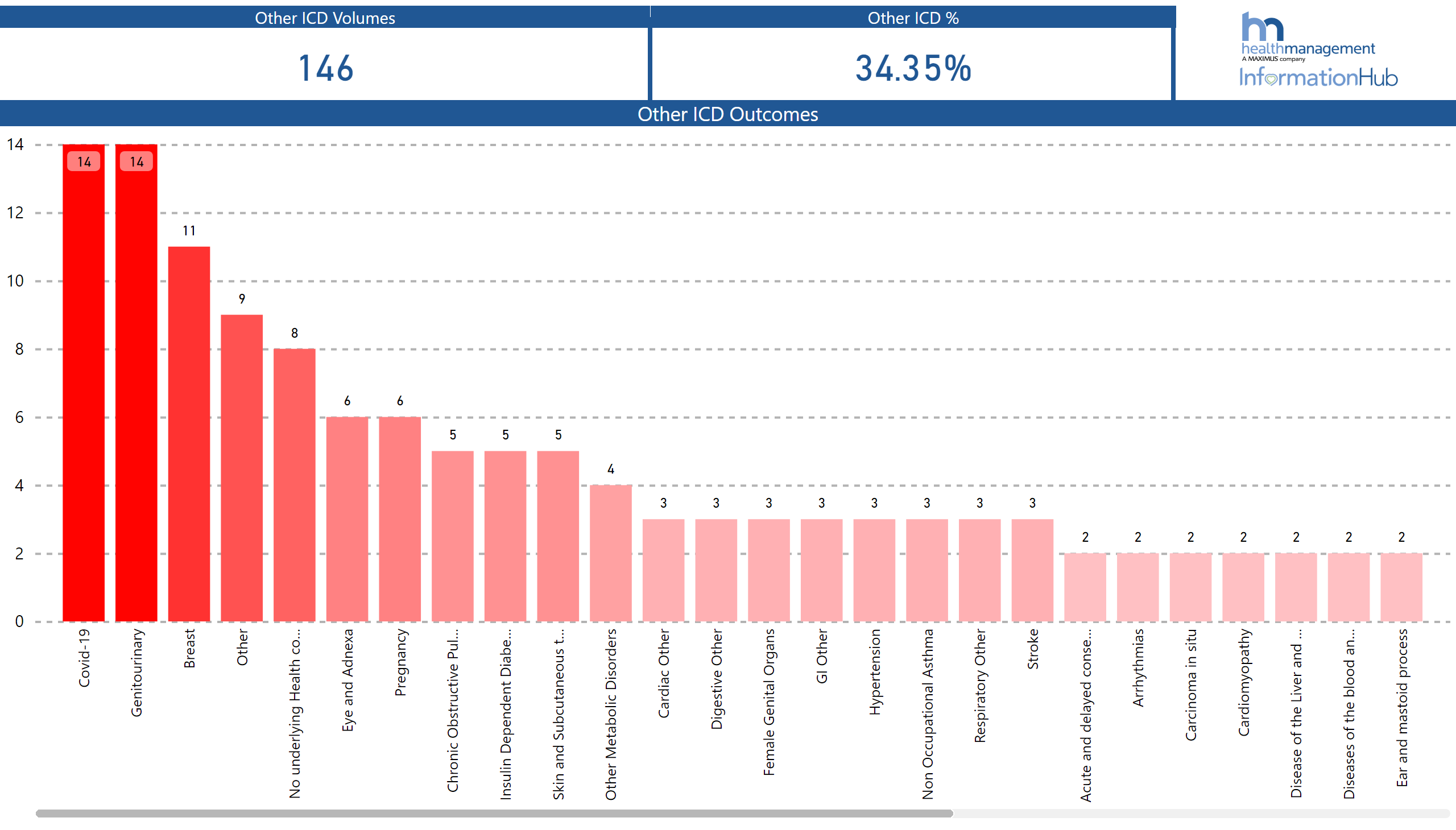
| **Section** | **Objective** | **Start Date** | **End Date** | **Lead** | **Target** | **Achieved** | | **Remarks** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Six Months** | **End Period** |
| ***Safety Management*** | | | | | | | | |
| **Senior Managers Safety Tours**  **(Linked to priorities and Aims (A,B,D,G,H,I)** | 1. Conduct safety tours of premises/ sites within areas of responsibility, a **minimum of four** a year (quarterly), to ensure the safety and upkeep of the workplaces. | *April 2021* | *March 2022* | *Directors/HOS* | *100%* | *50% - On Target* | *100 - Completed* | This was substituted with COVID building risk assessment due to Pandemic. Head of services, senior management, divisional directors and silver group was all part of the review process and amendments of the RA process. |
| 1. Record the results of safety tours and submit quarterly returns on Pro-forma to Divisional Director. Each Director to discuss at their DMT’s   Any outstanding remedial actions from the safety tour that affects corporate buildings must contact facilities management. | *April 2021* | *March 2022* | *Directors/HOS* | *100%* | *50% - On Target* | *100% - Completed* | COVID building secured RA was reviewed and amended throughout the pandemic and the RA continued to be reviewed.  All updated RA are on R.A Tracker. More information can be accessed through the SHE Assure system |
| **Management Self Audits**  **(Linked to priorities and Aims (A,B,D,G, H,I)** | 1. All heads of service to ensure their managers carry out **one** Management Self Audit per year on their teams. | *April 2021* | *March 2022* | *Managers to carry out audits, Directors to ensure audits take place.* | *100%* |  |  | Due to the pandemic and government guidelines on majority of staff working from home. This particular objective was not met. |
| 1. Management of Self Audits; Managers to remediate actions and provide Divisional Directors with information. Directors to maintain record. | *April 2021* | *March 2022* | *First/Second Line managers to follow up and ensure actions completed.* | *100%* |  |  | Due to the pandemic and gov. guidelines on majority of staff working from home. This particular objective was not met. |
| ***General Health & Safety Control Systems*** | | | | | | | | |
| **Corporate H&S Audits by Department**  **General Audits**  **(Linked to priorities and Aims (A,B,D,H,I)** | Create and undertake a schedule of Internal Health and, Safety Audits on high risk services on identified teams and premises. Focus to be on processes as part of audit where applicable. **Overall, 24 audits.**  **12 Corporate and 8 audits in Environment services** | *April 2021* | *March 2022* | *Head of Corporate Health and Safety* | *24 audits* | *10 audits completed*  ***Hard FM***  ***Refuse***  ***CA Site***  ***Street Cleaning***  ***Parks***  ***Grounds -Maintenance***  ***Gardening - services***  ***Transport***  ***Refuse***  ***Fleet -Management***  ***Capital -Programme***  ***Highways***  ***47% - On Target*** | *26 Audits completed*  *1 x capital programme, 1 x highways*  *Nov 22:*  *1 x FM*  *Jan 22:*  *1 x parks & cemeteries, 1 x FM, 1 x fleet*  *Feb 22:*  *1 x FM*  *Mar 22:*  *1 x highways, 8 x SNT* | Audits will be on high/medium risk as determined by previous audits, size and incidents over the last two years of historical data.  Data was provided by Graham Webb, Environmental services H&S consultant. |
| **Schools & Children Centres**  **General Audits**  **(Linked to priorities and Aims (A,B,H)** | To start new cycle of audits a minimum of 33 audits, schools and children centres to attend to actions as required.  **33 Community Schools**  **9 Children’s Centre** | April 2021 | March 2022 | *Head of Corporate Health and Safety* | 33 audits | 10 audits have been carried out. | 34 audits completed  Average score for school is 70%  Average score for Children centres is 82% | Audit for the 2021-22 period were all completed  Raised Actions are on going  Data was provided by Fredah Zuleha |
| **Operational Risk Assessments**  **(Linked to priorities and Aims (A,B,F, H)** | All first line managers/supervisors to review their RA’s to ensure that they are suitable and sufficient for safe operations for their staff.  **All RA’s must meet government COVID-19 guidelines**  All RA to be signed off by Head of Service and recorded. | April 2021 | March 2022 | *Line Managers/HOS* | 100% | *50% - On Target* | 100% - Completed | All risk assessments are recorded and are available on the SHE Assure system.  119 new risk assessment was recorded and uploaded on SHEassure system.  112 risk assessment has been amended within this period  Statistics of Staff in all directorates completed DSE Assessment is 76.68 |
| **Corporate building COVID-19 Secure Risk Assessments**  **(Linked to priorities and Aims (A,B,F, H)** | All building responsible persons must update their RA. This will be monitored by the RA tracker on a monthly basis and reported to the corporate health and safety board.  **Responsible persons to be identified for each building**  **All RA’s must meet government COVID-19 guidelines** | April 2021 | March 2022 | *Building Responsible Person* | 100% | *50% - On Target* | 100% - Completed | Divisional Directors signed off all COVID-19 secure RA’s before going to Silver Group for final sign-off  These are recorded on the RA Tracker. |
| ***Corporate Policies/Committees*** | |  |  |  |  |  |  |  |
| **Corporate Policies**  **(Linked to priorities and Aims (A,H,I)** | Review Corporate Policies and Guidance documents in light of changing legislation, official guidance, good practice and Council priorities. Identifying where changes required, re-date/reorganise library of documentation on SHE software system. Target minimum 6 policies. | *April 2021* | *March 2022* | *Head of Corporate Health and Safety* | *6 fully revised or written policy/guidance documents* | 1 – Accident and incident code of practice – Behind Target | 7 Policies  Asbestos  Legionella  PPE  Lone working  Manual-handling  H&S policy | The following policies have been amended and are now in the consultation stage with unions and stake holders.  The CHS policy has now been signed off for 2022-2023.  Data was provided by the CHS Team |
| **Corporate Health and Safety Board (CHSB)**  **(Linked to priorities and Aims (A,B,C,F,H,I)** | Plan, organise and attend minimum of 8 H&S Committee Meetings. This is a key meeting to consult key health and safety issues with trade unions.  **Trade unions will be asked 7 days before the meeting for trade union items for the agenda** | *April 2021* | *March 2022* | *Divisional Director (Chair)*  *Head of Corporate H&S, Directorate representative’s senior managers, and Union/safety Representatives.* | *8* | *5 – On Target* | *8 - Completed* | Chaired by Divisional Director of HR OD due to the CHS Team transferring from community to resources |
| ***Fire Control Systems*** | | | | | | | | |
| **Corporate and Schools**  **Fire Risk Assessments**  **(Linked to priorities and Aims (A,B,H,I)** | 1. Conduct a **minimum of 20** fire risk assessments on corporate buildings, identified as the top high-risk **Corporate premises** and managers actions within time scales. | *April 2021* | *March 2022* | *Head of Facilities Management* | *20* | *Undertaken 2 FRAs for period up to 15th October. Majority of FRA’s not due. Remaining FRA’s*  *scheduled to be carried out between November 2021– March 2022 – On Target* | *Completed 47 FRAs, report being reviewed and actioned being scheduled to be carried by September 2022* | RA’s will be on high/medium risk as determined by previous RA’s,  Once all FRAs have been completed the action will be to review and undertake all works to ensure compliance.  Data was provided by Kenneth Asiedu |
| 1. Conduct a **minimum of 33** fire risk assessments on identified **Schools premises**. Head Teachers to address actions within time   The schools undertake these FRAs directly but FM to check that RA are undertaken in community schools and the actions from the RA are managed. | *April 2021* | *March 2022* | *Head of Facilities Management* | *33* | *On Track To receive FRA’s from schools. Information requested from schools deadline set for 4th November 2021* | *Received FRA’s from schools.* | The schools undertake these FRAs directly but FM to check that RA are undertaken in community schools and the following remedial actions have been actioned.  Data was provided by Kenneth Asiedu  On 04/04/2022 |
| **Council Housing**  **Fire Risk Assessment**  **(Linked to priorities and Aims (A,B,H,I)** | 1. Carryout Fire Risk Assessments in all **High-Risk** Priority common areas (4 or more stories/house) vulnerable persons/community halls and relevant team to attend to actions. | *April 2021* | *March 2022* | *Divisional Director of Council Housing.* | *87 FRAs* | *50% - On Track* | *100% - Completed* | Data provided by Marilyn Pipa in housing |
| 1. Carryout Fire Risk Assessments in **Low Risk** Priority Common areas (Between 2 & 3 stories/purpose built and relevant team to attend to actions. | *April 2021* | *March 2022* | *Divisional Director of Council Housing* | *350 FRAs* | *50% - On Track* | *100% - Completed* | Data provided by Marilyn Pipa in housing |
| **Council Housing**  **Fire Safety Audits**  **(Linked to priorities and Aims (A,B,H,I)** | Carryout audits of fire safety at high priority sites: | *April 2021* | March 2022 | *Divisional Director of Council Housing* | 27 | *50% - On Track* | *100% - Completed* | Data provided by Marilyn Pipa in housing |
| 1. Audit Sheltered Housing Schemes and relevant team to attend to actions | *April 2021* | *March 2022* | *Divisional Director of Council Housing* | *18* | *50% - On Track* | *100% - Completed* | Data provided by Marilyn Pipa in housing |
| 1. Audit Community Halls and relevant team to attend to actions | *April 2021* | *March 2022* | *Divisional Director of Council Housing* | *9* | *50% - On Track* | *100% - Completed* | Data provided by Marilyn Pipa in housing |
| ***Workplace Implementation*** | | | | | | | | |
| **Health & Safety Training**  **(Linked to priorities and Aims (B,F,G,I)** | 1. Identify suitable Health & Safety training opportunities as identified by department Directors/ Safety Rep’s/HOS/safety circle leads. | *April 2021* | *March 2022* | *Directors and safety Circle leads* | *100 Trained staff* | *56 – On Target* | *100% - Completed*  *Total staff trained for 2021-2022 was 151.*  *80 employees completed training on SHE*  *Over 15 staff have completed training on DSE* | Data provided by Darren Butterfield and Chudi Umeofor from CHS. |
| **Level 3 Award in Health and Safely**   1. **First Line Managers and Supervisors** to attend, **and L3 Risk Assessment course** | *April 2021* | *March 2022* | *Directors/ HOS* | *100%* | *30% - Behind Target* | *100% - Completed* | 30 staff have completed (Highfield) level 3 health and safety qualification  51 employees completed a (Highfield) level 3 risk assessment qualification training.  Data provided by Darren Butterfield |
| ***Asbestos Management*** | |  |  |  |  |  |  |  |
| **Corporate Buildings Asbestos Surveys**  **(Linked to priorities and Aims (A,B,C,H)** | To carry out asbestos surveys in all corporate buildings. Each building to have an asbestos management plan | *April 2021* | *March 2022* | *Head Facilities Management* | *50* | *All corporate site update to date with asbestos* | *50 Completed,*  *All corporate site update to date with asbestos* | To meet employers’ statutory duties under Regulation 4 of CAR 2012.  Data was provided by Kenneth Asiedu in facilities management |
| To carry out asbestos re-inspection survey to look at process and verify integrity of asbestos works by contractors, facilities Management to attend to any identified failings. | *April 2021* | *March 2022* | *Head of Facilities Management.* | *50* | *Asbestos reinspection surveys not due. Surveys scheduled to be carried out between November 2021– March 2022* | *50 Asbestos reinspection surveys completed.* | This will ensure processes are working and that we are carrying out a due diligence check.  Data was provided by Kenneth Asiedu in facilities management |
| **Community Schools and Schools with SLA Asbestos Surveys**  **(Linked to priorities and Aims (A,C,H)** | 1. To review management plans and results from surveys and carry out actions identified. There will be a minimum of 20 schools surveyed with Management Plans. Schools to attend to actions.   Should this | *April 2021* | *March 2022* | *Head of Faculties Management /Head Teachers* | *10 schools* | *Reviewed 10 surveys, identified works required. Proposed works will be scheduled to be carried out by 31st March 2022 – On Target* | *Reviewed 10 surveys, identified works required. Proposed works have been carried out.* | To meet employers’ statutory duties under Regulation 4 of Control of Asbestos Regulations 2012 - Community Schools LBE as the Duty Holder  Data was provided by Kenneth Asiedu in facilities management |
| **Council Housing Asbestos Surveys**  **(Linked to priorities and Aims (A,B,C,H)** | 1. To carry out and manage a Surveys on all common parts of the Housing stock   This will be risk based and client directed. Council Housing to attend to required actions. | *April 2021* | *March 2022* | *Divisional Director of Housing* | *431 surveys* | *421 – On Target* | *431 surveys*  *:(sheltered*  *Homes (16)*  *Community centres (10)*  *Converted Buildings*  *(22 other housing communal areas(383)* | To meet employers’ statutory duties under Regulation 4 of Control of Asbestos Regulations 2012.  Data provided by Krish Ponnusawmy, Housing Asbestos surveyor. |
| ***Communications*** | |  |  |  |  |  |  |  |
| **Occupational Health Service**  **(Linked to priorities and Aims (E,F,G,H,)** | (a) To ensure the Occupational Health Service continues to provide adequate health surveillance, HEP B vaccination, return to work rehabilitation, health promotion and reduction of work-related sickness absence   1. To provide statistical trend analysis about Occupational Health Service which will include employee referrals, counselling and the EAP service. | *April 2021* | *March 2022* | *HR* | HR to provide an update on Occupational health performance quarterly at the CHSB. | *50% - On Target* | *100 - Completed* | Managers to identify staff and refer staff to OH either for Health Surveillance or HEPB or Both.  HR to provide an update on Occupational health performance quarterly at the CHSB.  59 staff members have currently had the Hep B vaccination.  Data provided by Graham Webb, Environmental services H&S consultant. |
| **Communication Channels to promote key health and safety performance measures to employees.**  **(Linked to priorities and Aims (F,G,H,I)** | 1. Safety Circle leads to provide dates and key risks of safety circles. CHS to suggest these key areas to safety circle leads. 2. **Workshops** 3. **Safety tours** 4. **Newsletters** 5. **Audits** 6. **Employee suggestions for improvement** | *April 2021* | *March 2022* | *Safety circle and other communication channels* | *At least one a quarter* | *Resources directorates carried out their safety circles meetings on 29 September 2021* | *100% Completed* | Due to the Pandemic, information was communicated by government clearly instructing the council on relevant covid control measures. This information was communicated monthly and quarterly in a timely manner as inline with government guidelines also schools received quarterly newsletter update. |
| 1. Corporate Health and Safety Board to invite Divisional Directors to update progress on key risks for example.  * Corporate Building compliance * Community Schools building compliance * Housing Premises building compliance * Incident/ Accident statistical data * Housing Fire door replacement programme * Occupational Health statistical data * COVID-19 RA’s tracker | *April 2021* | *March 2022* | *Divisional Directors* | *Quarterly* | *50% - various promotional health and safety newsletters*  *On target* | *100% - Completed* | The corporate Health and Safety Board meets every 6weeks and discusses areas of concerns/risks to the organisation and agree future agenda items and areas of concern for DMT’s and Safety Circles. |
| ***Corporate Significant Risks*** | |  |  |  |  |  |  |  |
| **Corporate Risk Register detailing significant health and Safety risks to the organisation.**  **(Linked to priorities and Aims (A,F,G,H)** | 1. The corporate risk register highlighting those significant H&S risks to be presented to the Corporate Strategy Board (CSB) and Corporate Health and Safety Board. | *April 2021* | *March 2022* | *Corporate Risk Manager* | *Quarterly* | *50% - On Target* | *100% - Completed*  *Q1 was carried out 6th May 2021*  *Q2 was carried out 11th August 2021*  *Q3 was carried out 9th November 2021*  *Q4 was carried out 11th Feb 2022.* | Significant risks to be brought to the attention of CEX and the CSB.  The risk register is a living document that stays in place until the risk is addressed.  All significant health and safety risks was discussed with Neale Burns Risk Manager and the risk register was presented to CSB |
| **Report Data Analysis on Accidents, Incidents and near misses.**  **(Linked to priorities and Aims (A,F,G,H)** | 1. Present monthly data analysis on all accident, incident and near misses at the CHSB. | *April 2021* | *March 2022* | *Head of Corporate Health and Safety* | *6 weekly* | *50% - On Target* | *100% -Completed* | Trend Analysis on accident data to be brought to the attention of CHSB.  CHSB are scheduled every 6 weeks. |
| ***Mental Health and wellbeing Resilience*** | |  |  |  |  |  |  |  |
| **Corporate Mental Health Strategy**  **(Linked to priorities and Aims (D,F,I)** | 1. Refresher Training for mental health first aiders 2. to supporting the pool of wellbeing champions in he council through regular meetings and CPD | *April 2021* | *March 2022* | *Laurence Gibson and Andrea Lagos*  *Public Health* | *Quarterly* | *37 Wellbeing champions in total.*  *X9 from Communities,*  *x13 from People and x15 from Resources – On Target* | *37 Wellbeing champions in total.*  *X9 from Communities,*  *x13 from People and x15 from Resources - Completed* | To present progress against the mental health strategy to the CHSB.  Achievement data was provided by Andrea Lagos |

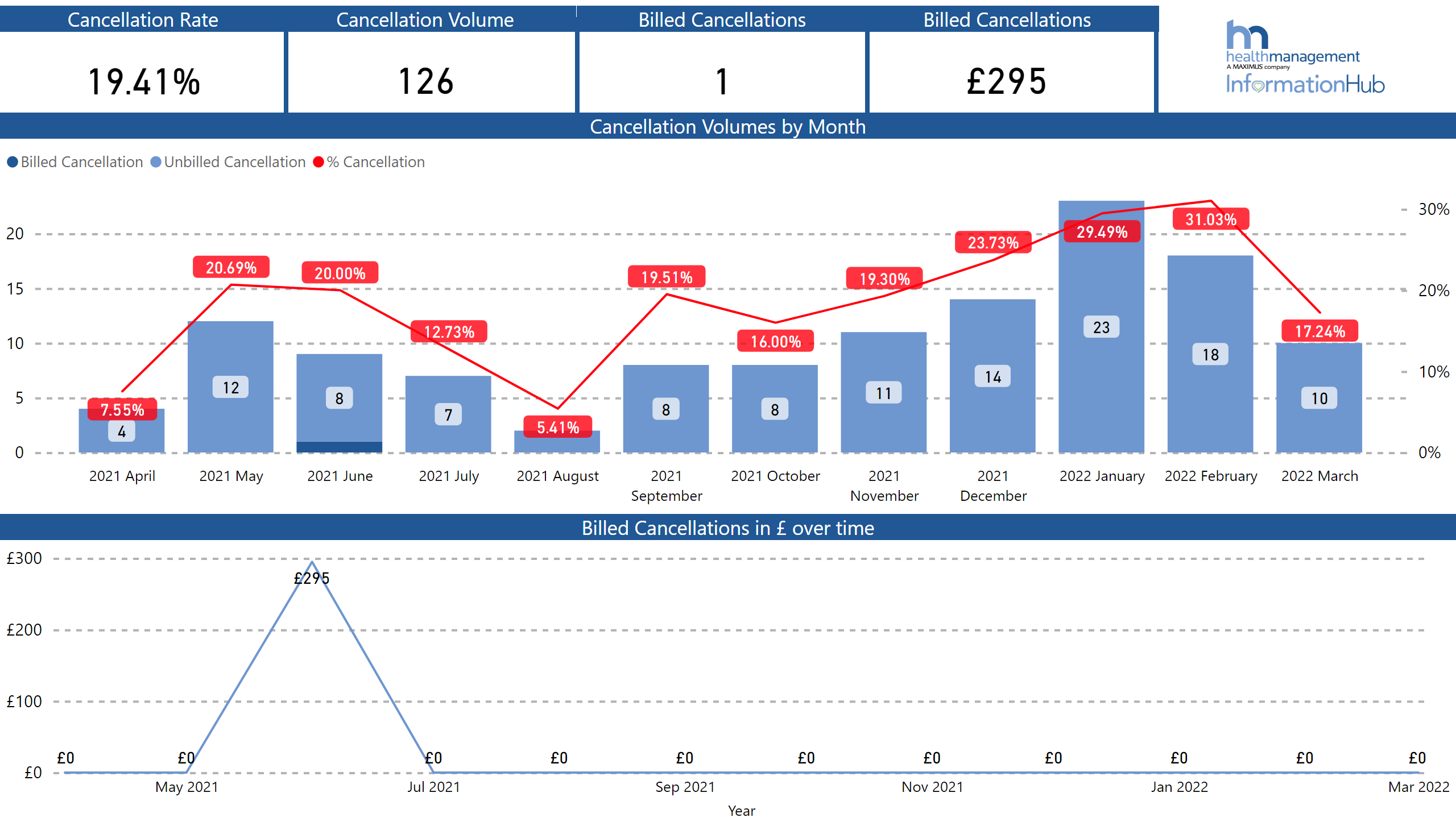
**APPENDIX 4- OCCUPATIONAL HEALTH SERVICE SUMMARY 2021/2022**

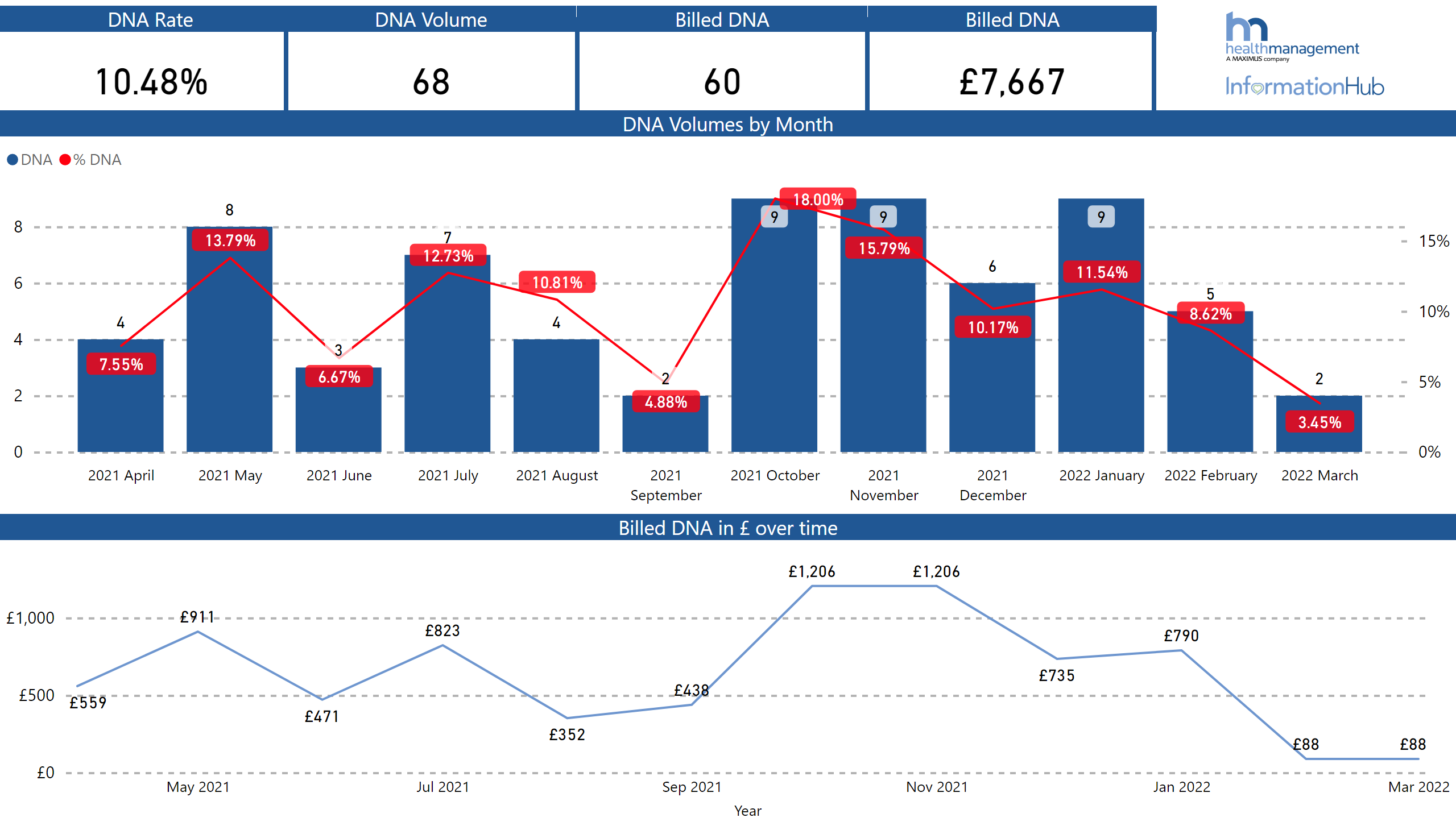


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| [This slide contains the following visuals: basicShape ,image ,image ,Work Related Volume ,slicer ,basicShape ,basicShape ,basicShape ,Case Type Breakdown ,Equality Act % ,Equality Act Volume ,Work Related% ,slicer ,basicShape ,basicShape ,Referral Volume By Month ,% EQA and % Work Related Over Time ,Total Referrals. Please refer to the notes on this slide for details](https://app.powerbi.com/groups/me/reports/9d472f06-5f91-438e-93ee-1978c564902a/?pbi_source=PowerPoint) |
| [This slide contains the following visuals: Unsatisfactory % ,slicer ,basicShape ,slicer ,HAQ Volume by Month ,Unsatisfactory HAQs ,image ,image ,card ,basicShape ,basicShape ,basicShape ,basicShape ,Total HAQs ,Satisfactory % ,Satisfactory HAQs. Please refer to the notes on this slide for details](https://app.powerbi.com/groups/me/reports/9d472f06-5f91-438e-93ee-1978c564902a/?pbi_source=PowerPoint) |
| [This slide contains the following visuals: basicShape ,Total Work Station Assessment ,%Work Station Assessment ,slicer ,slicer ,basicShape ,Work Station Assesments Volumes by Month ,image ,image. Please refer to the notes on this slide for details](https://app.powerbi.com/groups/me/reports/9d472f06-5f91-438e-93ee-1978c564902a/?pbi_source=PowerPoint) |
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| [This slide contains the following visuals: Total Physiotherapy ,image ,image ,% Physiotherapy ,basicShape ,basicShape ,slicer ,slicer ,Physiotherapy Volumes by Month. Please refer to the notes on this slide for details](https://app.powerbi.com/groups/me/reports/9d472f06-5f91-438e-93ee-1978c564902a/?pbi_source=PowerPoint) |
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| [This slide contains the following visuals: %Ill Health Retirement ,Total Ill Health Retirement ,basicShape ,basicShape ,slicer ,slicer ,IHR Volumes by Month ,image ,image. Please refer to the notes on this slide for details](https://app.powerbi.com/groups/me/reports/9d472f06-5f91-438e-93ee-1978c564902a/?pbi_source=PowerPoint)  [This slide contains the following visuals: Work Related MHD ,slicer ,image ,% MHD Work Related ,slicer ,basicShape ,image ,MHD Referrals By ICD ,basicShape ,basicShape ,% Work Related MHD by ICD ,Mental Health Outcomes ,basicShape ,basicShape ,basicShape ,MHD EQA ,% MHD ,Mental Health Outcomes by Month ,Mental Health Disorders ,basicShape ,basicShape ,MHD EQA %. Please refer to the notes on this slide for details](https://app.powerbi.com/groups/me/reports/9d472f06-5f91-438e-93ee-1978c564902a/?pbi_source=PowerPoint) |
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**APPENDIX 5- TERMS OF REFERENCE**



**Corporate Health and Safety Board**

**Terms of Reference**

**Aim**

The Corporate Health and Safety Board will act on behalf of the Chief Executive as the strategic focus for Health and Safety across the corporate estate, using the Health and Safety Policy Statement as framework for decision making. The Board will ensure the implementation of the policy statement through agreed best practice and development of a Health and Safety management system.

**Accountability**

The Corporate Health and Safety Board will provide progress reports to the Corporate Strategic Board (CSB).

**Objectives**

The Corporate Health and Safety Board has the following objectives:

* To provide a forum in which officers and others with specific responsibilities for health and safety, as set out in the Health and Safety Policy, are held accountable for and supported in their actions. These actions are:
* To ensure compliance with the requirements of health and safety legislation and regulations. throughout the Council.
* To ensure arrangements for developing health and safety competencies among managers and staff are in place and are being followed.
* To review and approve Council-wide objectives for health and safety, policy and strategies and initiatives for their delivery, in consultation with the Governance, Audit and Risk Management Committee (GARMC).
* To promote engagement with, and the integration of, health and safety considerations into everyday working practices in Council services.
* To lead on Occupational Health initiatives to promote well-being and stress management as part of the wider health & wellbeing agenda.
* To develop and oversee the development, implementation and regular updating of the Council’s strategic and operational health & safety risk register.
* To set and monitor performance indicators/standards for health and safety and monitor the Council’s arrangements for monitoring
* To commission audits and reviews of health and safety management systems, policies and procedures.
* To receive reports and feedback from Directorate Health and Safety Meetings or other relevant forums, groups or committees, as well as provide direction and information back to them as relevant.
* To consider reports on accidents and/or incidents, complaints and work related ill health statistics in order to identify any emerging trends or patterns.
* To consider reports on visits, inspections or any enforcement action taken by the Health and Safety Executive, the London Fire & Emergency Planning Authority and other enforcing authorities.

**Representatives**

The Corporate Health and Safety Board will be chaired by the Human Resources & Organisational Directorate with responsibility for establishing and implementing a strategic framework for the Health and Safety committees in each Directorate to achieve the aims set out above.

The Board shall consist of a nominated Divisional Director representative from each Directorate, a nominated Senior HR representative, representatives from the Unions and supported by the Corporate Health and Safety Team.

All representatives on the Board will have a voice in decision making. The chair / vice chair shall have the casting vote if the matter cannot be resolved by unanimous agreement. In matters that cannot be resolved, they will be passed to the Corporate Strategic Board, as the most senior strategic forum chaired by the Chief Executive, or Employee Consultative Forum (ECF) should it not be feasible to make a decision. The Unions retain the right to escalate matters of concern to an ECF Sub-Group / ECF in line with the consultative framework of the Council and Trade Union Recognition Agreements.

When a representative cannot make the meeting, a nominated person of sufficient grade shall attend and represent them

.

**Duties of the chair**

* Schedule regular Board meetings.
* Develop written agendas for conducting meeting.
* Maintain and action plan and log of decisions
* Conduct the meeting.
* Approve Board correspondence and reports.
* Supervise the preparation of meeting minutes.

**Duties of the vice-chair**

* In the absence of the chair, assume the duties of the chair.
* Perform other duties as directed by the chair.

**Conduct of the Board**

The Chair is responsible for ensuring that the Board meets on a 6 weeks basis to resolve issues and take forward the objectives and aims as set out in this document.

The Board should not be cancel or postponed except in exceptional circumstances. If any member of the Board cannot attend a deputy shall attend in their absence. If the meeting has to be postponed, a date for the next meeting should be agreed and announced as soon as possible by the Chair.

The minutes of each meeting will be supplied to every Board member once agreed by the Chair as soon as possible after the meeting and be made available on the intranet once agreed.

A copy of the agenda and any accompanying papers should be sent to all members at least one week before each meeting.

**Consultation**

The Board actively supports and participates in the consultative arrangements in line with Safety Representatives and Safety Committee Regulations 1977 as amended by the Health and Safety (Consultation with Employees) Regulation 1996 and the Management of Health and Safety at Work Regulations 1999

All Corporate Health and Safety Policies and Procedures shall be presented to the Corporate Board for consultation and agreement of any other party that needs be involved. Comments will be provided within a 4 week consultation period, will be collated by the Corporate Health and Safety Team, and discussed at the next Corporate Board for final sign off.

**Directorate Health & Safety Board**

The Corporate Health & Safety Board will feed into, and receive information and referrals from, the Directorate Health & Safety Boards, of which there will be three. The three Directorate Health & Safety Boards shall be chaired by Director (Environment & Culture) for Community Directorate, Head of Finance for Resources Directorate and Divisional Director (Educational Services) for People Directorate.

These Directorate Health & Safety Boards shall be held quarterly and minutes and actions fed back to the Corporate Health & Safety. Key themes / agenda items will be determined from the Corporate Health & Safety Board, as well as be influenced by the needs of the services. These Directorate Boards shall be run as per the principles of the Corporate Health & Safety Board Terms of Reference.

**APPENDIX 6- HEALTH AND SAFETY POLICY 2021/2022**

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| **Corporate Health and Safety Policy 2021/22** |
|  |

**Control Schedule**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Date** | **Signature** |
| **Prepared By** | **John Griffiths, Corporate Health and Safety Compliance Manager** | **22/03/21** |  |
| **Checked By** | **Richard Lebrun, Head of Service for Public Protection** | **22/03/21** |  |
| **Approved By** | **Tracey Connage, Divisional Director of HR & OD** | **26/03/21** | Picture 5 |
| **Review Date** | **1st April 2022** |  |  |

**Version Control**

|  |  |  |  |
| --- | --- | --- | --- |
| **Version** | **Date** | **Prepared By** | **Comment** |
| **11** | **01/04/2021** | **John Griffiths** | **This version supersedes all previous ones** |

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1. **Preface**

Harrow Council, as an employer, recognises its legal responsibility to secure as far as is reasonably practicable the health, safety and welfare of its employees, service users, contractors, and visitors. The Council aspires to achieve excellence in this by implementing and effectively maintaining a robust safety management system that will permit safe work practices without compromising the health, safety and wellbeing of employees, the general public and the environment.

This Policy and in conjunction with local documents, Codes of Practice (CoP) and Guidance Notes (GNs) will highlight how health and safety is managed across the Council as well as define Senior Management roles and responsibilities.

1. **Statement of Intent**

Harrow Council is committed to ensuring the health and safety of our employees, our residents, and others who may be affected by our work activities and will take all reasonably practicable steps to minimize the incidence of all workplace risks.

This policy reflects our intent to comply with health and safety legislations in our work and behaviours thereby demonstrating an ongoing and determined promise to continuous improvement of health and safety.

Our employees, contractors and stakeholders will be made aware of and provided adequate resources to implement this policy even as we all share a personal responsibility in complying with the Councils policy and procedures. The health and safety policy will be implemented by the corporate health and safety performance plan.

The councils’ approach to satisfying this commitment will be driven by;

* 1. Implementing the HSG65 ‘Managing for Health and Safety’ Management System to ensure compliance with health and safety legislations.
  2. Establishing active and open dialogue between all employees, residents, contractors, trade unions and other stakeholders. Health and safety will be integrated into our communications, wherever appropriate.
  3. Ensuring health and safety roles and responsibilities are defined as necessary within job descriptions.
  4. Provision and allocation of adequate resources to health and safety at all levels
  5. Provision of comprehensive and relevant information, instruction, training, and supervision to ensure employees have the knowledge and competence required to meet their individual and collective responsibilities
  6. Carrying out suitable and sufficient risk assessments for all work activities, ensuring appropriate control measures are established, communicated, and implemented.
  7. Monitoring of accident/incidents/near miss and other cases of work-related ill- health, prioritizing investigations, and taking corrective actions to prevent a reoccurrence.
  8. Demonstration of leadership in health and safety by senior management

ensuring systems are in place and people within their services are empowered to freely raise health and safety concerns with management.

* 1. Provision and maintenance of plants and a place of work or (premises under council control) that is safe and without risks to health with safe access and egress and appropriate facilities to maintain welfare at work
  2. Ensuring Managers are proactive in managing sickness absence using the Occupational Health Service (OHS) and Health surveillance is conducted as appropriate
  3. Promoting Health and Wellbeing at Work by encouraging a work life balance and healthier lifestyles such as
     + walk or cycle to work
     + provision of healthy eating options
     + discounts for staff at local leisure centre
     + support to employees who want to quit smoking.

The Health and Safety Policy will be reviewed at least every year, or more frequently should there be a significant incident or any major changes to legislation, operations, or personnel.

The Chief Executive has overall responsibility for health, safety, and welfare. Their day-to- day management is the responsibility of management and supervisory personnel.

Employees share a responsibility to co-operate with management, and in accordance with the Health and Safety at Work etc. Act 1974, to ensure their own safety and the safety of those affected by their activities. This includes not intentionally or recklessly interfering with or misusing anything provided for their health or safety.

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Sean Harris Graham Henson

Chief Executive Council Leader

Date: 26th March 2021 Date: 26th March 2021

1. **Scope**

Harrow Council’s Health and Safety policy applies to all employees and premises under the Councils control. This is inclusive of school and agency staff. This policy also extends to third parties who interact with the council such as consultants, contractors, service users and volunteers.

1. **Responsibilities for Health and Safety**

The council will coordinate its health and safety arrangements around existing corporate structure with clearly defined roles and responsibilities for efficient health and safety management.

Harrow Council

Harrow council, as an employer has the overall statutory responsibility for occupational health and safety.

Consequently, the council will

* Recognize significant health and safety risks faced by the Council
* Have oversight over strategic decisions and their implication on health and safety
* Establish appropriate communication and assurance systems to support this policy including its review and council uptake.

**Elected Members**

The Leader of the Council and Harrow Council Cabinet Members have overall responsibility for the control, direction and allocation of resources that are made available to manage health and safety. Where necessary, they will ensure that they take competent advice when considering matters relating to health and safety matters. Members are legally responsible for health and safety matters. Failure to comply with the requirements of current health and safety legislation will render them liable to prosecution under section 37 of the Health and Safety at Work etc. Act 1974.

Chief Executive

The Chief Executive has delegated authority from Harrow Council for the delivery, management and performance of this health and safety policy and ensuring that all health and safety matters are brought to the attention of the Elected Members.

Specifically, the Chief Executive shall.

* 1. Implement and endorse this policy as a visible demonstration of ownership and ensure its values are communicated
  2. Appoint the Corporate Director-Community with responsibility for overseeing the day-to- day management of health and safety on behalf of the Council
  3. Allocate suitable resources for the management of health and safety
  4. Agree on how this policy will be measured, monitored, and reported through the setting of appropriate key performance indicators and to review such performance data, celebrating achievement and taking corrective action where targets are not being met
  5. Determine a health, safety and wellbeing risk profile for the Council and agree an appropriate internal auditing program to reflect this profile
  6. Ensure that the statutory requirement to monitor health and safety issues affecting all directorates are carried out through the Corporate Strategy Board(CSB) AND THE Corporate Health and Safety Board(CHSB) which should incorporate Trade Union representatives
  7. Continually review health and safety performances, make decisions where required and communicate results to staff

Corporate Director-Community

The Corporate Director-Community is responsible for leading the council’s vision for a safe, secure, and healthy work environment.

Specifically, the Corporate Director-Community shall.

1. Act as the person with responsibility for overseeing the delivery of the day-to-day management of health and safety on behalf of the Council
2. Advise the Council on the preparation and revision of the its Policy Statement for Health and Safety; the appropriate organisation and arrangements necessary to meet the policy’s aims and objectives
3. Ensure that the Corporate Health and Safety Performance Plan is implemented and suitably disseminated
4. Ensure that a safety management framework is in place, to enable the appropriate health and safety policies and procedures to be developed, maintained, monitored, and reviewed
5. Encourage a practical approach to managing health and safety and imbue a positive health and safety culture among employees
6. Ensure that all employees have access to competent health and safety advice
7. Ensure that the required level of ‘competent’ persons are maintained within the directorate given the higher operational risk levels within certain areas of the directorate.
8. Act as Chairperson for the Corporate Health and Safety Board (CHSB) and ensure that health and safety information is disseminated throughout the organisation and to escalate health and safety matters to the Corporate Strategic Board (CSB) and to the Employees Consultative Forum (ECF), if required
9. Ensure that health and safety is promoted throughout all services and at all stages, including recruitment selection and training
10. Regularly consult with employees through their Trade Union or other representatives with respect to changes that may affect their health, safety, and wellbeing.
11. Coordinate the preparation of the Corporate Health and Safety Board (CHSB) meetings and management reports and ensure effective consultation with the ECF.

Corporate Directors

Corporate Directors are responsible for implementation and compliance with this Policy within their Directorates along with any specific health and safety Policies, Codes of Practice and Safe Systems of Work (SSoW) where required. Specifically, the Corporate Director shall,

1. Act as the person with responsibility for overseeing the delivery of the day-to-day management of health and safety on behalf of the Council
2. Have oversight of health and safety performance in their areas of responsibility and actively contribute to achieving the overall health and safety strategic aims, including the delivery of the Corporate Health and Safety Performance Plan
3. Support the Corporate Director-Community with responsibility for the lead health and safety role and champion Directorate employees with health and safety remits, to ensure that the Health and Safety Management System is adequately monitored and is effective.
4. Ensure that a Health and Safety Board for their Directorate is in place, which should have a chairperson appointed and comprise of relevant Trade Union representatives. The Board should also incorporate the Terms of Reference agreed by the CHSB.
5. Agree with Divisional Directors and Heads of Service targets for health and safety performance, in support of the Council’s overall strategy, the Corporate Health and Safety Performance Plan and Health and Safety Management System.
6. Designate a named officer (Premises Manager) to be responsible for management of those buildings occupied by them or by more than one Directorate or agency and ensure that these responsible persons are adequately trained.
7. Determine the health and safety responsibilities and safety critical roles of all employees in their Directorate are identified and incorporated within the employees’ role profile or job descriptions.
8. Ensure suitable and sufficient consultation with the appropriate employee representatives with regards to health and safety matters.
9. Be responsible for ensuring that this Policy and the Directorate Policy are communicated and understood by all employees in their Directorate
10. Ensure adequate resources are available for health and safety measures in order to meet corporate responsibilities.
11. Ensure that the appointed Safety Champion attend the Corporate Health and Safety board committee.

Divisional Directors and Heads of Service

Divisional Directors and Heads of Service have responsibility for ensuring that health and safety risks are managed in such a way as to meet Council aims and to ensure legal compliance as the minimum standard.

Specifically, the Divisional Directors and Heads of Service shall.

1. Prepare, implement, monitor, and periodically update their Divisional and Service Health and Safety Plans and ensure that the Council’s Health and Safety Management System is maintained.
2. Carry out suitable and sufficient risk assessments of the existing & new premises, plant, machinery etc. and appropriate action taken to effectively control the identified hazards.
3. Deliver the agreed targets on health and safety performance, including the Divisional Health and Safety Performance Plan, in support of the Council’s overall strategy, the Corporate Health and Safety Performance Plan and the Health and

Safety management system

1. Ensure that all accidents involving or have the potential to cause injury or harm to persons or damage to property are reported and investigated and any corrective action is taken to prevent recurrence.
2. Ensure all contracts are adequate in terms of health and safety provisions and that contractors are monitored to ensure they meet corporate standards.
3. Ensure that the appropriate information, instruction and supervision are provided to enable all employees to avoid hazards and contribute positively to their own and others safety, health and welfare at work.
4. Ensure liaison with other employers, including contractors and occupiers of shared premises to ensure effective cooperation for the exchange of “user” information to permit compliance with Corporate Policy.
5. Ensure compliance with Site Fire and Security Plans and allocating sufficient resources to meet the requirements of those plans in their work area and ensuring that emergency arrangements are in place to protect employees and others against risk of imminent danger
6. Ensure that employees are competent and capable of performing their duties to the required standard with the provision of adequate training to ensure that competency is assured and maintained.
7. Make suitable arrangements for consulting with employees on health and safety matters and in accordance with legal standards i.e. through regular recorded team meetings and ensuring that health and safety is a standard item on the agenda at these meetings.
8. Obtain advice and support from the Corporate Health and Safety Team and / or the Occupational Health Service as may be needed.

Corporate Health, Safety and Compliance Manager

The Corporate Health, Safety and Compliance Manager (CHSCM) is the councils appointed ‘competent person’ regarding health and safety management.

This role is to ensure that the health and safety of employees and those that engage with Council are not adversely affected by Council activities or processes, so far as is reasonably practicable, whilst promoting the highest quality of health and safety practice and continuous improvement across the Council’s wide spectrum of activities; so meeting all its legal and moral obligations in this regard

Specifically, the Corporate Health, Safety and Compliance Manager shall.

1. Define the content of this Policy, additional corporate health and safety related policies and guidance documents, which will be reviewed yearly or earlier, if required.
2. Design, plan, and execute the Corporate Health and Safety Performance Plan (CHSPP)
3. Provide adequate advisory support to ensure compliance throughout the Council
4. Ensure that Senior Management are aware of their responsibilities in meeting health and safety objectives and targets
5. Manage the corporate accident / incident database; preparing accident statistics; producing management reports and disseminating these as may be required
6. Produce an action plan for Corporate Strategy Board (CSB) and Corporate Health and Safety Board identifying key risks to the organisation
7. Set corporate performance standards and key performance indicators
8. Be the primary point of contact with external health and safety regulatory bodies and

agencies

Head of Property and Facilities Management

The Head of Property and Facilities Management has overall accountability for Corporate property related health and safety matters, except for properties managed by third party contractors on behalf of the Council, and leased properties, as appropriate.

Specifically, the Head of Property and Facilities Management shall.

1. Be responsible for managing the design, construction, installation, security, maintenance (including cleaning), inspection, decommissioning, demolition and refurbishment, as appropriate, of the Council’s non-domestic property portfolio, ensuring compliance with health and safety requirements including statutory obligations, i.e. asbestos management, fire safety compliance arrangements, control of legionella etc.;
2. Conduct and compile a comprehensive suite of records of fire risk assessments/inspections, asbestos; registers/management/demolition/refurbishment surveys and plans, water quality control inspections and reports, etc. to be held both centrally and onsite for property and facilities management, duty holder and enforcing authority purposes.
3. Ensure that suitable communication methods are established for liaison with all Premises Responsible Person who have been delegated with the day-to-day management of individual sites & properties and that these managers receive suitable information, support and assistance to effectively manage these buildings safely and in the decision making process when planning any changes to buildings
4. Ensure that roles and responsibilities are set out and adhered to in lease and sub- lease agreements, including maintenance and repair obligations, fire safety, asbestos and legionella management, etc.
5. Ensure adequate ‘control of contractors’ arrangements, including access to, permit to work and confined space working systems, etc. are in place to discharge (a) – (c) above; and,
6. Act as temporary duty holders, ensuring that roles and responsibilities are set out for let agreements and out of hours access to Council premises to third parties.

For the purposes of the corporate estate, this role falls to the Facilities Management Team within Community.

Head of Human Resources

In terms of this Health and Safety Policy, the Head of Human Resources supports employee wellbeing and has responsibility for ensuring:

1. The adequate provision of Occupational Health Services, including pre- employment health screening, medicals, vaccinations, health surveillance, etc. in consultation with Corporate Health and Safety.
2. The adequate provision of Employee Assistance support
3. Appropriate people policies and procedures are developed, maintained and monitored for work-related stress, driving at work and alcohol and drugs.
4. The provision of health promotion initiatives within the Council to promote employee health and wellbeing.

Responsible Person/Site Health and Safety Duty Holder

In additional to normal managerial duties, employees who have control of premises or sites as part of their role (duty holders) shall undertake statutory health and safety related duties. Technical support for these duties will be provided by the property and facilities management team but the management of the duties are the responsibility of the Duty Holder.

In order to ensure that responsible person/site health and safety duty holders can fulfil their duties and responsibilities under the corporate health and safety policy, the tasks involved in managing these premises may be delegated to other persons e.g. head teachers in schools, members of staff, managing agents or other external organisation, provided that they have the necessary competence, resources and have Council approval to perform these roles.

Specifically, responsible person/site health and safety duty holders shall ensure that.

1. All health, safety and welfare risks under their management are identified, assessed, and controlled, with specialist input from corporate health and safety advisers and others, where required.
2. That the requirements in this Policy are communicated and followed by all employees and third parties, including service users.
3. Health and safety training needs analysis is carried out, and suitable training is delivered within appropriate timescales, including induction training.
4. That workplace inspections are carried out each quarter (termly in schools), and that these are documented and, where required, remedial action is acted upon and delivered within appropriate timescales, that workplace inspections are carried out each quarter (termly in schools), and that these are documented and, where required, remedial action is acted upon and delivered within appropriate timescales
5. Ensure compliance with Site Fire and Security Plans and sufficient resources are allocated to meet the requirements of those plans in their area, ensuring emergency arrangements are in place to protect all employees and others against risk of imminent danger
6. Report and primary investigation of adverse events or conditions – injuries, work-related ill health, diseases, dangerous occurrences (‘near misses’); and any premises/plant/equipment hazards, damage or defects (corporate health and safety shall conduct significant adverse event investigations, as appropriate).

Community Schools Governing Body and Headteachers

**Governing Body**

The governing body's responsibility is to approve the strategic vision for the school, working in partnership with the Headteacher and promoting continuous improvement in the performance of the school health and safety performance. The governing body has legal duty under the Health and Safety at Work etc. Act 1974.

**Headteachers**

In accordance with Health and Safety legislation, the Employer is accountable for the Health and Safety of school staff and pupils. The day to day running of the school is delegated to the Headteacher and the school management team. In most cases they are responsible for ensuring that Health and Safety risks are managed effectively.

Schools must seek competent advice and support to ensure they meet their health and safety duties. The provision of competent health and safety advice and support from qualified health and safety professionals is offered to schools through the Service Level Agreements (SLA’s).

Specifically, Headteachers shall.

1. Put in place suitable organisational arrangements for implementing, monitoring, and controlling the health, safety and welfare of staff and pupils.
2. Undertake suitable and sufficient risk assessment on all school activities, where there is no relevant model risk assessment, obtain competent advice to undertake a suitable and sufficient risk assessment.
3. Appoint an educational visit coordinator from their staff to advise and co-ordinate offsite educational visits and ensure that risks to pupil health and safety during off-site visits are adequately assessed and controlled.
4. Appoint a designated person for fire safety to ensure there are adequate fire safety arrangements, including a written fire emergency plan.
5. Make arrangements for the security, repair, and maintenance of the premises, including the proper selection and control of contractors, and ensure any defects are made safe without delay.
6. Make arrangements for machinery, plant, and equipment to be maintained in a safe condition, including tests and inspections required by law, and keep records.
7. Provide adequate information and instruction to employees, including the first aid provision and the fire evacuation procedure.
8. Arrange for appropriate training in health and safety, and certification where required, and keep this up to date. Health and Safety must be a standard part of any new employee’s induction.
9. Make sure that staff that supervise hazardous activities are suitably qualified and experienced.
10. Undertake regular inspections of the workplace and working practices and report the findings to the Governing Body.
11. Keep a record of accidents and report all accidents to the Harrow Council corporate health and safety team using the online [SHE Assure](http://www.sheassure.net/harrow) incident reporting system
12. Undertake prompt investigation of major accidents and take immediate action to prevent a recurrence. Record your investigation using the online [SHE Assure](http://www.sheassure.net/harrow) incident reporting system.

Managers and Supervisors

Employees that manage staff in any capacity are responsible for ensuring that activities carried out under their control are in accordance with Corporate Policies and procedures and in compliance with statutory provisions.

Specifically, managers and supervisors shall.

1. Deliver targets on health and safety performance as agreed with their Divisional Director or Head of Service, including their Service’s Health and Safety Performance Plan, and where required, their Directorate Health and Safety Performance Plan, the Corporate Health and Safety Performance Plan and Health and Safety Management System
2. Managers and supervisors to develop, amend and review all their operational Risk Assessments and that managers communicate those risk assessments to their staff for understanding of those risks and what control measures are required to undertake their duties safely.
3. Ensure all health and safety risk are identified, assessed, controlled/mitigated, and reviewed, as appropriate, with specialist input from corporate health and safety advisors and others including the Council occupational health provision, where required.
4. Use and promote systems of communication to ensure all employees are involved in contributing to the safety of their work and workplace by giving feedback on existing safety rules and procedures
5. Provide suitable and sufficient information, training, and supervision to ensure that all employees avoid injury / ill-health and contribute positively to their safety, health & welfare and that of others and monitor compliance
6. Inspect the workplace at least quarterly; taking appropriate action to remedy the identified hazards; reporting those hazards that cannot be remedied to the line manager so that further action is carried out as may be required
7. Ensure timely involvement of Occupational Health support to promote health at work and, where appropriate, to enhance the effective return to work of absent employees
8. Ensure that Safe Systems of Work are devised and put in place and that staff have been suitably and sufficiently trained. Ensuring that the distinction between Safe Systems of Work (SSW) and Standard Operating Procedures (SOP) is fully understood.
9. Ensure that Corporate Directors and Divisional Directors / Heads of Service are aware of any shortfalls in relation to a lack of resources, training requirements and support that may be required

Employees

All employees have a duty to take reasonable care whilst at work, ensuring not to endanger themselves or others that may be affected by their acts or omissions and to cooperate with management so as a high standard of health and safety throughout Harrow Council is achieved.

Specifically, employees shall.

1. Ensure they are aware of, understand and follow those parts of the health and safety management system, Codes of Practice and Guidance Notes which relate to their area of work.
2. Also ensure that they are familiar with and understand the following.
   * Any necessary action concerned with fire and fire drills at their place of work
   * The first-aid arrangements and facilities available at their place of work.
   * The corporate accident / incident / near-miss reporting procedures.
3. Avoid conduct that would put themselves and others (including visitors, contractors, the public and persons on work experience) safety, health, and wellbeing at risk of injury
4. Attend any training provided and putting into practice all instruction intended to ensure safety whilst at work
5. Not miss-use safety equipment and protective clothing provided, utilizing these in accordance with instructions or training received and immediately reporting any defects to their supervisor / manager
6. Operating only those items of plant / equipment for which they have received training and are authorized to use
7. Following any control measures identified within the risk assessments relevant to their work
8. Complying with disciplined work procedures as detailed either in writing or verbally by their manager or supervisors and to ensure such instructions and training that is given is fully understood before commencement of work
9. If in doubt, to query any matters regarding health and safety by contacting corporate health and safety service
10. Using the correct tools and equipment for the task/s and ensuring that these tools are maintained in good working order therefore reporting any defects immediately to their supervisor / manager
11. Report all accidents, incidents and near misses, in accordance with the corporate

accident / incident reporting procedure

1. Cooperating with management in evaluating risks and suggesting ways to improve health and safety performance
2. Refraining from 'horseplay', cutting corners, and taking unnecessary risks whilst undertaking their tasks
3. Assisting management by ensuring that other employees, particularly new employees, are aware of the procedures, Safe Systems of Work and any potential hazards that are likely to be created during the work activity
4. Ensuring that, where vehicles are used for work purposes, then these must be maintained in a safe and roadworthy condition and any materials and equipment carried in the vehicle should be appropriately secured thus in compliance with the related statutory regulations
5. Not consuming any alcohol, recreational drugs or any other substances that may impede their mental and physical state of mind

If you have any doubts about your health and safety responsibilities in your workplace, you must seek clarification from your supervisor or line manager. You may also seek guidance from your Trade Union Safety Representative or the Corporate Health and Safety Team.

Safety Representatives

Safety Representatives have legal recognition under the SRSC Regulations 1977. They are elected by Trade Union members recognised by the Council and have a duty to represent their members (employees). Functions of a Safety Representative include:

1. Conducting investigations of potentially significant hazards and dangerous occurrences in the workplace and to examine the cause/s of an accident
2. Investigating complaints raised by any employee they represent relating to the employee’s health, safety or welfare.
3. Making representations to management on matters arising from the two above duties or any other legitimate health and safety concerns
4. Carrying out inspections of the workplace at agreed intervals, having given reasonable notice to the responsible manager
5. Reviewing information from Health and Safety Inspectors and others on behalf of employees whose health and safety they represent
6. Attending health and safety meetings and where necessary, ensuring that their members are adequately represented.

Third Parties

This policy also relates to third parties who interact with the council such as consultants, contractors, service users and volunteers.

Specifically, they are to.

a. Act in accordance with the council’s guidance on third parties with respect to the management of their health and safety

1. **Arrangements for the Management of Health and Safety**

**Training**

Health and safety training will be provided for all staff as part of their induction and subsequently,

repeated periodically as part of their mandatory training through Training Academy and E- Learning Pool.

Other specialist training necessary for staff with specific health and safety responsibilities in each workplace will be identified through the risk assessment process and staff appraisals. This includes

e.g. Fire Warden, First Aider, Legionella and Asbestos Awareness.

The Health and Safety training matrix can be referred to as an aid to help identify mandatory and recommended health and safety training for your staff. This can be found on SharePoint <http://our.harrow.gov.uk/worksites/corporateHS/Lists/training/AllItems.aspx>

**Risk assessment**

Risk assessment is the key to effective and sensible health and safety management. The findings

from risk assessments will be used to identify, prioritise and control risks at all levels in the company.

Managers will ensure that all significant hazards in their workplace / work activities under their control have been suitably risk assessed and that any subsequent risks are adequately controlled. Risk assessments will be reviewed at least every year, or more frequently should there be a significant incident or any major changes to legislation, operations, or personnel.

Risk assessments should be uploaded or carried out using the councils health and safety management software, [SHE Assure](http://www.sheassure.net/harrow)

**Risk Register**

If a risk has been identified as being high or may have a major impact and/or be detrimental to

service users, staff and the organisation, the Corporate Risk Register must be updated. All high risks that have been placed on the risk register should be reviewed regularly until resolved.

The risk register is managed by the Corporate Risk Management team they update it quarterly for the Corporate Strategic Board (CSB). The Corporate Health and Safety Compliance manager updates the Risk Register on health and safety risks quarterly.

**Accident / incident reporting and investigation**

All accidents / incidents and ‘near-misses’ should be recorded, reported, and investigated in

accordance with the company’s Incident Reporting Policy.

Reporting of accident/incidents/near misses is carried out using the council’s health and safety management software [SHEASSURE](https://sheassure.net/harrow)

All RIDDOR reportable incidents will be reported to the HSE by the Corporate Health and Safety team. However, as RIDDOR Reportable incidents are time bound, the corporate health and safety team must be notified of such incidents the same day they occur.

**First Aid at work**  Harrow Council will prioritize adequate first aid provision to ensure employees get immediate medical attention when required.

The level of provision provided will be appropriate to the risks identified in each workplace risk assessment.

All First Aiders will be competent in either First Aid at Work (FAW), Emergency First Aid at Work (EFAW), or Mental Health First Aid course (MHFA) and hold a valid certificate of training and their names and locations will be prominently displayed in each workplace. First aiders will also be responsible for first aid kits.

More specific details are contained in the first aid at work code of practice HSCOP 12-00

**Occupational Health Service** Harrow Council is committed to promoting physical and psychological wellbeing of all its employees thereby undertaking appropriate measures to prevent ill-health and injury that may arise from any work activities.

The Occupational Health Service (OHS) and Employment Assistance Programme (EAP) are services provided by the Health Management Limited (HML), providing expert advice, specialist counselling and support to all Harrow Council employees when required.

Employees can access the EAP service 24 hours a day, 7 days a week, either online or by the telephone. The range of topics covered by EAP include legal, bereavement, bullying and harassment advice etc.

Employees requiring the Occupational Health Service can receive this following initial referral by their line manager

Further advice / information can be obtained from Human Resources Department, email - AskHR [AskHR@harrow.gov.uk](mailto:AskHR@harrow.gov.uk) as these services sit separate to the Corporate Health & Safety function, but will liaise with, and contribute to, any corporate health & safety plan for the purpose of ensuring the welfare of all.

Supporting Documentation

The council has several supporting documents which provide employees with more detailed practical arrangements regarding health and safety issues. These are available on SharePoint -[Corporate Health and Safety Documents](http://our.harrow.gov.uk/worksites/corporateHS/CorporateDocuments/Forms/grouped.aspx)

**Communicating Health and Safety Information**

The council uses a variety of methods to ensure suitable and sufficient health and safety information is disseminated to all staff; these are:

* Health and safety law poster and local contact notices e.g. first aiders, fire marshals.
* [SharePoint](http://our.harrow.gov.uk/worksites/corporateHS/Home.aspx)
* Health and safety policies, guidance documents and handbook which can be found on [Share point](http://our.harrow.gov.uk/worksites/corporateHS/Home.aspx) or on [SHE ASSURE](http://www.shheassure.net/harrow) document Library
* Safety Circles
* COMMS
* Team briefings which may contain occasional health and safety information.

All other arrangements for health and safety can be found in the councils’ health and safety staff handbook. This will be given to staff during induction, can be requested from your manager or accessed using either [Share Point](http://our.harrow.gov.uk/worksites/corporateHS/CorporateDocuments/Forms/grouped.aspx) or [SHE Assure](http://www.sheassure.net/harrow) document library Reference 133

1. **Assurance**

In order for this policy to be effectively implemented there needs to be an assurance process. Assurance will be established by.

* Documentation - Divisional Health and Safety Plans including copies of risk assessments and safe working methods will be in writing and kept either electronically or as hard copy. It is essential that working documents such as risk assessments are readily available to all employees
* Reporting – Ensure key indicators are in place to monitor performance and include data to identify trends that will be fed back to Senior Management
* Independent Review - The Corporate Health and Safety Team will undertake assurance work of all Directorates. Directors and Heads of Service will ensure that active monitoring is carried out in their areas, based on the Corporate Health and Safety Performance Plan. In addition, Inspectors of the enforcing authorities and health and safety representatives appointed by recognized Trade Unions will / may conduct independent inspections and audits.

1. **Sign off of Policies and Procedures**

The responsibility for producing, updating, and communicating corporate policies and procedures rests with the corporate health & safety team under the Corporate Health, Safety Compliance Manager.

All Policies are presented at the Corporate Health and Safety Board where the board committee is represented by Corporate Director, Divisional Directors, Human Resources, Corporate Health Safety and Compliance Manager and Trade Unions. All members of this board have responsibility to review and encourage feedback before final sign-off

Health & Safety requires the proactive, timely production of relevant and required policies and procedures to ensure the safety of those in the organisation. To this end, such policies and procedures final sign off rests with the Corporate Director-Community and will be reported to the Corporate Health & Safety Board for information and cascading as necessary.

Director of ICT

**Senior Management Structure**

Interim Chief Executive

**Paul Hewitt**

Corporate Director Community

**Dipti Patel**

Interim Corporate Director People

**Peter Tolley**

Corporate Director Resources

**Charlie Stewart**

Vacant - Divisional Director Commissioning Services

Director of Adult Social Services

**Angela Morris**

Director Legal & Governance

**Hugh Peart**

Divisional Director children & young people Services

**Vacant**

Director of Finance

**Dawn Calvert**

Divisional Director Housing

**Julian Higson**

Head of Customer Service & Modernisation

**Jonathan Milbourn**

Interim Director Environment Services

**Tony Galloway**

Director of Public Health

**Carole Furlong**

Divisional Director of Education

**Patrick O’Dwyer**

Interim Director commercial development

**Julian Wain**

Director of ICT

**Ben Goward**

Director PS-Commercial & Regeneration

**Johanna Morgan**

Interim Chief Planning Officer

**Beverley Kuchar**

Director of HR & OD

**Tracey Connage**

Director of Strategy

**Alex Dewsnap**

Director of Economy and Culture

**Mark Billington**

1. LTI-Lost time Injuries [↑](#footnote-ref-1)