

Staffordshire County Council
Annual Report on Health, Safety and Wellbeing Performance 2016/17

1. Action Required

1.1 The County Council's Senior Managers need to: -

- Review the findings and management information detailed in this report;
- Analyse this year's performance and identify action to ensure continuous improvement;
- Consider key actions identified for 2017/18 and decide if any further actions are required;
- Share and communicate the report to SLT, WLT and OMT; and
- Recognise the work that has been achieved to improve the council's management of health, safety and wellbeing risks.

2. Introduction

- 2.1 This report covers the period from 1st April 2016 to 31st March 2017. The aim is to provide the council's senior management, stakeholders, public of Staffordshire and others interested in health, safety and wellbeing with information about what the county council is doing to protect its employees, volunteers, contractors, service users, pupils and members of the public.
- 2.2 Health, safety and employee wellbeing in the county council is part of the overall risk management strategy, which aims to identify and manage risks to the county council and its services to the public. Health, safety and employee wellbeing focuses on the risks of injury and ill health that can arise from the wide range of activities necessary to deliver the services to the people of Staffordshire.
- 2.3 This report identifies progress against the key action points outlined in the action plan for 2016/17 and identifies key priorities for 2017/18.

3. Background

3.1 The type of health and safety risks involved are varied, but include:-

- Work related ill health including stress at work
- Manual handling
- Lone working
- Violence and aggression
- Transport and road risks
- Slips, trips and falls

- 3.2 An organisation with such a broad range of activities as Staffordshire County Council has a wide variety of risks to manage and the above list represents only some of the most common risks across the council. To ensure that all risks are identified, the council has a risk assessment process for use by managers and staff.
- 3.3 Our services are often delivered via partnership arrangements. These include a wide range of external organisations such as the NHS, charities, contractors and volunteers. By focusing on co-operation, communication and co-ordination with our partners, we aim to ensure that these operations are also effectively managed as safely as is reasonably practicable.
- 3.4 To support the management of health, safety and employee wellbeing the council employs a number of specialists, including health and safety specialists; occupational health specialists who provide support for employees, property management specialists etc. In the workplace there are trained safety representatives nominated by trade unions who help to monitor health, safety and wellbeing as well as represent employees during consultation.

4. Action taken during 2016/17 to improve Health, Safety and Wellbeing Management Arrangements

4.1 Key Successes

- 4.1.1 Embedded the new health and safety auditing arrangements across the organisation.
- 4.1.2 Supported health and safety aspects of the implementation of smart working across business areas and revised display screen equipment management arrangements and assessment process to work effectively with new agile working arrangements.
- 4.1.3 Developed improved fire safety management arrangements and new fire risk assessment documentation to PAS 79 standards. Updated the fire risk assessment training to new standard and held implemented briefings on new arrangements.
- 4.1.4 The Health, Safety and Wellbeing Service maintained its diverse training programme to meet the organisation's statutory training needs. Participant feedback remains very positive confirming that the training assists them to understand and fulfil their health and safety responsibilities. Increased availability of personal resilience training due to high levels of demand experienced.
- 4.1.5 Completed two wellbeing events one in June focussing on physical health and the importance of exercise and daily activity levels. In October launched a mental wellbeing focussed newsletter based around the importance of good conversations on improving our mental health and wellbeing. High levels of engagement continue to be experienced with all wellbeing interventions and activities undertaken.
- 4.1.6 The Health, Safety and Wellbeing Service continued to deliver effective wellbeing interventions. The council's musculoskeletal prevention and early intervention activities have continued to provide benefits to the organisation and maintained the reduction achieved over the previous two years. ThinkWell has seen increased referrals with 52% of the referrals being preventative and supporting the employee to remain in work. Feedback from individuals accessing the service and their managers is that they find it very beneficial. The service continues to perform well with 95% of

referrals being contacted within 48hrs. 20% of employees have accessed the CALM online self-help toolkit.

- 4.1.7 Completed 83 School and 10 Core Council audits of services to review their health and safety management arrangements and develop improvement plans.
- 4.1.8 Completed 84 health and safety planning meetings with schools who purchased the Additional Service Level Agreement to allow them to identify key risk gaps and develop management plans to improve their health, safety and wellbeing performance.
- 4.1.9 Supported Strategic Property to review its approach to client compliance in line with Construction Design and Management Regulation changes and developed a new process for implementation from May 2017.
- 4.1.10 Health, Safety and Wellbeing Service has also responded to and managed several emergency situations and serious incidents during 2016/17.

4.2 Service Level Agreements (SLA)

- 4.2.1 99% of maintained schools purchased the health and safety service during 2016/17 with just 2 schools seeking other provision. 97 maintained schools purchased the additional service level agreement. The Headteacher briefings were well attended and feedback was excellent. Headteachers have indicated that these briefings help them to understand their accountabilities and develop further their learning and skills to manage health, safety and wellbeing effectively in school environments.

4.3 Improving the Health of the Workforce

- 4.3.1 Absence within the county council is now at **7.65 days** per employee, which is an increase from last year. This level of absence is below the public sector benchmark of 9.9 days. Prevention and early intervention activities continue to help reduce absence levels.
- 4.3.2 Between 1st April 2016 – 31st March 2017, 432 employees had been referred to the physiotherapy service resulting in the maintenance of the reduction in musculoskeletal absence achieved since implementation in 2012.
- 4.3.3 There has been a significant increase (29%) in absence due to psychological disorders. ThinkWell has received an increase in referrals for support and counselling. The clinical assessment scores clearly show that colleagues have benefited from the services they received. Manager and colleague feedback remains extremely positive. Calm self-help tools have also remained popular with over 20% of the workforce having accessed this tool kit.
- 4.3.4 Colleagues supported by ThinkWell showed after treatment a 99% improvement/recovery. 94% of colleagues accessing the service described the support as helpful or extremely helpful. 97% of Managers felt the service helped them support employees. 95% of referrals were contacted within 48 hours and the average time to first session was 6 days

- 4.3.5 Occupational Health received 1239 management referrals which is an increase from last year reflecting the push for schools to be more proactive in managing absences. 84% of core county council long term absence cases are being referred by managers to Occupational Health for support. The HR team continues to work with managers to ensure early referral to Occupational Health as early advice and support can help maintain colleagues in work or support a faster return to work.
- 4.3.6 Preventative health promotion and wellbeing events and tools operated by Health, Safety and Wellbeing Service are being used by Core County Council and schools. Feedback regarding these tools indicates that they are found to be helpful and supportive in undertaking duties and supporting their staff groups.
- 4.3.7 Flu vaccination was offered to colleagues where agreed with their manager to support continued delivery of services and the NHS flu vaccination campaign. Vaccination is an essential part of the overall infection prevention and control arrangements. More than 500 vouchers were supplied to schools and core council colleagues.

4.4 Key Performance Indicators (KPI's)

- 4.4.1 The council has agreed a range of key performance indicators for health and safety against which the council can monitor progress and performance. The outcomes of these are detailed in Appendix 1, and are benchmarked against previous years. These key performance indicators demonstrate that the council is improving performance and key actions are being undertaken by managers in the workplace. It is important that the council continues to monitor these indicators to identify further scope for improvement and to maintain the gains already made.
- 4.4.2 The Health, Safety and Wellbeing Service is contacting all maintained schools who have not confirmed that they have reviewed their fire risk assessment to ensure that they understand the importance of having an effective and adequate fire risk assessment in place and to offer support where required.

5. Health and Safety Audit and Evaluation Process

5.1 Outcomes of Internal Health and Safety Audits

- 5.1.1 During 2016/17 93 health and safety audits were completed by the Health, Safety and Wellbeing Service.
- 5.1.2 The outcome of these audits identifies the operating maturity level of the service/establishment audited. The frequency at which the service/establishment will be re-audited is based on the level of maturity achieved; allowing investment of resources where most benefit may be achieved.
- 5.1.3 The table below outlines the present maturity results of all services.

Maturity Level	Schools	Families & Communities	Economy, Infrastructure & Skills	Finance & Resources	Strategy, Governance & Change	Health & Care
Level 1 - Emerging	5	1	0	0	0	0
Level 2 - Managing	50	4	0	3	0	4
Level 3 - Established	72	9	4	3	0	2
Level 4 - Performing	96	2	3	1	0	8
Level 5 – Continuous Improvement	30	4	5	0	1	2

The Health, Safety and Wellbeing Service are working with all services that have achieved levels 1 & 2 to support them to make improvements. Corporately 79% of Schools and 78% of core council services audited in the revised process are operating at level 3 and above which demonstrates continuous improvement. The Health, Safety and Wellbeing Service continue to focus additional support to services at level 1 and 2.

6. Accident and Incident Data

6.1 Accidents and Violence Statistics

6.1.1 See Appendix 2 for detailed accident and violent incident statistical data. Data shows that accidents and violence to employees have decreased. Reportable incidents to the HSE have also decreased. The council's AIR (Accident Incident Rate) indicator also shows a decrease compared with last year.

6.2 Costs of Accidents & Incidents

6.2.1 Each accident costs the council valuable resources in staff time, sickness absences, insurance claims and other hidden costs. The estimated total costs of all incidents, including accidents and violence is based on the Health and Safety Executive's costing guidance detailed in Appendix 1 items 9 and 10. Cost of accidents has fallen in 2016/17 to £2,056,250 compared with £2,111,250 in 2015/16 (saving of £55,000). Costs of violence to employees for 2016/17 has fallen to £735,000 compared to £831,250 in 2015/16 (decrease of £78,250).

7. Health and Safety Investigations

7.1 Internal Health and Safety Investigations

7.1.1 The Health and Safety Advisors have continued to investigate the more serious accidents and encourage Operational Managers to investigate all accidents. Managers have been encouraged to establish both the immediate and root cause of accidents to manage the potential for reoccurrence.

7.2 Incidents during 2016/17

- 7.2.1 There have been a number of near miss accidents/minor injuries in schools and core council activities which could have had more serious outcomes. The Health, Safety and Wellbeing Service has investigated these incidents and helped the services and schools implement improved control measures.
- 7.2.2 Participated in the investigation of the causes and working practices following a small fire at Stafford Waste Recycling Centre.
- 7.2.3 Supported the organisation in the multi-agency response to the fire at the illegal waste site at Slitting Mills.
- 7.2.4 Investigated issues resulting from building work completed at The Richard Heathcote Primary Schools
- 7.2.5 Flashley Primary School returned to their school site in January 2017 following successful removal of the material in the ducts, completion of the site clean-up activities and air testing levels returning to below the world health organisation levels.

7.3 Health and Safety Executive's (HSE) Involvement

- 7.3.1 The HSE has requested information and investigation reports on some of the RIDDOR reportable accidents, and no further action has been taken as they have been satisfied with our investigations.
- 7.3.2 As a result of issues with condensation in the ceilings following roofing works conducted at The Richard Heathcote Community Primary during the summer an issue with the exhaust from the school boilers was identified. No health impacts were identified and the incident was reported to the HSE in line with RIDDOR regulations. The HSE are undertaking an investigation into the facts of this incident. The council is taking forward the learning from our own internal investigation to ensure improved management and monitoring of contractors.
- 7.3.2 In April 2012 the HSE launched "Fee for Intervention". To date we have not been charged for any interventions.

8. Joint Consultation

- 8.1 The council has held health and safety committees and forums in accordance with the Health, Safety and Wellbeing Policy. Consultation forum meetings are planned for 2017/18. Union and staff views are sought on management tools and health, safety and wellbeing initiatives. The Unions supported the wellbeing days that were held. The Health, Safety and Wellbeing Service works with the Unions on campaigns and launching new initiatives.

9. Occupational Health Unit (OHU)

	2014/15	2015/16	2016/17
Ill Health Referrals	1342	1133	1239
Ill Health Retirement Requests	30	21	25
Ill Health Retirements Approved	14	10	10

- 9.1 Occupational Health management referrals have increased compared to last year reflecting a move from schools to manage absence in a more proactive manner.
- 9.2 On average 84% of all absences over 21 days are being referred to Occupational Health for advice and support, however only 64% of these are sent in a timely manner. Occupational Health has provided briefings to managers on the benefits of occupational health services and how to get the best from a management referral.
- 9.3 The number of ill-health retirements being granted (meeting the qualifying criteria) remains similar to the previous years.

10. Liability Claims

- 10.1 There have been no significant developments in terms of claim numbers, although early indication is that claim frequency for policy year 2016 is declining. It should be noted that claimants have up to 3 years after the accident within which to claim

	2012	2013	2014	2015	2016
No. of Claims Occurred	85	64	61	48	28
Estimated Cost of payments	£1,344,451.28	£257,328.68	£394,994.63	£208,690.75	£178,653.77

10.2 Background Information on Claims / Legal Developments

Estimated Cost of Payments includes reserves. This represents insurers "best estimate" of final settlement.

- 10.3 While claimants generally have 3 years post incident to pursue a claim without an action becoming statute barred (3 years after 18th birthday in the case of minors). As a result of the Jackson reforms the indications are that claims are being submitted more quickly.
- 10.4 A recent announcement from the Lord Chancellor regarding the personal injury discount rate (discount applied to lump sum compensation payments) from 2.5% to minus 0.75% has resulted in insurers amending reserves to higher levels.

11. New Legislation & Key Topics for 2017/18

- 11.1 During 2017/18 the Government will continue review the role and function of the Health and Safety Executive to ensure it remains fit for purpose.
- 11.2 Following the incident at Grenfell Towers there will be a review of regulations and other regulatory material associated with fire safety management in 2017/18. Additionally the following areas will be topics that remain high on the agenda for enforcement authorities.
- Stress in the Workplace
 - Asbestos Management

These topics when relevant will form part of the Health, Safety & Wellbeing Services 2017/18 audit programme.

12. Key Actions for 2017/18

- 12.1 The Health, Safety and Wellbeing Service will work as part of the HR Service to ensure that we will become the HSW Service of choice for Staffordshire County Council, its partners and providers, to deliver outcomes for Staffordshire and colleagues.

Organisational Effectiveness

- Support the organisation to ensure external contracts, joint ventures and partnership working are operating to best practice standards.
- Work with the wider risk management agenda to improve how health and safety governance and risk management work together.
- Support the organisation through change to identify its health and safety obligation and implement effective management arrangements.
- Review and revise organisational health and safety policies and procedures to ensure that they remain in line with best practice standards.

Fire Safety Management

- The incident at Grenfell Tower has created concerns around fire safety standards when buildings have cladding applied and in general. The Health, Safety and Wellbeing Service will review and report on current fire safety standards to senior Leadership Team, along with key recommendations for improvement.
- Remind and encourage all Premise Managers, commissioned providers to review and update their fire risk assessments and fire safety inspections.
- During 2016/17 revised fire safety arrangements were launched and the Health, Safety and Wellbeing Service were providing support to premises managers to improve understanding and quality of fire risk assessments.

- Fire Safety inspections will be completed of all county council 3 and 4 story premises and those housing vulnerable people as matter of priority.
- Liaise with Staffordshire Fire Service to ensure that the councils approach incorporates key learning into its management standards.
- As information becomes available following the investigation into the Grenfell Tower incident this will be reviewed and considered against our fire safety management standards.

People Process

- Use management information and insight to develop targeted solutions to maintain current standards and support prevention and early intervention outcomes.
- Continue to deliver wide ranging annual health and safety training offer to meet the council's statutory obligations and support colleagues to understand and deliver upon their health and safety responsibilities.
- To support Strategic Property to embed updated Client CDM responsibilities and processes into working practices.
- Improve Premise Mangers skills and knowledge on and around fire evacuation and site security and the government's terrorism stay safe guidance.
- Improve self-learning support on Go for colleagues on health, safety and wellbeing matters.

Line Manger Capability

- Provide managers with information and feedback on how they are managing health, safety and wellbeing.
- Inspire managers and leaders to develop effective leadership skills applied to health, safety and wellbeing
- Develop and update tool kits to support managers and improve knowledge and skills.

Colleague Wellbeing

- Undertake workforce wellbeing initiatives that promote colleagues to take personal responsibility for their physical health, psychological health and to make healthy choices.
- Review how mediation services could be embedded into current ThinkWell support.
- Assess the options to further improve mental wellbeing management and improve prevention given increasing psychological absence levels. Consideration to be given to mental health awareness campaigns and adopting Mental Health First Aid approach into organisation to improve management and response to mental health in the workplace.
- Develop self-learning tools on personal resilience for the workplace.

Standardisation

- Following the closing of SAP, a new health and safety incident reporting system will be introduced. The system has a number of benefits to the organisation including speedier reporting of incidents and improved monitoring of incident investigation. Greater real time access to incident records for managers will improve local governance of safety.
- User briefings will be provided to colleagues who have higher numbers of incidents to report. It is to be expected that easier reporting of incidents will result in an increase in incident reporting rates.

13. Conclusion

- 13.1 This report provides an indication that health and safety performance has continued to improve in the last twelve months. However there remains room for growth and the council still has to reactively manage several incidents.
- 13.2 The development of the Health, Safety and Wellbeing Service is allowing the council to focus its competent health and safety advice proactively in services that present the greatest risk and/or where the health and safety management arrangements require development. The 2017/18 action plan will assist the council to make further improvements and further develop its positive health and safety culture.

14. Contacts

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Appendix 1 - Key Performance Indicators

	Indicator	Measure	2014/15	2015/16	2016/17
1.	Number of accidents	Quarterly SAP Report	2413	1689	1645
2.	Number of violent incidents to employees	Quarterly SAP Report	653	665	588
3.	Number of RIDDOR reportable incidents	Quarterly SAP report	Excluding School Sports Incidents 112 Total 123	Excluding School Sports Incidents 71 Total 73	Excluding school sports incidents 51 Total 60
4.	Number of Civil Claims occurred (excluding highways claims)	Quarterly	61	48	28
5.	Cost of Liability Claims	Quarterly	£394,994.63	£208,690.75	£178,653.77
6.	% of Premises with a Fire Risk Assessment completed/reviewed within last 12 months.	Annually	Schools 83% Core Council 100%	Schools 76% Core Council 95%	Schools 100% Core Council 100%
7.	% of Management Standards surveys returned by corporate services and Self Audits completed by schools	Annually	Schools 74% People 84% Place 100% Support Services 100%	Schools 76% Families & Communities 94% Economy, Infrastructure & Skills 100% Strategy, Governance & Change 89% Finance and Resources 79% Health & Care 40% *Restructure	Schools 73% Families & Communities 94% Economy, Infrastructure & Skills 100% Strategy, Governance & Change 100% Finance and Resources 100% Health & Care 100%
8.	% of Internal Health and Safety Audits completed to programme	Annually	Schools 100% People 92% Place 100% Support Services 100%	Schools 100% Families & Communities 100% Economy, Infrastructure & Skills 100% Strategy, Governance & Change 100% Finance and Resources 100% Health & Care 100%	Schools 100% Families & Communities 100% Economy, Infrastructure & Skills 100% Strategy, Governance & Change 100% Finance and Resources 100% Health & Care 100%
9.	Cost of accidents Number Accidents x HSE average cost of accidents (£1250 per incident)	Annually	£3,016,250	£2,111,250	£2,056,250
10.	Cost of violence to employees Number incidents x HSE average cost of incidents (£1,250 per incident)	Annually	£816,250	£831,250	£735,000

Appendix 2 * Data as of 25th June 2017

Table 1 Accident and Violent Incident data for 2016/17

	Employee Accidents	AIR Figure Employee Accidents**	Non-Employee Accidents	Total Accidents	Violence Incidents towards employees	Total Violence	RIDDOR Reportable Accident & Incidents*
SCC Overall	389	24	1256	1645	588	644	60
Schools	240	20	1002	1242	120	142	47
Families & Communities	121	57	205	326	380	385	10
Economy, Infrastructure & Skills	11	20	4	15	1	2	1
Strategy, Governance & Change	6	15	0	6	0	0	1
Finance & Resources	3	5	3	6	1	1	1
Health & Care	8	14	42	50	86	114	0

Table 2 Break down of RIDDOR Reportable Accidents

Categories of Reportable RIDDOR	Death	Dangerous Occurrence	Major injuries to people not at work	Major Injury to a person at work	Non-employee taken to hospital	Over 7 Day injuries
SCC Overall	0	1	0	0	29	30
Schools	0	1	0	0	25	21
Families & Communities	0	0	0	0	4	6
Economy, Infrastructure & Skills	0	0	0	0	0	1
Strategy, Governance & Change	0	0	0	0	0	1
Finance & Resources	0	0	0	0	0	1
Health & Care	0	0	0	0	0	0

* RIDDOR reportable accidents are those incidents that are reportable by employers to the Health and Safety Executive. They are generally the more serious incidents.

** AIR – Accident Injury Rate (the benchmark used by the Health & Safety Executive)

$\frac{\text{Number of employee accidents}}{\text{Average Number of Employees (Headcount)}} \times 1,000$

Average Number of Employees (Headcount)