

HEALTH, SAFETY AND WELLBEING ANNUAL REPORT
2022-2023

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ACT

HSW Business Plan 2022/23

HSW Steering group to continue quarterly

New ways of working implementation

Asbestos Management Compliance

Recruit up to 11 more wellbeing champions

Flu clinics (xxx employees)

Focus on personal safety

Maintain HSW mandatory compliance

20% target for near miss reporting

Decrease incident reporting standard from 4 days to 2 days

Implement KPIs completion of incident investigations

Implement incident closure process

Roll out SHE Assure modules: Audit, risk assessment, DSE

CHECK

HSW Steering group updated TOR

COVID transition and recovery planning across the PCC estate

Improved wellbeing offer as a result of surveys

xx Wellbeing Champions

xxx flu vaccinations / 5 clinics

1 HSE / DFRS Enforcement actions

22 RIDDOR reportable incidents of which

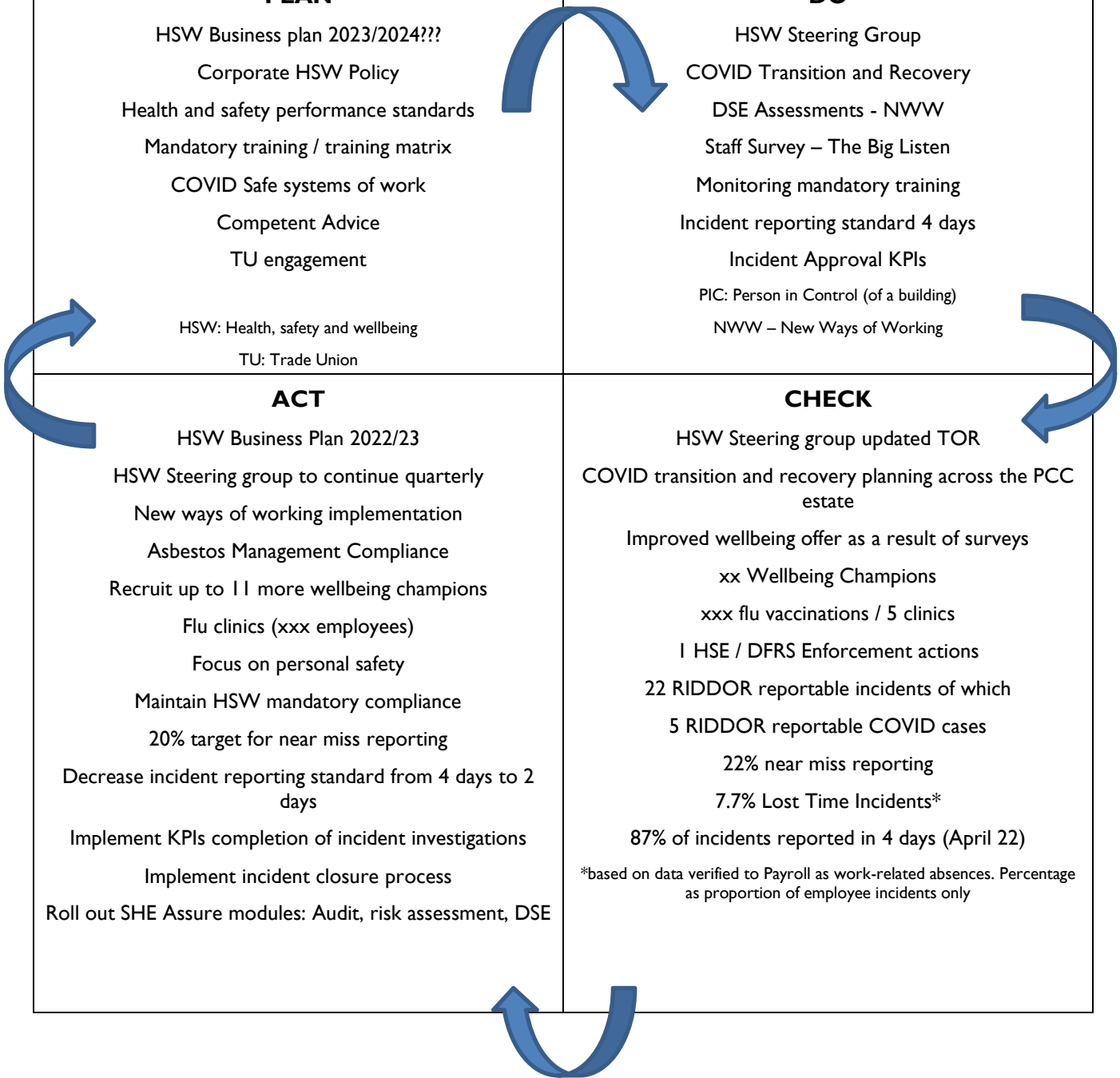
5 RIDDOR reportable COVID cases

22% near miss reporting

7.7% Lost Time Incidents*

87% of incidents reported in 4 days (April 22)

*based on data verified to Payroll as work-related absences. Percentage as proportion of employee incidents only



1. EXECUTIVE SUMMARY

- 1.1. This report is a statement of Plymouth City Council's occupational health, safety and wellbeing (HSW) performance to the end of the financial year 2022-23, with any relevant updates included to the date of writing the report. It also includes our improvement plan for 2022-23 which has been carried over from last year.
- 1.2. The Health Safety and Wellbeing of the council's employees continues to be an integral part of the People Strategy which can be viewed [here](#).

2. GOVERNANCE AND ACCOUNTABILITY

- 2.1. Accountability for our duty of care to our employees under the Health and Safety at Work Act etc. 1974 and the Management of Health and Safety at Work Regulations 1999 sits with the Chief Executive Officer of the Council. Arrangements describing how this accountability is discharged are outlined in our new Corporate Policy and Corporate HSW Management arrangements, describing a systems leadership approach, with roles and responsibilities dispersed throughout the organisation.
- 2.2. The policy includes the role of Executive Person in Control which has existed in the organisation in some areas informally. This is now mandated to ensure our buildings related health and safety management has Strategic Leadership for each site.
- 2.3. The Executive Lead for HSW and Chair of the Health, Safety and Wellbeing (HSW) Steering Group is the Strategic Director for Resources. The Service Director for HROD holds HSW within their Department. The Council's Portfolio Holder for HSW is Councillor Sue Dann.
- 2.4. The HSW Steering Group has met four times during 2022-23, with business conducted digitally to keep the agenda moving. The changing requirements of the COVID pandemic recovery has meant that the business plan for 2021-22 will be carried forward to 2022-23 and 2023-24.
- 2.5. The SHE Assure/ Evotix HSW system for the management of incidents and hazard reporting has now been rolled out across all Directorates, as from the 1st January 2023 no paper or word versions of the accident (AFI) form were accepted. Assure will give managers and various committee meetings real-time insights into the types and frequency of incidents occurring in their service area, and the rest of the Council, and employees a greater ease of reporting. Further development work on management information and Insights (interactive graphic dashboards) has continued to produce a KPI dashboard.

3. ENFORCEMENT ACTIVITY

Control of exposure to vibration

- 3.1. In early December 2022 the HSE notified PCC that they are planning to prosecute PCC relating to the improvement notice served in 2017 for Hand Arm Vibration. PCC responded with a guilty plea in March 2023 and needed to respond back to the HSE regarding the prosecution by 17 May, which had been actioned. Sentencing has been completed from the hearing 29 June 2023 and a fine of £200,000 was issued by the court.

Other Enforcement Action

- 3.2. A HSE prohibition notice was issued to the council on 15 February 2023 in reference to Chelson Meadows push walls. This was subsequently closed by 16 February 2023 by removing all of the defected and aged push walls related to the prohibition notice.

4. IMPROVEMENT PLAN DELIVERY

AUDIT AND RISK

HSG65 – HSW Management audit

- 4.1. The planned audit programme has begun to assess the council's compliance against HSG65 (HSE best practice HSW Management). This is now a priority as COVID restrictions have been fully lifted and services resume normal operations. A full programme of Audits can be found later in this document.

Hand arm vibration

- 4.2. Devon Audit Partnership undertook a repeat audit of the council's arrangements for the management of control of exposure to vibration starting in June 2022. The audit focused on the procurement, maintenance, and replacement of vibrating equipment, and was finally completed in February 2023.

Risk Summits

- 4.3. A risk summit was held in February 2023 due to concerns identified at Mount Tamar School over risk assessment, incident investigation and H&S management systems in general. The summit served to bring clarity to the transfer to Academy process, which was successfully completed on 1 March 2023. Progress against the issues is now monitored by Transforming Futures, the Academy Trust who have taken responsibility for Mount Tamar School.

5. COVID – 19

- 5.1. The health, safety and wellbeing of the council's employees has continued to be at the heart of the COVID-19 pandemic response and recovery with close working between Public Health, Health Protection and HSW to ensure all infection control standards were implemented and effective. Clear leadership continued to be provided by the emergency operations centre (EOC) and the corporate emergency management team (CEMT), with the Service Director for HROD and Head of Health and Safety leading safe systems of work.
- 5.2. The key focus for 2022-23 has been:
- Transitioning between COVID controls to managing COVID as another respiratory disease
 - COVID risk assessments, safe systems of work and toolbox talks for employees, now subsumed into service area risk assessments as risk reduces
 - Ensuring that adequate ventilation is still maintained across the estate (mechanical and manual)
 - Lateral Flow Testing, where risk indicates it is required and vaccination to be a focus
 - Managing the transition out of the pandemic alongside government guidelines
 - Working from home – use of display screen equipment (ongoing monitoring)
 - Wellbeing.

6. WELLBEING

- 6.1. The Big Listen staff engagement survey was completed and actions were taken to encourage and support more front line employees to participate.
- 6.2. As well as the pandemic, employees of the Council joined with the City to mourn the anniversary of the shooting of five residents in Keyham; also the anniversary of the tragic loss of Bobbi – Anne McLeod who was murdered in November 2021. Collaborative working continued with the Devon Wellbeing Hub, the Trauma Informed Network and PAM Assist our employee assistance provider, and the local trauma informed network meant we can continue to wrap a support offer around our employees, access to counselling and psychotherapy according to need and trauma informed training.
- 6.3. The annual report will demonstrate the feedback employees gave about their wellbeing in the Big Listen and show that the majority of employees access support for their wellbeing outside of the Council. However, aspects of work that are known to impact on wellbeing and resilience such as demands, control, relationships, support and role have been addressed by Managers to enable employees to work more flexibly as far as possible. This has been further increased by the financial pressures placed upon the council which has seen some recruitment freezes, loss of staff and budget cut backs.

7. TRAINING

- 7.1. The majority of the HSW training courses have been restarted, during 2022-23. These were delivered via blended learning (where possible) or remote learning sessions including:
- HSW Induction (e-learning)
 - Managers' Introduction to HSW at the council (e-learning + remote learning session)
 - IOSH Managing Safely (e-learning)
 - IOSH for Senior Executives and Directors (e-learning)
 - Wellbeing and Resilience Risk Assessment (remote learning sessions)
 - Conflict resolution (face to face, external provider)
 - Risk Assessment – Display Screen Equipment (remote learning sessions)
 - Manual Handling (Safe Lifting Techniques)
 - Working at Height/Ladder Safety
 - Introduction to Risk Assessment (remote learning session)
- 7.2. A changeover of employee management systems from iTrent to Core HR has meant that there has been a hiatus in mandatory training compliance reporting, and work is still ongoing to validate the information now available. Indicative figures show:

Training aspect	2021-22	2022-23
HSW Induction	74.2%	63.6%
Introduction to HSW management	84.6%	74%
IOSH Managing Safely	Not available	Not available

- 7.3. The only aspect of this training that requires a taught course is the HSW for Managers. There are 66 Managers who have not completed the e-learning aspect and 35 who have not done their taught aspect. These will be managers who are new in post when the last course was

run, and arrangements were made to enable this to be completed in summer 2023. A further programme of courses is planned during late 2023.

- 7.4. The direction for the outsourcing of health and safety training is currently using an internal model with internal resource, which is a change of direction from the previous annual report. Courses such as Conflict Resolution and IOSH have had contracts extended in the interim.

8. INCIDENT REPORTING AND LEARNING

- 8.1. Information has also been collated in full, in relation to our reporting standard, which was reduced from 6 days to 4 on 1 July 2022. In 2022/23 86.8% of incidents were reported within 4 days.
- 8.2. The Council has reported 22 RIDDORS in the last 12 months: 2 members of public to hospital; 5 occupational diseases (all COVID); 13 over 7-day absence and 2 specified injury. Specific guidance was provided to managers to enable the assessment of any employee with symptoms of, or testing positive to COVID, to appraise the likelihood of workplace transmission.
- 8.3. Based on a comparison data 1 September to 30 April, for 2021-22 and 2022-23, there has been an increase in near miss reporting of 10.3% from the same period last year. The 2022-23 mean figure for this time-period is 22.8%, above our 20% improvement target (this is an initial target, set towards 50% aspiration), compared to 12.5% for the previous time-period.
- 8.4. Lost time incidents (LTI) have fallen from 11.4% in 2021-22 to 7.7% per cent in 2022-23. This decrease is mainly due to declining work-related COVID absences.
- 8.5. A new KPI relating to incident closure has been introduced – based on data from September 2022 to end of year, overall compliance is currently 37.8% - this was from a starting figure of 11.9% in the month of September. The KPI goal is 100%.
- 8.6. Serious incidents and near-misses continue to be escalated in real time to ensure remedial actions are put in place in a timely fashion. There have been 23 'High Risk' alerts issued by the Health and Safety Team to the Head of Health and Safety, Service Director of HROD and HR Business Partners, TU Reps and relevant managers during 2022-23, an increase of 77% over the previous time-period. For each incident a Health and Safety Consultant works alongside the Service in support of producing a suitable and sufficient incident investigation to inform future practice.
- 8.7. An analysis of the root causes and learning from these incidents is currently underway, with a view to sharing any transferable learning across the Council.

DELIVERY IN 2022-23**10. GOVERNANCE AND ACCOUNTABILITY**

- 10.1. Accountability for our duty of care to our employees under the health and Safety at Work Act etc. 1974 and the Management of Health and Safety at Work Regulations 1999 sits with the Chief Executive Officer of the Council. Arrangements describing how this accountability is discharged are outlined in our Corporate Policy and Corporate HSW Management arrangements, describing a systems leadership approach, with roles and responsibilities dispersed throughout the organisation.
- 10.2. The Executive Lead for HSW is the Assistant Chief Executive (as the Strategic Director for Customer & Corporate Services post was deleted). The Chair of the Health, Safety and Wellbeing (HSW) Steering Group is the Service Director for HROD. The Service Director for HROD holds HSW within their Department. Following the Local Elections held in May 2023, the Council's Portfolio Holder for HSW is now Councillor Dann.
- 10.3. The HSW Steering Group met 27 April 2022, 11 July 2022, 10 October 2022 and 16 January 2023. Key agenda items throughout the year were:
- Approval of the Health, Safety and Wellbeing Policy
 - Role of Persons in Control and mandating of Executive PIC roles for Strategic oversight of buildings safety – approved for inclusion in HSW Policy
 - Asbestos compliance
 - Mount Tamar School – risk summit held in February 2023 (see below)
 - Wellbeing - the Big Listen results and action plan, suicide awareness, Livewell awards
 - Monitoring of HSW Operational Risk Register – including Manual Handling in Waste project
 - Review of Fire Warden and First Aid provision (Covid recovery).
- 10.4. In February 2023 our Corporate and Senior Leadership Teams spent a half day reviewing leadership for health, safety and wellbeing. Discussions were held about:
- Leadership lessons from COVID and how these inform our general approach to HSW
 - Refresher on core Health and Safety Law
 - HSE Enforcement
 - Accountability and Responsibility
 - PCC Provision of Health and Safety.
- 10.5. Key outputs included:
- Learning points from our journey in 2021-22
 - What visible Health Leadership looks like
 - Leadership lessons from COVID
 - Management and Escalation of risk – Strong H&S culture.

11. ENFORCEMENT ACTIVITY

Control of exposure to vibration

- 11.1. At the time of writing this report, Plymouth City Council has been fined £225,887.65 by the courts during the hearing held on the 29 June 2023; as a result of the prosecution taken by the HSE following enforcement action.

Other Enforcement Action

- 11.2. An HSE prohibition notice was issued to the council on 15 February 2023 in reference to Chelson Meadows push walls. This was subsequently closed by 16 February 2023 by removing all of the defected and aged push walls related to the prohibition notice. At the time of writing all push walls have been replaced at Chelson Meadow Household Waste Recycling Centre.

12. RISK SUMMITS

- 12.1. There has been one risk summit called in February 2023 due to concerns about the levels of H&S management at Mount Tamar School, as it approached Academisation, including adequate risk assessment and incident management. . A number of actions were agreed and a small project team set up to help the Academy Trust move towards compliance.
- 12.2. Monitoring of progress ended as the school transferred to Transforming Futures Academy Trust on 1 March 2023. The Trust was given due notice and a final update on progress was received.

14. COVID-19

- 14.1. The health, safety and wellbeing of the council's employees has continued to be at the heart of the COVID-19 pandemic response with close working between Public Health, Health Protection and HSW to ensure all infection control standards were implemented and effective. Clear leadership continued to be provided by the emergency operations centre (EOC) and the corporate emergency management team (CEMT), with the Service Director for HROD and Head of Health and Safety leading safe systems of work, as the council transitioned to its recovery phase of the pandemic.
- 14.2. Generic COVID-19 risk assessments, safe systems of work and toolbox talks were subsumed into Service area risk assessments. Where high risk environments and vulnerable staff and clients existed measures following Government Guidelines.
- 14.3. Ventilation across the council's estate was reviewed by Facilities Management, with all mechanical systems gradually being reduced from 100% fresh air. Guidance continues to be provided to employees on the importance and benefits of manual ventilation, achieved through the opening of windows and the purging of meeting rooms between uses; each meeting room was assessed for maximum capacity given the various social distancing requirements, and the ability to ventilate; some 20 rooms were put out of use as they were without any ventilation.
- 14.4. When all legal restrictions were lifted in February 2022, the council continued to promote working from home if employees were able. Safe systems of work remained in place for employees working at the front line and in our offices where employees could attend if they had a business or wellbeing need. This was due to the average number of COVID cases in Plymouth being higher than the Southwest and England, with a continued impact on hospital admissions and school / care home outbreaks.
- 14.5. The council used a traffic light system to assess our risk of workplace transmission of COVID, using purple to denote that we would not be returning to a pre-covid 'green' status, and that we would instead be implementing our New Ways of Working Strategy. It became increasingly difficult to rely on statistical information relating to case numbers, in the first instance due to the lifting of the legal requirement for testing, and then the withdrawal of free testing kits for the general public.
- 14.6. On 28 April 2022 the HSE revised their guidance, stating that they no longer required business to have a specific risk assessment for COVID or have specific measures in place, except where employees are likely to come into contact with people who have symptoms or have tested positive to COVID. Public Health Guidance has continued to be issued in relation to COVID, specifically in relation to the importance of vaccination, ventilation, lateral flow device testing and what to do if someone has symptoms of, or have tested positive to COVID. The Council's guidance has been updated accordingly.
- 14.7. Office of National Statistics (ONS) data was used to assess our position in Plymouth, alongside local data on hospital admissions, school and care home outbreaks, resulting in our move from amber to purple on 1 May 2022.

15. Site Surveys and monitoring

- 15.1. A Safe System of Work Readiness Group continued to meet weekly, currently led by the Head of Hard FM (pending the start of the newly appointed head of H&S) and comprising members of the Health and Safety and Hard/Soft FM Teams. The group continues to meet to facilitate joint working between Capital Projects, Facilities Management and Health and Safety, attempting to resolve issues before they escalate under the title of Safe Systems & Safe Working Group.
- 15.2. This group led the:
- Review and adaptations of ventilation across the estate to provide maximum fresh air
 - Review and update of staff room comms in relation to safe systems of work
 - Updating of COVID generic risk assessments, safe systems of work and toolbox talks and advising services areas of the transition to Purple Status
 - Linking with new ways of working and delivering the requirements to reopen space in corporate buildings, whilst maintaining various levels of COVID controls and transitioning to purple
 - Review and advice on the transition from Amber to Purple and the removal of Covid restrictions, including the updated requirement for RIDDOR reporting of COVID cases

Vaccination

- 15.3. All employees of the council have continued to be strongly encouraged to accept COVID vaccination when offered. Whilst employees have not been asked to confirm their vaccine status, it is thought that uptake has been generally very high.

COVID testing

- 15.4. Symptomatic testing has been made available to employees if required by service area risk assessment and for some areas of health and social care. Prompt infection control action has been taken where potential outbreaks have been identified, liaising with Local Public Health and the UKHSA if required.
- 15.5. Where legal restrictions were lifted and COVID tests were no longer available free to the general public, the Council identified key groups of employees where there was higher risk of COVID transmission during the course of their work. This was reviewed periodically according to the risk in each service area and LFD tests were supplied from our store of tests.
- 15.6. The council continues to advise any employees who have symptoms of, or have tested positive for, COVID not to attend work.

17. WELLBEING

- 17.1. COVID has impacted on wellbeing in different ways for different groups of employees: employees working at the front line who have continued to deliver high quality services to our customers on the streets, in their homes, school transport and communities; customer services and library services who have adapted their ways of working to ensure people have access to services that meet their needs and wearing unfamiliar PPE for some activities; the election team and volunteers who worked to deliver a compliant election within COVID safe systems of work; back office workers who navigated the trials and tribulations of working from home, whilst maintaining productivity; public health colleagues who provided subject matter expertise around the clock in infection control to schools, care homes, businesses and the residents of Plymouth, along with the council's health and safety colleagues to keep our employees safe.
- 17.2. The demands on children's social work and SEND teams increased significantly and they were early returners to an office base to ensure they had access to timely management, supervision and collegial support, with Senior Managers working hard to secure additional resources to meet the rising demand, against a backdrop of a general lack of children's social workers to recruit.

18. WELLBEING OFFER

- 18.1. The following wellbeing support forms part of our recent offer:
- PAM Assist app has had successful reviews with a working group and then cascaded out via staff intranet, screens and teams channel networks
 - Bystander training has been rolled out to support the Violence Against Women and Girls campaign alongside successful white ribbon accreditation
 - Team Stress Risk assessments have been streamlined to make the process faster and additional training for Wellbeing and Resilience Risk Assessment has been rolled out
 - The council successfully passed the Silver and Bronze Wellbeing at Work reviews to maintain standards
 - The council's Smoke Free Policy has been reviewed and is with management for review which is the last item to complete our Gold Wellbeing at Work award
 - A calendar of relevant Wellbeing campaigns has been created and shared with our internal communications team including our Wellbeing week
 - A positive invite and working relationship with Devon and Cornwall Police has continued, they will facilitate 'Wellfest' during October with over 70 sessions for our staff to access
 - The results of The Big Listen annual survey have been shared with the workforce and in response a working group to build on staff engagement has begun (see below)
 - Financial Wellbeing workshops have been delivered to a variation of our workforce offering them information around financial support
 - Menopause guidance for Managers has been created to support those in our workforce going through the Menopause
 - NHS Health check MOTs have started in key frontline worker areas and will continue to be rolled out to the wider organisation during 2023
 - A Personal Sub Safety group is looking at the risk and safety of our workforce to ensure that all preventive measures are aligned
 - Seven internal staff networks have begun to connect and support our diverse workforce: Men's network, Disability network, LGBTQ+ network, Race, Ethnicity and Cultural Heritage network, Women's network, Faith and Belief network and Carer's network.

18.2. Our core wellbeing offer continues to include:

- Employee Assistance Programme (EAP) – access to a range of information and support on-line and up to 6 sessions of anonymous counselling (video call / telephone or email) according to need; specialist counselling also available e.g. Eye Movement Desensitisation Reprocessing (EMDR) for post traumatic shock and group supervision / counselling
- Occupational Health provision through Medigold for advice on fitness for role and reasonable adjustments
- DSE – Casual home worker assessments / DSE self-assessments and provision of equipment to support home working
- Hints and tips to maintain health and wellbeing whilst WFH
- Wellbeing Champions – 57 active champions
- Access to Work – assess and contribute to the provision of specialist equipment for people with accessibility needs e.g. dragon software, dyslexia coaching
- Able Futures – access to mental health support
- Wellbeing and resilience risk assessment training for managers
- Staff room – sign posting to additional external support
- Encouragement for 55 minute meetings to reduce back to backs and provide for comfort breaks supported by SLT, and/or start/ finish 5 minutes off the hour or half hour for other meetings.

Wellbeing Champions

18.3. There are currently 57 wellbeing champions active across the council and we are proud that the team of wellbeing champions were nominated for Wellbeing Champion Team of the Year for Plymouth. We also had two nominations for individual Wellbeing Champion of the year. At the time of writing Plymouth City Council Wellbeing Champions won the Livewell Wellbeing Team of the year. The wellbeing champs have continued to support any public health campaigns locally and were integral to supporting our wellbeing week this year which saw an increase in attendance.

18.4. The Wellbeing Champion Buddy scheme continues to be positively received. Our Wellbeing Champions continue to see an increase in discussions around mental health with heavy work demands being a consistent topic. Some of our Wellbeing Champions recently attended a training session for Community Suicide Awareness facilitated by Livewell Southwest giving additional knowledge around what to look out for and how to appropriately respond.

18.5. In the past twelve months over 106 hours of Wellbeing intervention has been recorded on Firmstep with many more interventions provided that are not recorded. Reasons for wellbeing intervention include but are not limited to: issues relating to mental health, stress, personal circumstances, and workloads.

Wellbeing and resilience training

18.6. Our training offer for our Wellbeing and Resilience Risk Assessment sessions continued throughout the pandemic and in the recovery period providing managers and team leaders the knowledge around how best to support any staff who have been absent from work for any reason. This training is also a preventive measure for our teams across the organisation strategically looking at how we can intervene or support teams who may be under pressure

due to work demands during this time. Alongside the additional virtual training offered we have reviewed and increase our E-Learning offer for all of our staff.

- 18.7. A number of team stress and resilience risk assessments have been undertaken to support managers understand particular issues and work with their teams to find solutions. These are based on the HSE RA model, focusing on the core contributing factors of:
- Demands
 - Control
 - Relationships
 - Support
 - Role

Wellbeing at Work Awards

- 18.8. The council was successful in being awarded the Silver Wellbeing at work award and also our Bronze review award. And we are now on our way to achieving gold, having completed the first of the four toolkits for submission.

THE BIG LISTEN

- 18.9. The Big Listen, the council's employee engagement survey, was made available to all employees with online surveys emailed to employees with a work email address and paper copies posted to employees without email. The survey was open between 6 June and 22 July 2022. 1,252 of 2,463 potential respondents took part, representing a 51% response rate.

Positive Insights In 2022

- 18.10. The level of engagement in the survey was 71%, which is encouraging taking into account the impact of the global pandemic, budgetary constraints within the public sector, the impact of tragedies within the city and structural changes since 2018. Two thirds of staff feel proud to work for the council, and almost seven in ten agree the council is a good employer. Satisfaction with the working environment is where the largest improvement has been made. Staff do support their colleagues not to take risks with their health, safety and wellbeing at work (the highest positive scoring question in 2022 at 92%). They are clear what their duties and responsibilities are (87% agreeing to this). This contributes to making them satisfied with their working environment (73% agree) which is the strongest improvement this year compared to 2018 (+5% points). Almost two thirds (65%) say they get the development or training they need to do their job safely, and 81% know where to access support to manage their wellbeing should they need it. It is also encouraging to note that 82% of staff feel they are treated with fairness, respect and without discrimination.

Areas to explore

- 18.11. There are areas where the council can improve, particularly with regards to vertical and horizontal communication; less than half of respondents (46%) agree that they are kept well informed about the council's plans and progress, and an almost equal proportion (49%) feel that the council is effective at communicating with employees. Communication is an area for attention for staff in 2022. All questions but one (I am clear what is expected of me at work) in this section see an agreement score below 50%. Change management is singled out by respondents, amongst whom only 23% agree it is done well. Together with 34% of staff respectively saying that senior management provide a clear vision for the future of the council

and provide effective leadership, the fact that only 44% think that work does not impact negatively on their mental health, can have an impact on their overall motivation.

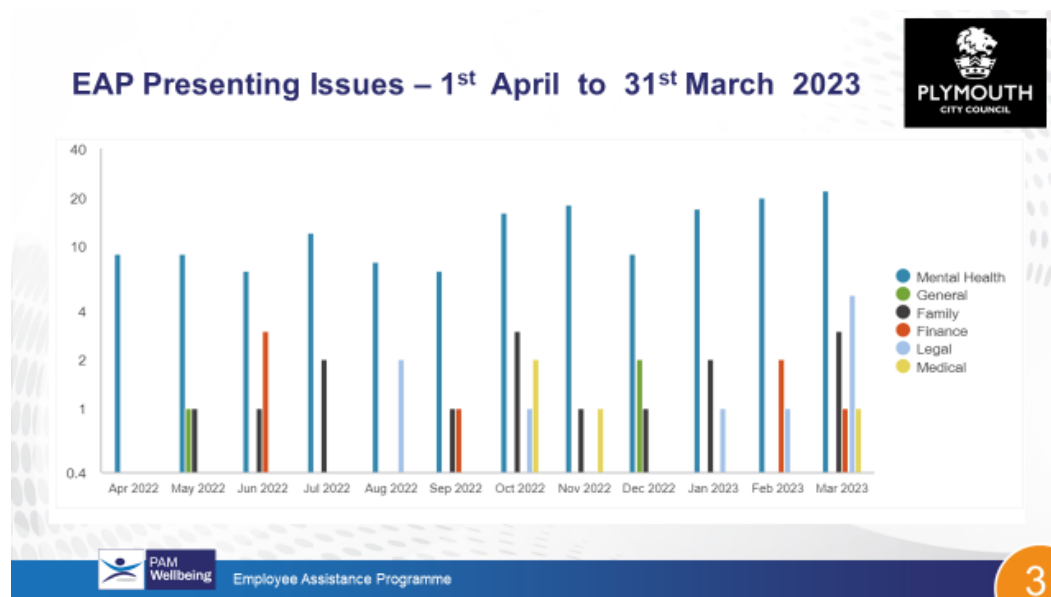
- 18.12. The full report setting out the results of the Staff Survey can be found [here](#).

Follow Up Engagement Sessions

- 18.13. Following the outcome of the staff survey, work is being undertaken to further explore four main themes as follows; wellbeing, engagement, communications and decision making. A number of volunteers have been trained to run the focus groups and two pilot sessions have already been held. Final arrangements are being made to run the sessions in the summer following which, the findings will be collated, considered and a summary with recommended action plans will be presented to CMT.

PAM ASSIST – EMPLOYEE ASSISTANCE PROGRAMME

- 18.14. There have been changes in our how our employee assistance programme is accessed. While there has been a decrease in telephone calls (from 239 calls in 2021-22 to 193 calls in 2022-23), there has been an increase in access via live chat (57 employees in 2021-22 to 231 in 2022-23). In 2021-22 there were 1666 page views, which dropped to 1375 in 2022-23. An app is now available for the EAP, and while statistics are not currently available, this appears to be working well.
- 18.15. Mental health needs continue to be the highest category of reason for engagement with the service as demonstrated in the graph below.



- 18.16. There were a number of red flag (now referred to as ‘at risk and monitored’) cases where PAM Assist assessed a person might be in danger of taking their own life. If they perceive immediate danger, the counsellor sends for the emergency services and contacts the GP. Anyone found to be in this condition would immediately speak with a counsellor for in the moment support. All of this is kept confidential unless there was a threat of harm to anyone at work, then PAM Assist would contact the HR Team.

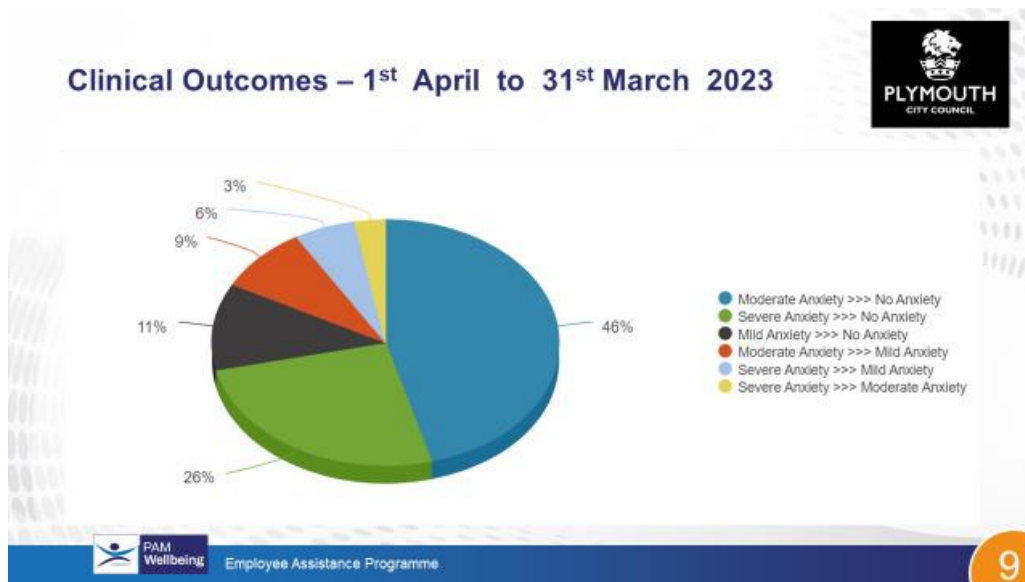
Access to counselling

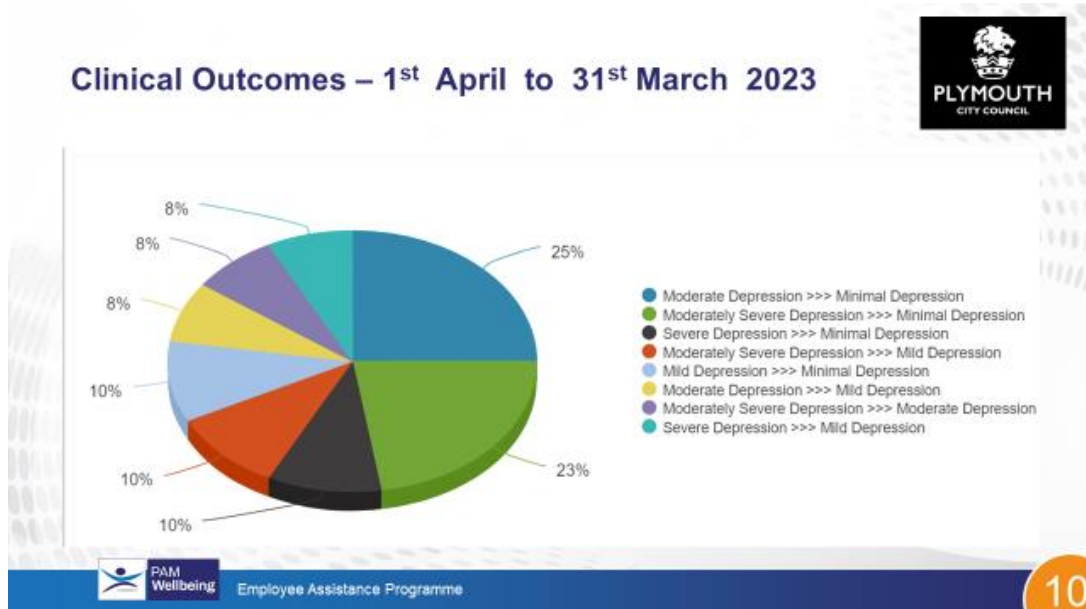
18.17. 193 employees engaged with some form of counselling which is offered via:

- Telephone
- Video
- On-line
- Face to face

18.18. Access to counselling is a fully confidential service offered to all employees and their families for work or personal matters. While some counselling is offered 'in the moment' i.e. a counsellor will speak to an employee at the point they call the service, others may subsequently be referred for structured counselling where each employee is able to access up to six sessions and the impact is measured using two validated depression scores pre and post the six sessions.

18.19. The following two graphs show the clinical outcome measures for anxiety and depression demonstrating a positive impact on all those in receipt.





Occupational Health

- 18.20. The council has a contract with Medigold Health to provide our Occupational Health Services, and in 2022-23 they have delivered 477 pre-employment checks and 325 occupational health appointments. The majority of these have been provided remotely (292) with 33 face to face appointments.
- 18.21. The majority of referrals have been due to mental health or musculoar skeletal needs, which is consistent with previous years. 55 employees did not attend their appointments, which incurs an appointment cost for their department.

Flu programme 2022-23

- 18.22. As in previous years the initial focus for flu vaccinations was on our frontline workers who are either at greater risk of catching the flu or at risk infecting high risk clients if they catch it. These were:
- Education, Participation and Skills
 - Children, Young People and Families
 - Street Services
 - Customer Services and Service Centre
 - Community Connections
 - Bereavement Services
- 18.23. There will also be employees who were eligible for the NHS free offer which includes the following people:
- Adults 65 and over
 - People with certain medical conditions (including children in at-risk groups from 6 months of age)
 - Pregnant women
 - Children aged 2 and 3 on 31 August 2019
 - Children in primary school

- Are living in a long-stay residential care home or another long-stay care facility
- Who receive a carer's allowance, or who are the main carer for an elderly or disabled person whose welfare may be at risk if they fall ill.

Uptake

18.24. At the time of writing this report Medigold are not able to produce uptake figures on Flu Vaccinations for this programme. In total 400 vaccinations were offered as follows:

- Windsor House, Tavistock Rd, 1 x 50
- Guild Hall Guildhall Square 1 x 100; 1 x 50
- Prince Rock, Macadam Road 2 x 50
- Chelson Meadow, The Ride 2 x 50
- Midland House, Notte St, 1 x 100

TRAINING

18.25. A training needs analysis was undertaken during 2021-22, across all council departments. The Health and Safety team also responded to any specific requests from Managers where possible to mitigate risk.

18.26. Delivery of training courses has resumed with the following courses being offered either via blended learning or remotely in line with Training needs analysis and service area requests

- Conflict resolution/personal safety
- Introduction to Health and Safety for managers
- Introduction to Risk Assessment
- Risk Assessment – Display Screen Equipment
- Safe Lifting techniques – Manual Handling
- Working at Height/Ladder Safety
- IOSH For Senior Execs and Directors
- IOSH Managing Safely (refresher and new – online via International Workplace)

18.27. There is also a large number of e-learning modules on learning zone which can be accessed by employees.

19. HSW MANDATORY TRAINING

19.1. The council recognises that achieving compliance with mandatory training is fundamental to achieving a pro-active approach to health, safety and wellbeing, and raising the general ability of employees at all levels to make informed decisions on the management and escalation of risk.

19.2. A changeover of employee management systems means that there is a hiatus in mandatory training compliance reporting, and work is still on-going to validate the information now available. Indicative figures show:

Training aspect	2021-22	2022 - 23
HSW Induction	74.2%	63.6%
Introduction to HSW management*	84.6%	74.0%
IOSH Managing Safely**	Not available	Not Available

- 19.3. *The only aspect of this training that requires a taught course is the HSW for Managers. There are 66 Managers who have not completed the e-learning aspect and 35 who have not done their taught aspect. These will be managers who have been a new in post since November 2021 when the last course was run, and arrangements will be made to enable this to be completed in late June, early July.
- 19.4. ** Due to issues with CoreHR and course provider data it has not been possible to put together accurate figures on completion rates. All existing staff who require refreshers are being offered this and new courses/licences are being reviewed and offered to managers with high risk profiles. Street Services are also carrying out their own exercise for IOSH managing safely
- 19.5. This information suggests that there needs to be a continued push on mandatory compliance in the forthcoming year

20. AUDIT AND RISK

Audit Programme

- 20.1. The audit programme was launched in September 2022 utilising the recently introduced SHE Assure eSystem. The key purpose of the programme will be to provide assurance of compliance to the council's HSW Management System, based and prioritised on:
- Higher risk service areas – based on risk profiles
 - Self-Assessments – analysis presented to HSW Steering Group
 - Declarations – signed by department Service Directors
 - 2013/14 audits.
- 20.2. The programme is based on the HSE's HSG65 model of Plan, Do, Check and Act (PDCA) rather than ISO45001. A decision was made not to base the audit programme on ISO 45001 due to resource constraints. Introduction of ISO45001 will now be added to Phase 2 of the Workplace Modernisation Programme.
- 20.3. A full list of Audits carried out in this reporting period are as follows
- Mount Edgcumbe – November 2022
 - Bereavement Services – Weston Mill/Efford Crematoria – December 2022
 - Bereavement Services – December 2022
 - Mount Tamar School – December 2022
 - Pennycross Primary School – January 2023
 - Electoral Services – February 2023
 - Legal Services – February 2023
- 20.4. Street Services Internal Audits completed in this period by the HSW Advisor are as follows:
- Grounds maintenance (including Arborist)
 - Street Cleansing
 - Domestic Waste collection
 - Fleet Services

- Commercial Waste
- Leachate Treatment Plant
- Chelson Meadow HWRC and WTS

20.5. The audits were internal audits looking at risk assessment, safe working operating procedures, training and compliance, site operations and compliance, and general H&S compliance. Action plans have been composed from services areas.

21. Hand Arm Vibration Management

- 21.1. The investment of Reactec HAVwear business case has been completed and signed off. The new equipment was rolled out in spring 2023 to continue to progression of monitoring of hand arm vibration.
- 21.2. Equipment review is ongoing and continuous testing of the market of products such as electric machinery is being undertaken.
- 21.3. External HAVs equipment testing has been completed of streets services, fleet services and bereavement services of all equipment and will be moving to a 20% yearly testing programme with internal monitoring.
- 21.4. Health surveillance is undertaken on all machinery users across all services.

22. ACCIDENT AND INCIDENT REPORTING AND LEARNING

- 22.1. During 2022-23 the roll-out SHE Assure (now called Evotix), a cloud-based incident management system, has been completed across all of our services and schools for the Incident Module, and other modules such as Risk and Audit are progressively completing UAT testing and are being taken live with services. All incident reporting is now either via the Assure Go+ Portal (available to all workers and accessible via mobile devices) or by direct entry from licenced users.
- 22.2. The backlog of incidents remaining from manual entry onto the system from 2021/22 has been eliminated with the data entry assistance of Business Support.
- 22.3. The reader should be aware that the data presented represents the number of incidents reported, which may not be the actual number of incidents which occur. Employees are encouraged to make sure they report incidents, near misses and hazard observations, as this is the avenue for effective incident management through timely investigation, root cause analysis, risk mitigation actions, learning and change.

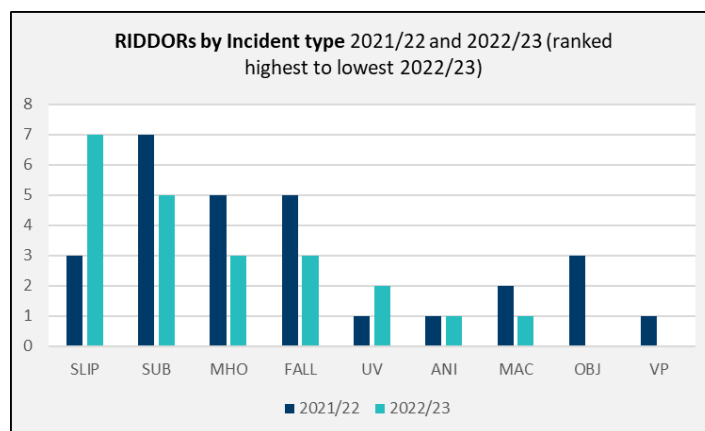
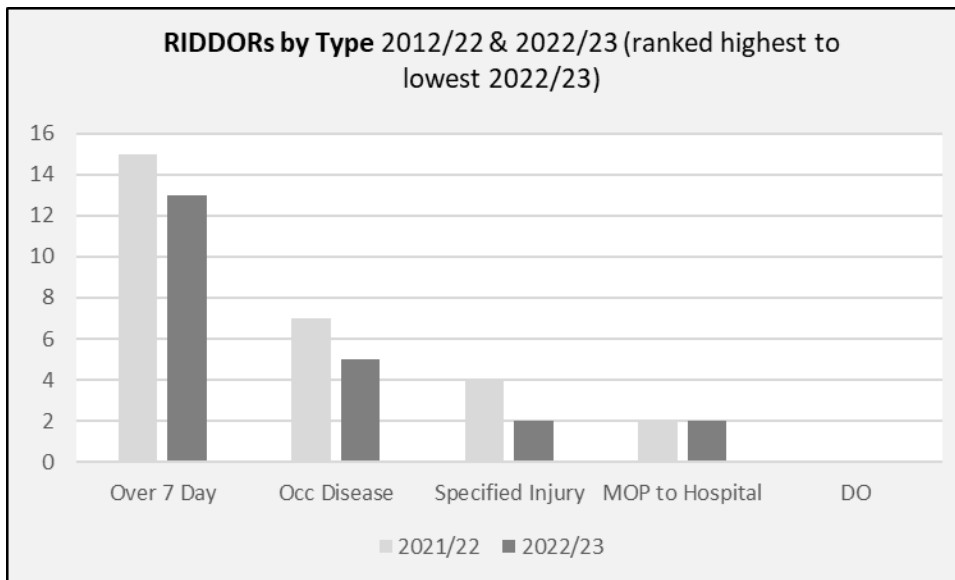
23. VERBAL VIOLENCE – AN UPDATE

- 23.1. The ongoing impacts of COVID and lockdown have changed the services that we provide for the public and have also increased the severity of the negative interactions our staff have with the public. The public have a right to complain about our services but when the abuse becomes personal to the employee this is where we challenge our level of acceptance.
- 23.2. In support of our People Strategy, where we aim to promote a positive working environment, and alongside our grievance resolution policy and procedure, we want to show our support with a challenge to the level of abuse our employees often face.
- 23.3. As a result of this a zero tolerance campaign has been developed by HROD and Comms, called '#Ourstaff'. Launch of this in 2022/23 was postponed but this campaign is available to deploy in 2023/24.
- 23.4. The concept is to run a two-week campaign that is public facing to remind Plymouth that our staff are members of the community also.
- 23.5. The content of the campaign would be a display of posters in our buildings, infographic for our social media channels (including our twitter account) and clear guidance on how to safely report any abuse.
- 23.6. Whilst abuse is relative to an individual, a statement to encourage people to think about their words and actions when engaging with our employees will make them feel more supported. A sense of organisation support enables employees to further influence their own behaviours. This is not about complaints but about personal attacks.
- 23.7. The HSW Steering Group will oversee the development of the campaign to ensure it is framed appropriately.

23.8. A task and finish group has been initiated to look at employee personal safety and the use of personal alarms, in recognition that there are more appropriate digital solutions available, which could be procured across services where their risk assessments demonstrate the need. The work of this group is ongoing, including assisting service areas with review of their protocols for addressing the threat from potentially violent persons that interact with our services.

24. REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES

24.1. The RIDDOR 2013 Regulations sets out a number of different types of incidents that must be notified to the HSE, which the HSE may decide to investigate further. In the 12 months to 31 March 2023 there were 22 such incidents, which is a 21.5% decrease from the previous 12 months reported (to March 2022 = 28). It should be noted that the “Occupational Disease” RIDDORs listed are all for COVID-19 (7 in 2021/22 and 5 in 2022/23).



Key to Chart Data (Incident Codes)	
Injured by an animal or insects	ANI
Drowned, asphyxiated, or choked	ASPH
Injury from hot or cold contact (e.g. scald)	BURN
Dangerous Occurrence (RIDDOR definition)	DO
Display Screen Equipment	DSE
Contact with Electricity or Electrical discharge	ELEC
Exposed to fire	FIRE
Hit something fixed or stationary	FIX
Injured while handling, lifting or carrying	MHO
Near Miss	NM
Other kind of accident or incident	OTH
Hit by moving vehicle or other transport incident	RTA
Self-harm	SELF
Needlestick or sharps injury (Cut by sharp object)	SHAR
Slipped, tripped or fell on same level	SLIP
Exposed to or in contact with a harmful substance	SUB
Unintentional Violence	UV
Violent Person	VP
Verbally Assaulted or Threatened	VV

- 24.2. The RIDDOR types reported are proportionately almost exactly the same year on year, just fewer in number – this indicates that it is likely that the risk profiles leading to the adverse events that meet the RIDDOR criteria have not changed, and neither has the impact of the risk mitigation measures in place in terms of reducing such incidents.
- 24.3. The Incident types leading to RIDDOR reports show more significant difference year on year: for example: there is almost double the number of Slip/ Trip/ Fall RIDDOR incidents in 202/23. This type of incident is one of the most common to occur in any workplace, and the increase may represent several causal factors – e.g. more “out and about” activities taking place, staff turnover and new employee unfamiliarity with tasks or possibly work pressures leading to rushing.
- 24.4. The year on year drop in SUB, MHO, and FALL RIDDORs is however encouraging.

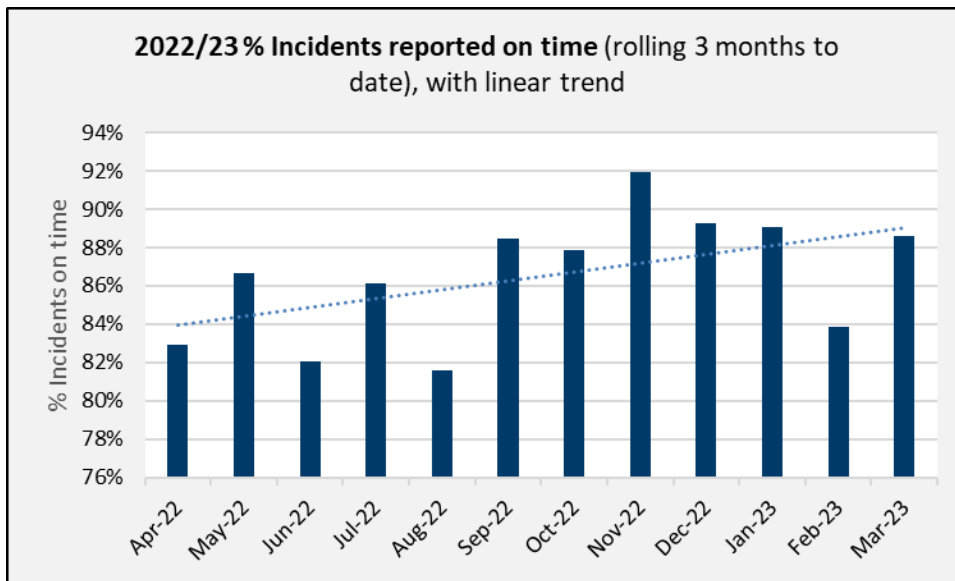
25. HEALTH AND SAFETY KEY PERFORMANCE INDICATORS

- 25.1. New health and safety Key Performance Indicators (KPIs) were introduced in August 2022, in addition to the 4 day reporting requirement. These new KPIs (detailed below) are designed to correct a “report and forget” issue that had been observed to be developing in some areas due to the sole KPI for 4 day reporting.

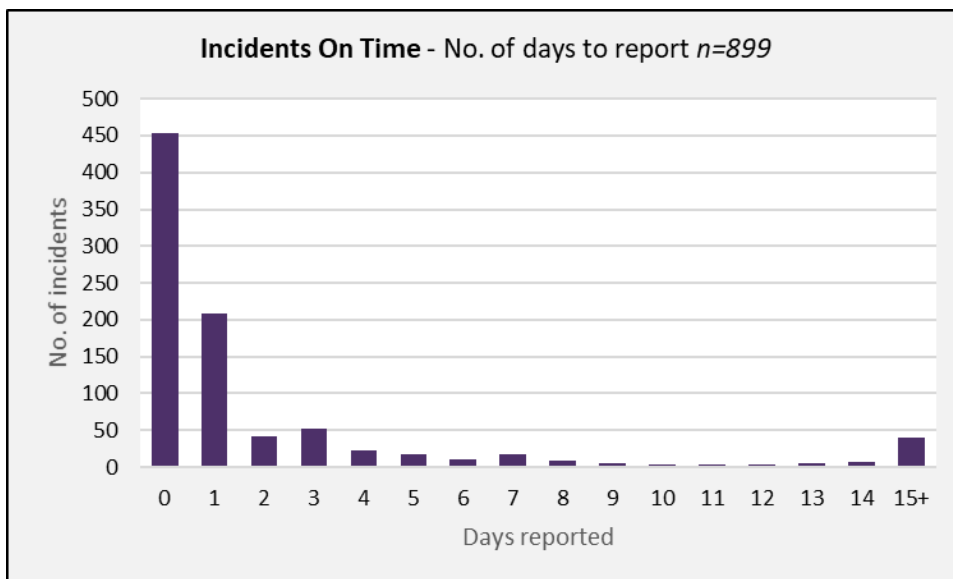
H&S KPIs:

- Incidents must be reported onto the SHE Assure system within **4 days** of the date of the incident – KPI = 100%.
- Incidents must be closed (i.e. have reached "Approved" status on Assure, with all actions closed) within a given timeframe from the date of incident, based on their level of severity. The timeframes are:
 - **Insignificant/ Minor severity = 14 days**

- **Moderate severity = 28 days**
- **Major severity = 42 days**
- **20%** of the total of incidents in any given area must be **Near Miss reports** - this is to encourage such reporting, as by addressing Near Misses actual accidents can be prevented.
- **KPI 1 – Incident reporting:** The current KPI is 100% reported within 4 days. The mean figure over the year 2022/23 is 86.8%. (Note – this KPI changed from 6 days in August 2022, all data shown is adjusted to accommodate this change). As can be seen from the chart below, the majority of incidents are reported “same day” – this reflects the introduction of the Assure Go+ Portal as a quick and simple mechanism for all staff to report incidents, near misses and hazard observations; and it indicates that a planned move to 2-day reporting (as the next step towards the ultimate aim of “within 24 hour” reporting) is achievable.

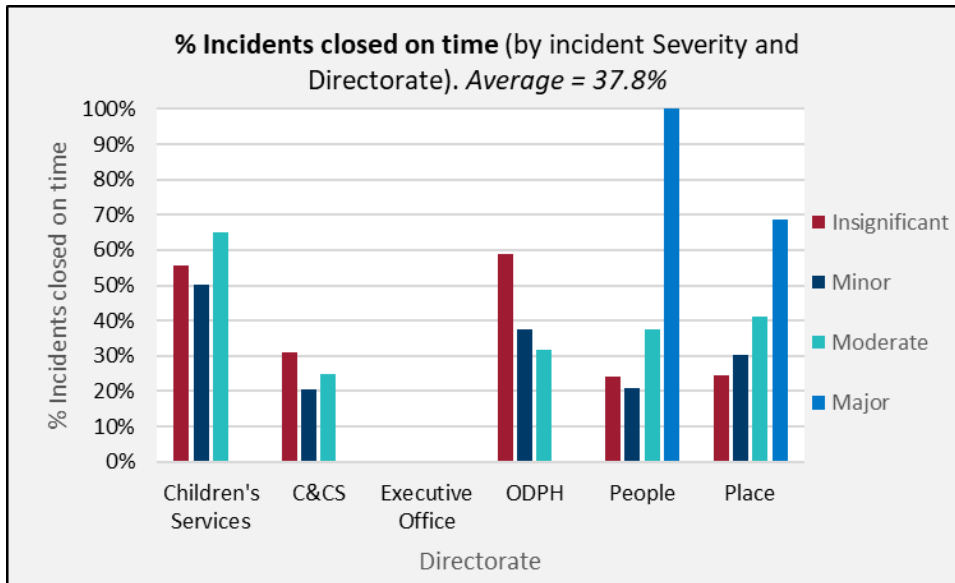


25.2. The graph above shows an increasing trend in compliance with this KPI. However as the KPI is set to 100% compliance there is still a 13.2% gap to be met. Late reporting is on the whole due to late notification by persons involved in incidents.

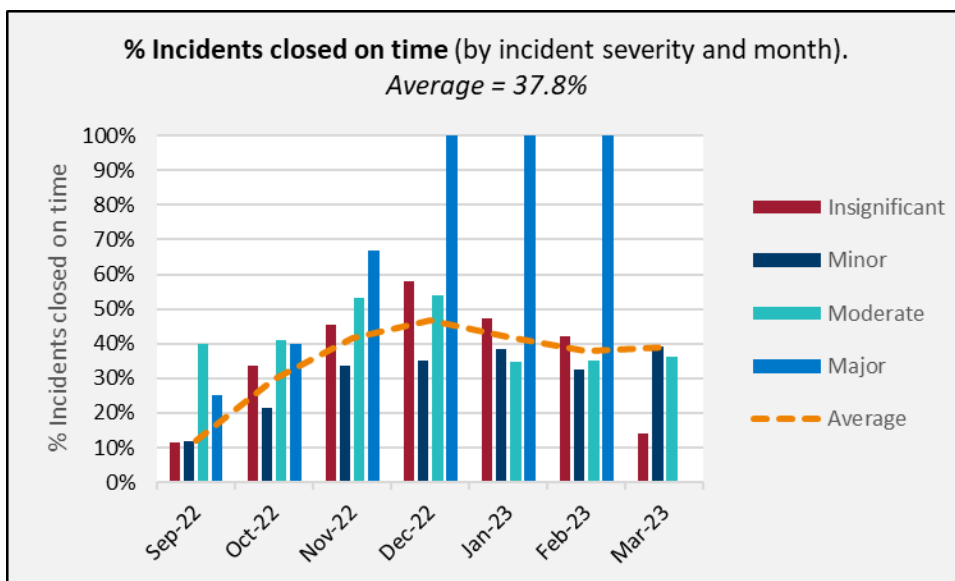


25.3. Within the 86.8% compliance rate, half of all incidents are reported on the same day, and 86% within the four day KPI. For the planned change to 2 day reporting, currently 78% of incidents are reported within that timeframe, so only 22% increase is required to meet the 100% KPI even with this shorter time period.

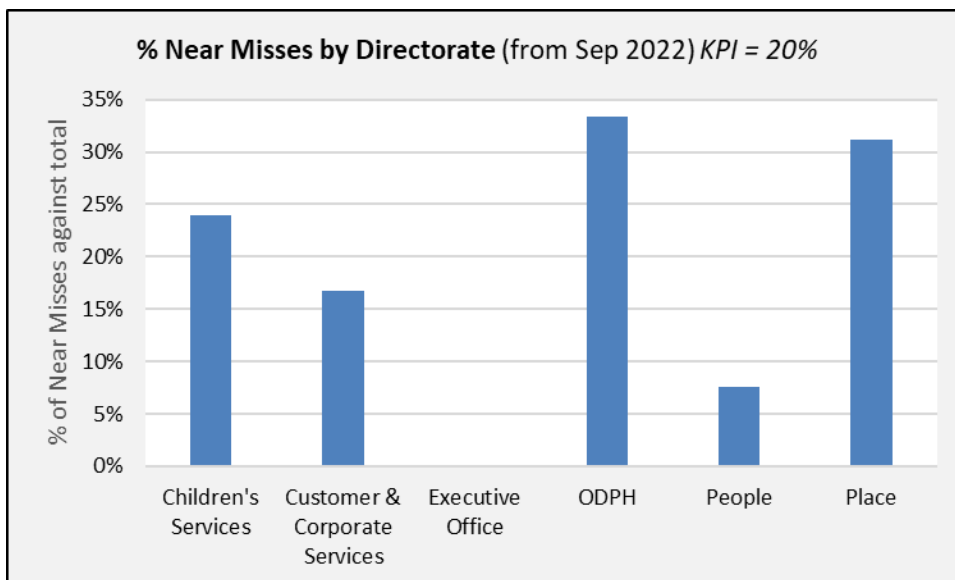
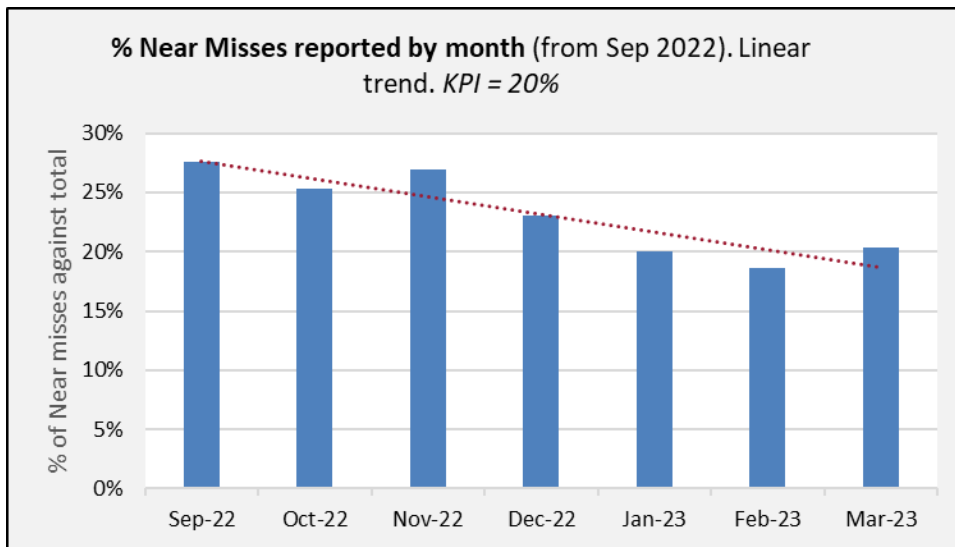
25.4. **KPI 2 – Incident Closure.** The KPI is 100% within the timeframes listed above, based on incident severity – the higher the severity, the more time is granted to investigate. Compliance is shown below (from September 2022 when this KPI came into effect):



25.5. Average compliance over the time period (to end of March 2023) is 37.8% - this was from a starting figure of 11.9% compliance and via a high of 46.9% compliance in December 2022.



- 25.6. Incident closure compliance is a long way below the 100% KPI requirement – this primarily believed to be due to a lack of familiarity with both the new KPI and the correct processes on the Assure system to assign severity to incidents, and to assign actions to complete incidents within the given KPI timeframe. H&S are working to resolve this via additional messaging and training for “Default Assigned” licenced users on the system – i.e., those with responsibility for investigation and completion actions. There is also a responsibility for “Default Approver” licenced users to review and approve incidents within the KPI timescale - “approved” status is the KPI measure – but this is believed to be a less significant compliance factor.
- 25.7. **KPI 3 – Near Miss reporting.** The KPI is 20% of total incidents reported within a given timescale for an organisational unit should be near miss reports. Compliance is shown below, from September 2022 when this KPI came into effect:



- 25.8. In 2023 the decreasing trend has brought the overall KPI into non-compliance: the reasons for this are not fully understood but the H&S team are working with managers to promote

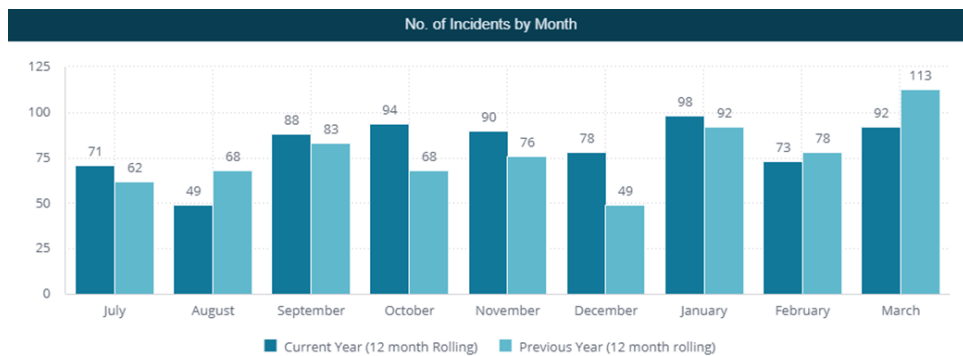
understanding and compliance with the KPI. The eventual aim is to raise the KPI to drive the reporting culture of near misses: by doing this it allows manager to focus on near miss root causes and by addressing these prevent harm or loss occurring.

- 25.9. An Investigation closure panel will be chaired by the Head of HSW Assurance, to review the investigation learning and impact for level 3 and 4 investigations, and a selected number of RIDDORS. This has yet to be implemented fully across the council

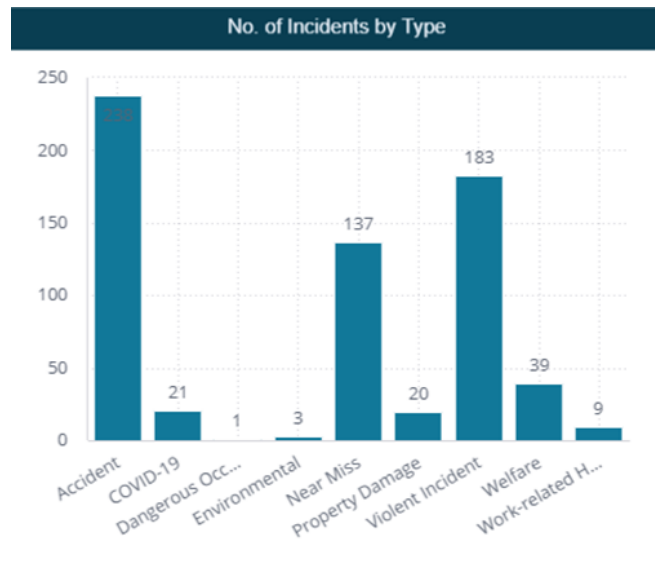
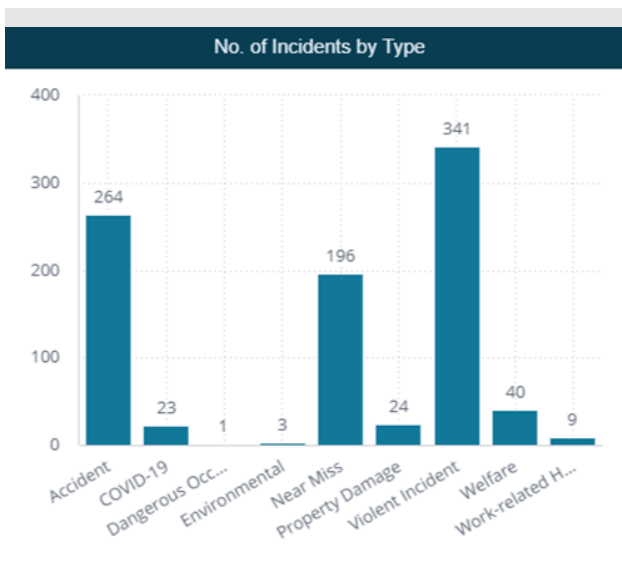
- 25.10. An analysis of 23 'high risk' incidents reported during 2022-23 is currently being undertaken in order to identify any themes in the root causes and learning that may be transferable across the organisation to be shared.

26. Other Incident data

- 26.1. Data from incidents can now be obtained live from the SHE Assure “Insights” dashboard – this means that any manager can view live data on their service, team or area at any time, without having to rely on pre-prepared “snapshot” data reports. It also gives the ability to drill down into any issue and review the actual incident record live. The automated graphics displayed on the Insights dashboard are also an effective tool for spotting trends which can then be analysed and addressed by risk control actions as required.
- 26.2. The graph below shows the number of incidents by month for FY 2023/23 and the previous year: from this we can see a clear correlation over both years, observing the same seasonal trends. This indicates that consistency of reporting has been maintained.



- 26.3. When Incidents are viewed by Incident Type (below) the data shows a significant proportion of “violent incidents” – however, the majority of these are made up of behavioural incidents from Schools Transport: when these are excluded (2nd graph) a more representative view of violent incidents is shown:

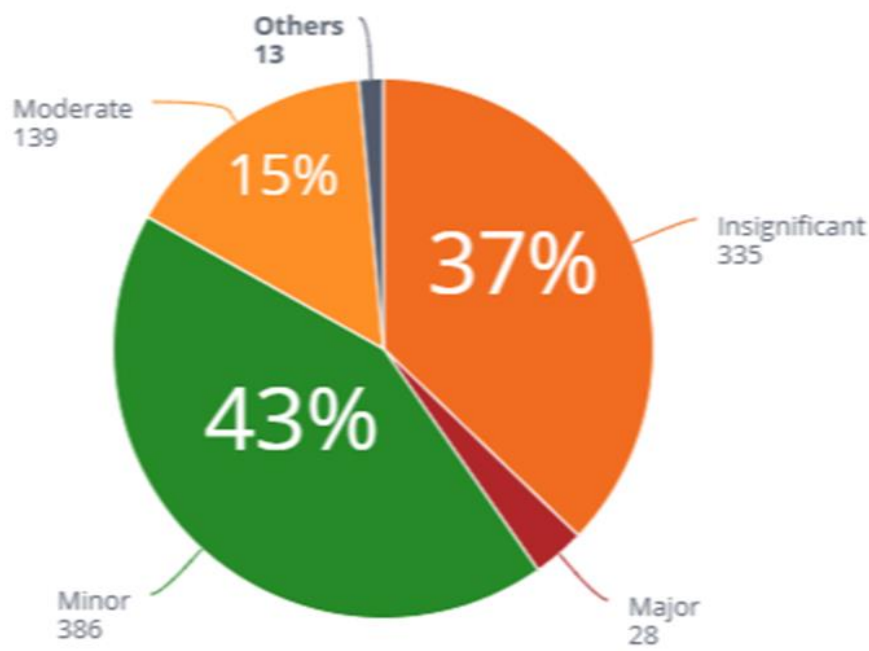


- 26.4. Even with this correction, it can still be seen that violent incidents make up a significant proportion of those reported, and reflect the post-COVID societal changes and their impact on the interactions between PCC workers and the public they serve. Also note that work has been done with managers to ensure that the previous almost universal use of the “Unintentional Violence” category in relation to behavioural incidents is now more nuanced

and that the VV and VP categories are used where intent is established – this will also impact the data change.

26.5. Incidents by severity are shown below – this indicates that the majority of incidents (80%) are either Insignificant or Minor, which is indicative of a good ratio – if there was a higher proportion of Moderate or Major incidents it would be cause for concern. However, there is room for improvement: the aim is for a higher percentage of insignificant incidents than Minor incidents, which combined with an increase in Near Misses reported would facilitate managers addressing the root causes of these incident types and thus preventing more serious outcomes.

Incidents by Severity



27. CLAIMS

27.1. The following table relates to claims from employees who have suffered injury or ill health which has been attributed to a breach in the duty of care owed by the council. Due to the length of time involved in settling a claim, and the fact that in certain circumstances a claim made in the current year may relate to an accident occurring up to 3 years previously, or a disease claim commencing up to 40 years previously, cumulative totals have been omitted.

	2018/19	2019/20	2020/21	2021/22	2022/23
Total claims in year	17	23	11	13	10
Outcomes	2 settled (all repudiated)	4 settled (2 substantiated, 2 repudiated)	5 settled (1 substantiated, 4 repudiated)	None settled (1 substantiated, 5 under investigation, 6 repudiated)	None settled (6 substantiated, 1 under investigation and 3 repudiated)

27.2. Total number of Employers' Liability claims received was 10. Of the 10, 4 relate to accidents at work and the other 6 are disease claims. Of these, 3 relate to the recent HSE Prosecution, 2 are for exposure to noise and the other is for exposure to asbestos.

28. TRADE UNION ENDORSEMENTS

28.1. Plymouth City Council has a Facilities Agreement with the following Trade Unions:

GMB	Lead Rep and Health and Safety Representative	Trish Small
UNISON	Lead Rep and Health and Safety Representative	Kevin Treweeks
UNITE	Lead Rep	Sharon Battershill

Collective endorsement

28.2. As far as we are aware, this is an accurate reflection of what has been achieved in HSW Improvements in the council in 2022/23. Below are a few points we would particularly like to note:

What has gone well:

- The collaborative working relationship between the H&S team and TU reps is welcomed and very positive. The dedicated resource in Street Services is welcomed in this high risk area
- The Manual Handling review project for waste collection has started to reduce the risk that waste operatives face daily
- The roll out of Evotix Assure and the increase in near miss reporting which is helping reduce hazards and risks across Plymouth City Council and the ready access to data and monitoring is very good.

What we would like to have seen more progress on:

- Stress relating to workloads particularly in social services
- Better percentages of completion rates for mandatory training by the end of year

Suggested improvements

- 28.3. There is always a clear willingness to put health and safety first in Plymouth City Council. This however is sometimes hampered by resources
- 28.4. Lessons learnt and learning outcomes for incidents, so other areas can benefit from what went wrong and what was done to rectify this.
- 28.5. Health surveillance on areas such as podiatry for staff who are on their feet most of the day, and that issues such as audiometric tests are responsive to the needs of the organisation.
- 28.6. A clear focus on mandatory and advisory training for H&S for managers.
- 28.7. To prioritise or “red flag” EAP cases of high concern.

GMB Trish Small

UNITE Sharon Battershill

UNISON Kevin Treweeks

