

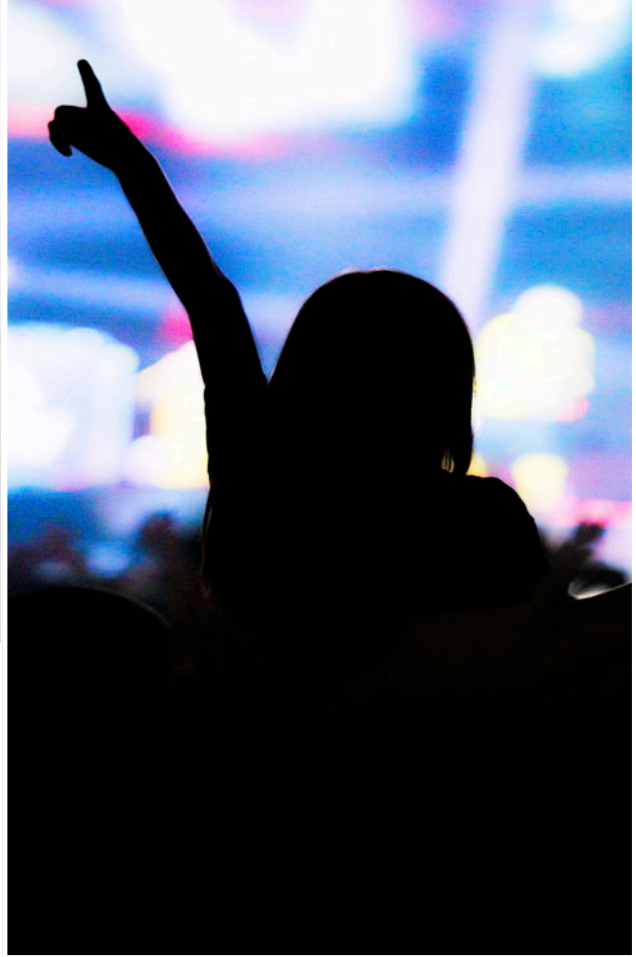


**PLYMOUTH**  
CITY COUNCIL



# **HEALTH SAFETY AND WELLBEING ANNUAL REPORT 2018-2019**

OFFICIAL



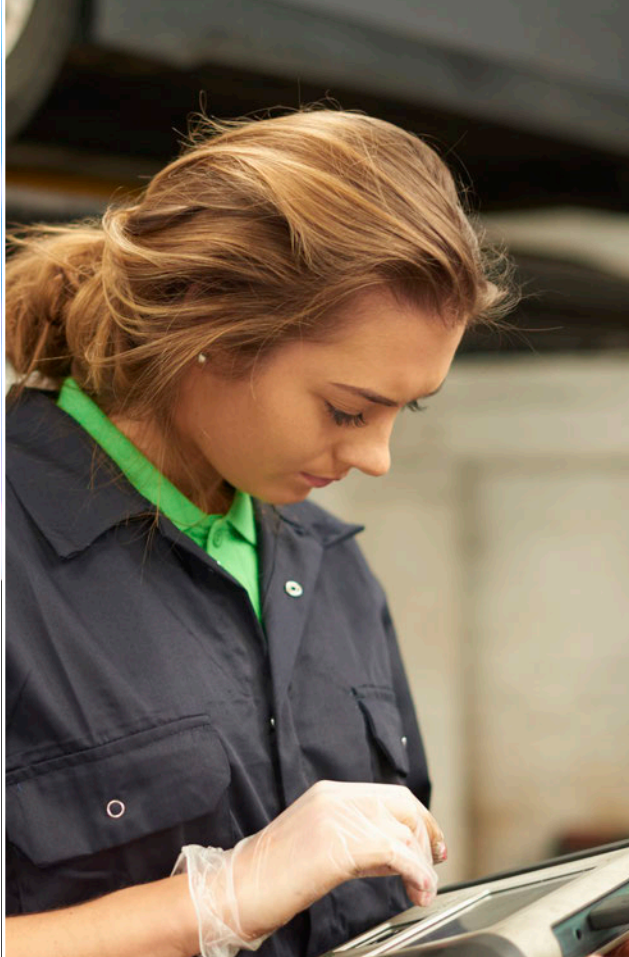
# PLYMOUTH CITY COUNCIL

WHAT WE DO...



OFFICIAL





## KEY FACTS

- At the end of 2018-19 there were 2,617 people in our workforce serving an estimated 262,997 citizens in the City
- We had 16 maintained schools with a workforce of 1,458 serving 3,928 pupils
- Across the organisation we have local volunteer wellbeing champions, available as the first point of contact for colleagues in need, and promoting health and wellbeing
- Various health promotion activities across the year are offered to help us engage in healthier lifestyles. For example Sugar Smart, Plymouth Active 10 walking challenge, One You and alcohol awareness
- We also have volunteer Green Champions encouraging us to develop a greener, healthier and more sustainable workplace
- There are opportunities for us to get involved in additional activities to support the Council such as canvassing during election periods and marshalling at various events across the City



# INTRODUCTION

My focus in 2018-19 has been to make sure that as an organisation we have robust assurance processes in place to evidence our management of health, safety and wellbeing (HSW). As part of this I commissioned an external review of our management arrangements, which was undertaken by Gleeds Ltd. The findings are documented in this report and inform our improvement plan for 2019-20. Scrutiny by the HSE continued in year, and I am pleased to report that the controls put in place to manage exposure to vibration to as low as reasonably practicable has resulted in the HSE lifting the improvement notice served in 2017. I continue to monitor how these arrangements are being sustained and relevant services will be audited by Devon Audit Partnership before the end of the grass cutting season. The Council has made two key Chief Officer appointments in 2018-19 who have substantial responsibilities in leading the HSW agenda going forward: Andy Ralphs, Strategic Director for Customer and Corporate Services, who is the Executive Lead for HSW and Kim Brown, Service Director for HROD who holds the HSW Assurance function within her portfolio.

## **TRACEY LEE**

Chief Executive



I joined Plymouth City Council in November 2018 and have instigated a programme of workforce modernisation called The Way We Work. The programme has many facets with a clear focus on the culture and behaviours needed to maintain people's health, safety and wellbeing. In my role as Executive Lead for HSW, I have provided leadership to the HSW Steering Group. Working with Service Directors from each Directorate in the Council, the self-assessment process has been completed and each department has provided a declaration of compliance with the core aspects of our management framework. We have now agreed to move into a formal audit programme commencing January 2020, as part of our progression towards ISO45001, the International Standard for Occupational Health and Safety. The Gleeds review has highlighted some key areas for improvement in our management systems which we are now working through, including a more systematic identification of hazards. This will be supported by the implementation of our digital management system on 1 October, which will increase visibility of our hazards and incident management through live dashboards available to Managers / Senior Managers, supporting more timely resolution and learning.

## **ANDY RALPHS**

Strategic Director Transformation and Change



Working with the HSE, colleagues in our Street and Bereavement Services and Local Trade Union Representatives over the last year has been a rich learning field in terms of addressing culture and practice at the frontline. The report will provide details of how the HSE hierarchy of controls have been applied, and how we have developed a bespoke tool for calculating exposure rates for individual teams, to ensure exposure is as low as reasonably practicable. It has also been a sobering experience to see how the lack of controls have resulted in some of our front line operatives developing hand arm vibration syndrome and carpal tunnel, which should never have happened. Work continues with the Services to ensure the new controls are fully embedded and sustained. Looking at this year our focus is clearly on promoting the message Spot it! Sort it! Report It! HSW is everyone's responsibility. This means upskilling the workforce to enable us all to play our part, and to simplify reporting and recording through a new digital platform.

## **CLARE COTTER**

Head of Health, Safety and Wellbeing Assurance



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# EXECUTIVE SUMMARY

This report is a statement of Plymouth City Council's occupational health and safety performance to the end of the financial year 2018-19, with any relevant updates included to the date of writing the report. It also includes our improvement plan for 2019-20. Our improvement plan for the coming year is built on the recommendations of an external review undertaken by Gleeds Ltd.

The health, safety and wellbeing vision agreed in 2016 continues to drive our improvements and is aligned to the vision of the Labour Administration: 'A growing City, a Caring Council'

## HEALTH, SAFETY AND WELLBEING VISION





# OUR PLAN

## A CITY TO BE PROUD OF



### CITY VISION

#### Britain's Ocean City

One of Europe's most vibrant waterfront cities, where an outstanding quality of life is enjoyed by everyone.

**OUR MISSION** Making Plymouth a fairer city, where everyone does their bit.

### OUR VALUES

#### WE ARE DEMOCRATIC

We will provide strong community leadership and work together to deliver our common ambition.

#### WE ARE RESPONSIBLE

We take responsibility for our actions, care about our impact on others and expect others will do the same.

#### WE ARE FAIR

We are honest and open in how we act, treat everyone with respect, champion fairness and create opportunities.

#### WE ARE CO-OPERATIVE

We will work together with partners to serve the best interests of our city and its communities.

### OUR PRIORITIES

#### A GROWING CITY

- A clean and tidy city
- An efficient transport network
- A broad range of homes
- Economic growth that benefits as many people as possible
- Quality jobs and valuable skills
- A vibrant cultural offer
- A green, sustainable city that cares about the environment.

#### A CARING COUNCIL

- Improved schools where pupils achieve better outcomes
- Keep children, young people and adults protected
- Focus on prevention and early intervention
- People feel safe in Plymouth
- Reduced health inequalities
- A welcoming city.

### HOW WE WILL DELIVER

Listening to our customers and communities.

Providing quality public services.

Motivated, skilled and engaged staff.

Spending money wisely.

A strong voice for Plymouth regionally and nationally.

**Plymouth**  
Britain's Ocean City

[www.plymouth.gov.uk/ourplan](http://www.plymouth.gov.uk/ourplan)

## GOVERNANCE AND ACCOUNTABILITY

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 Facilities Management Policy, describing a systems leadership approach, with roles and responsibilities dispersed throughout the organisation. As recommended by the external reviewer, these two core policies will be reviewed and amalgamated in 2019-20, along with consolidating all related performance standards for ease of accessibility and understanding by all employees.

The Executive Director and Chair of the Health, Safety and Wellbeing (HSW) Steering Group is the Strategic Director for Customer and Corporate Services. This is a new Directorate, replacing Transformation and Change, to reflect The Council's increased emphasis on serving the residents of our City with a clear emphasis on positive customer experience. Within the Directorate is HROD, which is where the Corporate HSW Assurance Team sit. The Portfolio Holder for HSW continues to be Deputy Leader Peter Smith.

The learning and development gained through strengthening our arrangements for the control of exposure to vibration, combined with the recommendations of the Gleeds review has resulted in approval for two additional HSW Competent Persons to be appointed. One post will be embedded within our Place Directorate with a focus on our Street Services and Waste Operations, and one to support the delivery of a formal audit programme by the Corporate HSW Assurance Team. At the time of writing this report shortlisting has taken place and interviews scheduled. These posts are specifically to fulfil our requirement under the Management of Health and Safety Regulation 7.

There has been a delay in implementing the digital HSW management system purchased from SHE Assure in 2018, due to a lack of project support. This has now been addressed and the system is now ready to pilot in designated areas over the summer before rolling out across the organisation in October 2019.

The HSW Steering Group has approved the business case to pursue accreditation for ISO45001 by 2021/22.

## HSE IMPROVEMENT NOTICE

Over the last fifteen months we have been working with the HSE to meet the requirements of the Management of Control of Vibration Regulations 2005 and the Improvement Notice served by the HSE in respect to breaches of this regulation. There were three aspects to the improvement notice with the following outcomes:

| Element  | Closed      |
|--|-------------|
| Improvement notice closed in full  | 2 May 2019  |
| Eliminate or implement additional controls to reduce exposure to vibration to as low as reasonably practicable   | 2 May 2019  |
| Ensure your procurement process for new and hired equipment considers the risk of HAVs to your employees and where possible specifies low vibration performance for such equipment | 20 Dec 2018 |
| Include a schedule of regular audits to ensure that your management arrangements are controlling the risks to employees  | 20 Dec 2018 |

The Inspector particularly commended the change in culture and practice that she had observed within the service and the positive engagement with local Trade Union Representatives supporting the improvements.

At her visit on 24 April the HSE Inspector observed a breach of Regulation 5 of the Management of Health and Safety at Work Regulations in relation to grass cutting of banks and lack of suitable and sufficient risk assessment in relation to falls from height. At the time of writing this report risk assessments of each bank are being undertaken, and all areas of the city will be completed by November: external review

As a result of the HSE Improvement Notice the CEO commissioned an external review of our health and safety management arrangements.

The Reviewer was complimentary about the attitudes and approach of the people he met and the evidence he found:

**“Plymouth City Council has health and safety systems which are excellent in many ways”**

**“It was refreshing to find people throughout Plymouth City Council willing and wanting to move forward and continue to improve the current situation”**



**“There are many examples of high calibre people doing great things and this is the context in which some areas need improving”**

Culture was a recurring theme in the report with an emphasis on the importance of Senior Leadership:

**“Successful management of health and safety within the Council will be dictated by the culture and this requires a positive and supportive health and safety culture commencing with the most Senior Executives”**

Whilst the reviewer did not make any specific recommendations in relation to this he did state that success would be difficult to achieve without the appropriate leadership.

The main recommendations arising from the review focus on the following themes:

- Hazard identification and risk management
- Applying the principle of prevention consistently
- Alignment of policies and procedures between HSW and Facilities Management
- Improving collaboration between Safety Representatives and Service Managers

These themes are reflected in the HSW Business Plan for 2019-20 (Appendix A)

## AUDIT AND RISK

The 2018-19 audit programme focused on the key findings from the self-assessment audit programme conducted in 2017-18, and concentrated the corporate HSW team's resources on the higher risk areas across the organisation. Declarations have been received from all Service areas in regards to their compliance with key aspects of HSW Management and risk control. A review of the future audit programme and ISO 45001 accreditation has also been completed.

There were also a series of Controlled schools audits undertaken – these are Schools where Plymouth City Council is the employer, and therefore has responsibilities for their staff and people affected by their operations under the Health and Safety at Work etc. Act 1974, The Management at Work Regulations 1999 and other daughter regulations. The outcome of this audit activity provides assurance that the management of health and safety within our controlled schools is good.

## TRAINING

A focus on compliance with mandatory training has continued during 2018-19 demonstrating 81% compliance with our basic induction programme; this is an 8% increase on 2018-19. Additional sessions have been specifically organised for Managers Induction, where general compliance is low at 36%. This course provides a comprehensive view of the HSW Management arrangements within The Council and comprises e-learning and a taught session. It is valued by people who attend and targets are now being included in the balanced scorecard for each service area to achieve compliance by the year ending March 31 2020. Additional taught sessions have been organised to support service areas meeting their targets since January 2019 and will continue throughout the year.

International Workplace has been commissioned to provide IOSH Managing Safely for Senior Managers and Senior Executives via e-learning, to allow flexibility in completing the course. At year end compliance stood at 36%, which at the time of writing this report now stands at 47.9%

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. Data will continue to be published on a monthly basis to support Service Areas to achieve compliance.

## WELLBEING

In 2018-19 we undertook a corporate-wide approach to the HSE wellbeing and resilience survey. Previously this had been undertaken at a localised team level, with no corporate visibility of organisational health.

The results were analysed alongside the Staff Survey results 2017, A Safety Climate Tool Survey and staff sickness information. With the exception of the staff survey results, the return from the surveys were less than 50% from the majority of service areas and therefore caution has been exercised in generalising the findings. That said, the triangulation of data has provided a rounded view of wellbeing across the organisation and the results ring true in terms of the current working environment and known pressures.

The findings provided recommendations for addressing

3 key areas: working intensively, relationships (internal and with customers) and musculoskeletal. As part of business planning activity for 2019/2020, Directorates were asked to speak to their staff and agree actions to address these factors. These action plans are then monitored through our Joint Consultative Committee structure with Trade Unions.

At year end 31 Wellbeing Champions continue to work within their Directorates to provide a listening ear to colleagues and provide health promotion activities aligned to National Campaigns.

4. Other
5. Slips trips and falls

Data in respect of our Controlled Schools is reported separately

## **INCIDENT REPORTING AND LEARNING**

The statistical data will show that overall there has been an increase in the number of incidents reported from an accident and incident rate of 189 to 243 per 1,000 employees (rounded) with a particular increase in incidents of violence and aggression towards staff (39 to 56 per 1,000 employees) Caution should be exercised in concluding that more incidents are actually happening, rather that there continues to be a focus on embedding a positive reporting and learning culture. Local steps are taken to investigate incidents at the appropriate level and to review risk assessments to ensure suitable and sufficient controls are in place. Near miss reporting is gradually improving, although more can be done to promote this. We would expect that our Business Plan for 2019-20 will have a positive effect on raising awareness further and encouraging people to report (see Appendix A).

There is a continued upward trend of RIDDOR reportable incidents from four in 2015-16 to twenty-six in 2018-19. In part this is due to the work on vibration and employees coming forward with diagnosis of Hand Arm Vibration Syndrome or Carpel Tunnel. There has also been a spike in over seven day absences attributed to a work related incident. For the first time we have been able to report lost time incidents, which also shows an increasing trend – work is ongoing to understand the data and is informing local actions in respect of addressing root causes.

The report will provide detail about the top five incident types which are:

1. Unintentional violence
2. Verbal Violence
3. Road Traffic Accidents

# DELIVERY IN 2018-19

## GOVERNANCE AND ACCOUNTABILITY

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The Executive Director and Chair of the Health, Safety and Wellbeing (HSW) Steering Group is the Strategic Director for Customer and Corporate Services. This is a new Directorate, replacing Transformation and Change, to reflect The Council's increased emphasis on serving the residents of our City with a clear emphasis on positive customer experience. Within the Directorate is HROD, which is where the Corporate HSW Assurance Team sit. The Portfolio Holder for HSW continues to be Deputy Leader Peter Smith.

The learning and development of our arrangements for the control of exposure to vibration, combined with the recommendations of the Gleeds review has resulted in approval for two additional HSW Competent Persons to be appointed. One post will be embedded within our Place Directorate with a focus on our Street Services and Waste Operations, and one to support the delivery of a formal audit programme by the Corporate HSW Assurance Team. At the time of writing this report role profiles and adverts are being prepared. These posts are specifically to fulfil our requirement under the Management of Health and Safety Regulation 7:

### Health and safety assistance

7.—(1) Every employer shall, subject to paragraphs (6) and (7), appoint one or more competent persons to assist him in undertaking the measures he needs to take to comply with the requirements and prohibitions imposed upon him by or under the relevant statutory provisions and by Part II of the Fire Precautions (Workplace) Regulations 1997.

(2) Where an employer appoints persons in accordance with paragraph (1), he shall make arrangements for ensuring adequate co-operation between them.

(3) The employer shall ensure that the number of persons appointed under paragraph (1), the time available for them to fulfil their functions and the means at their disposal are adequate having regard to the size of his undertaking, the risks to which his employees are exposed and the distribution of those risks throughout the undertaking.

There has been a delay in implementing the digital HSW management system purchased from SHE Assure in 2018, due to a lack of project support. This has now been addressed and the system is in the final stages of configuration to enable user testing in June and to run a pilot in July, before rolling out across the organisation

in October 2019.

Brief reference cards have been produced for a variety of HSW topics and have been used in two coaching for safety events: Team Plymouth Sept 2018 and the HSW Steering Group away day in April 2019. The topics are relevant to the general management of HSW and describe 'what goods look like'. These are now published on staffroom for all to access.

At the time of writing this report the HSW Steering Group meetings have been increased to every other month from quarterly to reflect the amount of improvement work taking place. On 10 June they approved the business case to gain ISO45001 accreditation by 2021/22.

The health, safety and wellbeing (HSW) improvement plan for 2017-18 was purposefully ambitious; designed to align the way we work with the responsibilities outlined in our revised HSW policy and to address 4 high level priorities:

- Governance and training: to ensure all employees are clear about their individual role and responsibility for HSW and have completed the relevant training to support this
- Risk: suitable and sufficient risk registers are completed for all service areas
- Wellbeing reaccreditation at 'achievement' level for the national wellbeing charter
- Auditing of the HSW Management System across all service areas

Overall, seventy five per cent of the actions were successfully delivered (n=79). This includes actions that were completed, or have now been embedded as business as usual or suspended due to the need to re-prioritise. The remaining twenty five per cent have been carried forward to 2018-19; fifty per cent of these are a continuation of planned work. At the time of presenting this report these actions are complete.

## HSE IMPROVEMENT NOTICE

As reported in our last annual report, on the 7 December 2017 our Street Services department was the subject of an HSE Inspection in relation to compliance with the control of vibration regulations 2005. This was as the result of two RIDDORs reported; one due to a diagnosis of white finger and one a possible diagnosis of carpal tunnel syndrome. The Inspector found us in breach of the regulations and



issued an improvement notice; we have worked with the HSE over the last fifteen months to ensure full compliance, and the notice was lifted in March 2019. During the course of our improvement programme, five further colleagues have come forward with RIDDOR reportable diseases, due to their exposure to vibration in the course of their historical work. These incidents have been fully investigated and the lessons learnt continue to inform our approaches to preventing harm being incurred by others. All seven employees continue to work for the Council in roles where their exposure to vibration has either been eliminated or appropriately restricted. Plymouth City Council takes its duty of care for our staff very seriously and is sorry that during the course of their employment, diseases have developed that have a debilitating impact on their lives. The Council is continuously seeking improvements in our management of health, safety and wellbeing to prevent any adverse impacts on our staff.

A basic requirement of the Regulation (2005) is to reduce exposure to vibration to As Low as Reasonably Practicable (ALARP). The improvements made to date have enabled us to reduce exposure to below 250 points, for most operators, most of the time, but the requirement doesn't end there. With new controls in place, including protocols around the purchase of equipment and engineering attachments, vibration magnitudes of certain tools have been further reduced.

In keeping with the HSE hierarchy of risk control, the following summary of improvement actions is provided:

## **Eliminate**

A new protocol has been agreed to consider, within the Planning Application process, physical changes to Council owned and maintained green estates and spaces so as to eliminate and/or significantly reduce the need for land management operatives to maintain the areas

Existing areas across the City are designated as meadows or green corridors so to remove the requirement for grass cutting or other interventional maintenance

## **Reduce**

Tools and Equipment – The service has procured a selection of new equipment which has been rigorously tested to ensure compliance with the relevant regulations and operates within acceptable levels of Hand Arm Vibration exposure

Use of mechanical excavator with hydraulic breaker to substantially reduce the use of manual breaker

Modifications to existing inventory has resulted in a considerable reduction in vibrational output of existing tools and equipment

Creation and utilisation of a bespoke Vibration Exposure Calculator (VECS) which enables team leaders to enter demographic details of team members and tools on a daily basis to calculate and adjust exposures to ensure exposure is ALARP.

## **Control**

Improved operational processes and schedules

Improved training and education

Prioritisation of Hand Arm Vibration as a risk to be included in daily communications with team

Improved resource planning – increasing available staff working to revised schedules.

## **Monitor and audit**

Welfare and supervision checks are in place to ensure operators are clear about the new working practices and adhering to them; also to engage them in discussions about effectiveness and any additional actions required

Health Surveillance - Enhanced processes and monitoring to ensure that relevant and necessary actions are taken to ensure the health and safety at work of staff.

The use of the Tool Exposure Points functionality in Reactec on a rotation basis to check that the controls in place are effective and adjust working schedules accordingly.

The Council was commended by the HSE Inspector for the improvements achieved; the change in culture and Trade Union engagement was particularly noted.

## EXTERNAL REVIEW

In the light of the HSE Improvement Notice served in December 2017, Gleeds Ltd was commissioned to undertake an external review of The Council's Health, Safety and Wellbeing management arrangements. The overall purpose was to provide assurance in regards to our compliance with the Health and Safety at Work Act etc. 1974 and Management of Health and Safety at Work Regulations 1999 with four specific areas of focus:

- The Strategic framework for Health, Safety and Wellbeing
- Street Services
- Schools
- Safety Representatives engagement

The review took place in December and the final report was presented to Tracey Lee, Andy Ralphs, Anthony Payne and Councillor Peter Smith at the end of March. Due to time constraints the review was predominantly desk top in nature, but included, where possible, site visits and meetings with staff.

The Reviewer was complimentary about the attitudes and approach of the people he met and the evidence he found:

**“Plymouth City Council has health and safety systems which are excellent in many ways”**

**“It was refreshing to find people throughout Plymouth City Council willing and wanting to move forward and continue to improve the current situation”**

**“There are many examples of high calibre people doing great things and this is the context in which some areas need improving”**

Culture was a recurring theme in the report with an emphasis on the importance of Senior Leadership:

**“Successful management of health and safety within the Council will be dictated by the culture and this requires a positive and supportive health and safety culture commencing with the most Senior Executives”**

Whilst the reviewer did not make any specific recommendations in relation to this he did state that success would be difficult to achieve without the appropriate leadership:

**“If Senior Executives are pro-actively supporting health and safety initiatives, listening to competent advice, purposeful in their allocation of time, people and resources to health and safety issues, actively participating at health and safety meetings, and forums, this will become the attitude of the vast majority of staff”**

**“Staff have made comments about a fear culture and blame culture in individual conversations and this is also reflected in the safety climate survey”**

The role of our Senior Leadership Team and additionally the HSW Steering Group is key in modelling positive behaviours as Ambassadors for health, safety and wellbeing across the organisation.

The main recommendations arising from the review focus on the following themes:

- Hazard identification and risk management
- Applying the principle of prevention consistently
- Alignment of policies and procedures between HSW and Facilities Management
- Improving collaboration between Safety Representatives and Service Managers

These themes are reflected in the HSW Business Plan for 2019-20 (Appendix A)

## TRAINING

As in previous years, the HSW Assurance Team has provided a core training programme for staff comprising a range of mandatory, essential and risk/job-related training courses. All HSW training is also available to external partners. Two courses are currently commissioned externally: First Aid and Conflict Resolution, and there are a number of associated e-learning packages available on learning zone with IOSH courses now available by eLearning.

Fewer courses were planned in 2018-19, to take account of demand reducing on some courses. This led to an improvement in the level of scheduled courses actually taking place. As for previous years, the main reason for courses not taking place have been bookings below the base level of 6 people, often due to late cancellations.

To support the organisation in compliance with manager's induction training, the HSW Team planned additional courses. There were some teething

problems with attendance at this training leading to a reduction in the delegate attendance but this has now improved.

|                                       | 2016-17 | 2017-18 | 2018-19 |
|---------------------------------------|---------|---------|---------|
| Number of courses planned             | 111     | 107     | 71      |
| Number of courses taken place         | 81      | 90      | 63      |
| Percentage – courses taken place      | 73%     | 84%     | 89%     |
| Number of courses cancelled           | 30      | 17      | 8       |
| Total number booked on courses        | 990     | 762     | 784     |
| Total course – delegates attended     | 516     | 602     | 536     |
| Percentage – delegates attended       | 71%     | 79%     | 68%     |
| Percentage – delegates did not attend | 29%     | 21%     | 32%     |
| Percentage evaluations received       | 39%     | 34%     | 42%     |
| Percentage satisfaction score         | 91%     | 72%     | 74%     |

Training Compliance has been a corporate priority for 2018-2019, with a commitment to achieve full compliance with mandatory training. Steady progress has been made and plans are in place to achieve full compliance by March 2020. To support this, the HSW Team has provided additional courses and has worked with our partner International Workplace to provide e-IOOSH Training for senior leaders and senior managers.

All Departments are required to have planned for the HSW training provided to their staff and to develop Training Needs Analysis to manage and document the training provided.

The Council has changed the way in which feedback is received from participants which has resulted in a decrease in evaluations received. In 2018/2019, a small increase was seen in evaluations received and the satisfaction score. Further efforts will be made to increase evaluation and satisfaction.

## AUDIT AND RISK

The 2018-19 audit programme focused on the key findings from the self-assessment audit programme conducted in 2017-18 and concentrated the corporate HSW team's resource on the higher risk areas across the organisation. A review of the future audit programme and ISO 45001 accreditation has also been completed. There were also a series of Controlled schools audits undertaken – these are Schools where Plymouth City Council is the employer, and therefore has responsibilities for their staff and people affected by their operations under the Health and Safety at Work etc. Act 1974, The Management at Work Regulations 1999 and other daughter regulations.

### Self-assessment process.

Following analysis of the self-assessment returns from each service area, the findings resulted in a number of key focus areas endorsed by our Corporate Management Team and the HSW Steering Group. These were:

- Health and Safety Risk Assessment Register - to be up to date for all activities in a service area that have been assessed as either a low, medium or high risk and having a suitably associated risk assessment
- HSW Action Plan – for each service area to capture and manage their risks
- HSW document control - that can provide the “golden thread” of their HSW Management System
- HSW Training Matrix - that is current and can demonstrate that a training needs analysis of a service area's workforce has been completed

### Higher Risk Areas

The HSW Assurance Team also profiled departments and service areas which had the highest risk, based on the self-assessment returns and their working knowledge of risk. There were ten areas identified as the primary areas of focus in 2018/19 and additional support was given to ensure suitable and sufficient HSW management arrangements were in place to satisfy HSG65.

By year end all departments have provided a self-assessment declaration, confirming compliance as follows:



| <b>PERFORMANCE – Target 100% across all</b> |                 |    |                           |    |         |
|---|-----------------|----|---------------------------|----|---------|
| Insert name of service                      |                 |    |                           |    |         |
|   | <b>Complete</b> |    | <b>Evidence available</b> |    |         |
| Element                                     | Yes             | No | Yes                       | No | Comment |
| Self-assessment action plan in place        |                 |    |                           |    |         |
| Action plan monitored monthly               |                 |    |                           |    |         |
| Risk assessment register in place           |                 |    |                           |    |         |
| Document control arrangements in place      |                 |    |                           |    |         |
| HSW Training matrix in place                |                 |    |                           |    |         |

A formal audit programme will be implemented in January 2020

## Controlled Schools Audit and Monitoring

In 2017-18 we reported that the audit of our then twenty controlled schools, providing assurance that we had adequate assurance of the HSW management in schools. Monitoring has taken place during 2018-19 which has increased our assurance rating to good compliance.

The Facilities Management Team have also carried out compliance audits of the now sixteen controlled schools in autumn 2018. The results demonstrated an 86.15% compliance rate overall, and actions have been taken to support schools to address any non-compliance concerns.

The action plan assigned tasks for members of staff, with support from PCC competent persons as and when requested. As actions have been completed by the school, evidence and notification has been received by PCC in order to close case.

Listed below are a number of actions that are in place since the audits were completed.

- Preparation of retention schedules for Corporate Buildings as well as schools.
- Training has been offered to schools in the areas of: Asbestos Management for PICs
- General training for Persons In Control
- Development of a Legionella Awareness course.

Controlled Schools will have a compliance audit

undertaken in 2019-20

## Asbestos Survey

The Department for Education commissioned an asbestos survey (AMAP) for all controlled schools during 2018. Plymouth City Council as the accountable body were required to give assurance to DfE that the responses from schools were accurate. The Council was able to confirm 100% compliance for our controlled schools.

## Survey of the Management of stress and resilience

The management of stress in schools was raised as an issue by trade Union colleagues through the Education Participation and Schools, Joint Consultative Committee Sub Group. As a result a survey was carried out of our 16 Controlled Schools.

The survey sought to provide a position statement on how stress and resilience is managed in compliance with legal and corporate requirements. The survey results demonstrate that, in the main, there is a good understanding of the need to manage stress and resilience but with varying responses detailing formalised processes. The current position is now classed as providing reasonable assurance that HSW risks are being managed. However, there is more to be done to achieve good or excellent assurance and so the HSW Team continue to monitor and provide support and assistance.

## WELLBEING

### Wellbeing and resilience survey

For the first time this year, we undertook a corporate-wide approach to the HSE wellbeing and resilience survey. Previously this had been undertaken at a localised team level, with no corporate visibility of organisational health. Individual stress and resilience risk assessments continue within normal management arrangements.

The results were analysed alongside the Staff Survey results 2017, A Safety Climate Tool Survey and staff sickness information. With the exception of the staff survey results, the return from the surveys were less than 50% from the majority of service areas and therefore caution has been exercised in generalising the findings. That said, the triangulation of data has provided a rounded view of wellbeing across the organisation and the results ring true in terms of the current working environment and known pressures.

The findings provided recommendations for addressing 3 key areas: working intensively, relationships (internal and with customers) and musculoskeletal. As part of business planning activity for 2019/2020, Directorates were asked to speak to their staff and agree actions to address these factors.

In 2017 a Wellbeing Specialist Post was created as a pilot to support targeted areas with additional programmes of action to address key areas. It has not been possible to fully embed this role within the organisation due to the departure of the initial recruit in 2018 and successor in 2019. This post is currently under review.

### Wellbeing Champions

Our wellbeing champions are volunteers in our workforce who work together and within their departments to:

- Help identify different health and wellbeing campaigns for staff
- Use health promotion materials to support positive interventions
- Be available to advise colleagues (and clients/customers where appropriate) about health and wellbeing and be able to signpost to relevant information and support

They are trained mental health first aiders and have also had training to improve their understanding of how lifestyle behaviours and environmental factors affect wellbeing

In April 2018 we had 20 active workplace wellbeing champions. This increased to 31 following a recruitment campaign and training in October. The service provided is completely confidential, but data is collected on the number of hours utilised in their role.

### Total Hours of champion logged activity

|            |         |
|------------|---------|
| April 2018 | 10.5hrs |
| May 2018   | 7.5hrs  |
| June 2018  | 10.5hrs |
| July 2018  | 12hrs   |
| Aug 2018   | 4hrs    |
| Sept 2018  | 6hrs    |
| Oct 2018   | 21hrs   |
| Nov 2018   | 8hrs    |
| Dec 2018   | 3hrs    |
| Jan 2019   | 29.5hrs |
| Feb 2019   | 46.5hrs |
| March 2019 | 19hrs   |

As well as supporting individual colleagues the following activities have been run over the course of the year:

### One You

January 2018 as part of the New Year New You campaign the champions promoted the One You quiz and Plymouth Eat Well resources <https://www.oneyouplymouth.co.uk/eat-well/>

March 2018 promoted the Nutrition on the go (400-600-600 calorie) campaign - <https://campaignresources.phe.gov.uk/resources/campaigns/71-nutrition-on-the-go/overview>

Promoted active 10 walks throughout the year

Designed an active 10 walk in Windsor House

Stoptober – a workshop was attended by the champions with a focus on support quitters to access the Livewell Stop smoking service

## Sugar Smart

February 2018 Sugar Smart Ambassador training delivered to 20 people at Windsor House

September 2018 - Staffroom and social media related to Sugar Smart

Developed a Sugar Smart action plan for The Council

As part of Sugar Smart September we held 2 lunchtime workshops in Ballard and Windsor House - messages, myth busting and quizzes delivered by wellbeing champions.

Work with Cater-Ed to deliver Sugar Smart services

## Alcohol

November 2018 Alcohol IBA training workshops (Windsor & Ballard House) during alcohol awareness week in November 2018

## The Plymouth Active 10 Walking Challenge

October 2018 – promoted and took part in the Plymouth Active 10 Walking Challenge

## Mental Health

- 5 Ways to Wellbeing (CLANG) workshops delivered in 3 venues
- 5 Ways to Wellbeing (CLANG) resources put on staffroom/newsletter

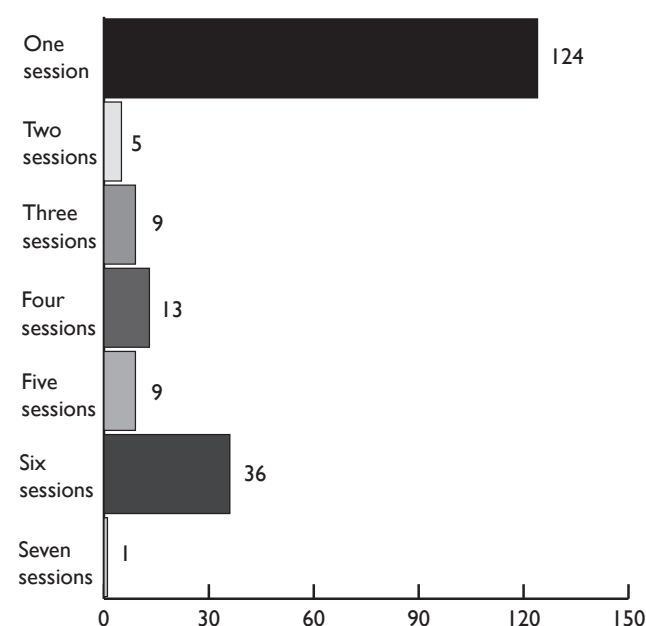
## Employee Assistance Programme

The Council continues to contract with PAM Assist to provide a comprehensive employee assistance programme which all employees are able to access. During 2018-19 there were XX hits on their website which is a significant decrease from 2017-18. The website provides a range of advice and guidance relating to various health and wellbeing topics, money management and legal matters. The most frequently viewed pages continue to be all aspects of mental health and on-line counselling support.

The level of access to telephone counselling dipped considerably in 2018-19 whereas face to face counselling remained around the same level as the previous year (62 and 400 sessions respectively). The table below demonstrates that the average number of

sessions is two per person, however the majority of people only need one session, with thirty-eight people needing six sessions. Only in extenuating circumstances is more than six sessions agreed.

## Quantity cases by quantity sessions YTD



The terms of the contract are being changed for 2019-20 which will negate the need for managers to approve counselling sessions; this has been cited as a reason why some people will not approach the service when they are in need.

## Occupational Health

During 2018-19 our local Occupational Health Provider IMASS was purchased by Medigold Health, a National Company. This has brought the benefit of national expertise being available locally, which has been particularly helpful in terms of our health surveillance arrangements. In August 2018 we were visited by Jackie Williams, Associate Director of Health Surveillance who provided a Health Needs Analysis of our Health Surveillance arrangements in Street Scene and Waste. Mobile Clinics are now provided on site on a regular basis at Prince Rock to improve access and compliance.

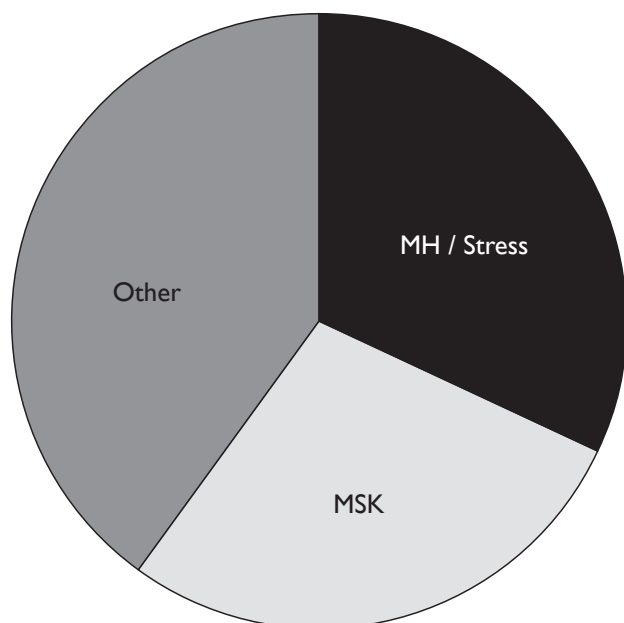
Medigold (and previously IMASS) provided 518 pre-employment checks in support of The Council's recruitment process and 281 Occupational Health appointments in 2018-19. This is broadly consistent with the last two years. The primary reasons for referral continue to be mental wellbeing and stress, musculoskeletal concerns and fitness to work. Managers categorise their referrals as follows:



| Reason for referral   | Total |
|---|-------|
| A significant period of absence e.g. a hospital stay or long term absence of 4 weeks or more                        | 81    |
| Concerns that the employees work is being affected by a medical condition   | 43    |
| Concerns that work may be exacerbating a medical condition  | 38    |
| Employee appears to be suffering from negative levels of pressure / stress in either their personal or working life | 71    |
| High levels of short term absence for seemingly minor reasons   | 7     |
| Other   | 41    |
| Total   | 281   |

The following pie chart shows the two top concerns identified by the Occupational Health Service compared with all other concerns:

### Referrals to Occupational Health by cause



This is consistent with our sickness data, and national data concerning the top reasons for sickness absence in the UK.

### Flu programme

In 2018-19 we have estimated that 28% of our staff would have received a flu vaccination. This includes:

- Staff who would have met the governments criteria for receipt of a free vaccination via their GP or Pharmacy (based on our Health Needs Assessment)
- Staff who work in social care roles with direct contact with vulnerable residents who were eligible for a free vaccination from their GP practice or pharmacy (based on employee numbers in front line social care roles)
- Staff who redeemed their voucher for a free vaccination via Boots Pharmacy through The Council's free offer (Management Information)
- Staff who work in our Street Services Teams who attended an on-site clinic for vaccination (management Information)

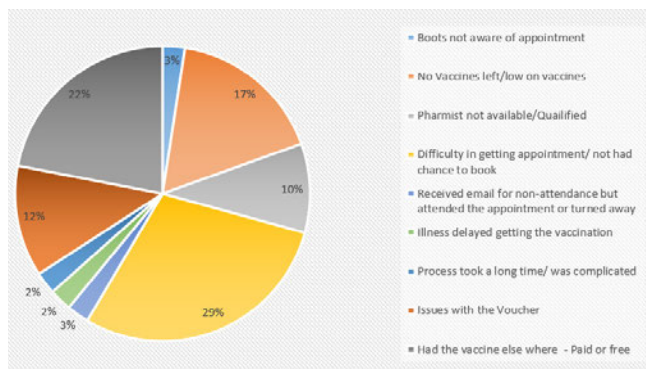
The Council also extended an offer to all Plymouth's schools, whereby they were able to buy into our voucher scheme or book a vaccination clinic with our Occupational Health Provider. One school offered employees a clinic and 16 offered vouchers totalling 160 staff.

The following table illustrates the take up rates for The Council's offer compared to previous years:

| Directorate/ Department   | 2016 | 2017 | 2018 |
|---------------------------|------|------|------|
| Executive Office          | 17   | 3    | 20   |
| People                    | 128  | 185  | 176  |
| Place                     | 109  | 55   | 129  |
| Public Health             | 9    | 16   | 16   |
| Transformation and Change | 137  | 134  | 147  |
| Grand Total               | 400  | 393  | 488  |

In addition to the above, based on workforce statistics, a further 396 staff may have received a free vaccination via their GP practice or surgery, and there may have been additional staff who purchased their own flu vaccination privately which we are not able to account for.

Out of the 488 vouchers requested, 262 were redeemed (54% rounded). Whilst disappointing, this is in line with other national corporate flu programmes. The following graph illustrates the reasons for non-redemption (based on the experience of 41 people):



Continued funding of a flu vaccination programme for our staff has been approved for 2019; arrangements for the programme are under review.

## ACCIDENT AND INCIDENT REPORTING AND LEARNING

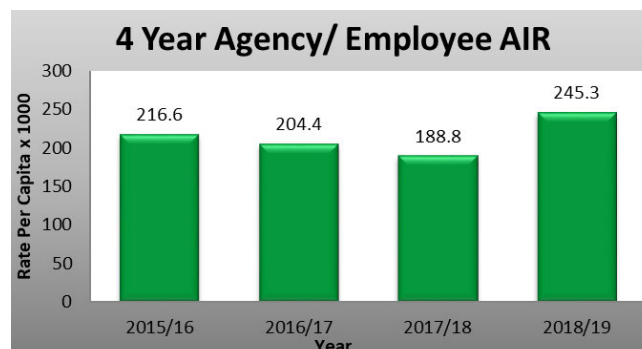
All data presented in this report has been extracted from an MS Access data-base managed by the corporate HSW Assurance Team. Data is presented as a ratio of incidents per thousand workforce population (headcount) to standardise the rate and allow comparisons between years. This data is for Employees & Agency workers only, and does not include PCC Maintained schools.

The data is not benchmarked with other organisations due to the variation in the way that incident and accident information is captured which may present a misleading picture.

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.

Overall it can be seen that there has been an increase in the number of incidents reported in 2018-19, following a decreasing trend: caution should be exercised in concluding that more incidents and accidents are actually occurring. A positive reporting and learning culture is being embedded to ensure we learn from the root causes of incidents and accidents and are able to share any lessons learnt across service areas where learning is transferable, and the increased rate likely reflects this improved reporting culture.

**Graph I – Four year Employee/ Agency incident rate**



Please note that these figures differ from the data provided in 2017-18 annual report. This is because these figures now represent PCC employees and agency staff only, for a more accurate accident/ incident rate, and do not include data from PCC Maintained Schools.

An increase has been noted in the rate of incidents of violence and aggression reported by PCC staff and Agency workers. These have primarily occurred amongst customer-facing staff in locations such as the First-Stop shop and Libraries – incident data is not conclusive as to the cause of this increase, but it may reflect social pressures caused by external factors outside PCC control, such as the introduction of Universal Credit. There has been a particular drive to encourage staff to report incidents of violence and aggression in customer facing service areas, therefore some of the increase in incident rate may be attributed to an increase in reporting. Focused HSW support is being provided to management in such areas, along with involvement of Trades Union colleagues, to ensure effective risk mitigation is in place.

Work is on-going to support and improve the way in which we learn lessons from the incidents that occur so we can share these across the organisation and reduce the likelihood of there being repeat failures. We recognise that good investigations that identify the root causes are essential for identifying effective risk controls.

**Graph 2 – Four year Employee/ Agency Violence & Aggression Rate**



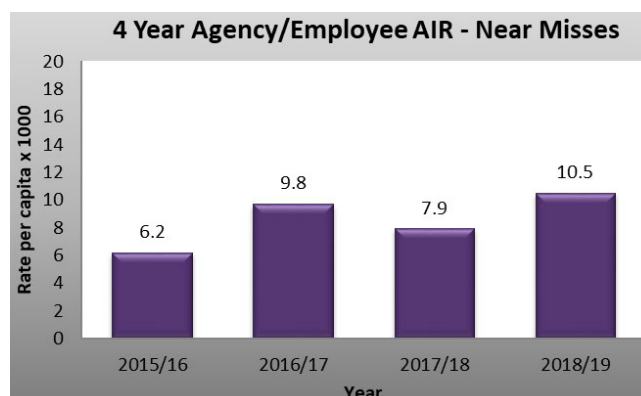
These figures represent PCC employees and agency staff only, for a more accurate accident/ incident rate, and do not include data from PCC Maintained Schools.

### Near-miss reporting:

The number of near-misses reported by an organisation (in relation to the number of incidents) is a good “leading” (or pro-active) indicator of the effectiveness of the health & safety culture. It is encouraging to see an increase in the number of near-misses reported from the previous year, and a positive trend; however the overall numbers reported continue to be low.

To address this, near-miss and hazard reporting are a key focus for 2019/20. This will be supported by the implementation of SHE Assure, the new on-line HSW management system, providing ability to log incidents, near-misses and hazard reports through an online portal and through an app for mobile devices and phones. It is expected to be effective in significantly increasing the number of near-misses and hazards reported: every one of these represents the opportunity to correct or control a hazard before it leads to injury or ill-health.

**Graph 3 - Four Year Near-Miss reporting rates.**



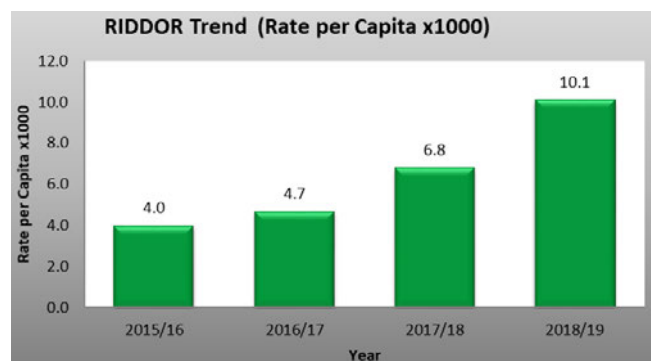
These figures represent PCC employees and agency staff only, for a more accurate accident/ incident rate, and do not include data from PCC Maintained Schools.

### RIDDOR Reports & Lost-time Incidents.

The Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 2013 (known as RIDDOR) puts duties on employers, the self-employed and people in control of work premises (the Responsible Person) to report certain serious workplace accidents, over 7-day absences from work, occupational diseases and specified dangerous occurrences (near misses) to the Health and Safety Executive.

RIDDOR rates are a well-established lagging indicator (a reactive indicator of ‘what has happened’), but as the difference between whether an incident can meet the RIDDOR reporting criteria or not can often be very slight, another effective lagging indicator is Lost-time Incidents. For this year’s annual report, we have also produced data on incidents where more than 1 day’s absence has occurred as a result of a work-related incident.

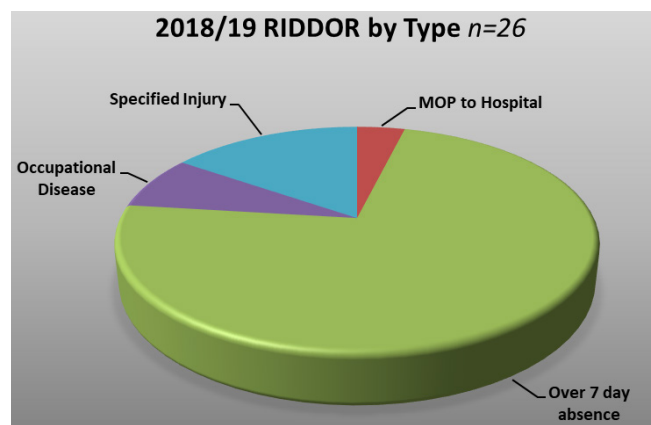
**Graph 4 – Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR) incident rates**



These figures represent PCC employees and agency staff only, for a more accurate accident/ incident rate, and do not include data from PCC Maintained Schools.

The total number of RIDDOR reportable incidents for the year was 26, this was 8 more than the previous year. The proportional breakdown of RIDDOR incidents by type is shown in below, in graph 5:

**Graph 5 - Proportional representation of 2018/19 RIDDOR incidents by RIDDOR type.**



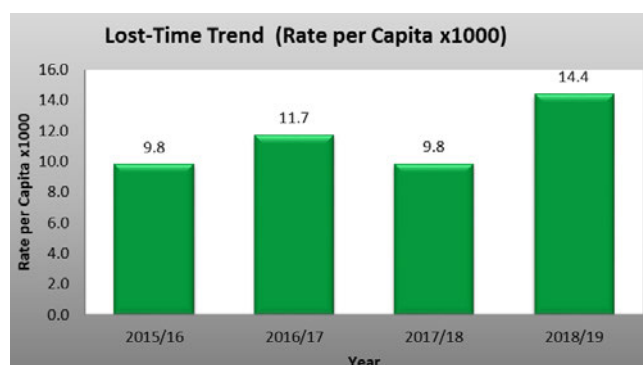
These figures do not include data from PCC Maintained Schools.

The increasing trend in RIDDOR incidents is specifically linked to an area of council operations with high levels of manual handling and use of machinery. Extensive focus has been given to supporting Health and Safety improvements in these areas over the past year, and this is ongoing.

## Lost time incident rates

Graph 5 shows the trend in Lost-time Incident rates. As with the RIDDOR data, this shows an increasing trend, although the annual figures fluctuate – again, the increasing trend is specifically linked to the same operational area of council activities, and the same ongoing extensive focus on Health and Safety in these areas is in place.

**Graph 6 – Lost-time Incident rates.**



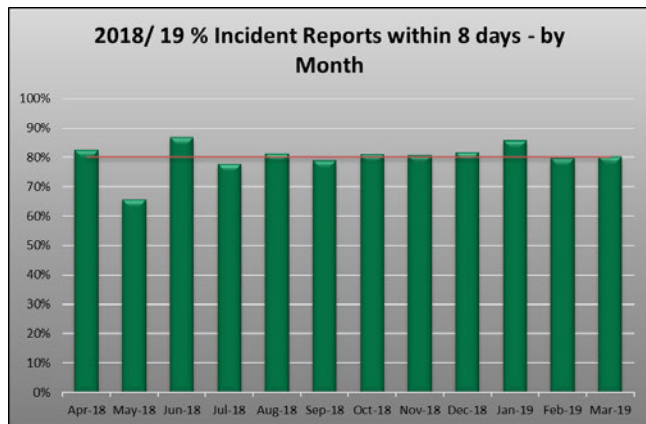
These figures represent PCC employees and agency staff only, for a more accurate accident/ incident rate, and do not include data from PCC Maintained Schools

## Incident reporting:

In 2018 the standard for reporting incidents was reduced to 8 days (to assist with timely RIDDOR reporting) and will be reduced further with the implementation of the on-line HSW management system, later this year. Performance against the 8 day standard for incident and accident reporting has stayed steady compared to the previous year. Where the standard was not met each month was generally due to specific spot-failures to report on-time from areas that produce high volumes of incident reports, and thus have a disproportionate effect on the monthly totals.



**Graph 7 – Incidents reported within 8 days**



Types of incidents: Graph 8 shows the types of incidents reported and indicates that the top 2 incident types for the year remain the same as in 2017-18:

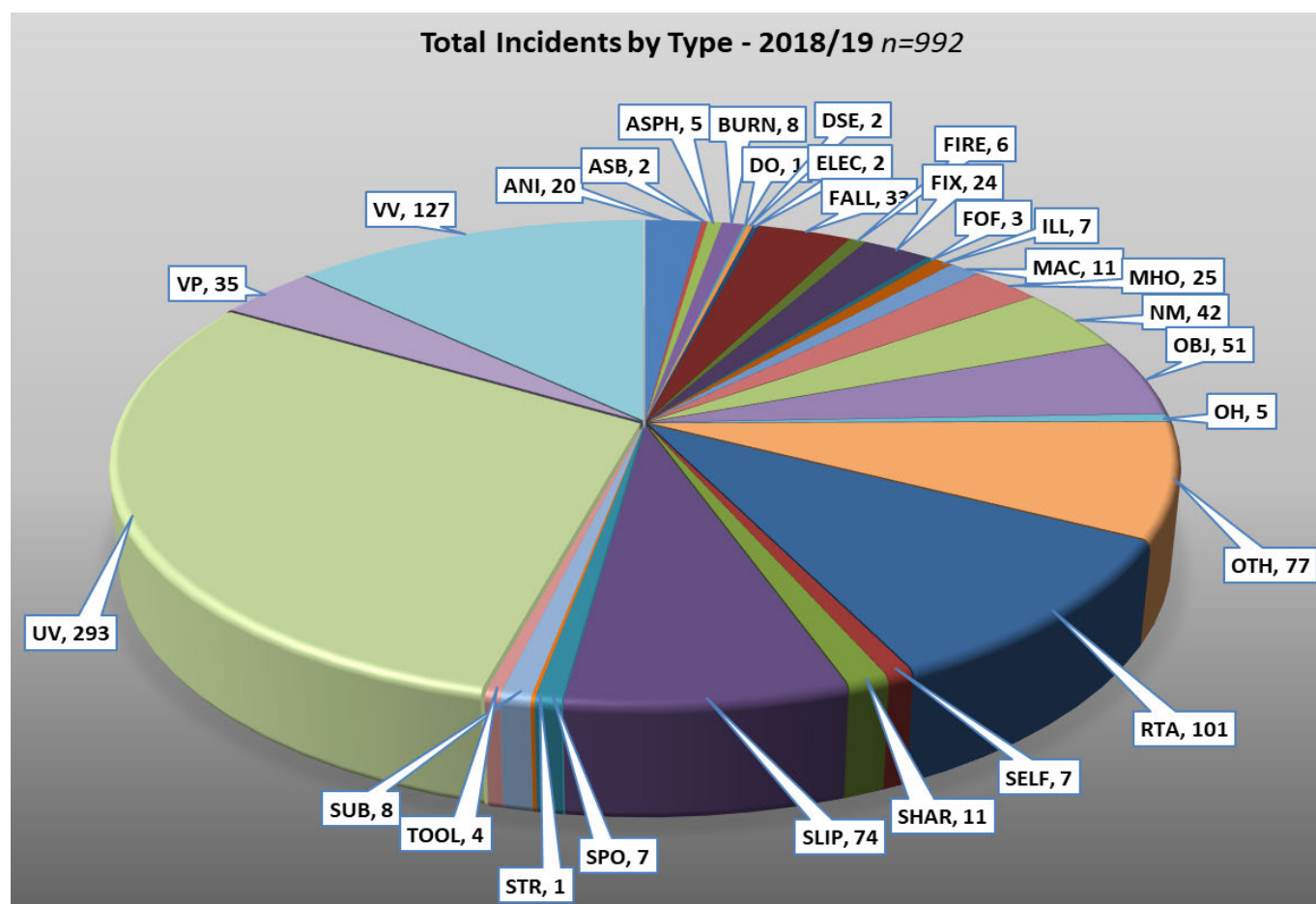
### Themes and trends

- Unintentional violence: 30% (293 occurrences) of the total incidents reported in 2018-19. All of these occurring within our adult care facilities and associated with the transport provision for these centers and transport for special schools.
- Verbal Violence: 12.8% (127 occurrences). The majority of these incidents occur to customer facing staff such as Concierge and Customer Services staff.
- Road Traffic Accidents: 10% (RTA 101 occurrences). This high figure is misleading, as the majority of RTA incidents occur during transport provision for Special School and Adult care centers, and do not result in any injury. However, for such events, a separate incident report is logged for every passenger on board, which artificially inflates the total figures.
- Other: 7.76% (77 occurrences) this consists of incidents that do not fit into any other category. The increase over last year is due to an upswing in incidents from Customer & Corporate Services Directorate, and include incidents such as, for example, public drunkenness in Libraries. With the implementation of the new on-line HSW management system, further categorisation will become available, thus reducing the number of incidents that fall within the “other” category.
- Slips, Trips & Falls 7.5% (74 occurrences). The occurrence is roughly equal amongst Directorates,

with the exception of Place Directorate, where this is the top incident type, accounting for 17% (31 incidents) across the year.

Local investigations take place for each incident in accordance with our Performance Standard for Investigating Incidents which includes a review of risk controls and the updating of risk assessments accordingly.

**Graph 8 – Incidents by type**



These figures do not include data from PCC Maintained Schools.

### Key

| Code | Incident Type   |
|------|---|
| ANI  | Injured by an animal or insects   |
| ASB  | Exposure to Asbestos  |
| ASPH | Drowned, asphyxiated, or choked   |
| BURN | Injury from hot or cold contact (e.g. scald)                                |
| COLL | Trapped by something collapsing   |
| DO   | Dangerous Occurrence (RIDDOR definition)                                    |
| DSE  | DSE related health problems   |
| ELEC | Contact with electricity or electrical discharge                            |
| EXP  | Exposed to explosion  |
| FALL | Fall from a height  |
| FIRE | Exposed to fire   |
| FIX  | Hit something fixed or stationary   |
| FOF  | Client/Member of the Public - Found on Floor with no other cause identified |
| ILL  | Illness – not work-related  |
| MAC  | Contact with moving machinery or material being machined                    |

|      |   |
|------|---|
| MHO  | Injured while handling, lifting or carrying         |
| NM   | Near Miss   |
| OBJ  | Hit by a moving, flying or falling object           |
| OH   | Work-related ill health / occupational disease      |
| OTH  | Other kind of accident or incident                  |
| RTA  | Hit by moving vehicle or other transport incident   |
| SELF | Self-harm   |
| SHAR | Needle stick or sharps injury (Cut by sharp object) |
| SLIP | Slipped, tripped or fell on same level              |
| SPO  | Injured during sports activity                      |
| STR  | Stress  |
| SUB  | Exposed to or in contact with a harmful substance   |
| TOOL | Injured while using hand tools                      |
| UV   | Unintentional Violence                              |
| VP   | Physically assaulted by a person                    |
| VV   | Verbally assaulted or threatened                    |

OFFICIAL

## PCC Maintained School

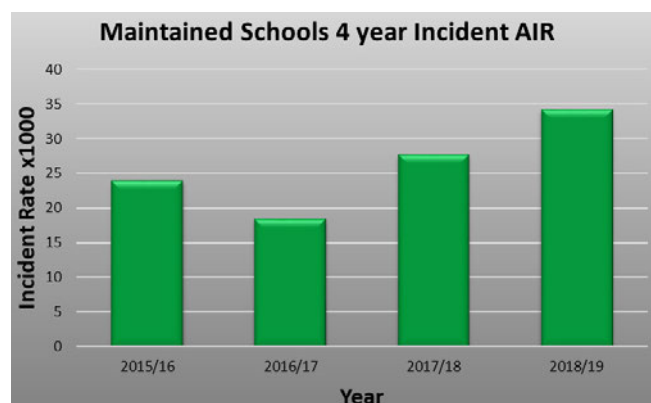
Data from Maintained Schools is separated from the main data set due to the difference in the nature of incidents occurring in an educational environment, thus rendering comparison data unreliable when included in the main data. There are two key factors to bear in mind when reviewing incidents relating to children and young people / children with special needs:

- Children and young people are known to have limited insight into health and safety risks due to their inexperience, immaturity and lack of awareness of risk
- Children with special needs can experience involuntary movements and actions which result in harm or injury to others

In 2018-19 we had 16 Maintained Schools with 1124 staff serving 5351 pupils

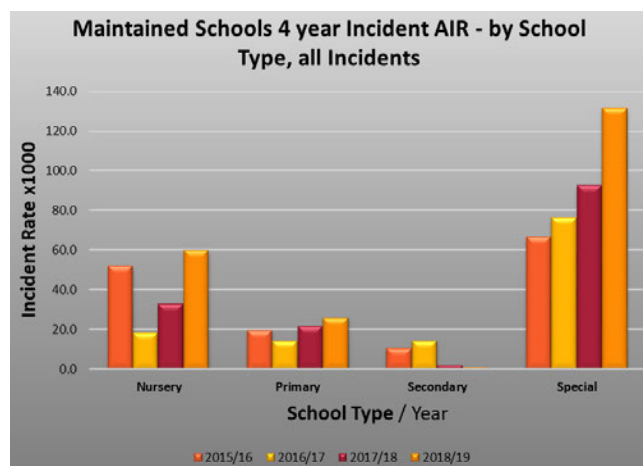
The total incident rate, as shown in Graph 8, has increased over recent years – this reflects an increase in incidents to staff, rather than pupils, which has remained steady for the last two years. It is not known if this represents an actual increase in incidents or an improving reporting culture.

**Graph 9 – Total numbers of School incidents reported per year**



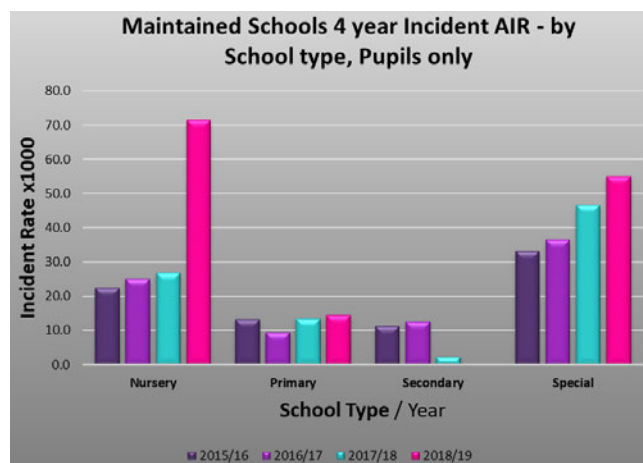
The number of incidents being reported by Special Schools is showing an increasing trend, this includes both an increase in incidents occurring to pupils, and an increase in incidents occurring to Staff – see Graph 10. This may represent an improvement in incident reporting, but may also have other causes.

**Graph 10 – Incident totals by school type, Agency & Employee incidents only**



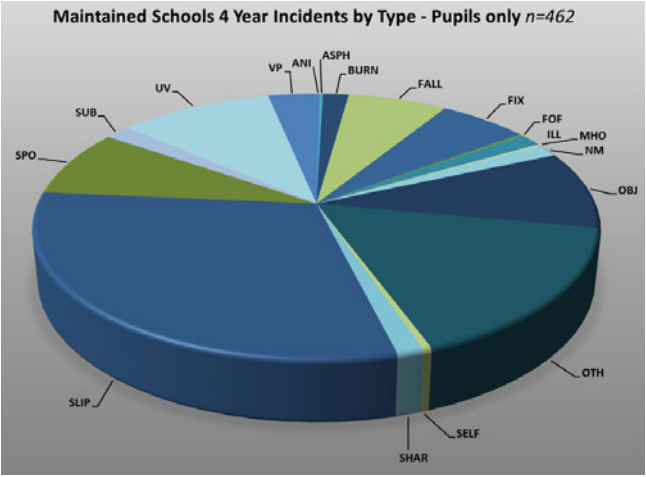
There was also a significant increase in the nursery pupil incident rate in 2018/19, however, as the actual number of incidents is still very low (8 in total), this result can be seen as an outlier – see graph 11:

**Graph 11 - Incident totals by school type, Pupil incidents only**



Incidents by Type: Unintentional Violence incidents are consistently the highest number of incidents reports each year; this reflects the high number of such incidents reported from Special Schools. It is worth noting that these incidents primarily affect staff, the highest incident type reported to pupils is Slips, Trip & Falls, whereas this is the second highest incident type reported to staff (Graph 12).

**Graph 12 – Incident types occurring to pupils**



**Incident reporting within 8 day standard**

The number of incidents reported on time from maintained schools continues to be low – in the last year, the average was 47% incidents reported within 8 days, and the 80% minimum goal was not met in any single month (see graph 12). It is anticipated that the implementation of the new on-line HSW management system will significantly improve timely reporting of incidents from schools.



## CLAIMS

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.

|                       | 2015/16   | 2016/17 | 2017/18                    | 2018/19                    |
|-----------------------|-----------|---------|----------------------------|----------------------------|
| Total claims in year  | 13        | 6       | 13                         | 17                         |
| Outcomes              | 8 settled | -       | 4 settled (all repudiated) | 2 settled (all repudiated) |
| Number in due process | 5         | 11      | 20                         | 35                         |

In 2018-19 twelve claims relate to accidents at work and five to diseases related to work activities

# APPENDIX A:

## IMPROVEMENT PLAN 2019-20

| HEALTH, SAFETY AND WELLBEING ASSURANCE CORPORATE PLAN 2019-20                     |   |  |                                   |                  |     |
|---|---|--|-----------------------------------|------------------|-----|
| Objective   | Key actions   | Measurement  | Owner(s)                          | Target Date      | RAG |
| PLAN  |   |  |                                   |                  |     |
| 1. All employees are clear about their individual role and responsibility for HSW | 1.1 Review, update and consolidate the Corporate and FM HSW policies aligned to ISO 45001 standards   | 1.1 One cohesive policy is available   | 1.1-1.3 Clare Cotter / Ralph Bint | 1.1-1.3 30.09.19 |     |
|   | 1.2 Complete a systematic and prioritised review and refresh of performance standards across HSW and FM providing a cohesive and accessible suite of guidance for staff aligned to ISO45001 standards | 1.2 One comprehensive suite of performance standards is available on staff room  |                                   |                  |     |
|   | 1.3 Develop a programme of communications to ensure people are aware of the performance standards relevant to their work activities and the risks inherent in not following them                      | 1.3 A rolling programme of updates is in place bespoke to service area needs   |                                   |                  |     |
|   | 1.4 HSW objectives are clearly identified in people's appraisals commensurate with individual roles and responsibilities  | 1.4 HSW reporting through the Steering Group and JCCs demonstrates continuous improvement as identified through local business plans     | 1.4 All Managers                  | 1.4 31.08.19     |     |
|   | 1.5 Review and ensure the appropriate resource of competent advice and support at strategic, tactical and operational level   | 1.5 Directorates have suitable and sufficient resources to manage HSW  | 1.5 Directors                     | 1.5 30.09.19     |     |
|   | 1.6 Develop and roll out: SPOT IT! SORT IT! REPORT IT! Approach to hazards  | 1.6 No of hazards identified and managed as recorded on digital system   | 1.6 Clare Cotter                  | 1.6 31.03.20     |     |
| 2. TU Engagement in HSW   | 2.1. Co-create a TU engagement Charter to strengthen the role of Safety Representatives in HSW Improvements   | 2.1 TU engagement charter in place; demonstrable golden thread of engagement and management of HSW risk through JCC engagement framework | Clare Cotter                      | 30.09.19         |     |

| HEALTH, SAFETY AND WELLBEING ASSURANCE CORPORATE PLAN 2019-20                  |   |  |                               |               |     |
|--|---|--|-------------------------------|---------------|-----|
| Objective  | Key actions   | Measurement  | Owner(s)                      | Target Date   | RAG |
| 3. Wellbeing   | 3.1 Develop and agree a comprehensive Wellbeing Strategy  | 3.1 Agreed Wellbeing Strategy in place   | 3.1 Sarah Lees / Clare Cotter | 3.1. 30.09.19 |     |
|  | 3.2 Comprehensive review of hazards to health   | 3.2 All required health surveillance is undertaken   | 3.2 Clare Cotter              | 3.2 31.12.19  |     |
| Do   |   |  |                               |               |     |
| 4. Compliance with mandatory and essential HSW training                        | 4.1 All Directorates maintain a contemporary training matrix for HSW that reflects their organisational structure                                   | 4.1 Audit demonstrating relevant training identified for work activities required  | All Managers                  | 31.03.20      |     |
|  | 4.2 All Managers to ensure staff have completed / in date mandatory training at the appropriate level   | 4.2 Positive improvement trajectory demonstrated in monthly data   |                               |               |     |
|  | 4.3 All Service Areas have appropriate numbers of staff trained and competent to undertake risk assessments   | 4.3 Audit demonstrating risk assessments are suitable and sufficient and relevant to the hazards involved in work activities |                               |               |     |
| 5 Strengthen and maintain a contemporary HSW risk profile across all functions | 5.1 All Service Areas to undertake a schedule of workplace inspections in conjunction with Safety Reps  | 5.1.1 . Schedule in place  | 5.1.1 Heads of Service        | 30.09.19      |     |
|  |   | 5.1.2 . Risk register demonstrating hazards are identified and associated risks managed                                      | 5.1.2 Clare Cotter            | 31.03.20      |     |
|  | 5.2 All Service Areas to maintain a contemporary register of risk assessments   | 5.2. DMT meeting notes reflect monitoring arrangements   | 5.2 Clare Cotter              |               |     |
|  | 5.3 Implementation of the Council's digital HSW Management System (SHE Assure) including modules for hazard spotting, incident reporting, and audit | 5.3. HSW Management Information available in real time on people's desktops  |                               |               |     |
| CHECK  |   |  |                               |               |     |
| 6. Audit   | 6.1 Deliver a systemic audit programme to provide assurance of the effectiveness of the HSW Management System and performance standards             | 6.1 Quarterly assurance reports to HSW Steering Group and JCCs   | 6.1 Clare Cotter              | 6.1 31.03.20  |     |

# HEALTH, SAFETY AND WELLBEING ASSURANCE CORPORATE PLAN 2019-20

| Objective   | Key actions   | Measurement   | Owner(s)   | Target Date                                  | RAG |
|---|---|---|--|--|-----|
| 7. Incident reporting and learning                              | 7.1 . Service Managers to ensure risk assessments are reviewed and updated in the light of incident investigation reports findings  | 7.1 . Quarterly management reports to DMT   | 7.1. Service Managers  | 31.06.19<br>30.09.19<br>31.12.19<br>31.03.20 |     |
|   | 7.2 . Provide quarterly reports to HSW Steering Group on key themes and actions arising from incident data  | 7.2 . Quarterly assurance reports to HSW Steering Group   | 7.2 Clare Cotter   |  |     |
|   | 7.3. Implementation of an incident review panel for RIDDOR and level 3 and 4 investigations to ensure investigations complete in identifying immediate, underlying and root causes with actions suitable and sufficient to prevent recurrence | 7.3 . All investigations meeting criteria are closed by the panel within 90 days  | 7.3 Clare Cotter   |  |     |
| ACT   |   |   |  |  |     |
| 8 Deliver sustainable health, safety and wellbeing improvements | 8.1 Review and update the guidance on known hazards to health in the light of outcomes of 5.1 actions   | 8.1 Updated guidance available on staff room  | 8.1 Clare Cotter   | 8.1 31.12.19                                 |     |
|   | 8.2 All Departments / Service Areas to deliver actions identified by the staff survey / wellbeing and resilience survey   | 8.2 Progressive delivery monitored via JCCs   | 8.2 Service Directors  | 8.2 31.03.20                                 |     |
|   | 8.3 Utilise sickness data / survey data / hazard information to agree a series of actions in year around reducing top 3 reasons for sickness (Stress, Musculoskeletal, colds, flu)  | 8.3.1 Wellbeing Strategy agreed;<br>8.3.2 Downward trajectory of sickness across the 3 top reasons;<br>8.3.3 Suitable and sufficient risk assessments, and safe systems of work in place to comply with Manual Handling Regulations 1992; delivery of flu programme | 8.3.1 Sarah Lees, Clare Cotter<br>8.3.2 / 8.3. Service Directors | 8.3 31.03.20                                 |     |
|   | 8.4 Undertake an annual review and produce an annual report capturing the impact of actions and priorities for the coming year  | 8.4 Comprehensive annual report fed back to the workforce   | 8.4 Steering Group   | 8.4 30.06.20                                 |     |



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