

## **EAST AYRSHIRE COUNCIL**

### **GOVERNANCE AND SCRUTINY COMMITTEE – 1 APRIL 2011**

#### **REVIEW OF HEALTH AND SAFETY**

##### **Report by the Depute Chief Executive/Executive Director of Neighbourhood Services**

### **1. PURPOSE OF REPORT**

- 1.1 The purpose of this report is to advise Governance and Scrutiny Committee of the final report, and recommendations, of the Review of the Council's Health and Safety Arrangements and to outline the steps which have been taken to address the matters identified within the final report.

### **2. BACKGROUND**

- 2.1 At its meeting on 17 June 2009, Cabinet in considering and approving a report on the 2009-2010 Corporate Health and Safety Action Plan was advised that Peter Ralston, Principal Consultant of Chalker Health and Safety had undertaken a review of certain aspects of the Council's health and safety arrangements. In particular, the review focussed on compliance in key areas and assessed as a "critical friend" the effectiveness of the current management arrangements for health and safety.
- 2.2 The final report was considered by Cabinet on 2 December 2009 and an improvement plan to address the recommendations of the review was approved.
- 2.3 In accordance with the arrangements reported to Cabinet in June 2009, Peter Ralston returned in April 2010 to carry out a follow up of the review and to assess progress made against the improvement plan. His findings were reported to members at a seminar arranged for that purpose on 19 May 2010 and to Cabinet on the same date.
- 2.4 A report to Cabinet on that date also detailed the progress made against the improvement plan, and a number of recommendations were agreed by Cabinet with regards to reporting arrangements and further actions to be taken forward. The report noted that the improvement plan contained 52 actions, and as at 12 May 2010, 36 of those actions had been fully achieved, and a further 12 partially achieved.
- 2.5 A written report on Peter Ralston's follow up review has since been received and a copy of the final report is attached as Appendix 1. Also attached, as Appendix 2, is an Improvement Plan which had been developed by the Health and Safety Manager to ensure implementation, in the interim, of the conclusions and recommendations of the follow up review.

### **3. CONCLUSIONS OF THE REPORT**

- 3.1 It is Peter Ralston's opinion that East Ayrshire Council has achieved an enormous amount since his original 2009 review. His report states that many of the issues highlighted in the original report have been dealt with and that the Health and Safety Improvement Plan was almost completed at the time of follow up review.

- 3.2 The report notes that some areas still need improvement, but states that the drive and focus of the Health and Safety section and senior management to continue to improve Health and Safety within East Ayrshire Council is apparent. A summary of the findings of the follow up review is provided below.

#### Health and Safety Training for Staff

- 3.3 The report notes that evidence suggests that considerable work has been undertaken by East Ayrshire Council in order to achieve compliance within this area and it is recommended that ongoing audit and monitoring of Safety Training for Staff Criteria should continue with the same degree of focus and energy.
- 3.4 The report recognises that the safety training matrix developed, while simple, is an effective system for highlighting mandatory, recommended and optional training for staff, based on job roles and health and safety needs. In addition, it notes that specialist training is provided on a needs basis.
- 3.5 The Health and Safety section are now monitoring percentage completion in relation to identified training needs. Information has been provided in the Quarter 2 Health and Safety Performance Report which shows that 59% of identified training courses have been completed.

#### Incident Reporting

- 3.6 The original report found that there was a systematic failure for incidents and near misses to be fully followed up and appropriate and adequate remedial action taken. The follow up report notes that improvement has been made to incident investigation and action procedures; however, a number of recommendations are made so that processes can continue to be improved at an accelerated rate. The introduction of a new electronic management reporting system for Health and Safety will assist in driving this forward.
- 3.7 Recommendations are focused on improved monitoring of incidents and near misses by senior management and frequent random audits to be undertaken on departments to ensure reporting compliance. Non compliance is reported to Executive Directors, and incidents are reviewed and investigated, where appropriate. Reports regarding analysis of the number of incidents are provided to Heads of Service and Executive Directors and are considered at Departmental Management Team meetings.

#### Working at Height

- 3.8 Evidence showed that random inspections are being undertaken routinely by senior management and the Health and Safety section. The report recommended that the inspections continue and that the communication campaign developed be rolled out as soon as possible. As noted within Appendix 1, while specific, targeted work has been undertaken within Housing Asset Services and the Asset Improvement Service, the general campaign still requires to be rolled out. The campaign will form one of a number of health and safety issues to be published in the next edition of ewords.

## Occupational Stress

- 3.9 The report notes that a recent report from the European Safety Agency suggests that across Europe the second biggest cause of work absence is due to occupational stress. Stress is one of the main reasons for absence within East Ayrshire Council and a recent analysis for the period October to December 2010 showed that although fewer people are absent due to work related stress, that when they are absent it tends to be for a much longer period.
- 3.10 Peter Ralston's opinion is that East Ayrshire Council are currently pursuing a sensible and reasonably practicable approach to dealing with occupational stress management within the organisation, and it is recommended that this good practice continue. The approach taken by the Council has been enhanced and further information is provided in the Quarter 2 Health and Safety performance report.
- 3.11 In addition, a new Master Safety File Standard was issued to all employees on Managing Stress in the Workplace. The key aims and objectives of the standard are to:
- Increase awareness of stress and the methods available to combat it
  - Initiate appropriate action to manage and reduce stress at work
  - Assist employees in managing stress in themselves and others
  - Manage problems which do occur and to provide confidential support
  - Manage the return to work of those who have been absent as a result of stress.
- 3.12 The Organisational Development section is running training courses in support of the Council's Stress Management policy. The manager's course, "The Management of Workplace Stress", is mandatory for all managers. The "Managing your Stress" course aimed at supporting employees to address any stress experienced by them is available and accessible based on need.

## Control of Contractors

- 3.13 In the 2009 review, weaknesses were identified within control of contractors; however, since then, significant work has been undertaken to ensure the development of a robust system that will enhance operational and administrative control over contractors. The new control of contractor system will take time to bed in; however, the follow up report indicates that based on the evidence seen, if the system is implemented in the way it is designed, the Council should gain considerably enhanced control over contractor risk.

## Vehicle Control

- 3.14 The report recognises that vehicle control within East Ayrshire Council, in terms of suitability of vehicle and monitoring of employee competence to drive said vehicles, was to a generally high standard. The Master Safety File Standard has been revised. The report recommends that the current system be extended at least on a temporary basis to privately owned vehicles.
- 3.15 It is considered that it would not be necessary to extend the current system as individual mileage claims are used to monitor driving time in relation to privately owned vehicles.

### Team Issues

- 3.16 All health and safety team members have now been relocated at Holmquarry House, Kilmarnock. Weekly meetings of the full team occur every Monday and operational meetings between the Health and Safety Manager and Advisers are scheduled on a regular basis.
- 3.17 Interviews with health and safety staff have confirmed that Health and Safety Co-ordinator roles have moved towards a more 'frontline role'.

### Organisational Recommendations

- 3.18 The report recommends that the Health and Safety Manager is tasked with producing an extensive three-year road map for improving Health and Safety within East Ayrshire Council, detailing the route of where and how the health and safety culture of the Council should be affected. Cabinet agreed in May 2010 that this road map should be developed. The document is nearing completion and will be submitted to Cabinet in March 2011 for consideration, together with the updated Health and Safety Policy.
- 3.19 The report further recommends that the Health and Safety section continue to sit within the remit of the Depute Chief Executive for the foreseeable future. This was agreed by Cabinet on 19 May 2010.

### Original Improvement Plan

- 3.20 All of the issues that were highlighted in the former report have now been dealt with and the Health and Safety Improvement Plan approved by Cabinet has been substantially completed. An extract of the original action plan detailing only those actions which had not been achieved at the time of the last report to Cabinet on 19 May 2010, is attached at Appendix 3.
- 3.21 The plan details progress as at 16 February 2011 and shows that of the 16 actions not completed by May 2010, 7 have now been fully achieved.
- 3.22 Of the nine actions that remain, five relate to the development of performance information for services and are nearing completion. Current statistical provision has been reviewed with a view to refining data collection, collation and analysis. Indicators reported will be included within the Electronic Performance Management Scorecards for the Chief Executive, Executive Directors, Heads of Service and Senior Managers. This will be fully implemented with the introduction of the H&S electronic reporting and management system (SHE) April 2011.
- 3.23 The remaining actions have been partially achieved or will be addressed by the Health and Safety Manager as part of the Council's Roadmap which is contained in a separate report to the Committee.

## **4. POLICY AND LEGAL IMPLICATIONS**

- 4.1 Addressing the issues identified by the Review by Peter Ralston will allow the Council to continue to meet its statutory obligations to provide a safe and healthy working environment for its employees.

## **5. FINANCIAL IMPLICATIONS**

- 5.1 Any financial implications arising from the implementation of the recommendations contained in the Review by Peter Ralston will require to be considered in the context of the overall budgetary process.

## **6. RECOMMENDATIONS**

- 6.1 It is recommended that Governance and Scrutiny Committee:
- (i) Notes the outcomes of the follow up review by Peter Ralston.
  - (ii) Notes progress against the Improvement Plan which was developed as a result of recommendations within the follow up report;
  - (iii) Notes that the Depute Chief Executive\Executive Director Neighbourhood Services will complete the full implementation of the Health and Safety Improvement plan, and has brought forward the three year Health and Safety Road Map; and
  - (iv) otherwise notes the content of the report.

**Elizabeth Morton**

**Depute Chief Executive/Executive Director of Neighbourhood Services**

**25 March 2011**

### **LIST OF BACKGROUND PAPERS**

1. Corporate Health and Safety Action Plan 2009/10 – Report to Cabinet 17 June 2009
2. Review of Health and Safety – Report to Cabinet 2 December 2009
3. Review of Health and Safety Arrangements – Improvement Plan Progress – Report to Cabinet 19 May 2010
4. Health and Safety Performance Update Report – Quarter 1 2010/11 – Report to Cabinet 18 August 2010
5. East Ayrshire Council - compliance review and critical friend and analysis – Peter Ralston – December 2009
6. East Ayrshire Council – follow up of compliance review and critical friend analysis – Peter Ralston

Any person wishing to inspect the background papers relative to this report should contact Ian McArthur, Health and Safety Manager on Telephone Number (01563) 555532. Any person wishing further information should contact Elizabeth Morton, Depute Chief Executive/Executive Director of Neighbourhood Services on Telephone Number (01563) 576001.

**IMPLEMENTATION OFFICER: Elizabeth Morton, Depute Chief Executive/ Executive Director of Neighbourhood Services**

# East Ayrshire Council Health & Safety Review 2010

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# 1 Introduction

1.1.1 The following report was prepared by Peter Ralston, Principal consultant of Chalker Risk Management for East Ayrshire Council.

1.1.2 The on-site portion of the project was conducted between the 19th and 21st of April 2010.

1.1.3 The aim of the project was to analyse the progress of East Ayrshire Council against the health and safety plan that had been developed following last year's major health and safety review and critical friend analysis. In order to achieve this several objectives were set:

- Measurement of performance against stated objective
- Recognition of areas of success
- Indicate areas of deviation or slow progress against the improvement plan
- Suggestions to remedy its issues were found
- General commentary on overall success against plan

1.1.4 Evidence was gathered for this project through documentary examination, observation and personal interview. This is standard methodology utilised by regulators, for example the HSE, to ensure a full picture is developed throughout the review.

1.1.5 Therefore the following is the author's opinion taken from the evidence during the collection phase of this report and it is accepted that certain elements contained within will be subjective.

1.1.6 The author wishes to thank all those persons who were interviewed and freely gave up their time to assist; in particular the members of the Health and Safety Section and especially the new Health and Safety Manager Ian McArthur and Carol Hamilton for her invaluable assistance.

## 2 Author's Comment

- 2.1.1 There is little doubt, in the author's opinion, that East Ayrshire Council has achieved an enormous amount since the original 2009 review.
- 2.1.2 Many of the issues that were highlighted in the former report have been dealt with and the Health & Safety Improvement Plan approved by Cabinet was almost completed at the time of the follow-up review.
- 2.1.3 Some areas still need improvement, in particular the Control of Contractors, but the drive and focus of the Health & Safety Section and the Senior Management to achieve this is apparent.

## **3 Progress Against Plan**

## **3.1 Health & Safety Training for Staff**

### **3.1.1 Preliminary:**

3.1.2 A vital component of any health and safety management system is the need to have well-trained staff. Because the day-to-day operations of many organisations rely purely upon staff competency, training of employees should be a high prioritisation for any organisation that is seeking to improve its health and safety performance.

3.1.3 Recommendations were made in the 2009 report that included:

- The development of training needs analyses
- The development and deployment of a standard training matrix
- A training course development programme
- And the development of key performance indicators and milestones for the aforementioned courses

- 3.1.4 Evidence has been presented that the recommendations made above have been achieved.
- 3.1.5 For example, a safety-training matrix has been developed, based on job role and health and safety needs. It uses a simple but effective system to highlight mandatory, recommended and optional training the staff:
- 3.1.6 The mandatory elements are those that must be completed before the person can be deemed to be competent to be active within their role;
- 3.1.7 Recommended elements are those that should be achieved as part of an ongoing health and safety competency improvement programme and,
- 3.1.8 Optional elements are those, whilst not vital to the employees' role, nevertheless would enhance health and safety appreciation as part of an organisational move towards improving health and safety culture.
- 3.1.9 Further, specialist training is being provided on a needs basis for example, within The Housing Asset Service , the Trade Unions are assisting Council endeavours by providing CSCS cards (Construction Skills Certification Scheme) for operators and tradesmen.
- 3.1.10 Site Management Safety Training (SMST), a recognised qualification listed under Approved Code of Practice of the Construction (Design and Management) Regulations (CDM) has been rolled out within the Asset Management Service, with the number of employees being placed through the training earlier this year:
- 3.1.11 This training is designed to highlight the project managers, site managers and supervisors understanding of responsibilities and managers accountability which is for site safety, health and welfare, and current health and safety legislation. SMST training will also be rolled out to the Housing Asset Service.
- 3.1.12 The Health and Safety Section have an ongoing rolling programme that will capture other Departments, utilising the same methodology.

3.1.13 Of paramount importance for any training scheme is the need to have recognisable and achievable key performance indicators and milestones. Evidence has been adduced for the new system developed under the auspices of ISO 9001:2009 have been introduced. An extensive set of KPI's have been developed which introduce a number of indicators in relation to training, including the introduction of a training evaluation form (HSWI 04a) that is designed to evaluate the efficacy and relevance of any training course. The HSWI form will also be used for auditing purposes conducted on a random basis to ensure course quality and continuing progress against targets. Further systems are currently in place under the ISO 9001 criteria for ensuring that training is cross-referenced for attendance and organisational development monitoring. The Health & Safety Section have access to these records in order to gain an strategic overview of training needs amongst Services.

3.1.14 Key Performance Indicators for staff health and safety training have been developed, for example, percentage of staff receiving appropriate health and safety training and the number of employees who have completed CSCS card training and percentile pass rate of employees undertaking such training.

### 3.1.15 Recommendations:

3.1.16 All evidence suggests that considerable work has been undertaken by East Ayrshire Council in order to achieve compliance within this area and it is recommended that ongoing audit and monitoring of the Safety Training for Staff criteria should continue with the same degree of focus and energy.

## 3.2 Incident Reporting

### 3.2.1 Preliminary:

3.2.2 One of the major deviations from standard discovered during the 2009 review was a systemic failure for incidents and near misses, some of which were serious in nature, to be fully followed up and appropriate and adequate remedial action taken.

### 3.2.3 Findings:

3.2.4 As a result of this, improvement has been made to the incident investigation and action procedures. New work instructions have been put into place (HS WI01 and 02) that map out the process that should be followed post - incident and following the receipt of the INCVIO forms.

3.2.5 Performance indicators have also been designed to help Senior Management audit and monitor the system.

3.2.6 The New Work Instructions HSWI 01 & 02 are cross referenced with Corporate Standards via the Master Safety File, In Particular, Standard Letter B1 -- Incident and Near Miss Reporting; Standard B 19 -- Personal Safety & Standard B 20 -- Health and Safety Reports.

3.2.7 It should be noted, however, that the KPI's recommended in the 2009 report have not as yet been formally introduced, although upon investigation, it appears that the performance indicators could be placed (EPMS) system within a relatively short period.

3.2.8 It is unclear whether recommendations for intermediate containment measures (ICM) and permanent corrective measures (PCM) have been adopted, as evidence could not be easily located to suggest who is responsible for determining ICM and PCM efficacy and appropriateness, and how and under what system of monitoring ICM's should be allowed to continue and at what level of risk to the organisation. This is of relevance because in the evidence presented it appears that ICM and PCM are regarded as potential KPI's.

3.2.9 Overall, it is clear that there has been improvement within the Incident Investigation System and that an accelerated continuation of this process should be encouraged.

### 3.2.10 Recommendations:

3.2.11 It is therefore recommended that:

3.2.12 KPI's should be introduced into the (EPMS) system to allow Senior Management the ability to monitor incidents and near misses within their department. (See comments in Section 5.1 Information for Senior Mangers)

3.2.13 A memo seen within the evidence file seems to suggest (dated 9th of March 2010) that these systems have not been fully integrated into the organisation as yet; it states “.. *a number of incidents have occurred recently that have not been reported to the Health and Safety Manager and which would have allowed the immediate statutory reporting to the Enforcing Authority or urgent investigation by the Health and Safety Team, as appropriate...*”

3.2.14 In order to deal with any ongoing reporting failure, the Health and Safety Section should conduct frequent random audits on departments to ensure reporting compliance. This should continue until the Health and Safety Manager is satisfied that incident and near miss recording is embedded into organisational culture.

3.2.15 ICM's and PCM's, if introduced, should be considered within the incident investigation procedure and recorded appropriately:

3.2.16 This recording of ICM's and PCM's should, in the author's opinion, be a Key Performance Indicator for East Ayrshire Council and the current system, including responsibility for their extent and duration, should be amended to reflect this. This could be achieved by a simple adaptation of the ACC2 to formalise the ability to record and track this information.

3.2.17 The monthly report regarding analysis of incidents written by the Health and Safety Manager should be introduced as soon as possible, as it is the author's understanding that the EPMS system, although capable of task management and statistical report, cannot be adapted to include such analysis. The format presented within the evidence file appears to be functional and adequate, removing the "data-fog" from previous reports.

## 3.3 Working at heights

### 3.3.1 Preliminary

3.3.2 Working at heights is a subject that has resonance in East Ayrshire Council due to last year's fatal accident to an employee. During last year's review, it was apparent that working at height had a high degree of awareness amongst employees, and recommendations were made to ensure that this awareness was kept in focus.

3.3.3 Recommendations were made therefore to ensure the random inspections by both management and the Health and Safety Section continue to be undertaken.

### 3.3.4 Findings

3.3.5 Evidence was produced that suggested that these were occurring on a monthly basis by Senior Management and that the Health and Safety Section were conducting them on a daily basis through inspection/monitoring checklists. The Health and Safety Manager has also produced a checklist template that can be used to easily assess correct working procedures.

3.3.6 Once again, Key Performance Indicators have been proposed that will allow Senior Management to conduct monitoring activities upon their Departments; these will include:

- Number of working at height checklists completed
- Percentage of full compliance
- Percentage of issues identified

- 3.3.7 It is the author's understanding, that these KPI's have not as yet, been integrated into the EPMS system and therefore are not as yet accessible; however the Health and Safety Manager is currently collating such evidence for inclusion within monthly management reports.
- 3.3.8 The Communications campaign as recommended in the 2009 report, is currently under development and is awaiting finalisation by the Corporate Communication Team.
- 3.3.9 During field visits conducted by this report's author it became clear, upon talking to tradespersons that working at height was still subject that was high in focus and there was an acceptance of the need of safe working practices when conducting such operations. In conjunction with this, systems of safe work are now readily available through the Safe Operations Procedures Handbook & Risk Assessment Procedures that have either been given out to employees, or have been digitised and placed on PDAs.
- 3.3.10 Evidence was also given by some of the people interviewed in the field that supervisors and managers had been conducting toolbox talks to reinforce safe systems of work. In particular, this acceptance by operational management of their role and responsibility within the promotion of safety culture is extremely encouraging and should be recognised.

### 3.3.11 Recommendations

- 3.3.12 Continue with random inspections for both employees and contractors.
- 3.3.13 Roll-out the Communication campaign as appropriate.

## **3.4 Occupational Stress**

### **3.4.1 Preliminary**

3.4.2 Stress was identified as being an issue for East Ayrshire Council, although the evidence collated in 2009 suggested that the majority of employee absence allegedly caused by stress was not occupational in nature.

### **3.4.3 Findings**

3.4.4 Evidence has been produced that suggests that occupational stress is actively monitored throughout the organisation.

3.4.5 A revised version from the master safety file Standard B 25-Managing Stress in the Workplace has recently been issued together with several appendices that further clarify issues surrounding the subject.

3.4.6 The Council is continuing to use the HSE stress indicator tool as a proactive monitoring tool for the semi-quantification assessment of stress potential within Departments.

3.4.7 Line management are given the ability to make reasonable adjustments for those employees claiming to suffer from stress, whether domestic or occupational, and as such the system provides managerial oversight at an operational level.

3.4.8 The Absence Monitoring Group are given a remit to meet on a monthly basis and stress is a standing agenda item under statistics report to the corporate management team.

3.4.9 Further, analysis is available from the Employee Counselling Service to a highly detailed level.

### 3.4.10 Recommendations

3.4.11 A recent report from the European Safety Agency suggests that across Europe the second biggest cause of work absence is due to occupational stress. It is therefore highly likely that the HSE are likely to view this as a priority topic 2010. It is also reasonably foreseeable that a European Directive may be forthcoming on stress management. East Ayrshire Council are currently pursuing a sensible and reasonably practicable approach to dealing with occupational stress management within the organisation, and is recommended that this good practice continues.

## **3.5 Control of Contractors**

### **3.5.1 Preliminary**

3.5.2 Control of contractors presents a problem for many organisations, naturally the larger the organisation and more contractors employed the greater potential for exposure to risk. In the 2009 review, weaknesses were identified within the control of contract procedure used within the Council. Since then, significant work has been undertaken to ensure the development of a robust system that will enhance operational and administrative control over contractors.

### **3.5.3 Findings**

3.5.4 Due to a legacy arrangement between the Ayrshire Councils, contractors had previously been chosen from the all Ayrshire approved contractor list. It is the author's understanding that East Ayrshire Council has now left this system and will be proceeding with their own control of contractor system that enhances fiscal, administrative and operational control.

3.5.5 From 30<sup>th</sup> September 2010, the earliest date possible for reintroduction of the new system health and safety vetting of contractors will be carried out through the Contractors Health and Safety Scheme (CHAS) and Safety Schemes in Procurement (SSIP) both government recognised schemes and endorsed by the Health and Safety Executive.

3.5.6 As such, all contractors will be expected to register on the above schemes in order to work at East Ayrshire Council.

3.5.7 A letter has been drafted to be sent out to the all Ayrshire approved list of contractors, advising them that from 30<sup>th</sup> of September 2010, the All Ayrshire list will cease to function and that the CHAS scheme will be put into effect.

3.5.8 Evidence has been seen of a new control of contractors' health and safety performance standard that has been drafted by the Corporate Safety Section. It is designed for distribution to all Council employees who may hire or commission contractors and sets out standards and expectations for the employment of contractors by the Council.

3.5.9 The health and safety section have also produced a comprehensive audit pro forma for contractor assessment, and both the Health and Safety Advisers and Coordinators are involved in a random sampling using this audit methodology. In order to assist this, the Health and Safety Section is now provided with a list of all ongoing work conducted by either Council trades persons or contractors, enabling the health and safety manager and advisers to better plan a monitoring cycle.

### 3.5.10 Recommendations

3.5.11 As with any new system, it is likely that the new control of contractor system will take some time to bed in, however on the evidence seen, if the system is implemented in the way it is designed, the Council should gain considerably enhanced control over contractor risk.

## **3.6 Vehicle Control**

### **3.6.1 Preliminary**

3.6.2 Vehicle control within East Ayrshire Council, in terms of suitability of vehicle and monitoring of employee competence to drive said vehicles, was a generally to a high standard.

### **3.6.3 Findings**

3.6.4 The Master Safety File Standard B 21-management of road risk has recently been revised and will be issued forthwith. Vehicle log's are currently in use are all Council vehicles and are subject to audit. It is noted that although time the drivers during any particular day is not noted, this may be inferred from the odometer readings; it was not however, possible from the evidence adduced, to discover whether the driver's logs collated were applicable to all Council vehicles including privately owned vehicles driven on Council business.

### **3.6.5 Recommendations**

3.6.6 In the author's opinion, it would not be unreasonable, for the current system to be extended at least on a temporary basis to such privately owned vehicles, as it is foreseeable that for example, community nurses or social workers may also drive a considerable distance during the course of the working day. The system could then be discontinued, if it is found that their days do not include excessive amounts of driving, but at the moment there is little empirical evidence to give a conclusive opinion one way or the other.

## **4 Section: Sectional & Team Changes**

## 4.1 Preface

4.1.1 During the 2009 review several challenges were noted for both the Organisation as a whole and for the Health & Safety Section specifically. The 2010 follow on review specifically targeted these areas to check for improvement. This was done through interview with members of the Health & Safety Section and several Senior Managers from the Council & examination of available documentary evidence.

## **5 Sectional Changes**

### **5.1 Information for Senior Managers**

- 5.1.1 One area of concern during the 2009 Review was the lack of functional health & safety feedback information for Senior Managers within the Council.
- 5.1.2 Evidence was seen during the 2010 review of a number of Key Performance Indicators (KPIs) that have been designed to monitor H&S progress by the various Services and Departments (see heading 3.2 above)
- 5.1.3 It is the author's understanding that these KPIs have the facility to be incorporated into the electronic information system and as such, can relay a real-time display of information.
- 5.1.4 Although the KPIs are not yet active, evidence has been presented that these can be brought into commission within 3-5 days of approval.
- 5.1.5 Evidence has also been seen that proposes a new paper report system for management committees. This concentrates only on salient H&S information and greatly simplifies areas on which strategic H&S management is needed.
- 5.1.6 It is recommended that both the electronic information and the paper report system be implemented as soon as possible.

## 5.2 Standard Operating Procedures

- 5.2.1 During the 2009 review it became clear that Operational Management had misunderstood the application and function of the Master Safety Files.
- 5.2.2 Essentially, the Master Safety Files are designed as overall corporate standards that provide templates and frameworks from which an individual Service or Department can then go on to develop their own bespoke systems and procedures while remaining within an overall system boundary.
- 5.2.3 Standard Operating Procedures (SOP) differ from risk assessments and the information contained within the Master Safety File in that they are designed to give information in a targeted and direct format that is easily digested by operatives.
- 5.2.4 Evidence has been produced that suggests that this process is being carried out in relevant Services. Known as Risk Assessment Protocols (RAP) these can be found in either booklet or electronic format and have been handed out to all relevant personnel.
- 5.2.5 The process has included identifying relevant topics from formal risk assessments and then distilling basic working procedures down into a checklist format. The idea behind these systems is to give a ready and easily accessible compendium of concise information to any tradesperson carrying out a particular process identified within current risk assessments; it highlights both the positive, in other words what which needs to be done during the particular task, and also highlights both unsafe acts and behaviours that should not, under any circumstances be done.

5.2.6 It is the author's understanding, that these systems are also being rolled out onto the PDA system that is currently in use among some Services, giving a handy electronic format which operatives can carry with them at all times.

5.2.7 Naturally, the Risk Assessment Protocols should be reviewed on a periodic basis for accuracy, relevance and legibility.

### **5.3 Point of Work Risk Assessments**

- 5.3.1 During the 2009 review, a gap within East Ayrshire Council risk assessment methodology and working practices was identified. It was suggested in order to remove this gap that point of work risk assessments (POWRA) were introduced into those departments, in particular Building and Works, now the Housing Asset Service.
- 5.3.2 Following this advice, where there is no Risk Assessment Protocol, a POWRA will be used to allow operatives to calculate risk and take action based on a calculation.
- 5.3.3 Evidence has been produced a template form suitable for the task, and it is the author's understanding that these can either be in paper or electronic form for those operatives who carry PDAs.
- 5.3.4 Training will be available via a traditional toolbox talk methodology given by Supervisors.

## 6 Team Issues

6.1.1 During the 2009 review it became clear during the Critical Friend Analysis (CFA) that the Health and Safety Section was in need of revitalisation and reorganisation. One issue of particular note was the lack of esprit de corps amongst members of the Section.

6.1.2 Several recommendations were made in order to facilitate this:

- The placement of all Health and Safety Section staff into one building
- A consistent management regime of consultation meetings should be established in the Health and Safety Section
- A team-building exercises should be carried out
- Job rotation for H&S personnel
- Parity of job function amongst H&S Advisors
- Enhanced front-line role for H&S Coordinators
- Enhanced enforcement & audit powers
- Placement of H&S Section under Deputy Chief Executive
- Increased Administrative provision for H&S Section

### 6.1.3 Response

- 6.1.4 All Health and Safety Team members have now been relocated to Holmquarry House, Kilmarnock. Weekly meetings of the full team now occur every Monday morning: operational meetings on a weekly basis between the Health and Safety Manager and the Health and Safety Advisers are also now scheduled on a regular basis. The introduction of electronic diaries and Blackberry mobile phones has allowed the Health and Safety Manager to better plan and deploy the current team.
- 6.1.5 Interviews with health and safety staff have confirmed that the Health and Safety Coordinator role has had a change of focus, moving towards a more “frontline” role; in practical terms, this means a higher volume of operational visits and audits and a greater visibility amongst both Council staff and third party contractors.
- 6.1.6 The Corporate Health and Safety Adviser’s job description has been clarified and there has been some readjustment to make it a more management-focused role. By doing so, parity has been brought into the Health and Safety Section in that the Advisers are now replicating each other’s functions. This continuing replication is now an issue for the Health and Safety Manager.
- 6.1.7 Enhanced enforcement powers have been issued to the Health and Safety Section through the reintroduction of the Notification of Unsafe And Unhealthy Working Conditions Notice (NUC 4). On the evidence produced, it appears that both the NUC and the current Immediate Action Notice are key performance indicators for contractor control
- 6.1.8 Job rotation has been introduced into the Health and Safety team and will continue on a periodic basis, ensuring that the Health and Safety Professionals within the Section will continue to have fresh challenging experiences & perspectives and enable them to provide value to the organisation.

6.1.9 During the course of the 2010 review several members of the Health and Safety Section were interviewed and asked to freely give their opinions of the changes that have occurred. Overall, the responses were good although it was clear that some individuals have adapted better than others. There was a feeling that work balance within the team was not currently evenly distributed and this has been raised to the Health and Safety Manager by the author as part of the preliminary findings.

6.1.10 There can be little doubt that the introduction of the new Health and Safety Manager has had a direct and positive effect on the way the Health and Safety Section is managed and while perhaps not agreeing with every decision made, the overall feeling is of those interviewed that there is a greater degree of focus and purpose within the Section.

## **7 Organisational Recommendations**

### **7.1 H&S Section remains reporting to the Depute Chief Executive**

- 7.1.1 It is recommended that the H&S Section continue to sit within the remit of the Depute Chief Executive for the foreseeable future.
- 7.1.2 The benefits of this are two-fold:
- 7.1.3 During the cultural shift in health & safety that is currently underway within the Council, it is imperative for the Health & Safety Section to have access to the highest management levels in order to provide timely guidance and response to issues as they arise.
- 7.1.4 Secondly, the effect on the Council of having the Senior Management's 'ear' should not be underestimated. It highlights the determination of the Senior Management to drive through cultural change and will help both Management & Staff realise the importance that the Council is placing on good health & safety performance.

### **7.2 H&S Manager to produce a 3 Year Road Map**

- 7.2.1 It is recommended that the Health & Safety Manager is tasked to produce an extensive three-year road map for improving H&S within East Ayrshire Council.
- 7.2.2 It should detail the route of where and how the health & safety culture of the Council should be affected and placed.
- 7.2.3 It should highlight milestones of achievement that should be expected and should seek to tackle large-scale safety topics on a progression basis.
- 7.2.4 This road-map should give the vision and direction of what could be achieved by the Council given both focus and resources.

Peter Ralston 2010

**East Ayrshire Council  
Health and Safety Improvement Plan**

**The improvement Plan reflects recommendations made by Peter Ralston in his report on the Councils Health and Safety Arrangements follow up 2010**

No	Section	Recommendation/Action	Lead Officer	Progress
1	Safety Training for Staff	Ongoing audit and monitoring of the Safety Training for Staff criteria should continue with the same degree of focus and energy.	Health & Safety Manager	<p><b>Achieved:</b> The report notes that considerable work has been undertaken by the Council in order to achieve compliance in this area, with evidence showing that all recommendations within the original report, in relation to Safety Training for Staff, have been implemented.</p> <p>The Health &amp; Safety section is now monitoring percentage completion and reporting on a monthly basis to the Head of Service and Executive Directors.</p>
2	Incident Reporting	KPI's should be introduced into the Electronic Performance Management System to allow Senior Management the ability to monitor incidents and near misses within their own department.	Health & Safety Manager	<p><b>Partly Achieved.</b> The introduction of the dedicated Health and Safety electronic management reporting system in April 2011 will allow interface with the EPMS and will allow managers to monitor performance for their own sections on a routine basis.</p>

**East Ayrshire Council  
Health and Safety Improvement Plan**

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No	Section	Recommendation/Action	Lead Officer	Progress
3	Incident Reporting	The Health and Safety section should conduct frequent random audits on departments to ensure reporting compliance. This should continue until the Health and Safety Manager is satisfied that incident and near miss recording is embedded into organisational culture.	Health & Safety Manager	<b>Partly Achieved:</b> This is in operation and the H&S Manager reports non compliance to Executive Directors. In addition Executive Directors are monitoring accident and incident reports. Between July and September 2010, 156 unannounced visits were undertaken by the health and safety section, and these are continuing to take place on a routine basis.
4	Incident Reporting	Intermediate Containment Measures (ICM) and Permanent Corrective Measures (PCM), if introduced, should be considered within the incident investigation procedure and recorded appropriately.	Health & Safety Manager	<b>Achieved:</b> Non compliance is reported to Executive Directors, and incidents are reviewed and investigated, where appropriate. Serious or significant incidents will generate local investigations by Service Management and the Health and Safety section.
5	Incident Reporting	The recording of ICM's and PCM's should be a KPI for the Council and the current system, including responsibility for their extent and duration, should be amended to reflect this. This could be achieved by a simple adaptation of the ACC2 to formalise the ability to record and track this information.	Health & Safety Manager	<b>Partly Achieved</b> To further enhance the current manual system, the new electronic reporting system has an action tracking system included which will include escalation when actions have not been completed. The system will send e- mails to Heads of Service or Executive Directors informing them of outstanding actions.

**East Ayrshire Council  
Health and Safety Improvement Plan**

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No	Section	Recommendation/Action	Lead Officer	Progress
6	Incident Reporting	The monthly report regarding analysis of incidents, written by the Health and Safety Manager, should be introduced as soon as possible.	Health & Safety Manager	<b>Achieved:</b> These reports are provided to Head of Service Meetings and DMT meetings for action and discussions. In addition, number of incidents by category is included within the Quarterly reports to Cabinet.
7	Working at Heights	Continue with random inspections for both employees and contractors.	Health & Safety Team	<b>Achieved:</b> These are carried out by all members of the Health & Safety team whilst visiting sites where work at height is carried out.
8	Working at Heights	Roll out the communication campaign as appropriate.	Health & Safety Manager And Comms Manager	<b>Partly Achieved</b> The follow up report notes that the communications campaign is under development. Targeted work has been undertaken within Housing Asset Services and the Asset Improvement Service, although the general campaign still requires to be rolled out. The campaign will form one of a number of health and safety issues to be picked up in the next edition of ewords. The Quarter 2 report on Health and Safety Performance details a number of campaigns to be taken forward in the year ahead and future arrangements will also take account of HSE campaigns.

**East Ayrshire Council  
Health and Safety Improvement Plan**

**The improvement Plan reflects recommendations made by Peter Ralston in his report on the Councils Health and Safety Arrangements follow up 2010**

No	Section	Recommendation/Action	Lead Officer	Progress
9	Occupational Stress	A recent report from the European Safety Agency suggests that across Europe the second biggest cause of work absence is due to occupational stress. It is therefore highly likely that the HSE are likely to view this as a priority topic in 2010-2011. It is also reasonably foreseeable that a European Directive may be forthcoming on stress management. East Ayrshire Council is currently pursuing a sensible and reasonably practicable approach to dealing with occupational stress management within the organisation, and it is recommended that this good practice continues.	Health & Safety Manager	<p><b>Achieved and Ongoing.</b> Occupational Stress is actively monitored throughout the organisation. The Council is continuing to use the HSE stress indicator tool within services and we continue to carry out Stress Audits.</p> <p>The approach taken by the Council has been enhanced to include reviews of individual incidences of stress absence at Executive Director level and to ensure that employees receive appropriate support and that suitable arrangements are put in place, including ensuring that a plan is in place for every employee to return to work and that further intervention is identified where appropriate.</p> <p>Further information is provided in the Quarter 2 Health and Safety performance report.</p>

**East Ayrshire Council  
Health and Safety Improvement Plan**

**The improvement Plan reflects recommendations made by Peter Ralston in his report on the Councils Health and Safety Arrangements follow up 2010**

No	Section	Recommendation/Action	Lead Officer	Progress
10	Vehicle Control	The current system should be extended, at least on a temporary basis, to privately owned vehicles, as it is foreseeable that for example, community nurses or social workers may also drive a considerable distance during the course of the working day. The system could then be discontinued if it is found that their days do not include excessive amounts of driving. At the moment, there is little empirical evidence to give a conclusive opinion one way or the other.	All Managers	<b>Partly Achieved</b> Vehicle logs are currently in use for all Council vehicles and are subject to audit. Monitoring of personal owned vehicles driving time is by individual mileage claims, which details the number of miles being covered during the course of the working day, which managers then review.
11	Information for Senior Managers	It is recommended that the electronic information and paper reporting systems are implemented as soon as possible.	Health & Safety Manager	<b>Partly Achieved</b> A new electronic information reporting system will come into effect April 2011.
12	Organisational Arrangements	It is recommended that the H&S Section continue to sit within the remit of the Depute Chief Executive for the foreseeable future.	DCE/EDNS	<b>Achieved.</b>
13	Organisational Arrangements	It is recommended that the Health and Safety Manager is tasked to produce an extensive three-year road map for improving Health and Safety within East Ayrshire Council. It should detail the route of where and how the health and safety culture of the Council should be affected and placed. It should highlight milestones of achievement that should be expected and should seek to tackle large scale safety topics on a progression basis. The road map should give the vision and direction of what could be achieved by the Council given both focus and resources.	Health and Safety Manager	<b>Partly Achieved.</b> This is work in progress and will be submitted to Cabinet for consideration in March 2011, together with the Council's revised Health and Safety Policy.

## EAST AYRSHIRE COUNCIL

## HEALTH AND SAFETY IMPROVEMENT PLAN

The improvement plan reflects recommendations made by Peter Ralston in his report on the Council's Health and Safety arrangements.

No	Section	Recommendation/Action	Lead Officer	Priority – Timescale (A= Highest – D = Lowest)	Progress / Target date
<b>SECTION 1 – COMPLIANCE REVIEW</b>					
<b>INCIDENT INVESTIGATION AND PROCEDURE</b>					
2.5	<b>Section 1 Compliance Review - Incident Investigation and Procedure</b>	Senior management to consider implementing the meeting of SMART targets as a departmental measurable.	Executive Directors	C	<b>Partly Achieved</b> – An extensive set of KPIs has been developed which includes a number of indicators for senior management in relation to incidents and incident investigation. This will be fully implemented with the introduction of the H&S electronic reporting and management system(SHE) April 2011.
2.7	<b>Section 1 Compliance Review - Incident Investigation and Procedure</b>	Sectional KPI's should be agreed and should be reported through the Council's Electronic Performance Management System.	H&S Manager	D	<b>Partly Achieved</b> – An extensive set of KPIs has been developed which includes a number of indicators for senior management in relation to incidents and incident investigation. This will be fully implemented with the introduction of the H&S electronic reporting and management system(SHE) April 2011.

No	Section	Recommendation/Action	Lead Officer	Priority – Timescale (A= Highest – D = Lowest)	Progress / Target date
<b>CONTROL OF CONTRACTORS</b>					
5.1	<b>Section 1 Compliance Review - Control of Contractors</b>	The H&S Section to develop a system for contractor management, including; official forms; perimetary requirements as needed; audit actions for deviation including tolerance levels and process flow for issuing of enforcement actions.	H&S Manager	A	<p><b>Achieved</b> – Cabinet has approved the replacement of the 3 Ayrshire contractors list. The Council ceased to use the approved list with effect from 30<sup>th</sup> September 2010. Health and Safety vetting will be carried out through The Contractors Health and Safety Scheme (CHAS) and Safety Schemes in Procurement (SSIP). This procedure is now in operation.</p> <p>In addition, a new Control of Contractors Procedure has been written for the Council's Master Safety File. This was reviewed by Peter Ralston during his follow up visit and his report states that if the system is implemented in the way it is designed, the Council should gain considerably enhanced control over contractor risk.</p>
5.2	<b>Section 1 Compliance Review - Control of Contractors</b>	An inclusion of Control of Contractors system in the Master Safety File (MSF).	H&S Manager	A	<b>Achieved</b> – A new Control of Contractors Procedure has been written for the Council's Master Safety File.
5.6	<b>Section 1 Compliance Review - Control of Contractors</b>	H&S Manager to devise an internal H&S Section system & guidelines for the issuing of enhanced enforcement actions.	H&S Manager	B	<b>Achieved</b> - Refer to Item 5.1

No	Section	Recommendation/Action	Lead Officer	Priority – Timescale (A= Highest – D = Lowest)	Progress / Target date
5.7	<b>Section 1 Compliance Review - Control of Contractors</b>	H&S Manager to devise measurables for contractor compliance, coordinator inspections and issuing of enforcement notices.	H&S Manager	B	<b>Achieved</b> - Refer to Item 5.1
5.9	<b>Section 1 Compliance Review - Control of Contractors</b>	Process maps to be devised for choosing, maintaining and dismissing contractors.	H&S Manager	C	<b>Achieved</b> - Refer to Item 5.1
<b>VEHICLE CONTROL &amp; MOVEMENT</b>					
6.1	<b>Section 1 Compliance Review - Vehicle Control &amp; Movement</b>	The Council should review the provision of in house driver training to identify any gaps and implement appropriate actions to address those gaps.	H&S Advisors along with relevant Service managers	C	<b>Partly Achieved</b> – The Council's vehicle policy has been reviewed, and a final draft completed, and this is now subject to consultation with Trade Unions prior to submission to Cabinet.
<b>SECTION 2 – CRITICAL FRIEND ANALYSIS</b>					
<b>SENIOR MANAGEMENT INFORMATION</b>					
1.1	<b>Section 2 Critical Friend Analysis - Senior Management Information</b>	Safety Manager to establish a set of measurable achievements and outcomes for all departments.	H&S Manager	A	<b>Partly Achieved</b> - Current statistical provision has been reviewed with a view to refining data collection, collation and analysis. Tolerance levels and targets are now being set and all indicators will be reported through the Electronic Performance Management System This will be fully implemented with the introduction of the H&S electronic reporting and management system(SHE) April 2011

No	Section	Recommendation/Action	Lead Officer	Priority – Timescale (A= Highest – D = Lowest)	Progress / Target date
1.2	<b>Section 2 Critical Friend Analysis - Senior Management Information</b>	In conjunction with 1.1 above, H&S measurables should contain both proactive and reactive indicators to develop an holistic view of Council H&S performance.	H&S Manager	A	<b>Partly Achieved</b> - Current statistical provision has been reviewed with a view to refining data collection, collation and analysis. Tolerance levels and targets are now being set. This includes both proactive and reactive measurables. This will be fully implemented with the introduction of the H&S electronic reporting and management system (SHE) April 2011.
1.3	<b>Section 2 Critical Friend Analysis - Senior Management Information</b>	H&S Section to develop user friendly visual indicators for 1.2 above, suitable for interpretation by non-H&S professionals.	H&S Manager	B	<b>Partly Achieved</b> - Current statistical provision has been reviewed with a view to refining data collection, collation and analysis. Indicators reported will be included within the Electronic Performance Management Scorecards for the Chief Executive/Executive Directors/Heads of Service and Senior Managers. This will be fully implemented with the introduction of the H&S electronic reporting and management system (SHE) April 2011.
1.4	<b>Section 2 Critical Friend Analysis - Senior Management Information</b>	Some thought should be given to developing a cost analysis system for incidents and near-misses across the Council.	H&S Manager	C	This was discussed with Peter Ralston and it was agreed that it was not appropriate at this time. Health & Safety Manager to develop such a system when appropriate, this will be included within the 3 year road map.

No	Section	Recommendation/Action	Lead Officer	Priority – Timescale (A= Highest – D = Lowest)	Progress / Target date
<b>GENERAL RECOMMENDATIONS – HEALTH AND SAFETY SECTION</b>					
<b>TEAM BUILDING</b>					
4.1.4	<b>Section 2 Critical Friend Analysis - Team Building</b>	Team building exercise including role clarification to be carried out.	H&S Manager OD Manager	A	While proposals for a team building exercise are under development, implementation has been deferred pending the filling of the Health and Safety structure.
<b>JOB ROTATION</b>					
4.2.1	<b>Section 2 Critical Friend Analysis - Job Rotation</b>	Health & Safety Section team members, in particular the Co-ordinators, should be rotated into various areas of the Council on a 2-3 yearly basis.	H&S Manager in conjunction with Departmental Learning & Development Officer	C	<b>Achieved</b> - this has started with the rotation of 2 health and safety co-ordinators and 1 adviser. Further rotation of team members will be carried out during 2010/2011.
<b>HEALTH &amp; SAFETY ADVISORS</b>					
4.3.1	<b>Section 2 Critical Friend Analysis - Health &amp; Safety Advisors</b>	Advisors to develop a system for presenting to H&S Manager project milestones, resource expectations and timescales.	H&S Advisors	B	Discussed with Peter Ralston during his visit week commencing 19 April 2010 and will be held pending until the health and safety structure is filled. This is being considered alongside the development of the 3 year road map which will highlight milestones of achievement that should be expected and will seek to tackle large scale safety topics on a progression basis.

No	Section	Recommendation/Action	Lead Officer	Priority – Timescale (A= Highest – D = Lowest)	Progress / Target date
<b>FURTHER RECOMMENDATIONS</b>					
5.3 (a)	<b>Section 2 Critical Friend Analysis - Further Recommendations</b>	Consideration should be given to the appointment of two additional Health and Safety Coordinators to ensure the workload of the section is achieved and that service to the Council is delivered at a premier level.	Depute Chief Executive/Executive Director of Corporate Support	-	<b>Achieved-</b> Staffing provision has been reviewed and will remain at the current professional level.