

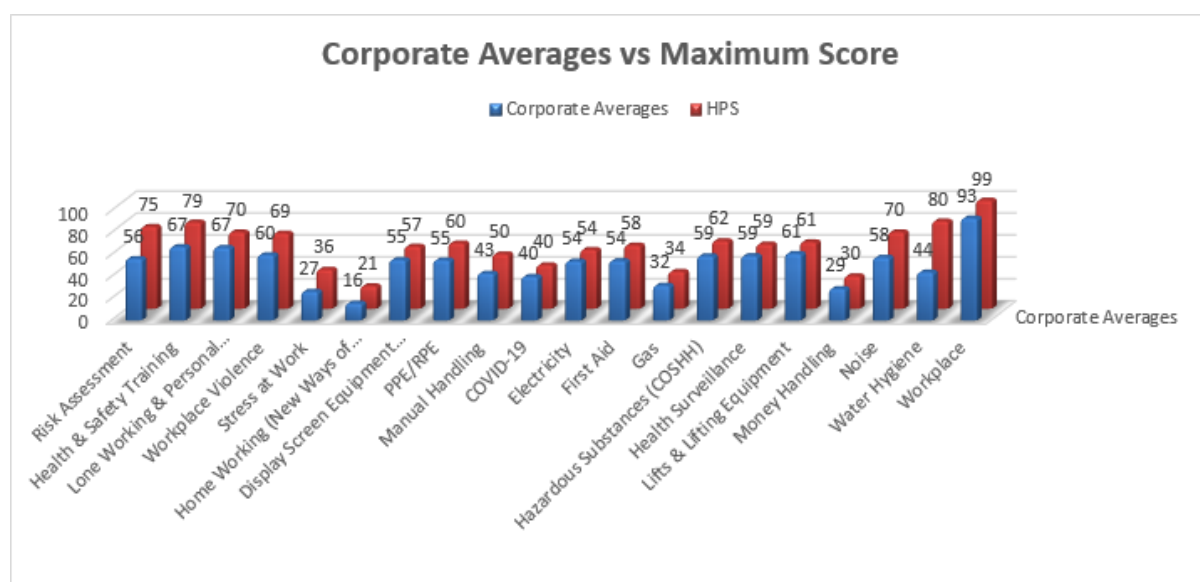
Health and Safety Report and Data

Corporate Audit Program

The recently revised corporate audit program has begun, and the data is beginning to build a picture as to how the council as a whole entity is performing against its own health and safety management standards and policies.

The chart below shows some of the commonly selected RCPIs (Risk Control Performance Indicators). The column in red shows the highest possible audit score relating to that RCPI and the blue column shows the how the whole council is performing against the related management standard.

The results as shown as averages and are based on audits conducted so far in the program, and the complete picture will be presented in an annual performance report at the end of the program.



So far, the audit is showing that there are improvements that can be made to risk assessment and training, and it is recommended that these become areas of focus for the organisation. This is because risk assessment and training are the most common areas that regulators look for and find material breach of in terms of the Health and Safety at Work etc. Act 1974. Risk Assessment and Training are mandatory RCPIs and all services are audited in these two areas.

RAG RATING 100 -85 85 -60 <60	Risk Assessment	Health & Safety Training
Delivery; Comms & Political Governance	87%	94%
Education	64%	87%
Estates & Building Services	80%	68%
Housing	64%	82%
Neighbourhood & Environmental Services	73%	91%

Planning; Development & Transportation	85%	84%
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The authority wide results as a percentage are showing conformance at

- 74% Risk Assessment
- 85% Training
- 75% Stress Management
- 82% Management of Noise
- 55% Water Hygiene
- 86% Manual Handling
- 76% Home Working
- 90% Fire Safety Management (Soft FM)
- 89% Fire Safety Management (Hard FM)
- 94% Work at Height
- 86% Vibration

Water Hygiene currently scores at 55% which is the average score based on the sites audited for this RCPI so far. These are Welford Rd Cemetery and Humberstone Heights Golf Club. It is expected that as more sites are audited this score should improve.

Each service audited is provided with a recommendation report post examination, which will provide advice on how to improve.

The audit this year should be viewed as a baseline assessment from which the council can implement targeted, and data driven strategies as part of its commitment to continuous improvement.

More detailed division level and service level dashboards can be presented at SMT or DMT level and will be shared at consultative committees, with Authority Wide H&S Consultative Committee being provided the corporate wide overview as per this report.

Accident and Incident Data

The changes made to the Alcumus system which allow for the reporting of non-work related and observed hazards are becoming established and we are seeing more accurate reporting across the divisions.

Managers have been reminded of incidents that need to be reported and also those that do not. There has been a 30% reduction in reports which is an indication that we are beginning to see better quality, actionable data coming through.

Improving the quality of data input allows for better analysis of risks as well as opportunities for improvement and the quality of reactive health and safety performance monitoring.

Near Miss

Near misses are accidents rising in or out of connection to work, without injury. Since the beginning of April, the H&S team are working with managers to ensure incidents that need reporting are reported using the correct classification, and where categorised incorrectly, are reclassified appropriately. This has resulted in a 30% reduction in reports overall.

There were 109 incidents involving employees reported as near misses in Q1 22/23.

39% of reported near misses were categorised as verbal abuse to staff who work with the public.

23% of all verbal abuse near misses were reported in Adult and Children's Social Care. 18% in Children's and 6% in Adults.

10% of verbal abuse cases were reported by Parking Wardens.

87% of all reported verbal abuse cases occurred in person and 13% over the telephone.

This highlights the need to continue or refresh personal safety and conflict resolution training, as statistics show the majority of physical assaults result from a series of escalating steps within conflict and verbal abuse being an early warning sign.

Work-Related Ill Health

There were 12 work related ill health reports in the reporting period. Of those 10 were reports of work-related stress. Of the 10 reports 5 involved employees who were under some sort of management investigation before taking a period of absence. 3 reports referenced workload as being the underlying cause.

Injury Incidents

There were 68 injuries to employees reported in Q1 a slight decrease down from 76 in the previous quarter. Top Trends are listed below;

- 12 Manual Handling
- 13 slips, trips, falls
- 10 Attacks by Members of the Public (5 of which were physical assaults)

Analysis of the manual handling reports indicates that the majority of injuries appear to be associated with repetitive motion, leading to muscular strain, rather than injuries relating to the physical lifting of heavy materials. It is important that adequate breaks are taken by employees who undertake repetitive work. This is challenging in work environments where there is no direct supervision but can be addressed by provision of information, training as well as instruction.

There were 3 minor cuts and scratches due to contact with sharp objects, a significant decrease from the same period last year which is continued evidence that the good work undertaken over the last year in the divisions, particularly Housing to address issues with PPE has resulted in a tangible reduction in injury.

There has been a significant increase in anti-social behaviour in the market area over the reporting period. This is affecting teams across the council as well as the market traders themselves. There have been two reports of physical assault to cleaners working in the area. One of which has led to absence for stress.

All assaults are reported to the police and Leicestershire police have requested that data from the Alcumus system is shared with them. This has been actioned upon request by the Markets team.

SO3 – Medium Level Investigations

SO3s are categorised as high level near misses where significant injury or loss event could have occurred should the incident have caused injury, accidents resulting in injury that could lead to a significant insurance claim or a RIDDOR reportable incident. All medium level investigations or SO3s result in a corrective action plan for service managers to work to.

The Health and Safety Team undertook 10 SO3 investigations since April.

All SO3 investigations result in a written report and corrective action plan which the H&S advisor provides to service managers and Heads of Service.

Example SO3 investigations undertaken since April

- **Apprentice cut by a drill operated by another employee in poorly lit area**
- **Chemical burns due to uncontrolled release of a hazardous substance**

- Fall through an inspection chamber
- Service User accessing a roof

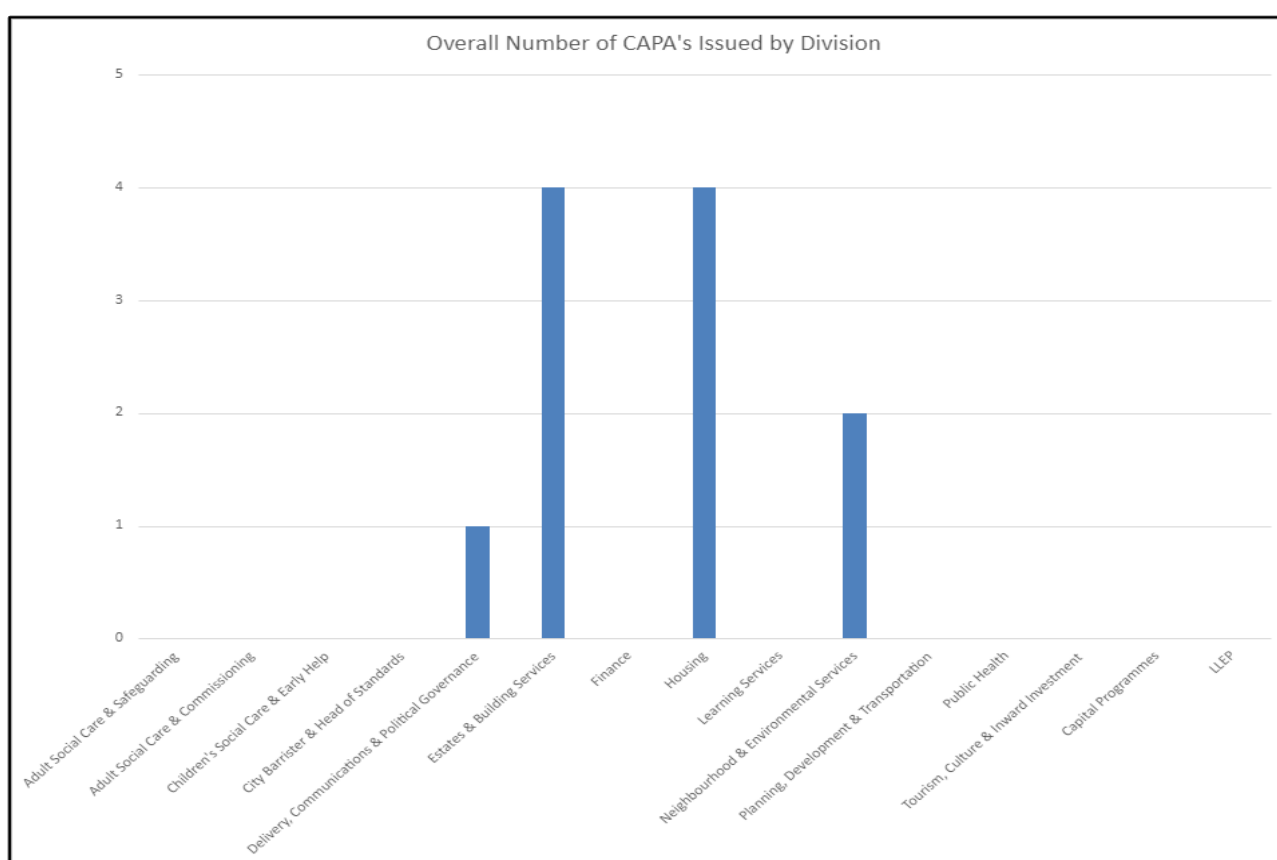
CAPA (Corrective Action /Preventative Action) Notices

A CAPA is issued when a non-compliance or unsafe act or condition has been identified that needs management attention and action outside of the audit or SO3 processes.

Example CAPAs issued in the period.

- Hand dosing of a hazardous substance at a Leisure Centre
- Balustrades and stair rails at a special school
- COSHH assessments at Vehicle Testing Centre and Adequacy of LEVs

There have been 11 CAPA notices issued in total. 5 CAPAs have been issued since April.



Of the 11 CAPAs issued 5 have been closed with all recommended actions completed. 3 are still within the recommended action date. 3 have outstanding actions that have not been completed within the advised timeframe.

- 2 in EBS (Estates and Building Services)
- 1 in N&ES (Neighbourhood & Environmental Services)

It is recommended that these actions are addressed as soon as possible.

Occupational Health Data

Leicester City Council's Absence Dashboard for the period (Sept 21- Sept 22) indicates

- 3678 working days have been lost to Neck & Back Injuries at a cost of £380,563 (not including Occ Health Referrals)
- 7056 to MSDs at a cost of £705,074 (not including Occ Health Referrals)
- 15853 for MHDs at a cost of £1,785,182 (not including Occ Health Referrals)

HML provided their annual figures for referrals at the end of June. In the period June 21 – May 22 there were a total of 592 referrals to Occupational Health.

192 or 39% of all referrals to HML were **mental health** related. Of those referrals 46% were diagnosed as being work related.

- Adult Social Care & Commissioning 54% of their total referrals were for MHDs (Mental Health Disorder)
- Public Health (for which data includes Sports) 50% of referrals were for MHDs.
- Housing 40% of referrals made to Occupational Health were for MHDs.
- Finance 39% of referrals were for MHDs.
- EBS 36% of referrals were for MHDs.
- N&ES 32% of referrals were for MHDs

460 employees were referred to AMICA during the same period.

- Adult Social Care & Commissioning 10% of Amica referrals
- Public Health 19% of Amica referrals
- Housing 8% of Amica referrals
- Finance 13% of Amica referrals
- EBS 6% of Amica referrals

(n.b 11% of employees accessing Amica did not provide their work division)

- 10% of Amica contact was for bereavement
- 25% for Mental Health
- 15% for Family & Relationship Breakdown
- 17% Work Stress

Amica is an employee assistance and counselling service which employees can access voluntarily with encouragement from their manager. Occupational Health requires management referral, predominantly following a period of sickness absence. Management Information supplied suggests that in services for which MHDs are prevalent, staff are not voluntarily accessing preventative, early intervention support services available to them.

It is recommended that leaders examine the barriers to accessing early intervention support in their services, after which a co-ordinated strategy can be devised.

136 or 28% of all referrals to HML were for **Musculoskeletal conditions**. 21% of these referrals were diagnosed as work related.

- Housing 33% of referrals to HML were for MSDs (Musculoskeletal Disorder)
- Public Health 31%
- EBS 28%
- N&ES 26%
- Children's Social Care 23%
- Adult's Social Care & Safeguarding 23%

There were 810 referrals to IPRS the council's procured MIRS (Musculoskeletal Injury Rehabilitation Service) provider in the same period.

- 30% of referrals were for lower back pain
- 20% of referrals were for shoulder pain
- 12% of referrals related to knee pain
- 6% of referrals related to neck pain.

The majority of referrals were for employees in their 50s & 60s. 55% male 45% female respectively.

- Housing 29%
- Public Health 19%
- EBS 14%
- Children's Social Care 10%
- Adult's Social Care & Safeguarding 10%
- N&ES 8%

The comparatively higher usage of the IPRS service is indicative of the fact that pain is physical, and therefore staff are more likely to come forward for referral in this area and seek help, over mental health disorders which can be harder to recognise for individuals and for which there can be perceived stigma attached.

It is noteworthy however, that in a high number of cases, referrals to IPRS are repeat referrals. This can be because the issue persists or reoccurs following discharge (predictable if the causes of the issue are not addressed along with the acute symptoms) or because of a high number of DNAs for appointments following referral. This can affect the integrity of the data and as such the data should be seen as indicative rather than definitive with the likelihood the percentages are in fact lower than stated.

It is recommended that services review their risk assessments to ensure that repetitive and poor ergonomics which could result in muscle pain and strain are considered and that all employees understand the requirements and need to take adequate breaks when performing repetitive tasks to avoid muscle strain. This should include work tasks not traditionally considered to be manual handling related such as DSE work, particularly on mobile or portable devices which can result in the same lack of breaks and poor posture.

Safety Notices

None issued in the reporting period.

Legislative Updates

None in the reporting period

Other Updates

The occupational health service crossed over from HML to Optima Health as of September 1st.

HML will continue to close all cases referred to them prior to August 31st. All new referrals are now being made to Optima Health.

Appendix 4

The EAP service (Amica) and MIRS (IPRS) contracts are under evaluation following a procurement process with the new contracts estimated start date of December 1st.