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For all enquiries relating to this agenda please contact Julie Lloyd
(Tel: 01443 864246 Email: lloydj4@caerphilly.gov.uk)

Date: 8th November 2022

To Whom it May Concern,

A multi-locational meeting of the **Corporate Health and Safety Committee** will be held in Penallta House, and via Microsoft Teams on **Monday, 14th November, 2022 at 10.00 am** to consider the matters contained in the following agenda. Councillors and the public wishing to speak on any item can do so by making a request to the Chair. You are also welcome to use Welsh at the meeting, both these requests require a minimum notice period of 3 working days. A simultaneous translation will be provided on request.

Members of the public or Press may attend in person at Penallta House or may view the meeting live via the following link: <http://civico.net/caerphilly>

This meeting will be live-streamed and a recording made available to view via the Council's website, except for discussions involving confidential or exempt items. Therefore the images/audio of those individuals speaking will be publicly available to all via the Council's website at www.caerphilly.gov.uk

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Chrissy'.

Christina Harrhy
CHIEF EXECUTIVE

AGENDA

- | | Pages |
|-------------------------------------|-------|
| 1 To receive apologies for absence. | |

A greener place Man gwyrdach



Correspondence may be in any language or format | Gallwch ohebu mewn unrhyw iaith neu fformat

2 Declarations of Interest.

Councillors and Officers are reminded of their personal responsibility to declare any personal and/or prejudicial interest(s) in respect of any item of business on this agenda in accordance with the Local Government Act 2000, the Council's Constitution and the Code of Conduct for both Councillors and Officers.

To approve and sign the following minutes:-

- 3 Corporate Health and Safety Committee held on 18th July 2022. 1 - 4

To receive and consider the following report:-

- 4 Health and Safety Action Plan Update. 5 - 18

To discuss the following item raised by the Trade Unions:-

- 5 Purpose/Reference of this Meeting (UNISON).

To receive and consider the following information items*:-

- 6 Annual Care First Report. 19 - 40
- 7 Recent Health and Safety Executive Updates. 41 - 42
- 8 Accident Statistics Report for April - September 2022. 43 - 70

** If a member of the Committee wishes for any of the above information items to be brought forward for discussion at the meeting please contact Julie Lloyd, Tel. 01443 864246 by 10.00 am on Friday 11th November 2022.*

Circulation:

Councillors M.A. Adams, M. Chacon-Dawson, R. Chapman, G. Enright, S. Kent, J. Sadler and W. Williams

Trade Union Representatives.

And Appropriate Officers

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CORPORATE HEALTH AND SAFETY COMMITTEE

MINUTES OF THE REMOTE MEETING HELD VIA MICROSOFT TEAMS ON MONDAY, 18TH JULY 2022 AT 10.00 A.M.

PRESENT:

Councillors: M. A. Adams, M. Chacon-Dawson, R. Chapman, G. Enright, S. Kent, J. Sadler, and W. Williams

Together with:

L. Donovan (Head of People Services), E. Townsend (Health and Safety Manager), A. Wigley (Principal Health and Safety Officer), M. Headington (Green Spaces and Transport Services Manager), A. Evans (Principal Health and Safety Training Officer), J. Ollman (Centre Shift Supervisor), J. Thomas (Committee Services Officer), and J. Lloyd (Committee Services Officer)

Trade Union Representatives: G. Parr (Unite) and J. Garcia (Unison).

RECORDING AND VOTING ARRANGEMENTS

The Chair reminded those present that the meeting was being filmed and would be available following the meeting via the Council's website – [Click Here to View](#). Members were advised that voting on decisions would take place via Microsoft Forms.

Due to technical difficulties this meeting was not live-streamed.

1. TO APPOINT A CHAIR FOR THE ENSUING YEAR

It was moved and seconded that Councillor M. Adams be appointed as Chair of the Corporate Health and Safety Committee and by way of verbal confirmation, this was unanimously agreed.

RESOLVED that Councillor M. Adams be appointed as Chair of the Corporate Health and Safety Committee for the ensuing year.

2. TO APPOINT A VICE CHAIR FOR THE ENSUING YEAR

It was moved and seconded that Councillor S. Kent be appointed as Vice Chair of the Corporate Health and Safety Committee and by way of verbal confirmation, this was unanimously agreed.

RESOLVED that Councillor S. Kent be appointed as Vice Chair of the Corporate Health and Safety Committee for the ensuing year.

3. APOLOGIES FOR ABSENCE

No apologies received.

4. DECLARATIONS OF INTEREST

There were no declarations of interest received at the commencement or during the course of the meeting.

5. MINUTES – 14TH FEBRUARY 2022.

A Member requested that verbal updates at a meeting be kept to a minimum and actual reports would be preferable, going forward. This would allow Members to have notification of the information and be able to review it, prior to the meeting. Members were advised that consideration would be given to this request, for future meetings.

It was moved and seconded that the minutes of the Corporate Health and Safety Committee held on 14th February 2022 be approved as a correct record and by way of verbal communication this was unanimously agreed.

RESOLVED that the minutes of the Corporate Health and Safety Committee held on 14th February 2022 be approved as a correct record.

REPORTS OF OFFICERS

Consideration was given to the following reports.

6. UPDATED VIOLENCE AT WORK POLICY.

The Health and Safety Manager presented the report, which provided the Committee Members with details of proposed minor updates to the Violence at Work Policy and sought approval to implement the revised draft. Members were advised that the Authority has a number of policies in place setting out the Authority's' approach to managing key health and safety risks, and the Violence at Work Policy has been reviewed as part of the rolling programme of policy reviews.

Members were informed that the Violence at Work Policy had been subject to minor wording changes only, and that the policy and corporate management arrangement had been amalgamated into one document for ease of use. Members were also informed that the Employee Protection Register Procedure had been subject to minor wording changes only, and that this was previously a standalone document which has now been included as an appendix to the policy.

Members were advised that they could comment on the report and provide any feedback as necessary, which would be submitted along with the report to a future CMT.

A Member noted a few discrepancies within the policy, and requested that going forward, any adjustments be shown in bold as this would save time for Members trying to note the changes. It was also noted that dates were incorrect in the policy (August 2021 should be

July 2022), incorrect wording in relation to employees (paragraph 2.1), the policy should include the statement that 'this list is not exhaustible' (paragraph 4.2.2), and also noted that the numbering is out between paragraphs 6.3.2 and 6.3.7 and some dates were incorrect, however, wished to note that overall content of the policy was fine.

The Unison Representative commented on the Violence at Work Policy in relation to school staff and requested that additional guidance be included to cover schools, as there had been an increase in the number of incidents involving pupils with teachers and teaching assistants.

Members were advised that the policy would be amended correctly in the future. It was also proposed that where changes are made, going forward, the amended document with track changes visible, could be circulated to Members, prior to the meeting and prior to its inclusion as a final version in the agenda packs. The Health and Safety Manager accepted the discrepancies that had been noted and acknowledged that more allowances would be made for the timescales for future reports.

Members were referred to the consultations with the Union in relation to school staff, and that future meetings were to be held between Health and Safety and the Schools Inclusion Officer.

Members were advised that their comments would be referred to CMT, together with the report, which would then be referred to Cabinet for final approval of the Policy.

Following consideration of the report, the Committee noted the contents.

7. HEALTH AND SAFETY TRAINING UPDATE – PRESENTATION.

The Principal Health and Safety Training Officer gave a presentation to Members on Health and Safety training, which provided Members with information on the types and numbers of different courses available, twenty-eight in total, which included asbestos management, first aid, lone working and premises management, together with ongoing refresher training. Members were advised that training packages can be tailored to specific service areas, and Planning Officers had recently received 'lone working' training that was particularly specific to them.

Members were advised that Health and Safety records are kept, which can be used to support managers and employees. CCBC Health and Safety also deliver training, in relation to asbestos management, to other Local Authorities and partners.

Members were also advised that Corporate Strategies Workforce Development and Wellbeing strategies findings are looked at, to assist in these areas and linking into the Health and Safety Action Plan. Health and Safety look at training needs in response to emergency situations, contraventions, and local training needs analysis.

Members were provided with information on the current focus of Health and Safety, which included CDM (Construction Design Management) training via an external provider, mandatory asbestos training for school Heads and Deputy Heads, First Aid Guidance streamlining and EVAC Chair training for residential care homes, annual asbestos training for Housing, RPE (Respiratory Protective Equipment) scoping exercise with Highways, and the expansion of the 'Manual Handling Train the Trainer' approach to suitable service areas.

Members were given statistical data on the amount of training provided to each service area within the last financial year 2021/22 and informed that training needs analysis guidance would be provided to managers going forward, together with updating the service provision of health and safety training.

A Member wished to note the great quality of the presentation, however referred to the acronyms used throughout and requested the full titles be shown in future presentations and reports. This was noted by the Principal Health and Safety Training Officer. A query was also raised in relation to the training courses and whether 'passing' the course was attained from just attendance only or whether a test/exam was required in order to pass. Members were advised that feedback forms were included for training courses that are not assessed, however, some courses do include a formal exam which is marked by external bodies for an actual qualification. Members were also advised that any issues or concerns are fed back to managers following the Health and Safety training.

The Unison Representative clarified that all information regarding Health and Safety policies and training courses are available on the intranet and queried whether fire safety risk assessments had been conducted for those staff 'home working'. Members were advised that a 'home working risk assessment' is available, together with a 'checklist' for employees. CCBC are not responsible for evaluating homes for those staff who are home working and staff would be responsible for fire safety in their own homes. Employees and Members are advised to contact Health and Safety if they have any concerns.

Following consideration of the presentation, the Committee noted its contents.

8-9. INFORMATION ITEMS

The Committee noted the contents of the following information reports which had not been called forward for discussion at the meeting. Full details were included in the Officer's reports.

1. Recent Health and Safety Executive Updates.
2. Accident Statistics Report for January – March 2022.

Members queried elements of the information reports and some discussion followed in relation to Health and Safety incidents in Wales, Health and Safety responsibilities for any 'self-employed' CCBC staff, and current Health and Safety concerns in relation to working in the hot weather. Members were reminded that if they wished to discuss any information items in the future, they were required to be called forward for discussion at the meeting, prior to the meeting date.

The meeting closed at 11.30 am.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 14th November 2022, they were signed by the Chair.

CHAIR



CORPORATE HEALTH AND SAFETY COMMITTEE – 14TH NOVEMBER 2022

SUBJECT: HEALTH AND SAFETY ACTION PLAN UPDATE

REPORT BY: CORPORATE DIRECTOR FOR EDUCATION AND CORPORATE SERVICES

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to inform the Committee Members on the health and safety action plan (appendix 1) and progress made against key priorities.

2. SUMMARY

- 2.1 The report is provided as information for members of the Committee, to ensure that they are kept informed of any matters that could impact on the management of health and safety within the Council. The action plan for the Health and Safety Division allows resources to be prioritised to areas considered to be an organisational risk.

3. RECOMMENDATIONS

- 3.1 That the Committee note and discuss the contents of the report.

4. REASONS FOR THE RECOMMENDATIONS

- 4.1 To keep the Committee up to date with regard to the priorities and workload of the health and safety team.

5. THE REPORT

- 5.1 The Health and Safety Action Plan 2022/2024 (appendix 1) establishes key high level organisational priorities which form the workload of the team for this period. The action plan does not identify all organisational risks or workstreams but sets out the main strands requiring resource and progress. These priorities are based on legislative requirements, accidents/incidents and gap analysis that identifies areas where work is needed with regard to organisational risk. Some issues are ongoing workstreams from the 2019/2021 action plan where work has commenced however is ongoing. Health and Safety is a reactive service therefore accident/incidents/claims may impact on improvement targets as resources are frequently required to be reprioritised resulting in some priorities being carried forward.

5.1.2 The Health and Safety Action Plan 2022/2024 set out priorities and workload for the team in addition to day-to-day tasks such as:

- Accident investigation, reporting and entry onto the RAMIS database.
- Supporting Risk Management in collating information to defend claims.
- Day to Day advice/support on a wide variety of issues.
- Administering the Employee Protection Register (EPR). This includes processing Violent Incident Report forms, entry onto the EPR, supporting with any recommended action e.g. site exclusions, following up with collating information in preparation for submission to exemption panel if required.
- Policy/guidance/procedure development and review.
- Administration of the Sypol (COSHH Management) database.
- Administration of the RAMIS database including running reports, training and supporting premises managers and contractors in its use, monitoring of closing out of tasks.
- Attendance at Directorate/Service area Health and Safety Meetings e.g. Communities Health and Safety Board.
- Contractor vetting.

5.1.3 The health and safety workload remains high and resourcing is constantly being reviewed to ensure that the team is best able to meet support manager in progressing with operational health and safety challenges. Additional resource has recently been added to the team with the appointment of a part time Construction Design and Management Co-ordinator to support with reviewing and developing construction related compliance. Filling a vacant Principal Asbestos and Fire Officer post and two vacant Health and Safety Officer posts will also allow the team to develop resilience and allow progress against the improvement targets.

5.1.4 The action plan will be further six monthly to ensure that it fully reflects current health and safety risk and to address any new priorities.

5.1.5 Successful delivery of the health and safety action plan is only part of the process of improving health and safety standards. Effective health and safety compliance relies on ownership by managers and employees at all levels with clear documentation, health and safety training and supervision to ensure compliance with risk assessments and standards. The health and safety team will continue to support managers to communicate, review and improve health and safety in their service areas.

5.2 Conclusion

5.2.1 The action plan sets out a clear targeted, measurable plan for the Health and Safety team to work against. The action plan allows health and safety progress to be easily monitored and allows Committee members to better review health and safety progress across the Council.

6. ASSUMPTIONS

6.1 No assumptions have been made regarding the information contained in this report.

7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

7.1 This report is for information only and so an Integrated Impact Assessment is not required

8. FINANCIAL IMPLICATIONS

8.1 There are no financial implications.

9. PERSONNEL IMPLICATIONS

9.1 There are no personnel implications

10. CONSULTATIONS

10.1 All comments from consultees have been included in the report.

11. STATUTORY POWER

11.1 The Health and Safety at Work etc. Act 1974 and Management of Health and Safety at Work Regulations 1999.

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Appendix 1 Health and Safety Action Plan

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Health and Safety – Action Plan 2022/24

Ref. No.	Action	Current Position	Success Criteria	Responsibility	Timescale	Update
01	<p>HEALTH AND SAFETY STRUCTURE</p> <p>Ensure H&S Structure reflects workload and organisational demands</p> <p>Monitor effectiveness of structure</p>	<p>Additional reserve funded asbestos and fire posts agreed by CMT to address work demands on a fixed term basis.</p> <p>Recruitment in process.</p> <p>Health and Safety Officer recruitment in process to backfill existing vacancies.</p> <p>Allocation of team workload to optimise staff resources in place</p>	<p>Structure in place and working effectively</p>	ET	December 2022	June 2023
02	<p>GLAZING</p> <p>Establish a current position on glazing compliance in CBC premises</p> <p>Report to CMT with options for managing the risk.</p> <p>Implementation of agreed approach</p> <p>Generic risk assessment for Building Managers</p> <p>Guidance for Building Managers on managing the risk.</p> <p>Monitor ongoing compliance through general inspections and H&S management audits.</p>	<p>Discussed at Statutory Maintenance Group and initial report considered</p> <p>Peel tests completed on 5 CCBC sites to assess likely effectiveness of existing filming and result received.</p>	<p>Approach agreed and implemented</p>	H&S	<p>December/January 2022 - report to CMT</p> <p>Rolling programme of risk prioritised works ASAP</p>	June 2023

		<p>Cost of remedial glazing works currently being evaluated.</p> <p>Further report to Statutory Maintenance Group and CMT will be required following full information being received.</p>				
03	<p>CONTRACTOR MANAGEMENT Review of contractor management and CDM compliance Initial programme of specialised contractor management visits to take place Information from visits used to establish risk position and options to proceed Develop new policy on contractor management Develop guidance on CDM compliance Arrange CDM training as appropriate Monitor compliance through audit programme.</p>	<p>Additional expertise on CDM and contractor management in place to support review.</p> <p>CDM guidance for schools in place and reviewed 2022</p> <p>Programme of visits has commenced</p> <p>Initial awareness training for schools planned Nov/Dec/Jan</p>	<p>Policy and guidance in place and communicated.</p> <p>Training delivered.</p> <p>Audits demonstrate a high level of compliance.</p>	H&S	June 2023	June 2024
04	<p>DISPLAY SCREEN EQUIPMENT Review DSE policy/CMA ensuring they reflect agile working. Re-establish process for DSE Assessments DSE training available online Process in place for complex assessments Communicate new policy Monitor compliance through audit programme</p>	<p>Existing policy in place Assessments via trained DSE Assessors in Service areas Complex assessments via H&S or private contractor depending on complexity.</p>	<p>Revised policy approved and effective</p>	RM	Feb 2023	Feb 2024

		<p>Guidance and video in place covering DSE and homeworking.</p> <p>Draft policy written to reflect agile working and homeworking. Union consultation planned Dec/Jan 2022.</p>				
05	<p>RAMIS Agree joint ownership between Property Services and Health and Safety for managing and updating RAMIS. Review of statutory tasks not currently on RAMIS e.g. pressure vessels, hoists, lightening conductors Where tasks to be added ensure discussions with BC/FM and Statutory Maintenance Group as required to develop plans, consider implications and timescales before activating tasks Consider adding additional items to RAMIS where there is a maintenance requirement under PUWER but not a specific legal requirement to test at set intervals Agreed process with technical divisions for adding/updating assets and information. Regular communication of premises manager responsibilities Develop further how to guides to reduce training and support requests</p>	<p>New tasks already added</p> <p>Migration to new RAMIS database took place in March 2021. Review via Statutory Maintenance Group required of any further tasks that may need reporting via RAMIS.</p>	<p>RAMIS used for all statutory tasks.</p> <p>RAMIS updated in a timely manner to reflect new/amended/re moved assets</p> <p>All tasks closed out in a timely manner.</p>	H&S	April 2023	June 2024

06	<p>RADIATION REVIEW</p> <p>Review of internal competence in preparation for possible HSE visits</p> <p>Audit programme of schools with radiation sources</p> <p>Review of training with individual schools with radiation sources</p>	<p>Audit of compliance completed 2021.</p> <p>Communication to all schools of planned HSE visits and changes to guidance.</p> <p>New programme of compliance visits to include training needs to take place early 2023.</p>	<p>RPO Training completed</p> <p>Audit completed</p> <p>Training needs</p>	BM	April 2023	Dec 2023
07	<p>SYPOL REVIEW</p> <p>Review of assessments current on Sypol</p> <p>Reduction of the number of live assessments in line with the current contract to 750</p> <p>Consideration of how we use Sypol moving forward in terms of cost benefit and options.</p>	<p>Assessment review underway</p> <p>Number of assessments reduced from approx. 874 to below 750</p> <p>Work ongoing to:</p> <ul style="list-style-type: none"> - reduce number of assessments - consider future use of sypol system. 	<p>Sypol assessments current and within numbers</p> <p>Agreed approach for managing COSHH compliance</p>	AW	January 2023	January 2024
08	<p>VEHICLE/PEDESTRIAN SAFETY</p> <p>Work with Premise Managers to review risk assessments for traffic management on CCBC sites</p>	<p>Programme of high-risk premises in place.</p>	<p>Traffic management risk assessments in</p>	H&S	November 2023	November 2024

	Target high risk sites e.g. those with introduced traffic management risks, and support with completion of risk assessments and ideas for reducing risk Audit % across each Directorate.	Small number of high-risk sites being supported.	place and reviewed for all sites with onsite traffic management Arrangements effective. Arrangements reviewed.			
09	DIRECTORATE ACTION PLANS Review and implement directorate action plans setting out work plan and priorities Monitor progress against plan	Senior Officers in process of reviewing plans.	Plans in place and used to improve health and safety standards Service area managers actively approaching the H+S Division for support proactively rather than reactively	H&S	February 2023	March 2024
10	AUDIT SYSTEM Establish a topic based management audit system for CCBC services based on a risk prioritised programme. Implement a rolling programme of management audits. Generate general inspection and management audit reports	Risk based general inspection programme in place. Management audit options being reviewed with process and practicalities to be agreed.	Auditing undertaken in accordance with agreed plan. Audit findings used to target resources and	H&S	February 2023 to commence management audits. Ongoing for auditing	June 2023

	Implement escalation procedure for outstanding actions across Authority. Monitor progress.		drive improvement in health and safety compliance			
11	<p>ACCIDENT/INCIDENT REPORTING & INVESTIGATION</p> <p>Review accident/incident reporting policy Review training resources to support implementation of the policy Develop online briefings to support with awareness and understanding of the process for completing accident and incident investigations Monitor effectiveness of policy Provide information and statistics to H&S Committee as part of quarterly report.</p>	<p>Existing policy in place which include near miss reports</p> <p>Revised policy approved and communicated to Management Network.</p> <p>Further communication planned. H&S Training Team working on video to support with wider communication of the revised policy (briefing sessions were originally planned but have been reconsidered due to Covid).</p>	<p>Revised policy in place Improved quality of completed accident/investigation forms Improved quality of accident investigations. Training resources available via Intranet portal</p>	H&S	November 2023	November 2024
12	<p>GDPR</p> <p>Review Privacy Notices Review electronic filing system – simplify and clear-out Establish consistency across the team Monitor compliance Review of historical asbestos records</p>	<p>Privacy Notices in place. GDPR refresher training required New O drive structure agreed Review of paper and electronic records in place</p>	<p>All records managed in accordance with GDPR requirements. New structure in place Clear electronic and paper</p>	H&S	April 2023	April 2024

13	<p>ASBESTOS MANAGEMENT</p> <p>Develop specific fire and asbestos action plan</p> <p>Review Corporate Asbestos Management Plan and Domestic Asbestos Management Plan</p> <p>Recruitment to new and vacant posts in Asbestos team to ensure resource for plans</p> <p>Implement agreed approach for new management surveys of communal areas of domestic dwellings</p> <p>Commission new surveys of sites with old or non-updatable asbestos information</p> <p>Roll out asbestos training needs analysis and introduction to duty to manage to all premise managers</p> <p>Roll out new asbestos module on RAMIS</p> <p>Commence a programme of reviewing all Asbestos Containing Materials on a risk based rolling programme</p> <p>Review cross directorate asbestos arrangements to best utilise resources and ensure that all risks are addressed and processes are consistent.</p> <p>Use of RAMIS to record and monitor high priority asbestos works</p> <p>Quarterly monitoring of outstanding condition monitoring and asbestos actions</p> <p>Improved engagement with technical divisions to ensure that they understand and comply with the responsibility to pass on updates to ACM's.</p>	<p>CAMP review in progress.</p> <p>Recruitment in process</p> <p>Asbestos training needs analysis and introduction to duty to manage rolled out in schools</p> <p>Asbestos condition monitoring video developed</p> <p>Approach agreed</p> <p>approach for surveying communal areas of domestic dwellings</p> <p>Funding for new surveys was agreed by Cabinet and Council – confirm</p> <p>Training needs analysis ready to be finalised and dates agreed for introduction to duty to manage training.</p>	<p>Revised policies in place, communicated and effective.</p> <p>Staff training in accordance with training needs analysis.</p> <p>Auditing demonstrates compliance of asbestos management arrangement by employees and contractors.</p>	H&S	June 2023	June 2024
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14	<p>HAND ARM VIBRATION In-use vibration magnitude measurements of % of hand- held vibratory tools Review of vibration control policy</p>	<p>Reliance on historical data relating to tools that may have since been replaced, or on generic data for tool type that may not accurately reflect emissions of specific tools used.</p>	<p>Accurate vibration magnitude data for tools in use. Assurance on whether historic data remains reliable as not every tool can be measured. Reduced likelihood of vibratory tools sustaining HAVS, Defend likelihood of HSE enforcement action, and defence of civil claims</p>	AW	Nov 2023	Nov 2023
15	<p>COMMUNICATION Review of existing guidance and other Health and Safety documents on intranet and RAMIS4Schools and all other documents Review of existing forms and procedures to streamline and update. Improved engagement with service areas to provide support, improve health and safety profile and reinforce health and safety messages.</p>	<p>Document and process review in progress. Improved engagement with service areas' directly employed Officers has commenced.</p>	<p>Reviewed relevant guidance and forms. Clear, transparent processes Clear engaging intranet site. Joint working with directly employed Health and Safety and</p>	H&S	Nov 2023	Nov 2023

	Improved links and communication with Health and Safety Officers and Asbestos Officer directly engaged by services areas.		Asbestos Officer resulting in a consistent approach, aligned arrangement and sharing of best practise.			
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CORPORATE HEALTH AND SAFETY COMMITTEE – 14TH NOVEMBER 2022

SUBJECT: ANNUAL CARE FIRST REPORT

REPORT BY: CORPORATE DIRECTOR FOR EDUCATION AND CORPORATE SERVICES

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to provide the Committee with a copy of the Care first Annual Report 2022 on the Employee Assistance Programme (attached at Appendix 1).

2. SUMMARY

- 2.1 The report is provided as information for members of the Committee, to ensure that they are kept informed of any matters that could impact on the management of health and safety within the Council. For information, some of the detail has been removed to ensure individual employees cannot be identified.

3. RECOMMENDATIONS

- 3.1 That the Committee note the contents of the report.

4. REASONS FOR THE RECOMMENDATIONS

- 4.1 To keep the Committee up to date on any health and issues that may be relevant or may require further consideration.

5. THE REPORT

- 5.1 Employers have a duty under section 2 of the Health and Safety at Work etc Act 1974 to ensure the Health, Safety and Welfare of all employees and this legal responsibility includes mental as well as physical health.

- 5.1.1 Care first is a comprehensive employee assistance programme which offers confidential, impartial advice, information and a counselling service 24 hours a day 365 days a year.

- 5.1.2 Access to Care first is available by the telephone or online access including typetalk and minicom for people with hearing difficulties plus an interpreter service in 150 languages.

- 5.1.3 Employees are able to self-refer to Care first or managers can refer on the employees behalf with permission and subject to a specific criteria. 88% of referrals during 2021-22 were self-referrals with the remainder comprising of management referrals (10%), Occupational Health referrals (1%) and HR referrals (1%). The support provided by Care First is much wider than work related issues and includes legal, tax, human rights, immigration and nationality and travel, transport and holidays, financial advice (budget calculator on webpage), covid, bereavement, management support etc
- 5.1.4 Through the Care First Lifestyle site staff can access a wide range of supportive information, covering a variety of wellbeing topics. The launch last year of the new My Possible Self/ZEST mental health focussed app which can be used any time anywhere.
- 5.1.5 Care first is well promoted across the Authority with weekly e-mails to all users directing employees to events and information detailing how Care first is able to support them. Managers of employees who do not have access to e-mails are encouraged to share information in hard copy and via team meetings,
- 5.1.6 Overall usage of the service for the period April 2021- March 2022 increased from 3.31 % overall uses in 2021 to 5% by end of March 2022.
- 5.1.7 Work related contacts made up 41 out of 415 contacts during the year April 2021 – March 2022.
- 5.1.8 Work related physical and emotional health, change and relationships with managers were the most common reason for work related contacts.
- 5.1.9 Care first continues to be actively promoted across CCBC as an information resource and a tool for employees at all levels to access information, advice and support relating to personal and work-related concerns.

5.2 Conclusion

- 5.2.1 Health and safety remains a key priority for Local Authority action. Providing and communicating the Care first services is an important plank of CCBC approach for support employees facing work or personal challenges and/or seeking a healthier lifestyle. Access to Care first together with robust health and safety and human resources policies setting out formal processes for managing risk and agreed processes for addressing issues CCBC have in place arrangements to support employees and keep them well in work. Ensuring that health and safety is considered, and risks assessed and controlled, assists the Authority in meeting its legal obligations, in protecting the health and safety of employees and others.

6. ASSUMPTIONS

- 6.1 No assumptions have been made regarding the information contained in this report.

7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

- 7.1 This report is for information only and so an Integrated Impact Assessment is not required

8. FINANCIAL IMPLICATIONS

- 8.1 There are no financial implications.

9. PERSONNEL IMPLICATIONS

9.1 There are no personnel implications

10. CONSULTATIONS

10.1 All comments from consultees have been included in the report.

11. STATUTORY POWER

11.1 The Health and Safety at Work etc. Act 1974 and Management of Health and Safety at Work Regulations 1999.

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Appendix 1 Care First Annual Report

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Caerphilly County Borough Council

Report On The Employee Assistance Programme

Annual Report
Apr 2021 to Mar 2022

For Caerphilly County Borough Council

CONFIDENTIAL REPORT

Welsh Framework Contract Manager

Care first Account Manager
Pat Garland-Smith
Care first
1230 Landsdowne Court
Gloucester Business Park
Gloucester
GL3 4AB

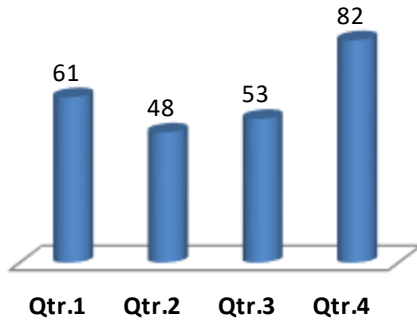
T: 01452 623200

Care first

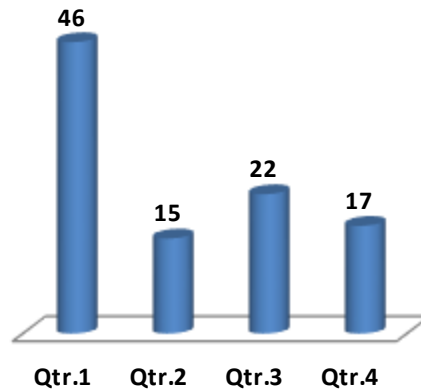
employee assistance solutions

Dashboard Summary

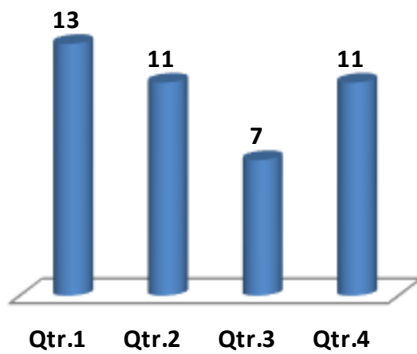
Total Calls - Telephone Counselling



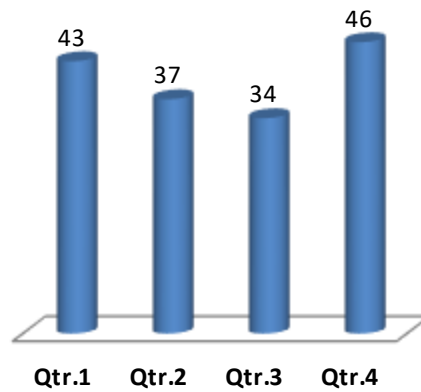
Face to Face Sessions



Total Calls - Telephone Information Service

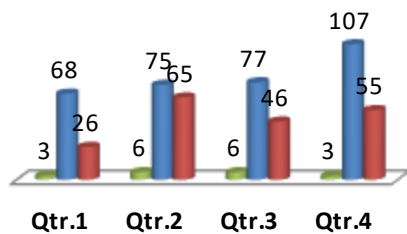


New Clients



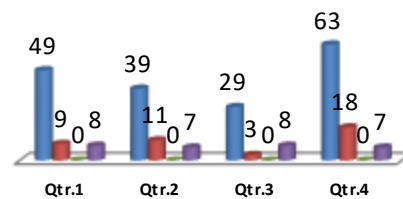
Online Services

- Online Counselling
- At Home/
- At Work/



Issues by Category

- Personal
- Work Related
- Mgt. Support
- Information Specialist



Service Details

Description

Employee Headcount	8,296
Service Commencement Date	1 st April 2015
Annual Contacts	415
Annual Usage	5.00%
Annual New Cases	160

Comments:

This is the annual report and covers the period April 2021 until the end of March 2022

During this time we have seen a significant increase in terms of usage rising from 3.31% overall usage in 2021 to currently 5% as of end of March 2022

We have had a total of 415 contacts of which 244 (59%) were contacts to the 24/7 counselling line, 100 (24%) were individual face to face counselling sessions which were delivered virtually on a platform agreed between the client and the counsellor, 42 (10%) were issues presented to the team of CA Information Specialists, 11 (3%) were face-to-face video sessions and 18 (4%) were on line contacts. The category for video sessions was only added in Feb 2022 and this is reflected in the report.

In addition there have been 6 Covid specific contacts to us at Care first

160 new cases/clients have presented this year of which the majority 112 (70%) identified when asked as female. Of the 160, 141 (88%) came to Care first via the self-referral route which is excellent. Of the new cases we see the new cases being distributed as

- 49 (31%) Schools
- 36 (23%) adult services
- 23 (14%) Community and Leisure Services

In terms of promotion, when asked how clients had heard about the service 100 (61% told us they had heard about us via the website

The usage to the Lifestyle site has been excellent and there have been 519 unique page views of which 327 (63%) were views to the “at home” pages with 192 (37%) were views to the “at work” pages.

The Service Manager team have been delivering Monday to Friday webinars live at 12 noon since the start of the Pandemic in March 2020. We have recently reduced these to 3 a week, still delivered live and still at noon. The attendance and feedback remains very positive indeed. It is worth remembering that every webinar was recorded during the live broadcast and have been uploaded to your own Lifestyle site where they can be viewed again whenever they are needed.

The comms information continues to be sent out each Thursday afternoon to the contract management team

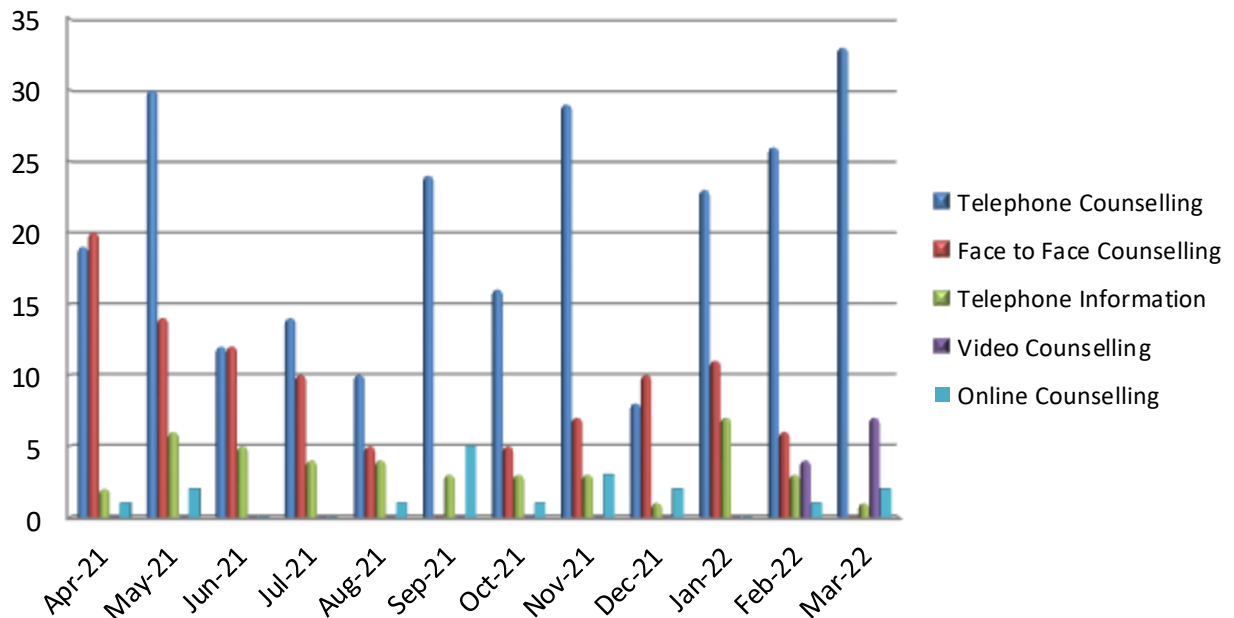
This year also saw the launch of the new My Possible Self/ZEST app and although the usage is not being broken down by individual customer organisation, we do know that all Wales have been the second highest users of all our customers to have downloaded and used the app

The Service Manager remain responsible for the smooth running of the contract day today. I am also available to assist with promotion and also to provide live awareness and topic specific webinars and attend meetings and wellbeing events as required by Caerphilly Council

All Contacts by Type

Period	Total	All	Telephone / Face to Face	Information Specialist / Management Support	Online	Critical Incident	Head Count
Apr-21	42	-.51%	-.47%	-.02%	-.01%	-.00%	8,296
May-21	52	-.63%	-.53%	-.07%	-.02%	-.00%	8,296
Jun-21	29	-.35%	-.29%	-.06%	-.00%	-.00%	8,296
Jul-21	28	-.34%	-.29%	-.05%	-.00%	-.00%	8,296
Aug-21	20	-.24%	-.18%	-.05%	-.01%	-.00%	8,296
Sep-21	32	-.39%	-.29%	-.04%	-.07%	-.00%	8,296
Oct-21	25	-.30%	-.25%	-.04%	-.01%	-.00%	8,296
Nov-21	42	-.51%	-.43%	-.04%	-.04%	-.00%	8,296
Dec-21	21	-.25%	-.22%	-.01%	-.02%	-.00%	8,296
Jan-22	41	-.49%	-.39%	-.08%	-.00%	-.00%	8,296
Feb-22	40	-.48%	-.17%	-.01%	-.00%	-.00%	8,296
Mar-22	43	-.52%	-.13%	-.00%	-.04%	-.00%	8,296
Total	415	5.00%	3.64%	-.47%	-.23%	-.00%	

All Contacts by Type



Issue Category Analysis

Personal :

180 personal issues have been presented from which the main trends have been

- Health which continues to be the most frequently presented issue and accounts for 87 (48%) of all the personal issues presented of which 63 (35%) were about emotional issues such as stress, depression and anxiety and 24 (13%) were about aspects of physical health
- 17% were relating to family issues and concerns for family members
- 14% were about bereavement which is a presented issues which is increasing across our customer base

Work:

41 work related issues have been presented with the emerging trends being

- Health which remains the most frequently presented concern of which 12 (29%) were emotional health issues and 3 (7%) were physical health issues
- 15% related to change

- 12% were about relationship challenges with managers

The HSE Standards showed Stress-Demands 7%, Stress-Change 2% and Stress-Change 2%

Management Support:

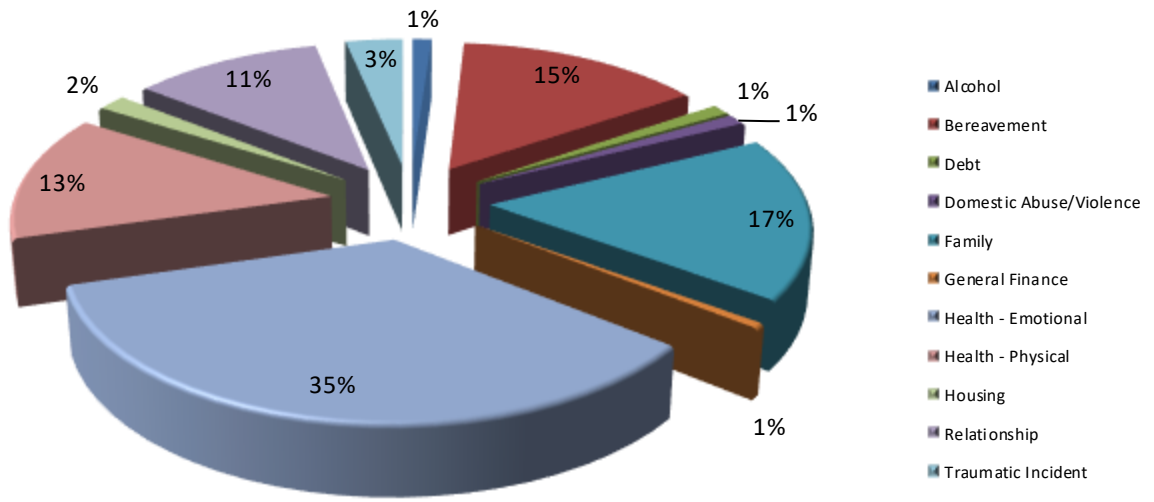
Again there have been no instances of Management support which is a shame as this is a really valuable part of the Care first service. I would like to suggest a promotional event for managers that I would be happy to either attend in person or virtually whichever best suits the needs of your organisation

Information Specialist:

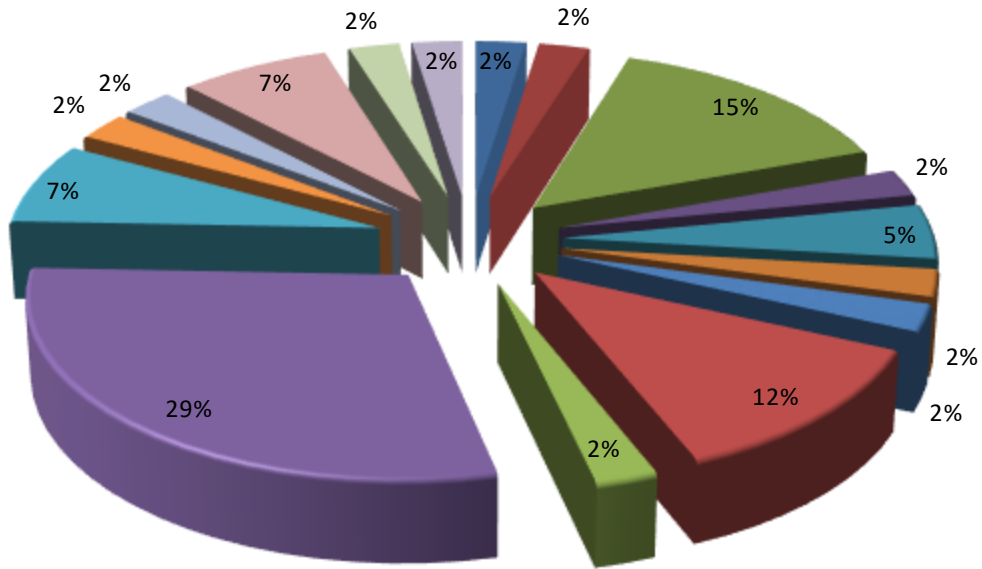
The team of CA Information Specialists supported with a wide range of issues including

- Law and legal
- Employment concerns
- Benefit enquiries
- Consumer issues
- Health/medical

Personal Issues

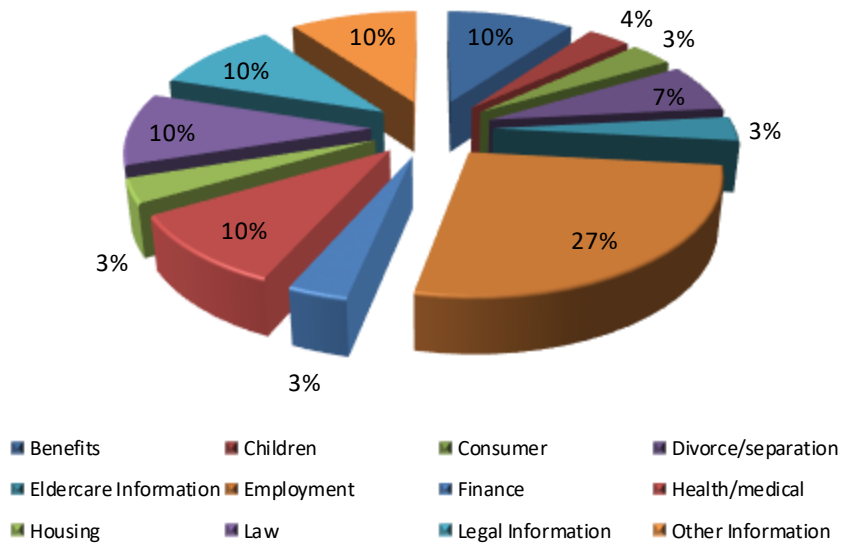


Work Related Issues



- Absence/Attendance
- Changes at work
- Performance - General
- Racist Incident
- Traumatic Incident
- Work Related Health - Physical
- Workplace Environmental Conditions
- Stress - Relationships
- Bullying & Harassment by Members of Public
- Disciplinary
- Performance - Target Related
- Relationships at work with manager
- Work Related Health - Emotional
- Work Underload
- Stress - Demands
- Stress - Change

Information Specialist



Support in

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	YTD
English	16	21	6	8	10	19	10	18	6	16	15	15	160
Welsh	-	-	-	-	-	-	-	-	-	-	-	-	-
Unknown	-	-	-	-	-	-	-	-	-	-	-	-	-

Lifestyle usage

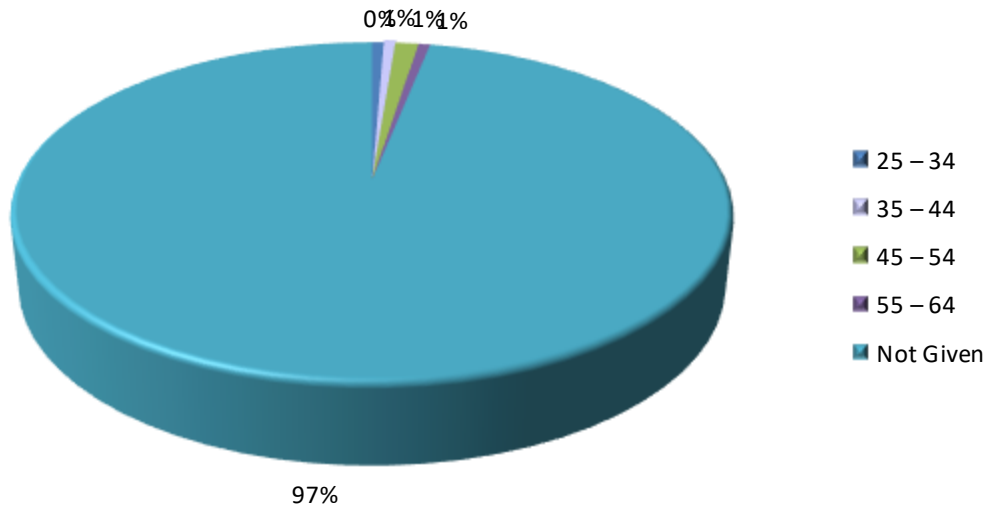
	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	YTD
Pageviews	19	24	58	79	33	59	40	77	17	116	40	30	592
Unique Pageviews	19	23	52	56	29	55	34	74	15	98	37	27	519

Information

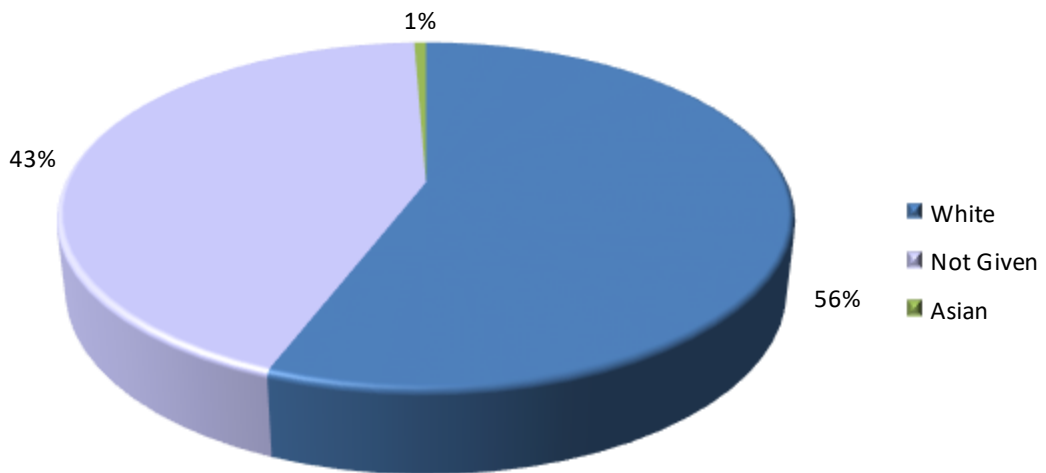
Category
Unique Pageviews

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Year to Date	YTD %
At Home	9	13	46	24	16	35	23	47	7	65	25	17	327	63 %
At Work	10	10	6	32	13	20	11	27	8	33	12	10	192	37 %
TOTAL	19	23	52	56	29	55	34	74	15	98	37	27	519	100 %

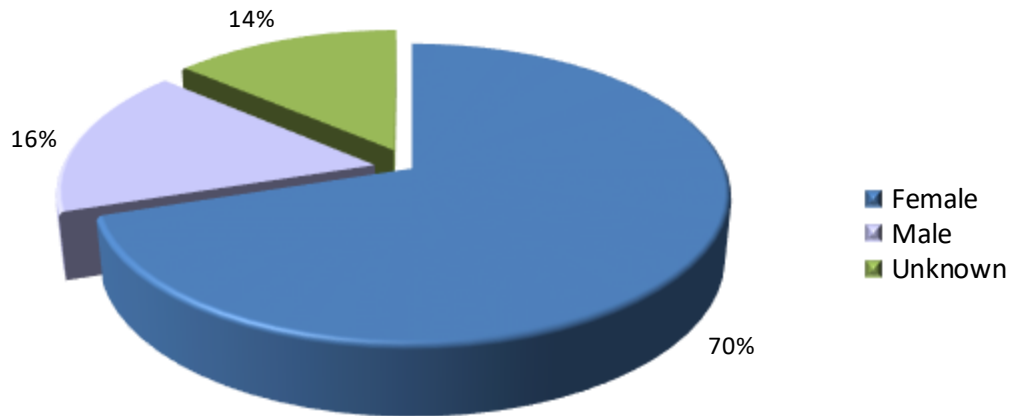
Age Summary



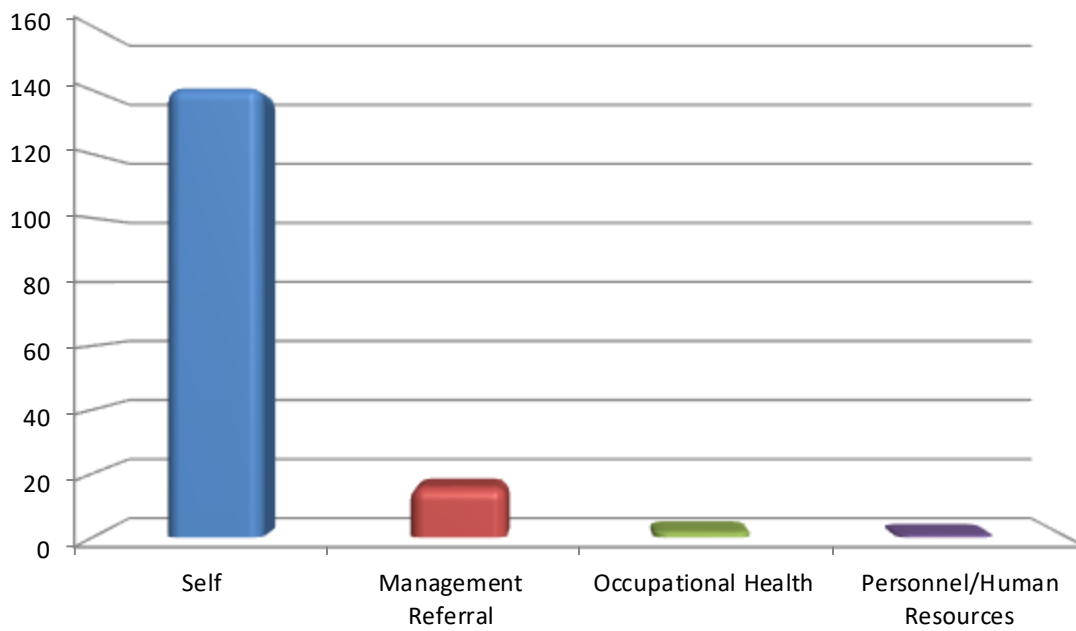
Ethnic Origin Summary



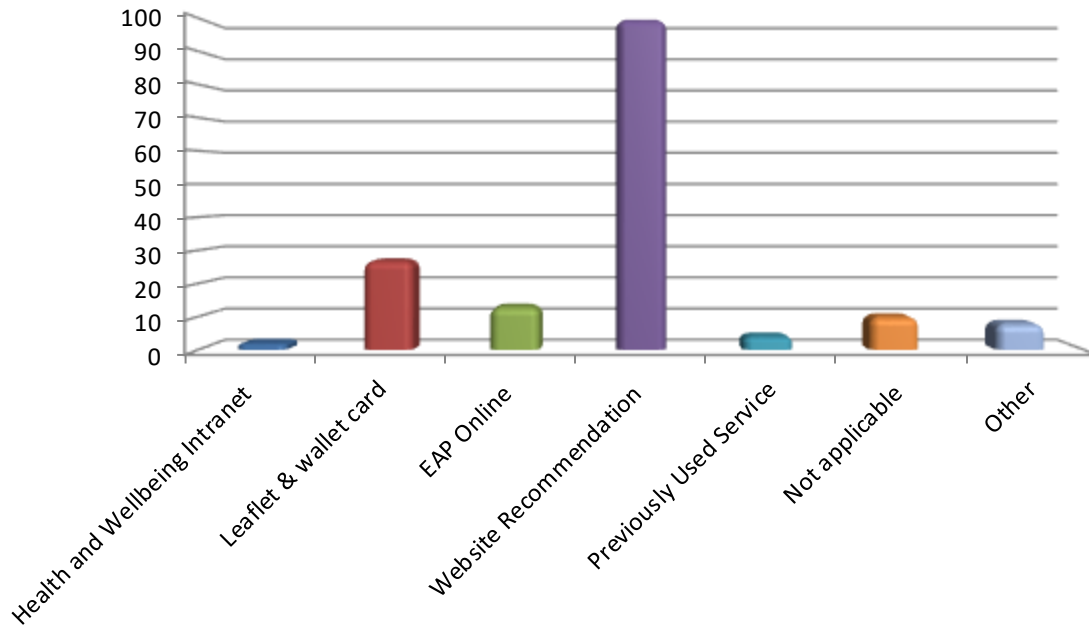
Gender Summary



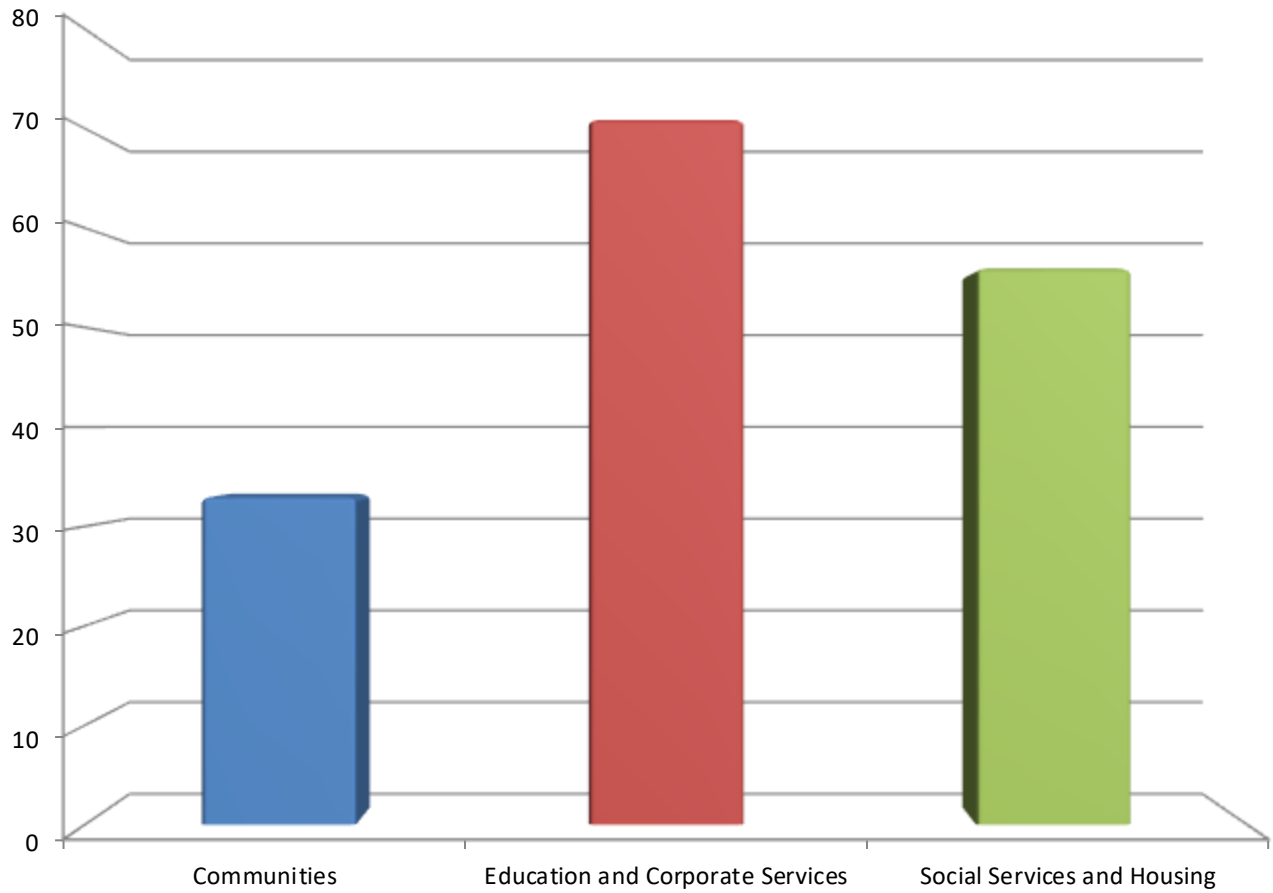
Referred by



Service Knowledge



New cases by Region



Appendix - Definitions

Counselling and Information

24 hour freephone access to professional support for any personal or work related issue. All calls are answered directly by a team of qualified and experienced Care first Counsellors. Counselling calls can be single or continued with the same counsellor for an agreed number of sessions within a structural framework. Counselling is provided either on the telephone or within an agreed number of face to face counselling sessions. Face to face counselling is provided through Care first network of permanent and associate counsellors, who are centrally case managed and clinically supervised.

Professional information and advice services are provided by a team of Information Specialists working alongside the Telephone Counsellors in Care first Counselling and Information Services centre. Information Specialists are available between 8 am and 8 pm Monday to Friday but available on an emergency only basis at other times.

Case

An issue or set of issues presented to Care first by an individual for discussion. A case may take one call, a number of calls or a combination of telephone and face to face counselling and/or information to reach closure. This process may take place over a period of several weeks. Each case is assigned a unique case reference to preserve the anonymity of the individual when making a record of the discussion (case note) on the Care first database.

Where issues are being presented to Care first Counselling and Information for the first time, this is referred to as a new case. The individual may have used the service before about a different issue or set of issues. Any follow up use of the service, whether by telephone or face to face, is referred to as an existing case.

Client

An individual who has used/is using the service.

Contact

Each telephone call or face to face counselling session is recorded on the Care first database as a case note and referred to as a 'contact' within reports. This includes calls made by managers to discuss an employee and make a management referral.

Contact duration may be anything from a brief enquiry for information or advice to up to an hour-long counselling session.

Evaluation

Data extracted from forms completed anonymously by Care first face to face counselling clients to evaluate Care first service, outcomes and perception of the effectiveness of counselling.

Face to Face Counselling

Total number of face to face counselling sessions which have taken place during the period. Clients can access an agreed number of face to face sessions for each case presented. Each session lasts one hour.

Issues

Breakdown of issues presented to Care first Counselling and Information for discussion. A case may involve several inter-related issues. Each case note records the issues discussed with the client, and whether they are personal or work related.

Personal issues are further categorised under the broad headings of “Personal Issues (Counselling)”, and “Personal Issues (Information)”.

Work related issues are shown in the report in two tables “Work Related Issues” and “Management Support”. The former refers to the client’s own issues, where the latter refers to managers using the service to discuss people management issues.

Overall Service Usage

The overall level of service usage is measured through recording the number of client contacts made to the service.

Telephone Counselling

Number of calls made to a Care first Telephone Counsellor. This also includes contact made by the hearing impaired via minicom or Typetalk, or in a language other than English using our translation service.

This also includes ‘contracted’ counselling sessions, where clients have opted to continue counselling by telephone with the same counsellor, rather than be referred for face to face counselling. A telephone ‘contact’ may therefore be anything from a brief call to up to an hour’s counselling.

Telephone Information

Number of calls made to a Care first Telephone Information Specialist. This also includes contact made by the hearing impaired via minicom or Typetalk, or in a language other than English using our third party translation service.

Undisclosed

Contacts made by clients who have not wished to disclose certain information such as the area of employment.

% Usage

Number of contacts made during the period, expressed as a percentage of the headcount contracted.

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CORPORATE HEALTH AND SAFETY COMMITTEE – 14TH NOVEMBER 2022

SUBJECT: RECENT HEALTH AND SAFETY EXECUTIVE UPDATES

REPORT BY: CORPORATE DIRECTOR FOR EDUCATION AND CORPORATE SERVICES

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to inform the Committee about recent relevant accidents, incidents and prosecutions by the Health and Safety Executive (HSE).

2. SUMMARY

- 2.1 The report is provided as information for members of the Committee, to ensure that they are kept informed of any matters that could impact on the management of health and safety within the Council.

3. RECOMMENDATIONS

- 3.1 That the Committee note the contents of the report.

4. REASONS FOR THE RECOMMENDATIONS

- 4.1 To keep the Committee up to date on any health and issues that may be relevant or may require further consideration.

5. THE REPORT

5.1 HSE prosecution 8 years later

- 5.1.1 A Health and Safety Executive (HSE) prosecution is being brought against a care home and former care manager following the death of an 18-year-old in care who was discovered unconscious at the care home in 2014.

Alexandra Homes (Bristol) Limited face charges under Sections 2(1) and 3(1) Health and Safety at Work etc. Act 1974. The former care home manager also faces a charge under Section 37 of the Health and Safety at Work etc. Act 1974.

The case highlights there being no timescale within which charges have to be brought for

health and safety prosecutions.

5.2 Conclusion

5.2.1 Health and safety remains a key priority for Local Authority consideration. Although the HSE are less pro-active than previously, they will investigate and prosecute if there are health and safety failings. As an Authority we ensure that we keep up to date with knowledge of recent prosecutions or safety notices to enable us to implement any learning from such actions within Local Authority services if applicable. Ensuring that health and safety is considered, and risks assessed and controlled, assists the Authority in meeting its legal obligations, in protecting the health and safety of employees and others.

6. ASSUMPTIONS

6.1 No assumptions have been made regarding the information contained in this report.

7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

7.1 This report is for information only and so an Integrated Impact Assessment is not required

8. FINANCIAL IMPLICATIONS

8.1 There are no financial implications.

9. PERSONNEL IMPLICATIONS

9.1 There are no personnel implications

10. CONSULTATIONS

10.1 All comments from consultees have been included in the report.

11. STATUTORY POWER

11.1 The Health and Safety at Work etc. Act 1974 and Management of Health and Safety at Work Regulations 1999.

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Dave Street, Corporate Director Social Services and Housing,
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willims@caerphilly.gov.uk
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Cllr Nigel George, Cabinet Member for Corporate Services,
GEORGN@caerphilly.gov.uk
Emma Townsend, Health and Safety Manager, townsej@caerphilly.gov.uk



CORPORATE HEALTH AND SAFETY COMMITTEE – 14TH NOVEMBER 2022

SUBJECT: ACCIDENT STATISTICS REPORT FOR APRIL - SEPTEMBER 2022

REPORT BY: CORPORATE DIRECTOR FOR EDUCATION AND CORPORATE SERVICES

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to inform the Committee of the numbers and types of work-related accidents/incidents that occurred during the period of April - September 2022 (inclusive).

2. SUMMARY

- 2.1 The following report provides accident statistics for April - September 2022 (inclusive). Accident statistics are produced for each quarter and presented to the members of the Health and Safety Committee for information. The appendices are graphs illustrating these statistics and include for each quarter period for the previous 2 years for comparison.

3. RECOMMENDATIONS

- 3.1 That the Committee note the contents of the report.

4. REASONS FOR THE RECOMMENDATIONS

- 4.1 To keep the Committee up to date on any health and issues that may be relevant or may require further consideration.

5. THE REPORT

- 5.1.1 The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 require accidents which arise as a result of, or in connection with, work to be categorised as follows and reported to the Health and Safety Executive (HSE):

- All deaths to workers and non-workers, except for suicides,
- 'Specified injury' - including a fracture, other than to fingers, thumbs and toes; amputations; any injury likely to lead to permanent loss or reduction of sight; any crush injury to the head or torso causing damage to the brain or internal organs; serious burns

(including scalding) covering more than 10% of the body, or causing significant damage to eyes, respiratory system or other vital organs); scalpings (separation of skin from the head) requiring hospital treatment; loss of consciousness caused by head injury or asphyxia; and any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.

- Accidents which cause an employee to be away from work or unable to perform their normal work duties for more than seven consecutive days (not counting the day of the accident) as a result of their injury.
- Work-related accidents involving members of the public or people who are not at work (including pupils) if the injured person is taken from the scene of the accident directly to hospital for treatment to that injury.
- Dangerous occurrences are specified near-miss events that do not cause injury or ill health but had potential to do so as defined in RIDDOR, such as failure of collapse of lifting equipment or accidental release of a hazardous substance.
- Work-related causes of ill health – defined as
 - (a) Carpal Tunnel Syndrome, where the person's work involves regular use of percussive or vibrating tools;
 - (b) cramp in the hand or forearm, where the person's work involves prolonged periods of repetitive movement of the fingers, hand or arm;
 - (c) occupational dermatitis, where the person's work involves significant or regular exposure to a known skin sensitizer or irritant;
 - (d) Hand Arm Vibration Syndrome, where the person's work involves regular use of percussive or vibrating tools, or the holding of materials which are subject to percussive processes, or processes causing vibration;
 - (e) occupational asthma, where the person's work involves significant or regular exposure to a known respiratory sensitizer; or
 - (f) tendonitis or tenosynovitis in the hand or forearm, where the person's work is physically demanding and involves frequent, repetitive movements,

5.1.2 The term 'minor injury' refers to any accident or incident causing injury that is not included in point 5.1.1 and therefore is not reportable to the Health and Safety Executive. Accidents in this classification need only be reported to the Health and Safety Division if they affect:

- Employees while they are at work.
- Pupils, clients and members of the public who are injured as a result of work activity while they are on Council premises or using the facilities.
- Any persons who are injured as a result of any work activity carried out by or on behalf of the Authority

5.1.3 The term 'near miss' refers to any significant work-related incident reported that caused no injury but had potential to cause at least one person to be injured or put at risk of ill-health as a consequence of the incident, but not meeting the legal definition in RIDDOR of a 'dangerous occurrence.'

5.1.4 Appendix 1 provides details on all of the accidents for the Authority that were recorded by the Health and Safety Division between July - September 2022.

Appendix 2 provides details of the same for the period April - June 2022.

Appendix 3 provides details for the period January – March 2022

Appendix 4 provides details for the period October to December 2021

These are categorised by accident or incident type, i.e. reasons as set out in points 5.1.1, 5.1.2 and 5.1.3.

5.1.5 For comparison, tables for the same quarter periods during 2020 and 2021 are provided as Appendices 9 to 14.

5.1.6 Appendix 5 shows the RIDDOR-reportable accidents per directorate between July - September 2022 and the injury causation.

Appendix 6 provides for the period April – June 2022
Appendix 7 provides for the period January to March 2022
Appendix 8 provides for the period October to December 2021

- 5.1.7 For comparison, tables for the same periods during 2020 and 2021 are provided as Appendices 15 to 20.
- 5.1.8 There was one RIDDOR-reportable accident in the period July to September 2022, and three during the period April to June 2022 in the Communities Directorate.
- 5.1.9 There was one RIDDOR-reportable accident in the period July to September 2022 and none during the period April to June 2022 in the Social Services and Housing Directorate.
- 5.1.10 There was one RIDDOR-reportable accident in the period July to September 2022 and four during the period April to June 2022 in the Education and Corporate Services Directorate.
- 5.1.11 For the purposes of reporting, staff who are working for the Authority via an agency are treated as employees. It should also be noted that when making comparisons with earlier years' reports there has been a change in the management structure within the Authority, with certain service areas now falling under different Directorates.
- 5.1.12 Seven RIDDOR-reportable incidents reported related to injuries causing more than 7 consecutive days incapacitation. One related to a school pupil taken directly to hospital for medical treatment due to injury sustained from falling from a faulty trike during supervised play.
- 5.1.13 There have been some follow up enquiries but no further action from the HSE with regards to some of these RIDDOR-reportable accidents.
- 5.1.14 There are no common themes or linked accidents in a particular service area.
- 5.1.15 There have been no RIDDOR-reportable diseases or dangerous occurrences throughout this period.
- 5.1.16 Five near-miss incidents were recorded during the period:-
- A row of crowd barriers at the start/finish line of the Caerphilly 10k race blew over by a gust of wind, but after the large crowds had left that area.
 - A small but significant electrical fire broke out in the cabling between the battery and engine of a Highways' powered pedestrian roller after use to compact finish a newly laid footpath.
 - A large tree limb broke away from one of the large beech trees near the lake of Cwmcarn Forest Drive across the road that leads down to the toilet block.
 - The blade of a disc cutter used by Highways came off and went across the road.
-
- A school's directly appointed contractor reported receiving an electric shock while working on electrical sockets within a Science lab classroom that was undergoing works by another main contractor for works arranged through Property Services. They reported isolating power beforehand but someone else switched the power back on.

5.2 Conclusion

- 5.2.1 RIDDOR-reportable incidents remain consistently low. This is encouraging and demonstrates the positive benefits of interventions of Health and Safety Officers regarding audits of workplaces and work activities, and the provision of health and safety related training.
- 5.2.2 Near-miss reporting remains low. The corporate Accident/Incident Reporting and Investigation

Policy has been reviewed and includes new arrangements for reporting near miss incidents to improve reporting rates.

6. ASSUMPTIONS

6.1 No assumptions have been made regarding the information contained in this report.

7. SUMMARY OF INTEGRATED IMPACT ASSESSMENT

7.1 This report is for information only and so an Integrated Impact Assessment is not required.

8. FINANCIAL IMPLICATIONS

8.1 There are no financial implications.

9. PERSONNEL IMPLICATIONS

9.1 There are no personnel implications

10. CONSULTATIONS

10.1 All comments from consultees have been included in the report.

11. STATUTORY POWER

11.1 The Health and Safety at Work etc. Act 1974 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

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Appendices:

- Appendix 1 All accidents by Type for the Authority between July - September 2022
- Appendix 2 All accidents by Type for the Authority between April – June 2022
- Appendix 3 All accidents by Type for the Authority between January – March 2022
- Appendix 4 All accidents by Type for the Authority between October - December 2021
-
- Appendix 5 RIDDOR reportable accidents by Type and Directorate between July - September 2022
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- Appendix 8 RIDDOR reportable accidents by Type and Directorate between October - December 2021
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- Appendix 9 All accidents by Type for the Authority between July - September 2021
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- Appendix 15 RIDDOR reportable accidents by Type and Directorate between July - September 2021
- Appendix 16 RIDDOR reportable accidents by Type and Directorate between April – June 2021
- Appendix 17 RIDDOR reportable accidents by Type and Directorate between January – March 2021
- Appendix 18 RIDDOR reportable accidents by Type and Directorate between October - December 2020
- Appendix 19 RIDDOR reportable accidents by Type and Directorate between July– September 2020
- Appendix 20 RIDDOR reportable accidents by Type and Directorate between April – June 2020

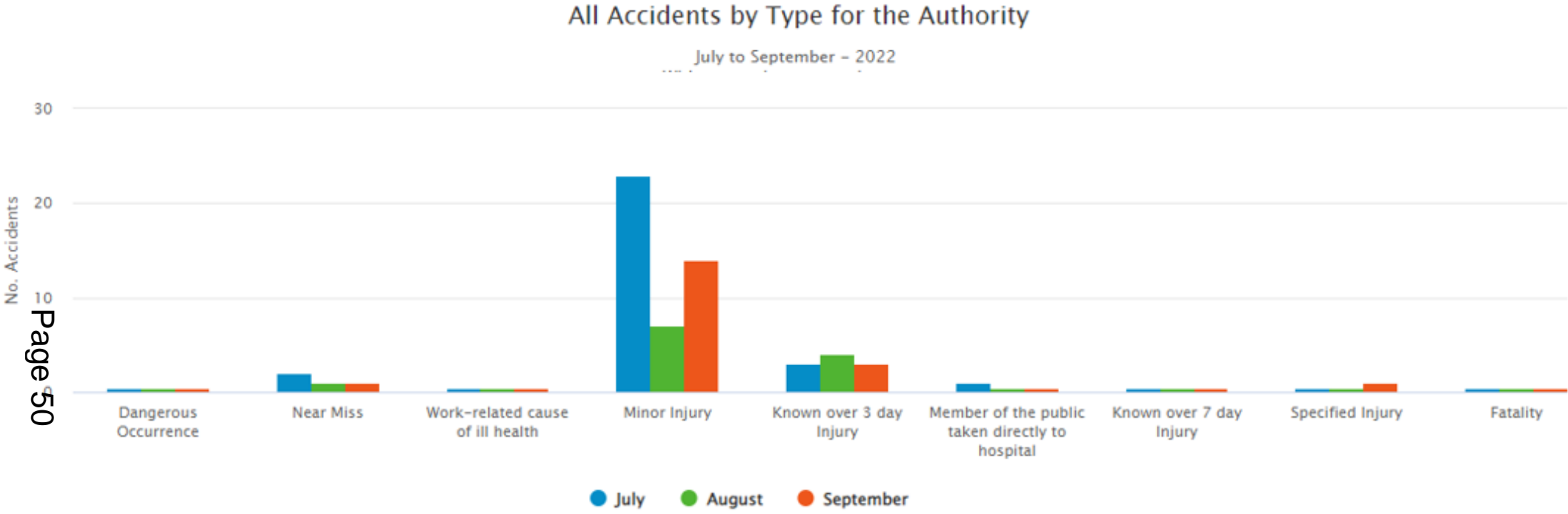
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**Appendices supporting Accident Statistics Report For Corporate Health and Safety Committee
14th November 2022 For Period April – September 2022.**

Below are the graphs illustrating the number of recorded incidents for the quarterly period of January to March 2022, and for each specified quarter period over the previous 2 years for comparison.

Unless specified otherwise, the figure of zero should be assumed in all cases.

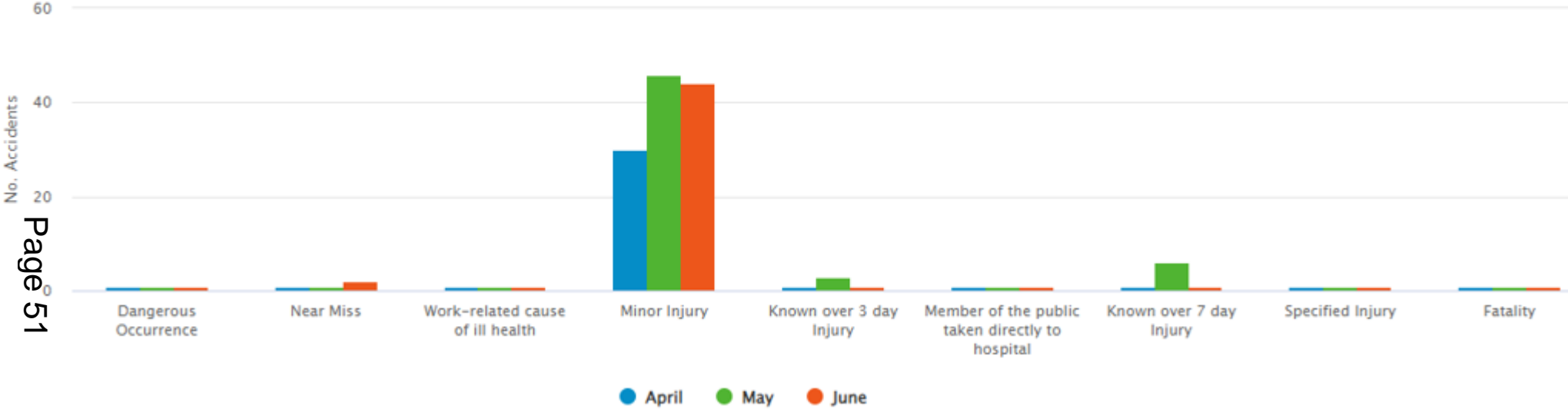
Appendix 1 – All accidents by Type for the Authority between July to September 2022



Appendix 2 – All accidents by Type for the Authority between April to June 2022

All Accidents by Type for the Authority

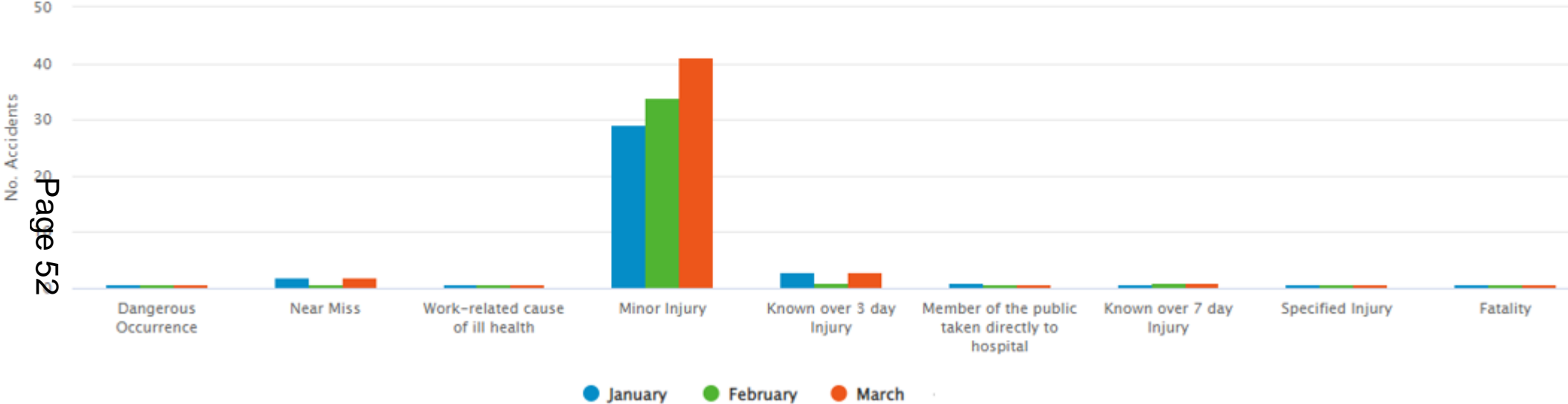
April to June - 2022



Appendix 3 – All accidents by Type for the Authority between January to March 2022

All Accidents by Type for the Authority

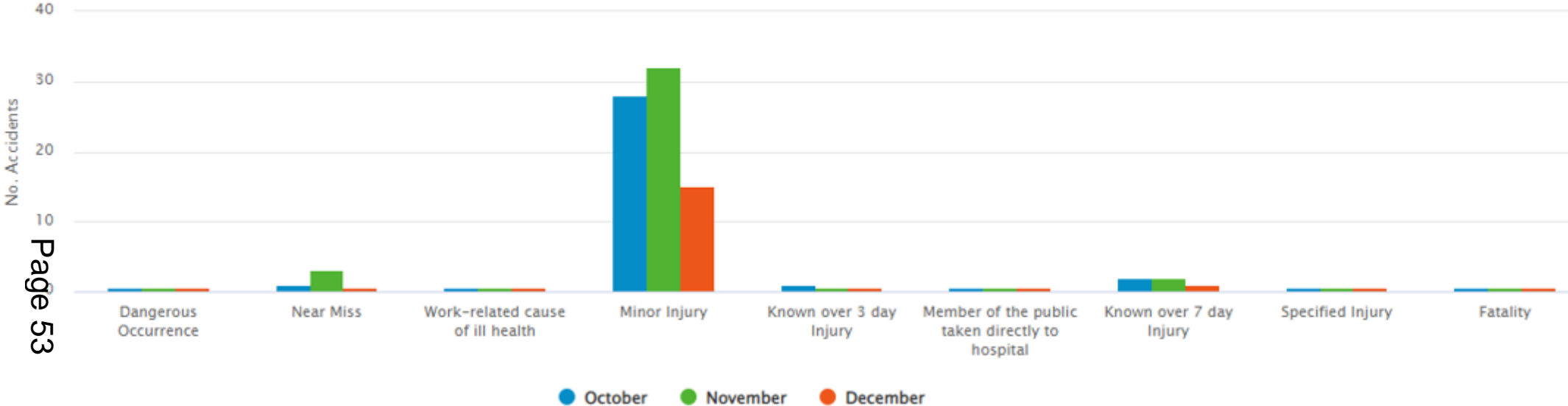
January to March - 2022



Appendix 4 - All accidents by Type for the Authority between October to December 2021

All Accidents by Type for the Authority

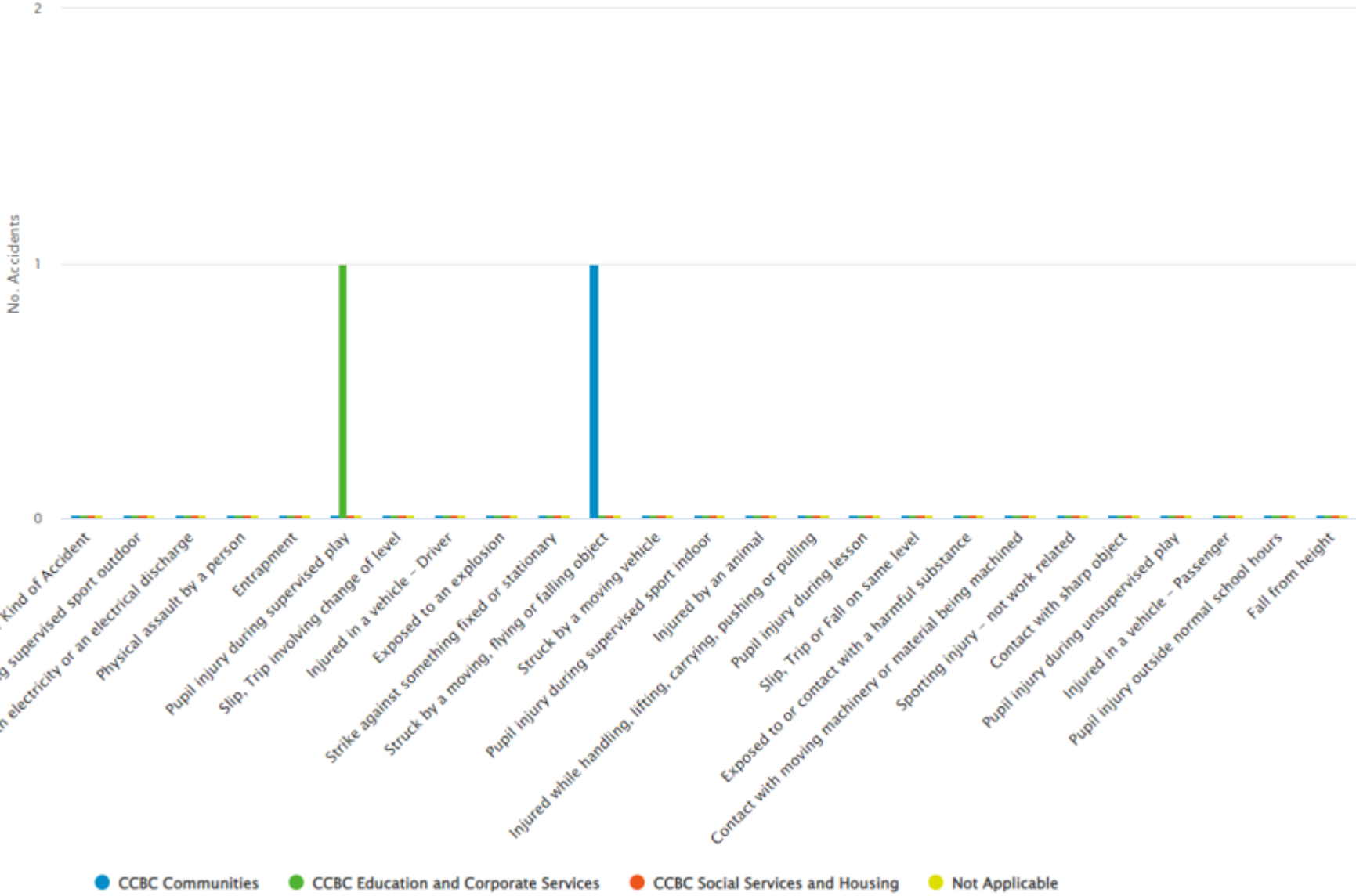
October to December - 2021



Appendix 5 – RIDDOR reportable accidents by Type and Directorate between July and September 2022

RIDDOR Reportable Accidents by Cause and Directorate

Between 01/07/2022 and 30/09/2022

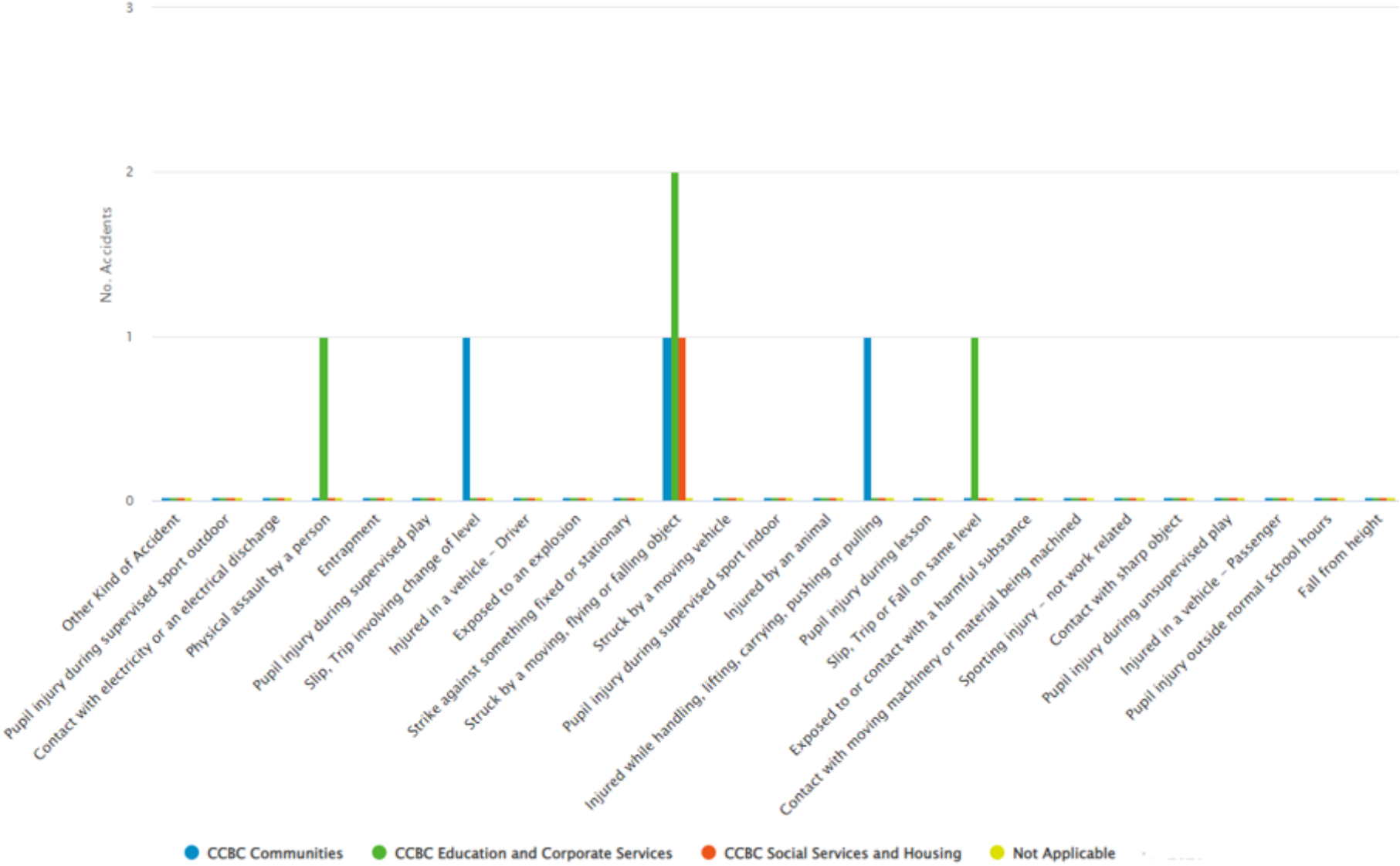


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Appendix 6 – RIDDOR reportable accidents by Type and Directorate between April and June 2022

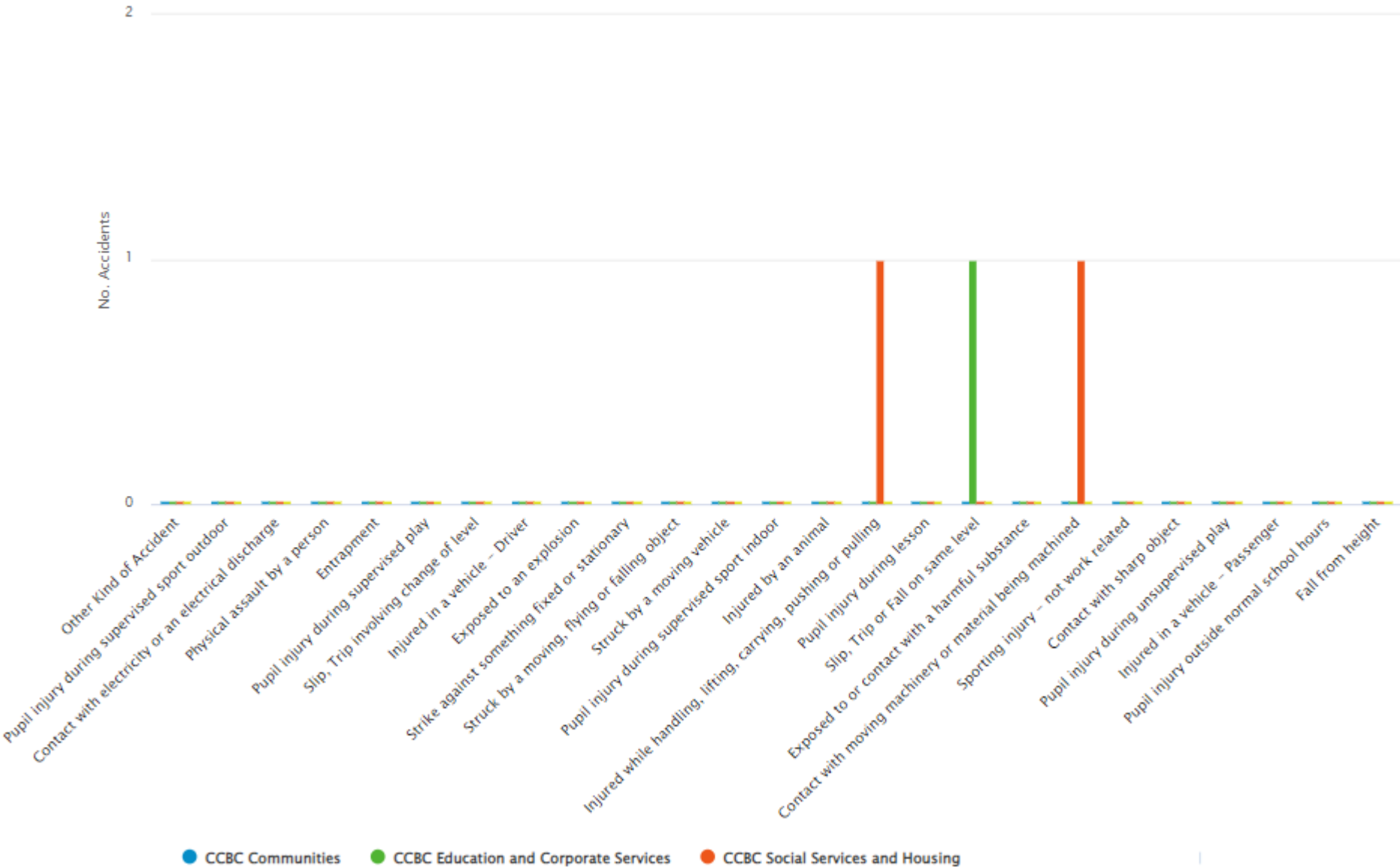
RIDDOR Reportable Accidents by Cause and Directorate

Between 01/04/2022 and 30/06/2022



Appendix 7 – RIDDOR reportable accidents by Type and Directorate between January - March 2022

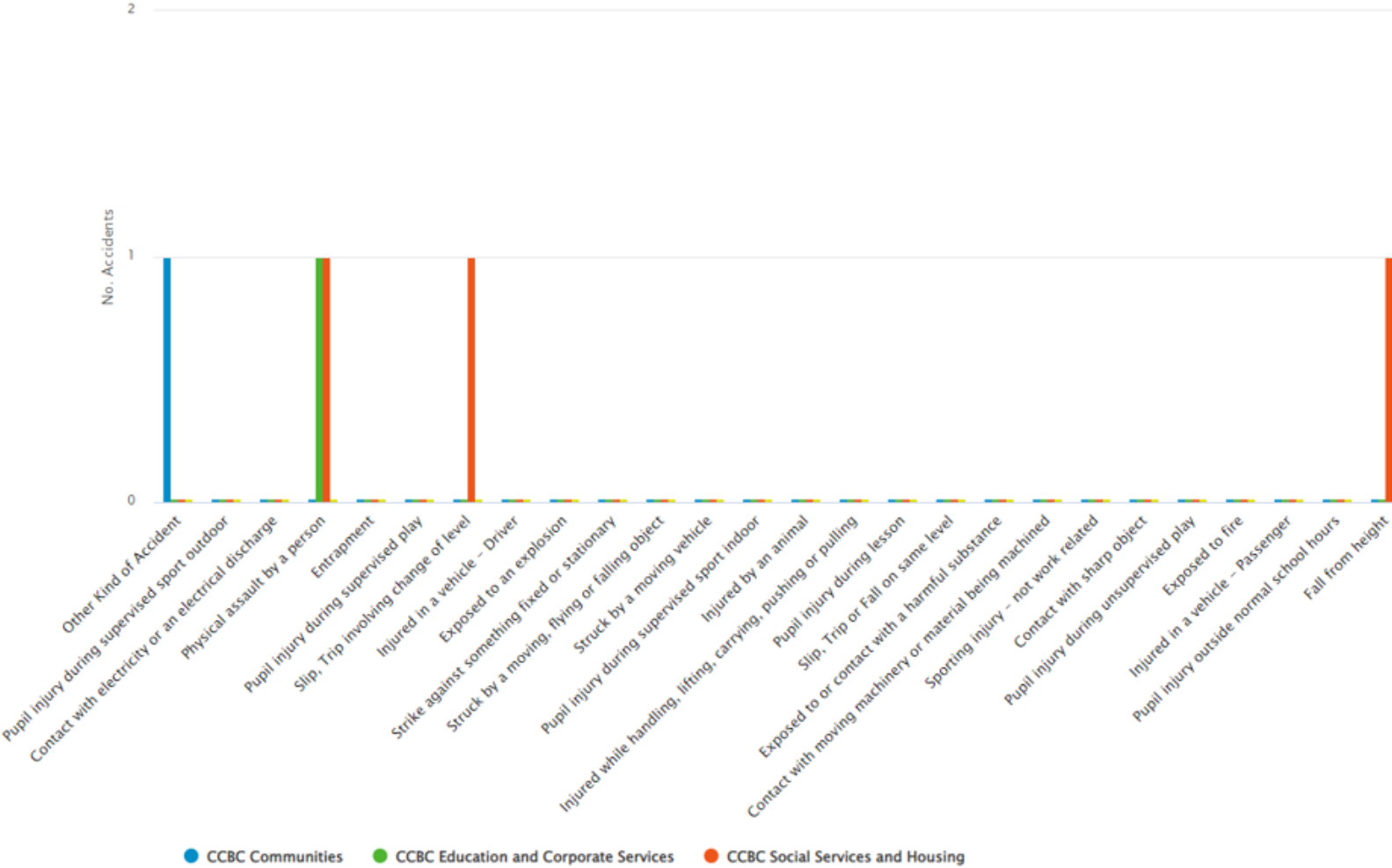
RIDDOR Reportable Accidents by Cause and Directorate



Appendix 8 – RIDDOR reportable accidents by Type and Directorate between October - December 2021

RIDDOR Reportable Accidents by Cause and Directorate

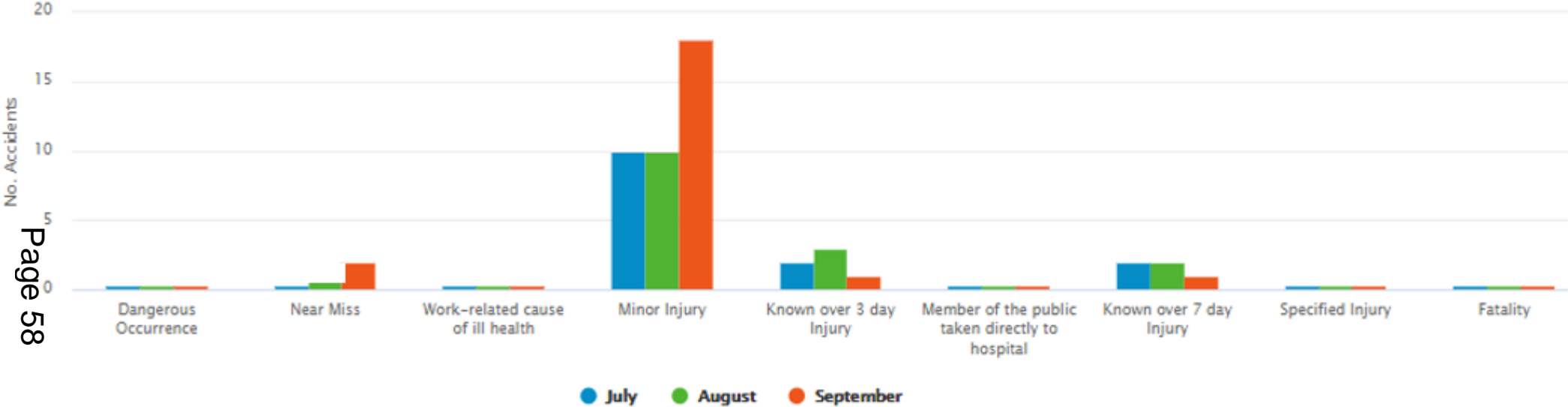
Between 01/10/2021 and 31/12/2021



Appendix 9 - All accidents by Type for the Authority between July - September 2021

All Accidents by Type for the Authority

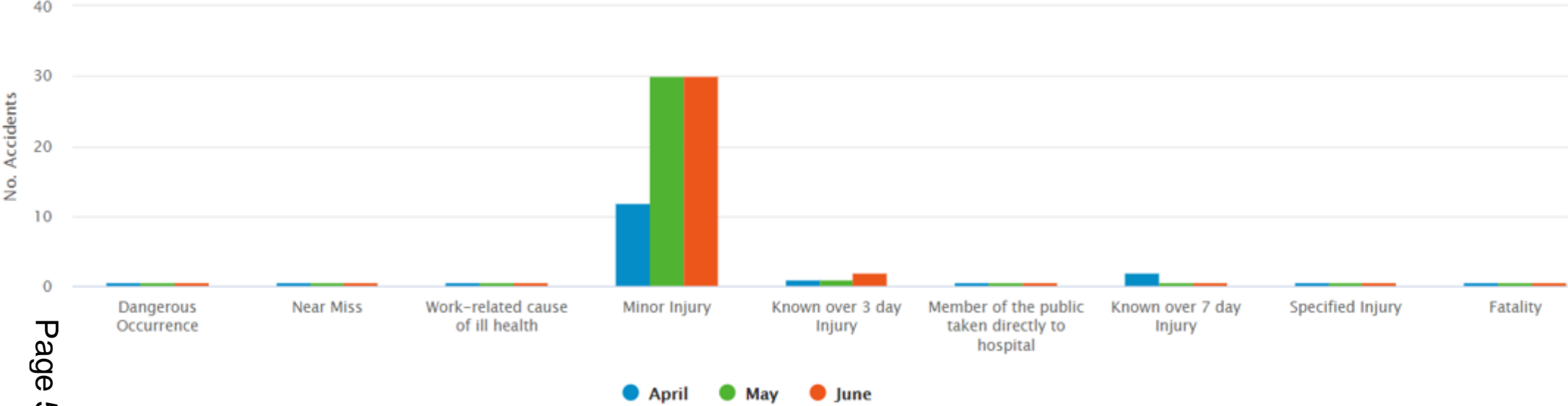
July to September - 2021
With comparison to previous year.



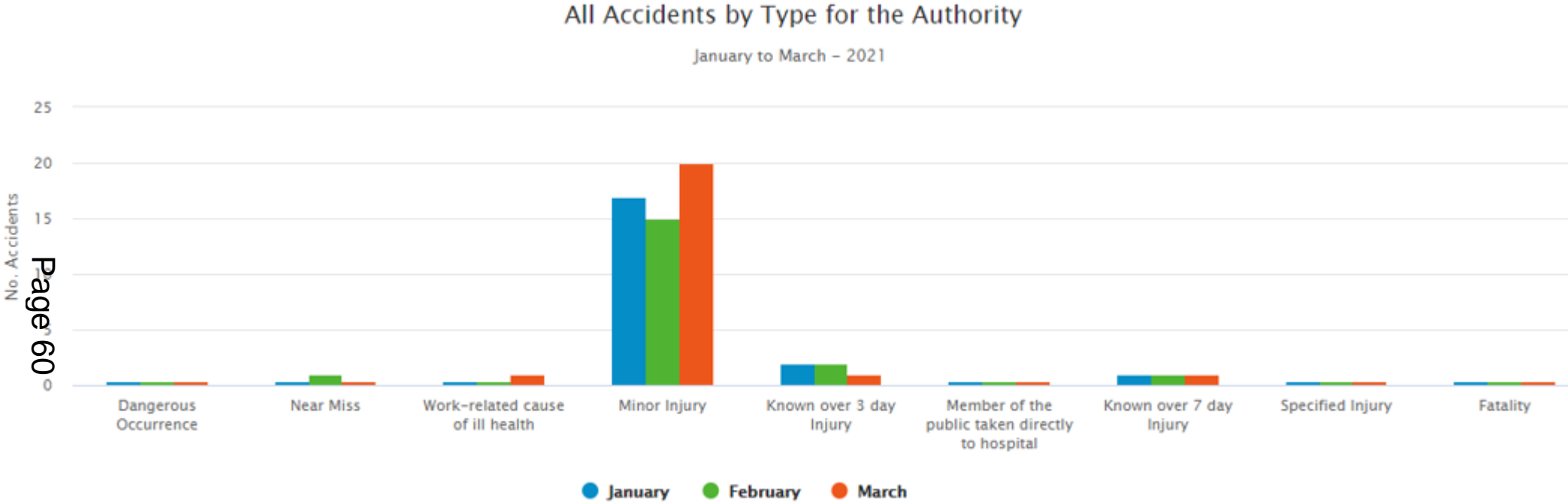
Appendix 10 - All accidents by Type for the Authority between April - June 2021

All Accidents by Type for the Authority

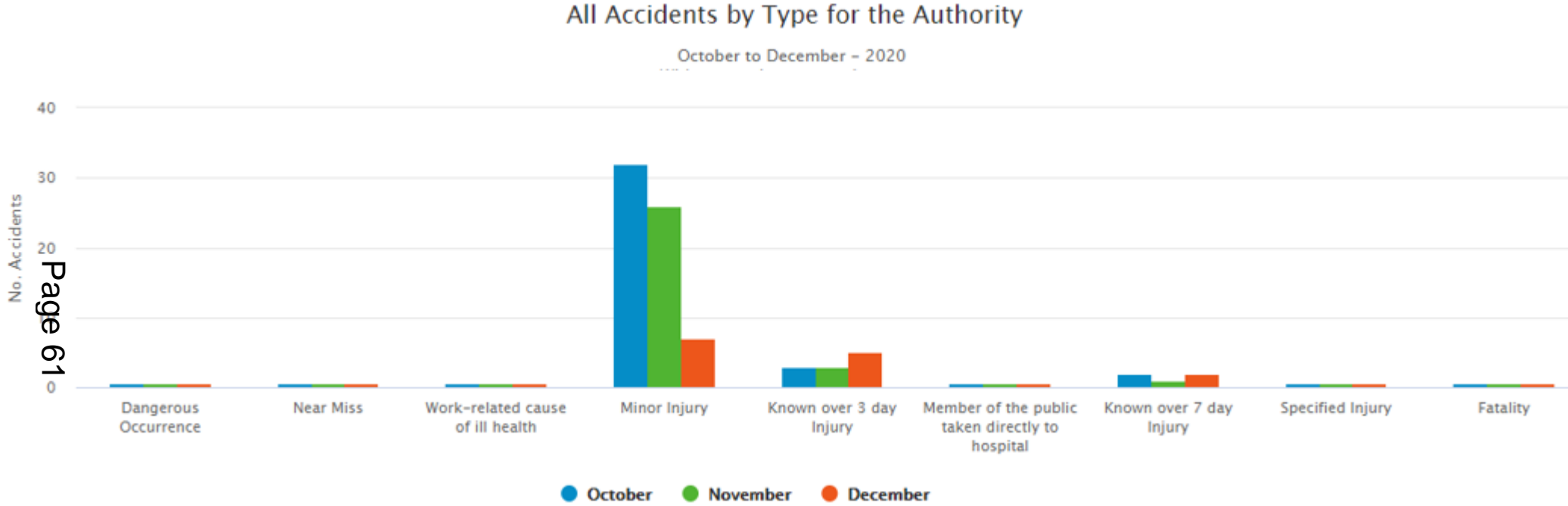
April to June - 2021



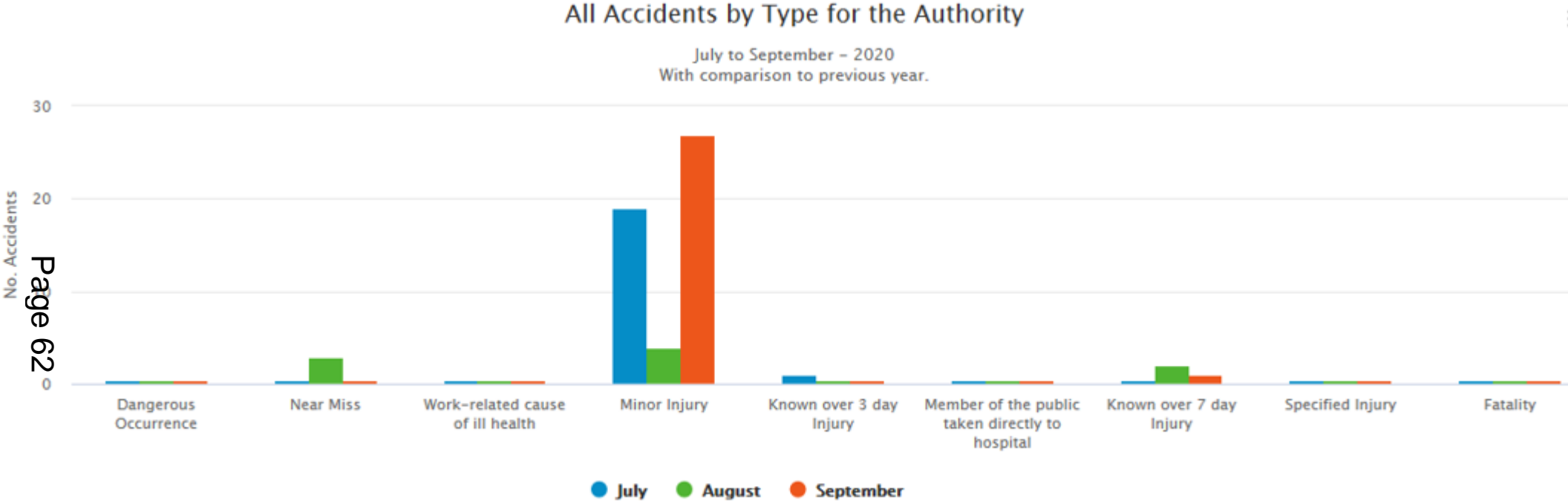
Appendix 11 - All accidents by Type for the Authority between January - March 2021



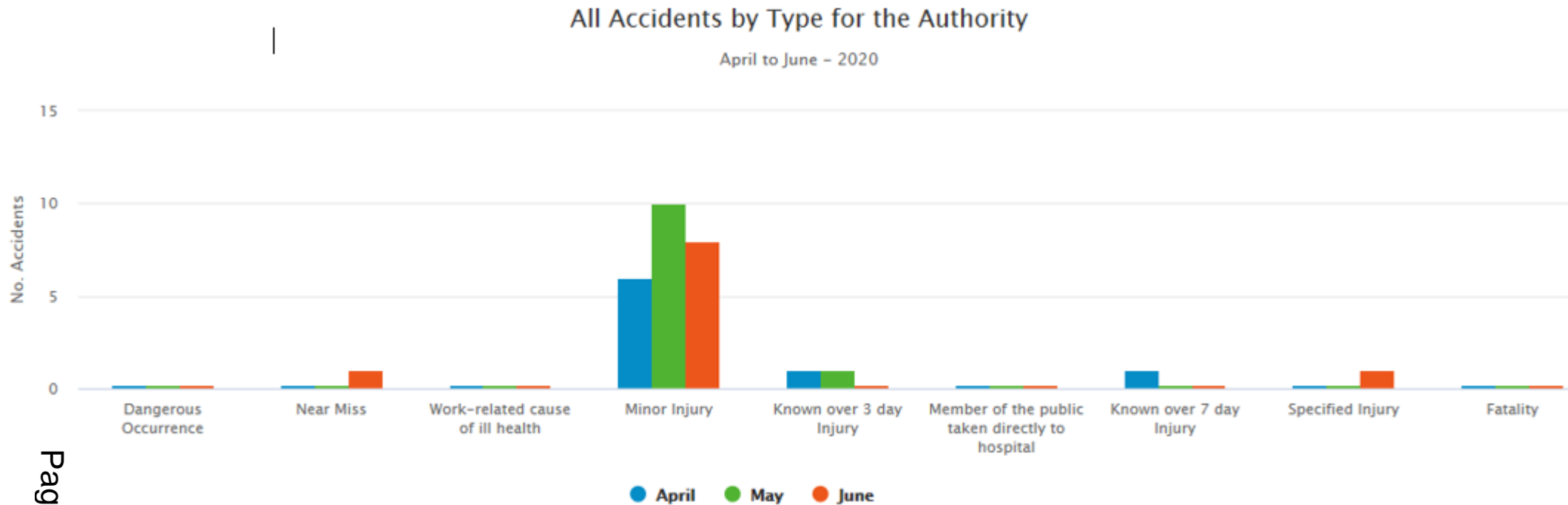
Appendix 12 - All accidents by Type for the Authority between October – December 2020



Appendix 13 - All accidents by Type for the Authority between July - September 2020



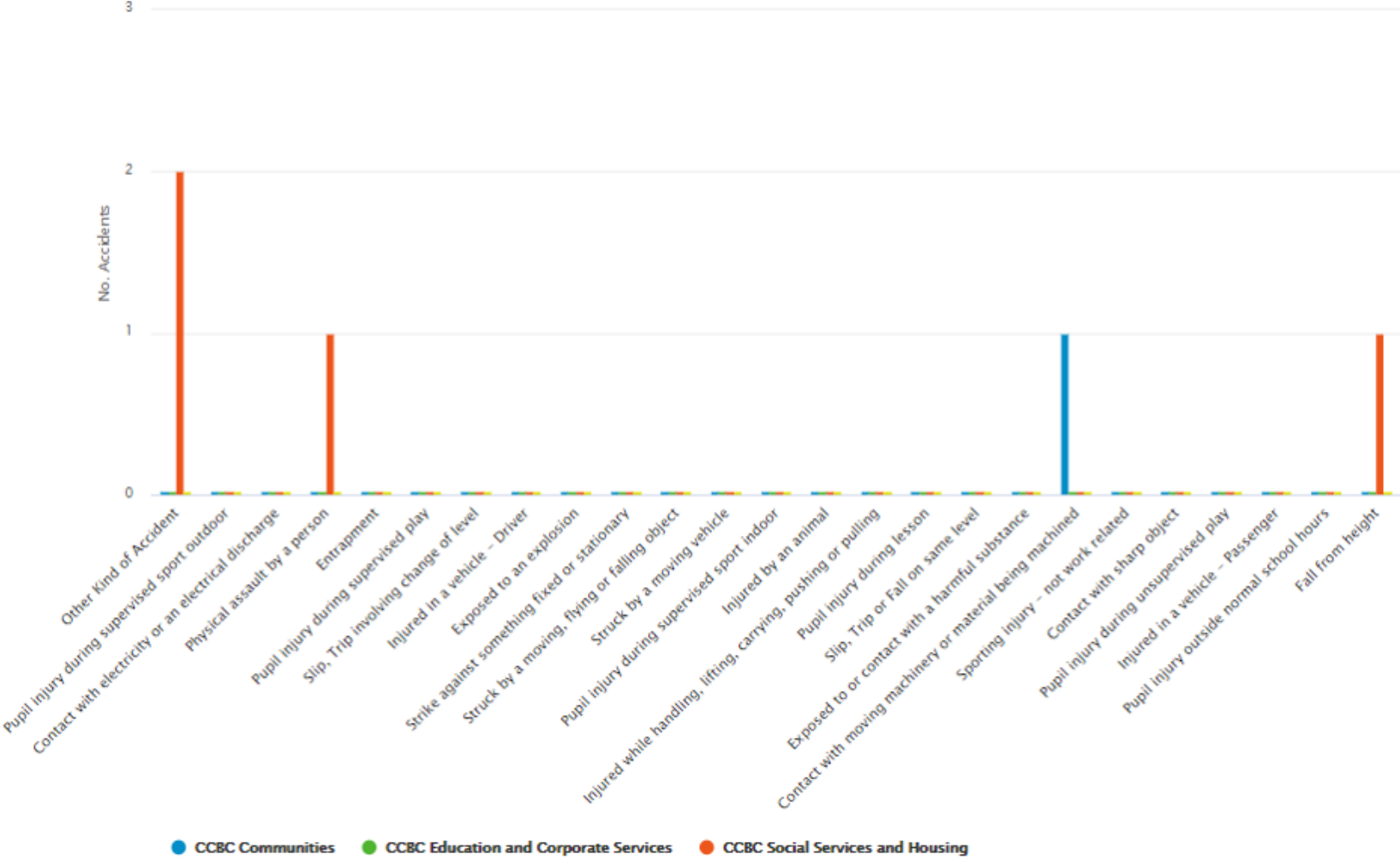
Appendix 14 - All accidents by Type for the Authority between April - June 2020



Appendix 15 – RIDDOR reportable accidents by Type and Directorate between July - September 2021

RIDDOR Reportable Accidents by Cause and Directorate

Between 01/07/2021 and 30/09/2021



Appendix 16 – RIDDOR reportable accidents by Type and Directorate between April - June 2021

RIDDOR Reportable Accidents by Cause and Directorate

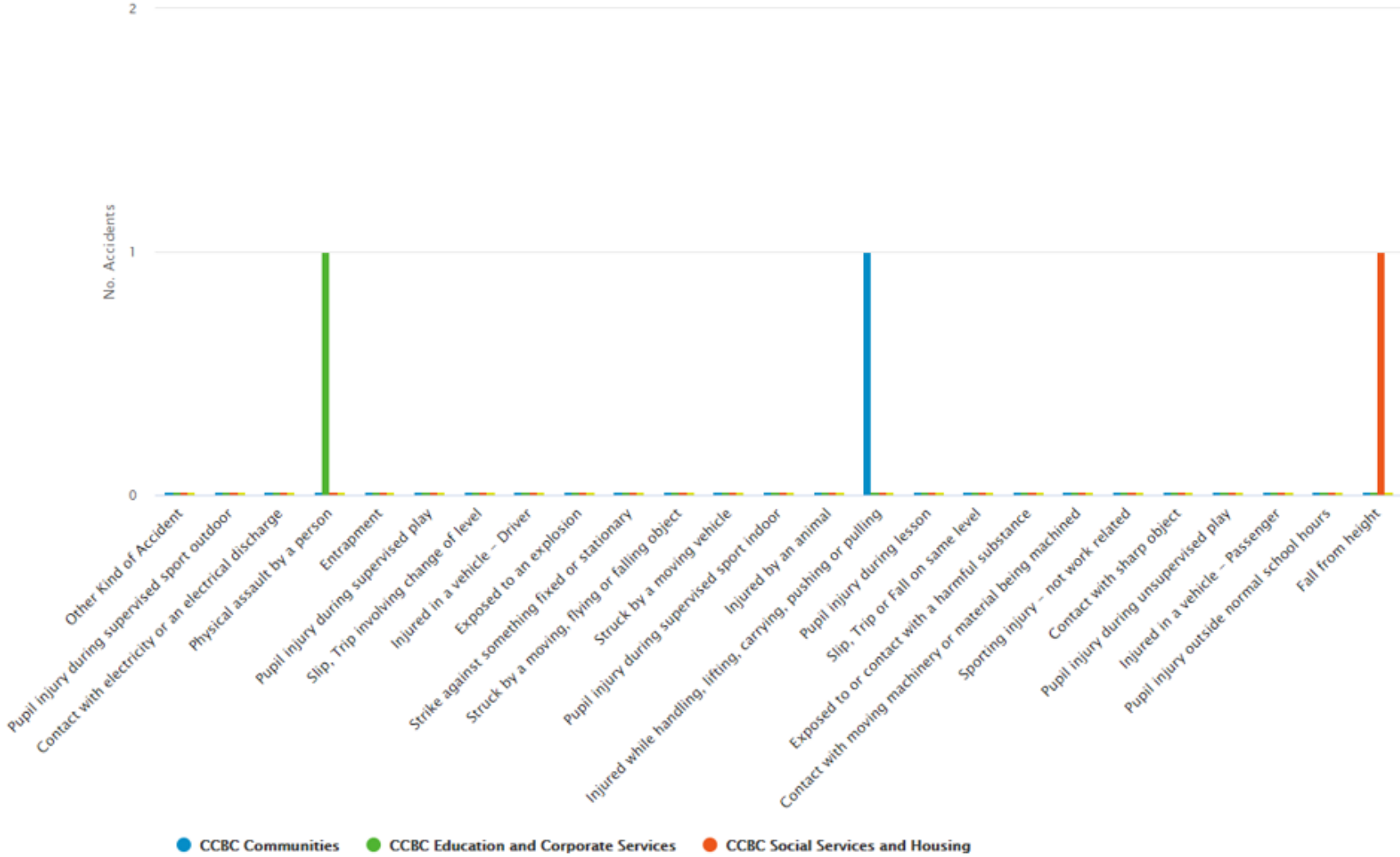
Between 01/04/2021 and 30/06/2021



Appendix 17 – RIDDOR reportable accidents by Type and Directorate between January - March 2021

RIDDOR Reportable Accidents by Cause and Directorate

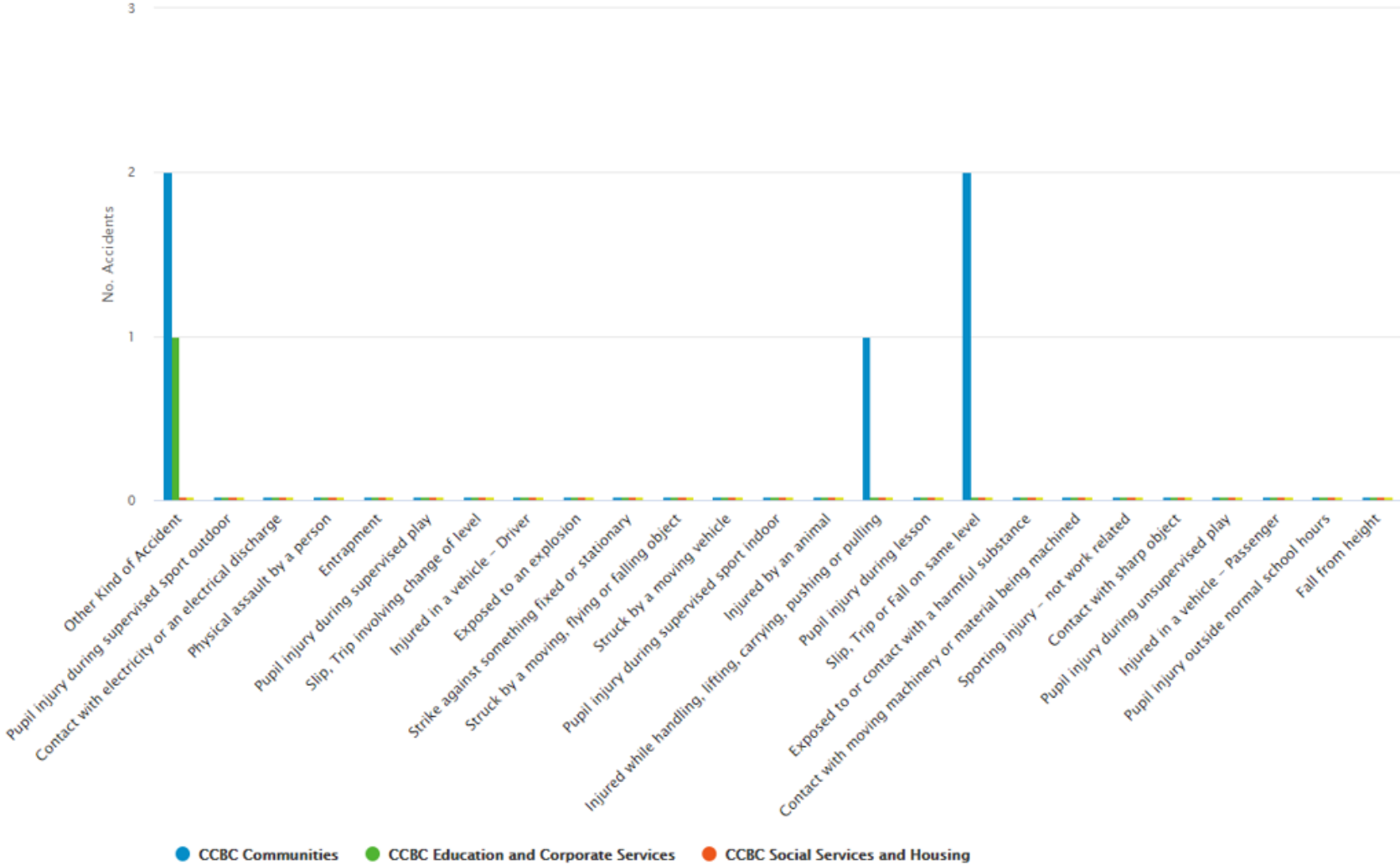
Between 01/01/2021 and 31/03/2021



Appendix 18 – RIDDOR reportable accidents by Type and Directorate between October – December 2020

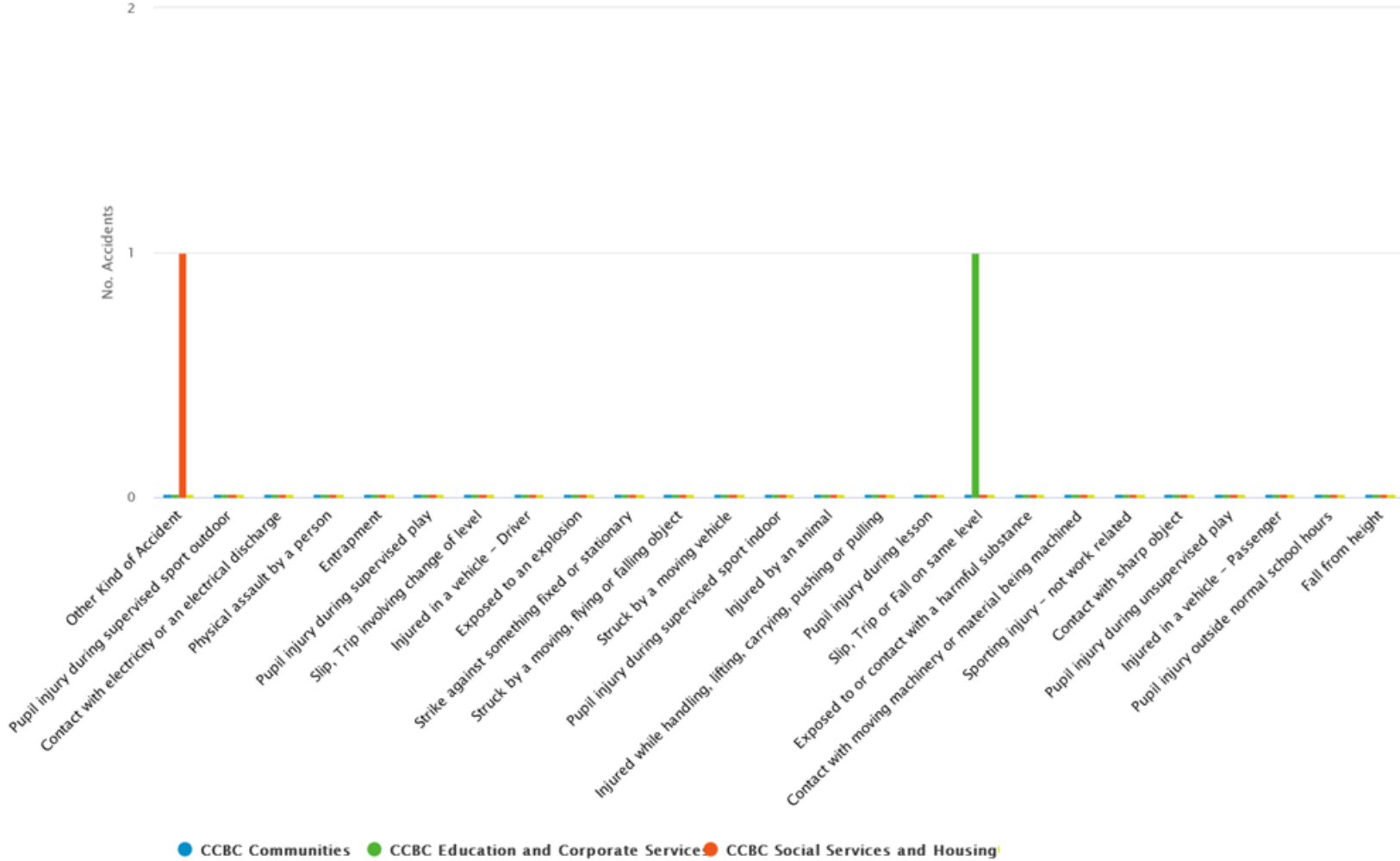
RIDDOR Reportable Accidents by Cause and Directorate

Between 01/10/2020 and 31/12/2020



Appendix 19 – RIDDOR reportable accidents by Type and Directorate between July - September 2020

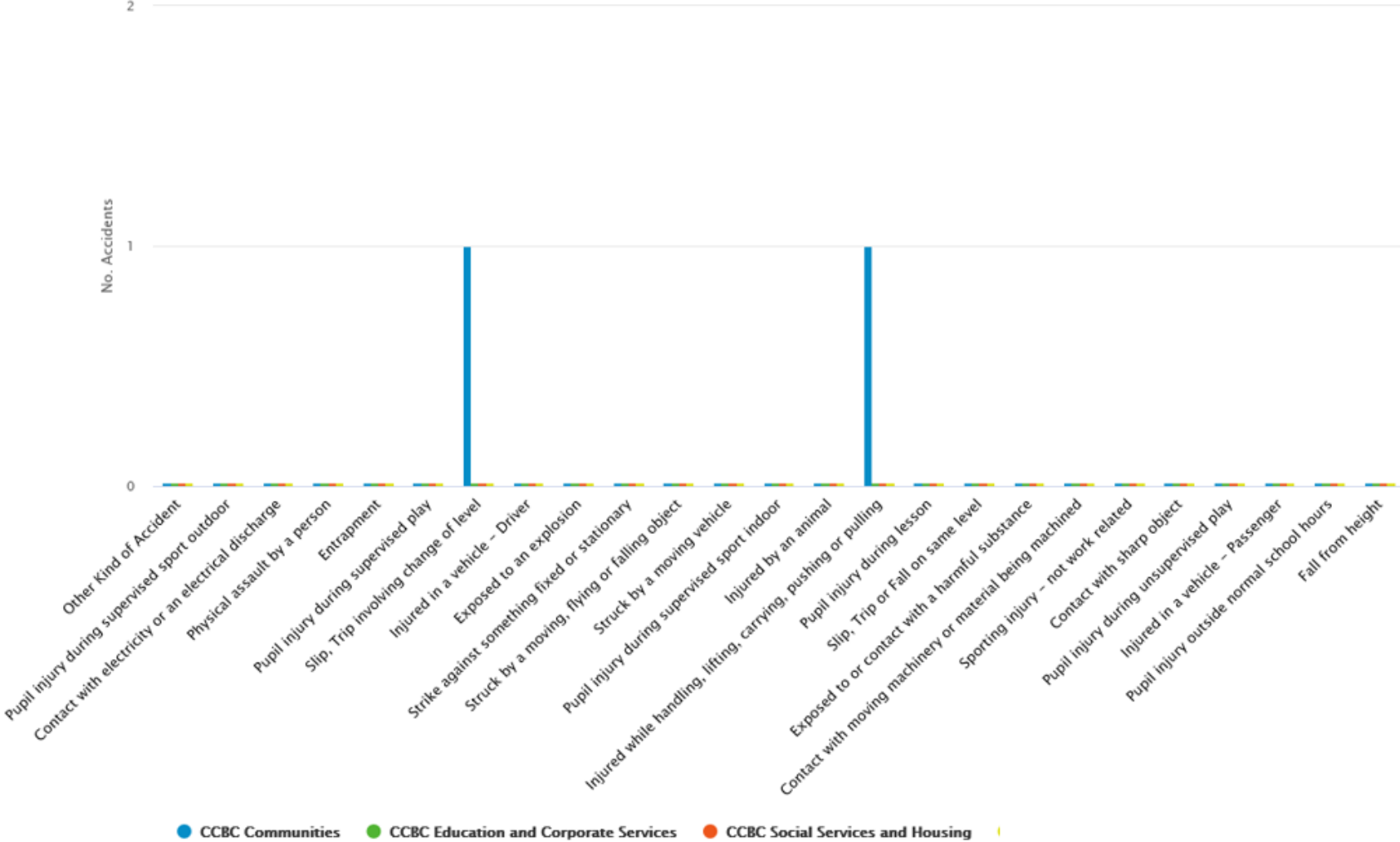
RIDDOR Reportable Accidents by Cause and Directorate
Between 01/07/2020 and 30/09/2020



Appendix 20 – RIDDOR reportable accidents by Type and Directorate between April – June 2020

RIDDOR Reportable Accidents by Cause and Directorate

Between 01/04/2020 and 30/06/2020



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