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For all enquiries relating to this agenda please contact Amy Dredge (Tel: 01443 863100 Email: dredga@caerphilly.gov.uk)

Date: 10th November 2015

Dear Sir/Madam,

A meeting of the Corporate Health and Safety Committee will be held in the Sirhowy Room, Penallta House, Tredomen, Ystrad Mynach on Monday, 16th November, 2015 at 10.00 am to consider the matters contained in the following agenda.

Yours faithfully,

Wis Burns

Chris Burns
INTERIM CHIEF EXECUTIVE

AGENDA

Pages

- 1 To receive apologies for absence.
- 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.
- 3 To approve and sign the following minutes:-
- 4 Corporate Health and Safety Committee held on 29th June 2015.

1 - 4



To receive and consider the following reports:-

- 5 Insurance Claims Presentation, Sue Ruddock, Risk and Insurance Manager.
- Statutory Maintenance Presentation, Donna Jones, Health, Safety and Welfare Service Manager.
- 7 Provision of Automated External Defibrillators (AED) in Council Premises.

5 - 8

8 Health and Safety Policies - Review Update

9 - 10

To receive and consider the following information items*:-

9 Accident Statistics Report for April - September 2015.

11 - 22

10 Recent HSE Updates.

23 - 26

Circulation:

Councillors M.A. Adams, P.J. Bevan, D.T. Hardacre, D. Havard, A.G. Higgs, G. J. Hughes and S. Kent Trade Union Representatives.

And Appropriate Officers

^{*} If a member of the Committee wishes for either of the above information items to be brought forward for discussion at the meeting please contact Amy Dredge, Tel. 01443 863100 by 10.00 am on Friday 13th November 2015,



CORPORATE HEALTH AND SAFETY COMMITTEE

MINUTES OF THE MEETING HELD AT PENALLTA HOUSE, TREDOMEN, ON MONDAY, 29TH JUNE 2015 AT 10.00 AM

PRESENT:	
Councillors:	

M.A. Adams, P.J. Bevan, D. Havard, A.G. Higgs.

Together with:

D. Jones (Service Manager, Health, Safety and Welfare), E. Townsend (Deputy Health and Safety Manager), T. Phillips (Health and Safety Manager), P. James (Health and Safety Manager), L. Donovan (Acting Head of HR & Organisational Development), S. Hawkins (Community Centres Service Manager), S.M. Kauczok (Committee Services Officer).

Trade Union Representatives:

N. Funnell (GMB), J.A. Garcia (UNISON).

1. APPOINTMENT OF CHAIR

It was moved and seconded that Councillor D. Havard be appointed Chair of the Corporate Health and Safety Committee for the ensuing year. By a show of hands this was unanimously agreed. Councillor Havard took the chair for the remainder of the meeting.

2. APPOINTMENT OF VICE CHAIR

It was moved and seconded that Councillor M. Adams be appointed Vice Chair of the Corporate Health and Safety Committee for the ensuing year. By a show of hands this was unanimously agreed.

3. APOLOGIES FOR ABSENCE

Apologies for absence had been received from Councillor G.J. Hughes, Councillor S. Kent, Mr M.S. Williams (Head of Community and Leisure).

4. DECLARATIONS OF INTEREST

There were no declarations of interest made at the beginning or during the course of the meeting.

5. MINUTES

RESOLVED that the minutes of the Corporate Health and Safety Committee held on 24th February 2015 be approved as a correct record and signed by the Chair.

6. SHARON KAUCZOK

It was noted that Sharon Kauczok, Committee Services Officer, would soon be leaving the Authority. Members and officers placed on record their appreciation of the efficient and courteous manner in which Sharon had undertaken her role and wished her a happy and healthy retirement.

REPORTS OF OFFICERS

Consideration was given to the following reports.

7. ANNUAL HEALTH AND SAFETY REPORT – PRESENTATION BY DONNA JONES, SERVICE MANAGER, HEALTH, SAFETY AND WELFARE

Donna Jones, Service Manager, Health, Safety and Welfare, highlighted the key issues within the Health, Safety, Occupational Health and Risk Management Annual Report for 2014-15, copies of which were circulated at the meeting. As with all service areas, Health and Safety have made required efficiency savings and resources have been targeted at high risk areas for improvement and monitoring.

The past year has seen significant proactive work being undertaken particularly in schools, where additional resources have been deployed to support primary schools through an increased Service Level Agreement (SLA). Improving competency has been a strong theme with mandatory training being delivered to senior management and school caretakers. Stress and mental health are a continuing issue and are reflected throughout the report in terms of risk assessments, training and Care First statistics. Further Health and Safety projects/improvements made over the past year are detailed in the report, as well as health and safety performance and activities for 2014/15.

In July 2014, Cabinet approved the funding of an asbestos removal project across 37 schools. The project once completed will see all amosite asbestos containing products removed from occupied areas of school buildings. Details of the works completed at schools during the reporting year are set out in the report. The Authority will continue to monitor the pressure testing maintenance of powered gates within its schools and parks. The current position from the inspection programme is set out in the Annual Report.

Officers have also completed a review of Children and Adult Services and the controls in place to minimise the risks to staff from lone working and violence and aggression. There will be recommendations in the resulting report on risk assessment, provision of the Employee Protection Register and reporting incidents. The recommendations will be incorporated into a bespoke training package for relevant staff.

The School Caretaker Safety Handbook has been updated and mandatory training will be delivered in the next financial year, to ensure that school caretakers are undertaking work, safely and with the appropriate equipment.

It was noted that no enforcement action had been issued against the Council during the reporting period although the HSE did undertake an investigation into an accident involving a primary school pupil who sustained an injury as a result of a fall from height during a school visit. The investigation highlighted a material breach of health and safety regulations and a

Fee For Intervention invoice was issued against the Authority. As the breach was the responsibility of the school involved, under delegated duties, the FFI cost was passed to the school for payment. South Wales Fire Service issued five Fire Advisory Notices during 2014-15, the details of which are set out in the report. Officers have been working with tenants, Housing colleagues and Fire Officers in terms of fire safety.

Details of all recorded accidents reported to the Health and Safety Division between April 2014 and March 2015 are set out in Table 1 in the report. The total number of accidents has increased by 11 from 361 in 2013/14 to 407 in 2014/15. However, the total number of reportable accidents has reduced from 43 in 2013/14 to 35 in 2014/15, which shows that instances of more serious accidents reduced last year.

Health and Safety inspections/ audits are undertaken and updated onto RAMIS and corrective actions are programmed to ensure that Building Mangers close out the actions with evidence. There had been a slight increase in the number of inspections undertaken although the number of general Health and Safety inspections has reduced slightly.

There has been a marked increase in the demand for Occupational Health services. In the medium to long term, a senior nurse will need to be recruited to provide sufficient resources for the service. Currently 6 nurse clinics take place each week to cover the demand on the service. Statutory health surveillance continues to be undertaken in house on a rolling programme for HAVS, audiometry and medical health screening for those in posts which can present particular risks to health.

In terms of the "Care First" Employee Assistance Programme, there had been 246 new cases which represents extremely good usage. It was noted that the increase in the number of reported stress cases for 2014/15 are solely linked to employees undergoing disciplinary procedures, a reduction in staff linked to the MTFP and an increase in workload.

During 2014/15 the Authority received 14 new employers liability claims, a reduction on last year's figures. The total cost of claims for 2014/15 was £184,906.50 which is a drop of £29.459.76.

Good progress had been made on the key priorities that were put forward for 2014/15 i.e. Mental Health Support and Training; Asbestos Removal Programme in Schools; Completion of Disaster Recovery/Education Continuity Plans for all Schools; Premium Health and Safety SLA Service to Schools and General Inspections to Residential Homes/Day Centres.

The key priorities for 2014/15 were the completion of the Asbestos Removal Programme in Schools; the SLA with Cardiff Council in terms of managing their Health and Safety function; Radon Monitoring in Schools; a Review of Drug and Alcohol support; Construction Management Review.

Following the very informative presentation discussion ensued on the issues raised. Further information was sought on radon monitoring, the financial implications relating to employer liability claims and possible measures that could be taken to reduce the number of stress related cases linked to disciplinary cases. The Acting Head of HR and Organisational Development advised that HR would be happy to discuss the latter with the Trade Unions.

8. EDUCATION HEALTH AND SAFETY INSPECTION UPDATE

The Committee received an update on the ongoing developments arranged by Health and Safety Officers within maintained Caerphilly schools in relation to automatic powered access gates.

Health and Safety originally reported the level of non-compliance relating to the Local Authority installations in September 2014. The Health and Safety Section and Risk

Management in consultation with Building Consultancy decided to commission independent reports for each site. These were completed on 20th and 21st January. The report cost the Health and Safety and Risk Management areas £2.5k to commission. Originally a total of 10 Inspections were completed between June and August 2014, 7 of which were Primary schools. Subsequently two further sites have been identified, one is an Authority Depot site and one at Llancaiach Fawr Manor House.

The Authority officer audit initially indicated a high level of non- compliance with the BS EN 12453 standard. Schools have subsequently received individual reports and feedback on remedial actions required. The Authority also arranged an independent assessor to provide schools with relevant written advice to achieve compliance on 27th March 2015. This was financed and arranged by Health and Safety and Risk Management as a one off, to establish a base line from which the schools must upgrade their gates to the required standard.

It will be for the schools to keep the gates maintained to the relevant BS EN 12453 standard. The Authority will monitor the pressure testing maintenance of the gates via the RAMIS system and every two years via the school management audits. The current situation for primary schools is set out in paragraph 4.6 of the report. Pressure testing has been completed for all with the exception of Bryn Primary School who are in discussion with the supplier.

Serious concerns have been raised by the monitoring exercise with regard to the installation of powered gates and it was stressed that sites should only progress with such installation if they have engaged the service of an Authority technical department, due to the technical and engineering specialism of this particular equipment.

Following consideration and discussion, the Corporate Health and Safety Committee noted the report.

9. INFORMATION ITEMS

The following reports were received and noted: -

Accident Statistics Report for January – March 2015.

The Committee received a verbal update from officers on the major reportable accidents that have occurred across the Authority over the past year. In response to a request from a Member for details of the total cost to the Authority arising from reported accidents and incidents, it was agreed that arrangements would be made for the Committee to receive a presentation from Risk Management in this respect..

2. Recent HSE Updates.

The meeting closed at 11.15 am.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 16th November 2015, they were signed by the Chair.

CHAIR	



CORPORATE HEALTH AND SAFETY COMMITTEE - 16TH NOVEMBER 2015

SUBJECT: PROVISION OF AUTOMATED EXTERNAL DEFIBRILLATORS (AED) IN

COUNCIL PREMISES

REPORT BY: INTERIM CHIEF EXECUTIVE

1. PURPOSE OF REPORT

The purpose of this report is to inform Committee Members of the recent approval by the Corporate Management Team for the installation of Automated External Defibrillator (AED) in identified CCBC premises.

2. BACKGROUND

- 2.1 The most common cause for a heart to stop (cardiac arrest) is a 'heart attack', if the heart attack results in cardiac arrest it is usually because it has interrupted the heart electrical impulses. The definitive treatment for this condition is to deliver a controlled electric shock through the heart, this is called defibrillation.
- 2.2 Currently 30,000 people in the UK each year have a cardiac arrest out of hospital, and NHS data shows just 18.5% of them survive.
- 2.3 A recent IOSH survey of 1000 businesses found that more than half did not possess these life-saving devices, and two thirds of those were medium-sized to large companies.
- 2.4 AED's have only been corporately provided in Leisure Centres, however there are a number of AED's sited in Council premises, most have been donated by charities. There is currently no corporate policy on the provision of AED's in Council premises.

3. REPORT

- 3.1 Most cases of cardiac arrest are due to ventricular fibrillation, a condition where the electrical control of the heart becomes disorganised.
- 3.2 An AED is a safe, reliable, computerised device that can analyse heart rhythms and enable a non-medically qualified rescuer to safely deliver the life saving shock.
- 3.3 The administration of the shock from an AED is the only effective therapy for cardiac arrest caused by ventricular fibrillation, or pulseless ventricular tachycardia.

Cardiopulmonary resuscitation (CPR), on its own will not restart a heart in this condition.

- 3.4 There is numerous scientific evidence to support early defibrillation, the delay from collapse to delivery of a shock is the single most important factor influencing survival. If defibrillation is delivered promptly, survival rates as high as 75% have been reported. The chances of successful defibrillation decline at a rate of about 10% with every minute that a shock is delayed, after 12 minutes, the survival rate is less than 5%
- 3.5 Procurement Services have sourced an AED unit at a discounted rate which is suitable for use on an adult or child. The device has been reviewed by Health and Safety and meets the specification provided, its easy to use and is designed specifically for public access use. The AED will only permit the administration of the shock when it determines the heart is in failure. Health and Safety have training units which can be used for training staff in the use of an AED, to ensure staff feel confident when operating a unit, which will reduce the time taken to set up and administer defibrillation in an emergency.
- 3.6 The AED uses clear voice instructions and guides you through each step of defibrillation, including CPR coaching.
- 3.7 The AED is battery powered and does not require charging; the battery has a standby life of 4 years and comes with a 5 year warranty.
- 3.8 The AED requires daily checks to ensure it remains operational.

4. EQUALITIES IMPLICATIONS

4.1 The provision of AED's in corporate Buildings will assist with the emergency treatment in life saving situations of individuals who may have a diagnosed heart condition which would be covered by the Equalities Act.

6. FINANCIAL IMPLICATIONS

6.1 Procurement have sourced suitable units via. an NHS framework the cost of each unit is approximately 50% lower than recommended retail cost, which provides excellent value for money.

The costs are detailed below, it is recommended that the cost of the equipment and training is to be covered by relevant service areas:-

AED £452.78
Spare Battery Pack £78.15
Spare Pads Pack £19.67
AED Prep Kit £9.32

6.2 The Health and Safety Division will provide initial training at a cost of £50 per person using the STA training package, costs will cover registration and handbook. Refresher training will be provided every six months at a nominal charge of £10 per person with discount for group bookings. Once an AED is installed in a workplace, there should be at least one person on site who has received the relevant training, with consideration given to leave an absence cover.

- 6.3 Leisure centers installed AED's a number of years ago due to the likelihood of a unit being required in an emergency. This was undertaken in consultation with Health and Safety, the required ongoing re-fresher training is being undertaken.
- 6.4 Following the tragic deaths of two Caerphilly pupils from undiagnosed heart conditions some secondary schools have already purchased or had an AED donated. It is not known if training has been provided and the required on-going re-refresher training being undertaken. Health and Safety will advise schools of the arrangements which should be in place to support the use of such devices.
- Based on the information contained within this report it was recommend to Corporate Management Team that AED's are located in identified premises, these being:
 - All Corporate Offices
 - Secondary schools
 - At other Council premises where approved by the relevant Head of Service or Headteacher & Governing Body
- 6.6 Health and Safety will advise on number of units required at each premises and their location. All AED units should be ordered via. Health & Safety, who will also provide training in the use of an AED on a six monthly basis to relevant staff.
- 6.7 Where AED's are provided First Aid staffing provision to be considered by Building Managers to ensure that a trained employee is on site during opening hours.
- 6.8 Where AED's are donated to CCBC premises where Council employees are located, relevant staff will be required to undergo training on a six monthly basis to ensure they are confident in using the AED.
- 6.9 Health and Safety to write to Heads of Service and Headteachers to advise of the recommendation and arrangements for purchasing, installation and training.

7. PERSONNEL IMPLICATIONS

- 7.1 There are no personnel implications other than to ensure that relevant staff, normally first aid trained personnel receive appropriate training in the use and maintenance of the AED. The training in the use of an AED is voluntary and some staff may not wish to undertake the training or be responsible for using an AED in an emergency.
- 7.2 Emotional support via. Carefirst to be provided to any employee involved in the use of an AED.
- 7.3 All instances of AED use to be recorded and reported on relevant paperwork.
- 7.4 Union Representatives have been advised of the plans and agree to the proposals.

8. CONSULTATION

8.1 The initiative was consulted upon prior to reporting to the Corporate Management Team.

9. LEGAL REQUIREMENTS

9.1 There is no legislation in the UK that explicitly requires an employer to provide defibrillators, however, under both the law of negligence and the Health and Safety at Work, etc. Act 1974, the Authority owe a duty of care to employees and others who might reasonably by affected by the control of our business or undertaking.

10. RECOMMENDATIONS

10.1 Committee members to note the content of the report and support the initiative.

11. REASONS FOR RECOMMENDATIONS

11.1 To provide lifesaving equipment which can be utilised in the event of an emergency within public buildings.

Author: Donna Jones, Service Manager, Health, Safety and Welfare.

Consultees: Chris Burns, Interim Chief Executive,

Lynne Donovan, Acting Head of Human Resources and Organisational

Development

Cllr C. Forehead, Cabinet Member for Human Resources and

Governance/Business Manager Corporate Management Team

Lynne Donavan, Acting Head of People Management

Liz Lucas, Head of Procurement

Colin Jones, Head of Property & Performance Angharad Price, Head of Democratic Services

Paul James, Health & Safety Manager



CORPORATE HEALTH AND SAFETY COMMITTEE – 16TH NOVEMBER 2015

SUBJECT: HEALTH AND SAFETY POLCIES – REVIEW UPDATE

REPORT BY: INTERIM CHIEF EXECUTIVE

1. PURPOSE OF REPORT

1.1 The following report is provided to Elected Members, Union Representatives and Officers as a formal update on the recent update to health and safety policies and Corporate Management arrangements, CMA's.

2. BACKGROUND

2.1 Health and Safety division have numerous polices and CMA's in place to manage risks across the Authority. Part of the ongoing process of health and safety is the review of polices and CMA's, and as such, a formal review of each policy and CMA must take place every 3 years. The review allows policies and CMA's to be updated to reflect a change in working practices and to reflect any changes in health and safety legislation.

REPORT

- 3.1 As part of the review process the following polices and CMA's have been updated:
 - First aid at work.
 - Lone Working,
 - Accident reporting and investigation,
 - Control of substances hazardous to health.
 - Risk assessment,
 - Display screen equipment,
 - · Fire safety,
 - Manual handling.

All of the polices and CMA's have had wording changes to reflect minor changes, updated review dates etc. The following policies have additional duties added for heads of service, managers and employees:

<u>First aid policy and CMA</u> – The policy has been updated to reflect CMT recent approval to install Automated External Deliberators, AED's, to all Corporate offices. For all other buildings, including schools, approval is needed from the head of services / head teacher to install an AED. Where an AED has been installed the policy requires that training is provided to ensure a trained employee is on site during opening hours, where an AED has been donated to a CCBC building, the relevant training must also be provided. The policy also requires the AED is serviced in accordance with manufacturer's recommendations and the necessary routine checks are carried out on a daily basis.

Lone Working policy and CMA – The policy has been updated to require Managers to determine if they have any night works and to ensure the employee completes a night worker assessment and thereafter on a three yearly basis, as required under the Working Time Regulations 1998, which implements the European Working Time Directive into British law. Under the Regulations night time is defined as the period between 11pm to 6am and a night worker is defined as someone who regularly works at least 3 hours of daily working time between these hours. The policy also requires the employee to notify their Manager immediately if there are changes in their personal health, which may affect their ability or suitability to nigh work.

Accident Reporting & Investigation policy and CMA – The policy has been updated to reflect the recent changes in the Reporting of injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. The main changes are the simplification of the reporting requirements in addition the requirement for employers to notify the HSE of employees being of work (due to an accident) for 3 days or more, has now increased to 7 days or more. In addition, the policy has been updated to require employees to notify their line Manager of an accident the same day, if the employee does not notify their line manager the accident may not be classed as an industrial injury.

<u>Control of substances hazardous to health CMA</u> – The CMA has been updated to include examples of posts that may be required to have health surveillance and the type of surveillance, in addition, the requirement to undertake a baseline pre employment assessment for staff who will work with hazardous substances with ongoing health surveillance as required.

4. EQUALITIES IMPLICATIONS

4.1 There are no Equalities implications for the Council arising from this report.

5. FINANCIAL IMPLICATIONS

5.1 There are no direct financial implications for the Council arising from this report.

6. CONSULTATIONS

6.1 All consultations have been reflected in the report.

7. RECOMMENDATIONS

7.1 That Committee Members note the contents of the update report.

8. STATUTORY POWERS

8.1 Not applicable to the report.

Author: Donna Jones, Service Manager, Health, Safety and Welfare,

E. Mail: jonesd7@caerphilly.gov.uk

Consultees: Chris Burns, Interim Chief Executive,

Lynne Donovan, Acting Head of Human Resources and Organisational Development Cllr C. Forehead, Cabinet Member for Human Resources and Governance/Business

Manager.

Paul James, Health and Safety Manager



CORPORATE HEALTH AND SAFETY COMMITTEE - 16TH NOVEMBER 2015

SUBJECT: ACCIDENT STATISTICS REPORT FOR APRIL – SEPTEMBER 2015

REPORT BY: INTERIM CHIEF EXECUTIVE

1. PURPOSE OF REPORT

1.1 The purpose of this report is to inform Members, Management and Trade Union Safety Representatives of the numbers and types of work related accidents/incidents that occurred during the period of April to September 2015 (inclusive).

2. SUMMARY

2.1 The following report provides accident statistics for April to September 2015 (inclusive).

Accident statistics are produced for each quarter and presented to the members of the Health and Safety Committee for information.

3. LINKS TO STRATEGY

- 3.1 The recording and reporting of accidents is in line with the Council's H&S Policy.
- 3.2 The Local Authority under legislation is responsible for the reporting of injuries, diseases and dangerous occurrences to the HSE as well as implementing preventative and protective measures to prevent foreseeable workplace accidents occurring.

4. THE REPORT

- 4.1 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):
 - Fatal accidents
 - 'Specified injury' (formerly referred to as a 'major injury'), including a fracture, other than to fingers, thumbs and toes; amputation of an arm, hand, finger, thumb, leg, foot or toe; permanent loss or reduction of sight; crush injuries leading to internal organ damage; serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs); scalpings (separation of skin from the head) which require hospital treatment; unconsciousness caused by head injury or asphyxia; and any other injury arising from working in an enclosed space, which leads to hypothermia, 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).

- 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 to hospital for treatment to that injury.
- 4.2 The term 'non reportable' accident or incident, refers to any accident or incident that is not included in point 4.1 and therefore is not reportable to the Health and Safety Executive. Most of these accidents result in minor injuries. Accidents in this classification are reported to the Health and Safety Division only 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.
- 4.3 Appendix 1 provides details on all of the accidents for the Authority that have been reported to the Health and Safety Division between April to June 2015. Appendix 2 provides details for the period July to September. These are categorised by accident type and by type of incident, e.g. non-reportable, over seven days' lost time or restricted duties, and 'specified' (formerly referred to as a 'major') injury.
- 4.4 Appendix 3 details the RIDDOR-reportable accidents per directorate between April to June 2015, and details those accidents that occurred to members of the public that were reported. Appendix 4 provides details for the period July to September 2015
- 4.5 There were 3 RIDDOR-reportable accidents in the period April June, and 5 in the period July September 2015 in the Environment Directorate.
- 4.6 There were 4 reportable accidents.in the period April June, and 1 in the period July September 2015 in the Corporate Directorate.
- 4.7 There was 1 reportable accident in the Social Services Directorate, this being in the period April June 2015.
- 4.8 There were no reportable accidents relating to schools.
- 4.9 For the purposes of reporting, staff who are working for the Authority via an agency are treated as employees.
- 4.10 It should be noted that when making comparisons with last years' report there has been a change in the management structure within the Authority, with certain service areas now falling under different Directorates.

5. EQUALITIES IMPLICATIONS

5.1 There are no equalities implications.

6. FINANCIAL IMPLICATIONS

6.1 There are no financial implications contained in the report.

7. PERSONNEL IMPLICATIONS

7.1 There are no personnel implications contained in the report.

8. CONSULTATIONS

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

9. RECOMMENDATIONS

9.1 That members note the contents of the report.

10. REASONS FOR THE RECOMMENDATIONS

10.1 To keep members informed of the accident statistics on a quarterly basis.

11. STATUTORY POWER

11.1 Not applicable to the content of the report.

Author: Andrew Wigley, Senior Health and Safety Officer, wiglea@caerphilly.gov.uk

Consultees: Chris Burns, Interim Chief Executive, burnsc1@caerphilly.gov.uk

Cllr C. Forehead, Cabinet Member for Human Resources and Governance /

Business Manager, forehc@caerphilly.gov.uk

Donna Jones, Service Manager, Health, Safety and Welfare,

jonesd7@caerphilly.gov.uk

Appendices:

Appendix 1 - All accidents by Type for the Authority between April and June 2015

Appendix 2 - All accidents by Type for the Authority between July and September 2015

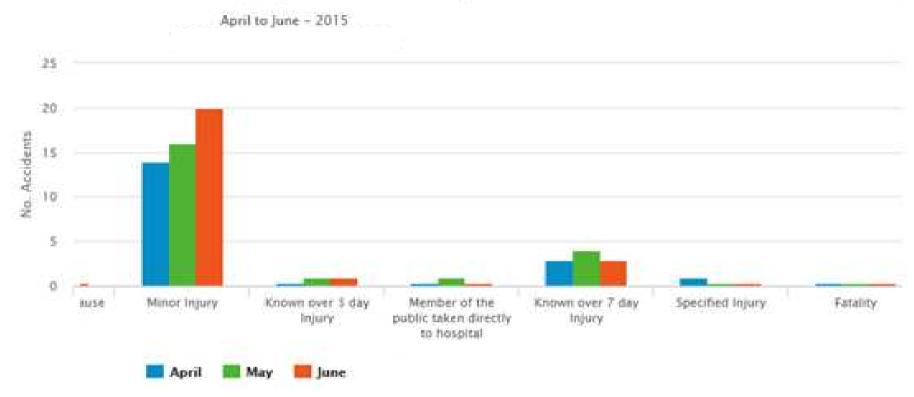
Appendix 3 - Reportable accidents by Type and Directorate between April and June 2015

Appendix 4 - Reportable accidents by Type and Directorate between July and September 2015

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Appendix 1 - All accidents by Type for the Authority between April and June 2015

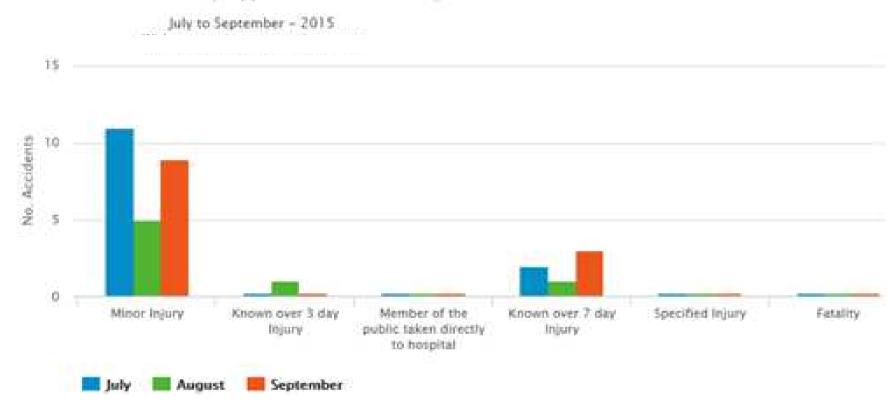
All Accidents by Type for the Authority



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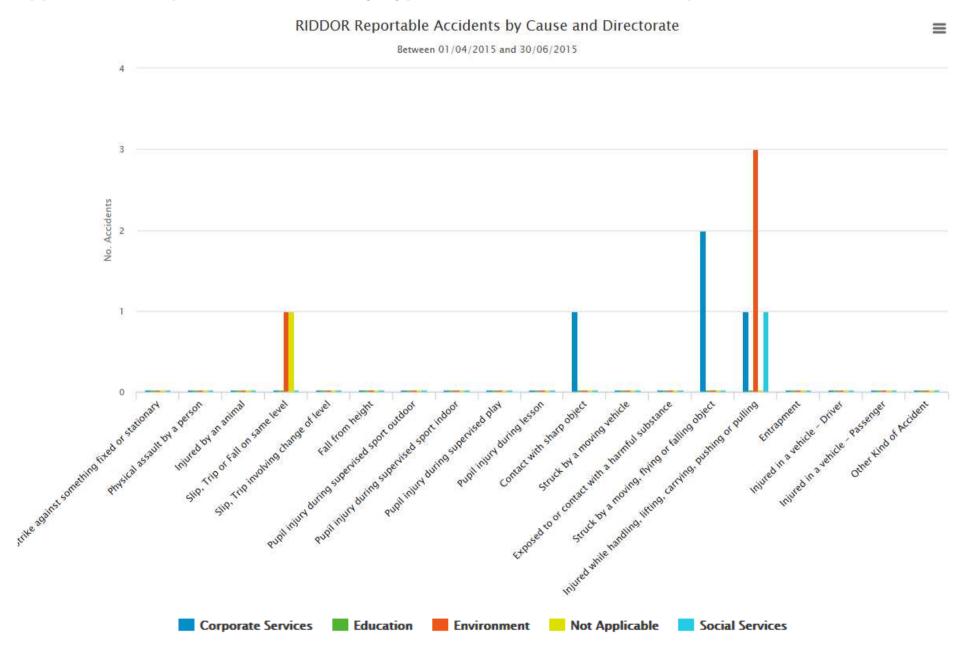
Appendix 2 - All accidents by Type for the Authority between July and September 2015

All Accidents by Type for the Authority



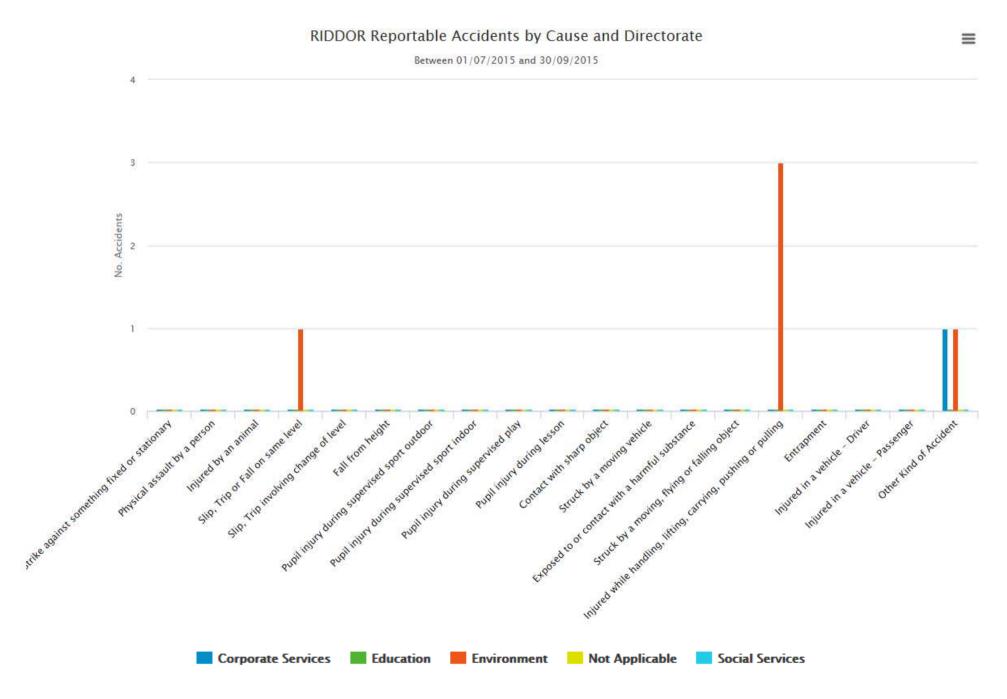
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Appendix 3 – Reportable accidents by Type and Directorate between April and June 2015



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Appendix 4 – Reportable accidents by Type and Directorate between July and September 2015



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CORPORATE HEALTH AND SAFETY COMMITTEE - 16TH NOVEMBER 2015

SUBJECT: RECENT HSE UPDATES

REPORT BY: INTERIM CHIEF EXECUTIVE

1. PURPOSE OF REPORT

1.1 The purpose of this report is to inform Members, Management and Trade Union Safety Representatives of recent updates in Health and Safety information, advice and guidance.

2. SUMMARY

2.1 The following report is provided as information for members of the Committee, to ensure they are kept informed of changes to health and safety legislation and approved codes of practice which will affect the Council, as well as advising of any relevant accidents, incidents and prosecutions.

3. LINKS TO STRATEGY

3.1 The report is provided as information to Members of the Health and Safety Committee in line with the Council's Health and Safety Policy.

4. THE REPORT

4.1 North Lincolnshire Council has been fined £160,000, and ordered to pay £40,476 in costs after pleading guilty to an offence under Section 3(1) of the Health and Safety at Work etc. Act 1974 after a man died when his car drove into a horizontal swing barrier gate to a car park at a sports ground.

Hull Crown Court heard how, in August 2012, the horizontal barrier had been opened earlier, but was not secured so it swung into a dangerous position. As the driver drove his car towards the gate, the horizontal end section of the barrier went through the windscreen striking the driver on the head, causing fatal injuries.

The barrier should have been secured whilst in the open position to a fixing post so that it could not swing into the access road and present an impalement risk.

A significant number of people have been killed or injured in incidents involving horizontal swing barriers in car parks used in retail, leisure and industrial premises.

Further information regarding the safety requirements of vehicle barriers access is available from the HSE website: www.hse.gov.uk/workplacetransport/barriers.htm

4.2 Aberdeen City Council and Aberdeenshire Council have been fined after pleading guilty to health and safety breaches following an incident in which an 11 year old child was found at the bottom of a local swimming pool during an educational excursion. During the visit he became submerged under water and was recovered unconscious from the bottom of the pool by a member of the public.

The court was told that the party of 23 pupils, the teacher and a teaching assistant arrived on the day of the excursion but no formal booking had been made. However, the pupils were allowed to swim in the pool which had water depth ranging from 0.8 metres in the shallow end to 2.2 metres at the deep end, with a water slide located at the deep end.

While the pupils were using the pool and slide, a member of the public using the pool noticed a shadow under the water at the deep end. On further investigation he found the child lying on the bottom of the pool. He recovered the unconscious child and lifted him onto the poolside. The alarm was raised and lifeguards were alerted. He was not breathing and had no palpable pulse, but CPR was successfully administered by lifeguards and the pupil has since made a full recovery.

The subsequent HSE investigation found issues with staffing levels and lifeguard positioning at the pool, and the effective management of educational excursions at the school. Both the local authority responsible for the school and the pool concerned pleaded guilty to breaching Section 3(1) of the Health and Safety at Work Act 1974. Aberdeen City Council was fined £9000 while Aberdeenshire Council was fined £4000.

4.3 North Yorkshire County Council has been prosecuted after a 14-year-old pupil needed a finger amputated after it got tangled in a lathe during a lesson at a comprehensive school.

The pupil was using a polishing cloth by hand on a work piece as it rotated on a manual metal lathe during a design and technology class when the incident happened. His right hand became entangled around the work piece and severed part of his index finger. There were six other mini lathes in use by pupils in the same class.

He was given first aid before being taken to hospital. After an unsuccessful operation to reattach the finger, the pupil needed to undergo further surgery to amputate the finger to below the first joint. He has needed several physiotherapy and occupational therapy sessions.

The HSE investigated and brought the prosecution after finding the Council had failed to identify that the practice of hand-polishing on metal lathes was unsafe despite it being used for years at the 1,700-pupil school.

Leeds Crown Court heard that after the incident, HSE served a prohibition notice on the Council, halting any use of hand-held polishing cloths on the lathes at King James' School and advising the authority to take action to ensure similar practices were not underway at other schools under its control.

HSE's investigation found that the Council's assessment of potential risks of using of the lathes had failed to consider all the tasks undertaken on the machine and so had not identified the unsafe system being used by pupils. As such, pupils were routinely put at risk of injury.

North Yorkshire County Council was fined £5,000 and ordered to pay £28,287 in costs after admitting a breach of the Health and Safety at Work etc. Act 1974.

Free guidance regarding the dangers of using emery cloth at metalworking lathes and safer alternatives can be viewed on the HSE's website: www.hse.gov.uk/pubns/eis2.pdf

4.4 Essex County Council has been fined £10,000 and ordered to pay £2,599 in costs, and a victim surcharge of £120 after a novice climber aged 15 plunged 7½ half metres from an indoor rock face at a climbing centre.

The 15 year-old girl was climbing on the indoor climbing wall whist being belayed by an eight year-old, who had only attended three previous climbing club sessions. On the day of the incident the eight year-old was using a certain belay device, for the first time. The climber lost her footing on the wall, but her younger belayer was unable to control her fall. She plummeted 7.5 metres onto the floor below. She suffered bruised internal organs, back and neck, as well as deep muscle tissue damage.

An investigation by the Health and Safety Executive (HSE) found the instructor was not competent to run this type of progressive climbing club session, as she did not have the required climbing training and site-specific assessment.

Chelmsford Magistrates' Court heard the instructor allowed the belaying to take place without use of an additional back-up belayer and without direct supervision from the instructor. There had been no use of a ground anchor or sand bag to counter the significant weight difference between the climber and belayer, and no application of safety knots to prevent the climber from falling to the ground.

4.5 Nottinghamshire County Council has pleaded guilty to breaching Regulation 3(1)(b) of the Management of Health and Safety at Work Regulations 1999 and been fined £6,000 with £5597 costs after an incident in which a three year old girl was struck by a park ranger's vehicle.

Nottinghamshire Council staff were using a lightweight all-terrain vehicle to travel around the Park whilst emptying litter bins at the Robin Hood Festival in August 2011. The utility vehicle on which two Council staff were travelling in went out of control and collided with a three-year-old child who was seated in a pushchair. The little girl suffered bruising to her head and leg.

The HSE told the court that its investigation had found the Council had not undertaken a suitable and sufficient risk assessment. HSE told the court that had it undertaken such an assessment then another method of collecting litter would have been used.

The court also heard the Council had received previous warnings in the shape of HSE Improvement Notices in relation to undertaking risk assessments.

4.6 Rochdale Metropolitan Borough Council has been fined £13,000 and order to pay full costs of £1,317 for safety failings after a two-year-old child had two fingertips severed when they were trapped in a gate at a playpark designed for children under 11 years old.

Trafford Magistrates' Court heard how the boy trapped his fingers in an external gate of the children's play area resulting in the injuries to his left hand.

The HSE told the court, because of the child's age, it was not possible to ascertain exactly what happened, but it seems he was playing by the gate when one of the other children shut it, causing the hinges to close, and creating a guillotine effect which severed his fingertips. The toddler had entered the park with his mother and three other children when the incident occurred.

The risk assessment in place at the time of the incident had only assessed the locking side of the gate and not the hinge side. The stopper mechanism on the gate had been removed and not replaced, some 12 to 18 months prior to the accident, and the hole it had left had been filled in by park staff. Despite several inspections of the play park by various different members of Rochdale Council staff, nobody noticed that the stopper had been removed, and so the risk remained.

4.7 Stafford Borough Council has been fined £20,000 and ordered to pay full costs of £1,922 and a victim surcharge of £120 after an incident at a theatre in which a worker suffered a fracture to the right side of sacrum (the bone at the base of the spine connected to the pelvis) and was unable to bear weight on his right leg for four weeks and couldn't return to work for more than two months.

Stafford Magistrates' Court heard two Stafford Gatehouse Theatre employees were using a tallescope (a telescopic aluminium manually operated work platform, used for one-person spot access) to undertake high level work to stage curtains and projector.

One of the workers was in the caged working platform at the top of the tallescope, approximately 4.5 metres high, as his colleague manoeuvred it around the stage to relocate it when the apparatus overturned.

The court heard a suitable risk assessment had not been carried out for the use of the tallescope at the theatre. If it had, the manufacturer's instructions on a warning label on the apparatus stating it should not be rolled with men or materials on platform should have been highlighted.

5. EQUALITIES IMPLICATIONS

5.1 There are no equalities implications.

6. FINANCIAL IMPLICATIONS

6.1 There are no financial implications.

7. PERSONNEL IMPLICATIONS

7.1 There are no personnel implications.

8. CONSULTATIONS

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

9. RECOMMENDATIONS

9.1 That the contents of the report be noted.

10. REASONS FOR THE RECOMMENDATIONS

10.1 For information only.

11. STATUTORY POWER

11.1 Not applicable to this report.

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