PAPER 3
ANNUAL HEALTH &
SAFETY REPORT
2017-2018

Date of Risk & Compliance Meeting	1 November 2018
Agenda Item	6
Author	Angela Dawson, Head of Corporate Support & Health & Safety Manager
Purpose of Paper/Report	To inform the Risk & Compliance Committee of the health and safety culture, and to provide analysis of the effectiveness of the Health & Safety Management System across the Group.
Executive Summary	The Report looks back on another year of positive progress for the Group with regard to the management of Health & Safety. It captures achievements and performance during 2017-2018 and demonstrates how resources have been used and continue to be used to help maintain a positive health & safety culture and make the Group a safer place for both its staff, volunteers and customers.

Whilst the Group's health and safety performance is good, there is always room for improvement. In the last 12 months through health & safety inspections 141 conformities were identified as opposed to 112 in the previous year

The attached report also demonstrates that all 8 Objectives from the H&S Action Plan for 2017-2018 were achieved.

The Group manages health & safety effectively and has a robust system in place and makes a conscious effort to make improvements where required year on year. |
Recommendations	The Group Risk & Compliance Committee are asked to note and make recommendations for the Board of Trustees to accept the content of this annual report and authorise its publication on the Group's Portal for access by staff, volunteers and other interested parties.
Strategy Impact	Directly impacts on Aim "Employer of Choice" with no issues to note.
Risk Impact	The Health & Safety Policy is the key control and with continued monitoring the risk remains low.
Financial Impact	Positive Health & Safety culture with limited impact on finances
Legal & Compliance Impact	Complies with the Health & Safety at Work Act 1974 and the Management of Health and Safety Regulations 1999.
Customer Service Impact	Remains low with no trends noted around customer safety.

1. INTRODUCTION

This report has been prepared by the Head of Corporate Support, in conjunction with the Executive and Leadership Teams, for presentation to the Group Risk & Compliance Committee meeting on 1 November 2018 at the Bradbury Centre in North Shields.

The report provides analysis of the standard of health and safety throughout the Age UK North Tyneside Group for the financial year 2017-2018, and outlines the Group's Health & Safety culture and management system.

The report will include recommendations for improvement to Health & Safety management across the Group where necessary.

2. BACKGROUND

The safety culture of an organisation is the product of individual and group values, attitudes, perceptions, competencies, and patterns of behaviour that determine the commitment to, and the style and proficiency of, an organisation's health and safety management system.

The Health and Safety at Work etc. Act 1974 provides a legislative framework to promote, stimulate and encourage high standards of health and safety at work.

In particular it requires organisations to provide and maintain:
- A Health and Safety Policy;
- A system to manage and control risks in connection with the use, handling, storage and transport of articles and substances;
- A safe and secure working environment, including provision and maintenance of access to and egress from premises;
- Safe and suitable plant, work equipment and systems of work that are without risks;
- Information, instruction, training and supervision as is necessary;
- Adequate welfare facilities.

This legislation is enforced by the Health & Safety Executive (HSE) who have far reaching powers which include:
- Access to work premise at any reasonable hour
- Freedom to interview staff and visitors, contractors or customers
- Confiscation of equipment and applicable documents
- Taking statements, photographs, measurements and samples
- Issuing notices (Improvement and Prohibition) requiring respectively improvements within a certain timeframe or stopping work until improvements are made also within a timeframe
- Initiating criminal court proceedings for alleged breaches of health and safety legislation

The Group recognises that it is not enough just to provide safe equipment, systems and procedures if the culture does not encourage healthy and safe working. A prerequisite for a positive safety culture is good information and the Group encourages and promotes the reporting of mistakes, near misses and accidents. Its safety culture is based on a fair allocation of responsibility which is outlined below:

The Group Health and Safety Team consists of:

- Health Safety Manager
- Deputy Health & Safety Manager
- Health & Safety Officers
- Health & Safety Representatives

The Health & Safety Manager is responsible for:

- Advising Officers and Reps and staff on matters of health and safety at work
- Developing, implementing and maintaining a health and safety management system on behalf of the Group
- Developing and implementing health & safety policies and procedures to improve the management of health and safety across the Group
- Developing and delivering health and safety training courses as appropriate
- Providing information and data analysis in respect of the Groups health and safety compliance.

A full description of the roles and responsibilities of the team are outlined in the Group Health & Safety Policy.

The Group are working towards the Better Health at Work Silver Level Award to demonstrate an effective health culture. There is a lead Health Advocate and 4 other Health Advocates from across the Group who have been trained to promote health at work. We will be assessed against this level in November 2018.

3. HEALTH & SAFETY MANAGEMENT SYSTEM

The Health and Safety at Work Act 1974, and associated regulations address the way in which health and safety should be tackled within all organisations. The purpose is to ensure the health, safety and welfare of employees and anyone who may be affected by the Group's work activities.

The Group fulfils its legal responsibility for health and safety by using the HSE model as described in HSG65. The four elements of this model are: Plan, Do, Check and Act.
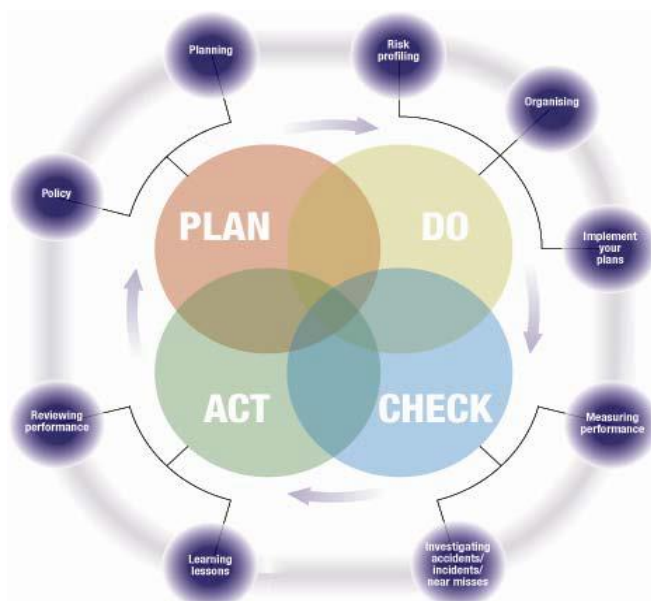
3.1. PLAN – DETERMINING H&S POLICY AND PLANNING FOR IMPLEMENTATION

The following Health & Safety related Policies and Procedures have been reviewed in the last year:

POLICY	REASON FOR UPDATE	DATE UPDATED	REVISION DATE
Alcohol & Drugs Policy	Expiry only – no changes	May 2018	May 2021
Bullying & Harassment Policy	Expiry only – no changes	June 2018	June 2021
Fire Safety Policy	Expiry only – no changes	November 2018	November 2021
First Aid Policy	Expiry only – no changes	January 2018	January 2020
Green Policy	Expiry only – no changes	September 2018	September 2021
Lone Worker Policy	Expiry only – no changes	October 2018	October 2021
Moving & Handling Policy	Expiry only – no changes	November 2017	November 2019
Maximum Temperature Policy	Expiry only – no changes	December 2017	December 2019
Medication Policy	Expiry only – no changes	November 2018	November 2019
Smoke Free Policy	Expiry only – no changes	October 2018	October 2021
VDU Policy	Expiry only – no changes	April 2018	April 2021

There is an annual Action Plan which is managed by the Health & Safety Manager and has the following objectives:
1. Review all Health & Safety related Policies & Procedures due for 2017-2018
2. Maintain CHAS accreditation
3. Complete 95% of training identified in annual training plan for all Health & Safety staff
4. Carry out announced and unannounced inspections to ensure compliance with the health and safety management system
5. Maintain effective communication of Health & Safety issues to staff and volunteers
6. Work to improve the 'health' of staff and volunteers and not just the 'safety' and achieve the Bronze Better Health at Work Award
7. Implement Critical Incident Plans across all key areas of the Group
8. Produce an annual Health & Safety report for consideration by the Group Risk & Compliance Committee

All 8 Objectives were achieved in 2017-2018.

3.2. DO – PROFILING RISKS, ORGANISING AND IMPLEMENTATION

3.2.1. Risk Profiling/Critical Incident Planning

Risk Assessments - The completion of risk assessments is a statutory requirement under the Management of Health and Safety at Work Regulations 1999. To support the Group in its compliance, the Health and Safety Manager ensures all staff with additional Health & Safety responsibilities complete Level 2 training in Risk Assessment and provides advice and guidance in the development of risk assessments as necessary. Training is refreshed every 3 years. The Group has a Risk Assessment Policy in place to support this.

Critical Incident Planning - All service areas have a written Critical Incident Plan which is reviewed annually. This is a key document which is communicated and available to all staff to ensure they are aware of what to do in case of a critical incident. All Critical Incident Plans are reviewed annually by the Head of Service. In 2018-2019 the Group has developed a Critical Incident Test Plan to assess the Group response to various critical incidents.

Fire Safety Regulations - Everyone is required to carry out their own Risk Assessment to ensure compliance with Fire Safety Regulations, Regulatory Reform (Fire Safety) Order 2005. 11 of Age UK North Tyneside Group sites were inspected during 2017-2018 and all were regarded as having a satisfactory standard of fire safety with up to date Fire Risk Assessments in place. One new Housing Scheme, Crossgates, is working through Actions identified from their most recent Assessment.

Installed Fire Alarm Systems - All premises have fitted fire alarms systems which are tested regularly weekly and maintained annually.

Fire Safety Arrangements - Practice evacuations were carried out across all sites during 2017-2018. In some service areas which ones there are "stay put" policies in place and this is tested out in the same way as an evacuation would be.

3.2.2. Organising for Health & Safety

Organising for health and safety is the collective label given to activities in three key areas that together promote positive health and safety outcomes (Co-operation, Communication and Competence).

Co-operation & Communication - Every service area has a Health & Safety Officer, which is the Service Manager, and at least 2 Health & Safety Reps.

Health & Safety Officers work closely with their Teams identifying risks, undertaking assessments and sharing information. Health & Safety Officers are used as the first point of contact for communicating messages and providing information to staff, disseminating it throughout their service area.

The primary methods of communication in respect of Group wide health, safety and welfare issues is the Health & Safety Committee, the Leadership Team meetings, SMT meetings and Project Staff Team Meetings. The Health & Safety Committee which is

chaired by the Health & Safety Manager meets annually with all other Team Meetings meeting either weekly or monthly.

Competence - Basic Health and Safety training is mandatory for all staff. Specific training is outlined below for those staff who have additional health & safety responsibilities:

Health & Safety Manager
- NEBOSH certificate in Occupational Health & Safety management
- IOSH Managing Safely
- Level 2 Risk Assessment

Deputy Health & Safety Manager
- IOSH Managing Safely
- Level 2 Risk Assessment

Health & Safety Officers (Heads of Service and Managers)
- Risk Assessment
- Level 2 Health & Safety
- Basic First Aid

Health & Safety Reps
- Level 2 Health & Safety
- Appointed First Aid
- Fire Safety

It is also mandatory for all Staff to undertake the following training:
- Basic Health & Safety
- Basic First Aid
- Fire Safety

3.2.3. Implementing

The Group Health and Safety Policy is renewed every 3 years and reviewed annually and provides the documentation and tools for Health & Safety Officers, Reps, Managers and others to implement and manage health and safety.

3.3. CHECK – MEASURING PERFORMANCE AND INVESTIGATING ACCIDENTS/INCIDENTS

3.3.1. Measuring performance – proactive and reactive monitoring

Weekly/Monthly Safety Checks - Performance is monitored through weekly, monthly and quarterly reporting. Health & Safety Reps carry out weekly and monthly safety checks to allow any repairs or faults to be reported and addressed as soon as possible.

Quarterly Safety Checks - Health & Safety Officers carry out Quarterly Safety checks to ensure weekly and monthly checks have been carried out and to report and record the following:
- Number of accidents

- Number of near misses
- Any challenging behaviour reported
- New Risk assessments carried out
- Repair system being followed correctly
- Fire Drills up to date
- PAT Testing up to date
- First Aid kits stocked
- COSHH File in order

The quarterly check also consists of a tour of the premises/site to ensure firefighting equipment, signage, fire procedures are all in order and up to date and to ensure buildings are free from potential risk and/or hazards.

Annual H &S Inspections - An annual Audit/Inspection Plan is in place and the Health & Safety Manager caries out unannounced or sometimes announced Health & Safety inspections, depending on whether this is proactive or reactive, across all service areas systematically which complies with section 2 to 6 of the Health & Safety at Work Act 1974.

In 2017-2018 there were 11 sites and each site received at least one health & safety inspection.

The outcome of these inspections are reported back to the service area following inspection and also to the weekly Leadership Team meetings.

The primary aim of these inspections is to establish the effectiveness of the health and safety management system across the Group by evaluating its capability to manage the risks to health and safety that arise from its activities.

The Inspection covers the following:
- First Aid kits are fully stocked and evidence of monthly checks being carried out
- Accidents are being recorded and investigated correctly
- Risk Assessments are being carried out and reviewed according to need
- Health & Safety Project File is up to date
- Weekly Reports are being carried out
- Quarterly Reports are being carried out
- Repair reporting system is being followed correctly
- COSHH File is up to date
- Fire Log book is completed showing evidence of:
    - Fire Drills
    - Fire Alarm tests
    - Emergency light tests
    - Fire Extinguishers maintained
- Fire Risk Assessments are up to date
- H&S Signage is in place and staff are aware of who is responsible for H&S & First Aid
- PAT Testing is up to date
- Staff are wearing correct PPE where required
- Staff are trained appropriate to their job role
- Staff are aware of the fire procedures

- Staff are aware of the safeguarding procedures
- A visual inspection of buildings/service area

Performance from inspections is graded as a 'conformity' (effective system in place), 'non-conformity' (system failure) or an 'observation' (improvement required). If there are non-conformities identified at the time of the inspection then a follow up reactive visit is arranged to give staff time to address the non-conformities raised.

Inspections carried out in 2017-2018 identified 141 Conformities (112 in previous year), 23 non-conformities (29 in previous year) and 41 Observations (32 in previous year). See Table 1 below. This is not a like for like comparison as one of the areas outlined above could identify more than one conformity, non-conformity or observation.
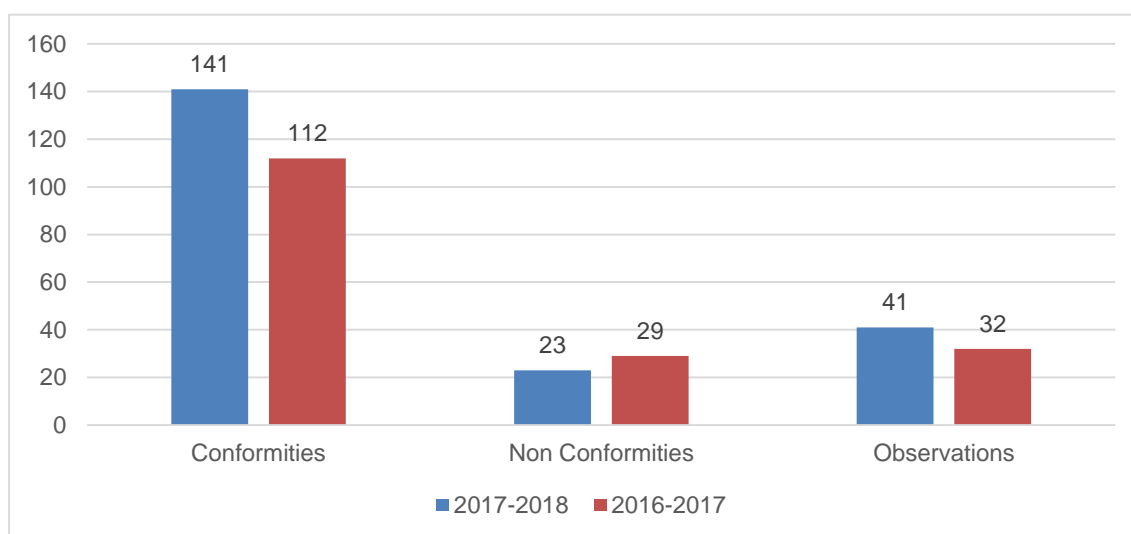

Table 1 – Number of Conformities, Non Conformities and Observations in 2017-2018 & 2016-2017

All non-conformities identified were minor and were addressed immediately or within 28 days. The most common trends continue to be completing the First Aid Kit equipment checklist to ensure a fully stocked kit, H&S signage not up to date when there are staff changes or Repair Reporting system not being used correctly.

The safety culture is a supportive one and annual inspections aim to support the service area to achieve good safety management performance. A report highlighting the positives and negatives of all inspections is provided to the Head of Service to share and discuss the findings with their staff at team meetings. This information is also reported to the Quality Management Review meeting to share best practice and identify any learning required.

External Audits relating to Health & Safety - The Age UK North Tyneside Group is externally audited on an annual basis by the Contractors Health & Safety Scheme (CHAS). With another successful CHAS audit in April 2018, this further demonstrates that there is a positive health & safety culture and an effective health & safety management system in place. However this requires constant monitoring and development by the Health & Safety Manager and for the fifth year in a row there were no development areas to address.

Health & Safety inspections also form part of ISO9001:2008 audit process.

3.3.2. Witnessed Accidents and the Reporting of Dangerous Occurrences Regulation (RIDDOR)

The Group follows the practice described in HSG65 to have procedures in place for investigating injuries, ill health, property damage and near misses, with all incidents reported within the Group being monitored through the Leadership Team.

The criteria for reporting an incident is an occurrence that has caused injury/ill health to anyone or damage to property or nearly happened (near miss) so captures all levels of health and safety incidents.

In addition, in accordance with the **Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013,** certain incidents must be reported to the HSE within appropriate timescales. A RIDDOR incident is a certain category of incident that has occurred and caused a member of staff to take over 7 days absence from work or an incident involving the public/customers that was caused by the Group's actions.

Total number of accidents – 43 witnessed accidents recorded for 2017-2018 as opposed to 40 in 2016-2017 and 56 in 2015-2016. Out of the 43 recorded witnessed accidents 41 were of a minor nature and required no further action. However 2 staff accidents required hospital treatment and resulted in injury and therefore were reportable under RIDDOR.

Customer witnessed accidents - There is a slight increase in the number of customer accidents, 25 in 2017-2018 as opposed to 21 in 2016-2017. 28 were recorded in 2015-2016. It has to be recognised that it is difficult to monitor any trends in customer accidents as it depends on the customer and the level of frailty of the customers we have with us at the time but we have tried to capture this in table 2 and 3 below. You can see that the highest number of accidents are recorded at the Wellbeing Centres as customers are with staff throughout the day as opposed to those customers living in our Extra Care Housing Schemes or out in the community where staff are just visiting them at time specific periods throughout the day.
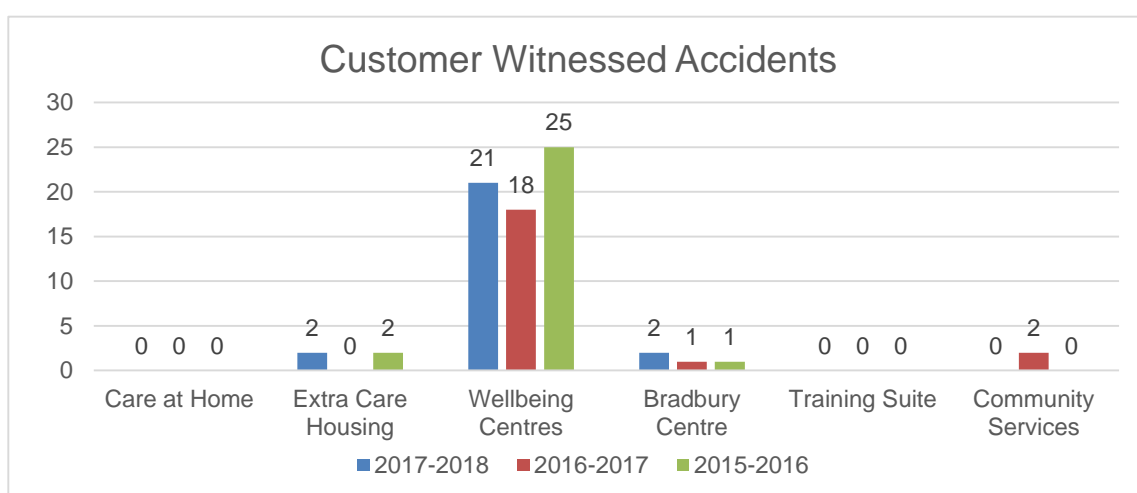

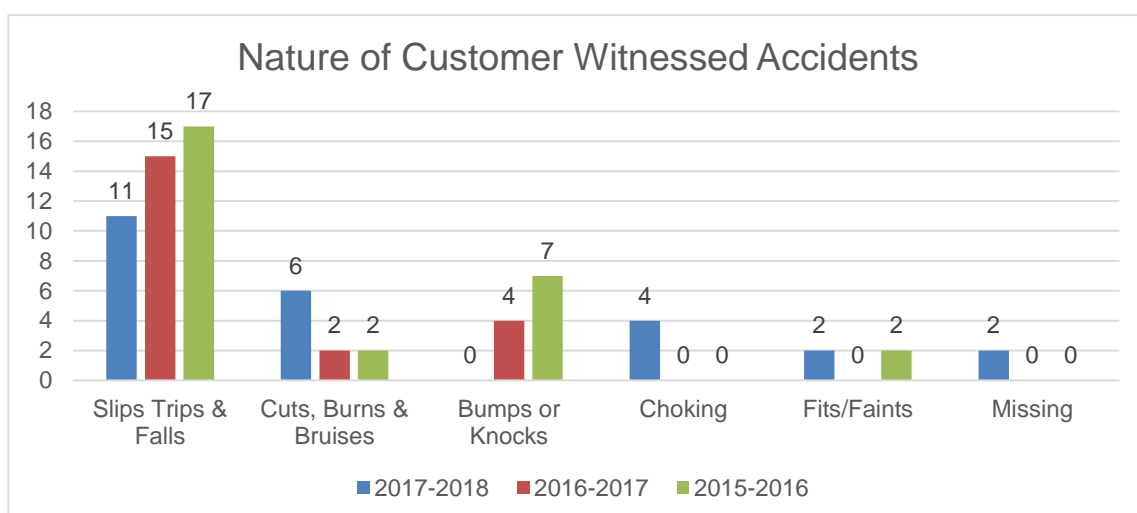*Table 2 – Customer Accidents – comparing the last three years*

Nature of Customer Witnessed Accidents

Nature	2017-2018	2016-2017	2015-2016
Slips Trips & Falls	11	15	17
Cuts, Burns & Bruises	6	2	2
Bumps or Knocks	0	4	7
Choking	4	0	0
Fits/Faints	2	0	2
Missing	2	0	0

Table 3 – Nature of customer witnessed accidents – comparing the last three years

Number of Staff Witnessed Accidents - The total number of staff witnessed accidents in 2017-2018 was 18 as opposed to 19 in 2016-2017, 25 in 2015-2016.
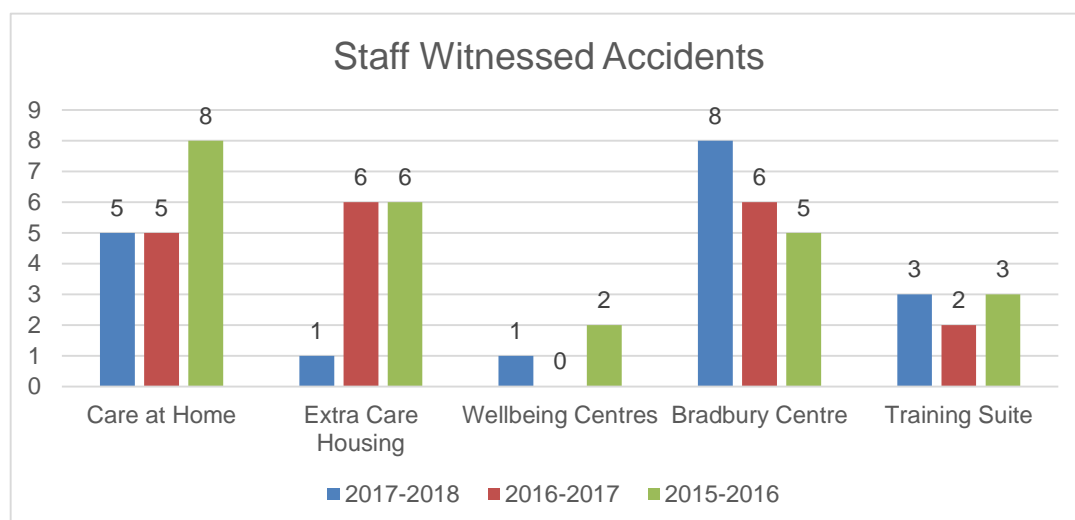
Staff Witnessed Accidents

Location	2017-2018	2016-2017	2015-2016
Care at Home	5	5	8
Extra Care Housing	1	6	6
Wellbeing Centres	1	0	2
Bradbury Centre	8	6	5
Training Suite	3	2	3

Table 4 – Staff witnessed accidents – comparing the last three years

Nature of Staff Witnessed Accidents

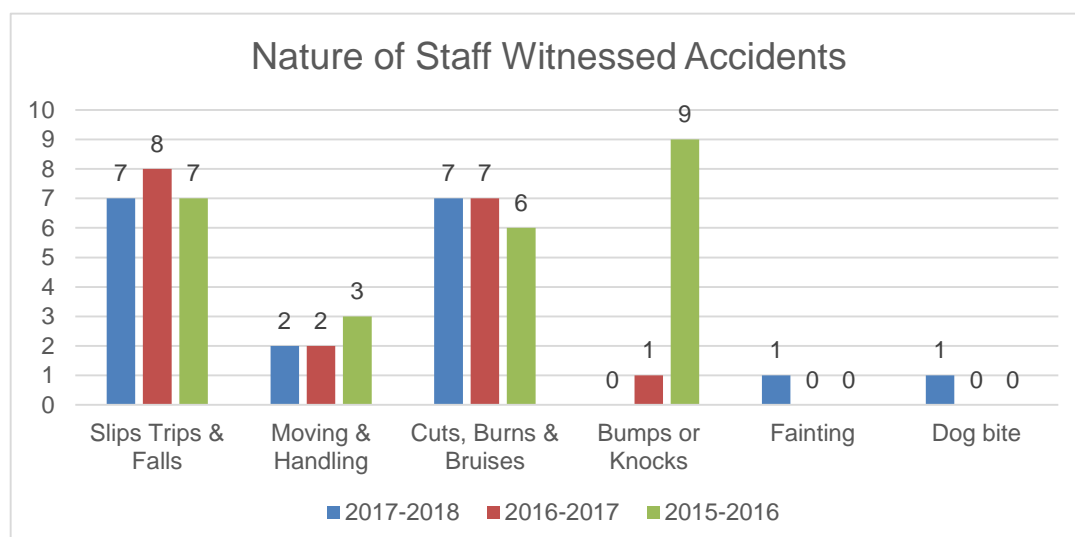| Nature	2017-2018	2016-2017	2015-2016
Slips Trips & Falls	7	8	7
Moving & Handling	2	2	3
Cuts, Burns & Bruises	7	7	6
Bumps or Knocks	0	1	9
Fainting	1	0	0
Dog bite	1	0	0

Table 5 – Nature of staff witnessed accidents – comparing the last three years

The Customer Relationship Management (CRM) system shows that at the end of 2017-2018 there were 248 staff employed by the Group and that the customer numbers were 3,053.

The total number of staff accidents in 2017-2018 equates to 7% of the workforce which is the same for 2016-2017, and 10% in 2015-2016. The total number of witnessed customer accidents in 2017-2018 equates to 0.81% as opposed to 0.68% in 2016-2017 and 1% in 2015-2016.

3.3.3. Safeguarding incidents, Serious Incidents and Deaths

Table 6, 7 & 8 below show the number of recorded customer safeguarding incidents, serious incidents and customer deaths which are notifiable to CQC, NTC Safeguarding Team and in some cases the Police in 2017-2018.
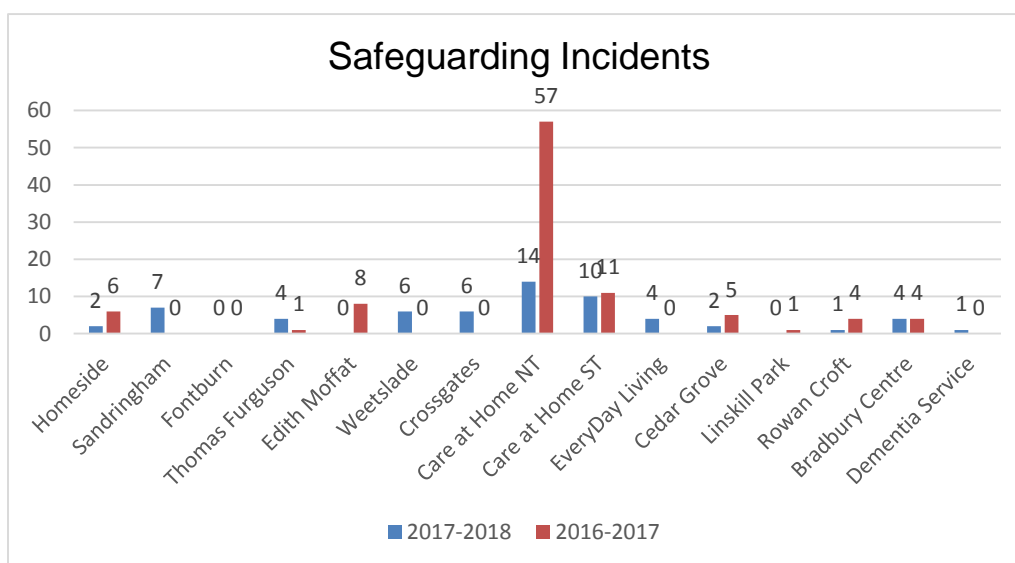

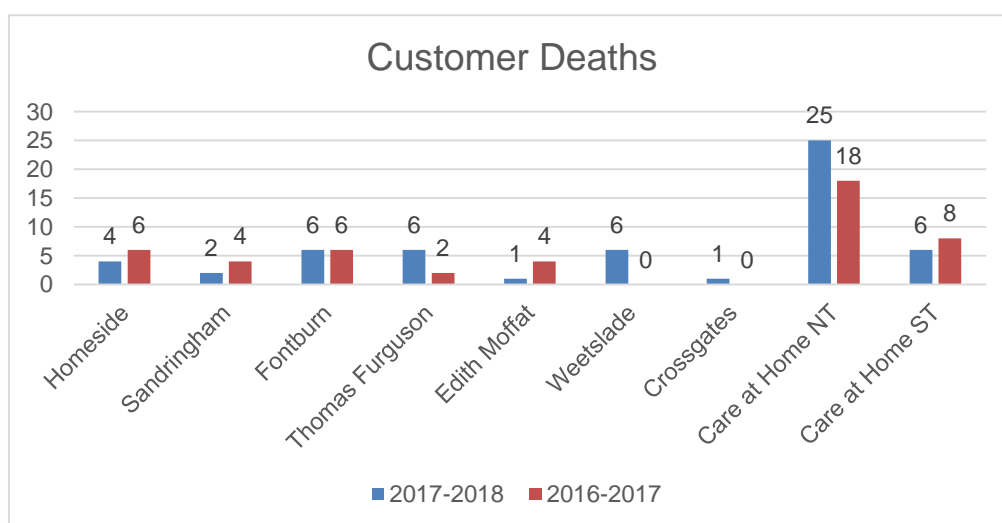*Table 6 – number of safeguarding incidents for the last two years*

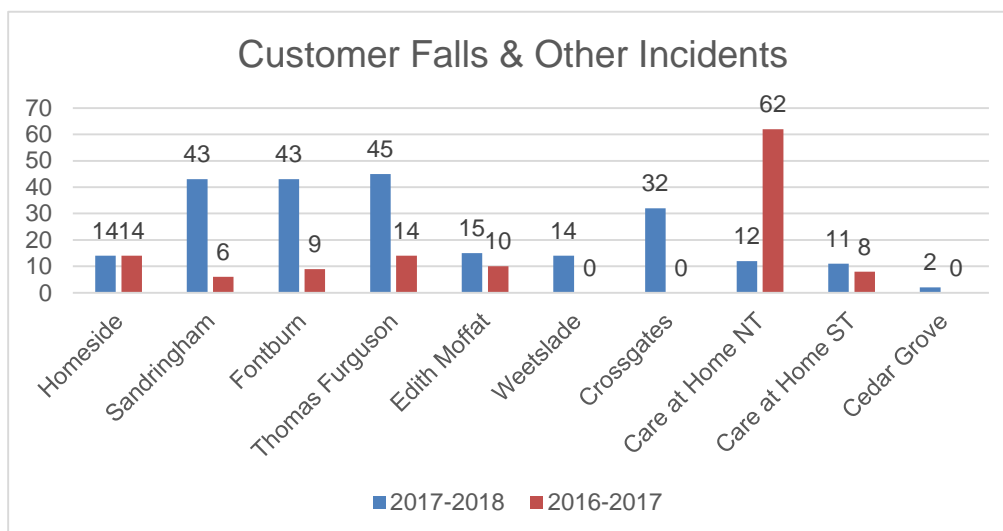*Table 7 – Number of Deaths for the last 2 years*

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Table 8 – Number of Customer Falls and other incidents for the last two years

Liability claims – For the reporting period there are no liability claims reported or pending.

3.4. ACT – REVIEWING PERFORMANCE AND LEARNING LESSONS

The context of HSG65 requires the Group to review performance and take action on any gaps highlighted and also take action on lessons learned.

Accident & Incident Reporting - Accident and Incident Investigation reports are reviewed and where relevant any lessons learnt are shared with departments either via email or through the Leadership Team and the Quality Management Review Meeting with instruction being given for risk assessments to be reviewed or undertaken to incorporate these lessons.

H&S Induction – All staff and volunteers receive health & safety training as part of their Induction. Service specific health & safety training is also received to ensure staff and volunteers are aware of the safety procedures where they are working.

Learning from other organisations - The Health & Safety Manager reviews incidents and non-conformities, and where applicable instigates actions to ensure the same thing does not happen again. We are constantly receiving news bulletins via the HSE, Gov.UK website and RoSPA to keep up to date and taking any learning from these where relevant.

To note: To date there have been no Enforcement Notices issued to the Group to learn from.

4. CONCLUSION

The Report looks back on another year of positive progress for the Group with regard to the management of Health & Safety. It captures achievements and performance during 2017-2018 and how resources have been used and continue to be used to help make the Group a safer place for both its staff and customers.

The report highlights the significant amount of work that has been undertaken during 2017-2018 to maintain a positive health & safety culture across the Group and demonstrates that all 8 Objectives from the H&S Action Plan for 2017-2018 were achieved, conformities from H&S Inspections have increased and accidents have remained low when compared to the number of staff and customer base. Customer safeguarding incidents, falls and other incidents and deaths seem sporadic there can be no real comparison due to the level of frailty and health conditions of our customers.

The Group manages health & safety effectively and has a robust system in place. It makes a conscious effort to make improvements where required year on year to continue to raise the profile of health & safety and improve the safety culture to mitigate associated risks to ensure compliance, which in turn will ensure the health, safety and welfare of staff, volunteers, customers and all other stakeholders.

5. RECOMMENDATION

The Group Risk & Compliance Committee are asked to note and make recommendation for the Board of Trustees to accept the content of this annual report and authorise its publication on the Intranet for access by staff and other interested parties.