



Annual Health and Safety Report

Report to: Board
Date: 28 September 2017
Report by: Carole Keillor – Corporate Facilities, Health and Safety Adviser
Report No: B-23-2017
Agenda Item: 18

PURPOSE OF REPORT

To advise the Board of the health and safety performance of the Care Inspectorate for 2016-17 and provide comparative information for 2015-16. The report also summarises the Health and Safety planned actions for 2017-18.

RECOMMENDATIONS

That the Board:

1. Notes the health and safety performance for 2016-17.

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Consultation Log

Who	Comment	Response	Changes Made as a Result/Action
Senior Management	The ET receive periodic update on this		Feedback is reviewed by the Health and Safety Committee
Legal Services			
Corporate and Customer Services Directorate			
Committee Consultation (where appropriate)	Regular updates on the delivery of the Health and Safety Action Plan are reported to Resources Committee		Feedback is reviewed by the Health and Safety Committee
Partnership Forum Consultation (where appropriate)	The Partnership Forum is represented on the Health and Safety Committee		Feedback is reviewed by the Health and Safety Committee
Equality Impact Assessment			
Confirm that Involvement and Equalities Team have been informed	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
EIA Carried Out	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
If yes, please attach the accompanying EIA and appendix and briefly outline the equality and diversity implications of this policy.			
If no, you are confirming that this report has been classified as an operational report and not a new policy or change to an existing policy (guidance, practice or procedure)	Name: Carole Keillor Position: Corporate Facilities, Health and Safety Adviser		
Authorised by Director	Name: Gordon Weir	Date: 25/8/17	

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1.0 INTRODUCTION

Strategic Objective No 4

We will perform as an independent, effective and efficient scrutiny and improvement body, working to consolidate excellence, deliver cultural change, invest in a competent, confident workforce and work collaboratively with partner agencies to support the delivery of safe and compassionate, rights-based care.

Key Priority 4.1

Develop a best value approach underpinned by an efficiency saving regime to identify areas for savings, investment, and growth. This will enable us to meet future financial challenges, working collaboratively with our staff and partner bodies to continue to identify ways of reducing duplication and deploying flexible, innovative approaches to evidence public value. We will revise and strengthen our quality assurance processes and practices across all parts of the Care Inspectorate to ensure we deliver the highest quality work in a way that constantly evolves and improves.

1.1 Background

The Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999 place duties on employers to ensure, so far as is reasonably practicable, the health and safety of their employees at work. This report outlines the health and safety performance of the Care Inspectorate for 2016-17.

2.0 ORGANISATION FOR HEALTH AND SAFETY

The Health and Safety Committee (HaSC), chaired by the Executive Director of Corporate and Customer Services, meets four times a year to review and monitor the overall strategy, policies and procedures, national accidents/incidents and any trends as well as the overall health and safety performance. We have achieved the Healthy Working Lives Silver Award and are progressing towards the Gold Award. In order to provide a more cohesive approach to health and safety, the healthy Working Lives Working Group now reports to HaSC, with the remit of both HaSC and the Healthy Working Lives Working Group being reviewed to reflect this.

The Corporate Facilities, Health & Safety Adviser successfully achieved the NEBOSH Diploma in Occupational Health & Safety and is now the Competent Person in terms of the Management of Health and Safety at Work Regulations 1999, Regulation 7, for the Care Inspectorate.

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3.0 HEALTH AND SAFETY ACHIEVEMENTS DURING 2016-17

We continue to make good progress in delivering the actions in the Health and Safety Action Plan. This is attached as Appendix 1 for information.

3.1 Policies, Procedures and Risk Assessments

- Line managers attended and achieved the IOSH Managing Safely certificate. This was an essential action under the 2015 Review.
- Reporting of Incidents and Near Misses has been reviewed, with guidance and revised forms being developed in consultation with staff.
- The Management of Road Risk Assessment and Action Plan was completed.
- The Health Working Lives 'Work Positive' risk assessment survey was issued to all staff. A working group was established to review the results and drawing up an action plan.
- The Loneworking Risk Assessment was prepared in consultation with staff. A working group has been set up to prepare the action plan.

3.2 Measuring Performance

3.2.1 INCIDENT REPORTING

Top five reasons for incidents in 2016–17



3.2.2 SICKNESS ABSENCE STATISTICS 2014-17

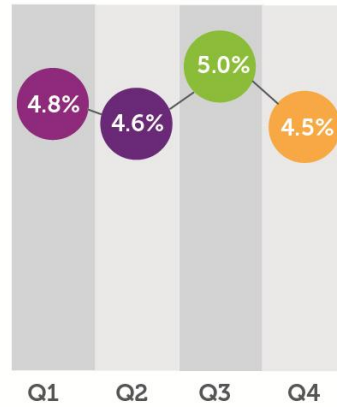
3.2.3 Organisational Total % of Working Days Lost in 2014-17

Absence levels

Days lost in 2014-15



Days lost in 2015-16



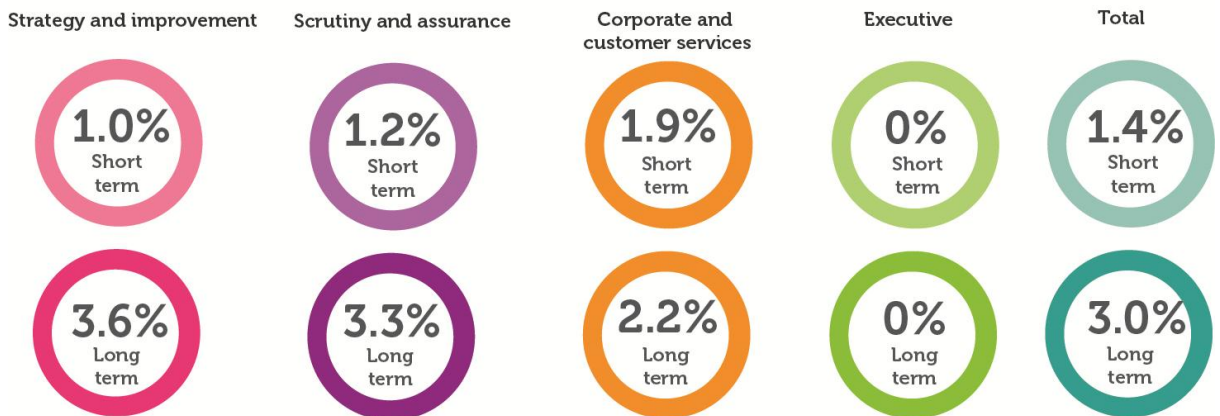
Days lost in 2016-17



The 2016 CIPD Absence Management Report reported an average of 4.3 % working time lost within the public sector, which equates to 9.8 average days lost per employee per year. Due to the increase in Q4 the total number of average days lost in 2016-17 is 4.4%, therefore, as a benchmark we are marginally higher than the rest of the public sector.

3.2.4 Sickness Absence Comparisons by Directorate 2014-17

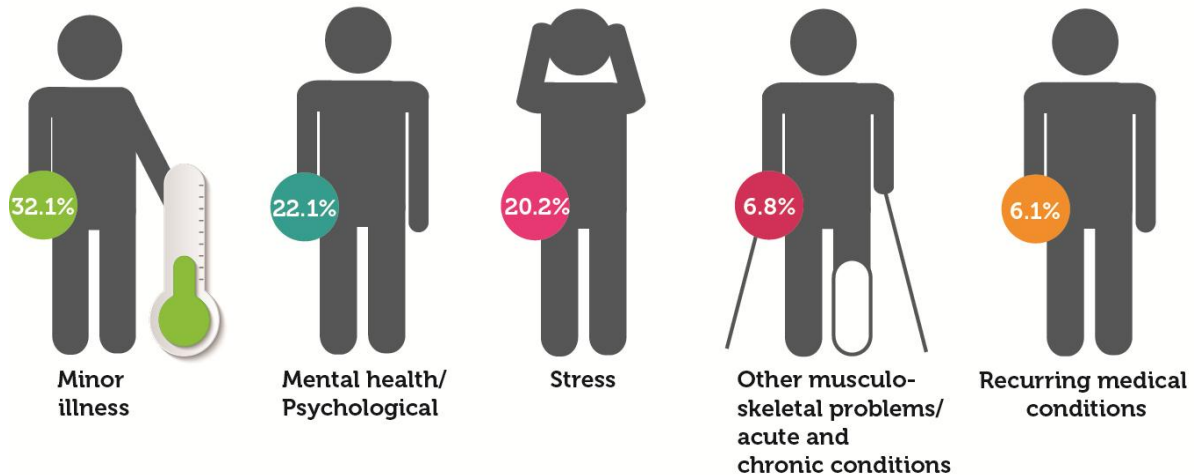
Absence by directorate in 2016-17



3.2.5 Reasons For Sickness Absence 2016-17

The top 5 reasons for sickness absence in 2016-17 are pictured over.

Top five reasons for absence 2016-17



3.2.6 Premises Inspection

All offices had a minimum of one premise inspection completed during each year. No major health and safety issues were raised and action plans were created to resolve any minor issues identified.

3.2.7 Disabled Evacuation

We have reviewed and retrained all disabled evacuation chair and/or evacuslide mattress wardens in the Dundee and Hamilton. The relocation of the Paisley and Musselburgh offices issues has been resolved through prioritising ground floor locations when leases are renewed.

Personal Emergency Evacuation Plans (PEEPs) and adjustments are made to ensure safe evacuation procedures are in place where required.

3.2.8 Health and Safety Learning and Development

There was a considerable amount of training undertaken in the previous year, resulting in few requirements for Fire Wardens and First Aiders. Our provision for these volunteers is constantly under review and training carried out when required.

4.0 HEALTH AND SAFETY PLAN 2017-18

4.1 Policies and Procedures

The following policies and procedures will be launched in 2017-18:

- Management of Road Risk (MoRR) Policy
- Lone working Policy
- Mental Wellbeing Policy – replacement for the Stress Management Policy
- Health and Safety Risk Assessment Policy
- Electronic Incident and Near Miss Reporting Procedure

4.2 Training and Development

4.2.1 Training for 2017-18

- Rolling out of E-Learning
- New Induction program
- Mentally Health Workplace for Managers
- IOSH Managing Safely for new line managers

4.2.2 E-Learning

As a result of the procurement of the 4 required e-learning modules for Display Screen Equipment (DSE), Basic Health and Safety, Basic Fire Awareness and Manual Handling, we added value by selecting Posturite who are providing us with their suite of 22 e-learning modules at the lowest cost of all the tenderers. This will be rolled out to all staff.

4.3 Health and Safety Strategy 2017 - 2020

As the actions from the 2015 review are all but complete, a strategy for the continued improvement of the health and safety performance and culture of the Care Inspectorate has been drafted and is currently with HaSC for consideration.

5.0 RESOURCE IMPLICATIONS

5.1 There will be resource implications as a result of the Management of Road Risk Policy, Lone Working and Mental Wellbeing policies which will be considered by the HaSC, ET and Resources Committee as appropriate.

6.0 CUSTOMER SERVICE IMPLICATIONS

The recommendations support Customer Service Theme 2 – Culture. By improving our staff's wellbeing and our organisation's health and safety culture, we will improve / maintain our professionalism when working with customers.

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7.0 BENEFITS FOR PEOPLE WHO EXPERIENCE CARE

7.1 Strong health, safety and wellbeing support for our staff will ensure that they have the confidence and support to deliver their roles well. Our staff are our most important asset in the delivery of our strategic aims that are all ultimately intended to bring benefits to people who use care services and their carers.

8.0 CONCLUSION

This report reviews the organisation's health and safety performance for 2016-17 and provides comparative information previous years. The report also summarises Health and Safety plans for 2017-18.

LIST OF APPENDICES

Appendix 1 Updated Action Plan