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<b>PART A:</b>	<b>MATTERS DEALT WITH UNDER DELEGATED POWERS</b>
<b>REPORT TO:</b>	<b>OVERVIEW &amp; SCRUTINY COMMITTEE</b>
<b>DATE:</b>	<b>28 JULY 2021</b>
<b>REPORT OF THE:</b>	<b>HEAD OF COMMUNICATIONS, TECHNOLOGIES AND BUSINESS TRANSFORMATION LOUISE, WOOD</b>
<b>TITLE OF REPORT:</b>	<b>HEALTH &amp; SAFETY ANNUAL REPORT</b>
<b>WARDS AFFECTED:</b>	<b>N/A</b>

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## **EXECUTIVE SUMMARY**

### **1.0 PURPOSE OF REPORT**

- 1.1 The purpose of this report is to provide information and analysis of the corporate health and safety position in the 2019/2020 financial year.

### **2.0 RECOMMENDATION(S)**

- 2.1 It is recommended that Committee note the content of the report and the positive progress made on health and safety implementation in the 2019/2020 year – a year of considerable challenge due to the global COVID pandemic.

### **3.0 REASON FOR RECOMMENDATION(S)**

- 3.1 The Health and Safety Policy (Organisation) requires that a report be compiled on Ryedale District Council's health and safety performance on an annual basis, and that that report be provided to the Overview & Scrutiny Committee. This report fulfils that duty.

### **4.0 SIGNIFICANT RISKS**

- 4.1 None identified

## **5.0 POLICY CONTEXT AND CONSULTATION**

- 5.1 The content of this report draws upon the Council's Health and Safety Policy, which consists of a Policy Statement and Organisation document. The report acknowledges minor improvements are required to the Policy, which will be submitted to P&R.

## **REPORT**

### **6.0 REPORT DETAILS**

#### **6.1 INTRODUCTION**

This report provides a summary of the key areas of corporate health and safety activity during the 2020/21 financial year. It has been prepared for Overview and Scrutiny Committee, in line with the commitment to provide such a report as set out in the health and safety policy.

#### **6.2 POLICY AND MANAGEMENT**

The corporate health and safety policy comprises two elements: a health and safety policy statement and an "organisation" document which sets out roles and responsibilities. The policy was approved by Policy and Resources Committee on 4 July 2019.

In essence the policy continued to be fit-for-purpose in 2020/21, with a minor change that the delegated lead responsibility for health and safety was reassigned to the Head of Communications, Technologies and Business Transformation in place of the Deputy Chief Executive (as that post is vacant).

During the 2020/21 year two further improvements to the policy were identified. Firstly, that equality, diversity and inclusion be referenced in the policy statement. Secondly that some reorganisation of the arrangements document (although not the content, which remains sound) would be beneficial to help staff at different managerial levels to identify the responsibilities assigned to them. These minor changes will be put to the P&R Committee in the 2021/22 financial year.

The Corporate Health, Safety and Well-being Group met quarterly throughout the year, providing a focus on health and safety activity within the organisation. The requirement for "competent officer" support was met through a Service Level Agreement with North Yorkshire County Council at a cost of £46,434+VAT for 96 days service. An additional £9k for 24 extra days was also commissioned to assist with updating Streetscene risk assessments.

#### **6.3 COVID-19**

The COVID-19 pandemic dominated corporate health and safety activity during 2020/21. This section describes the key features of the health and safety response in relation to the workforce, the key indicators of effectiveness, and a brief assessment.

**Response:**

- In response to government guidance Ryedale District Council facilitated significant numbers of staff to work from home, with prioritization of those with underlying health conditions that would place them at additional risk. This involved provisioning 106 staff with laptops and phones within a four week period – with the majority within the first week. Rotas were put into operation to retain a minimal number of staff in attendance at Ryedale House to cover the elements of essential services that were unable to be done from home. Arrangements were also put in place at operational buildings such as the Depot and Derwent Lodge.
- COVID-secure measures were put in place at RDC sites. This included a building handbook for staff attending the Ryedale House and the Depot to ensure new working arrangements were clearly understood, social distancing, one-way systems, advice posters, hand sanitizers, safety screens and desk cleaning equipment in all offices, a personal protective equipment (PPE) ordering system, and touch-point cleaning throughout the day. A duty officer daily check was introduced to ensure COVID-secure arrangements were being followed.
- The Waste and Environment Service introduced a number of measures including storage of waste for 72 hours prior to disposal, ventilation and daily cleaning down of vehicles and additional vehicles to enable social distancing during rounds.
- Where democratic meetings were able to be held in-person, these were organised in accordance with government health and safety guidelines and detailed risk assessments. During lockdown periods arrangements were made for democratic meetings to be held digitally, again in alignment with government guidance, in order to protect Elected Members, attending officers and members of the public.
- Service risk assessments were adapted in light of COVID arrangements to ensure safe working, with business practices adapted accordingly and delivery of some aspects of service (eg in person site visits or meetings) paused to align with the appropriate health and safety guidance.
- Homeworkers were issued with a homeworking handbook, with guidance on how to work safely at home, including advice on maintaining good mental health and how to access the Council's employee support helpline. Staff working at home were provided with refresher training on setting up a safe home work-space, and required to conduct a structured assessment of their to assess home health and safety arrangements and identify necessary adjustments. A more streamlined system to report accidents and near misses at home was introduced and publicized to staff, and none were reported. To support home working, 270 items (eg chairs, monitors, desks, keyboards, mouse, HDMI cables, home plug network sets, laptop risers, wrist rests and footrests) were issued. Home work-station assessments were also introduced as a matter of course for every new member of staff on joining the organisation.
- A new section was launched on RDC's intranet for COVID-related guidance. A monthly working safety meeting was introduced for any concerns to be raised about the arrangements and to communicate any new working practices.
- A weekly report on staffing was introduced to provide quick-access to information on levels of COVID sickness, self-isolation and shielding within the organisation.

- The procurement of personal protective equipment (PPE) was centralized in order to benefit from efficiency and cost-savings on bulk buying. A system for requesting PPE was introduced and PPE provided to staff undertaking community work and public-facing duties.
- Government, HSE and other relevant guidance was regularly monitored and assessed to ensure the organisation responded rapidly and proportionately to rapid changes.

#### ***Indicators:***

- Absence through COVID-sickness was low given the severity of the pandemic (46 days). Services were able to be maintained at normal or near-normal levels, due to the responsible attitude taken by staff, and the prudent corporate approach to employee health and safety, based on risk minimization.
- There were only two workplace-related outbreaks of COVID (an outbreak being defined as two cases or more). Both were in frontline teams. The corporate approach of reporting, self-isolation of workers in proximity (as per the government guidance definition) and a further approach of self-isolating secondary contacts (a step beyond that required by Test and Trace guidance) meant that these were rapidly and effectively contained.
- On 28 January 2021 the Health and Safety Executive carried out a spot-check of Ryedale House with regard to COVID-secure arrangements. The inspection was passed without any notes for action.

#### ***Assessment and improvement***

On review, the Council's health and safety response to COVID has worked well and has enabled staff teams, Elected Members and members of the public (in respect of contact with the Council) to stay safe and maintain public services throughout the fluctuating context of the pandemic.

Challenges were greatest with frontline teams. However use of PPE and additional arrangements – whilst often presenting greater logistical complexity – proved effective.

Full-time home working was a radical cultural change for many within the organisation, but staff and systems have adapted well. It has presented challenges for some workers (especially those with young children during lockdown periods), and mental health and well-being is something that the organisation needs to act upon through the mental health plan. However, staff have reported benefits in terms of work-life balance, reduced commute and additional flexibility that they are keen to retain in the longer-term. This will be addressed through a review of COVID-secure arrangements and appropriate operational models in 2021/22 to ensure that operational requirements are balanced with staff feedback on work/life balance, flexibility and collaborative contact with colleagues.

#### **6.4 ACCIDENTS AND NEAR MISSES**

There were eight accidents/near misses in 2020/21. All were in Streetscene, which is a higher risk area of the organisation due to the nature of the work undertaken.

No accident was of sufficient severity to require a RIDDOR report. (RIDDOR reports are required for certain serious workplace accidents, occupational diseases or dangerous near misses).

- The main type of accident was a slip or trip on the same level (4 from 8 incidences)
- The main type of injury was strain/sprain (5 from 8 incidences)
- All accidents and the actions taken were recorded locally and the necessary remedial actions taken

During the year communications were issued regarding reporting accidents at home that occurred whilst working at home, and a new, simpler online reporting mechanism introduced.

### ***Assessment and improvement***

Streetscene remains a key focus for health and safety monitoring, given the work involves manual handling, vehicles, contact with machinery and physical movement. During the year additional resource was put into a systematic review of risk assessments in the Streetscene organisational area, as the basis for a new safe working practices implementation plan. This work will complete in 2021/22.

Accidents will continue to be monitored departmentally, and at the Corporate Health, Safety and Well-being Group, in order to check if there are any systemic issues that need to be addressed. Generally however the organisation has a low level of accidents and near-misses but we will continue to disseminate regular communications to reinforce reporting mechanisms.

## **6.5 SICKNESS ABSENCE TRENDS**

- Sickness absence can be useful as an indicator not only of general health amongst the workforce, but of staff well-being
- Total sickness absence (long and short-term) during the year was 1,040 days lost. This equates to an average of 4.68 days per employee.
- For the purposes of comparison, in 2018/19 (ie pre-COVID), the average long-term sickness absence for local authorities in North Yorkshire as a whole was 8.5 days. The average short-term sickness absence for local authorities in North Yorkshire as a whole was 3.5 days (source: Local Government Association, 2020). UNISON research from 2017 indicates that the local government average days lost per year is 7.9 days. When compared against this research, Ryedale District Council's sickness absence rates are well within expected parameters.

### ***Short-term absence***

75 people were absent for a short period due to sickness (34% of the workforce). The top three reasons for short-term (up to four weeks) absence were (in order):

- Infections non-COVID (14 people)
- Stomach, liver, kidney and digestion disorders (11 people)
- Ear, eye, nose and mouth/dental (10 people)

COVID-19 was the fourth most prevalent reason for short-term absence (9 people).

An analysis of the number of days lost per absence reasons indicates that the three causes responsible for the most working days lost were:

- Infections (165 days/14 people)
- Stress, depression, anxiety (89 days/6 people)
- COVID (46 days/9 people)

It should be noted that no data is available to assess whether the days lost due to stress, depression and anxiety were work-related.

### ***Long-term absence***

Six people were absent for a long-term period (more than four weeks) during the year.

- Stress, depression and anxiety accounted for most long-term days lost (379 days/2 people)
- Infections (157 days, 3 people)
- Back and neck (33 days/1 person)

### ***Assessment and improvement***

Nationally, the reasons for most days lost are minor illnesses, musculo-skeletal and mental health, so the key causes of sickness absence at RDC are similar to the national picture.

It is also clear from Local Resilience Forum information sharing that mental health, grief, trauma and fatigue in the aftermath of COVID is likely to have a major impact on sickness levels and productivity across the public sector.

The number of days lost through stress, depression and anxiety will continue to be closely monitored. In addition, additional investment in capacity will be requested to support the health and well-being of the workforce, as signalled in the budget papers presented to Full Council in February 2021. This investment will support the work of the Council's Well-being Group in 2021/22 and the following year. An increase in investment and focus on mental health is a common theme across other public sector organisations, in the interests of ensuring service continuity for the public, and demonstrating the duty of care towards staff who have contributed an exceptional level of discretionary effort during the pandemic.

This will be picked up in the 2021/22 year through the Well-being Group and a new mental health programme.

For next year we will introduce comparative figures, so we can determine sickness absence trends year on year and, if so, implement any necessary responses.

## **6.6 OCCUPATIONAL HEALTH**

There are two key aspects to occupational health: health surveillance (most relevant to the Streetscene team) and occupational health referrals (relevant to all employees).

Occupational health support is provided by North Yorkshire County Council, with surveillance managed through an online portal.

Through NYCC, Ryedale District Council employees also have access to Health Assured, a 24:7 telephone counselling support service that is publicized through the intranet and periodically in all-staff emails. Whilst it deals with broader issues than occupational health, data on Health Assured is included in this section.

### ***Health surveillance***

- Health surveillance is a system on ongoing health checks that may be required by law for employees who are exposed to certain environmental conditions (eg noise or vibration, or exposure to substances that are hazardous to health). The majority of roles at Ryedale District Council do not require any statutory health surveillance. For the most part, the roles that require health surveillance are in Waste and Environment.
- Most health surveillance was conducted as questionnaire screening during the year due to COVID, save for some onsite clinics during the brief lockdown lift in autumn 2020
- In Streetscene there were 40 outstanding audio face-to-face or review testing sessions and 5 outstanding spirometry sessions at the end of the year. Onsite clinic planning for face-to-face assessment is being addressed.

### ***Referrals***

A total of 37 referrals were received into the Occupational Health service from RDC.

### ***Health Assured***

28 staff accessed confidential help and support through Health Assured, the Council's 24-hour telephone counselling service, during the year. Of these:

- 16 calls were with regard to mental health
- 6 calls about general work-related issues
- 3 were legal issues (not necessarily work-related)
- 1 in relation to a life event
- 2 in relation to physical health
- There were no calls in relation to relationships, financial or whistleblowing

No data is available to provide a comparison with the previous year, but if Ryedale District Council is assumed to follow a similar pattern to other local authorities, it is expected that this figure would represent a rise on the figure for previous years.

The number of people accessing the service should be read in context of the following notes:

- The Council deliberately heavily promoted the use of the Health Assured service throughout the pandemic, given the likelihood of increased stress and anxiety in the population generally
- Counselling through Health Assured is not restricted to work matters, and may be on personal issues
- Health Assured is also open to a staff member's immediate family. As a result of confidentiality, no data is available on how the number of calls to the service might split between staff/family members.

### ***Assessment and improvement***

During the 2021/22 year outstanding surveillance checks will be made a priority and a number of issues addressed, including:

- Management ownership of occupational health to ensure data are promptly and regularly reported to support management decision-making and action planning
- Improved systems for ensuring that new roles are assessed for occupational health surveillance
- Improved systems for ensuring all starters and leavers are added to/removed from the portal for health surveillance
- Investigation of the number rate of referrals for underlying trends
- Support for mental health, through the mental health plan (subject to approval of resources)

## **6.7 HEALTH AND SAFETY TRAINING**

All new employees are required to undertake basic training in health and safety and mental health awareness. Managers are also required to undertake an additional training course in health and safety for managers.

At 31.03.21, 100% of employees had completed the basic health and safety training and 98% had completed mental health awareness training. Additional arrangements are made to train new employees in Streetscene.

### ***Assessment and improvement***

Basic health and safety training is being addressed, however in 2021/22 we will review provision of specific training in relation to particular roles and responsibilities, and to address any new issues identified through the September revision of departmental risk assessments.

## **6.8 ASSETS**

The Council has responsibility for a wide range of building and land assets, including Council offices, amenity buildings, investment properties, sports and leisure buildings, car parks, public conveniences, social housing, closed church yards, and miscellaneous buildings and pockets of land.

Condition surveys or reviews were limited in 2020/21 due to COVID restrictions. However urgent reviews were prioritized.

During the year the Council increased the level of dedicated staff resource for the management of building assets with a view to updating the asset register, conducting condition surveys, reviewing the 10 year maintenance plan and completing the tree survey mapping and maintenance programme in 2021/22.

### ***Assessment and improvement***

Condition surveys and maintenance plan across all Council assets to be prioritized in 2021, together with fire-risk assessments and appropriate arrangements (eg asbestos, legionella) as buildings are re-occupied.

## **7.0 IMPLICATIONS**

7.1 The following implications have been identified:

- a) Financial  
Health and safety was budgeted within the 2021/22 budget. Additional cost was incurred in relation to COVID requirements, which was picked up within the additional capacity budgets supported by the Council and by government funding.
- b) Legal  
This report indicates that Ryedale District Council is working to discharge its legal duties with respect to health and safety.
- c) Other  
No other implications identified.

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