

# **DUNDEE CITY COUNCIL**

**REPORT TO:** Personnel Committee - 15 August 2005

**REPORT ON:** Annual Health and Safety Report 2004/05

**REPORT BY:** Assistant Chief Executive (Management) and Council Health and Safety Co-ordinator

**REPORT NO:** 447-2005

## **1 PURPOSE OF REPORT**

- 1.1 The purpose of this report is to seek approval of the Council's Annual Health and Safety Report (attached).

## **2 RECOMMENDATION**

- 2.1 It is recommended that the Committee approves the Annual Report which helps to promote the management of health and safety across the Council and provides information regarding the further development of health and safety management throughout the Council.

## **3 FINANCIAL IMPLICATIONS**

- 3.1 The costs associated with the further development of health and safety management will be funded from existing departmental budgets.

## **4 SUSTAINABILITY IMPLICATIONS**

- 4.1 The report will help to focus management towards creating safe, clean, pleasant environments which emphasise the prevention of illness wherever possible.

## **5 EQUAL OPPORTUNITIES IMPLICATIONS**

- 5.1 None.

## **6 BACKGROUND**

- 6.1 The Government's "Revitalising Health and Safety" strategy recommends that all public bodies summarise their health and safety performance in an Annual Report.
- 6.2 The Annual Report highlights that the management of health and safety is a senior management issue, and that the Council is committed to improving its health and safety performance through the implementation of its health and safety plan.

## **7 CONSULTATION**

- 7.1 The Council Management Team and the relevant Trade Unions have been consulted in the preparation of this report.

## **8 BACKGROUND PAPERS**

- 8.1 None.

J C Petrie  
Assistant Chief Executive (Management)

**(DATE)**

N Doherty  
Council Health and Safety Co-ordinator

**(DATE)**

**DUNDEE CITY COUNCIL**

**ANNUAL  
HEALTH & SAFETY  
REPORT  
2004/05**

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## **FOREWORD BY ASSISTANT CHIEF EXECUTIVE (MANAGEMENT)**

The past year has seen significant progress towards the development of health and safety guidance and the development of management systems through the creation of Departmental Health and Safety Policies. There is much work however still to be done with regard to risk assessment and the control of health and safety risks. This report evaluates progress to date and highlights health and safety priorities requiring attention to further improve the Council's health and safety performance.

I commend this report to you and I trust that it will encourage all of us to take further practical steps, to reduce the risks of accidents and occupational ill health in our own workplace. Management need to consciously consider the health and safety implications of our decisions and actions on a daily basis to further advance the health and safety culture within the Council. Senior Management need to consider the content of this report and the measures that require to be addressed over the next 12 months. A written action plan from each department is required by myself by the end of August to help produce our Corporate Health & Safety Plan for 2006 and beyond.

I would like to thank all who have positively contributed towards the Council's health and safety performance during 2004/05.

Jim Petrie

Assistant Chief Executive (Management)

June 2005

## **1 INTRODUCTION**

- 1.1 The management of health and safety is a senior management issue that is reflected by the Council's commitment to the continuous improvement and implementation of the Corporate Health and Safety Plan to improve health and safety performance.
- 1.2 This annual report has two main purposes: firstly to promote the Health & Safety Management, and secondly to give general information on the development of health and safety management throughout the Council.
- 1.3 Dundee City Council is a major employer in the area, employing approximately 8300 people who manage and deliver services to all those residing within the Council boundaries. As such a large employer offering and delivering a diverse range of services, the Council influences and affects the quality of life of many people, therefore it is important that services are delivered in a manner, which takes cognisance of the health and safety of all. Health and safety should therefore be managed in the same planned, considered and informed manner as all elements of the organisation.

The Council, like many other similar organisations involved in a wide range of work activities, has developed an approach relying upon line management, Health & Safety Co-ordinators and Health & Safety Advisers. In order to effectively manage health and safety in this manner, a blend of both standardised procedures and systems, coupled with the reliance upon a competent workforce, is required. Where health and safety rules, standards and procedures are prescribed, then those systems must be transparent, up-to-date, valid, easy to comprehend and be readily accepted and implemented by staff.

## **2 MANAGEMENT OF HEALTH & SAFETY**

- 2.1 The Council's Health & Safety Policy, states that a Chief Officer be appointed to champion and lead Health and Safety and allocate roles and responsibilities for health and safety performance within the Council. This Chief Officer has been appointed and is the Assistant Chief Executive ( Management ).
- 2.2 The principal aim of the policy is to provide and maintain a health and safety culture in which the opportunities for accidents and occupational ill health are eliminated by the effective management of health, safety and welfare.
- 2.3 This has been developed into five key objectives:
  - To lead the Council forward by providing health and safety policies and guidance that provides clear support and direction to achieve best practice, recognising legal compliance as a minimum standard.

- To ensure that all levels of management, and employees, are sufficiently competent to discharge their duties with due regard for health and safety.
- To facilitate the integration of health and safety considerations into the Council's decision making process, so as to ensure that resources are appropriately and effectively allocated by all levels of management.
- To promote and co-ordinate the development of health and safety plans to improve standards, and their implementation, for the benefit of all who may be affected by the Council's work activities.
- To monitor and evaluate the health and safety performance to motivate management to take effective measures to reduce health and safety losses and improve performance.

2.4 The Corporate Health & Safety Section of the Council is located within the Personnel Department, as employee welfare remains an integral component of personnel management. The role of the Section should therefore be seen as a specialist function, offering professional advice and guidance that can "add value" to the activities of line management and staff. In order to achieve these objectives, the Corporate Health & Safety Section is required to:

- Provide corporate health and safety guidance, standards and procedures, and to keep those standards under review as required by changes in legislation and other requirements;
- Ensure that Directors and Chief Officers are kept briefed and informed of health and safety developments within the Council;
- Provide competent health and safety advice, guidance, information and support to all Departments;
- Effectively communicate, consult and liaise with trade union appointed safety representatives and representatives of employee safety, to further improve health and safety standards;
- Liaise with the Health & Safety Executive and other enforcement agencies on behalf of the Council;
- Promote pre-employment health screening, where appropriate, as part of the recruitment and selection process;
- Develop a base-line health and safety education standard for all levels of staff within the Council;
- Develop and deliver corporate health and safety training to improve risk control;

- Use promotional opportunities to encourage activities and events that will improve the health and safety culture of the organisation;
  - Participate in the European Health & Safety Week to promote health and safety compliance within the Council;
  - Develop, and produce, a Health and Safety Toolkit for all work locations;
  - Audit work activities using a priority planned approach;
  - Produce an analysis of accident data on a regular basis to assist in evaluating the Council's health and safety performance;
  - Assist departments in their investigation of accidents and incidents;
  - Undertake surveys on request, to determine the Council's performance in a particular health and safety field;
  - Retain strong links with other health & safety professionals through the ABC Benchmarking Group and be regularly audited against the Good Practice Guide;
- 2.5 Each Director / Chief Officer is required to provide and revise as often as necessary their own departmental health and safety policy. These policies are to detail arrangements for implementing the Council Health and Safety Policy within each Department.
- 2.6 In particular each departmental policy must detail the specific arrangements for:
- Undertaking risk assessments and implementing controls
  - Producing and implementing safe systems of work
  - Ensuring that sufficient resources are available to implement the policy
  - Maintenance and repair of work equipment
  - Storage and use of hazardous substances
  - Management of change (including changes in management systems and organisation, systems of work, new plant and equipment, introduction of new substances or work practices)
  - First aid
  - Accident investigation, recording and reporting
  - Information, instruction, training and supervision
  - The control of contractors/visitors
  - Monitoring performance
- 2.7 Some larger Departments have appointed their own Health & Safety Officer to assist senior management in the implementation of the health and safety policy and risk controls.



- 2.8 All Directors / Chief Officers have appointed a Departmental Health & Safety Co-ordinator to support and assist in the day-to-day management, development and implementation of Health & Safety Policy and practice. The role of the Health & Safety Co-ordinator is to promote and monitor the management of health and safety within their Department and to provide a direct communications link between the Corporate Health & Safety Section and Chief Officers.
- 2.9 The Health & Safety Co-ordinators meet on a quarterly basis to focus on the development and promotion of effective health and safety management within Council departments. The purpose of the group will be to develop a consistent approach to compliance with Council policies.
- 2.10 The key issue since the group was formed in December has been to develop suitable departmental health and safety policies with adequate arrangements and resources being targeted to undertaking health & safety risk assessments and improving risk control.

### **3. SIGNIFICANT ISSUES**

- 3.1 The Council's reporting of injuries under the Reporting of Diseases and Dangerous Occurrence Regulations 1995 (R.I.D.D.O.R.) has improved considerably over the last 12 months with only Departments with manual workers continuing to experience the under reporting of accidents to a significant degree. Management must encourage employees in these Departments to report minor injuries to enable the underlying causes to be identified and to ensure that appropriate corrective action is taken. Management with the support of safety representatives needs to identify innovative measures, through co-operation to develop user-friendly methods to improve the reporting rates.
- 3.2 There has been a poor response by management to ensure that employees nominated to attend risk assessor training actually submit a risk assessment for evaluation at the end of each course. Course feedback forms indicate that the majority of delegates are not adequately briefed by line managers prior to attending health and safety training. Subsequently it is also likely that very few are debriefed following training. Line managers have a key role to ensure that their employees who attend training complete their training by submitting risk assessments for evaluation. The completion rate for all risk assessor-training courses across the Council in the past year has been calculated to be 36%. A target pass/completion rate of 70% should be achievable for all Departments.
- 3.3 Consultation with employees in a number of departments has revealed that employees are very often are unaware of the risk controls that apply to their area of work. Departments in many cases have completed risk assessments, but the approved controls have not been communicated to the employees undertaking the relevant task, resulting in employees undertaking work in an unsafe manner. This/...

This is a significant issue to which all Departments must devote resources. Communication strategies must be developed, and training must take place within departments to ensure that supervisors, management and employees all understand, the approved risk control procedures are to be followed.

- 3.4 All departments have now developed new Departmental Health and Safety Policies within the last 12 months and all are in the process of communicating their policy to their own employees. One of the key elements at the heart of each policy is their departmental strategy to undertake risk assessment and develop safe working procedures. Departments must ensure that adequate time is dedicated to ensure that risk assessments are undertaken and controls implemented to manage health and safety risks.
- 3.5 A considerable amount of new Corporate Health & Safety Guidance has been produced in the past 12 months all of which has been aimed at assisting Departments and their risk assessors. It is intended that this new Guidance will shortly be made readily available in the form of a Health & Safety Toolkit. The Toolkit is to be made available in a hard copy and electronically. All workplaces with more than 5 employees based at that site will receive a hard copy. The Corporate Health & Safety Section, on an annual basis, will thereafter keep the Toolkit under review and updated electronically. Departments however will be responsible for downloading updates from the Personnel Department Intranet and maintaining their Toolkit as a current document.
- 3.6 Manual handling incidents account for 27% of all incidents this year, an increase of 7% over the previous year. Manual handling activities account for 45% of all incidents in Dundee Contract Services and 38% of all incidents in Waste Management. Both departments are currently developing action plans to address the root causes of manual handling injuries to improve risk control and performance.
- 3.7 Slips, trips and falls accounts for 23% of incidents this year, most of which tend to be minor, but 3 resulted in major injuries. Greater attention requires to be given to the condition, maintenance and design of floor coverings for work place environments. The slipping coefficients of existing floor surfaces have been measured on a number of occasions to determine objectively the level of risk. On some occasions the cleaning regime has been altered with positive results. On other occasions significant treatment of the floor surfaces has been required. Additional work requires to be undertaken in this area particularly when considering the purchase or design of floor coverings.

#### **4. HEALTH & SAFETY PLAN**

- 4.1 The Council has produced a Corporate Health & Safety Plan to improve current performance and to embrace the challenges of the Government's Revitalising Health & Safety Strategy.

- 4.2 The plan examined the level of health and safety performance in autumn 2003 and identified areas where performance could be improved. The Council approved the plan in March 2004 following consultation with management and the Trade Unions.
- 4.3 The plan has established clear strategic health and safety targets to which all Departments are committed to the end of 2005. The plan will be reviewed at that stage to evaluate progress and to establish the health and safety priorities for 2006 and beyond.
- 4.4 All Departments are accountable for progressing the action plan that is contained in Appendix 1 to this report. All departments have now produced their own Health & Safety Policies but in a number of cases further work is required to refine and implement strategies for undertaking risk assessments and improving risk control.
- 4.5 The Corporate Health & Safety Section will monitor the implementation of the action plan with progress reports being furnished to the Assistant Chief Executive (Management).
- 4.6 The current updated review of the Health & Safety Action Plan is contained detailed in Appendix 1. Most departments are struggling with their obligations to undertake and keep risk assessments under review. Employees in a number of cases are also unaware of the current risk controls to be adopted for work activities they are undertaking. Senior management in all departments, need to ensure that sufficient resources are allocated to not only undertake risk assessments but to implement the approved risk controls.

## **5. HEALTH & SAFETY CONSULTATIONS WITH EMPLOYEES**

- 5.1 The Council has established a Council Health & Safety Committee that meets on a quarterly basis. The chair of the committee is shared between management and trade unions, with the agenda being agreed in advance by both parties. The Council's advisers from the Corporate Health & Safety Section always attend the Council Health & Safety Committee.
- 5.2 The Trade Unions are consulted with regard to the development of corporate health and safety policies and guidance. The functions of the committee are to study accident and occupational ill health incidents/statistics, audit reports and assist in identifying the need for safe systems of work. The committee can also assist in the monitoring of health and safety standards and performance.
- 5.3 All Departments were to have established a health and safety committee or similar forum for consulting with employees by December 2004. At present only 10 Departments have fulfilled this requirement. The/...

The Health & Safety Commission's Revitalising Health and Safety Strategy states that "workplaces with trade union representatives and joint health and safety committees have a significantly better accident records- over 50% fewer injuries – than those with no consultation mechanism" To be effective these committees however need to be recognised as forums for stimulating change and achieving improvements in risk control at a departmental level.

## **6. HEALTH & SAFETY PERFORMANCE DATA**

- 6.1 Completed health and safety incidents reports are copied and sent to the Corporate Health & Safety Section. Each report is to correctly identify not only the immediate cause but also the underlying causes and the proposed remedial action. The information is used to produce reports for the Council Management Team on a quarterly basis.
- 6.2 The data is analysed and trends identified to help senior management focus on areas of concern. The level of reporting is monitored along with progress being made to improve performance. The information is also shared with the safety representatives through the Council Health & Safety Committee.
- 6.3 During 2004/05, there were 439 health and safety incidents involving employees compared to 562 in 2003/04. There were 73 members of the public taken to hospital as the direct result of a work activity in 2004/05 compared to 83 in 2003/04. The health and safety incident data for 2004/05 can be found in Appendix 2.
- 6.4 At present there are concerns with regard to the level of under reporting of incidents, however every encouragement is being given to reporting incidents as this creates an opportunity to investigate minor incidents and take corrective action to prevent more serious incidents from arising.
- 6.5 The total number of RIDDOR incidents to employees during the year was 132 comprising of 126 +3day injuries and 6 major injuries. This is a reduction of 10 reportable injuries over the previous year.
- 6.6 The total cost of health and safety incidents using the HSE costing profile, was calculated to be £ 334,654 where a fixed calculated cost is given for each type of incident. This is a reduction of £45,000 in comparison with the previous year. (See appendix 2)
- 6.7 During the year 246 employees were absent from work due to an accident or occupational ill health. The number of days lost due to physical injuries and ill health sustained as a result of work activities was 4752, the average number of days absence being 19 days. (Excludes teachers)

- 6.8 During the year the Council had several pro-active visits from the HSE. One involved a stress audit, the other audit concentrated on the collection and recycling of waste and the third audit was in relation to the Airport. These were all conducted as part of the HSE's national planned strategy. A further 2 visits took place one of which involved an unannounced visit to Dundee Contract Services that resulted in 2 Improvement Notices being served for lack of adequate risk controls in place. There was also one visit as the result of a complaint, resulting in an Improvement Notice being served in Dundee Contract Services to undertake a risk assessment and implement controls to minimise the risk of aggression and violence to workers operating out with normal working hours. All such notices were complied with in full.

## **7. HEALTH AND SAFETY TRAINING**

- 7.1 The Corporate Health & Safety Section has produced training calendars for the past two years, to meet the needs of Departments, providing both corporate training and tailoring particular courses to suit departmental needs upon request.
- 7.2 During the year the Corporate Health & Safety Section was scheduled to deliver 33 corporate courses all of which were delivered but then delivered an additional 31 courses upon request. The Section did however have difficulty in responding to these requests as delivering training does result in less monitoring and auditing taking place. There has been a significant waiting list for risk assessor training and no matter how many additional courses are provided the waiting list continues to grow.
- 7.3 During the year the Section delivered 64 training courses compared to 54 training courses the previous year. This accounts for 708 employees receiving some form of health and safety training during the year, an increase of 120 employees than the previous year. The training of this number each year cannot however be sustained without having an impact upon less time being available to measure and audit health and safety compliance within departments. The average number of delegates per course has been calculated as being 11.0 per course an increase of 0.2 employees per course, over the previous year.
- 7.4 However when analysing the data further, 25 risk assessor type training courses were delivered during the year, but only 36% of delegates attending this training actually completed this training by submitting suitable and sufficient risk assessments. Departmental line management need to ensure that delegates returning from risk assessor training are required to submit an assessment for evaluation following completion of the course, to ensure that resources to undertake risk assessments are effectively utilised.

## CONCLUSION AND RECOMMENDATION

This report highlights that greater attention requires to be given to ensuring that safe systems of work are developed and followed by all departments. The management teams in all departments need to closely examine the detail contained in Corporate Health & Safety Plan and monitor their own contribution towards fulfilling the objects of the plan.

It is recommended that all Departments respond to this Annual Report by producing their own written action plan to address measures that will further improve risk control. Copies of Departments written action plans are to be submitted to the Assistant Chief Executive (Management) by 1st September 2005.

## REFERENCES

Health & Safety Executive, 2001  
*A Guide to Measuring Health & Safety Performance*, London: HMSO

Health & Safety Commission, 2000  
*Revitalising Health & Safety*, London: HMSO

Health & Safety Executive, 1997  
*Successful Health & Safety Management*, London: HMSO

Dundee City Council, 2005  
*ISIS Personnel Record System*, Dundee City Council

## DUNDEE CITY COUNCIL'S HEALTH & SAFETY ACTION PLAN 2004/2005

No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
1	Communicating Roles & Responsibilities	a Council's Health & Safety Policy	Chief Executive/ Council H & S Co-ordinator	Immediate	Accessible to all employees	Last reviewed in Oct 2003. Next review scheduled for 2006.
		b Departmental Health & Safety Policy	Directors/Chief Officers	June 2004	Accessible to Departmental employees	Not all employees are aware of the content of their new departmental policy
		c Appointment of Director for Health & Safety	Chief Executive	Immediate	Appointment recorded in Council's Health & Safety Policy	Post currently held by Assistant Chief Ex. (Management)
2	Provision and review of Corporate Policies/ Guidance	Health & Safety Toolkit	Council H & S Co-ordinator	February 2005	Accessible to all employees	Health & Safety Toolkit to be available from June 2005
3	Management of Safe Systems of Work	a Completion of health & safety risk assessments and implementation of risk controls	Directors / Chief Officers	May 2005  June 2004 December 2004	Employees operating in accordance with Departmental approved working practices. (Review progress) (Review progress)	Only 36% of risk assessors are completing their training. Employees in a number of cases are unaware of current risk controls to be adopted.
		b Safe Working Procedures Manuals	Directors / Chief Officers	November 2005	Provision of a safe working procedures manual for high-risk activities.	Unlikely to be achieved by November 2005

No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
4	Safety Incident Management	All incidents to be investigated to determine initial and root causes	Directors / Chief Officers	Within 1 month from date of incident commencing from January 2004	% of fully completed incident report forms received by H & S Section.  All work locations to have readily available access to trained incident investigator	All Departments have someone trained to investigate accidents. 193 delegates have completed Incident Investigation Training, but some departments still require further employees trained.
5	H & S Auditing	a Activity needs to adequately resourced and delivered by Corporate members of IOSH b Undertake audits as per programme c Respond to audit with action plan	Assistant Chief Executive (Management)  Council H & S Co-ordinator  Directors / Chief Officers	Auditing programme to commence January 2005  Frequency as per Audit Guidance  One month from receipt of audit	Review of current resources and allocation of resources to complete task.  % of completed audits as per programme  Plans to improve compliance	Insufficient resources to presently commence a health and safety audit programme.  6 audits have been undertaken
6	Annual Health & Safety Report	Production of Annual Report with involvement of all Departments	Assistant Chief Executive (Management)	Annually in June	Approval at Personnel Committee	Last Annual report Approved September 2004
7	Health & Safety Induction Training	Induction training for all new staff.	Directors / Chief Officers	Commence first week of employment	Training records	Induction Training Guidance Issued March 2004 Departments to provide details.

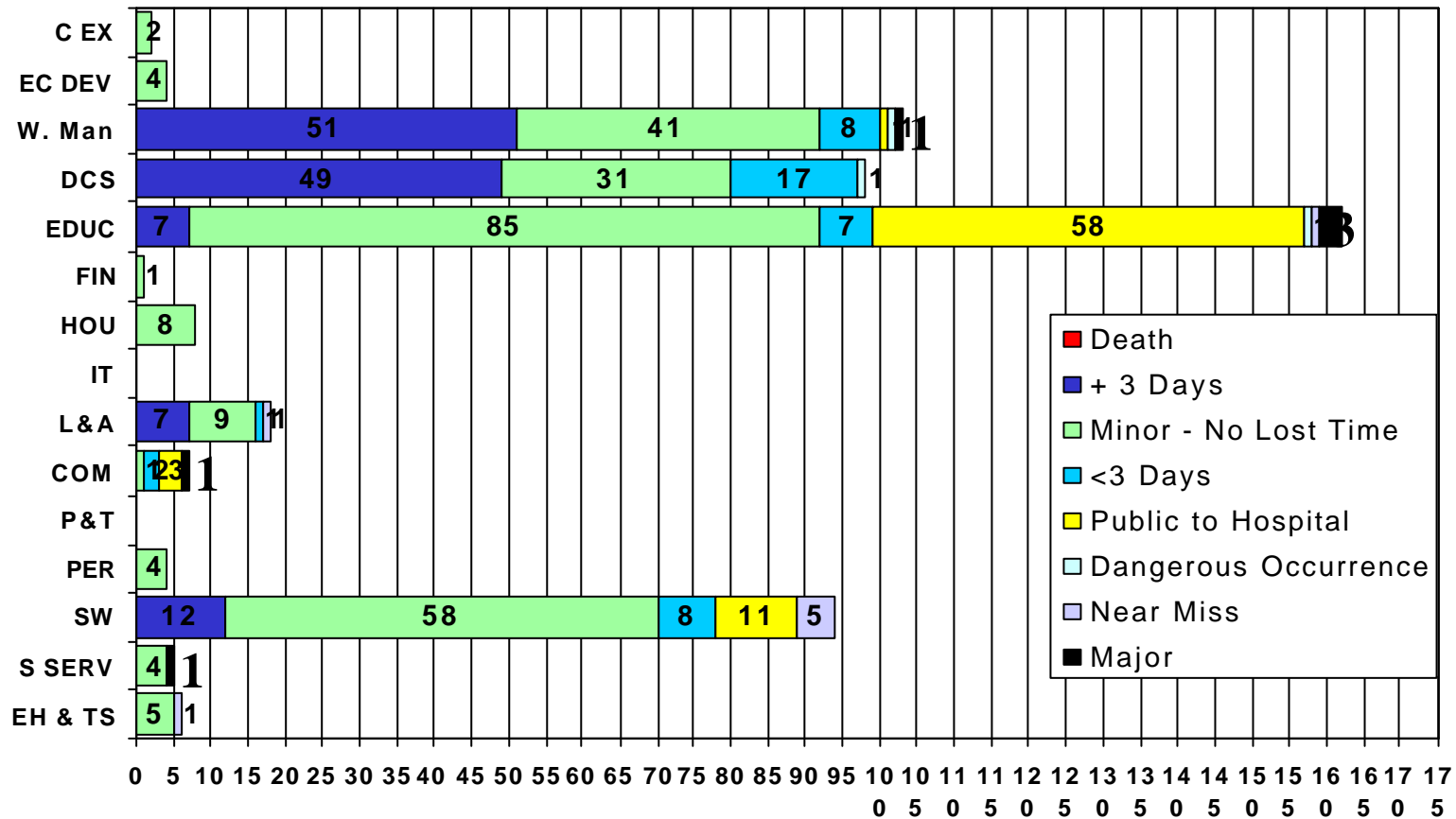


No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
8	Reporting Health & Safety to Council Management Team.	Accident statistics, Significant legislative changes.	Assistant Chief Executive (Management)	Quarterly reports to CMT	Accident statistics to have a downward trend	Incidence Rate was 19.8 per 1000 employees in March 04 now 16.1 per 1000 employees March 05. Quarterly reports issued to CMT.
9	Managing Stress	Strategies to undertake stress risk assessments to be developed and implemented, following the training.	Directors/Chief Officers	February 2005	Strategies for each Department to be in place.  Risk controls being implemented	Managers have already received Corporate training to undertake stress risk assessments.
10	Hand Arm Vibration	a HAV Guidance	Council H & S Co-ordinator	June 2004	Corporate Guidance	Guidance approved November 04. HAV Risk Assessors trained July 04.
		b Identify staff at risk and determine controls	Directors /Chief Officers	August 2004	Health Surveillance and procurement procedures in place.	Available from XM Services.
		Commencing measurements where necessary	Directors /Chief Officers	December 2004	Effectively reduce exposure below guideline limits	Some assessments already completed. Other Departments yet to commence assessments
12	Health & Safety Consultations with employees	Effective Council and Departmental H & S Committees	Assistant Chief Executive (Management) & Directors /Chief Officers	December 2004	All Departments to have their own Health & Safety Committee. Minutes provided.	10 Departments have established their own Health and Safety Committees.

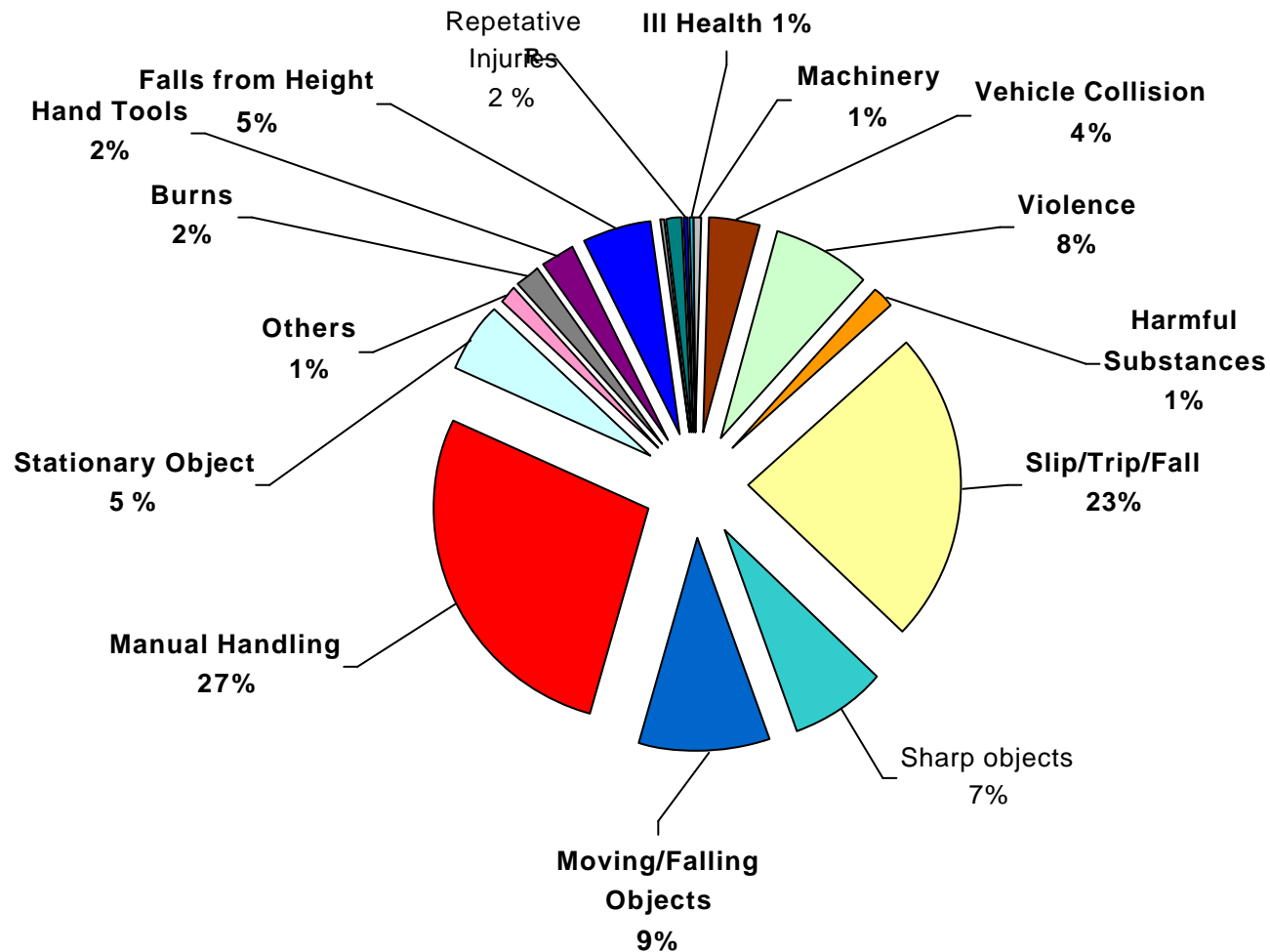
No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
13	Managing Contractors' health & safety performance.	<p>A Guidance on managing contractors</p> <p>b Vet contractors for health and safety prior to appointment.</p>	<p>Council H &amp; S Co-ordinator</p> <p>Directors /Chief Officers</p>	<p>June 2004</p> <p>November 2004</p>	<p>Corporate Guidance</p> <p>Evidence that health and safety performance evaluated.</p>	<p>Approved June 04 Supported by a training course.</p> <p>Departments are revising their current procedures.</p>
14	Management of Asbestos in Buildings	<p>a Identify the presence of all ACMs in all buildings &amp; assess risk.</p> <p>b Communicate information to occupiers, contractors etc</p>	City Architectural Services Officer	<p>May 2004</p> <p>Immediate</p>	<p>Production of an asbestos register that is accessible on a need to know basis.</p> <p>Written Asbestos Management Plan</p>	<p>Policy approved February 04. Policy being implemented by Architectural Services.</p> <p>Written Plan is developed. An Asbestos Co-ordinator appointed.</p> <p>Asbestos sampling programmes are established.</p> <p>Asbestos registers are currently being established in all buildings detailing the location of asbestos.</p>

No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
15	All Property Related Health & Safety Legislative/Good Practice Requirements	<p>a. All key issues to be identified</p> <p>b. Corporate contracts to address all issues to be provided.</p> <p>c. Contracts to be managed and monitored.</p>	City Architectural Services Officer & Director of Economic Development	<p>Immediate</p> <p>April 2005</p> <p>September 2005</p>	<p>Document detailing all issues requiring attention.</p> <p>Written plans for each of the 44 issues detailing how the issues are to be effectively managed.</p> <p>Evidence of active monitoring by the client for each contract.</p>	<p>Property Maintenance Review Group established.</p> <p>Group has prioritised the 50 topic areas for action. 11 Topics have contracts in place. Progress has been limited.</p> <p>The Economic Development Department are to undertake compliance auditing at all levels of the property management process</p>
16	Fire Safety	<p>a. Provide competent person to advise on fire safety management.</p> <p>b. Provide a fire safety strategy for the Council.</p> <p>c. Implement Fire Safety Strategy</p>	<p>Assistant Chief Executive (Management)</p> <p>Appointed Competent Person</p> <p>Directors/Chief Officers</p>	<p>November 2004</p> <p>February 2005</p> <p>December 2005</p>	<p>Person in post</p> <p>Document detailing all issues requiring attention.</p> <p>As per plan developed from fire safety strategy</p>	<p>Fire Safety Guidance for Building Managers approved March 2005</p> <p>See above</p> <p>See above</p>

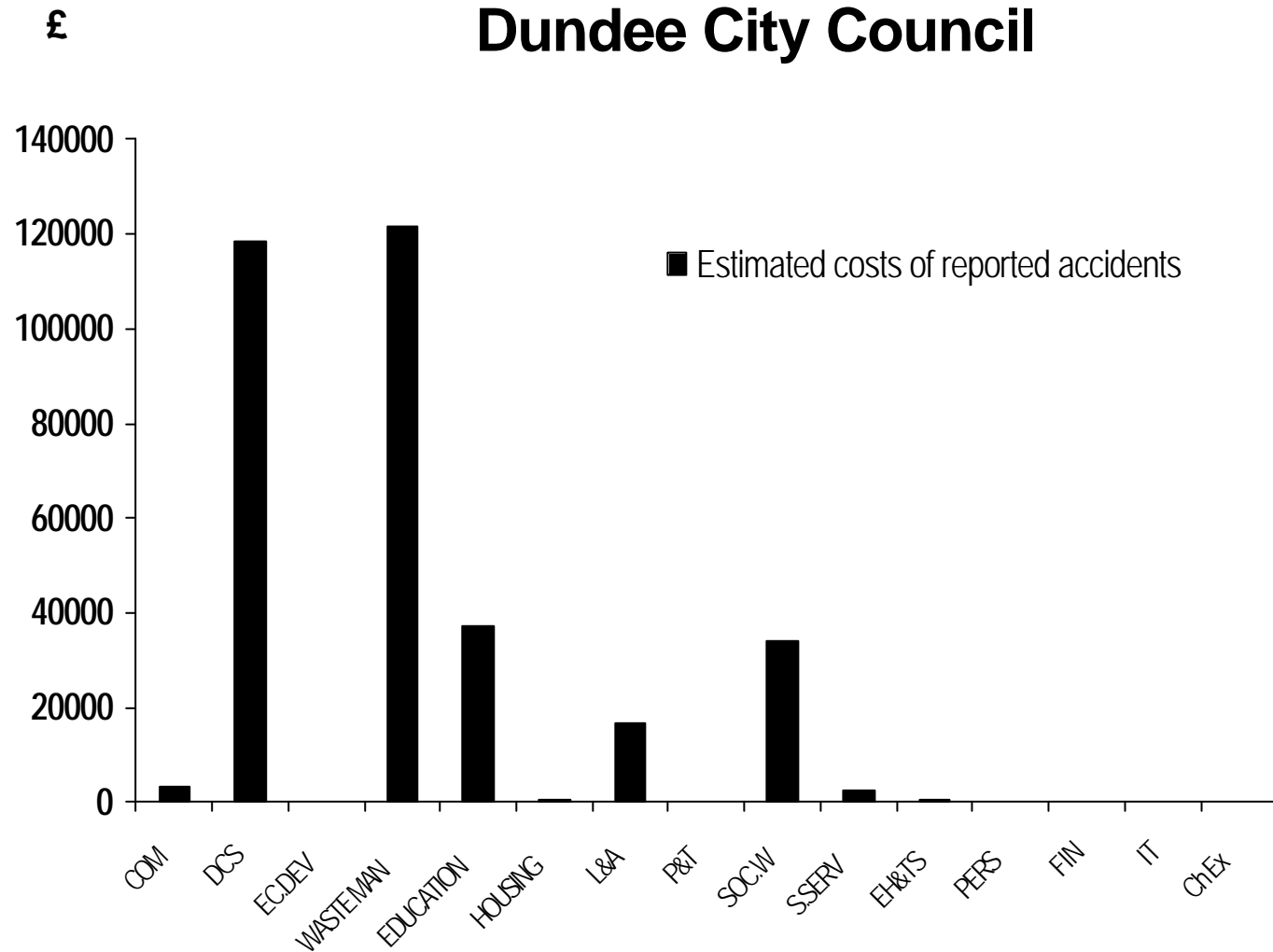
**Dundee City Council**  
**Accident Severity April 2004 - March 2005**  
**(Excluding non-reportable injuries to members of the public)**



## Dundee City Council Accident Causes (Employees Only) April 2004 - March 2005



# Costs of Accidents April 2004 - March 05 Dundee City Council



**Dundee City Council**  
**Quarterly Employees Incidence Rate**  
**Jan 2002 - March 2005**

