

DUNDEE CITY COUNCIL

REPORT TO: Personnel Committee - 11 September 2006

REPORT ON: Annual Health and Safety Report 2005/06

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

REPORT NO: 517-2006

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 LOCAL AGENDA 21 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)

1 September 2006

N Doherty
Council Health and Safety Co-ordinator

1 September 2006

DUNDEE CITY COUNCIL

**ANNUAL
HEALTH & SAFETY
FINAL DRAFT REPORT
2005/06**

CONTENTS

PAGE NO.

1.	Introduction	2
2.	Management of Health & Safety	2
3.	Significant Issues	5
4.	Health & Safety Plan	7
5.	Health & Safety Consultations with Employees	8
6.	Health & Safety Performance Data	9
7.	Health & Safety Training	10
8.	Conclusions & Recommendations	11

APPENDICES

Appendix 1 - Corporate Health & Safety Action Plan 2006/07

Appendix 2 - Health & Safety Incident Data 2005/06

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.

I would like to thank all who have positively contributed towards the Council's health and safety performance during 2005/06.

Jim Petrie
Assistant Chief Executive (Management)

June 2006

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 health & safety management, and secondly to give general information on the progress being made to improve health and safety throughout the Council.
- 1.3 Dundee City Council is a major employer in the area, employing over 8,000 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;
- Respond to health and safety enquiries within 48 hours;
- 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, 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 mainly 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 an improved 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 however indicate that the majority of delegates are still not adequately briefed by line managers prior to attending health and safety training. Subsequently it is also likely that very few are de-briefed 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 improved from 36% last year to 44% this year. A target pass/completion rate of 70% should be realistically achievable for all Departments.

- 3.3 Consultation with employees in a number of departments has revealed that employees are very often 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 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 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 over the past 12 months, all of which has been aimed at assisting Departments develop and introduce effective risk controls. All approved corporate guidance has now been issued for inclusion in the Health & Safety Toolkit. The Toolkit was launched in June 2005 with the completed document to be available in a hard copy and electronically by June 2006. Workplaces with more than 5 employees based at that site received a hard copy of the document in June 2005. The Corporate Health & Safety Section, on an annual basis, keeps the Toolkit under review and updated electronically. Departments however are responsible for downloading updates from the Personnel Department Intranet and maintaining their Toolkit as a current document, in future years.
- 3.6 Manual handling incidents account for 26% of all incidents this year, an improvement of 1% over the previous year. Manual handling activities account for 38% of all incidents in Dundee Contract Services and 38% of all incidents in Waste Management. Both departments are currently implementing their own action plans to address the root causes of manual handling injuries to improve risk control and performance. One Section of the Corporate Health & Safety Plan for 2006/07 is aimed at improving the management of musculo-skeletal injuries across the whole Council.
- 3.7 Slips, trips and falls accounts for 18% of incidents this year, most of which tend to be minor, but 2 resulted in major injuries. In real terms this is a reduction of 18 incidents over the year. Greater attention requires to be given to the condition, maintenance and design of floor coverings for work place environments. The slipping co-efficients 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. Following/...

Following each slip, trip or fall in the workplace, a trained risk assessor in the relevant department is required complete a risk assessment of the floor conditions. Management are then to ensure that any remedial steps being required are taken immediately.

- 3.8 In March 2006 an OHSAS 18001 Audit was undertaken across the whole Council to identify gaps in current health and safety provision. An action plan is being developed to address the issues raised by the audit.
- 3.9 The Stress Management Policy has been reviewed by the Personnel Department, with a new policy being approved in March 2006. One of the main changes has been the requirement for all departments to undertake a pro-active stress risk assessment every 3 years. Managers have received update awareness training in the changes to the new policy, focusing on how to undertake the stress risk assessments.

4. HEALTH & SAFETY PLAN

- 4.1 The Council produced its second Corporate Health & Safety Plan in February 2006 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 2005 and identified areas where performance could be improved. The Council approved the plan in February 2006 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 until the end of 2007. The plan will be reviewed at that stage to evaluate progress and to establish the health and safety priorities for 2008 and beyond.
- 4.4 All Departments are accountable for progressing the action plan that is contained in Appendix 1 to this report. All departments will be required to review their own Health & Safety Policies. 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 provided to the Assistant Chief Executive (Management).
- 4.6 The current updated review of the Health & Safety Action Plan is detailed in Appendix 1. Most departments are finding it difficult to fulfil 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 have established a health and safety committee or similar forum for consulting with employees. The Health & Safety Commission's Revitalising Health and Safety Strategy states that "workplaces with trade union representatives and joint health and safety committees have 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.
- 5.4 The Council's Health & Safety Policy will be reviewed by October 2006 with greater emphasis being placed upon the importance of effective departmental health and safety committees.
- 5.5 The Council offers training for safety representatives and representatives of employee safety to improve the effectiveness of all health and safety consultations.

6. HEALTH & SAFETY PERFORMANCE DATA

- 6.1 Completed health and safety incident 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 2005/06, there were 465 health and safety incidents involving employees compared to 439 in 2004/05. There were 77 members of the public taken to hospital as the direct result of a work activity in 2005/06 compared to 73 in 2004/05. The health and safety incident data for 2005/06 can be found in Appendix 2.
- 6.4 Over the past year there has been a general improvement with regard to the level of under reporting of incidents. For the year 2004/05 the under reporting of minor incidents was found to be at 67%. The under reporting of minor incidents has now fallen to 53%. Every encouragement continues to be given to reporting all 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 110 comprising of 95 +3day injuries, 8 occupational ill-health and 7 major injuries. This is a reduction of 22 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 £209,819 where a fixed calculated cost is given for each type of incident. This is a reduction of £98,087 in comparison with the previous year. (See appendix 2)
- 6.7 During the year 200 employees were absent from work due to an accident or occupational ill-health as compared with 246 for the previous year. The number of days lost due to physical injuries and ill health sustained as a result of work activities was 3982, but the average number of days absence has risen from 19 days to 20 days for this year.
- 6.8 During the year the Council had several pro-active visits from the HSE as part of the Fit for Work, Fit for Tomorrow and Fit for Life partnership (Fit 3). During the year several meetings and visits have been undertaken by the HSE Inspector assigned to work with the Council for the duration of the project. During the year visits have been made to Waste Management, Dundee Contract Services, Personnel and Social Work. These visits included a visit to the garage workshop at Waste Management; to examine Contract Services approach to the use of ladders; and an investigation in relation to an accident. The final visit made this year, involved an examination of the Council's approach to the management of occupational health. An Improvement Notice was served requiring an occupational health policy/strategy to be introduced and a framework for the management of occupational health to be established. This is subject to an appeal being made by the Council, as the Council considers that the Improvement Notice was unnecessary as this area of work was already included in the Council's Corporate Health & Safety Plan. Work is currently progressing to address the matters raised by the notice despite the Improvement Notice, being currently suspended.

7. HEALTH AND SAFETY TRAINING

- 7.1 The Corporate Health & Safety Section has produced training calendars for the past three 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 44 corporate courses, all of which were delivered, but then delivered an additional 57 courses upon request. The Section was however only able to meet these demands as an additional health and safety trainer was employed on a temporary basis between November and March. This enabled the team to also increase the number of audits undertaken this year.
- 7.3 During the year the Section delivered 101 training courses compared to 64 training courses the previous year. Also, 785 employees successfully completed Cardinus training, the online training package for display screen equipment. This accounts for 1895 employees receiving some form of health and safety training during the year, an increase of 403 employees from the previous year. The volume of training delivered this year will not be repeated again in any future years, with the amount of training being delivered in future years being reduced to a manageable level. There was a need this year to respond to the high level of demands for training experienced in 2005. All levels of staff must be competent to comply with health and safety standards, and more onus in future will be placed upon departments to train their own staff in safe working practices.
- 7.4 The average number of delegates per course has been calculated as being 10.9, a decrease of 0.1 employee per course over the previous year.
- 7.5 During the year 35 risk assessor type training courses were delivered, but only 44% 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. Next year, fewer risk assessor training courses will be delivered, therefore departments will be required to make better use of their existing resource of trained risk assessors.

8. CONCLUSION AND RECOMMENDATIONS

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 The 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 examining and reviewing their own arrangements for identifying and undertake risk assessments. Clear systems and procedures are also required for training employees in the improved risk controls with arrangements also being established to actively monitor that the new controls are being implemented. In many cases the departmental health and safety policies will require to be reviewed.

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, 2006

ISIS Personnel Record System, Dundee City Council

DUNDEE CITY COUNCIL'S HEALTH & SAFETY ACTION PLAN 2006 – 2007

Issue 1		Reducing work-related accidents relating to slips, trips & falls in the workplace				
No	Key Issue	Key Action	Responsible Person	Timescale/Frequency	Performance Indicators	Comments
1	Slips, trips & falls	Implementation of Policy on Prevention of Slips, Trips & Falls	Chief Officers	Review Annually	Reduction in number of slip trip & fall incidents.	Policy approved September 2005. There has been a 5% reduction in slips, trips & falls during 2005-06 over the previous year.
2	Slips, trips & falls	Design out slip, trip & fall hazards in the workplace, in new builds and during refurbishment	Chief Officers	On-going	Number of measurements requested for assessing floor surfaces.	12 requests for slip, resistance testing have been made over the year.
3	Slips, trips & falls	Floor surfaces to be assessed following all slip, trip or falls in premises where the Council has direct control	Chief Officers	On-going	Incident reports to be monitored to ensure Quick Risk Assessments are attached to incident reports.	All slip, trip & fall incidents are monitored and assessments are requested when not attached to incident reports.

Issue 2		Reduce the number of days lost through musculo-skeletal disorders in line with revitalising health & safety targets				
No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
1	Establish the number of musculo-skeletal injuries reported for 1 April 2004 - 31 March 2005	a Undertake a full analysis of incident data across all Departments b Identify groups of workers at risk and tasks involved	Council H & S Co-ordinator	February 2006	Establish a base line for improvement	130 musculo-skeletal injuries reported in 2004-05, averaging 12.7 lost days per injury. 39% of incidents were in DCS, 31 % of incidents were in WM and 15% were in SW.
2	Establish the number of days lost through back, neck, arm and musculo-skeletal injuries for 1 April 2004 – 31 March 2005	Interrogate the absence management system	Personnel Manager	March 2006	Establish a base line for improvement	1663 days lost due to musculo-skeletal injuries during 2004-05.
3	Relevant Departments to examine current performance and write and implement their own musculo-skeletal action plans to reduce injuries and ill-health.	Examine current working practices and implementation of risk controls	Chief Officers	June 2006	Provision of action plans to reduce musculo-skeletal injuries	Plans in place for Waste Management & DCS.

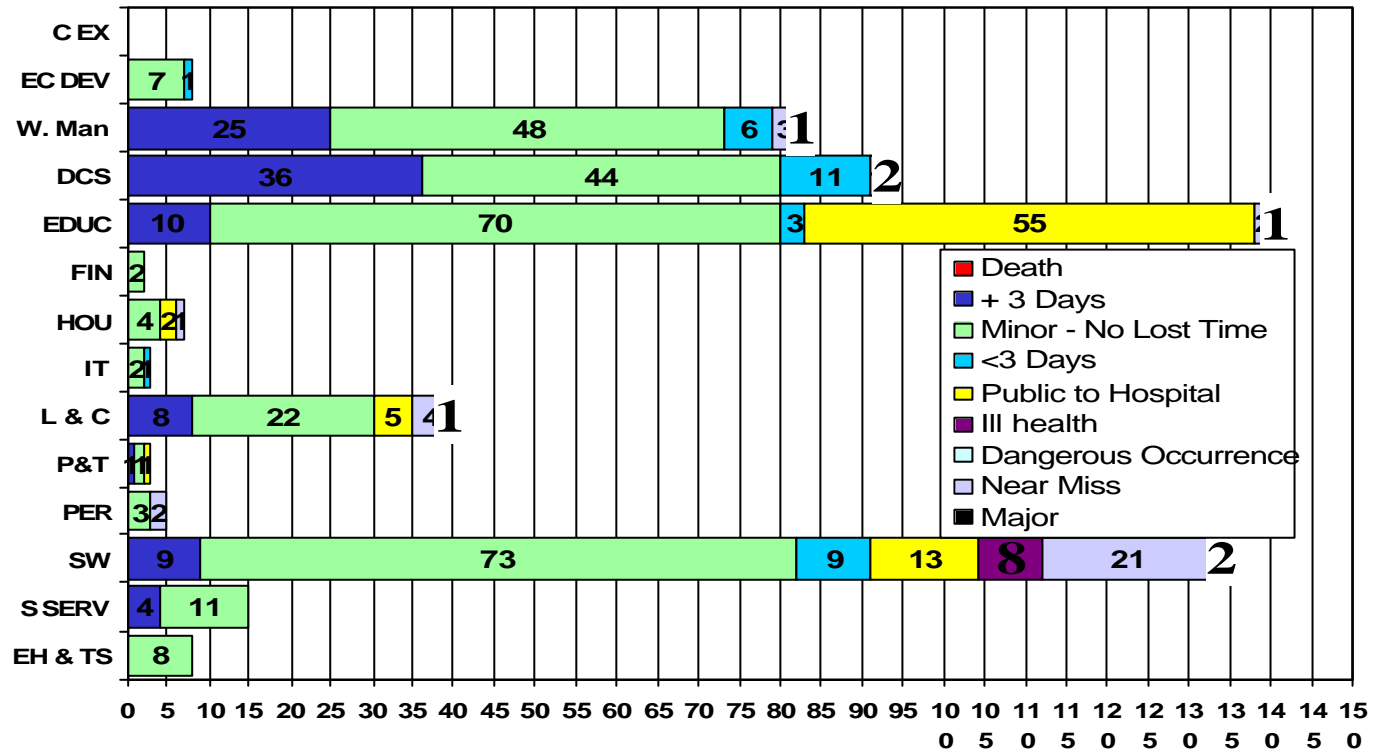
Issue 3		Reduce the number of days lost due to stress-related absences in line with revitalising health & safety targets				
No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
1	Occupational Stress	New Stress Management Policy to be approved	Assistant Chief Executive (Management)	January 2006	Committee approval of Policy	Stress Management Policy approved by Personnel Committee March 2006.
2	Occupational Stress	Stress Management Policy & Action Plan to be implemented	Chief Officers	October 2007	a Departments to have their stress surveys / assessments completed b Risk controls being implemented	133 managers have been trained to undertake stress risk assessments in accordance with the new policy. Survey to be conducted in November 2006.
3	Stress Management Plan	Implement the Council's Stress Action Plan	Chief Officers	Review progress annually	Measure against indicators in the Stress Action Plan	New Policy approved - March 06.

Issue 4		Improve interventions by occupational health providers to increase awareness and reduce occupational health risks.				
No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
1	Absence Management	Absence Management Policy	Personnel Manager	Immediate	Revised Absence Management Policy	Revised Policy approved September 2005
2	Managing Sickness Absence	Implementation of revised Policy Monitor the implementation of the Policy	Chief Officers Personnel Manager	Immediate Annually	a Reduction in Sickness Absence b Monitor progress on an annual basis	In 2004/05 APT&C staff had an absence rate of 5.76% and manual staff a rate of 7.44%. In 2005/06 APT&C absence rate has fallen to 5.47% with manual staff falling to 6.57%. Teaching staff's absence rate has fallen from 5.1% to 5.0% during this same period.
3	Occupational Health Service	Review provision of Occupational Health Service	Personnel Manager	March 2007	Produce paper outlining options for the Council	Letters have been sent to all providers, seeking information. Information is being prepared, to put occupational health services out to tender.
4	Occupational Health	Develop an Occupational Health Policy	Personnel Manager	December 2006	Approval of Occupational Health Policy	The Council's Occupational Health Policy was approved by the Council in June 2006

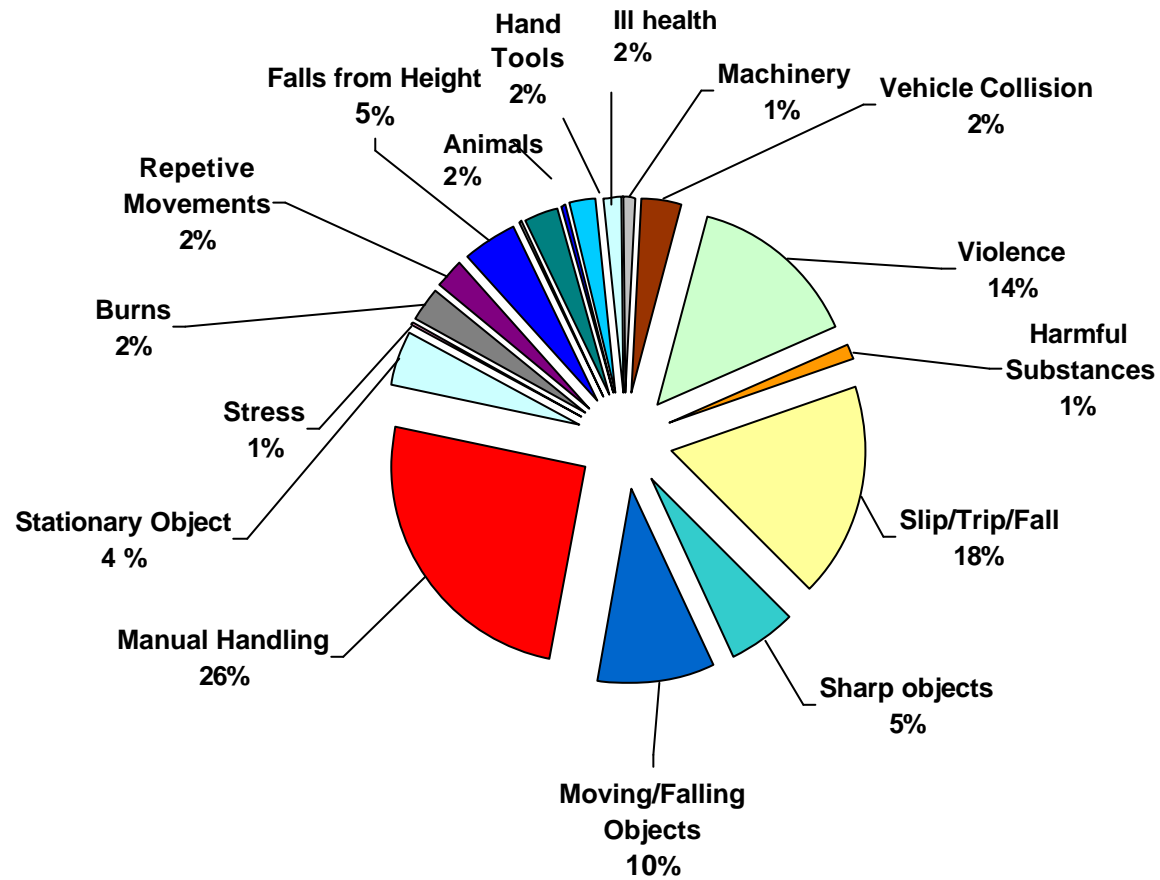
Issue 5		Improve the health & safety culture within the Council, through the effective development and implementation of health & safety management systems by all Departments.				
No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
1	Promote a positive Health & Safety Culture	Develop a Health & Safety Charter	Assistant Chief Executive (Management) / Council Health & Safety Co-ordinator	June 2006	Charter to be signed by all Chief Officers	No progress due to work on occupational health matters
2	Health & Safety Training	Produce a Health & Safety Training Programme	Chief Officers Council Health & Safety Co-ordinator	November each year December each year	a Identify health & safety training needs b Produce and implement training programme	Programme issued in December 05 for 2006. Programme is being implemented.
3	Management of Safe Systems of Work including :	a Review of health & safety risk assessments for significant risks and implementation of risk controls b. Safe Working Procedures Manuals	Chief Officers Chief Officers	December 2006 June each year December each year November 2007	Employees operating in accordance with Departmental approved working practices. (Review progress) (Review progress) Provision and review of a safe working procedures manual for high-risk activities.	Risk assessor training has been delivered for many years.
4	Health & Safety Committees	Departmental Health & Safety committees	Chief Officers	Immediate	Departmental H & S Committees to meet bi-annually	All Departments have established H & S Committees.

Issue 6		To monitor and evaluate the health & safety performance, to motivating management to take effective measures to reduce health & safety losses and improve performance.				
No	Key Issue	Key Action	Responsible Person	Timescale/ Frequency	Performance Indicators	Comments
1	Annual Health & Safety Report	Production of Annual Report with the involvement of all Departments	Assistant Executive (Management) Chief	Annually in June	Approval at Personnel Committee	Reports for 2004 & 2005 Approved
2	H & S Auditing	<p>a needs to be adequately resourced and delivered by Corporate members of IOSH</p> <p>b Undertake audits as per programme</p> <p>c Respond to audit with action plan</p>	Assistant Executive (Management) Chief Council H & S Co-ordinator Chief Officers	<p>Auditing programme to commence January 2007</p> <p>Frequency as per Audit Guidance</p> <p>One month from receipt of audit</p>	<p>Review of current resources and allocation of resources to complete task.</p> <p>% of completed audits as per programme</p> <p>Plans to improve compliance</p>	<p>Insufficient resources to presently complete a health & safety audit programme, however 16 audit reports were produced in addition to the full OSHAS 18001 Audit Report.</p> <p>On schedule</p>
3	Incident Reporting	Reporting Health & Safety Data & Accident statistics, and any significant legislative changes, to the CMT.	Assistant Executive (Management) Chief	3-monthly to CMT. Accident statistics to have a downward trend.	A general reduction in incidence rate	RIDDOR reportable incident rate has fallen from 1837 per 100,000 to 1454 per 100,000 in 2005-06.
4	Monitoring Performance	Periodically undertake surveys, to monitor the implementation of Corporate guidance.	Council H & S Co-ordinator	As and when required	Publication of survey results to Directors / Chief Officers	OSHAS 18001 Audit undertaken in February 2006

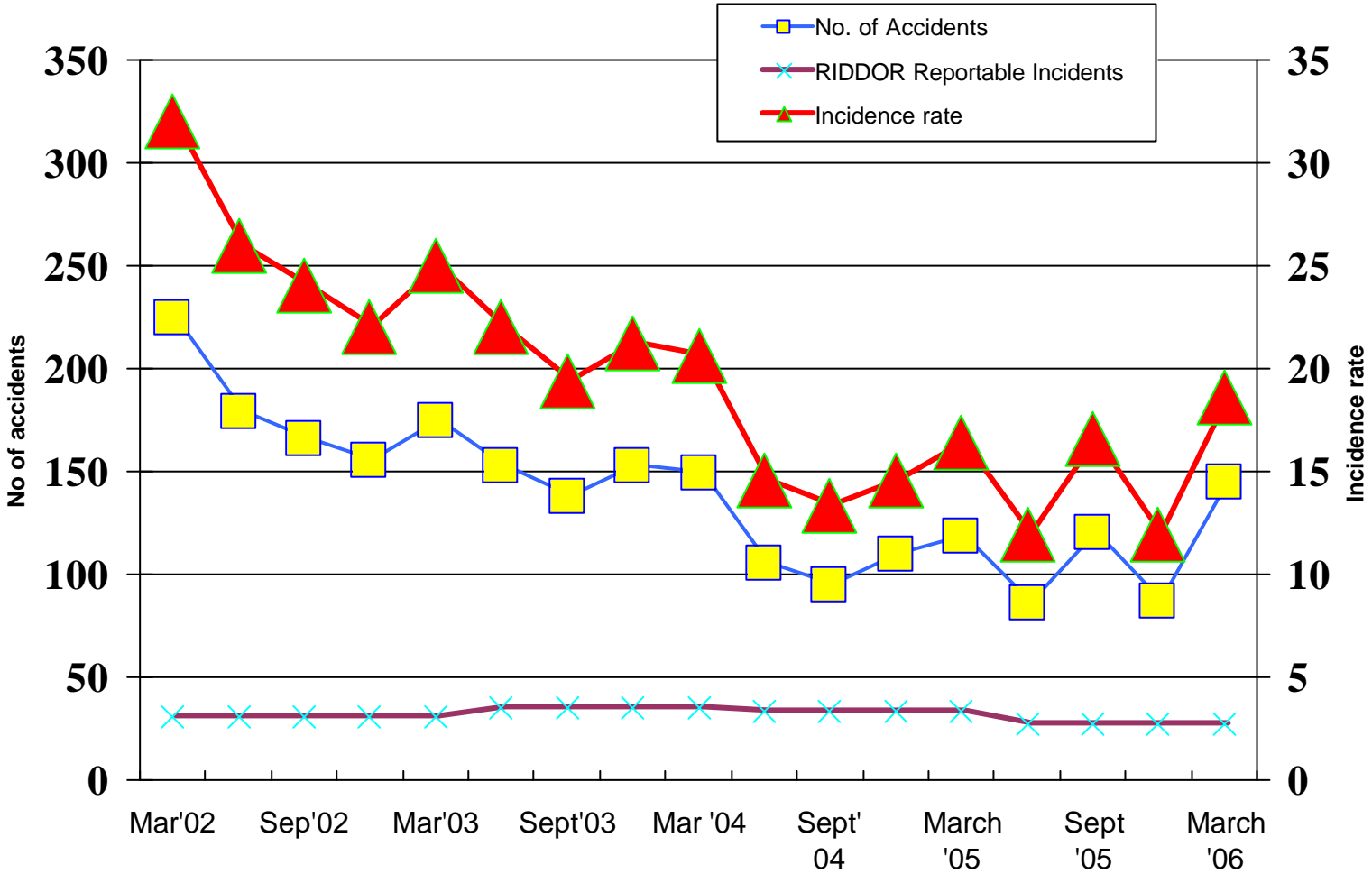
Dundee City Council
Accident Severity April 2005 - March 2006
(Excluding non-reportable injuries to members of the public)



Dundee City Council Accident Causes (Employees Only) April 2005 - March 2006



Dundee City Council Quarterly Employees Incidence Rate Jan 2002 - March 2006



Costs of Accidents April 2003- March 06 Dundee City Council

