

**Agenda Item 18  
Report PR20/21-28**

Report to	<b>Policy and Resources Committee</b>
Date	<b>26 November 2020</b>
By	<b>Human Resources Manager and Safety Officer</b>
Title of Report	<b>Annual Health and Safety Report for the Year 2019/20</b>

**Recommendation: The Committee is recommended to:**

- 1. Note the report**
- 2. Commend the continuing improvements in the overall management of Occupational Safety and Health at South Downs National Park Authority.**
- 3. Endorse the proposals for further priorities and actions.**

**I. Summary**

- 1.1 This report is the key vehicle through which the Policy and Resources Committee and thereby South Downs National Park Authority (SDNPA), will receive suitable assurances that Occupational Safety and Health (OSH) Management is being performed satisfactorily and is continuously improving.
- 1.2 This report includes:
- An overall appraisal of health and safety performance for the SDNPA through the previous year
  - A summary of further training delivered to further improve overall competency for the management of OSH
  - The organisation's approach to health and wellbeing and an analysis of sickness absence data
  - The health and safety of volunteers
  - The health and safety culture of the organisation
  - References to efficiency cost savings in sharing the development of safety management tools and information with other NPAs through the services of the PDNPA OSHA.
  - Recommendations for continuing and future priorities and actions in 2020/21.
  - Response to the COVID-19 pandemic.

**2. Background**

- 2.1 This is the eighth Annual Health and Safety Report prepared for the Policy and Resources Committee (previously prepared for the Governance Committee). Previous reports can be found at the end of this document under background documents.
- 2.2 The agreement with the Peak District National Park Authority (PDNPA) for the services of their OSH Advisor was adjusted from April 2019. This has ensured SDNPA continues to receive the benefits of sharing OSH information and management solutions with other NPAs. The adjustment to this agreement recognises the additional valuable local resource that is now available through the engagement of a part-time SDNPA Health and Safety Advisor, Bruno Aveiro. Bruno has successfully completed his NEBOSH (National

Examination Board in Occupational Safety and Health) qualification and formally started his role on 1 April 2019.

- 2.3 This arrangement has proven to be very efficient, ensuring work is not duplicated while providing sufficient resource both, locally to address more immediate issues and overall, for more strategic OSH issues.
- 3. Health and Safety Performance**
- 3.1 The day-to-day routine management of health and safety matters is performed by staff and supervised by managers. Through a planned programme of audit and inspection visits to principle workplaces and through routine meetings with staff and the Health and Safety Committee, the SDNPA Health and Safety Advisor makes judgements of how well that happens. During these visits opportunities arise to recognise and endorse good practice, respond to instances where some improvements are necessary and to further coach staff, enhancing their competence. At the Health and Safety Committee meetings matters such as: incident, accident and near-miss reports and follow-up action reports are considered, new guidance and policies agreed and performance of various safety management issues discussed.
- 3.2 Since April 2019 the PDNPA OSH Adviser has regularly shared OSH information, updates and guidance and attended the P&R Committee to co-present the Annual Report for 2018/19 in September. The PDNPA OSHA has also remotely attended or provided a report to H&S Committee meetings.
- 3.3 There have, for 2019/20, been no serious matters requiring escalation to SMT for their action. *Note: the coronavirus (COVID-19) pandemic was having a very significant and serious effect on the operation of the SDNPA at the time this report was completed. This retrospective report is primarily concerned with OSH performance during 2019/20 before the pandemic and the management of the NPA during the pandemic is not therefore addressed within the main body of this report. A summary of actions taken by the Authority to mitigate the effects of the pandemic and to comply with Government guidance is at the end of this report.*
- 3.4 A programme of routine visits, audits and inspections will be performed by the SDNPA Health and Safety Advisor with a continuing focus on visiting staff 'at work'. The PDNPA OSHA will visit annually to present the Annual Report at P&R Committee and to carry out a selective inspection with the SDNPA Health and Safety Advisor. In addition, the PDNPA OSHA will take part in key meetings and events via conference telephone/video calls, as necessary.
- 3.5 Routine workplace visits typically take account of:
- Safety related documentation. Good documentation is an essential component part of any safety management system. Use of and compliance with these documented systems is key to our overall success in implementing, maintaining and demonstrating good safety management. Key documents include: safety policies and associated procedures, safe working method statements and risk assessments, incident reports/records and follow-up/action reports. All risk assessments have been reviewed and updated during the year and new risk assessments introduced. These documents, including many risk assessments and core safety policies are becoming more consistent across a number of NPAs allowing much more efficient and timely review, replacement and referral.
  - Physical conditions and work activities – including: work spaces, access and egress (safety and fire), building conditions, work equipment and the use of PPE (personal protective equipment).
  - Risk assessments – a continuing improvement in the completion, use and a thorough review of risk assessments has been evident through 2019/20. The process of risk assessment review has driven a general improvement in the understanding of risk. Risk assessment for key issues including Manual Handling, has been consolidated during the previous year. Use of risk assessment formats used at other National Parks has made future review simpler and helped to ensure that these assessments are current, valid and consistent with the standards adopted elsewhere. All reviewed risk assessments are available on the intranet. The SDNPA Health and Safety Advisor will continue to focus on risk assessments and the use of controls identified by these assessments, as key evidence that safety is being properly considered and well managed.

- Resources and competencies – closely allied to the production and use of risk assessments is the understanding and use of these resources. The constitution of the Health and Safety Committee reflects the structure of the organisation with representatives from all directorates and officers representing HR, facilities, volunteers, OMT and UNISON. Representatives have received IOSH training in their expanded role which is clearly defined and incorporated in a reviewed Health and Safety Policy, with future training scheduled for new representatives. The Committee has structured a forward work-plan which is supported by and consistent with work carried out by both the SDNPA Health and Safety Advisor and the PDNPA OSHA. Sub groups have been formed to meet in between the quarterly meetings to ensure that actions are moved on quickly, for example to review Working at Heights, Health and Wellbeing. All representatives are also focussing in improving communication channels with the teams they represent, by including a standing health and safety item on team meeting agendas.
- Incident reports, near-misses and follow-up action –reporting of incidents and near misses continues to improve. An analysis of incidents recorded in 2019/20 can be found in **Appendix I**.

3.6 In summary, the evidence of inspections and reports to the Health and Safety Committee suggests that health and safety is managed well and continuously improving at SDNPA and the Policy and Resources Committee can receive positive assurance of that by this report.

#### **4. Training, information and supervision**

- 4.1 The provision of safety training and information continues to be a key priority for consolidating and improving OSH management across the Authority.
- 4.2 One third of the training budget is allocated to health and safety training. The Health and Safety Advisor monitors all health and safety training needs to ensure that all staff are able to carry out their roles safely and any refresher training is carried out in a timely manner.
- 4.3 There is the provision of a wide range of bespoke safety training using the e-learning portal ELMS. All staff are required to complete the following courses where relevant to their role, which are bespoke to SDNPA and signpost staff to all relevant SDNPA health and safety documentation and policies:
  - Introduction to Health and Safety – all staff
  - Managing Health and Safety –all managers
  - Fire safety – all staff
  - Manual Handling – all staff
  - Personal Safety – all staff
  - Driving Safely – all staff
  - Asbestos awareness – where relevant to role
  - Working at height – where relevant to role
- 4.4 Manual Handling training is delivered by an internal team of staff who have completed a Manual Handling Training the Trainer City & Guilds accredited course. This has proven to be very cost-effective and efficient, enabling us to regularly run manual handling training to all staff and new starters. The internal training team use a blended learning approach; staff are required to complete an ELMS module to cover the theoretical aspects which is then followed by an interactive 2-hour workshop delivered by our internal trainers.
- 4.5 This is a good example of how our ELMS system can complement and support practical training. We also use this approach to train staff in Working at Height by using an ELMS module followed by tool box talks.
- 4.6 We have introduced a series of outdoor first aid refresher training, which we repeat for staff on site annually and is more relevant to the roles of the area teams.
- 4.7 We also introduced “Dealing with Conflict” training for our public facing staff which was delivered internally by our Enforcement Officer.
- 4.8 Health and Wellbeing training and support is explored in the next section of this report.

## **5. Health and Wellbeing**

- 5.1 HR proactively monitor the recording of sickness absence and contact managers regularly to ensure that accurate recording has taken place.
- 5.2 Sickness data for 2019/20 can be found in **Appendix 2**, with a comparison of our sickness levels with other National Park Authorities and the public sector.
- 5.3 Detailed absence statistics are reviewed by the Health and Safety Committee and reported to OMT every 6 months and this will help inform the health and wellbeing support that the organisation may need.
- 5.4 Pre-employment medical screening and other occupational health services are carried out by Portsmouth Hospital. Pre-employment screening ensures that any necessary and reasonable adjustments can be made prior to an employee starting with the organisation, for example the supply of specialist work station equipment.
- 5.5 The HR Manager and H&S Advisor met with the Occupational Health provider at Portsmouth hospital to plan medical screening for all area team staff, which will include audiometric and Hand and Arm Vibration screening. This was due to be implemented but has been put on hold due to the pandemic.
- 5.6 The Health Cash Plan, Simply Health introduced to all staff and members in 2016 continues supports the organisations approach to supporting health and wellbeing internally. It offers a wide range of health and wellbeing benefits and access to counselling, a helpline and wellbeing tools. It is well-received by staff, with approximately 60% of the organisation are using this benefit. Staff and Members can also claim back a contribution to medical costs such as dental, optical and vaccinations (including flu). It also proved to be a valuable resource during the pandemic by offering tools to support the health and wellbeing of staff whilst working from home.
- 5.7 Significant progress has been made this year in supporting health and well-being internally, particularly in the area of mental health. Our Mental Health First Aiders meet at quarterly workshops to confidentially share any issues and concerns and promote mental health initiatives.
- 5.8 All Directors and Managers have completed mental health awareness training and all staff were given the opportunity to attend half day awareness sessions in July and November 2019. Our mental health training provider Wellbeing Mental Health Ltd gave a presentation “looking after your health and wellbeing” at an all staff meeting attended by staff and members in May, which received very positive feedback from staff.
- 5.9 There is a dedicated health and wellbeing page on the intranet with links to health and wellbeing resources, and the health and wellbeing group meet regularly to review mental health initiatives. There have been a wide range of lunchtime and after work activities have been organised, including football, yoga, HIIT, running clubs and walks.
- 5.10 Health and Wellbeing training courses are available through ELMS for all staff and cover a wide range of topics, e.g. e-mail stress, bullying and harassment, drug and alcohol awareness, stress management, healthy lifestyles, couch to 5k, building personal resilience.

## **6. Health and Safety of Volunteers**

- 6.1 Volunteering tasks were paused on Tuesday 17 March 2020 in line with Government restrictions regarding the Covid-19 pandemic. Volunteer tasks were provisionally put on hold until October 2020.
- 6.2 In 2019-20 the Volunteer Development Officer and area team rangers continued to train volunteers to become leaders of volunteer tasks. The training involves improving volunteers' understanding of safety processes and procedures within the SDNPA, including risk assessment, incident reporting, managing challenging behaviour, and other important safety measures. Volunteer leaders are also undergoing a separate Outdoor First Aid training qualification as part of their role.

## **7. Health and safety culture**

- 7.1 SDNPA has a positive health and safety culture, which is supported by the following:

- All Health and Safety Committee meetings are attended by an OMT level manager and there is a health and safety standing item on the OMT agenda following the committee meetings. At these meetings OMT are fully supportive any recommendations made by the H&S Committee.
- Regular health and safety communication and reminders are sent to staff via Update and meeting minutes are publicised on the intranet. A carousel session was held at the December all-staff meeting to promote reporting accidents and near misses.
- The constitution of the committee fairly represents the structure of the organisation to allow all staff to feedback any issues through their reps to the committee. Staff outside the committee have been involved in the working groups that have evolved from the committee, e.g. the health and wellbeing group.
- One third of the training budget was invested in health and safety training.
- We now have open sessions of the H&S committee, where employees can spectate and participate with any relevant questions.

## **8. Efficiency / cost savings**

- 8.1 All new policies, procedures, risk assessments and training materials are shared between all NPAs advised by the OSHA. This allows for significant efficiency savings in the production and delivery of these developments and ensures greater consistency of approach and execution of safety management. In effect these contribute to the adoption of 'best practice for NPAs' in various OSH matters.
- 8.2 ELMS has contributed to significant cost savings. We are able to provide basic training to all staff, supported by internal briefings by trained competent internal staff. This is a more efficient way of ensuring good health and safety knowledge without the need for expensive face to face training courses by external providers. The Manual Handling Train the Trainer Course in particular has made a substantial cost saving.
- 6.3 **Priorities and actions for 2020/21** The SDNPA Health and Safety Advisor will continue to perform an annual inspection programme, visiting all key premises and aiming to spend time observing staff 'at work'. Some visits will be accompanied by a member(s) of SMT. New work premises will be visited as soon as practicable after they become operational.
- 6.4 Priorities and actions for 2020/21 will need to take into account the changing situation due to the COVID pandemic and include:
  - Continue to promote and encourage near miss reporting.
  - Implementation of a new Display Screen Equipment Assessment system, which takes into account more homeworking.
  - Review and communication of the health and safety policy and terms of reference of the committee to all.
  - The review and continuation of the health and safety forward plan.
  - Raising further the profile and awareness of Occupational Safety and Health, particularly in respect of those matters most relevant to NPA activities.
  - Adopting common levels of control (across NPAs) for priority OSH concerns such as for lone working, personal safety, outdoor work and for the use of tools and equipment.
  - Adoption and use of benchmarks for NPAs including for training/competence, levels of incident/near-miss reporting and for risk assessments.
  - IOSH (Institute of Occupational Safety and Health) training for all managers and new health and safety reps.
  - Continuing to promote health and wellbeing.
  - Health screening for staff through Portsmouth Hospital Occupational Health.
  - Improve lone working safety by searching for new technologies/devices available.

## **9. Our response to the COVID-19 Pandemic**

- 9.1 Although this report covers the period mainly before the pandemic commenced, it is still important to briefly highlight to the Committee measures we have put in place in response to the situation as follows:

- We have held an emergency COVID related H&S committee meeting to discuss our approach to the pandemic and prioritise our actions to ensure staff, members and volunteers safety.
- Group volunteer tasks were suspended until October 2020.
- We have followed government guidelines to develop a COVID safe working environment for all staff in the SDC and the area offices, including the provision of guidance related to working outside. This has been constantly reviewed developed and updated in line with government advice.
- Staff have been advised to work from home in accordance with government guidelines and DSE support has been provided to ensure that they are able to work safely at home in accordance with HSE guidelines. The Facilities Team undertook the responsibility to set up offices and meeting rooms to ensure compliance with the guidelines and provide a safe working environment, including guidance for area offices and the use of tools, SDNPA vehicles and other equipment.
- Health and wellbeing support was provided on the intranet through Simply Health and virtual workshops.
- Two surveys were conducted to gather information on the health and wellbeing of staff and begin to gather data on staff expectations post COVID. The feedback has been positive in respect of the support staff have received and data will be used to input into a review of future working policies and practices for the SDNPA post COVID.
- COVID 19 risk assessments and guidance has been developed to address a multitude of scenarios and situations as required.
- This work has all been critical to ensure outdoor activities and work can continue and that we can still provide a Visitor Service to members of the public through our SDC reception team.

9.2 The committee will be provided with further detail in the 2020/21 Health and Safety report.

9.3 To date we have had no reported cases of staff testing positive for COVID-19

## **10. Recommendations**

It is recommended that good occupational safety and health management and continuous improvement at SDNPA are recognised and that proposals for further priorities and actions are endorsed.

## **11. Other Implications**

<b>Implication</b>	<b>Yes*/No</b>
Will further decisions be required by another committee/full authority?	No
Does the proposal raise any Resource implications?	No
How does the proposal represent Value for Money?	The current shared health and safety services with Peak District NPA provides excellent value for money, in comparison with using another local authority or external consultant. It allows for significant efficiency savings in the production and delivery of these developments.
Are there any Social Value implications arising from the proposal?	There are no social value implications in this paper
Has due regard been taken of the South Downs National Park Authority's equality duty as contained within the Equality Act 2010?	The Authority focuses on protecting the health, safety and welfare of <i>all</i> staff, members and volunteers. Reasonable adjustments are made to provide a safe working environment for all, through regular DSE assessments, provision of necessary work place equipment and dynamic risk assessments. Reasonable

	adjustments will be made for individuals with disabilities with advice from occupational health.
Are there any Human Rights implications arising from the proposal?	There are no human rights implications in this paper
Are there any Crime & Disorder implications arising from the proposal?	There are no Crime & Disorder implications in this paper
Are there any Health & Safety implications arising from the proposal?	The health and safety work that has been carried out and our future health and safety plans take into account the latest health and safety legislation.
Are there any Sustainability implications based on the 5 principles set out in the SDNPA Sustainability Strategy?	There are no sustainability implications in this paper

## **12. Risks Associated with the Proposed Decision**

There are no risks arising directly from this paper although an annual health and safety report to Policy and Resources Committee with recommendations is a mitigation against our health and safety risk in our corporate risk register.

**VICKY PATERSON**

**Human Resources Manager**

**SDNPA**

**BRUNO AVEIRO**

**Health and Safety Advisor**

**SDNPA**

**JON WAYTE**

**Occupational Safety and Health Adviser for SDNPA and PDNPA.**

Contact Officer:	Vicky Paterson – Human Resources Manager
Tel:	01730 819224
email:	<a href="mailto:Vicky.paterson@southdowns.gov.uk">Vicky.paterson@southdowns.gov.uk</a>
Appendices	Appendix 1 - Data analysis for incidents 2019/20 Appendix 2 - Data analysis for sickness absence 2019/20
SDNPA Consultees	Chief Executive; Director of Countryside Policy and Management; Director of Planning; Chief Finance Officer; Monitoring Officer; Legal Services, Head of Business Services
External Consultees	Jon Wayte, Safety Officer for SDNPA and Safety Advisor for PDNPA.
Background Documents	<a href="#">2013/14 Health &amp; Safety Report submitted to the Governance Committee by the HR Manager in June 2014 (Report GOV17/14, page 121).</a>

[2014/15 Health & Safety Report submitted to the Governance Committee by the HR Manager in July 2015 \(Report GOV20/15, page 207\).](#)

[2015/16 Health & Safety Report submitted to the Governance Committee by the HR Manager in Sept 2016 \(Report GOV24/16, page 91\)](#)

[2016/17 Health & Safety Report submitted to the Policy and Resources Committee by the HR Manager in Sept 2017 \(Report PR18/17 page 167 Agenda item 14\)](#)

[2017/18 Health & Safety Report submitted to the Policy and Resources Committee by the HR Manager in Sept 2018 \(Report PR38/18 page 21 Agenda item 10\)](#)

[2018/19 Health & Safety Report submitted to the Policy and Resources Committee by the HR Manager in Sept 2019 \(Report PR19/20-15 page 85 Agenda item 14\)](#)

## Data analysis for incidents 2019/20

The number of reported accidents this year has been at its lowest when compared with the last 4 years of data, with the majority of incidents reported being minor injuries or near miss cases. The increase in number of near misses reported has been expected after the commitment from the Safety Reps and Managers to express the importance of near miss reporting amongst staff, as these can identify hazards with the potential of causing harm. They also provide valuable information and trends helping to prevent future accidents. A new and easier way of near miss reporting has been put into practice with Safety cards made readily available in different areas. This year there have been no RIDDOR cases reported.

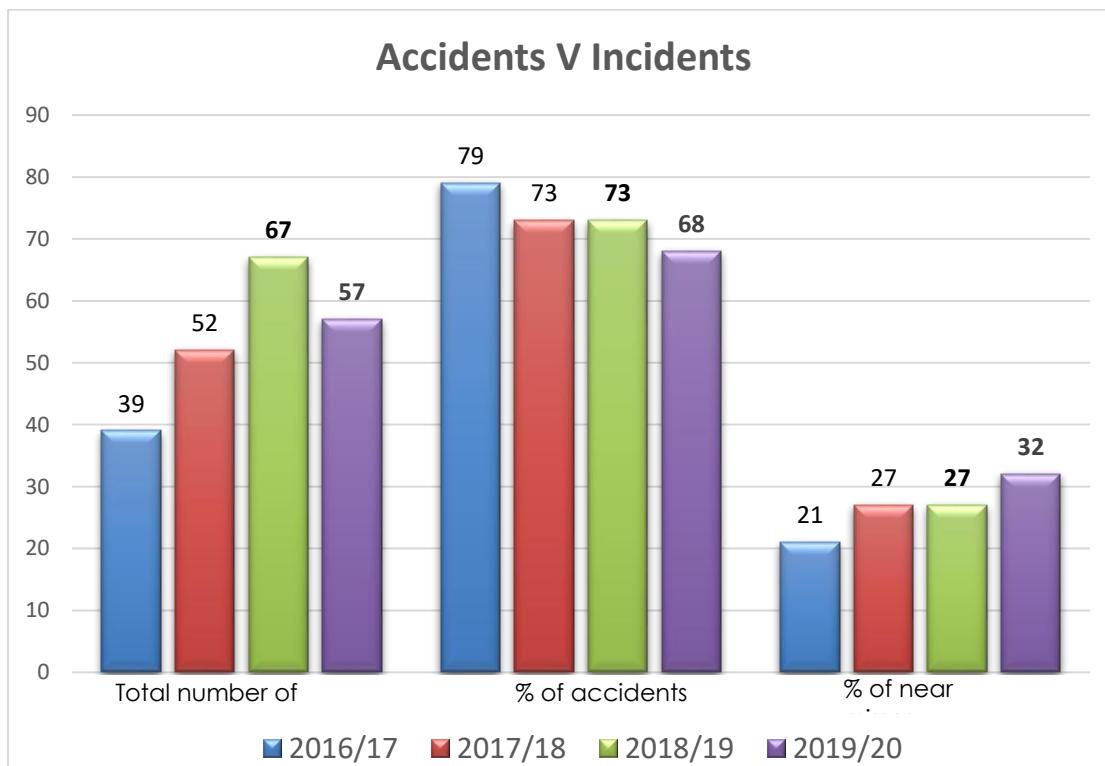


Fig 1. Accidents Vs Incidents for the last 4 years

The percentage of verbal abuse and harassment cases has been the same as previous year (10%). Although SDNPA doesn't have direct control of how to mitigate these cases we have since last year provided training on personal resilience and dealing with conflict and aggressive situations. A secure confidential database of black listed sites has been created and is kept up to date, allowing planning and enforcement teams to prepare in advance and avoid lone working on some occasions.

Accidents involving vehicles have now dropped when compared from previous year (from 12% to 10%), nevertheless new drivers, volunteers and repetitive offenders are still required to attend a defensive driving course before being allowed to drive SDNPA vehicles.

Type of incident	Number of incidents
<b>Near miss</b>	18
<b>Slips/Trips/Falls</b>	3
<b>Cuts/Grazes</b>	13
<b>Vehicles</b>	6
<b>Insect bites/stings</b>	2
<b>Verbal abuse/Harassment</b>	6
<b>Ill health</b>	2
<b>Other (inc: minor burn, impact from moving object, dislocation strain/sprain , bumps bruises, misconduct, and property /machinery</b>	7
<b>Total</b>	<b>57</b>

Table 1. Number of incidents reported per type

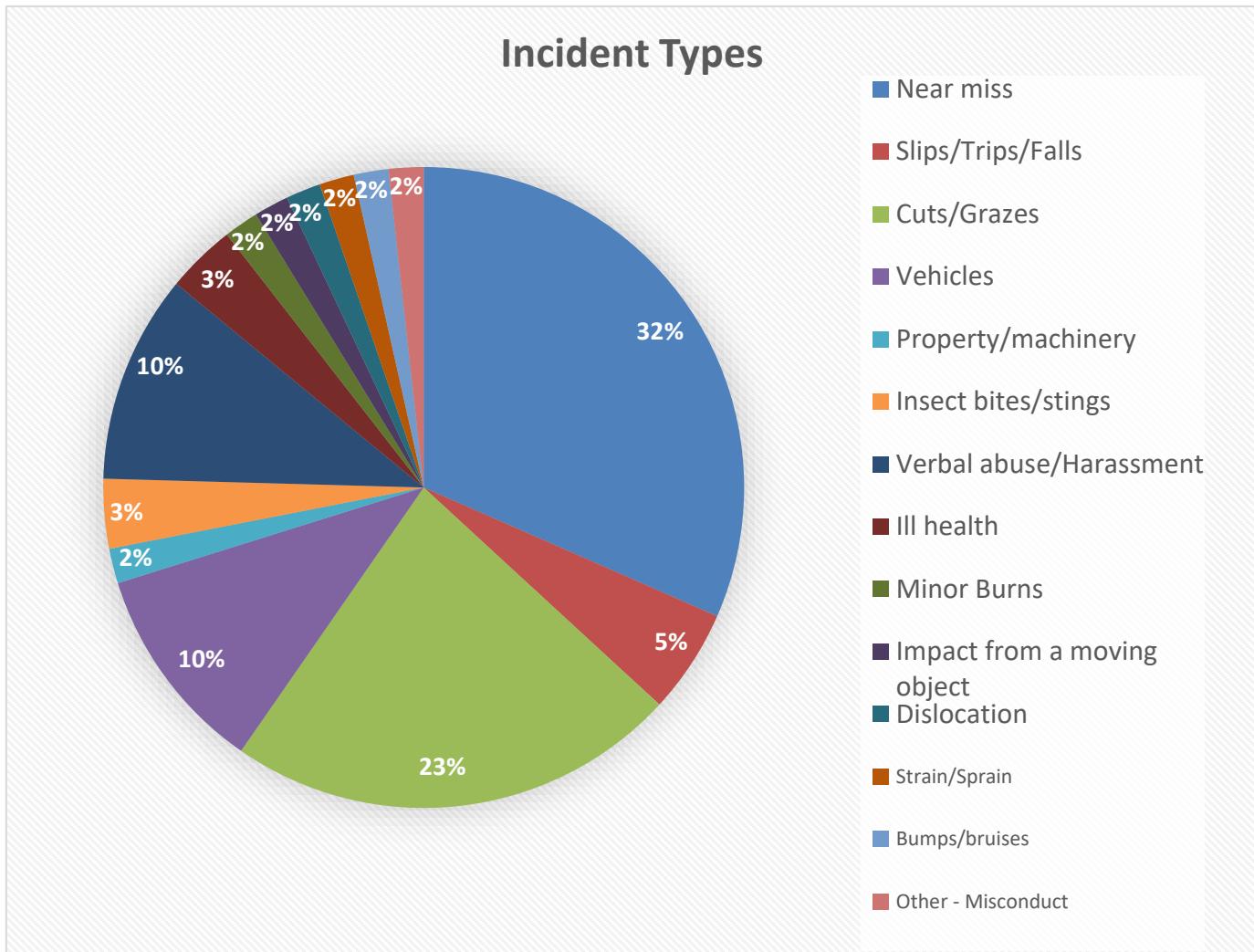


Fig2 Incident percentage by type

The areas that have reported the highest number of incidents were the South Downs Centre and the Eastern Downs, totalling 71% of the cases. This doesn't directly indicate that the majority of incidents occurred in these areas, but could be that these two areas have been better at reporting most, if not all of their incidents. As an action from this data, two members of the health and safety committee presented the importance of submitting the incident and near misses forms and how to differentiate one from another at the All Staff Event in December last year.

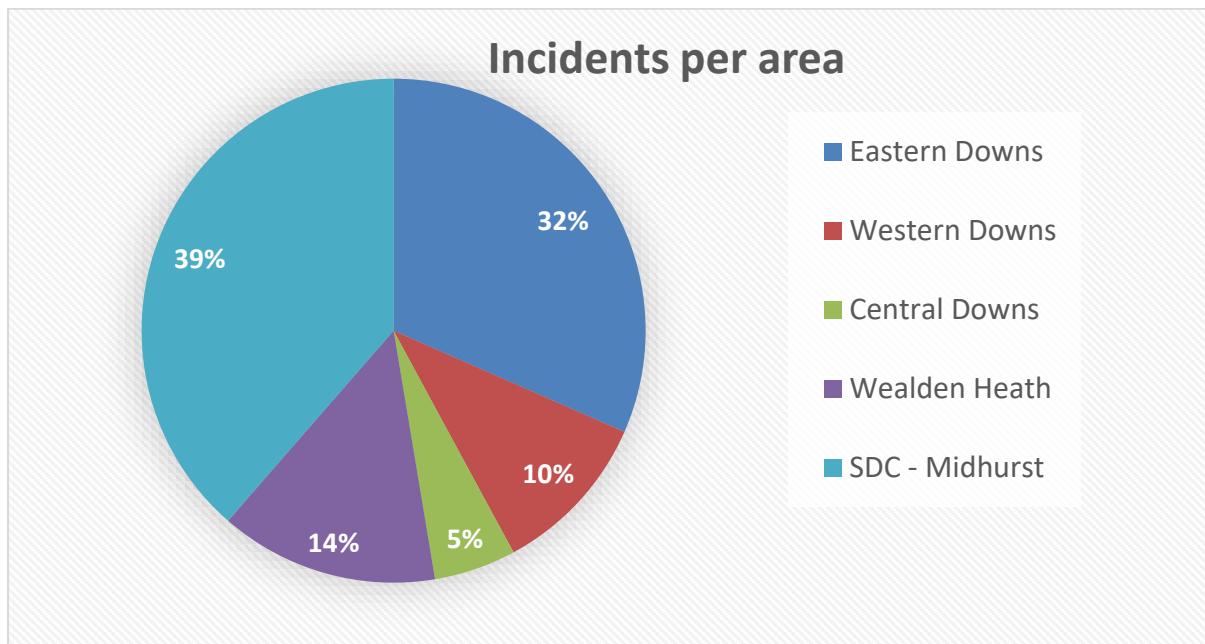


Fig 3. Percentage of incidents reported per area

The group of people mostly affect was employees totalling more than 60% of all cases, followed by volunteers (35%). The 4% stated for the members of public were directly connected with SDNPA activities but relates to minor injuries from slip trips and falls during school group activities.

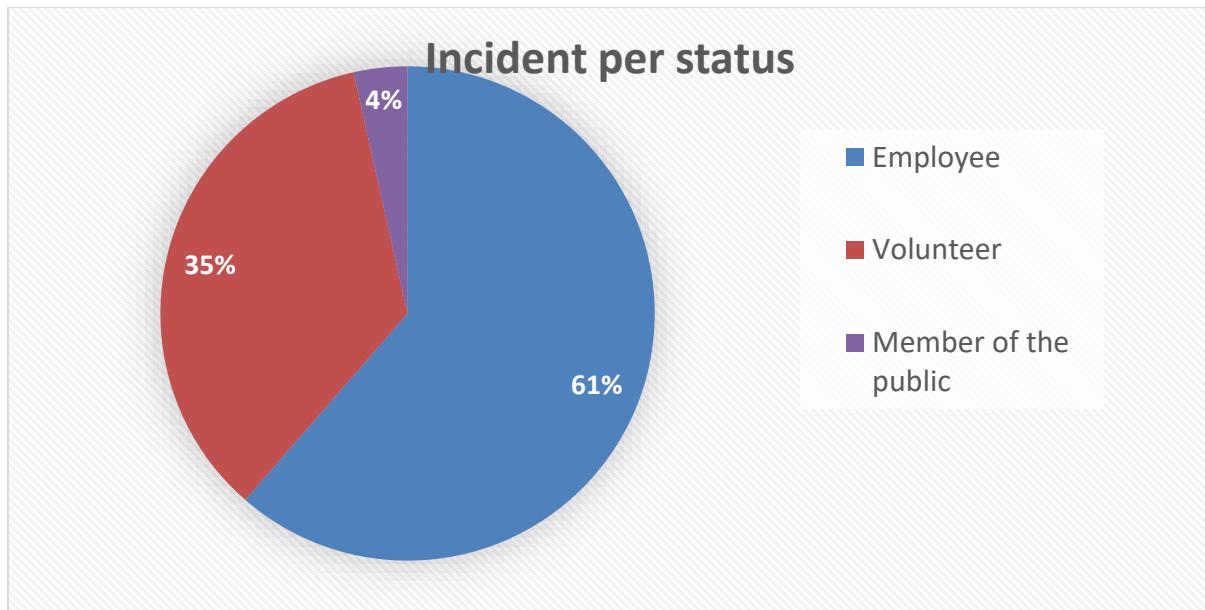
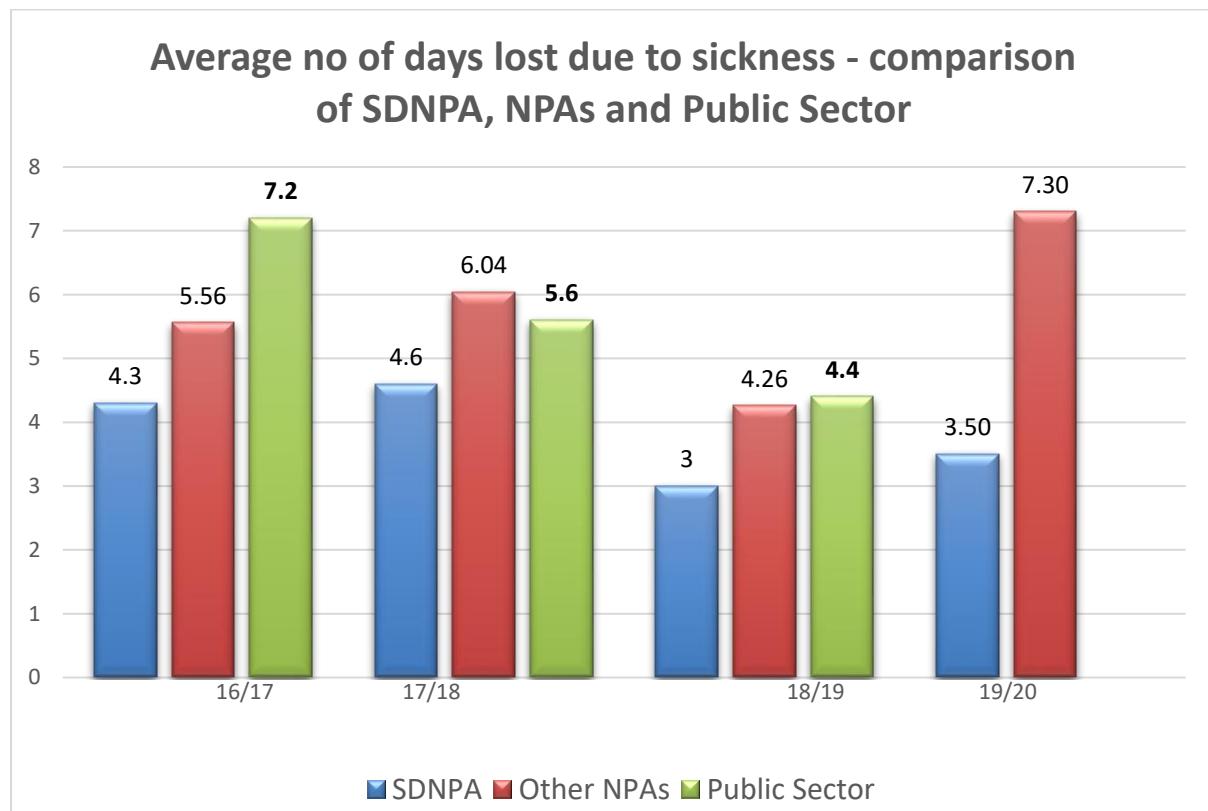


Fig 4. Percentage of incidents per status

## Data analysis for sickness absence 2019/20

Sickness levels and reasons for absence have remained fairly consistent over the last few years.

In 2019/20 the average number of sick days per FTE employee per annum was 3.5, a slight increase from 3 days in 2018/19. This increase reflects an increase in coughs/colds recorded and 3 individuals with significant periods of absence for surgery. The figures however are still lower than previous years but below the average of 7.3 days at other National Park Authorities. There isn't public sector data available yet for 2019/20 but in 2018/19 the average was 4.4 days and SDNPA have been consistently below both NPA and public sector sickness levels (see figure 1 below).



**Figure 1**

Figure 2 and 3 below show the reasons for absence at SDNPA in 2019/20.

The top 3 reasons for sickness absence have been coughs and colds, digestive/stomach and 3 individuals recovering from surgery.

The high levels of absence relating to coughs and colds and stomach/digestive problems was raised again through the committee and OMT and communication was sent out asking staff to avoid being in the work place when still displaying symptoms of these illnesses to minimise the risk of spreading germs.

There have been some absences due to mental health issues relating to 6 individuals. Staff are reminded that there is support through Simply Health and access to counselling where needed. Regular communication is sent out to signpost staff to this benefit and also details of the Mental Health First Aiders. HR also works closely with line managers to support individual cases.

We had 3 individuals with major illnesses. In each case, work place adjustments and support have been put in place, with advise from Occupational Health.

There are still a number of days absence recorded as “unspecified”. The instance as recorded here are short term absences. Staff need to be reminded of the importance of recording the details of all sickness absence.

<b>Reasons for sickness absence</b>	<b>No of days lost in 2019/20</b>	<b>No of days lost in 2018/19</b>
<b>Allergic Reaction</b>	2	0
<b>Back and neck</b>	6	86.5
<b>Chest and respiratory</b>	18	9
<b>Cough/cold</b>	175.5	128.5
<b>Digestive/stomach</b>	65	58
<b>Ear, nose and throat</b>	5	8.5
<b>Gastrointestinal</b>	11	0
<b>Genito-urinary</b>	7.5	11.5
<b>Headache/Migraine</b>	26.5	15
<b>Major illness (Arthritis/Cardiac/ MS)</b>	20	0
<b>Musculo-skeletal</b>	11	8.5
<b>Non-work related injury</b>	3.5	5.5
<b>Pregnancy Related</b>	3	3.5
<b>Surgery</b>	50	0
<b>Viral infection</b>	2	0
<b>Mental Health (other)</b>	16	0
<b>Mental Health (depression)</b>	9	15
<b>Mental Health (anxiety)</b>	6	0
<b>Work related stress</b>	1	25.5
<b>Non-work related stress</b>	2	0.5
<b>unspecified</b>	42	25
<b>Total</b>	<b>482</b>	<b>400.5</b>

Figure 2



Figure 3