Briefing Note: Health & Safety Service Update 2023/2024

Committee name: Cabinet

Date: 11th June 2024

Responsible officer: Bernadette Reed

This note provides information to keep Members informed of matters relating to the work of the Cabinet or a committee but where no decisions from Members are needed.

If Members have questions relating to matters shown, they are asked to contact the officer indicated.

1. Service Aims and Objectives

We aim to protect the health, safety and wellbeing of those working within the Borough in premises for which we have enforcement responsibility. We also aim to protect members of the public and others who may be harmed by a work activity.

We aim to support, encourage and advise and where necessary, hold businesses to account to ensure they effectively manage the occupational health and safety risks they create.

We aim to use the most appropriate method to influence those creating risks and target our interventions on those businesses and sectors which pose the higher level of risk.

We aim to contribute to the growth of local businesses by providing advice and guidance to create a level playing field.

We will work in partnership with the Health and Safety Executive (HSE) and others to ensure effective service delivery.

2. Background:

On 14th July 2015, Cabinet approved that health and safety service performance would be communicated to Members and the leadership team via a briefing note each year. This briefing note highlights matters of interest, our performance for the year in review and provides a plan of work for the year ahead.

The responsibility for health and safety enforcement is divided between local authorities and the HSE. The division of responsibilities depends on the work activity and can be found in the Health and Safety (Enforcing Authority) Regulations 1998. For this authority it includes amongst others: offices, shops, hospitality sector, leisure activities, nurseries, museums, residential care homes, places of worship, tyre and exhaust fitting, steel stockholders, camping and caravan sites, animal boarding, beauty parlours and skin piercing activities (except in domestic premises).

Under Section 18 of the Health and Safety at Work etc Act 1974, this authority has a duty to ensure it has adequate arrangements for the enforcement of health and safety statutory provisions for which it is responsible and to ensure it has sufficient suitably qualified and suitably appointed officers to carry out enforcement. We must allocate sufficient time and resources to investigate accidents, dangerous occurrences, and cases of occupational ill health in line with the HSE incident selection criteria (ISC).

3. Organisational Structure:

Service delivery is ultimately the responsibility of the Chief Executive, Gareth Edmundson, supported by the Corporate Director Claire Hughes and the Head of Public Protection Louis Krog. This is the current Senior Management Structure. The Head of Public protection has responsibility for a number of service areas namely licensing, private sector housing, the neighbourhood team, Solace and the public and environmental health team. The structure of the public protection team, which includes the health and safety team is shown in Appendix 1. The health and safety team is also responsible for animal licensing including (dangerous wild animals, home boarders, kennels, catteries, dog breeding, pet shops and zoos) and the Local Government (Miscellaneous Provisions) registrations (tattooing, acupuncture, semi-permanent make up and body piercing).

4. Service Delivery

The <u>Local Authority National Code</u> is statutory guidance issued under Sec 18 (4)(b) of the Health and Safety at Work etc Act 1974. Adherence to the code will ensure that this authority is compliant and consistent in its approach. It sets out a risk-based approach to targeting health and safety interventions by this authority. It provides a framework that recognises the role of businesses and the regulators in the management of risk, concentrating on 4 objectives:

- Clarifying the roles of business, regulators, and professional bodies.
- Outlining a risk-based approach to regulation which this Authority must adopt.
- Setting out the need for training and competencies of offices of this authority.
- Outlining arrangements for collection and publication of data.

The HSE 10-year strategy <u>Protecting People and Places</u> sets out ambitious objectives ensuring the safety of people and places is at the heart of everything we do as regulators with a focus on reducing ill health. We have regard to this when setting our priorities.

5. Setting Priorities:

Priorities for local authorities are set out each year in the Local Authority Circular <u>LAC 67/2</u> Our planned regulatory activity will focus on improved outcomes, better risk management, improved health and reduced injuries for workers and members of the public. We will address local priorities alongside national priorities set by the HSE.

Priority will be given to the health topics over the safety topics where resources are limited.

a. National Priorities:

The national priorities in Annex A of LAC 67/2 are determined annually using HSE's most current regulatory intelligence. They are reviewed on an annual basis to allow flexibility and the inclusion of any emerging priorities which may result from new intelligence or in response to learning from major incidents.

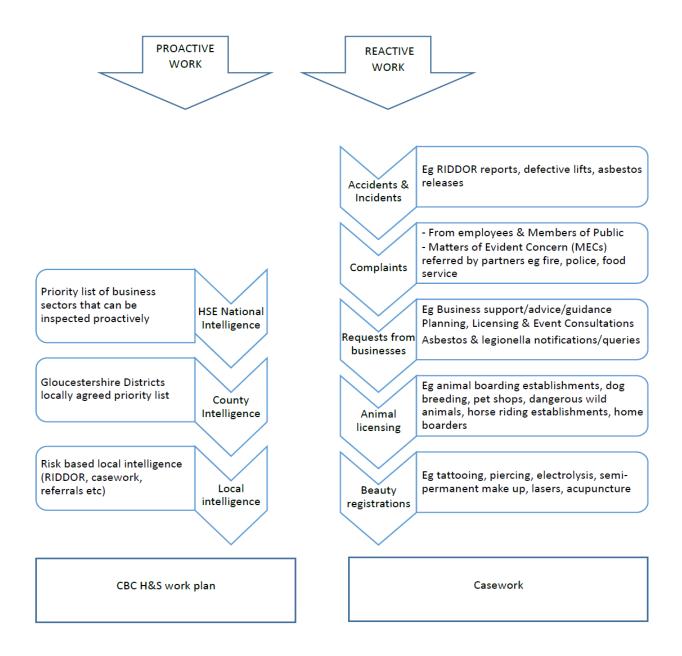
b. Local Priorities:

As a local authority, we have access to a wealth of local information which is used to determine our specific local priorities and poor performers, by identifying the key risks of serious workplace accidents, injuries and ill-health in our community.

6. Demands on the Service:

a. Reactive and proactive work streams:

Incoming work streams are shown in Fig 1 below with reactive work coming from a number of sources with all requests captured on our service request module of our management system Idox uniform.



The demand and nature for reactive work from 2018-2024 is shown in Appendix 2. The number of reports received under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 RIDDOR has remained relatively stable with an average of 74 per year and service requests 189 per year. Analysis of accident reports over the last 2 years shown that 35% were due to a slip or fall on the same level, 23% were due to a fall from a height, 13% were due to injuries sustained on lifting and carrying, 3% struck against a fixed object, 2% struck by a moving object, 1% struck by moving machinery, 1% injured by an animal and 1% injured through contact with a substance. The remainder were in the 'miscellaneous' category. Most service requests related to health and safety concerns at commercial premises.

b. Matters of Evident Concern (MECs):

Reactive work includes matters of evident concern (MEC) and Matters of Potential Major Concern (MPMC). MEC's are defined as 'those that create a risk of serious personal injury or ill-health, and which are observed or brought to the inspector's attention'. Matters of Potential Major Concern MPMC are those which 'have a realistic potential to cause either multiple fatalities or multiple cases of acute or chronic ill-health. As a local authority we must take appropriate enforcement action where required and monitor MECs or MPMCs during advisory or other regulatory visits to identify potential local issues. Any MECs or MPMCs identified which may have national significance will be reported to HSE via lau.enquiries@hse.gov.uk

When selecting which complaints to investigate we use the HSE risk based selection criteria Incident Selection Criteria

c. Proactive interventions:

Our proactive work forms the basis of our intervention plans. Our 2023-24 intervention plan focused on:

- Health and safety and infection control within tattoo premises within the borough. All 8 received an in depth intervention.
- Workplace transport within higher risk premises including builders' merchants and warehouses with interventions conducted at 15 major sites.
- Awareness raising of the risks and controls around asthma from flour dust in all bakeries with visits to 2 main production sites.
- Awareness raising of the risks and controls of silica dust within all stone masons with site visits to 4 main workshops.
- Working with Ubico and organisers of large-scale events to highlight the risks to the public from becoming trapped in large commercial waste bins.
- Crowd management at large scale events via the monthly Safety Advisory Group (SAG) and the events consultative group (ECG) with associated on site spot checks. The SEHO also attended the Race Course's Safety Advisory Groups.

7. Intervention plan 2024/25:

We will use a range of interventions to increase our impact of influencing behaviour and thus improve the management of risk. We will explain to businesses why they are being inspected to protect against any formal complaint if a business considers they operate in a low-risk sector and have been unreasonably subjected to a proactive health and safety intervention.

The authority's health and safety intervention plan is formulated each year in accordance with the guidance issued by the HSE Local Authority Circular on 'Setting Priorities and Targeting Interventions' revision 13 LAC 67/2 revision 13

The Circular provides guidance and tools for priority planning and targeting of interventions, enabling the authority to meet the requirements of the National Local Authority Enforcement Code.

Our approach to interventions is targeted, proportionate, consistent and transparent in line with the Enforcement Code and our own Corporate Enforcement Policy

Appendix 3 shows Cheltenham Council's risk-based draft intervention plan for 2024-25. This plan is based on specific business sectors and nationally recognised specific hazards, identified by the HSE. Proactive inspection must only be used in the high-risk activities and sectors specified by the HSE or where our local intelligence suggests risks are not being effectively managed.

The HSE guidance allows for consideration of local intelligence when formulating the intervention plan.

The focus of the plan will be reviewed in the following circumstances:

- If an initial feasibility exercise does not justify the proposed intervention.
- If the first proactive inspections do not evidence the need for further interventions.

- If initial proactive inspections require more intensive regulatory support (and/or enforcement) due to risks identified.
- If capacity in the team is affected.

8. Officer resourcing:

On 1st April 2024 we had 5 suitably qualified and authorised Health and Safety officers.

Officer	Position	Full Time equivalent on
		health and safety
Bernadette Reed*	Public and Environmental Health	0.1
	Team Leader	
Sadie Hawson Senior Environmental Health		0.5
	Officer (EHO) - Health and	
	Safety Team/Animal licensing	
Chris Waller*	Senior EHO – Food Safety Team	0.1
Neil Bacon*	EHO – Food Safety Team	0.1
Laura Oswald*	EHO- Food Safety Team	0.1
Vacant**	Health and Safety Technical	1
	Officer – Health and Safety Team	

^{*} The additional authorised officers are not routinely engaged in service delivery but provide resilience for us to perform our statutory function and assist in the intelligence gathering aspect of our intervention plan.

A prediction of all health and safety service demands for 2024/25 (based on previous 6 years figures, experience and intelligence), in light of the current officer allocation, suggests that we have sufficient resources to cover our statutory responsibilities.

9. Additional duties:

Officers within the health and safety team are also responsible for registrations under the Local Government (Miscellaneous Provisions) Act 1982 as amended by the Local Government Act 20023 and the associated bylaws (covering acupuncture, tattooing, ear piercing, electrolysis, semi-permanent make up and cosmetic piercing). We cannot refuse a registration if an application is properly made. It is an offence to operate without being registered, to contravene any bylaw or to fail to display your registration on the premises. Some contraventions can be dealt with under health and safety powers.

This authority is supporting the Health and Safety SEHO to obtain her Level 3 OFQUAL qualification for animal licencing, a requirement from the Department of Environment Food and Rural Affairs (Defra).

10 Indemnity of Inspectors:

Section 26 of the Health and Safety at Work etc. Act 1974 allows local authorities to indemnify inspectors appointed under that Act under specified circumstances. This authority indemnifies inspectors, against the whole of any damages and costs, or expenses, which may be involved, if the authority is satisfied that the inspector honestly believed that the act complained of was within their powers and that their duty as an inspector entitled them to do it, providing the inspector was not wilfully acting against instructions.

11. Partnership working:

We are active members of the County Health and Safety Group. The group aims to facilitate joint service objectives between district councils and the HSE eg priority lists, training, officer

^{**}This post became vacant in Sep 2023 and has been filled in part by a part time contractor. An officer has been recruited to post to start 3rd June 2024.

competency, joint working and mutual aid where/if necessary. We work with others and the HSE to establish best practice and consistency in enforcement as required by law.

We update the County Council health protection team on our health and safety work streams via the bi annual health protection boards.

12. Monitoring

This authority has a duty to monitor and share intervention data with the HSE and the public. The authority submits an annual statutory return to the HSE (LAE1), which reports against proactive and reactive intervention categories such as the numbers of planned interventions, revisits, accident investigation site visits, requested visits and enforcement action. This allows us to benchmark, and peer review our data against other authorities. This data is shared with the Chartered Institute of Public Finance and Accountancy (CIPFA) and is publicly available.

Our key performance indicator (KPI) has been developed to include response times to health and safety service requests and responses to accident notifications. We measure the percentage of health and safety requests which are triaged for investigation within 24 hours from receipt of the request or notification. Our figures for Q3 and Q4 were 100% and 96% respectively. This will ensure compliance with the HSE incident selection criteria. All data is recorded on the authority's management information system (MIS) Uniform Idox and reported quarterly to our performance management team. We are transitioning to a new performance management system in the coming months.

13. Future Demands on the Service:

Based on an analysis of the establishment profile in the Cheltenham area, the number of staff within the team, the number of officers authorised as Inspectors, analysis of historic service data over the last 6 years, maintenance of a duty officer system and a time study of the required tasks within the service areas, it is considered that we will have sufficient resource to meet our legal health and safety obligations. However, the considerable uncertainty of the current regulatory operating environment and its unpredictable nature must be recognised. We do not have scope for value added tasks such as primary authority partnerships and full engagement in corporate projects without additional resources or re-evaluation of officer responsibilities. Capacity would be adversely affected by any changes in staffing (recruitment and retention) and any protracted difficult/complex investigation.

14. Risks

There are no key risks specific to the delivery of the health and safety work plan that need to be highlighted to Members.

Recruitment of appropriately trained staff is challenging. We continue to work with our HR team to recruit and to retain high quality competent officers. We are a participating local authority on the Local Government Association (LGA) skills shortage programme exploring alternative pathways to recruitment and retention.

We are currently advertising for an environmental health officer apprentice as a means of building future resilience within the public and environmental health team.

Contact Officer: Bernadette Reed Public and Environmental Health Team Leader

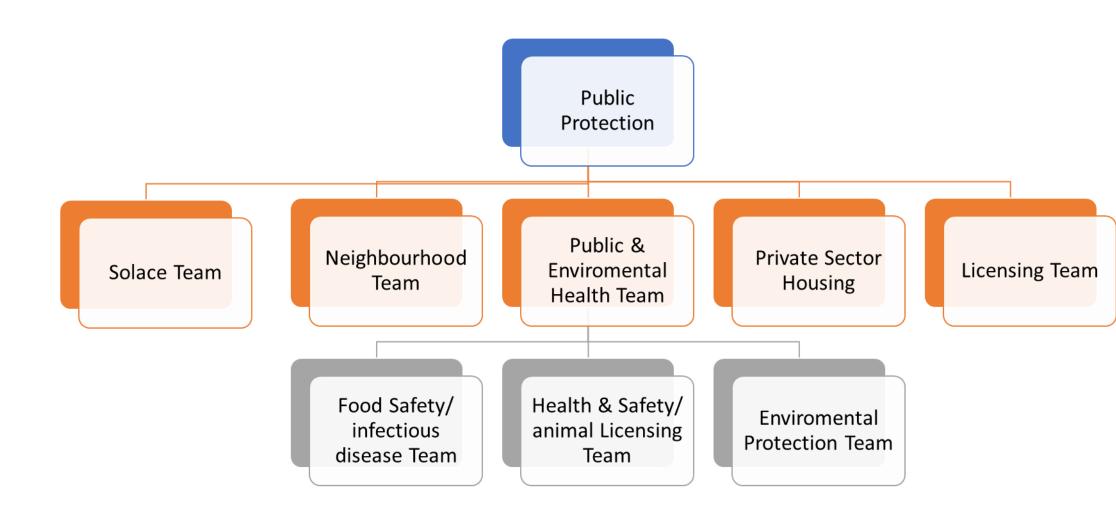
Tel No: 07500816810

Email: bernadette.reed@cheltenham.gov.uk

Reference documents:

Local Authority Priorities and Targeting Interventions
National Local Authority Enforcement Code
LAE 1 Returns

Incident Selection Criteria



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	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	Total	Ave/year	
								-	
Riddor notifications	69	80	62	72	86	75	444	74	
ISC met	12	10	11	10	8	7	58	10	
ISC not met	57	70	51	62	76	70	386	64	
ANILIC- animal licence	6	1	3	1	2	0	13	2	
applications									
ANINF – Animal	0	0	2	1	3	1	7	1	
infections									
ANLICQ - Animal licence	16	13	9	22	28	28	116	19	
queries									
ASBSR- Asbestos	0	0	0	2	0	1	3	1	
COOLEG- cooling	4	0	3	1	1	1	10	2	
towers/legionnaires									
EASREG- HS	19	0	9	34	28	31	121	20	
registrations									
EHLIFT- lift reports	0	0	1	5	7	9	22	4	
EHSP- HS at	41	38	15	29	70	70	263	44	
commercial premises									
GASSAF- gas safety	40	20	4	2	3	2	71	12	
EVENT/S special events	83	82	107	80	80	73	505	84	
Total SR	209	154	153	177	222	216	1131	189	
Registrations:	33	22	9	45	57	35	201	34	
new/variation/ received									
(premises and personal)									
tattooing electrolysis ear									
piercing semi-permanent									
make up acupuncture									
cosmetic piercing									

Cheltenham Borough Council Health and Safety Intervention Plan 2024/25 - DRAFT												
Annex A national priorities												
	Α	M	J	J	Α	S	0	N	D	J	F	M
Duty to manage asbestos – risk of occupational lung disease												
Spa pools on display – risk of legionella												
Cooling towers – risk of legionella												
Work related stress – awareness raising												
Work related stress - intelligence gathering												
Animal attractions – zoonotic risks												
Inflatable amusement device - anchorage												
Electrical safety in hospitality – risk of electrocution												
Accessing large commercial bins – risk of entrapment												
Annex B proactive inspection												
Lung Disease – welding fumes in hot cutting												
Musculoskeletal Disorders in residential care homes												
LPG explosion – catering												
Violence at work – lone workers/night workers/hospitality/betting												
shops												
Firework explosion – professional display at events												
Crowd management – large scale events												