

REPORT REFERENCE NO.	HRMDC/21/1
MEETING	HUMAN RESOURCES MANAGEMENT & DEVELOPMENT COMMITTEE
DATE OF MEETING	3 MARCH 2021
SUBJECT OF REPORT	HEALTH, SAFETY AND WELLBEING REPORT
LEAD OFFICER	Deputy Chief Fire Officer; and Director of Governance & Digital Services
RECOMMENDATIONS	<i>That the report be noted.</i>
EXECUTIVE SUMMARY	<p>Devon and Somerset Fire and Rescue Service (“the Service”) takes the health, safety and wellbeing of employees seriously and as such it provides a wide range of initiatives, interventions and policies to ensure that employees enjoy a safe and supportive working environment.</p> <p>The Health, Safety and Wellbeing report has been adjusted to include the Wellbeing report, this approach aligns with the Services People Strategy. The inclusion of this report to the Human Resources Management and Development Committee (“the Committee”) reflects the importance the Service views the Health, Safety and Wellbeing of its staff.</p> <p>The detail of the report will evolve to provide greater information regarding performance in this area.</p>
RESOURCE IMPLICATIONS	Staff and financial resources associated with the management of health, safety, welfare and wellbeing.
EQUALITY RISKS AND BENEFITS ANALYSIS	The Health and Safety policy and Absence Management policy have an equality impact assessment.
APPENDICES	None
BACKGROUND PAPERS	None

1. **INTRODUCTION**

- 1.1 Devon and Somerset Fire and Rescue Authority (the Authority) recognises and accepts ultimate responsibility for the health, safety and welfare of its employees and others who may be affected by its work activities. It is the Authority's aim to ensure that Devon and Somerset Fire and Rescue Service (the Service) will, so far as is reasonably practicable, comply with the requirements of the Health and Safety at Work etc. Act 1974 and all statutory provisions associated with it and support employees in meeting their obligations under the Act.
- 1.2 At officer level, the ultimate responsibility for Health and Safety rests with the Chief Fire Officer. The principal officer with strategic responsibility for health and safety performance is the Director of Governance & Digital Services who must be supported with a high degree of commitment from managers and supervisors at every level for the effective management of health, safety and welfare. It is only by demonstrating this commitment that the Service can secure the well-being of its greatest asset, its employees, and reduce the rate of avoidable accidents, injuries and work related sickness to a tolerable level.
- 1.3 The management of Health, Safety and Welfare, and Wellbeing is supported through underpinning policies, procedures, training and monitoring activities. Monitoring activities are a key element of measuring performance and ensuring safe systems are functioning as intended. These can be achieved through Proactive or Reactive monitoring. Proactive measures help the Service to mitigate a safety event where as reactive measures allow us to learn from the safety event in order to prevent / reduce the likelihood of a recurrence.

2. **PROACTIVE MONITORING**

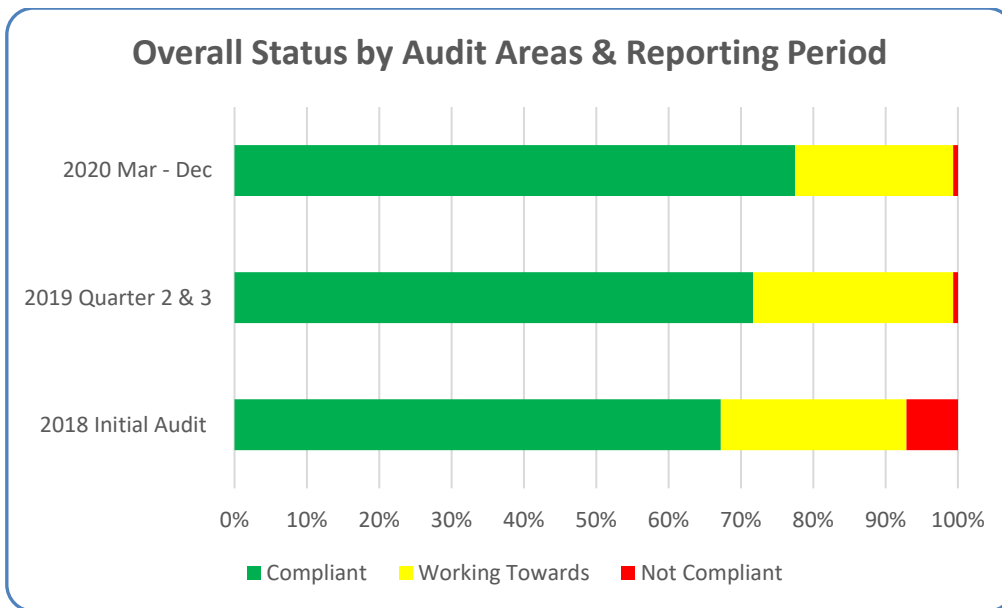
Safety Management System Audit.

- 2.1 In 2018, an audit of the Service Safety Management System was completed using an audit model developed by the National Fire Chiefs Council (NFCC) and endorsed by the Health and Safety Executive. It was anticipated the NFCC audit model, being new to the Service, would identify areas for improvement, however our performance was reasonable with 67% of areas reviewed identified as compliant and 26% as working towards.
- 2.2 There has been no movement with the remaining actions from the audit since the last committee meeting, COVID-19 response activities taking priority for both the Health & Safety Team and key stakeholders identified within the audit. The Health & Safety Manager is reviewing the remaining questions in order to appreciate the extent and resultant risk of the requirements of the remaining actions. Once this is known targeted action can be taken with the remaining actions. This work will also help deciding whether to undertake another NFCC audit before the actions are completed or to complete the actions first, there have been a number of organisational adjustments since the original audit which could lead to an improved response to the audit question.

Audit Progress:

Audit Area	Not Compliant	Working Towards	Compliant
2018 Initial Audit	45	162	425
2019 Quarter 2 & 3	4	175	453
2020 March - December	4	140	496

***Note:** the total count of each row has an increase of 8 for the 2020 March – September figures, this is due to previously unanswered questions being reviewed & completed.



Workplace (Health and Safety) Inspection & Assessment.

2.3

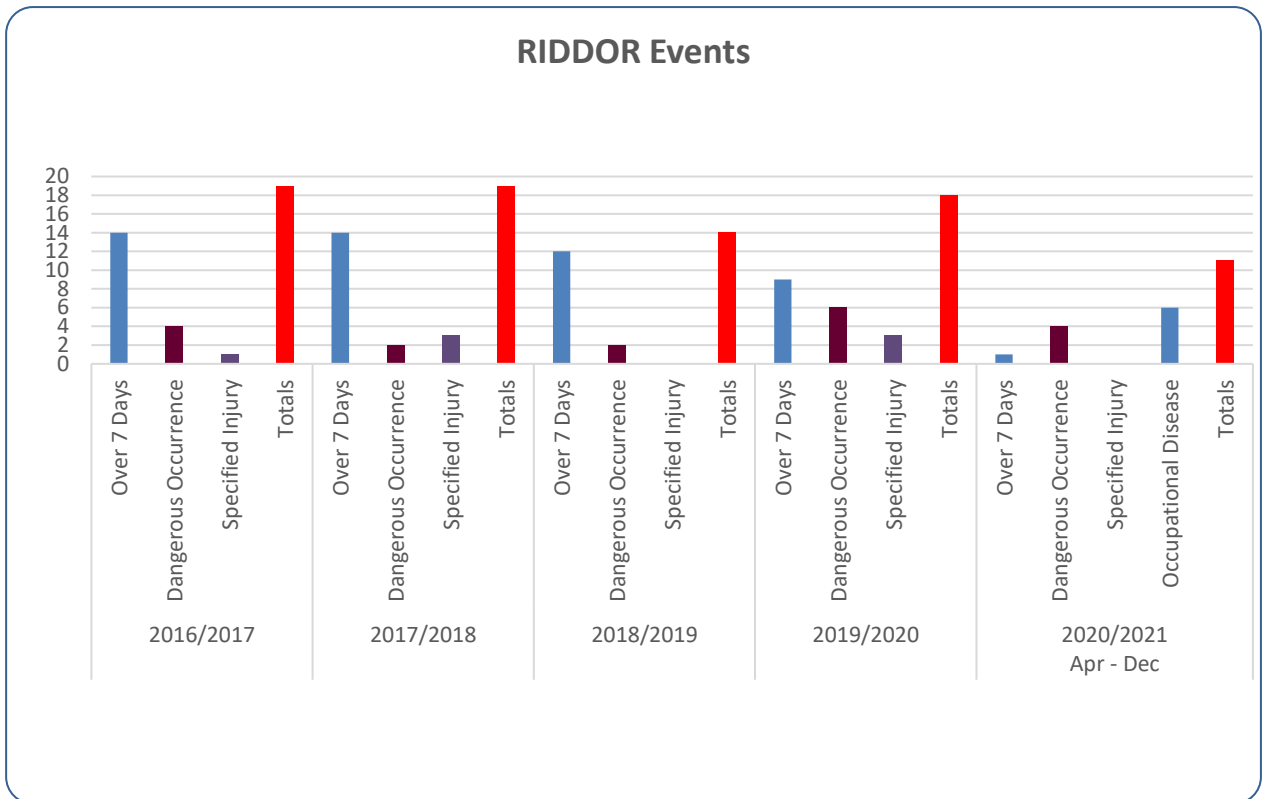
Annually stations within the Service conduct a workplace inspection and assessment, which is aimed at ensuring they conform to legal and policy requirements. There has been an improvement in the completion of these assessments over Quarter 3 2020/21, management drive and ensuring locations are COVID Secure helping to improve the completion of these inspections. The Health & Safety Manager is reviewing processes to aid the management of this area through increased visibility for those responsible for ensuring the assessments are completed. Additionally, the Health & Safety Team will be working in the Group Commands more frequently enabling them to raise awareness and improve this process.

Performance Indicator	Previous	Current	Overall Performance
	Q2 2020/21	Q3 2020/21	
PI 2a: Percentage of completed annual Workplace Inspection & Assessments Target: 100%	55%	84%	Positive

3. **REACTIVE MONITORING**

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

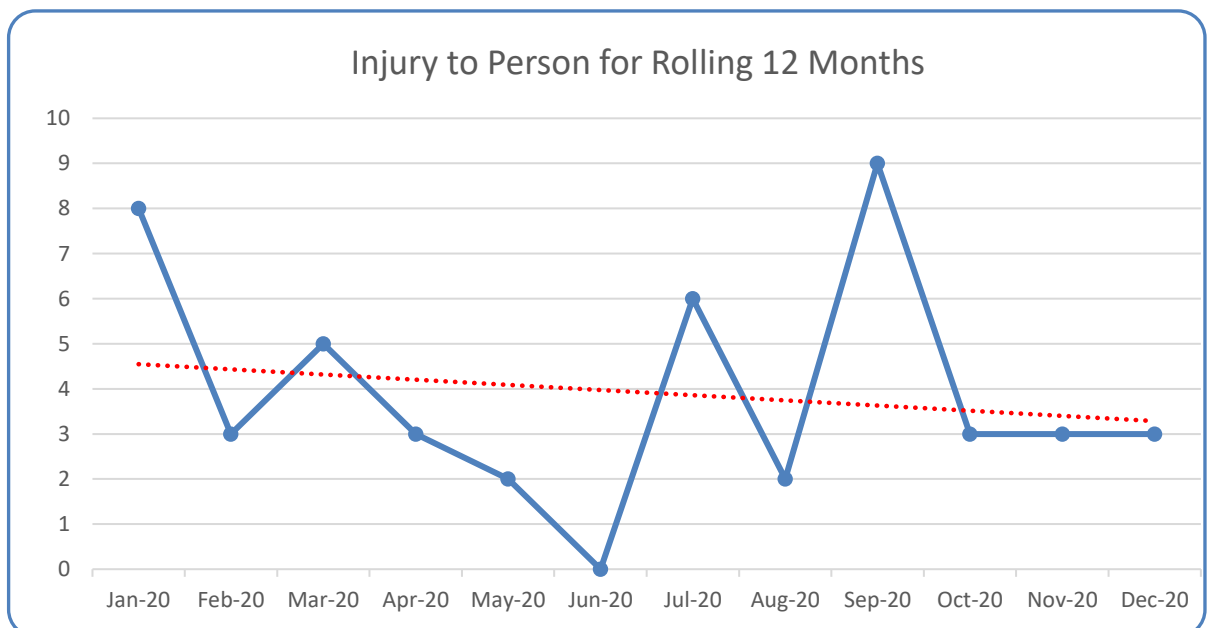
- 3.1 The Service is required to report certain types of work related safety event outcomes to the Health and Safety Executive (HSE) as required under the RIDDOR. Types of RIDDOR reportable events include:
- (i) death to a worker and non-worker if they arise from a work related accident;
 - (ii) specified injuries to workers (for example includes fracture other than fingers and toes, amputation, permanent loss or reduction of sight and unconsciousness caused by head injury or asphyxia);
 - (iii) over seven day injuries to workers (where a worker is away from work or unable to perform their normal work duties for more than 7 consecutive days);
 - (iv) injuries to non-workers (work related accident involving a non-worker who is taken from the scene to hospital for treatment);
 - (v) reportable occupational disease (examples include, carpal tunnel syndrome, hand-arm vibration syndrome and occupational asthma);
 - (vi) dangerous occurrences; and
 - (vii) certain, specified near miss events.
- 3.2 There are 27 categories of dangerous occurrence, an example being the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment and gas incidents (this relevant to distributors, fillers, importers or suppliers of flammable gas and also gas engineers registered with the Gas Safe Register).
- 3.3 The Health & Safety Team is responsible for filing these reports with the HSE. The graph overleaf compares RIDDOR reporting over the last 4+ years. The rates of RIDDORs have fluctuated little over this reporting period. There have been 6 RIDDOR reports during Quarter 3, all 'Occupational Disease' and linked to COVID-19 incidents. Each COVID-19 outbreak has been fully investigated and where there is a work related exposure that meets with the RIDDOR guidance the incidents are reported to the Health and Safety Executive (HSE) as required. The HSE requested the investigation report to one of the incidents, this has been provided to them for their review. They are also in communication with the Service FBU H&S representative regarding the investigation and actions taken by the Service. Indications are the HSE is content with the Service response and investigation of the incidents, also with the action taken where required to enhance the in place control measures.

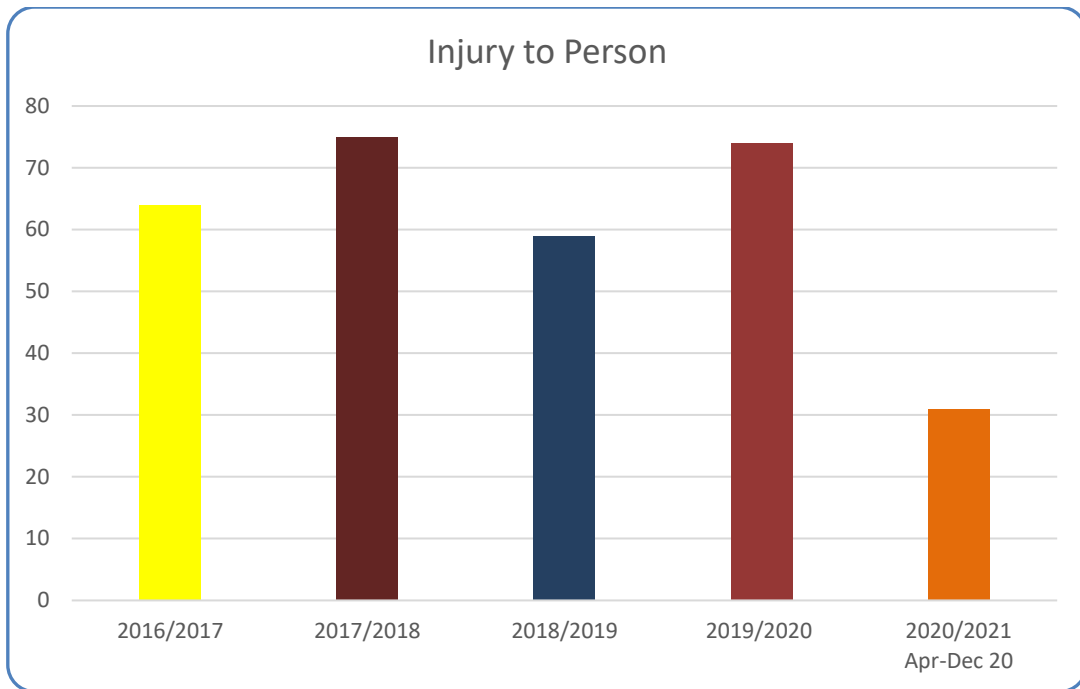


Personal Injuries.

3.4

The charts below set out the Service's injury rates over the last 4+ years, which are continuing to reduce year on year. The Service takes the approach of reporting injuries as an investigable incident which has aided in learning from the incidents, thus reducing the occurrences. Sprains, strains and musculoskeletal injuries are the primary injuries received and is reflected within other fire and rescue services, the HSE identifying musculoskeletal injuries as a target area for improvements across UK businesses. The Service has established the Musculoskeletal Group - a sub group of the Strategic Safety Committee - to review ways to reduce incidents of musculoskeletal injuries.

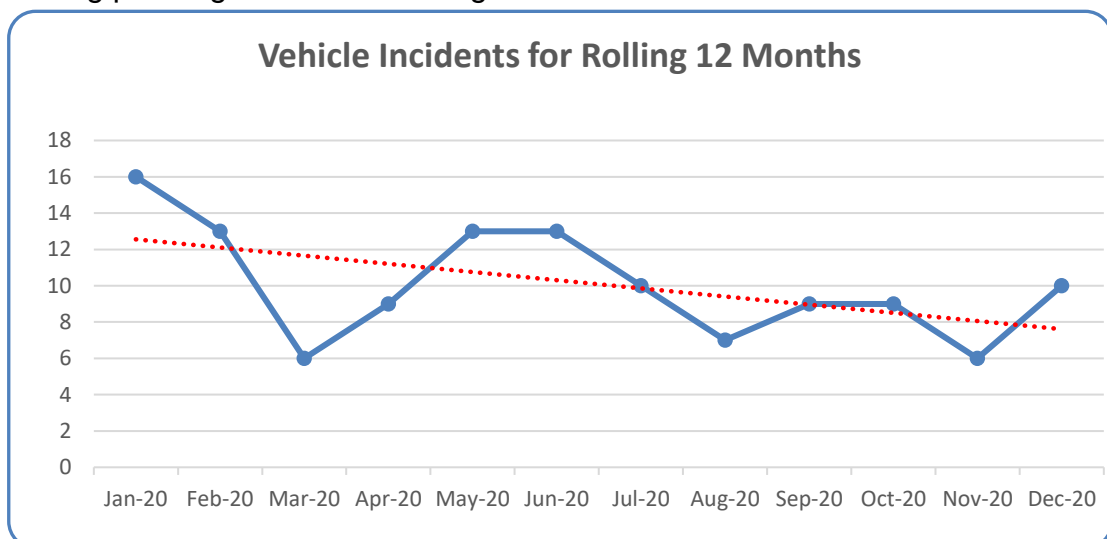


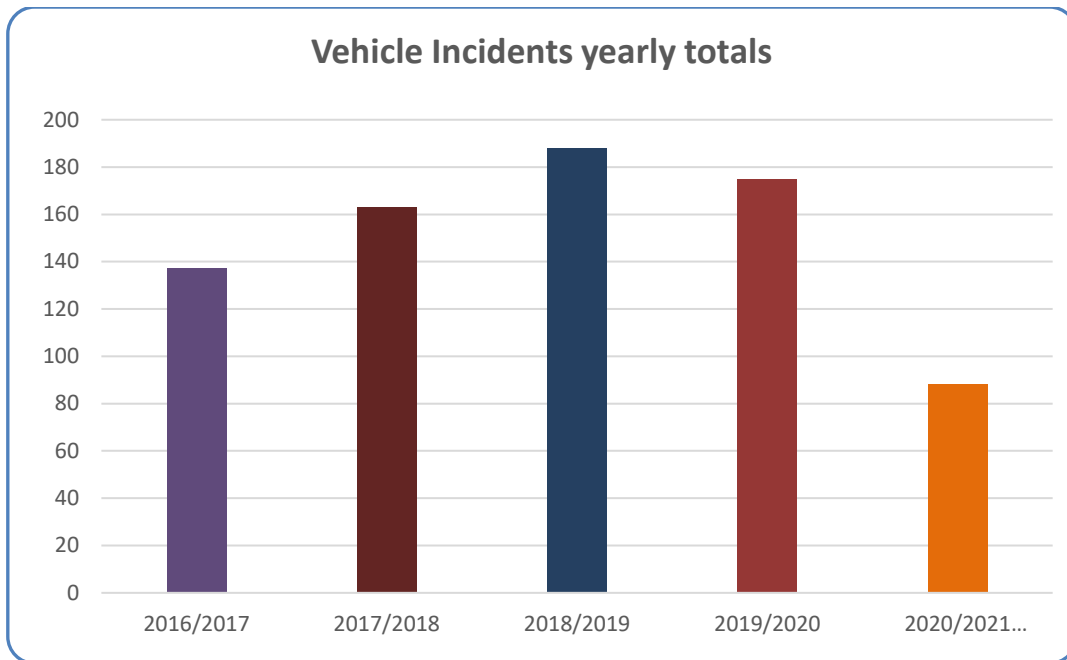


Vehicle Incidents.

3.5

The charts below set out the Service's vehicle related safety events over 4+ years, these incidents seeing a slight decrease in the 2019/2020 reporting period. This reduction is also reflected in the rolling 12 month report. Vehicle related incidents are primarily during non-blue light activity, of which the Fire Appliances (Red Fleet) & Cars / Vans (Light Fleet) have the majority. To help reduce the number of incidents & improve road risk, the Service has signed up to the Government's Driving for Better Business initiative. An assessment has already been completed which helps organisations identify areas for improvement. The Service will now develop plans to address any areas identified. The Occupational Road Risk Group meets quarterly to review vehicle related issues, projects and safety events, additionally some of this group meet to review any drivers who are identified as higher risk. During that review, corrective measures / procedures are identified which the driver will be asked to complete, this could be a driver psychometrics test, 1 to 1 coaching from driver training to removal from response driving pending additional training.





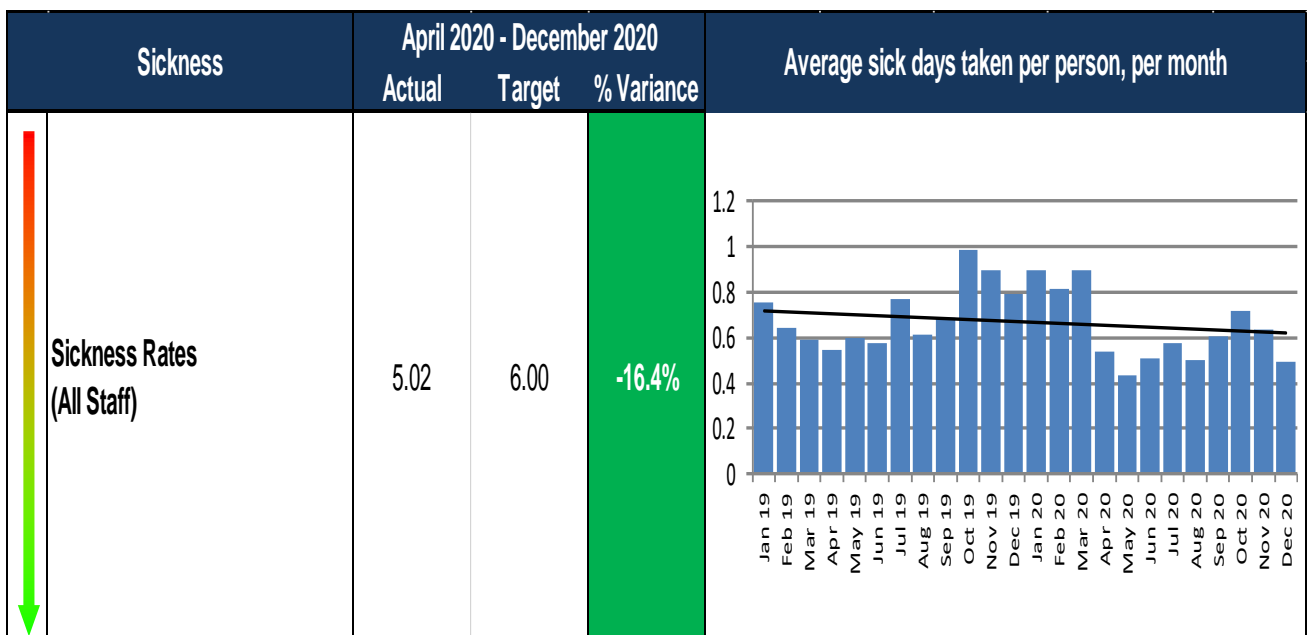
4. **HEALTH, SAFETY AND WELFARE ACTIONS**

- 4.1 The work with enhancing the Service's Safety Event Management Tool is progressing well with a planned rollout mid-2021. Once complete, it will allow staff to report swiftly any safety events, allocate an investigator and assign actions in order to mitigate or reduce the risk of a recurrence.
- 4.2 The Health and Safety Team continue to provide advice, guidance and support to the Service's response to the COVID-19 pandemic; they have been directly attached to support cells formed in response to the pandemic and the Service's needs. The Team was attached to the Medical Cell, Service Delivery Business Continuity Cell, Welfare Cell and Recovery Cell, though supported the other cells as necessary. COVID Secure audits have taken place across the Service's fire stations which has enabled locations to adjust their controls where necessary. This provides reassurance that the required measure to control the risk are in place. The COVID Secure audits were facilitated through the Operational Assurance team and their processes.
- 4.3 There continues to be a high volume of work within the Health & Safety Team, COVID-19, business as usual and involvement within various new initiatives / projects and work processes. The Health & Safety Manager is reviewing the various work streams in order to identify where elements can be outsourced or additional support employed on a fixed term basis to ease and facilitate the completion of the various work streams.

5. **AUGUST – DECEMBER 2020/21 ABSENCE PERFORMANCE**

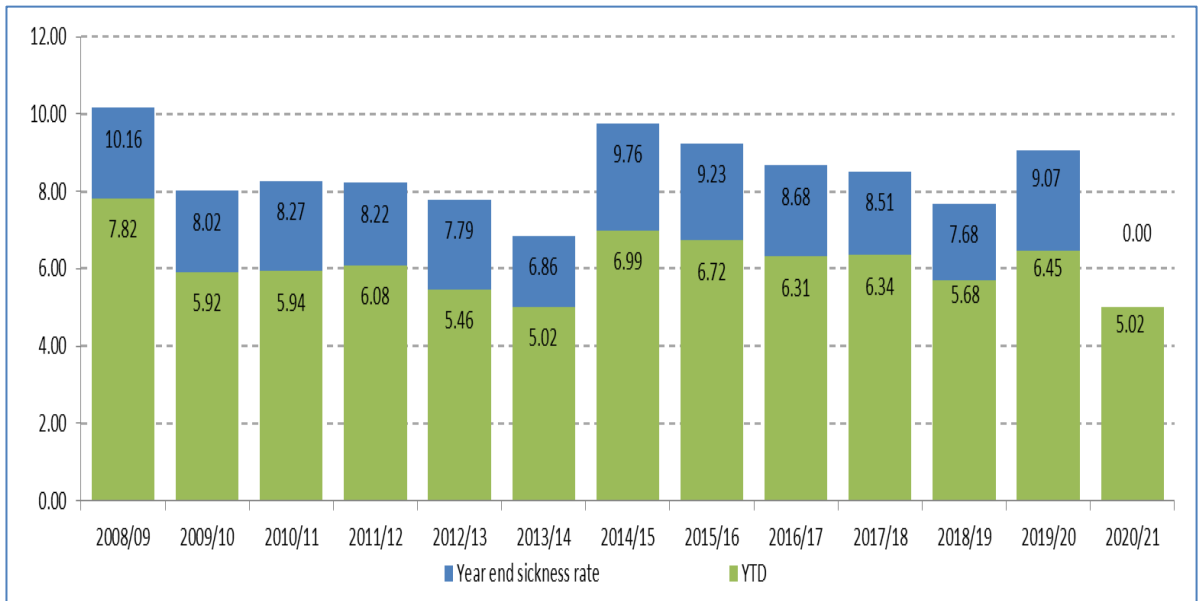
5.1 At the Human Resources Management & Development Committee meeting held on 5 November 2019 (Minute HRMDC/20/7 refers), it was agreed that future sickness rate charts would be Red, Amber, Green (RAG) rated against the current target for absence of 8 days/shifts lost and no longer against the previous year actuals (Minute HRMDC/7 refers). It was also felt that reporting by staff categories was not necessarily helpful and that reporting by exception would be more beneficial. For this financial year-to-date, the Service has been in the period of Covid-19 and during this period, sickness levels have reduced as indicated in paragraph 5.2 below.

Sickness Direction of Travel



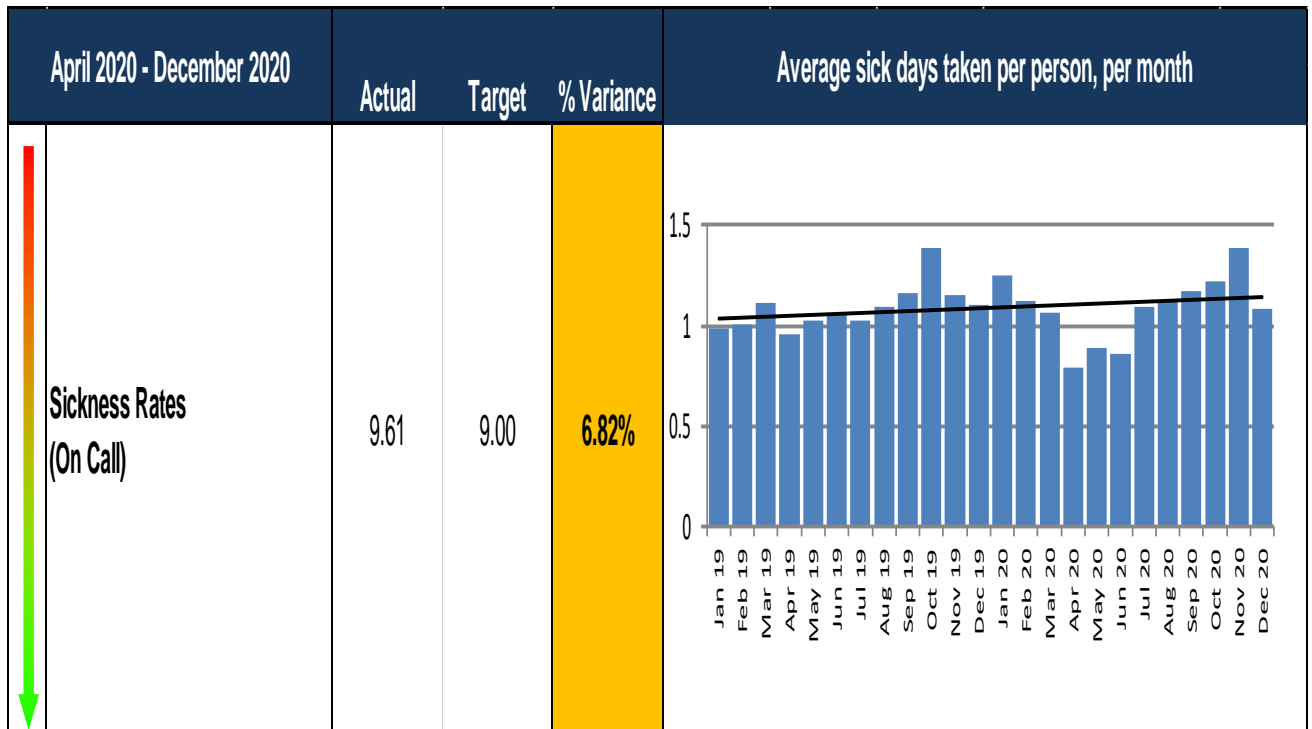
5.2 The chart above shows the current levels of sickness in comparison to the Service’s target of an average of 8 days sickness per person. It can be seen that since the last reporting period in August 2020, whilst within Covid-19, the Service has seen an excellent performance. While there has been a slight increase since the previous report, service performance is still below target by 16.4%. The chart below shows year-to-date compared with the total for the year.

Sickness in Previous Years

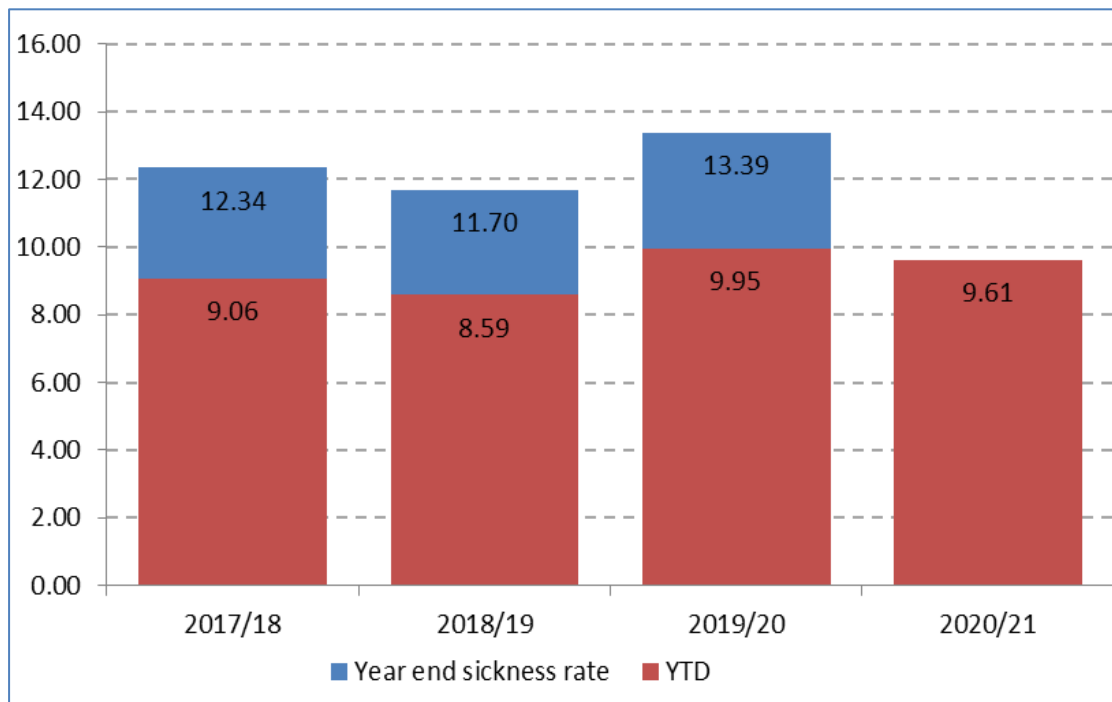


5.3

The On-call rates are also shown below. The level of sickness is higher than for other staff categories, however, for On-call Firefighters the Service records sickness over 7 days per week rather than lost shift or working days using the target rate of 12 days



5.4 On-call sickness over the last 3 years using the performance target of 12 days is as set out in the table below:



5.5 With Covid-19, Devon & Somerset Fire & Rescue - as an emergency service - was able to access Antigen Testing from April 2020. The tests were, at a later stage, made available to the public through Test and Trace. In October 2020, 93 staff had been tested of which 12 had tested positive to Covid-19 and as of 20th February 2021 there have now been 260 staff tested of which 84 have tested positive.

5.6 Throughout the period of Covid-19, the Service has supported its staff with a range of mechanisms including:

- regular communications and information,
- flexible working arrangements,
- protected levels of pay; and
- well as wellbeing support.

6. **CONCLUSION**

6.1 This paper contains proactive and reactive measures together with absence performance measures. As the report to the Committee evolves, it is intended that there will be more detail provided within the measures. At the same time, it is anticipated that improvements in the Service's recording mechanisms will have been implemented.

6.2

The present safety event recording system has restricted the ability to report detailed information regarding the reactive measures, this will be improved with the new system. The need to respond to COVID-19 has reduced the forwards momentum in some areas however staff and public safety has remained a priority throughout. The Health & Safety Team redirecting their focus and energy towards COVID-19 support works to ensure Health & Safety advice and guidance was available when and where needed; the intent now is to continue to support the recovery phase and reenergise business as usual.

JOE HASSELL
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MIKE PEARSON
Director of Governance and Digital Service