## **HEALTH AND SAFETY SERVICE PLAN**

## 1 SUMMARY

- 1.1 The appended Health and Safety Service Plan is submitted to Members for approval.
- 1.2 The Health & Safety Commission (HSC) started to require local authorities to produce an annual plan from September 2001.

## 2 INTRODUCTION

- 2.1 In September 2001, the HSC issued "Section 18 Guidance to Local Authorities", which replaced all previous guidance from HSC made under Section 18 of the Health & Safety at Work Act etc. 1974. This was revised in October 2002 by HSC appending their enforcement policy statement and revising the competencies for health and safety inspectors. It is the duty of local authorities to act in accordance with Section 18 Guidance.
- 2.2 The Section 18 guidance includes a requirement to produce an annual service plan.
- 2.3 The appended plan is for 2005/2006. It refers to documents 1, 2, and 3. These are not appended because they are corporate documents: Housing Health & Community Care's Enforcement Policy (1); Enforcement Concordat (2); and Constitution (3). A copy of the Health & Safety Commission's Enforcement Policy Statement (Appendix 1) and Enforcement Management Model (Appendix 2) have been made available in the Members' library. The Enforcement Management Model gives a comprehensive description of the enforcement decision making process which officers enforcing health and safety legislation are required to follow.
- 2.4 The plan takes account of revised guidance introduced by The Health and Safety Executive/Local Authorities Enforcement Liaison Committees' (HELA). The HELA Circular LAC 67/1 (rev3),updates, clarifies and replaces existing guidance to local authorities. The revised guidance gives advice on arrangements for implementing an interventions programme which is a key part in demonstrating that adequate arrangements have been made by the local authority for enforcement of health and safety. In accordance with this guidance inspections are now targeted to the topic areas of slips and trips, musculoskeletal disorders, falls from height, workplace transport and stress.

## 3 HEALTH AND SAFETY SERVICE PLAN

- 3.1 The service plan should include information on the following:
  - > Future objectives and major issues that cross service boundaries;
  - ➤ Key programmes, including a planned inspection programme in the context of the current HSC Strategic Plan and Strategy;
  - Information on the service that is being provided;
  - The means by which these services are going to be provided;
  - Any performance targets and how they will be achieved;
  - A review of performance to address any variance from meeting the requirements of the service plan.
- 3.2 Local authorities should consult interested parties, including local employers and employees and their representatives. A copy of the service plan has been sent to the Chamber of Trade and Federation of Small Businesses.
- 3.3 Service plans will be reviewed as part of the inter-authority auditing process which local authorities are required to undergo at least every 5 years. The next audit is due to be undertaken in 2007.

## 4 RESOURCE IMPLICATIONS

4.1 The health and safety service plan has been based on the existing resources and work loads. Any alterations to these levels will have an impact on the work programme.

## 5 LEGAL IMPLICATIONS

5.1 The HSC has default powers should a local authority fail to comply with their legal requirements.

#### 6 RECOMMENDATION

6.1 It is proposed that the Committee **RESOLVES** 

To approve the Health and Safety Service Plan.

Graham Woolhouse

Head of Housing, Health & Community Care

# **Background Papers:**

Letter from HSC dated October 2002; HSC's "Section 18 Guidance to Local Authorities".

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# HOUSING, HEALTH & COMMUNITY CARE HEALTH & SAFETY SERVICE PLAN 2005/2006

#### 1.0 SERVICE AIMS AND OBJECTIVES

- 1.1 Aims and objectives.
- 1.2 Links to corporate aims and plans

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- 2.1 Profile of the Local Authority
- 2.2 Organisational Structure
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5.1 Quality Assessment

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- 6.1 Review against the service plan
- 6.2 Identification of any variation from the service plan
- 6.3 Areas of improvement

# 1.0 SERVICE AIMS AND OBJECTIVES

## 1.1 Aims and Objectives

The Housing, Health & Community Care Service is committed to ensuring that the highest health & safety standards are maintained throughout the district in premises for which they are the Enforcing Authority, in order to protect employees, the self-employed and members of the public.

Staff will adopt an approach to enforcement which will encompass the investigation of all complaints and serious accidents, dangerous occurrence, cases of occupational ill health in accordance with HSC/HELA objectives and priorities, as well as inspections based on risk assessment so as to make full use of staff resources allocated.

Staff will follow the principles and guidance on health and safety enforcement contained in the Health & Safety Commission's Enforcement Policy Statement (Appendix 1) which includes the criteria used to select which accidents, incidents, cases of ill health to investigate.

Staff will act within the Department's overall enforcement policy (Document 1) but due regard will be had to guidance from recognised bodies. Rochford District Council has adopted the Enforcement Concordat (Document 2) and therefore staff will carry out activities in this service plan in accordance with the Concordat. Any prosecution proceedings will also have regard to HELA Guidance for local authorities on the interpretation and application of the Enforcement Management Model. (Appendix 2)

Education plays an important part in improving health & safety standards and therefore staff will carry out the activities in this service plan with an educative approach wherever possible.

1.2	Links to Corporate Aims and Plans	This service supports Rochford District Council's Performance Plan for 2005. In particular to work towards the Corporate Aims, 'Work towards a Safer and More Caring Community' and 'Improve the Quality of Life for People in our District' by 'Providing Quality, Cost Effective Services'.  This fits with the key themes of 'Feeling Safe' and 'Healthy Living'  We follow all of the Councils values to: 'Act with integrity', 'Be open and transparent about what we do', 'Respect others and treat people courteously and equally', 'Be responsive to customer needs and requests', 'Always try to improve what we do' and 'Work with others to improve what we do both directly and through partnership working'.
2.0	BACKGROUND	to improve imacine as boar anothy and anothy anothy and anothy an
2.1	Profile of Rochford District	See the website/intranet.
2.1.1	Profile of Housing, Health & Community Care Service	See the Constitution (Document 3) and the intranet/website.
2.2	Organisational Structure	
2.2.1	Rochford District Council	See the Constitution and the intranet/website.
2.2.2	Housing, Health & Community Care	See the Constitution and the intranet/website.
2.2.3	Manager Responsible for Health & Safety Service	Safety, Food & Regulation Manager.
2.2.4	Specialist Services	None.

2.3	The Scope of the Health & Safety Service	
2.3.1		Establish and maintain an up to date register of all premises in the district for which the Council is the health & safety Enforcing Authority.
2.3.2		Inspect all premises for which the Council is the Enforcing Authority on a risk based, rolling programme in accordance with HELA LAC 67/1 (rev3) and take enforcement action as necessary.
2.3.3		Carry out visits and inspections to premises as necessary within the planned period, including revisits and investigative visits.
2.3.4		Investigate and resolve all serious health & safety complaints.
2.3.5		Provide advice and assistance to businesses, employees and customers on health & safety related issues.
2.3.6		Receive and act as appropriate for all notifications of accidents, dangerous occurrences and cases of occupational ill health.
		The criteria for which accidents, incidents, cases of ill health and complaints to investigate contained in the Health & Safety Commission's Enforcement Policy Statement (Appendix 1) will be followed.
2.3.7		Register notifications of cooling towers and evaporative condensers.
2.3.8		Investigate reports from engineers relating to the examination of lifting gear, pressure vessels etc. and take appropriate action.
2.3.9		Receive and act as appropriate for all notifications of work with asbestos.

2.3.10		Act as Sta	utory Cor	nsultee in relation to licences/	certificates under the Licensing Act 2003.
2.3.11		Facilitate h	ealth & sa	afety training as necessary, by	y independent training organisations.
2.3.12		the service	does not as and w	include the Council's own int	ealth & safety related issues. Although ernal health and safety function, advice Health and Safety Officer or Divisional
2.3.13		Facilitate h		afety promotional and educati	onal activities, by independent
2.3.14		Comment	on propos	sed health & safety legislation, s necessary and as requested	, codes of practice, guidance and other d.
2.4	<b>Demands on the Health &amp; Safety Service</b> As at 1 April 2005 the Housing, Health & Community Care Service's datal identified that it is responsible for enforcing health and safety in <b>1158</b> prer Rochford District. According to HELA 67/1 (rev 3) risk categories can be follows:-		and safety in 1158 premises within the		
		Risk Ca	tegory	<b>Number of Premises</b>	Inspection Frequency
		A	=	35	Not less than once per year
		B1	=	59	Not less than once per 18 months
		B2	=	173	Not less than once per 2 years
		В3	=	139	Use other intervention strategies and review rating after 3 years
		B4	=	604	Use other intervention strategies and review rating after 5 years
		С	=	148	Use other intervention strategies

	The estimated number of premises types was:
	Retail shops Wholesale shops, warehouses 62 Offices 237 Catering, restaurants and bars 226 Hotels, camp site, etc. 12 Residential care homes 10 Leisure and cultural services 75 Consumer services 188 Other premises (not classified above) 33  No particular external factors that may impact on this service have been identified. There are two languages other than English identified as being significant in food businesses within the district. These are Bengali and Chinese, however the majority of proprietors of food businesses are able to speak adequate English or have somebody present at the premises that can translate. In any cases where there may be language difficulties the service would contact Essex Police (01268 775533) for details of an interpreter, or use a community interpreting service provided by Medway Council (01634 335578).  These languages are not seen as placing a particular demand on the health & safety service.
2.5 Enforcement Policy	This service operates to a documented enforcement policy.
3.0 SERVICE DELIVERY	
3.1 Inspection Programmes	
3.1.1 Programmed Inspections	The number of Programmed Health & Safety Inspections for the period is = <b>280</b> .

3.1.2	Carry Over Inspections	The number of Programmed Health & Safety Inspections carried over from the last financial year is = <b>0</b> .	
3.1.3	Total Inspections	Therefore the total number of Programmed Health & Safety Inspections for the period is = <b>280</b> . (See Appendix 3 for a breakdown)	
3.1.4	Target	The target percentage of inspection due is: High Hazard/Risk (Category A) = 98% Intermediate Hazard/Risk (Categories B1 - B4) = 98% Low Hazard/Risk (Category C) = 98% All Categories = 98%	
3.1.5	Visits to Food Premises	Health & Safety hazard spot and take appropriate action during planned food hygiene inspections.	
		The estimated number of planned food hygiene inspections is = <b>300</b> .	
3.1.6	Revisits	The estimated number of revisits for this plan period is = <b>120</b> .	
3.1.7	Special Initiatives	1. Work with HSE and other Essex Local Authorities in the "Backs! 2005 Initiative". This will target the larger employers within the District where there is substantial manual handling. For the period between 13 <sup>th</sup> June and 8 <sup>th</sup> July, those employers will be visited solely for the purposes of focussing on back injury and pain. The target premises will be those in warehousing/distribution and supermarkets. The estimated number of visits is = 6.	
		2. There will be other joint working initiatives, developed through the Essex Chief Environmental Health Officer's Occupational Health and Safety Group, with the assistance of the HSE. A working party of this group has been created to discuss and develop these initiatives.	

		3. A survey of the District for premises falling to the Service for enforcement will be carried out on premises that were traditionally agricultural in use but where there has been diversification into service type industry. This will ensure that the database of premises is maintained and updated. The estimated number of sites surveyed is = 10.
3.2	Health & Safety Complaints	All serious health and safety complaints received, including anonymous complaints are investigated in accordance with the good enforcement principle of targeting, transparency, consistency and proportionality. The estimated number for this plan period is = <b>100</b> .
3.3	Lead Authority Principle	There are no formal or informal Lead Authority Partnerships set up for any health & safety business within Rochford District.
3.4	Advice to Business	Advice is provided to existing or proposed health & safety businesses, members of the public, other Council Service Departments and other persons. Advice is mainly person to person whilst Officers are carrying out visits/inspections but may also be following a telephone call or letters to the Housing, Health and Community Care Service.
		Officers aim to give advice in accordance with recognised guidance and codes of practice, and a range of advisory leaflets is available.
		The estimated number for the plan period is = <b>100</b> .
		The Council has regular meetings with the Chamber of Trade and Federation of Small Businesses who have been consulted on the Division's enforcement policy.
3.5	Accident & Incident Investigation	All notifications of reportable and non-reportable accidents, dangerous occurrences and cases of occupational ill health received are assessed in accordance with paragraphs 30, 31, 32 and 33 of the Health & Safety Commission's Enforcement Policy Statement.

HSC recognises that it is neither possible nor necessary to investigate all incidents. Site investigations will be carried out of a reportable work-related death unless there is a specific reasons for not doing so, in which case those reasons will be recorded.

The following factors will be taken in account when determining which incidents to investigate:

- > the severity and scale of potential or actual harm;
- > the seriousness of any potential breach of the law;
- knowledge of the duty holder's past health & safety performance;
- > the enforcement priorities;
- > the practicality of achieving results;
- > the wider relevance of the incident, including serious public concern.

The estimated number of notifications for the plan period is = 70.

The estimated number of investigations for the plan period is = 20.

A number of arrangements have been made to improve the consistency of enforcement with neighbouring Authorities.

- This service actively supports the Essex Chief Environmental Health Officer's Occupational Health and Safety Group.

The service also advises and liaises with other services within Rochford District Council, including: Building Control, Planning, Economic Development, Environmental Protection Team, Contract Services and the Licensing Team.

The service is consulted on planning applications involving business premises.

## 3.6 Liaison

3.7	Health & Safety Promotion	The health and safety service will link with the Essex Occupational Health and Safety Group to promote an event or special initiative carried out during European Safety and Health Week in October.  The service will work with the Economic Development Officer to form links with business and provide information and advice regarding health and safety.  An article will be written and published in Rochford District Matters, explaining the health and safety service and the principles of topic based inspections.
4.0	RESOURCES	
4.1	Financial Allocation	The overall budget for the Environmental Health Service is £1,034,400 from this amount the health & safety service is not currently allocated a specific amount.
		It is therefore not possible to determine whether there is an increase or decrease in real terms on the last financial year allocation for the health & safety service.
		Details of the budget for salaries, travel, subsistence, consultancy, analytical fees are contained in Rochford District Councils Budget Book 2005/2006.
		No budget is separately allocated for prosecutions or legal action taken as a result of action under this service, but are provided for within the Legal Service's budget.

4.2	Staffing Allocation	The staff available for this period is:	
		<ol> <li>Safety Food and Regulation Manager</li> <li>Principal EHO</li> <li>Food Contractor</li> <li>Senior EHOs</li> <li>Part-time Senior EHOs</li> <li>Environmental Health Assistant</li> <li>Senior Environmental Health Assistant</li> <li>Administrative staff</li> </ol>	
		This staffing allocation is not solely for this service plan. These officers also carry out the Food Safety, Animal Welfare Licensing, Outbreak Control and Infectious Disease, Public Entertainment licensing and Control of Trading Licensing duties. The administrative staff also support the entire Housing, Health and Community Care Service.  It is estimated that the above staffing levels will provide sufficient resources to carry out the service delivery outlined in 3.0.	
		It is estimated that 3 full time equivalents work on health & safety.	
4.3	Staff Development Plan	This service supports the Corporate Aims for Rochford District Council. The staff covering this service will continue to be encouraged, motivated and trained to develop their potential and use their talents for the benefit of the people of the district.	
		This service identifies training and development needs by an annual performance and development review of all staff.	
		One Senior and the Principal EHO completed a part-time, 2 year Post Graduate training course in occupational Health and Safety in June 2004.	

The Senior Environmental Health Assistant completed a CIEH Advanced Health and Safety in the Workplace Course in Autumn 2003.

The training budget is allocated primarily to those staff in the whole service that are identified as requiring further training to develop their professional and technical skills for the job that they are required to carry out.

Budget provision is also available for minor, short ad hoc training courses that become available.

For this plan period, the following training needs have been identified:

> Short ad hoc courses when they become available

Cascade training is provided by the officer attending an external training course to other officers in the service.

Periodic meetings are organised to discuss matters and issues of consistency arising under this service plan area.

Minutes of the Essex Chief Environmental Health Officers Occupational Health & Safety Group are circulated to officers in the Safety, Food & Regulation Team.

The Housing, Health & Community Care service and the Council supports Environmental Health Officers that wish to obtain corporate membership of the C.I.E.H by taking the Assessment of Professional Competence (APC).

All Environmental Health Officers that are members of the C.I.E.H. are required to undergo at least 20 hours of Continuous Professional Development (CPD) per year. Whilst officers are responsible for monitoring the amount they have done in a year the service recognises this need and supports staff in achieving the minimum amount required by the CPD scheme. In house training may be organised throughout the year by individuals.

Every officer authorised to carry out health & safety inspections and enforcement will receive structured on-going training, which may take the form of in house training, formal visits or vocational visits. The minimum ongoing/update training is 10 hours per year and is recorded.

Officers who have not enforced health & safety law for some time are put through structured revised training before resuming health & safety law enforcement duties. The minimum revision training is 15 hours and is recorded.

Officers returning to health & safety law enforcement duties after an absence of more than 3 years are monitored by a more senior officer experienced in health & safety law enforcement for a minimum period of 3 months.

Before new officers undertake health & safety law enforcement duties independently, they are supervised and monitored by a more senior officer experienced in health & safety law enforcement for up to 6 months.

5.0	QUALITY ASSESSMENT	The following peer reviews are carried out	
		Staff - Health & Safety EHOs	
		➤ A full audit using the Section's "Management Quality Audit Form" is carried out on 5% of all high risk (Categories A, B1, B2 and B3) inspections. This involves a desk-top check and a visit. It is estimated that the Principal and full time Senior EHO will carry out about 70 high risk inspections each per year. Therefore, 4 audits to be carried out each for the period.	
		<ul> <li>A full audit using the Section's "Management Quality Audit Form" to be carried out on 5 complaints/enquiries received each per year.</li> </ul>	
		Staff - Health & Safety EHA	
		A full audit using the Section's "Management Quality Audit Form" is carried out on 5% of all low risk (Categories B4 and C) inspections. This involves a desk-top check and a visit It is estimated that the Health & Safety EHA will carry out about 140 low risk inspections per year. Therefore, 7 audits to be carried out for the period.	
		An audit by the Health & Safety Commission was carried out in March 2002. The next audit, either by another Council or a contractor, is due in 2007 and will follow HELA 23/19.	
6.0	REVIEW		
6.1	Review against the service plan	An annual review against the service plan is carried out.  In addition, performance is monitored monthly and a quarterly report is submitted to	
		Members.	

		The review below is for the plan period financial year 2004-2005.
6.1.1	Programmed Inspections	The target for the last planned period was to achieve <b>97%</b> for high hazard/risk premises (Category A), <b>95%</b> for intermediate hazard/risk premises (Categories B1-B4) and <b>95%</b> for low hazard/risk premises (Category C).
		The actual percentage achieved was 100%, 100%, 100% respectively.
6.1.2	Revisits	The number of revisits carried out were 116 (estimate = 87)
6.1.3	Visits to food premises	Health & Safety hazard spotting was carried out during every planned food inspection.
		The number of planned food inspections carried out was 362(estimate 305)
6.1.4	Service Request	The number of service requests (health & safety complaints and advice to businesses) received was 167 (estimate 200).
6.1.5	Accident & Incident	The total number of notifications received was 69 (estimate 35).
	Investigation	The number of investigations carried out was 26 (estimate = 15)
6.1.6	Notices	The following number of 'notices' were issued
		<ul> <li>Informal written warning letters: 147</li> <li>Improvement Notices served: 22</li> <li>Deferred Prohibition Notices served: 3</li> <li>Immediate Prohibition Notices served: 14</li> </ul>
6.1.7	Formal Cautions	The number of formal cautions given was 0

6.1.8	Prosecutions	The number of prosecutions was 1
		The number of summons served was <b>0</b>
6.2	Identification of any variation from the service plan	1. This was the second full year of the proactive health and safety inspection programme after 11 years of only dealing with reactive issues. However good progress is being made and a number of inspections have been brought forward from 2006/2007. It is now estimated that the current programme of health and safety inspection work will be completed in 3 years; by 31/3/08.
		2. Slightly more revisits were carried out than estimated. This is due to a higher number of inspections being achieved (279) than estimated (263) and therefore more revisits were carried out.
		3. There were almost twice as many notifications of accidents and incidents than estimated and therefore more investigations were carried out. The increasing awareness on business of the need to report accidents is likely to be a reason for this increase.
		4. A 5% audit of inspections carried out by the Full Time Senior EHO and the Senior Environmental Health Assistant was completed. However due to demands from other work audits of the Principal EHO and complaints were not completed. It is intended to action these audits in the current year.
6.3	Areas of improvement	Benchmarking of enforcement activity levels with other Essex authorities needs to be undertaken.
		Action A benchmarking exercise will be carried out during 2005/06.

2. Health & Safety educational/promotional/advisory activities needs to be developed.

<u>Action</u> There will be relevant articles in Rochford District Matters and linkages with the work of the Economic Development Officer.

3. Health & safety information needs to be provided electronically.

Action Health & safety information will be available on the Council's website by April 2006

# Appendix 3

## **PROGRAMMED HEALTH & SAFETY INSPECTIONS**

# 1.04.05 TO 31.03.06

Risk Category	Number of Inspections Due 2005/2006
Α	35
B1	25
B2	62
B3	18
B4	118
С	22
To	al 280