

1. Aim of the annual report

The aim of the annual report is to reflect, through the available data, the accomplishments achieved by Haringey Council in health and safety, but also to highlight areas where improvement is required. An action plan is produced to make those improvements possible.

2. A year of change

The financial year 2017/2018 has been marked by continuous change in the Management of the Corporate H&S Team, which has been led by the Head of Service, two different agency staff and the current Deputy Head of Health and Safety. The team has also have different consultants. This turnover of team members has been challenging, as consistency in direction, criteria and priorities was difficult to achieve.

On 13th December 2017, **the report** '*Strategic Options for Managing Health and Safety in Haringey and Budget Requirement*' **was presented to the Senior Officers Group with the recommendation to increase the staffing budget to hire two full time health and safety advisers, which was agreed.** The recruitment of those two advisers has not been materialised due to finance issues.

3. Executive summary

- 3.1 Changes in the Corporate H&S Team has impacted on the service delivery.
- 3.2 Overall risk registers report an appropriate level of compliance although there are areas that require improvement.
- 3.3 Building compliance is difficult to collate and report upon due to the recording system relying on manual input.
- 3.4 The Council is responsible for the outcome of the health and safety advice given to maintained schools by the external organisations they employ as competent advice.
- 3.5 Incident numbers have declined from 2015/2016.
- 3.6 Some health, safety and wellbeing training has been delivered corporately but there is a need to have a core set of courses to be attended by all employees.
- 3.7 The health and safety management system needs to be reviewed.
- 3.8 The 2015 – 2018 Healthy Haringey Strategy has been extended to the end of the calendar year. To deliver the strategy, we continue to implement an ongoing programme of work and activities.
- 3.9 The **Workforce Wellbeing Board** have finalised the Council's application for '**Excellence**' accreditation under the London Healthy Workplace Charter. Verification is scheduled to take place on 19 July.

3.10 There are six findings that are considered high risk. An action is proposed in the action plan.

4. Overall compliance

4.1 Risk registers

Every service area was asked to produce their completed risk registers every 3 months, to be presented by the Service Health, Safety and Wellbeing Champion in the Services or Corporate Health, Safety and Wellbeing Board.

The information for this report was taken from the quarter 1 of 2018, which is the last quarter of the financial year 2017/2018 when available, or from quarter 4 from 2017.

The risk registers are 19 questions common to all service areas where a percentage of compliance is recorded by Health, Safety and Wellbeing Champions, based on the answers supplied by the managers in their service areas.

Topic	Average percentage	Comments
DSE Assessment	82%	DSE assessments are well embedded in the organisation. There are some localised pockets and this should be addressed with individual managers.
DSE e-learning	73%	Online DSE assessments also seem to be embedded, but service areas do not have access to training records. The lack of a robust Learning Management System makes it very difficult to retrieve reliable training information easily
Driving RA	65%	This is an area that the Council should address it Corporately as, although the majority of services have them, there is still room for improvement
Home working RA	79%	Home working assessments are well embedded in the organisation. There are some localised pockets and this should be addressed with individual managers
Lone working	75%	Managers report overall that RAs have been carried out and non-compliance should be addressed locally
Stress RA	83%	It was reported that, when required, team/individual stress risk assessments are carried out
Incidents to police	97%	Serious incidents are escalated appropriately
First aiders	82%	Although reported high compliance, staff turnover and relocation affects the validity of the information available in the H&S Boards about first aiders
ECO	82%	Buildings have Emergency Controllers. Deputies should be nominated
Fire Wardens	82%	Although reported high compliance, staff turnover and relocation affects the validity of the information available in the H&S Boards about fire wardens
Fire drills	96%	It is reported that fire drills are carried out at least annually
PEEP	87.5%	Personal Emergency Evacuation Plans are well embedded in the organisation. There are some localised pockets and this should be addressed with individual managers.

H&S Role as Manager	52%	This compulsory course is a brief introduction to H&S for managers. The lack of a robust Learning Management System, easily accessible for managers, makes it difficult to retrieve reliable training information.
H&S Training	49%	The lack of a robust Learning Management System, easily accessible for managers, makes it difficult to retrieve reliable training information.
Acc. Forms	76%	Although an accident reporting system is implemented, there are areas of improvement
RIDDOR	100%	Significant incidents were reported to the HSE
POC	100%	It was reported persons of concerned panels were organised when required
Manual handling	71%	There are some areas that required employees to be trained in manual handling

The risk registers also have a difficulty regarding the recording and interpreting of information. As it is measured in percentages, not having requirement for for example PEEPs in the service, may be recoded as 100% compliance, or 0% as none carried out but perhaps not required. Furthermore, in certain topics there are no figures recorded.

4.2 Fire Wardens and First Aiders in Council Buildings

Every council building should have a sufficient number of first aiders and fire wardens to respond to an emergency. Maintaining an up to date list of trainer personnel requires constant review from the Corporate Contracts Team and the Emergency Controllers and due to restructures, staff turnover and relocation, there list was not kept up to date.

4.3 Building Compliance

The Council organised a monthly Property Compliance Board meeting were services with building upkeep responsibilities reported on compliance. They are: the Corporate Contracts Team (through Amey), Education, Homes for Haringey, Parks and Commercial. The report was compiled in the form of a spreadsheet and specific areas of compliance were colour coded in RAG style.

Each of the areas reported in a different style, dissimilar compliance areas reported upon and different interpretations of the RAG system. Another concern was that if a building that has an up to date compliance report e.g. fix wiring installation, that does not mean it is compliant, as the report could have highlighted areas of concern or even non-compliance e.g. unsatisfactory report, but it may show *green* in the database.

It needs to be explained that the method of collecting the information is manual so the figures on the spreadsheet might not be a true reflection of the current compliance rate (due to human error imputing data). In addition, the reports are based on the information available to those compiling the reports, but it is uncertain if that is a true account of the servicing/testing/maintenance carried out.

The meeting was discontinued in February 2018 to rethink the role of the Board and to agree on a common reporting system.

4.3.1 Corporate Landlord/Amy

There were 73 buildings considered on the report on 28/02/2018. There were 9 out of 19 areas of compliance that were over 90%. Fire risk assessment (49%), emergency lighting (68%), intruder alarm (64%) and asbestos surveys (63%) were areas of low compliance.

4.3.2 Commercial Buildings

There were 144 building/premises taken in consideration on the report 13/06/2018 (previous electronic versions were not available), covering 10 areas of compliance. There were five areas over 90% compliance. Fire risk assessment (70%), fix wiring installation (66%), Mechanical Plant / Roller Shutters (33%) were the areas of concern.

4.3.3 Parks

On the report from 03/2018, there were 57 park buildings of which 26 are leased. There was very little information available about compliance in parks buildings.

4.3.4 Homes for Haringey

On the report considering the first quarter 2018/2019 (previous was from December 2017 and therefore the one with more up to date information has been used), Homes for Haringey reports on six items compliance. Gas servicing achieved a 100% compliance, fire safety 98%, valid asbestos surveys 100%, monthly servicing to lifts 99%, water hygiene (legionella) 100% and communal electrical inspection programme 100%.

Servicing to stair lifts, through-floor lifts etc. that have been installed as part of adaptation works achieved 50% and domestic electrical inspection programme 66%.

In temporary accommodation, all statutory compliance measured achieved over 95%.

4.3.5 Education

There were 60 buildings considered on the report on 16/01/2018. The area of higher compliance was asbestos surveys (88%). Fire risk assessment (50%), water risk assessment (72%), gas safety certificate (62%) and fix wire testing (53%) were areas of low compliance.

5. Schools Health and Safety

The Council, as the employer, is responsible for the health and safety of community/maintained schools, as is responsible for its employees, maintaining a safe working environment (buildings) and the safety of the pupils (the safety of other people who could be affected by the undertaking of the employer). Community/maintained schools must follow Council policy and procedures.

Due to changes in legislation, schools were given the budget to acquire competent health and safety advice. There were 16 maintained schools and 3 other schools (that the Council is not the employer e.g. foundation, VA, academy) that bought the Health and Safety for Schools service level agreement, offering among other things to act as the competent health and safety person. There were 29 maintained schools that bought the service from an external organisation.

5.1 Health and Safety for Schools SLA

The Corporate Health and Safety Team offers an SLA to schools to act as the competent health and safety person, carry out H&S audits, provide H&S training, support etc. Every school that bought the SLA from the Corporate Health and Safety Team of the Council was audited before 31/03/2018. There was an average score of 77% (appropriate management system). Eight schools had a good management system (>80%), five appropriate management system (65-79%), and three scored below the minimum expected standard (65%). **For every audit, the school's management received an action plan to allow them to rectify any identified shortfalls.**

5.2 Maintained schools that did not buy into the Health and Safety for Schools SLA

To ascertain the level of health and safety compliance, schools were asked to complete an assurance questionnaire on 06/09/2017. It was a self-assessment form which would provide them with a score depending on their answers. Out of 29, 22 schools completed and returned the questionnaire to the H&S Team. Ten schools scored *Outstanding*, two *Good*, eight scored *Requires Improvement* and three scored *Poor*. It is believed that those who scored *Poor* was due to incorrect filling of the form.

% Score	Areas of Serious Concern		
	0	1 to 3	4+
>95%	Outstanding	Requires Improvement	Poor
76%-95%	Good	Requires Improvement	Poor
50-75%	Requires Improvement	Requires Improvement	Poor
<50%	Poor	Poor	Poor

Scoring table on the self-assessment forms

This is the only opportunity that the Council has to measure the H&S performance on these maintained schools.

The Council rely on the competence and professionalism of the organisations contracted by schools to advise them in health and safety matters. In the event that the advice is whether not given or is incorrect, the Council will be responsible for the consequences of that advice as the employer.

6. Accident and incidents

6.1 Total number of incidents

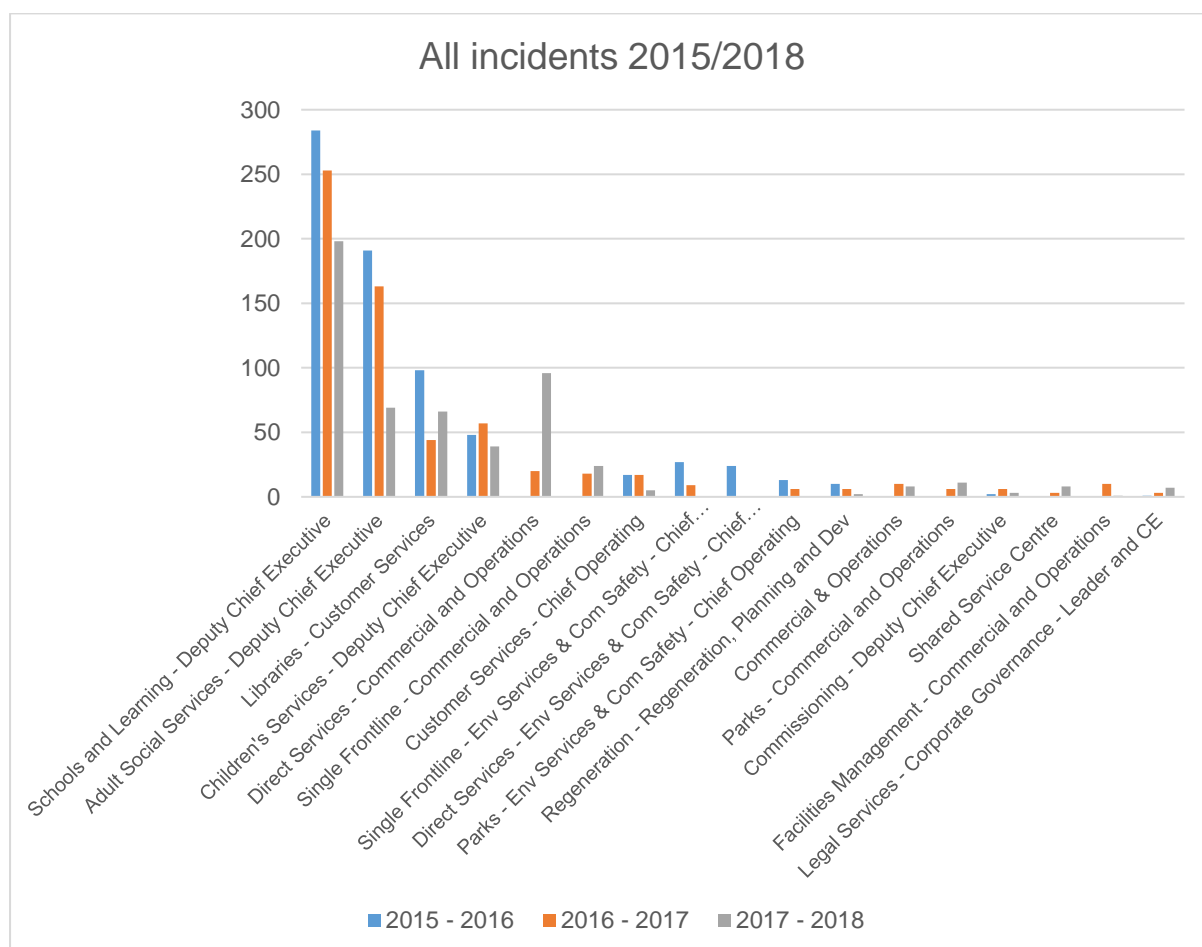
There has been a 26% decrease of accidents and incidents reported from 2015/2016 to 2017/2018. There were:

2015/2016: 741 2016/2017: 644 2017/2018: 546

This could be explained by a reduction of 22% of employees on the same period, although this includes schools that have stopped using the Councils' payroll service and therefore not taken into account. The difficulty is that those schools still report incidents to the Council Health and Safety Team.

It is however believed that there are services in the Council that are under reporting. This may have several explanations: accidents and incidents may be seen as being part of the job e.g. a teacher assistant on a special school that it attacked or abused verbally by students; the current reporting procedure is manual, where the affected or injured person has to fill in an incident report that needs to be passed to their manager for their comments, and then posted or scanned to the Corporate Health and Safety Team. This manual process can be seen as administratively onerous and so not followed; the third explanation refers to preventing recurrence. If employees of a team reports a certain incident but actions are not implemented to prevent recurrence, the value to reporting is seriously diminished and therefore, employees see no point in reporting them.

The services reporting more incidents are Schools and Learning (198), Adult Social Services (69) and Libraries (66), which represent a 61% of all incidents reported in the Council.

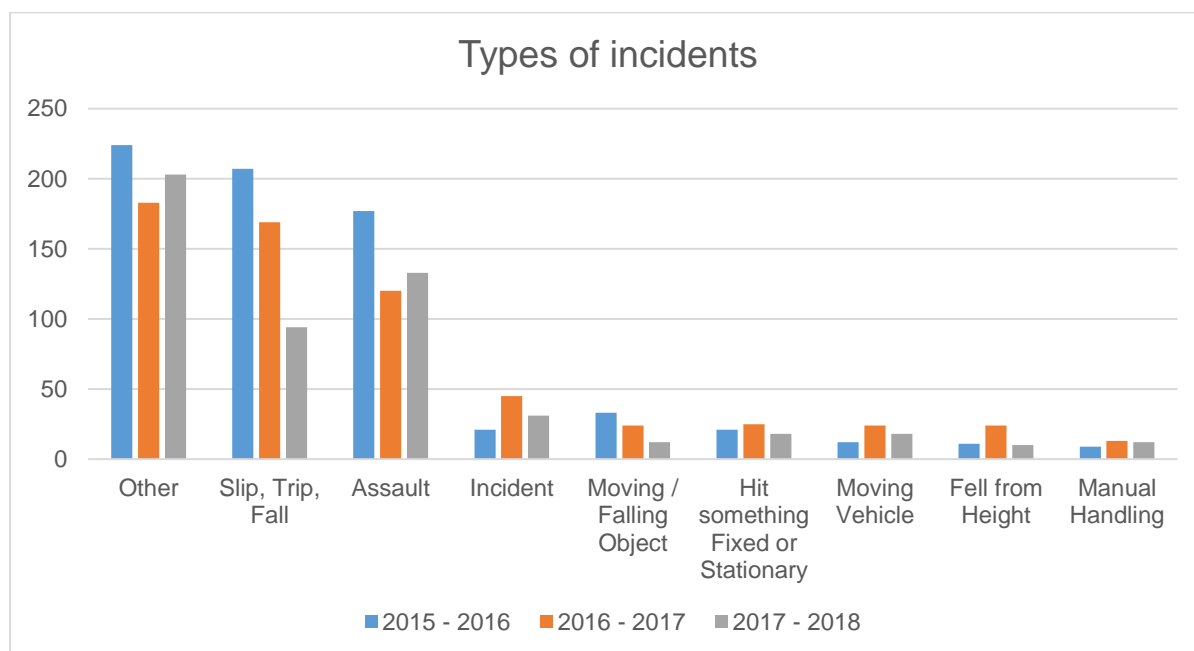


Services with more than 10 incidents recorded between 2015 and 2018.

6.2 Type of incidents

Incidents have been categorised depending of their type. There are three categories that accrued 78% of all incidents. Slips, trips and falls 17%, Assault 24% and Other 37%. Although a reduction on the three main categories from 2015/2016 is very positive, it is still required that managers carry out incident investigations, determine root causes and implement measures to prevent recurrence of similar incidents in the future.

Regarding audit trail of actions taken to prevent recurrence, the system is manual (a spreadsheet) which makes difficult for managers to communicate the actions taken, and also for the officer recording them. This information may be vital if a serious incident happened and the Council was investigated by an enforcement officer.



Top type of incidents recorded in the Council 2015/2018

6.3 Incidents reported to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations.

These are significant incidents and normally involve medical attention or employees not been able to perform their normal duties for more than seven consecutive days. There has been a substantial reduction of incidents reported to the HSE, from 64 in 2015/2016 to 16 in 2017/2018. Of the last financial year:

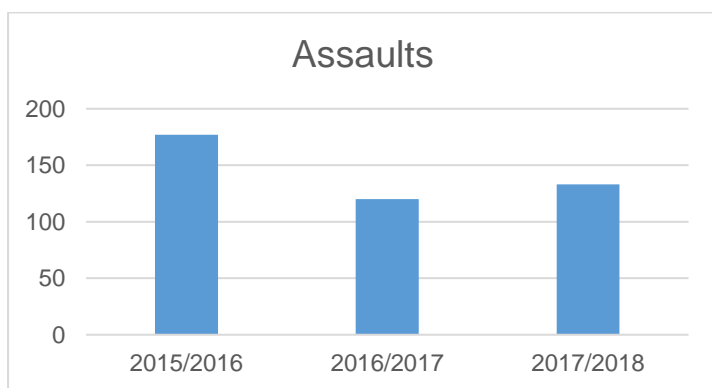
- 6 were involving pupils.
- 1 visitor
- 9 employees, 5 of them due to assaults.

Incidents reported to the HSE need to meet a certain criteria. Services report incidents to the HSE themselves and in some occasions, the criteria for reporting was not met. This is not necessarily wrong but it may trigger a visit from the HSE to the Council if non-RIDDOR reports are submitted, as it may seem the Council does not have competent H&S Advice; or if they

are not completed appropriately. Other incidents, whilst reportable, may not have been reported by services to the HSE. Reporting of RIDDOR incidents to the HSE is a legal requirement.

6.4 Assaults

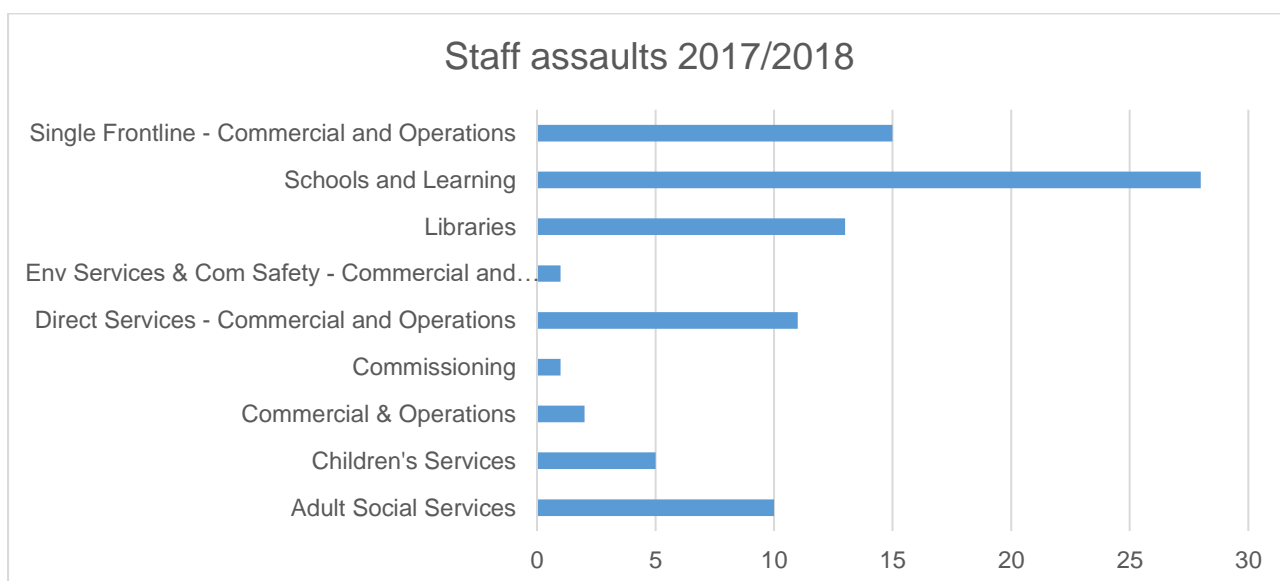
There were a total of 133 recorded assaults in 2017/2018, which is a decrease from 2015/2016 (177) but the trend has increased compared to last year.



Total assaults incidents recorded in the Council 2015/2018.

In 2017/2018, 88 of the reported assault incidents involved a member of staff, 11 of them resulted in no injury.

The three main areas affected were Single Frontline – Commercial and Operations, Schools and Learning and Libraries



Top Council services that had assaults incidents 2015/2018

There are good practices in different teams in the Council to prevent or minimise the consequences of assaults e.g. training in conflict management, GPS trackers, radios, lone working solutions, etc. but these are not standardised so officers doing a similar job may not have access to the same equipment.

There is also a concern about sharing information between different services about service users that may potentially be aggressive/abuse. There is not a corporate central system to record those persons of concern and the current procedure rely on different systems being updated with the relevant information. This may result in disparities which could potentially put employees at risk for not having access to information about a potentially aggressive/abusive service user, information which may be held by another Council team/service area. This information should also be shared with those organisations working with us or on our behalf.

7. Health and Safety Training

7.1 Courses delivered

During 2017/2018 different health and safety training courses were organised by the Corporate Health and Safety Team and delivered using internal resources from the team or, when needed, by external trainers.

Course	Number Trained
Construction, Design and Management Regs. 2015DM	15
Educational Visits Coordinator	8
Fire Warden	24
H&S for School Governors	12
H&S Your Role as a Manager	197
First Aid	41

Health and safety training delivered/commissioned by the Corporate H&S Team in 2017/2018.

Haringey Council is a large employer carrying out a wide variety of activities. Teams needing specific training courses commissioned them themselves e.g. client handling for people, but corporately, there are areas where all or a large number of employees need to receive training e.g. health and safety awareness, fire safety awareness. These core courses tend to be better received and more cost effective if delivered through an online platform. Currently the Council does not have those courses on an online version.

8. Reviewed H&S policy and procedures.

The documents that conform the health and safety management system of the Council are available on the intranet for them to be easily accessible. During 2017/2018 the following documents were created/reviewed:

Construction, Design and Management	Aug-17
Accident & Incident Management	Aug-17
Provision and Use of Work Equipment	Aug-17
Health and Safety Policy	Dec-17

The current management system is in need of an overhaul to ensure missing required procedures are created and implemented, and those already approved are revised to ensure they are still relevant, current and fit for purpose.

9. Educational Visits

The Council, as the employer, has a duty of care toward employees and those affected by the activities of the employer e.g. pupils. School educational visits can be hazardous activities, especially if they are not properly planned, organised and resourced.

The Director of Education is responsible to ensure those school trips from maintained schools are run safely. This responsibility is delegated to the Governing body and the Head teacher, as any other day-to-day H&S responsibility from running the school. Trips within the UK (category 1 and 2), from local outings to the library to day trips outside London that are not overnight or involves adventurous activities, are approved by the Governing body and the Head teacher. However when a trip involves, travelling overseas, staying overnight or doing adventurous activities (category 3), the school must record the trip using an online system (Evolve) 6 weeks in advance of the trip. The Corporate H&S Team, on behalf of the Director of Education, approves those trips after checking the provided documentation.

There were 42 visits reviewed by the Corporate H&S team from 16 different schools. Those category 1 and 2 trips are not normally recorded in Evolve.

Type of trip	No.
Adventurous	6
Overseas, Residential	15
Overseas, Residential, Adventurous	2
Residential	5
Residential, Adventurous	14
Grand Total	42

Category 3 educational visits approved by the Corporate H&S Team in 2017/2018

10. Wellbeing

Haringey has made a firm commitment to staff to support their health and wellbeing, as set out in the Workforce Health and Wellbeing Strategy (2015-18). The strategy is based on the London Healthy Workplace Charter, which is backed by the London Mayor, and provides a set of standards for organisations to meet in order to receive an official accreditation.

To deliver the strategy, we continue to implement an ongoing programme of work and activities to:

- reduce stigma and discrimination associated with mental ill health;
- increase staff personal resilience;
- support staff to manage stress effectively;
- promote the emotional wellbeing of staff; and
- facilitate positive employee/management relations.

10.1 Campaigns and Events

Five Ways to Wellbeing Campaign

In March 2017, in partnership with the Internal Communications team, we launched the 'Five Ways to Wellbeing Campaign' which aligned with the Workforce Health and Wellbeing Strategy objectives.

The campaign aimed to inspire staff through the provision of ideas of practical things they could do to look after themselves. It also highlighted the support available to help them to manage their own health and wellbeing. The campaign provided the foundation for the 2017 – 18 programme of activities.

National Mental Health & Wellbeing Week

In November 2017, a week of activities was held to mark national Mental Health & Wellbeing Week. This was to raise awareness, promote personal resilience and build organisational support to improve staff mental health and wellbeing. This included the Chief Executive signing the Time to Change pledge, re-committing Haringey to work to end mental health discrimination by tackling stigma and promoting a culture which is open to talking about mental health.

Staff Health & Wellbeing Fair

The annual Staff Health and Wellbeing Fair was held on 20 March 2018. Twenty-three stalls, training sessions and other activities were brought together to promote good health and wellbeing. A summary of figures from the event is provided below:

- Just under 400 staff attended the fair throughout the day
- 55 mini health checks were completed, with 10 people being referred to the GP
- 14 body M.O.Ts and lifestyle checks were carried out
- 36 staff received a stress relieving massage
- 12 staff practiced the art of mindfulness at the Qigong class
- 6 staff attended a bite size session on techniques to manage daily pressures
- 13 staff got an opportunity to test drive an electric car
- 40 staff took part in the Active Travel Teams cycling and hula hoop challenge – with one member of staff winning a Fit Bit
- 39 staff completed a Dockless bike questionnaire and went for a test ride

- 7 bikes were checked by Dr Bike

10.2 Training

To support the Workforce Health and Wellbeing Strategy (2015-18), a series of training sessions have been commissioned to help develop staff awareness, confidence and skills in promoting good mental health and wellbeing. A training programme was developed with the following objectives:

- To ensure that, during a period of change, managers are able to effectively identify the needs of staff and to meet them, building a workforce which is motivated and productive, and able to continue to deliver the services needed by our residents;
- To influence the wider culture of Haringey as a place, reducing stigma, building local resilience and openly addressing, in a timely manner, the needs of people experiencing mental ill-health.
- To demonstrate local leadership in the borough by implementing and promoting best practice in mental health and wellbeing, and demonstrating the benefits of a preventative approach.

In August 2017, Confluence Partnerships Ltd was awarded the contract to deliver managers mental health training for a period of 24 months, to run from 1st October 2017 to 30th September 2019. This training has been offered to all managers in the Council. Separate tailored sessions have also been offered to teams which have been identified to benefit from extra support, either due to high rates of sickness absence, or because of low levels of confidence identified by the MIND Wellbeing survey, carried out in the autumn of 2016, or both.

The table below summarises mental health and wellbeing training held in 2017-18:

Session	Date	Number attended
Confluence		
Mental Health and Wellbeing in the Workplace: Awareness and Skills Training	14 Nov 2017	33 managers
	5 Dec 2017	
	18 Jan 2018	
	28 Feb 2018 (tailored session – Legal Services)	
	8 Feb 2018 (tailored session – Children’s Services)	
Haringey Adult Learning Service		
Effective Communication	11 Nov 2017	7 staff
	31 Jan 2017	7 staff
Coping with Daily Pressure (Series of 4 sessions)	8 Nov 2017 – 21 Feb 2018	11 staff
Coping with Daily Pressure (Bitesize)	20 March 2018	6 staff
Mindful movement with Chi King (Series of 6 sessions)	9 Nov 2018 – 19 April 2018	Course ongoing

Mindful movement with Chi Kung (bitesize)	2 March 2018	12 staff
Mindfulness	7 Nov 2017	13 staff
	5 Dec 2017	11 staff
	6 Feb 2018	4 staff
	13 Mar 2018	9 staff
Nicholson McBride		
Personal resilience training	6 x workshops	67 staff (24x Regeneration; 15x Policy & Communications; 41x CMG)
Mind in Haringey		
Mental Health First Aid	2017/2018, 22 courses	340 staff and residents trained
Total		171 staff

10.3 Outcomes

Staff feedback from all training and events has been highly positive. The provision of health and wellbeing training, events and activities has supported the objectives of the Workforce Plan 2015 – 18, especially in relation to employee motivation. Increased staff satisfaction with Haringey as an employer will contribute to a more productive and efficient workforce available to deliver the objectives of the Corporate Plan (and future Borough Plan). In addition to this, it is anticipated that helping managers to more effectively support their staff will reduce sickness absence and presenteeism – the Organisational Resilience team will work with HR to monitor sickness data over the coming months.

11. Recommendations and planned work

Throughout this report, some areas have been highlighted where good standard and practices are implemented but also there are areas of concern. An action plan has been created to address the identified issues, organised by High, Medium and Low risks.

Concern	Action	Level of risk
Although reported high compliance, staff turnover and relocation affects the validity of the information available in the H&S Boards about first aiders.	Ensure all council buildings have sufficient numbers of trained first aiders, fire wardens and emergency controllers to manage emergencies and cover for eventualities.	High
Building compliance is reported differently by services managing buildings.	Implement an asset management system to include all Council buildings where compliance information is current, up to date and reports can be produced to ascertain level of compliance.	High

Some incidents were reported to the HSE in error. Others might not have been reported.	The Corporate H&S Team reports all RIDDOR incidents to the HSE.	High
There is not a corporate central system to record those persons of concern.	Commission a system to centrally record persons of concern that can be access by services and third parties that require such information.	High
Core H&S training is not currently delivered.	Commission an online H&S training service to deliver core courses to employees.	High
The current management system is in need of an overhaul.	Review the H&S Management system.	High
Category 1 and 2 educational visits are not normally recorded in Evolve.	Record all educational visits in Evolve to ensure all relevant checks have been carried out and that an audit trail exists	Medium
Council teams (except maintained schools that buy into the SLA) have not been audited in recent years. Health, Safety and Wellbeing champions report there are some pockets of compliance.	Produce a 3-year audit cycle, where team/service areas are audited and an action plan produced.	Medium
The lack of a robust Learning Management System makes it very difficult to retrieve reliable training information.	Implement a Learning Management System where training information (courses, materials, certificates, etc.) can be logged and retrieved easily. It should link with HR employee's database.	Medium
It is believed that there are services in the Council that are under reporting. 37% of Council incidents are attributed to the 'Other' type. Management actions are difficult to record and follow up.	Implement an online incident reporting system that can track management actions. Broaden the type of incident category in the new system to identify incident trends. Carry out a communication campaign regarding the new system and the importance of reporting.	Medium
The risk registers also have a difficulty regarding the recording and interpreting of information.	Create a risk register process based on key performance indicators and risk assessment, which is consistently used.	Low

12. The future

12.1 Corporate H&S Team

During 2018/19, the Corporate H&S Team will be expanded to include two Corporate Health and Safety Advisers. These extra resources will allow the team to work on some of the actions in this report, which ultimately will improve the H&S culture in the Council.

12.2 Health and Safety Strategy

The Council has been reporting on indicators that, although valid, were not geared towards corporate aim or objectives. There is a need to create a Health and Safety Strategy to decide what are the aim and objectives of the Council, how to accomplish them and how they will be measured. The Corporate Health and Safety Team will present a strategy for the Council for 2018/2021.

12.3 Potential for insourcing

The newly elected Councillors, through their Haringey Labour Party manifesto 2018, pledged to *'see whether savings can be made if we deliver the service ourselves'*. Bringing services back in-house may require extra resources and processes. Careful consideration is required to ascertain what those resources could be to ensure not just a smooth transition, but also the health, safety and wellbeing support during their day-to-day operations to ensure the required statutory duties are met.