

Summary of Actions and Response: Health & Safety

Action No.	Report Ref	Issue	Risk	Agreed Action	H&S comments	Priority*	Responsible Officer	Timescale
1	2.1 – 2.2	Risks are not fully documented for services with an element of lone working	Staff are at increased risk of physical harm	The Health and Safety Auditor (AF) to take a sample of high risk service areas (e.g. social care) and assess the appropriateness of their documentation.	<i>Lone Working is a standard question and area of investigation on all the audits undertaken by the H&S Service. Detailed audits planned for Parking and Social Care before end of the 2016/17 financial year.</i>	2	Head of Health and Safety	April 2017
2	2.1 – 2.2	<i>As above</i>	<i>As above</i>	H&S to run a campaign to increase the awareness of the necessity of completing lone working risk assessments.	<i>The Lone Working compliance note is to be updated early 2017 and communicated appropriately to staff using Council systems.</i>	2	Head of Health and Safety	June 2017

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3	2.4 – 2.7	There is no single premises register in place, identifying the health and safety obligations the council has for each property	Services may not be provided to properties that require it	H&S to regularly liaise with Property Services, Facilities Management and Housing to ensure there is corporate oversight and that all obligations are being met.	<i>H&S Staff now regularly attend the relevant Property Services meetings to identify any changes in risk.</i>	2	Head of Health and Safety	April 17
4	2.4 – 2.7	<i>As above</i>	<i>As above</i>	Premises registers for each H&S service to be compared with assets listed on Techforge to ensure that they are complete.	H&S review Property update register to ensure that relevant risks are covered and ensure they are monitored according to risk.	2	Head of Health and Safety	April 17
5	2.4 – 2.7	<i>As above</i>	<i>As above</i>	Property Services will now forward a report on a quarterly basis, detailing all acquisitions and disposals for the period. H&S service will update their premises registers to reflect changes.	<i>Property to highlight changes made each quarter to identify significant alterations to risk profile – audit as required</i>	2	Head of Health and Safety	April 2017 Complete

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6	2.17	FRA actions are not followed up in a manner that provides the organisation with assurance over the management of fire risk	Actions from FRAs may not be completed, increasing the likelihood and impact of a fire risk	Complete the risk rating of properties requiring fire risk assessments.	<p><i>All properties have a fire risk assessment and are prioritised eg residential properties including sheltered and hostels have an annual review as they are high risk.</i></p> <p><i>Commercial premises – this is down to specific contract arrangements</i></p>	3	Head of Health and Safety	Oct 16 Complete
7	2.18 – 2.19	<i>As above</i>	<i>As above</i>	Formalise the follow up and escalation processes, stating trigger points which would instigate these processes.	<p><i>A completed action plan is to be submitted by the service manager within 30 days from the date of service of the report. The FRA is reviewed where required, and any outstanding actions are included in the standard escalation process. Where there are significant areas of concern this is escalated immediately.</i></p>	3	Head of Health and Safety	Oct 16 Complete

Action No.	Report Ref	Issue	Risk	Agreed Action	H&S comments	Priority*	Responsible Officer	Timescale
8	2.21 – 2.23	Asbestos risk registers and associated asbestos management plans are not being reviewed in council occupied non-domestic premises in accordance with statutory requirements	Reviews are not taking place which could mean that changes that affect asbestos management may not be identified.	Undertake a search of all premises files to identify the properties with missing reviews and management plans. Ensure coverage of these properties in the next review programme. Requirements for asbestos checks for commercial properties to be communicated by Property Services in a timely fashion,	<i>All premises with asbestos risk registers are reviewed on a regular basis in accordance with statutory requirements. Regular updates are now provided on changes to the CYC property list to ensure all premises are covered. Commercial tenants have been reminded regarding their responsibilities on taking up a tenancy.</i>	3	Head of Health and Safety	Dec 16 Complete
9	2.24 – 2.26	There are no up to date lists of site representatives for asbestos and legionella	Asbestos and legionella risks may not be managed appropriately, increasing the likelihood of exposure to asbestos or legionella bacteria	Complete the review of SALOs and SLRs by chasing and escalating review forms with the 'responsible officer' field left blank.	<i>Local management processes are identified during the H&S general audits. The audits updated to reflect local changes or where nominated people are not in place</i>	2	Head of Health and Safety	Sep 16 Complete
10	2.28 – 2.29	HAVS monitoring is incomplete because of missing, delayed,	An employee may develop HAVS because frequent	A decision will be made as to how the HAVS monitoring	<i>An evaluation of monitoring equipment is ongoing</i>	2	Head of Health and Safety	April 2017

		inaccurate or incomplete monitoring forms	exceeding of the safe limit was not identified and addressed	system will operate in the future.	<i>to improve the ease by which records are recorded and maintained.</i>			
11	2.30 – 2.32	The processes for keeping the list of employees who require health surveillance up to date are not working effectively	Early signs of ill health are not identified because health surveillance is not undertaken	Adjust the risk assessment policy to ensure that managers are required to provide an annual update of employees requiring health surveillance to Business Support.	<i>A revised system for ensuring staff who need health surveillance are provided with it is being developed.</i>	3	Head of Health and Safety	April 17

*The priorities for actions are:

Priority 1: A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.

Priority 2: A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.

Priority 3: The system objectives are not exposed to significant risk, but the issue merits attention by management.