

FINANCE AND PERFORMANCE MANAGEMENT PORTFOLIO (HEALTH & SAFETY CONSULTATIVE GROUP) DECISION SCHEDULE



Monday 28th November 2005

at 4.30 pm

**or immediately following the Finance and Performance Management Portfolio
whichever is the later**

in Committee Room “C”

Councillor Peter Jackson, Cabinet Member responsible for Finance and Performance Management, Councillors Cambridge and Sutheran will consider the following items:-

1. KEY DECISIONS

1.1 None

2. OTHER ITEMS REQUIRING DECISION

- 2.1 Health and Safety Partnership Agreement - *Chief Personnel Services Officer*
- 2.2 Policy Guidance on Violence and Aggression - *Chief Personnel Services Officer*
- 2.3 Draft Managing Stress at Work Policy – *Chief Personnel Services Officer*

3. ITEMS FOR INFORMATION

- 3.1 Preparing for Influenza Pandemic - *Chief Personnel Services Officer*
- 3.2 Health and Safety Performance Statistics - *Chief Personnel Services Officer*
- 3.3 Post Restructure Health and Safety Questionnaire - *Chief Personnel Services Officer*
- 3.4 No Smoking Matters – *Chief Personnel Services Officer*

4. REPORTS FROM OVERVIEW OF SCRUTINY FORUMS

4.1 None

**FINANCE AND PERFORMANCE MANAGEMENT
PORTFOLIO (HEALTH AND SAFETY
CONSULTATIVE GROUP)**

Report To Portfolio Holder
28th November 2005



Report of: Chief Personnel Services Officer

Subject: HEALTH AND SAFETY PARTNERSHIP
AGREEMENT

SUMMARY

1. PURPOSE OF REPORT

To advise of the agreement reached with the Hartlepool Joint Trades Union Committee (HJTUC) on the final text of a Health and Safety Partnership Agreement and to seek the Portfolio Holder's consent to the adoption and implementation of the agreement.

2. SUMMARY OF CONTENTS

The report records that further minor amendments and additions have been made to the text of the draft agreement considered at the meeting of this group which was held during September and that these changes have been agreed with the HJTUC.

3. RELEVANCE TO PORTFOLIO HOLDER

Corporate issues.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

Portfolio Holder only

6. DECISION(S) REQUIRED

To note the report and consent to adoption of the Health and Safety Partnership Agreement.

Report of: Chief Personnel Services Officer

Subject: HEALTH AND SAFETY PARTNERSHIP
AGREEMENT

1. PURPOSE OF REPORT

To advise of the agreement reached with the Hartlepool Joint Trades Union Committee (HJTUC) on the final text of a Health and Safety Partnership Agreement and to seek the Portfolio Holder's consent to the adoption and implementation of the agreement.

2. BACKGROUND

At the meeting that was held during September, the Portfolio Holder received a report on the proposed Health and Safety Partnership Agreement between Hartlepool Borough Council and the HJTUC. It was proposed that further minor amendments were required, whereupon the final agreed draft would be brought to the following meeting of the group, on 28th November, for adoption. The required changes have now been made and agreed with the HJTUC. A copy of the final draft forms the appendix to this report.

3. THE WAY FORWARD

The completion of this agreement will formalise and strengthen the pre-existing arrangements for consultation and collaborative working on health and safety matters within the authority. The former arrangements were good and of long-standing but less structured and not so wide ranging than those now facilitated by the new agreement.

It will now be possible to move forward in our joint management of health and safety and to do so against measurable aims. This will be made possible by the annual review that is a part of the agreement, this review covering both its functioning and its content.

The agreement now needs to be publicised within the workforce, particularly because a wider and a deeper participation of employees is key to the agreement's successful application. In the normal course of events the agreement will be an agenda item on the next round of departmental, division and section health and safety committees. The Health and Safety Adviser will also take the opportunity to brief senior officers on the agreement, as a part of his quarterly reports to departmental management teams.

It may also be possible communicate directly with other employees, to inform them of the agreement, via the use of the various internal print and electronic means that are now available for this purpose.

4. RECOMMENDATION

To note the report, consent to the adoption of the Health and Safety Partnership Agreement and encourage its implementation and success.

Hartlepool Borough Council

And

Hartlepool Joint Trades Union Committee

Health & Safety Partnership Agreement

1. Introduction

Hartlepool Borough Council (HBC) and its recognised trade unions, through the Hartlepool Joint Trades Union Committee (HJTUC), agree to work in partnership in order to further improve the health and safety performance of the authority. HBC and HJTUC will work together to implement the provisions of Section 2(2c) of the Health and Safety at Work Act 1974, the Management of Safety at Work Regulations 1999, the Safety Representatives and Safety Committee Regulations 1977 and all other relevant legislation. Moreover they will reflect the strategic direction of both the Government and the Health and Safety Executive to encourage employers and trade unions to work in partnership on health and safety issues.

There are six guiding principles that provide a framework for this co-operation:

- Commitment to build a better working environment alongside a better business environment;
- Recognising and respecting the legitimate interests of the partners to this agreement and to develop co-operation at all levels of the authority;
- Commitment to reducing absence from work and the need for dismissals on grounds of occupationally related ill health or injury, encompassing the principles of prevention of harm, early referral and rehabilitation;
- Focus on the quality of the working environment covering welfare, occupational health, job design, and safety in the workplace;
- Openness and transparency on all relevant health and safety matters, with genuine consultation in good time and a commitment to work together to jointly develop solutions in a timely manner;
- Adding value and realising goals so that these arrangements deliver more than just words on paper.

An improved health and safety performance, consistent throughout the organisation, is the objective of this partnership agreement.

2. Information for Employees

Section 2(2c) of the Health and Safety at Work Act 1974 requires that employers should provide such information, as well as instruction, training and supervision, to ensure, so far as is reasonably practicable, the health and safety of employees. The duty is made more explicit in The Management of Health and Safety at Work Regulations 1999.

The information provided should include not only bringing to the notice of employee the written statement of general policy for health and safety and the organisation and

arrangements that affect them but also a range of other information, especially for health and safety representatives, including information:

- About plans and performance and any changes affecting health and safety;
- Of a technical nature about hazards and the precautions to be taken;
- Concerning injury accidents, dangerous occurrences and other near misses;
- On measurements and monitoring undertaken to check the effectiveness of health and safety arrangements;
- On the occupational health programme.

3. Health and Safety Consultative Arrangements

The arrangements set out in this section of the agreement deal with the establishment of health and safety committees, at corporate, departmental and divisional or section levels. Apart from the implementation of the Safety Representatives and Safety Committees Regulations 1977, the arrangements will also take into account of the Advisory, Conciliation and Arbitration Service code of practice on Time Off for Trade Union Duties and Activities and the Guide to the Health and Safety (Consultation with Employees) Regulations 1996.

HBC is committed to full and open consultation on health, safety and welfare matters that relate to its employees. The aims of these consultative arrangements are to:

- Promote the highest standards of health, safety and welfare within HBC's operations and in relation to its emissions;
- Promote co-operation between management and trades unions to implement effective health and safety management systems;
- Facilitate consultation, at the appropriate level, in respect of proposed changes to working practices, procedures and risk assessments;
- Provide appropriate opportunities for the discussion of health, safety and welfare matters in a spirit of partnership.

The aims of the arrangements at corporate, departmental and division or section levels are principally concerned with:

- Development and implementation of policies and procedures;
- Monitoring;
- Consultation;
- Communication.

While most discussion will centre on HBC employees, where appropriate consideration will be given to matters relating to contractors and members of the public.

Under the four heading above, the following matters will be considered.

Development and Implementation:

- Health and safety policies, procedures, rules and guidance etc. for the authority as a whole;
- Training programmes for health and safety representatives and other employees;
- Advice on safety communication and publicity throughout the authority;
- Providing a link with other outside organisation on good practice.

Monitoring:

- Accident, safety incident and health trends and statistics;
- Perceived deficiencies in practice, procedures or planning.

Consultation:

- Responses to requests for comments on draft policies, procedures etc.;
- Procedures, risk assessments or guidance on new equipment or work methods;
- Training for managers and health and safety representatives.

Communication:

- Discussion of health and safety matters of mutual interest;
- Dissemination of the business matters and decisions of the committee to the employees represented;
- Promotion of good health and safety standards for the employees represented.

4. Membership of Health and Safety Committees

To ensure that health and safety matters are fully discussed and properly dealt with, membership will include the relevant senior managers responsible for the health and safety of employees, health & safety officers and Health and Safety Representatives appointed by the trade unions. All such Health and Safety Representatives will be recognised as equals by HBC and be afforded the same facilities and rights.

A broad outline of the consultative structure, membership and attendance, at each level is as follows:

Level	Trades Union	HBC	Chair
corporate committee (this function undertaken by the Portfolio Holder's Health and Safety Consultative Group)	3 x HJTUC representatives 3 x Health and Safety Representatives with specific expertise national or regional officers, as required (with advisory status)	Portfolio Holder 2 x other elected members Chief Personnel Services Officer Health and Safety Adviser and/or other safety officers Other officers as required by business	2 x joint chairs (1 each nominated from amongst the HBC and trades union members)
departmental committees	Health and Safety Representatives from each division, section etc. committee	Director and other senior officers Health and Safety Adviser and/or other safety officers other department officers as required by business	2 x joint chairs (1 each nominated from amongst the HBC and trades union members)
division, section etc. committees of departments	Health and Safety Representatives for the workplaces covered	Division, section etc. manager/s others department officers as appropriate safety officer/s as required	2 x joint chairs (1 each nominated from amongst the HBC and trades union members)

National and regional full time officers of recognised trades unions and other HBC officers or external specialists with required expertise may also attend the meetings, by agreement as appropriate and in a co-optee or observer capacity.

Membership of departmental and of division, section etc. committees may be varied by agreement within the committee.

5. Terms of Reference

Health and Safety Consultative Group (the corporate committee):

- The group will normally meet quarterly;
- The authority and the trades unions will each appoint a chair and the chairing of the meetings will be undertaken in rotation;
- The authority and the trade unions will each appoint a joint secretary;
- The joint secretaries and the joint chairs will agree the agenda and minutes of meetings;
- The group may decide to establish sub-groups or working parties, as and when the need arises;
- Agenda items must be in conformity with the aims of the group, below.

The aims of the group will be to:

- Promote the highest standards of health and safety throughout the authority and to a consistent level;
- Assess the health and safety performance of the authority as a whole and, where possible, make comparison with other relevant organisations;
- Consult on the development of corporate health and safety policies, processes, procedures and guidance;
- Consider the best strategic approach to health and safety management, performance improvement and the authority's duty of care to its employees;
- Consider and assess health and safety developments outside the authority, including best practice, new legislation or Health and Safety Executive initiatives.

Items for agendas may be referred to the joint secretaries, by the authority's management, trade unions, and departmental and division, section etc. health and safety committees.

Departmental Health and Safety Committees

- These committees will normally meet quarterly;
- The authority and the trade unions will each appoint a chair and the chairing of the meetings will be undertaken in rotation;
- The authority and the trades unions will each appoint a joint secretary;
- The joint secretaries and the joint chairs will to agree the agenda and minutes of meetings;
- Agenda items must be in conformity with the aims of the committee, as below.

The aims of these committees will be to:

- Promote the highest standards of health and safety throughout their department and to a consistent level;
- Consider and encourage co-operation in all matters relating to the health and safety at work of all employees working in their department and any other

persons who may be affected by its activities, including contractors and members of the public;

- Consider matters arising from new health and safety legislation or new procedures, rules, guidance referred internally from a corporate level;
- Contribute to the development of new internal procedures, rules, guidance etc. by responding to consultation requests;
- Contribute to the prevention of work related accidents, incidents and ill health by regular monitoring the health and safety performance of their department, and making recommendations to the Health and Safety Consultative Group of any remedial actions;
- Review the health and safety training needs and resource implications of Health and Safety Representatives, managers and employees generally and to make recommendations to the Health and Safety Consultative Group as appropriate.

Agenda items may be referred by management, trade unions, Health and Safety Representatives and the Health and Safety Consultative Group.

Division, Section etc. Health and Safety Committees

- These committees will normally meet at least four times a year;
- The authority and the trades unions will each appoint a chair and the chairing of meetings will be undertaken in rotation;
- The authority and the trades unions will each appoint a joint secretary;
- The joint secretaries will agree the agenda and minutes of meetings;
- Agenda items must be in conformity with the aims of the committee, as below.

The aims of these committees will be to:

- Consider and discuss health and safety issues of local concern, so as to promote a common purpose, strengthening local ownership of these matters;
- Act as a focus for ideas and to develop initiatives to improve health and safety performance and for the resolution of health and safety issues;
- Receive reports on and discuss local accidents, facilitate inspections and make appropriate recommendations to management;
- Assist in the communication of information and consultation with employees on health and safety matters relating to the work group concerned.

Agenda items may be referred by management, trades unions, Health and Safety Representatives, the departmental health and safety committee and the Health and Safety Consultative Group.

6. The Roles Health and Safety Representatives and Their Appointment

The arrangements set out below for Health and Safety Representatives aim to implement the Safety Representatives and Safety Committees Regulations 1977 as amended by the Management of Health and Safety at Work Regulations 1999. The functions and rights of Health and Safety Representatives are adequately set out in the regulations and their accompanying Approved Code of Practice and guidance and these should be referred to if required.

Within the authority, Health and Safety Representatives have both consultative and representational roles and functions that include, workplace inspection, accident and safety incident investigation and the provision of advice and information.

Health and Safety Representatives are an integral part of HBC's strategy for the management of health and safety and, together with the locally based managers, it is recognised that they can have a material beneficial effect on the health and safety standards that exist in workplaces.

Election of Health and Safety Representatives

Health and Safety Representatives must be appointed by one or more of the recognised trades unions. Each division, section etc. Health and Safety Committee will agree the number of health and safety constituencies relevant to its circumstances. It should also agree the numbers of Health and Safety Representatives per constituency and the extent of their coverage. The trades unions will notify HBC of all Health and Safety Representatives appointed and the joint secretaries of the Departmental and Division, Section etc. Health and Safety Committees will compile and maintain a register of accredited Health and Safety Representatives.

All appointed Health and Safety Representatives will agree to undergo a trades union recognised course of training within one year of appointment, and maintain their knowledge through ongoing development. Until properly trained, all Health and Safety Representatives will carry out their functions in conjunction with another representative who has undergone the training.

Workplace Inspections

Health and Safety Representatives will, once trained, make regular, (normally quarterly), inspections of the workplaces within their constituencies. At least annually a joint inspection should be done along with the relevant manager responsible for health and safety.

Arising from a workplace inspection, Health and Safety Representatives should complete a Workplace Inspection Report Form, and hand this to the relevant manager. This inspection report should identify all areas of concern arising from the inspection. In response the manager will be expected to consider the issues raised and, if necessary, to discuss them directly with the Health and Safety Representative. The manager will make a written response to the Health and Safety Representative rep within a reasonable time (normally within ten working days) with the details of the remedial actions to be taken. (Where a hazard has been identified that requires urgent attention, the Health and Safety Representative together with the manager responsible will take the necessary actions to make the workplace safe.)

Access to Information for Monitoring Purposes

Health and Safety Representatives will be given an appropriate level of access to the authority's systems, consistent with the extent and coverage of their functions. Members of the Health and Safety Consultative Group will be afforded access to statistics for the whole of the authority.

Accident and Incident Investigations

Health and Safety Representatives will be informed of accidents and incidents that occur in their constituencies. Once they have received appropriate training, time off with pay will be granted to the Health and Safety Representatives to allow them to investigate the cause of the accidents and

other safety incidents and full access will be given to the relevant employees, witnesses and records. This will normally be carried out on a joint basis with the management appointed accident investigator.

It is recognised and accepted that in cases involving death, serious injury or illness, the Health and Safety Representatives may need to compile an independent report on behalf of the trades unions.

Facilities for Health and Safety Representatives

Health and Safety Representatives will be provided with the appropriate facilities to enable them to carry out their role. These will normally include:

- Paid time off for performance of function outlined above;
- Secure storage space for files;
- Access to a telephone, fax e-mail and internet/intranet link;
- Attendance at approved health and safety training courses, without financial detriment.

7. Review of Partnership Agreement

HBC and HJTUC will periodically carry out joint reviews of the content and functioning of this agreement. These reviews will normally be carried out annually and any changes to the agreement that may jointly be agreed will be made and published.

Joanne Machers
Chief Personnel Services Officer
HBC

Edwin Jeffries
Secretary
HJTUC

**FINANCE AND PERFORMANCE MANAGEMENT
PORTFOLIO (HEALTH AND SAFETY
CONSULTATIVE GROUP)**

Report To Portfolio Holder
28th November 2005



Report of: Chief Personnel Services Officer

Subject: POLICY AND GUIDANCE ON VIOLENCE AND
AGGRESSION

SUMMARY

1. PURPOSE OF REPORT

To advise of further progress on the drafting of a corporate policy on violence and aggression, which is being developed as a part of the wider work that is being undertaken to minimise threats of, or actual violence and aggression to employees. Also to present for comment a draft practice guidance document on personal safety.

2. SUMMARY OF CONTENTS

The report provides an update on the further work carried out on the drafting of the violence and aggression policy and indicates what still remains to be done. The most recent draft of the policy forms the first appendix to the report and a second appendix is a draft of a practice guidance document on personal safety.

3. RELEVANCE TO PORTFOLIO HOLDER

Corporate issues.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

Portfolio Holder only

6. DECISION(S) REQUIRED

To note the report, to agree to further consideration of the draft policy following consultation and to provide comments on the draft guidance on personal safety.

Report of: Chief Personnel Services Officer

Subject: POLICY AND GUIDANCE ON VIOLENCE AND AGGRESSION

1. PURPOSE OF REPORT

To advise further progress on the drafting of a corporate policy on violence and aggression, which is being developed as part of the wider work that is being undertaken to minimise threats of, or actual violence and aggression to employees. Also to present for comment a draft practice guidance document on personal safety.

2. BACKGROUND

At the meeting that was held during September, the Portfolio Holder received, as an appendix to a report on violence and aggression, a draft of a corporate policy. It was agreed that comments arising from that meeting would be incorporated into the draft, before an authority-wide consultation was undertaken. This consultation was to have been completed by the end of October. The further amended draft was then brought back for approval to at this meeting of the Health and Safety Consultative Group.

3. PRESENT POSITION

It now appears that not all of the comments on the draft policy were received by the required date and that a further meeting of the working group will be required to consider these. It is therefore proposed that the final draft of the policy should be brought for approval to the first possible Portfolio Holder's meeting, even if this does not coincide with a quarterly Health and Safety Consultative Group meeting.

A copy of the present draft of the policy forms the first appendix to this report.

4. THE DRAFT PRACTICE GUIDANCE ON PERSONAL SAFETY

As a part of the wider work being undertaken to minimise threats of, or actual violence and aggression to employees a draft document, presently entitled Guidance on Personal Safety and the Prevention of

Violence in the Workplace, has been developed from some earlier department specific work. The opportunity provided by this meeting is therefore being taken to present this draft and to invite comments on it.

This draft document forms the second appendix to this report.

5. RECOMMENDATION

To note the report, to agree to further consideration of the draft policy following consultation and to provide comments on the draft guidance on personal safety.

Hartlepool Borough Council

VIOLENCE & AGGRESSION TOWARDS STAFF

POLICY STATEMENT

1. Purpose

- 1.1 It is recognised that staff of Hartlepool Borough Council may be subject to violence or aggression by people with whom they come into contact in the course of their work.
- 1.2 The purpose of this policy is to describe the Council's approach to the avoidance of violence and aggression towards its staff and its arrangements for dealing with such matters.
- 1.3 The policy makes clear the Council's commitment to provide as far as is reasonably possible:
 - A safe working environment for all its employees
 - The necessary training, advice, guidance and support to prepare employees to avoid, prevent and if need be respond to such situations
 - To deal sensitively with the possible distressing aftermath for staff of such situations

2. Policy Statement

- 2.1 The Council deplores and regards as unacceptable any acts or threats of violence or aggression by anyone to any of its staff.
- 2.2 The Council acknowledges that it has responsibility to protect the health and safety at work of those it employs and of others who work on the Council's premises.
- 2.3 It is the policy of the Council to do everything reasonably possible to avoid and prevent the risk of aggression or violence towards its staff at work and to do everything reasonably practicable to minimise, manage and control such risk and such actions.
- 2.4 The Council will do everything practicable in conjunction with the police to help bring a prosecution against any individual where there are allegations of violence and aggression towards any member of staff. The following statement of intent will be displayed wherever appropriate throughout the Council:

‘The Council takes seriously the use of abusive, threatening or violent conduct towards their staff and will consider legal action against anyone that displays this behaviour.’

3. Definition

- 3.1 For the purposes of this document the terms violence and aggression have assigned to them the following definition:

“Incidents where persons are abused, threatened or assaulted in circumstances relating to their work, involving an explicit or implicit challenge to their safety, well being or health” (National Task Force on Violence against Social Care Staff)

This includes threats or actual violence to staff and/or their relatives and/or threats of or actual damage to the property of Council staff or their relatives.

- 3.2 Violence, including aggression, does not necessarily need to cause physical harm. It includes incidents which:

- cause major injury
- require medical assistance
- require first aid only
- involve a threat, even if no physical injury results
- involve verbal abuse (including abuse on the telephone)
- involve non verbal abuse (for example stalking, abusive letters or other correspondence including e communications)
- involve other threatening behaviour
- involve threats to relatives
- involve threats to the property of Council staff

4. Scope

- 4.1 This policy applies to all staff. It also applies to others engaged in the work of the Council including students, volunteers or people employed to carry out work on behalf of the Council
- 4.2 The policy also covers acts or threats of violence or aggression towards its staff when they are off duty when such issues are connected with work.
- 4.3 The policy does not cover actual or potential violence or aggression towards staff from fellow members of staff which will be dealt with in accordance with the Council’s Dignity at Work Policy and/or Disciplinary Policy.

5. Principles

5.1 The implementation and fulfilment of the Council's policy statement concerning violence and aggression towards staff is subject to the following principles:

- Staff have the right to work in a safe environment and to be protected from acts or threats of violence, aggression or abuse related to work activities as far as is reasonably practicable.
- The Council has a duty to take all reasonably practicable steps to ensure it safeguards its staff from such acts or threats.
- Staff who are free from worry or fear of attack or abuse are more likely to perform better in supporting the delivery of good quality services.

6. Roles and Responsibilities

6.1 Chief Executive

Ultimate responsibility for compliance with legal requirements and the Council's Policy and Procedures rests with the Chief Executive. Responsibility for the implementation of the Policy is delegated to the Directors and Heads of Service.

6.2 Directors/Heads of Service

It is the responsibility of Directors and Heads of Service to ensure that:

- information is provided on the Council's Policy and Procedure and support available to staff.
- risk assessments are carried out and safe systems of work are devised and implemented.
- incidents are correctly recorded and, where appropriate, reported and investigated.
- Steps are taken to identify and implement changes required to work arrangements
- appropriate support is offered to members of staff who are subject to violence and aggression at work.

6.3 Co-ordinating Role

The Chief Personnel Officer shall ensure that the Policy and Procedure is reviewed on a regular basis, and that amendments are communicated to the Directors and Heads of Service.

6.4 Employees

Employees must ensure that they:

- comply with safe systems of work
- familiarise themselves and comply with the Policy and Procedures
- attend training made available to them
- report any potential or actual incidents to their appropriate line manager in accordance with the Policy and Procedure

7. Assessment of Risk

- 7.1 The risks of incidents of violence and aggression to staff vary depending on a range of factors including the kind of work undertaken by staff, where they do it and the type of people with whom they come into contact.

A generic risk assessment shall be undertaken in respect of each job function and working environment to identify hazards and to be the basis of action to minimise and manage risks presented..

- 7.2 Risk assessments need to be based on good information about the work in order to cover all foreseeable risks. Separate assessments may be necessary for different activities, including where need be contact with specific individuals..
- 7.3 The process of carrying out a risk assessment will be in accordance with the Council's Risk Assessment Procedure. The main features and considerations relating to risk assessment are contained in the Procedure attached as Appendix 1.
- 7.4 Where significant risks are identified in relation to specific individuals then appropriate use will be made of the MAPPA Procedures and also the Council's internal Difficult Customer record and data base.

8. Training

- 8.1 The Council shall ensure adequate training is provided to help achieve the following:

- Prevention of incidents
- Recognition of the problems associated with violent incidents
- Management of incidents when they occur
- A reduction in the number of incidents;
- A reduction in the seriousness of incidents;

- A reduction in the psychological effects of incidents;
- An improved response to incidents;
- An improvement in staff morale.
- Effective senior management monitoring and review of incidents and responses

8.2 All staff who are considered as being potentially at risk will be trained. There are different levels of training and particular needs will be identified through the generic risk assessment process and the supervision and appraisal process.

9. Recording and Reporting

9.1 The Council will establish and maintain adequate systems for the recording and reporting of instances of violent and aggressive behaviour. Certain instances will be reportable under the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations. Internal reporting, recording and investigation systems need to capture information about a wide range of less serious incidents. This will help managers, Departmental Health and Safety Committees and others monitor the effectiveness of the precautions.

9.2 Staff shall report every incident using the Council's incident reporting system, to enable prompt notification of reportable incidents to the enforcing authority and allow investigation and remedial action to start quickly and to allow the following to be achieved:

- changes to the workplace
- changes to working procedures
- new working procedures
- additional training requirements

9.3 As well as providing the basis for the investigation of individual incidents, such records will also be used to identify trends, assist the review process and inform risk assessments. Information to be collated will include:

- the number of incidents;
- the nature of incidents
- the types of staff involved;
- the environments/locations where incidents occur
- when they occur
- the level of injuries sustained;
- the preventative measures recommended.

10. Investigation of Incidents

- 10.1 Every incident must be followed up and investigated at a level agreed by the person designated by the relevant Chief Officer as appropriate.
- 10.2 Significant incidents of violence require a formal and detailed investigation to establish the causes and any action to prevent a recurrence.
- 10.3 It must be ensured that staff who carry out an internal investigation are competent. Investigations that focus on blame are insufficient and unhelpful. The focus is to be on what went wrong and how to reduce risks in the future.
- 10.4 Investigations are to be carried in accordance with the Procedure attached as Appendix 1.

11. Debriefing and Post Incident Support

- 11.1 Systems shall be in place to ensure that staff are brought together soon after an incident to discuss what happened. The discussion should establish the details of what happened and provide opportunity for emotional support.
- 11.2 In addition the Council shall where need be supplement this discussion by making confidential and sensitive counselling available through appropriately and qualified people.
- 11.3 The Council acknowledges that it has in many instances statutory responsibilities in respect of people who have allegedly perpetrated abuse against Council staff. Systems shall be in place to ensure that where need be risk and/or need assessments in respect of these individuals will be completed, and on the basis of these decisions support as need be offered. The risk assessment will also inform how future Council services will be made available.
- 11.4 Debriefing and post incident support are to be carried in accordance with the Procedure attached as Appendix 1.

12. Monitoring, Review and Audit

- 12.1 Systems shall be in place to monitor the effectiveness of approaches to reducing and minimising the impact of incidents of violence and aggression.
- 12.2 Active monitoring involves checking that systems and processes are working without waiting until something goes wrong.

APPENDIX 1
DRAFT Version 2

- 12.3 Reactive monitoring involves looking at incidents after the event and helps everyone learn from the experience. It relies on an effective system of reporting and recording incidents.
- 12.4 Monitoring is only effective if those involved understand what is expected of them. Directors and Heads of Service shall set out the details of what is to be monitored, by whom and how often.
- 12.5 This Policy and associated Procedure should be continually reviewed, led corporately by the Chief Officer with co-ordinating responsibility. Reviews (reported to the appropriate Portfolio Holder) should include the following:
- compliance with this policy and procedure;
 - achievement of planned objectives;
 - levels of staffing required;
 - training of staff;
 - analysis of records;
 - whether accommodation design is appropriate;
 - lone working arrangements
 - the maintenance and performance of security systems.

Ian McMillan
Andrew Hagon
Sylvia Pinkney
Elaine Kerr
Lynn Finn
David Quainton

September 2005



Guidance on Personal Safety and the Prevention of Violence in the Workplace

September 2005

Date for review: September 2006

Guidance on Personal Safety and the Prevention of Violence in the Workplace

Introduction

This Guidance is to be read in conjunction with the Hartlepool Borough Council Policy in respect of Violence and Aggression Towards Staff. The Guidance provides advice on “best practice” in preventing, and when necessary responding to incidents. The Guidance does not replace but will be consistent with Departmental/Section Procedures and the content of training courses. Individual staff are asked to familiarise themselves with the Policy and Guidance, and with their manager consider their work in the light of it.

Violence at work is not restricted to physical violence, but includes verbal and mental abuse, discrimination, harassment, bullying or ostracism.

Violence at work, or the fear of it can affect anyone. It may be directed at any person, male or female. There is evidence to show that those persons who have extensive, direct contact with members of the public are at greater risk. This risk increases further if you work alone, outside of normal hours, or are dealing with the public on very emotive and sensitive issues (ie child protection or adoption proceedings) .

These risks may arise not only whilst you are at work, but also in travelling to or from work or in activity connected with your work e.g. in other persons premises, travelling or spending time away from home.

It should be remembered that ensuring your personal safety is a shared responsibility between yourself and your employer. Whilst the employer has responsibility for identifying and implementing measures aimed at securing your safety, you too have a responsibility to do likewise and not knowingly act or place yourself in situations which are likely to give rise to risks to your personal safety.

However, your chances of becoming a victim of violence at work are statistically low. To ensure that this continues, it is best not to be complacent and to take sensible precautions and preventative measures to avoid placing yourself unnecessarily at risk.

There are many things you can do to minimise the risks to your personal safety, either as an individual or in collaboration with your line manager.

The best practice approach is to adopt the Health and Safety Executive’s four stage action plan:

1. Find out if you have a problem
2. Decide what action to take
3. Take action
4. Check effectiveness

Stage 1: Is there a problem (real or potential)?

There are many causes of violent behaviour, e.g. frustration, anger, misunderstanding, stress, poor communications, conflict with authority, theft or robbery.

These are usually associated with specific types of work e.g.:

- Reception or customer service
- Service delivery directly to the public
- Education and welfare
- Catering and hospitality
- Services operating late at night
- Cash handling or control of high value goods
- Leisure facilities, particularly where alcohol is consumed
- Security services
- Enforcement
- Investigating complaints
- Inspection
- The provision of social care with children, families and vulnerable adults

The above list may assist in identifying who might be harmed and how. It is true that any member of staff may be subject to violent and/or aggressive behaviour, and all (together with their managers) must be aware of this possibility and take all reasonable and practical steps to reduce the chances of this happening. However the level of risk will vary between jobs. In order to establish whether there is a problem, real or perceived, it is necessary to assess the level of risk and to identify measures to control that risk. To do this it is necessary for managers to seek the views of their staff, particularly those who deal directly with members of the public. This will lead to a *generic risk assessment* for each area of work. This might be achieved through a simple questionnaire, staff meetings, supervisory sessions, appraisal, installing violence and aggression as a standing item at safety committee meetings, or any other appropriate forum.

The Generic Risk Assessment will indicate the level of risk for a particular job or function. This level of risk is to be assessed assuming no actions (i.e. control measures) have been taken to reduce risk to acceptable levels. Your manager will lead this process and use the Corporate Risk Management Proforma to describe the level of risk involved.

Stage 2: Deciding what action to take

Having established that there are individuals or specific employee groups, who are at risk of harm due to aggressive or potentially violent behaviour, because of the nature of their work activities, it is necessary to determine what reasonable and practical actions to take in order to reduce that risk. These actions are known as *control measures*.

Such actions may include:

- Making sure you have considered with your line manager the provision of information, instruction and training required to work safely
- Review / amendment of existing procedures to introduce safer ways of working

- Development of new procedures such as (if not already in place) assessment protocols, buddy systems
- Development of communication protocols, including a reporting regime – do complete the Difficult Customer Report and ensure a decision is made as to whether to place the person on the Council's Difficult Customer list
- When dealing with completely unknown service users and the situation is one where the employee is dealing with emotive and sensitive issues systems should be in place to gather as much information as possible to ensure that a specific and individualised risk assessment can be made to inform how to respond
- Provision/modification of physical controls e.g.:
 - Personal attack alarms/ panic buttons/ telephones/ mobile telephones
 - CCTV
 - Improved lighting / security locks / glazing
 - Safe refuges
 - Improved design of reception areas

It is best practice and indeed necessary for staff at risk to be involved in the decision making process leading to control measures being introduced and reviewed. This is to ensure that their views and practical concerns are incorporated into the resultant control methodology. In order to assist in the determination of suitable actions, listed below are a number of examples of typical control strategies – although the list is not intended to be complete.

The individual:

- Be confident when dealing with people
- Be communicative and helpful when dealing with others, try to empathise with their position / situation
- Avoid confrontation, try to defuse situations, placate not provoke
- Do not meet aggression with aggression
- Compromise, always leave an aggressor with a way out of a situation
- Give people their own space
- If you deal directly with members of the public, or deal with issues which may give rise to foreseeable difficulties with others, then ensure any training needs in how to handle these difficult situations have been identified in your supervision and appraisal
- Always report any acts of aggression, violence or unacceptable behaviour to your line-manager, promptly

At work:

- When visiting with someone not known to you check the Department's Difficult Customer List
- Avoid unnecessary lone working, especially late at night
- Ensure that you have access to a telephone or other means of communication
- A system of ensuring your manager and colleagues know where you are visiting should be in place

- Ensure that your colleagues and/or your family know where you are if working late, alone or off-site. If you are working late, park your car close to where you are working, (move it if you have to), preferably in a well lit area, or arrange to be collected, or if walking / using public transport, use well lit routes.
- If you are undertaking a visit out of hours or to a person where there are concerns (even if you are visiting in pairs) your manager must have in place an appropriate and clearly defined method of checking that staff have returned from a potentially difficult visit both during the day or out of hours
- Local offices should have a system to check interview rooms at the end of each working day
- Seek help from Security if you are concerned for your safety when leaving a building. Telephone 5350 (internal) or 01429 869424
- Do not make appointments with people you do not know or trust outside of normal working hours or in unfamiliar surroundings, unless accompanied
- Do not divulge personal details to clients, e.g. home address telephone number or personal e-mail address
- When dealing with potentially difficult situations, make others aware, choose your meeting place with care so you can summon assistance if necessary or provides you with a means of escape or a safe refuge
- Make simple checks that people are who they say they are, when meeting people off-site for the first time, and/or do so whilst accompanied
- Always report any acts of aggression, violence or unacceptable behaviour to your line-manager, promptly

When travelling:

- Know where you are going and how to get there before embarking upon a journey. The internet can be used to assist with this. Ask for travel details / directions
- Consider how best to travel, time of day, route, seek advice from those who have journeyed there before or from those you are visiting
- Use reputable taxi companies and ensure you have precise details of your destination readily available. Lone female passengers can request a female driver should they wish to.
- Ensure that you inform someone of any changes in plans or itinerary and establish a regular communication link where necessary
- Try to avoid overtly carrying valuable, easily stolen items when travelling on foot and keep such items out of view if travelling by car
- Carry a personal alarm – these will be provided by the Council if identified as required control measure
- Pre-book overnight accommodation
- Be careful about disclosing personal details to other people or in front of people you do not know
- Always report any acts of aggression, violence or unacceptable behaviour to your line-manager, promptly. Where such acts are considered illegal, then they should be reported to the police

- When travelling do not have visible means of identifying that you are a Council employee unless your job requires this. (This of course does not mean you do not offer identification to the person you are visiting!)

Handling cash:

- Maintain the smallest cash total reasonably practical on the premises. Identify the safest practical means of securing cash on the premises. Locate tills and other cash sources out of reach or direct line of sight, where practical.
- Use till covers/guards where practical
- Do not openly carry cash by hand, in public
- Establish a cash collection regime, which has a varying collection pattern
- Inform, instruct and train staff who routinely handle cash in how to manage the cash flow throughout the day and what to do in the event of attempted robbery/theft

Lone working:

Lone workers are those who work by themselves with or without close supervision. They are found in a range of situations:

- People in fixed establishments
- Mobile workers working away from their fixed base

Lone workers should not be more at risk than other employees, and this may require extra risk control measures. This Guidance includes precautions covering the whole range of work and not those designed to control risk of violence and aggression. This is because the two can often be inextricably bound together. The guidance given here relies heavily on Guidance from the Health and Safety Executive “*Working Alone in Safety: Controlling the risks of solitary work*”. (INDG73) This is available via the internet at <http://www.hse.gov.uk/pubns/indg73.pdf>

It is the Council’s duty to assess the risk to lone workers and to take steps to avoid and control risk when necessary. The employee should be given opportunity to engage in the risk assessments and reviews. The risk assessment consider questions such as those indicated in Appendix 2 to this document

Re-visiting the Risk Assessment

Once control measures for particular jobs and/or functions have been completed the original risk assessment has to be re-visited by Managers (including discussion with those staff at risk) and a view made as to the level of risk present following the introduction of control measures. If this is not an acceptable level the control measures have to be re-considered and further measures introduced.

Stage 3: Take action

Having determined what actions (control measures) are to be taken, appropriate plans need to be developed to ensure their implementation. These Action Plans are the same format as any other management plan, including what needs to be done, by whom, by when and what the resource implications are. The Action Plans will be at a level determined at Departmental level. This could be for the whole Department, or for a Section or a Team.

All employees have a role to play in ensuring that these plans become a practical reality, by co-operating with their manager in the determination of the plans and in ensuring that the developed controls are understood and implemented. Also all employees are expected to undertake any identified training, which is provided by the Council to ensure their own safety and that of others.

Where new or modified procedures and instructions are considered necessary, they should be recorded in a retrievable form and steps taken to ensure that those persons affected are informed and trained where appropriate.

Action Plans should be considered through Departmental Health and Safety arrangements, including Health and Safety Committees.

Stage 4: Check effectiveness

When new policies, procedures, methods of working are introduced, it is important that they are monitored to establish their effectiveness and/or to identify any further actions necessary and/or to identify any unforeseen difficulties arising from their implementation.

All employees have an important role to play in this process, by providing information, comment and observation to their managers on the effectiveness and efficiency of new working practices and alerting them to any difficulties as and when they arise. It is good practice to set a review date for all new/revised working practices.

Reporting of incidents and suspicions

The culture in the department should be one in which all incidents, (including suspicious activity) are routinely reported, to enable appropriate action to be taken to deal with the act, prevent similar future acts and enable accurate records to be created and monitored. Historically, the reporting of acts of aggression and violence have been under-reported, for a variety of reasons, including a perception that such behaviour is “part of the job”. This is not so! All employees should be encouraged to report all such incidents promptly and make everyone aware that this is what is expected.

Where acts of non-physical violence are experienced, (e.g. verbal or mental abuse, discrimination, harassment bullying or ostracism), which you believe to be contrary to the ‘Dignity’ section of the Employee Support Policy, they should seek advice from their Manager, the Senior HR Officer (Employee Support) and/or a Trade Union

Representative, as appropriate, who will be able to provide advice on the “Dignity Policy”. This policy is available via the intranet at:
Staff Info/Personnel Policies & Procedures/Employee Support Policy

Where acts are criminal in nature or you have any suspicions of potential criminal activity, they should be reported to Security staff telephone. 5350 (internal); 01429 869424 (external) promptly, either by the observer, the victim or their manager. Security will then contact the Police or provide an initial response, as determined by the protocols agreed with the Police.

In these circumstances, where the act or incident poses a direct threat or physical harm to the individual(s) concerned, then the Council Accident and Incident Reporting system should be enacted. This enables acts of violence or aggression to be reported to the Employee Wellbeing Team, which reports such incidents to the HSE. - a legal obligation under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

Post Incident Responses: Guidance on how to respond when a member of staff has been subjected to an act of violence and/or aggression

Immediate Response

The first action should be to make any persons involved safe. This will include providing or obtaining medical attention if necessary. Police assistance should be sought if necessary.

As soon as possible:

- Note the details of any assailant and any witnesses
- Report the event to managers and where applicable health and safety officer and/or staff welfare officer
- Record the event as required by your procedures

Managers should:

- Provide debriefing sessions (for both workers and separately the alleged perpetrator)
- Determine actions to be taken in relation to the perpetrator
- Ensure colleagues and other agencies are aware if necessary
- Provide emotional support to victims
- Investigate the incident

Debriefing

Managers should be involved in the factual debriefing to emphasise that incidents of violence are taken seriously, and that there is a willingness to learn to prevent future occurrences. It is fundamental that these debriefings do not attach any “blame” to the worker.

Staff can find it very helpful if they are brought together soon after a violent incident, to discuss what happened. This process of debriefing may have two functions: to establish the details of what happened and to provide emotional help. People may be traumatised by a violent incident, and it is important that any debriefing does not focus solely on how they performed, but addresses effects on them as individuals. Separating “technical” and “emotional” debriefings may help ensure that people can contribute to the factual investigation of an incident whilst receiving emotional support. Conduct of debriefings is a skilled function that managers should be trained to undertake.

Emotional support for victims

Emotional debriefing aims to recognise potential stress, acknowledge it as a normal response and provide a supportive and structured setting to allow people to cope more effectively. Such debriefing can include helpful informal support from colleagues and more formal systems of debriefing. This can include enabling the victim to talk through their experience and to express their emotions, concerns and needs. How this is best achieved depends upon the relationship with the individual and their reaction to the incident. In some situations the use of a trained counsellor may be the most appropriate means of support. In such cases, advice can be obtained through the Employee Support Officer in HR Employee Wellbeing Team Tel 01429 523046.

Alleged Perpetrator

There are a number of issues to be considered in respect of responding to the alleged or confirmed perpetrator – herein after referred to as the perpetrator.

First there is the question of immediate safety of the worker(s) and others who may be in the vicinity – including the perpetrator. If there is a continued risk of violence and workers do not feel able to contain it the Police should be called to keep the peace.

In the case of settings where the person receives a care service or is in *loco parentis* (school, residential home, day care centre) a decision has to be made by managers as to whether the perpetrator can remain on the premises. An alternative placement may have to be found. It is important in planning and providing alternatives that avoiding heightening risk of a repeat violent incident somewhere else be considered, and also that due process be followed whenever possible to avoid contravening the perpetrator’s rights.

In any case the perpetrator may well have rights to continuing service from the Council – planning to provide this in a controlled and safe manner is a key priority for managers.

The perpetrator may also be greatly upset by the violent incident, worried about their own loss of control or frightened about the consequences for them. The need for post incident counselling support for the perpetrator should be considered and if required made available, preferably by some independent person.

In some instances the Council will have statutory duties to care for the perpetrator, and in some circumstances staff may be very concerned that the person who has perpetrated the violent incident can not be held “responsible “ for their violent behaviour. They may have a learning disability, be suffering from dementia or mental illness. Managers have to determine with the victim whether the nature of the violent or abusive act, and the level of personal responsibility of the perpetrator warrants criminal prosecution. However it should always be the case that workers have the personal right to pursue prosecution and the Council should support staff in this.

Investigation

Significant incidents need investigation to establish the causes and any action to prevent a recurrence. Reports should not "gather dust". They should include such things as employees' views on whether the control systems helped or hindered them.

After a serious incident, a senior manager should remove the case file of the service user to a safe. Photocopies of the whole file should be provided for the investigation and for ongoing care provision.

Managers need to ensure that the staff carrying out an internal investigation are competent, and there needs to be a policy which defines what is to be investigated, who does the investigation and who the investigation report goes to for action. Investigations which focus on who was to blame are generally unhelpful; it is much better to concentrate on what went wrong and how to reduce risks in the future. In some cases service users and their families could be asked for their views of the outcome of particular incidents

Insurance and Compensation

The Home Office leaflet Victims of crime gives useful advice for anyone who suffers an injury, loss or damage from a crime, including how to apply for compensation. Further help is available from Employee Support Officer in HR Employee Wellbeing Team Tel 01429 523046.

Other Support

The Council will give consideration to a range of other supportive action, (on a case by case basis) such as temporary or permanent redeployment of the victim; a period of convalescence; protection of privacy when work has spilled over into private life; issues of exhaustive sick pay; etc

Consideration should be given to treating the consequences of an assault as an industrial injury, which confers potential benefits to workers under the relevant legislation.

The Government's initiative on Revitalisation of Health and Safety, in particular emphasises:

- "The Government will encourage better access to occupational health support, and promote coverage of occupational health in local Health Improvement Programmes and Primary Care Group strategies in England, as recommended by the Health and Safety Commission's Occupational Health Advisory Committee"
- "As part of the next stage for the New Deal for Disabled People, the Government is considering how best to strengthen retention and rehabilitation services for people in work who become disabled or have persistent sickness"

Legal assistance

In serious cases, where an employee has suffered physical or mental harm as a result of a violent incident, consideration would need to be given to the provision of legal assistance in pursuit of a criminal prosecution, a private prosecution and/or a civil claim against the perpetrator. Further information and advice on this issue can be obtained directly from the Chief Solicitor Tel. 01429 523003.

Other assistance - employees may wish to consider seeking the assistance of their Trade Union or Professional Association.

Advice and assistance in determining the extent to which support can be provided is available via the Employee Support Officer in HR Employee Wellbeing Team Tel 01429 523046

Further information

Violence at Work – a guide for employers (available from HSE Books or downloadable directly from HSE website)

www.hse.gov.uk/pubns/indg69.pdf

Personal Safety at Work – guidance for all employees (available from the Suzy Lamplugh Trust) www.suzylamplugh.org.uk

Personal Safety for Schools (available from the Suzy Lamplugh Trust) www.suzylamplugh.org.uk

Personal Safety for Social Workers (available from the Suzy Lamplugh Trust) www.suzylamplugh.org.uk

Personal Safety at Work for You (available via the Suzy Lamplugh Trust or from Fast Guides) www.fastguides.co.uk

First Steps to Personal Safety at Work Video (available from the Suzy Lamplugh Trust)
www.suzylamplugh.org.uk

APPENDIX

Specific Measures to Reduce Risk of Violence and Aggression

Interviews

General guidance

Most interviews are conducted without incident but there is potential for emotive behaviour and aggression.

Interviewees may feel anxious, uneasy, nervous, unfairly treated, not getting rightful entitlement, distressed, unhappy, frustrated, defensive, angry, powerless, vulnerable, threatened, etc.

The interviewee may view the event in various ways, e.g. as:

- an important step towards achieving what he/she wants or 'deserves'; or
- confirmation that you the interviewer/the organisation is against him/her; or
- reinforcement that he/she is worthless or a failure.

The interviewer is likely to be perceived by the interviewee as part of the process, and

- able to be relied on to satisfy his/her needs; or
- someone to impress, persuade to his/her way of thinking; or
- a 'block' to getting what he/she wants.

Setting up interview arrangements/facilities

Avoid unnecessary after-hours meetings if you are on your own.

Select an interview room offering:

- adequate means of escape for interviewer(s); and
- an adequate vision panel to enable other staff to see in if necessary.

Give the interviewee information on why, what and with whom the interview will be held. This indicates fair and open treatment and the opportunity for adequate preparation, and can reduce feelings of uncertainty.

Prior to the interview

Position chairs

- opposite each other at an angle to allow natural eye contact to be maintained without 'head-on' confrontation; and
- a reasonable distance apart (far enough apart not to invade each other's personal space/threaten, nor restrict the 'escape route' for yourself; yet close enough to create/maintain rapport; and

- place interviewer(s) chairs closest to the door or escape route and alarm (if available) e.g. leave panel members/files on their chosen chairs and indicate the other chair to the interviewee.

Alert colleagues to

- where you will be, with whom and for approximately how long; and
- any support needed, e.g. cup of tea, colleague to be available to assist; and
- any particular concern about the interviewee or the situation;

Ensure you will not be disturbed. Interruptions disrupt/impede the flow of the interview, and can add to the interviewee's feeling of being devalued or unimportant.

Prepare yourself for the interview

- remind yourself of the background facts and aims of the interview;
- have appropriate files and papers to hand.

Preparation helps interviewers feel confident and less likely to be intimidated, interviewees to feel respected and show respect in return.

Do not keep the interviewee waiting. This will minimise build-up of tensions.

During the interview

Always adhere to good interview practice, regardless of the issues involved. For example:

- put the interviewee at ease with a friendly welcome, introductions to other interviewers and allow time to the interviewee to settle comfortably and adjust to the (possibly unfamiliar) surroundings;
- "Set the scene" by reaffirming the reason for the interview and outline the format. This will minimise interviewee's uncertainty and anxiety and indicates that there will be opportunity to contribute. It will also establish you as being "in control" and reduce potential for the interviewee to over-reach 'boundaries';
- Remember that up to 90% of communication between individuals is non-verbal. Avoid an aggressive stance. A wagging finger, hands on hips, crossed arms or a raised arm will challenge and confront;
- Listen to the interviewee - even if you have heard it all before. Show you are paying attention in ways which do not interrupt the interviewee's 'flow', e.g. by nodding, saying 'mmm' or 'I see'. By listening, you show respect for the interviewee. This can be vital for his/her self-esteem, and reduce risk of aggression especially if already feeling vulnerable or under-valued;
- Listening does not mean you necessarily agree with what the interviewee says or that you can/will do anything about it (other than offer a response which shows you have heard and acknowledge the viewpoint/situation and how he/she feels about it). For example "I can see the difficulty that causes you, but unfortunately we are not able to..." or "I appreciate that you feel angry about the situation, but the decision has been made and we cannot...". By using "we", you are acknowledging his/her feelings and depersonalising the action by i.e. the organisation (thereby deflecting any immediate and direct personal attack and diffusing the situation sufficiently to give a full explanation).

Periodically summarise what has been said and feed it back to interviewee. This creates a "moving-on" point when an issue has been explored and exhausted, also to clarify what has been said and agreed. Summarising and reflection is particularly important when people are emotional, distressed or anxious. At such times they may fail to make themselves clearly understood nor accurately interpret what is said. Hence there is potential for misunderstanding or misinterpretation on either side to escalate into conflict/aggression.

It is very important to

- Avoid making promises you cannot keep. It may keep the issue temporarily at bay, but will only defer confrontation and make it worse for you and your colleagues when you cannot deliver;
- make sure the interviewee clearly hears the options you are able to offer. If the interviewee is upset or angry he/she may not hear or understand what you are saying. Repeat and summarise to give the interviewee a chance to absorb it;
- when offering a compromise or alternatives, ensure that the options are realistic - fobbing him/her off with unrealistic ones will only increase future risk.

Managing an Aggressive Situation

Contain aggression

It is important, even if you are being provoked, not to respond in kind.

Stay calm, speak gently slowly and clearly. Breathe slowly to control your own tension.

Try to defuse the situation by talking things through as reasonable adults, but remember your first duty is to yourself. For example, suggest going to see a colleague.

Use appropriate eye-contact to assure the interviewee that you are paying attention. Do not hold his/her unblinking, staring gaze. Break your eye-contact as you normally would every few seconds and remember to blink.

Listen actively and reflectively. Ensure the individual knows you are listening and understand. If the individual is upset or angry, hear him/her out if you can. Remember that feelings may have been bottled up for years, until they all come tumbling out - "And another thing..."

Avoid body language that may be misinterpreted, e.g. looking down at the aggressor; hands on hips; arms folded; raised arm; any physical contact. Keep your distance.

Avoid personalising the issue, e.g. do not say "I shall have to..."; it is the department or organisation that is doing these - make that clear.

Compromise: offer a way out of the situation, but avoid making promises you can't keep.

Do not touch the individual - unless you have to in order to defend yourself from physical attack - in which case it is acceptable to use minimum force necessary to protect yourself.

Recognise Danger Signals/Cues that Risk is Escalating

Verbal Cues

Always take threats seriously and never underestimate them. Acknowledge you have heard the threat and do not treat it lightly. At this point, it is important to distance yourself from the situation and think only of your own personal safety.

Use of racist, sexist abuse, foul and abusive language can signal that you are being "made ready" for an attack. Such language should be challenged and it made clear that such language is inappropriate and that continued use of such language will result in the interview being terminated.

Non-verbal cues

There are many non-verbal cues of aggressive behaviour and the following list, although not exhaustive, gives examples:

Agitation, restlessness, making frequent movement, threatening gestures, provocative behaviour, holding the gaze - eyeball to eyeball confrontation, invasion of "personal space" - coming too close, banging the table/other furniture, clenched fists, towering posture, obvious facial muscle tension, poking fingers or pushing, unusual or inconsistent behaviour, e.g. the noisy individual who becomes quiet and withdrawn.

Curtailling aggression

Take action to protect yourself and others from repeated aggressive behaviour. Report the incident to your supervisor - ensure your complaint is given a fair hearing and is taken seriously.

If you can't defuse or deflect the situation, get away

Sometimes it is not possible to contain and defuse the threat of violence. Trust your instincts and do not underestimate the situation. Things can get out of control very quickly. **IF IN DOUBT, GET OUT.**

Avoid 'standing your ground' when an aggressor moves in really close to you, invading your personal space. It is generally safer to move back, creating space - space represents safety.

Neither the Department nor the Authority expect you to remain in a situation in which you feel unacceptably stressed or at risk. Removing yourself from such a situation is a positive and sensible action.

Once control is lost, and our anxiety levels become unreasonably high, our perceptual and judgmental abilities are impaired, and we become more at risk.

Be prepared

While talking, assess possible ways of escaping if the situation worsens.

Try to prevent the aggressor blocking any possible escape route.

Never turn your back. If you are trying to get away, move gradually backwards.

Appointments Outside the Workplace / Home Visits

Working outside the relative safety of the workplace introduces additional risks. For example travel (see the section ‘when travelling’ on page 4), an unfamiliar venue, etc. The reason for the Home Visit may be 'sensitive' or 'extreme' circumstances, e.g. absence, long-term sickness, welfare, etc., so the interviewee may be feeling vulnerable or aggressive.

(A general point here – I think it needs recognising that for some staff within the social care element of Children’s Services, appointments in a client’s home are part of the “daily norm”. This often involves carrying out initial assessments on clients who are not known to the Department in very sensitive circumstances. Can we acknowledge this? The examples cited refer to home visits as being exceptional whereas for many staff they are an everyday occurrence.)

An interview taking place on the interviewee’s own territory can be more difficult to control, e.g. who will be present, ensuring freedom of movement to get away, and ensuring a discreet means of calling help, if necessary.

Where possible home visits should be avoided. Parents should preferably be invited to meet with staff at a local venue, e.g. School, Youth Centre, Civic Centre or Education Development Centre.

Where home visits cannot be avoided, especially late in the evening, a suitable assessment of the risk involved must be undertaken and adequate controls implemented, including ensuring adequate means of communication.

Home visits should be by appointment. Explain to the interviewee who will be coming, when and for what purpose. Calling unannounced can raise anxiety, increase tensions or be inconvenient - all of which can increase potential for aggression.

Do not make appointments with people you do not know or trust outside of normal hours or in unfamiliar surroundings, unless accompanied.

Always gain approval for the visit from your Line Manager and discuss the situation re:

- choosing meeting place with care so you have a means of escape, safe refuge and can summon assistance if necessary;

- the personal circumstances and/or behaviour of interviewee; and
- the characteristics (if known) of the environment in which visits take place; and
- the nature, purpose and time of the visit.

Make sure appropriate people know your movements:

- where you are going, when you expect to return - and let someone know if plans change
- ensure they know the action to take if you do not report back. The nominated person should be aware of the local protocol for overdue members of staff, which may include:
 - contacting your mobile phone,
 - a check of the visited home address by telephone
 - contacting police

It is not advisable to go directly from home to a meeting. If such circumstances are unavoidable, you should have discussed this with your Line Manager prior to your visit.

If you intend to go straight home from a meeting, you should discuss this with your Line Manager prior to visit.

Escorting Service Users

Before taking a service user in your car, consider whether a risk assessment needs to be undertaken. If risk can not be acceptably controlled, do not offer to transport the client. Seek advice from your Line Manager.

Caution is needed before offering transport to clients with a known history of violence or aggression, or making accusations against professionals. Always seek advice from your Line Manager.

It is advisable but not compulsory to carry a mobile phone at all times.

Staff should be aware of their own team's procedures on logging in and out before and after each escort.

All staff working with children or vulnerable adults on a one-to-one basis must have undertaken an Enhanced Criminal Records Bureau check.

Staff must not transport children or vulnerable adults in their own motor vehicle unless a colleague is present. In the case of external transport providers the drivers must have undertaken an Enhanced Criminal Records Bureau check. (This would have implications for those (ex-social services) staff within Children's Services who work with children everyday. Staffing levels often do not permit a colleague to be present)

For further advice, contact the Council Human Resources Department, Telephone 01429 523546.

Caution is needed before offering transport to clients with a known history of aggression or making accusations against professionals. Always seek further information via your Line Manager. If significant risk is identified, a risk assessment must be undertaken and suitable precautions implemented.

Reception Duties

Receiving visitors

Visitors may be feeling aggressive before entering the building and may vent their feelings or frustrations on the first person they meet.

Reception staff should:

- be polite and friendly - a welcoming smile can have a beneficial influence;
- keep a list of expected visitors (staff should advise Reception when visitors are expected);
- wherever possible avoid keeping visitors waiting. Let visitors know if a wait is unavoidable, with an estimation of how long they may have to wait. Keep waiting visitors informed of changed timescales etc., to reduce feelings of stress.

Telephone calls

If you receive a telephone call which consists of verbal abuse or aggression directed towards you:

- tell the caller that they are being abusive or aggressive and that you will discontinue the call if they persist;
- if they continue to be abusive, tell them you are replacing the receiver and then do it;
- inform your Line Manager.

Lone Working

Nature of Risk Points to Consider

Type of Work

(Can the risks of the job be adequately controlled by one person?)

- Does the workplace itself present special risks to the worker? (e.g. confined spaces, live electrical working).
- Is there safe access and egress for one person (ladders, trestles etc)?
- Can temporary access equipment be safely handled by one person?
- Can all the plant, substances and goods involved in the work be safely handled by one person?
- Manual handling – can items be safely handled by one person?
- Equipment – can machinery or equipment be safely operated, or is more than one person needed?
- Is there a risk of violence?
- Are women more at risk than men if they work alone? Or *vice versa*
- Are young workers especially at risk?

Medical Aspects

(Is the person medically fit and suitable to work alone)?

- Does the worker have any medical condition that may make them unsuitable for lone working? (e.g. diabetes, epilepsy, heart condition).
- Are there any foreseeable emergencies that may impose additional or mental burdens on the person?
- Consider routine work that may impose additional physical or mental burdens on a lone worker.

Training & Competency

(competency is the combination of training, knowledge and experience, and the ability to recognise when additional or specialist advice is required)

- What training is required to ensure competency in safety issues?
- Training is more important when there is limited supervision and guidance in situations of uncertainty.
- Training may be critical in order that panic is avoided in unusual situations (identify reasonably foreseeable situations).
- Set limits as to what may and may not be done while lone working
- How is violence or aggression handled?
- Is the employee competent or capable of dealing with circumstances which are new, unusual, or beyond the scope of training? (e.g. when to stop working and seek special or supervisory advice).

Supervision

How is the lone worker to be supervised?

- A new employee may require a higher level of supervision
- Do supervisors periodically visit and observe lone workers?
- Is there regular contact between the lone worker and a supervisor? (e.g. telephone, VHF radio.).

- Are automatic warning devices required which operate if specific signals are not received from the lone worker? (e.g. system for security staff.)
- Consider manual devices designed to raise an alarm in the event of emergency.
- Consider automatic devices designed to raise an alarm in the absence of activity.
- Consider automatic devices designed to raise an alarm if machinery, processes or plant reach a critical condition.
- Consider checks to ensure that a lone worker has returned to their base or home after completion of a task.

Emergencies

Have foreseeable emergency situations been identified?

- Have emergency procedures been devised and tested and lone workers trained in them?
- Are there adequate arrangements for first aid and access to first aid facilities?
- Do lone workers need to be trained in first aid?
- Is information about emergency arrangements, dangers and hazards given to lone workers who may be visiting or carrying

Specific Instances :-

Home visits:

If for any reason there are concerns regarding safety during a particular visit then staff will:-

- Not undertake their first visit alone.
- Consider the feasibility of alternative ways of making contact, i.e. in a Council or other public service building
- Not make visits after hours especially in hours of darkness.
- Not make such visits the last visit of the day.
- If the visit is essential staff should not go alone, but agree a safe plan of action with their colleague/line manager.

Travelling:

Employees will:-

- Know their destination prior to travelling.
- Inform a colleague/line manager of their exact movements and when they expect to return.
- Keep all valuables locked in the boot of the car.
- Make sure that the car windows and doors are kept locked, especially at night or in a stop/go traffic situation.
- After dark always park in a well lit place, as close to your destination as possible.
- Request security personnel, if available, to escort to car parks, etc.
- Never leave the vehicle with the keys in or leave it unlocked.

**FINANCE AND PERFORMANCE MANAGEMENT
(HEALTH AND SAFETY CONSULTATIVE GROUP)
PORTFOLIO**

**Report to Portfolio Holder
28th November 2005**



Report of: Chief Personnel Services Officer

Subject: DRAFT MANAGING STRESS AT WORK
POLICY

SUMMARY

1. PURPOSE OF REPORT

To consider any comments from the trade unions and to endorse the draft Managing Stress at Work policy (amended as necessary) and associated implementation arrangements.

2. SUMMARY OF CONTENTS

The report provides details of the latest draft of the Managing Stress at Work policy

3. RELEVANCE TO PORTFOLIO MEMBER

Corporate issues.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

Portfolio Holder only.

6. DECISION(S) REQUIRED

To endorse the draft Managing Stress at Work Policy (amended as needed as a consequence of any final comments from the trade unions) and associated implementation arrangements.

Report of: Chief Personnel Services Officer

Subject: DRAFT MANAGING STRESS AT WORK
POLICY

1. PURPOSE OF REPORT

- 1.1 To consider any further comments from the trade unions and to endorse the draft Managing Stress at Work policy (amended as necessary) and associated implementation arrangements.

2. BACKGROUND

- 2.1 Stress is a leading cause of sickness absence in the Council and in the UK generally. Any measures to address stress at work will have a positive impact on the general health of the workforce and on sickness levels within the Council.
- 2.2 In November 2004, the HSE launched new Management Standards for preventing work-related stress. During 2004 the National Employers published their guide entitled "Addressing Stress at Work". The law surrounding employer and employee obligations has been clarified following the 'landmark' Court of appeal decision in Sutherland and Hatton (2002) and other recent cases.
- 2.3 The Council introduced a Stress Policy as part of the Employee Support Policy soon after Local Government Reorganisation in 1996 which made provision for support to be provided to employees suffering from stress. More recently, a stress health check was carried out and the provisional results reported to the Performance Management Portfolio meeting held on 21 February 2005.

3. DRAFT MANAGING STRESS AT WORK POLICY

- 3.1 The working draft of the Managing Stress at Work Policy (Appendix 1) has been the subject of informal consultation with the trade unions via the Single Table Group. During the course of the policy being developed, Corporate Management Team (CMT), members of the Managing Attendance Review Team (MART) and the Council's insurers have also been consulted and comments received have been incorporated as appropriate.
- 3.2 The draft policy has been developed in light of the HSE Management Standards, the National Employers guide entitled "Addressing Stress at Work" and case law.

3.3 The working draft has been updated since your meeting on 5 September 2005 to reflect the following

- a) comments made at your health and safety consultative meeting held on 5 September 2005
- b) comments made by the Chief Solicitor
- c) comments made by North Tees and Hartlepool NHS Trust Occupational Health Department (these were briefly reported at the 5 September meeting).
- d) comments made by the trade unions at recent single table meetings
- e) incorporation of the Stress Health check and implementation arrangements (these have not been the subject of consultation with the trade unions)

The changes made since your last meeting are highlighted and underlined

3.4 Informal consultation with the Single Table Group has been completed and agreement, in principle, has been reached, subject to 3.3e above and any final comments, which might be made verbally by the trade unions. During the course of the policy being developed, Corporate Management Team (CMT), members of the Managing Attendance Review Team (MART) and the Council's insurers have been consulted and comments received have been incorporated as appropriate.

4. IMPLEMENTATION ARRANGEMENTS

4.1 The policy, if agreed, will be effective from 1st December 2005. In order to assess the Council's corporate state of 'readiness', in terms of having all the processes and procedures etc in place immediately to meet the policy requirements a corporate health check (Appendix B of Appendix 1) has been undertaken (assuming the policy has been adopted as currently drafted) and a series of corporate actions identified as follows

- Develop and implement an Organisational Development Strategy
- Continue to implement Leadership and Management Development Programme
- Develop and implement Communication Strategy
- Review and implement revised Appraisal Scheme
- Develop and implement revised Violence and Aggression Policy
- Develop and implement Corporate guidance on involving employees in shift design
- Develop and implement Rewards and Recognition Policy
- Develop and implement revised arrangements for dealing with bullying and harassment
- Develop and implement revised Induction arrangements

Some of this work is currently ongoing with the remainder due to be built into future service planning arrangements

- 4.2 It is recognised that departments are also unlikely to be able to comply immediately with all aspects of the policy, with the level of compliance varying between departments. Departmental health checks are due to be undertaken once the policy has been endorsed with a view to departmental action plans being developed. It is envisaged that the following departmental timetable will apply

- initial departmental health checks will be undertaken by June 2006
- any further investigation (if needed - possibly using focus groups) will be undertaken by September 2006
- departmental action plans will be developed by October 2006.

5. RECOMMENDATION

- 5.1 To endorse the draft Managing Stress at Work Policy (amended as needed as a consequence of any final comments from the trade unions) and associated implementation arrangements.

HARTLEPOOL BOROUGH COUNCIL



DRAFT MANAGING STRESS AT WORK POLICY

HUMAN RESOURCES DIVISION

DRAFT MANAGING STRESS AT WORK POLICY

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1. Scope

- 1.1 This policy and associated schemes applies to all employees except employees in schools with delegated budgets, which have their own policy and schemes

2. Purpose of Policy

- 2.1 The purpose of the policy is to set out how Hartlepool Borough Council will meet its obligations for managing stress at work, including compliance with health and safety legislation and to adopt best practice in accordance with HSE and other appropriate guidance.
- 2.2 The Corporate Health and Safety Policy, Attendance Management Policy and Attendance Management Procedure are supported by this policy since they provide details of the measures the Council will take to prevent stress at work and respond to it when it occurs

3. Context

- 3.1 This scheme supports initiative number **WS to insert** of the Council's Draft Human Resources Strategy

4. Implementation

- 4.1 This policy will be effective from ???
- 4.2 In order to assess the Council's corporate state of 'readiness', in terms of having all the processes and procedures etc in place immediately to meet the policy requirements a corporate health check has been undertaken (assuming the policy has been adopted as currently drafted) and a series of corporate actions identified (Appendix B). It is recognised that departments are unlikely to be able to comply immediately with all aspects of the policy, with the level of compliance varying between departments. Departmental health checks are due to be undertaken once the policy has been endorsed with a view to departmental action plans being developed.
- 4.3 It is envisaged that the following departmental timetable will apply
 - initial departmental health checks will be undertaken by June 2006
 - any further investigation (if needed - possibly using focus groups) will be undertaken by September 2006
 - departmental action plans will be developed by October 2006.

5 Introduction

5.1 Hartlepool Borough Council is responsible for the health, safety and welfare of its employees and others (e.g. members, agency workers, partners etc) at work and recognises that their well-being is important to the Council's performance and service delivery. The Council therefore, aims to take positive measures to manage stress effectively and to create an environment where stress is managed out of the organisation as far as is reasonably practicable but that where it becomes an issue for individual employees they are encouraged to seek relief and support.

5.2 Primarily this policy is concerned with stress arising from the working environment, but is also recognises that an employee's personal life may also lead to stress and sometimes an approach has to be taken of helping an employee whatever the cause of their stress, particularly if this has an impact on an employee's ability to work effectively.

5.3 The Council will deliver this policy through:

- promoting the health, safety and well-being of all employees, including the use of risk assessments to identify and manage hazards impacting on health in the workplace
- monitoring absence levels to identify particular sources of stress as a means of taking action to prevent or reduce such sources in the future
- implementing approaches and support to prevent and manage Work Related Stress (WRS)

5.4 Further guidance on the definition of stress and implementing this policy is provided at Appendix A

6. Legal Requirements

6.1 The Health and Safety at Work Act etc. 1974, places a duty of care on Hartlepool Borough Council to ensure the health, safety and welfare of all employees. In addition the Management of Health and Safety at Work Regulations 1999 require employers to carry out risk assessments with regards to stress. [There is also a recognised common law duty upon an employer to take precautions against a foreseen or foreseeable and legally relevant danger to health. This duty extends to the danger of psychological injury arising from stress suffered at work.](#)

7. Principles

7.1 The following principles apply to the Council's approach to dealing with stress:

- the management of stress will be dealt with in a way that is non-discriminatory and in accordance with the Council's Equality and Diversity in Employment policy
- employees will be treated consistently and fairly across the Council
- the Council will aim to promote a positive and preventative rather than punitive approach
- the Council will be sensitive and supportive, as far as is reasonably practicable, to those suffering the effects of stress
- the management of stress, including monitoring of stress-related information will be conducted with respect for individual confidentiality and in accordance with the requirements of the Data Protection and Access to Medical Reports Acts
- open communication will be encouraged and promoted
- the Council's stress management approach will be monitored and reviewed to ensure that it continues to meet the Council's aims and complies with these principles. Employees and trade union representatives will be encouraged to be involved in this process.
- Symptoms of stress are preventable if sources of pressure at work are identified and appropriate action taken to reduce or control them
- The risk of stress occurring may be reduced by employees adopting healthy lifestyles and adopting positive coping strategies, and seeking assistance and support at appropriate times.

8. Responsibilities

8.1 Senior managers and elected members are expected to:

- demonstrate their commitment and support to this policy by ensuring that the principles and approaches to managing stress are implemented
- reflect the policy's principles and approaches within their own management practice
- ensure that resources are available to ensure that stress management approaches are implemented, including the availability of appropriately trained risk assessors and the provision of suitable and sufficient training of managers and of employees to enable them to fulfill their role.
- support Line managers and ensure positive action is taken where there is evidence of work related stress impacting on employees health and/ or performance
- monitor the incidence of stress and take appropriate action in light of qualitative and quantitative data provided by HR in relation to stress

8.2 Line managers are expected to:

- reflect the policy's principles and approaches within their own management practice
- adopt an open attitude, ensuring that they are accessible to employees who wish to discuss problems and anxieties and that communication methods are effective
- adopt a flexible approach, wherever possible, to work schedules, in order to help avoid conflicts between work and personal life
- ensure that employees have access to appropriate training in order to recognise and manage stress
- ensure that employees have access to, and attend, identified training needs in respect of their job
- ensure that employees are provided with clear and realistic objectives and that performance is managed effectively and fairly
- ensure that risk assessments are undertaken on all jobs on a regular basis, (such as during a restructuring exercise, whenever an employee is suffering from work related stress or a cause of work related stress is identified) and that appropriate action is taken where necessary
- follow the Council's procedures and use appropriate support where necessary, including referring employees to Occupational Health if their health, performance or behaviour may be adversely affected by stress.
- ensure that employees have reasonable workloads, are not overworking and are taking their full leave entitlement
- ensure that regular discussions take place with employees regarding their health generally and how they are coping with the pressures at work, as part of the appraisal process
- implement, as appropriate, the actions outlined in the guidance attached to this policy (in respect of recruitment and selection, pre-employment health checks/references, induction and promotion, risk assessment, sickness absence and ill health during employment, training and development, and violent incidents)
- take measures to avoid and/or prevent, wherever practicable, the possible sources of stress (as outlined in the guidance attached to this policy) for their employees and themselves
- ensure sickness absence/return to work interviews are undertaken in respect of all periods of sickness absence, explore concerns regarding work related stress are fully explored and appropriate control measures implemented

8.3 Human Resources are expected to:

- provide advice on the stress policy
- provide the framework and training for managers to undertake risk assessments
- provide qualitative and quantitative data in relation to stress

- support managers to deliver on their responsibilities
- provide confidential counselling and support

8.4 Occupational health are expected to:

- provide specialist training and advice to managers and employees in managing stress
- provide support and advice to employees (and their managers) who are suffering stress
- following referral, provide advice as to the extent to which the individual employee is suffering from work related stress

8.5 Individual employees, including managers are expected to:

- support the Council's stress initiatives
- recognise that they may be a source of stress to others, accept responsibility and take action to deal with this
- attend appropriate training so that they are better able to recognise and manage stress
- identify causes of stress in the workplace and report it appropriately, through the use of the Council's procedures.
- recognise that the risk of stress occurring may be reduced by employees adopting healthy lifestyles and adopting positive coping strategies, and seeking assistance and support at appropriate times.

9. Support

9.1 In order to support this policy, the following services are available to managers and employees:

- occupational health (OH) service - to provide advice and guidance on the impact of stress on health and what steps the Council and/or employee may take
- counselling service - to provide a confidential service to employees in order to discuss concerns related to work or personal circumstances
- human resources (HR) section - to provide support and guidance to managers and employees in dealing with stress and in the use of the Council's related policies and procedures
- well-being team - to provide support and guidance on the risk assessment process and what steps can be taken to minimise or eliminate risks.
- Workforce development and diversity section - to provide stress management and awareness training to managers and employees

10 Diversity Impact Assessment

- 10.1 The Diversity Impact Assessment undertaken in respect of this policy is attached at Appendix C.

11 Monitoring and Review Arrangements

- 11.1 An initial review of the effectiveness of this policy will be undertaken 6 months after the date of implementation and thereafter will be continually monitored.
- 11.2 The policy will be programmed for review 3 years after the date of implementation

Appendix A

Managing Stress at Work Guidelines

The following is general guidance on the definition of stress and how the Council's policy can be put into practice. It also provides links to other related policies and procedures.

What is stress?

Stress is experienced when people cannot cope, or find it difficult to cope with the pressures and demands placed upon them. All work has its pressures and people vary in their capacity, at different times, to cope with different types of pressure. Some levels of pressure, even when high, can be motivating and challenging. Pressures that can be responded to effectively are likely to lead to job satisfaction. However, pressures at a level where an individual cannot cope, or even too little pressure or challenge, are likely to result in stress. Stress which is not shortlived may result in ill health and/or abnormal behaviour.

How to recognise the signs of stress

Some common signs of stress are listed below. However, experiencing any of these does not necessarily give an indication of stress and advice should be sought from the OH Service when concerns are raised.

- persistent or recurrent moods - anger, irritability, detachment, worry, depression, guilt and sadness
- physical sensations/effects aches and pains, raised heart rate, increased sweating, dizziness, and blurred vision, skin or sleep disorders
- changed behaviours - increased absence levels, difficulty concentrating or remembering things, inability to switch off, loss of creativity, making more errors, double checking everything, eating disorders, increasing use of tobacco, alcohol or drugs.

Managers should also be aware of the following possible signs:

- increase in overall sickness absence - particularly frequent short-term absences
- poor work performance - less output, lower quality, poor decision making
- relationships at work - conflict between colleagues, poor relationships with clients
- employees attitude and behaviour - loss of motivation or commitment, poor time-keeping, working longer hours but with diminishing effectiveness.

Possible sources of stress in the workplace

The following can be sources of stress arising from work:

- **Culture** - poor organisational culture, typified by lack of communication and consultation with employees, a blame culture when mistakes are made and an expectation of regularly working long hours and taking work home.
- **Demands** - job demands, typified by either too little or too much to do, excessively tight deadlines, inadequate or excessive training for the job, boring repetitive work and a noisy, dirty, hot or threatening working environment.
- **Control** - control over the work, typified by no control over the tasks, the timing, pace of the work or skills used.
- **Support** - support, training and individual factors, typified by lack of support from managers and colleagues, inadequate or inappropriate training opportunities, reprimanding instead of supporting when things go wrong, poor work-life balance and poor team make up.
- **Relationships** - relationships with co-workers, typified by poor working relationships with colleagues and an atmosphere of unacceptable behaviour such as bullying, sexual or racial harassment.
- **Role** - role within the organisation, typified by role conflict, where there are conflicting job demands or being asked to undertake tasks which are not considered part of their job and role ambiguity, where the person does not have a clear view of the job and the expectations of them.
- **Change** - organisational change, typified by poor communication with employees about proposed change and the reasons for it, lack of consultation, uncertainty about what is going on and the future, possible job losses and lack of support for employees.

Stress can also arise from the pressures people experience in their home and personal lives, e.g. bereavement, relationship or family problems, and financial difficulties. These factors can make people more vulnerable to stress at work or reduce their ability to perform effectively.

Actions

The following actions should be taken to help alleviate stress in the workplace:

Recruitment and selection

The full range of responsibilities and demands of the job, including areas of potential pressure should be identified and set out clearly in the job description that is sent to all candidates. The candidate's ability to deal with the requirements and potential pressures of the job should be investigated and assessed as part of the selection process.

Pre-employment health screening/References

The existing policy of ensuring that no person takes up employment before a health questionnaire has been completed and health clearance given must be enforced in all cases. This process will be used in a positive way to ensure that the candidate is matched to the requirements of the job and any support required to perform effectively is identified. When seeking advice, the appointing manager must ensure that the OH Adviser has sufficient information related to the job's requirements and potential demands, such as the job description and risk assessment results. The results of the health screening should be considered in conjunction with references and previous sickness records provided by previous employers.

Induction and promotion

All new employees must receive induction into their jobs. Starting a new job could be stressful and a planned induction can help to eliminate many concerns. The situation could be aggravated if the new employee is also relocating. As part of the induction programme the Stress Policy should be discussed and employees advised who will provide them with support.

Risk assessment

All jobs should be risk assessed for stress (in accordance with HSE guidance and local arrangements) and those risk assessments should be reviewed regularly, particularly when circumstances change (such as during a restructuring exercise and whenever an employee is suffering from, or a cause of, work related stress is identified). Managers should ensure that appropriately trained risk assessors are available within teams and actions are taken to deal with any issues raised during the risk assessment process.

Sickness absence and ill health during employment

When dealing with concerns related to stress and sickness absence or ill health, the Council's Attendance Management procedure should be followed.

Training and development

Employees may experience stress if they are not adequately trained for their job, especially when moving into a new or changed role. The identification of training needs must feature in all cases where re-structuring of individual jobs or sections within a directorate takes place. Identifying and meeting training needs should not be seen as a one-off annual exercise but as a continual process.

Specifically, the Council will aim to ensure that managers and employees are aware of the risks of stress and the measures that can be taken to identify and manage it. A number of training opportunities are available from the Development and Diversity Section.

In all management and supervision training and other appropriate skills training courses the Stress Policy should be raised as part of a manager's ongoing responsibilities. Managers and supervisors should also discuss ways of dealing with their own stress management.

Violent incidents

In all cases, the Council's Violence and Aggression Reporting Procedure should be followed and, where appropriate, a Safety Incident Report Form should be completed. Awareness training should be provided to all employees in key areas. Counselling is available to employees who have been involved in a violent incident.

Work-related stress claims

There may be circumstances where an employee claims that their absence from work is due to work-related stress. Such claims should be dealt with in accordance with the Council's Attendance Management procedure

Associated policies/processes

Other policies, procedures and processes are relevant to the management of stress as follows:

1. Health and Safety policy
2. Risk Assessment processes
3. Induction policy and programme
4. Recruitment and Selection policy and processes
5. Attendance Management policy and procedure
6. Employee Support Policy
7. Violent Incident processes
8. Lone Working Policy

For help and advice on this policy or guidance please contact the HR Section.

Appendix B

Corporate and Departmental Health Check and Actions Arising

1 Introduction

Corporately the Council is in the final stages of adopting a Managing Stress at Work Policy (the policy). It is recognised that the Council, as a corporate body, will not necessarily have all the processes and procedures etc in place immediately to meet the policy requirements. The policy, once agreed, will apply to all departments, who will be required to comply with the policy in full. Again, it is recognised that departments are unlikely to be able to comply immediately with the policy, with the level of compliance varying between departments. In order to assess the extent of compliance, a corporate health check has been undertaken (assuming the policy has been adopted as currently drafted) and action plan developed. Departmental health checks are due to be undertaken once the policy has been adopted with a view to departmental action plans being developed.

2 Health Checks

The health checks involve assessments against checklists included in the Employers Organisation publication entitled "Addressing Stress at Work" which incorporates the Health and Safety Executive's Management standards for work related stress and relevant case law (in particular the Court of appeal decision in Sutherland v Hatton and others). In order to closely align the health checks with the HSE Management Standards, the health checks are structured as follows

- Organisational Culture
- Demands
- Control
- Support
- Relationships
- Role
- Change

3 Action Plans

Action needed to address any areas of shortfall will be included in corporate and individual departmental action plans. Actions will be allocated to individual employees, with milestones and timescales identified.

4 Timetable

The corporate health check has been undertaken and a series of corporate actions identified. It is envisaged that

- initial departmental health checks will be undertaken by June 2006

- any further investigation (if needed - possibly using focus groups) will be undertaken by September 2006
- departmental action plans will be developed by October 2006.

5 Health Check

Attached at Annex A are the results of the corporate health check, which incorporates the basis of an action plan. Where no corporate action is needed, it is presumed that corporate arrangements, provision, guidance etc exists as standard. Should the subsequent departmental health checks indicate that such corporate arrangements, provision, guidance does not exist, this will addressed. The corporate health check will form the template for departments to undertake their health checks and develop their action plans.

Organisational Culture

There are no HSE Management Standards to apply as this category is not one of the HSE Standards.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Is there an environment in which staff feel confident to discuss with their manager work-related health issues including WRS?			
Are there mechanisms to deal promptly with issues raised?			
Are senior managers and members supportive of the development of an organisational culture that minimises WRS?			
Where culture change is required, is this implemented in a systematic and clear way, preferably as part of an overall organisational development strategy?	Develop and implement an Organisational Development Strategy (WS by June 2006)		
Do managers and staff understand the culture and are they provided with appropriate support to enable them to work within it?	Continue to implement Leadership and Management Development Programme (KM – ongoing)		

Are there regular communications with all staff including remote or home based staff?	Develop and implement Communication Strategy (JM/AA by January 2006)		
Are a variety of communications methods used including e-mails, newsletters and briefings?	Develop and implement Communication Strategy (JM/AA by January 2006)		
Where possible are staff involved in decisions about their work and how they do it to reduce the risk of WRS?			
Are staff and trade unions involved in problem solving?			
Are support mechanisms provided to help staff work better and get more from their job?			
Where appropriate, are staff helped through personal crisis, such as through the provision of counselling?			
So far as reasonably practicable, is the workload such that it can be achieved normally within the working day?			

Demands

Includes issues like workload, work patterns and the work environment

The HSE standard is that:

- Employees indicate that they are able to cope with the demands of their jobs; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation provides employees with adequate and achievable demands in relation to the agreed hours of work;
- People's skills and abilities are matched to the job demands;
- Jobs are designed to be within the capabilities of employees; and
- Employees' concerns about their work environment are addressed.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Are the potential risks of WRS assessed as part of the job analysis process at the recruitment stage and when any restructuring is proposed?			
Where there are specific concerns that a job may place an individual at risk of WRS is the advice of occupational health sought?			

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Are the organisational structures and reporting mechanisms assessed in order to determine any potential WRS risks and action taken, including the provision of support and training, to alleviate such risks?			
Is there regular communication with staff about work challenges and workloads and their ability to cope?	Review and implement revised Appraisal Scheme (KM by ????)		
Are sufficient staff provided to deal with work allocation, including during particularly busy periods?			
Are realistic deadlines set, properly planned for and are staff involved?			
Is workload designed so that it can be achieved normally within the working day?			
Is team working encouraged to develop work sharing and support within the team?			
Are workloads managed during periods of staff absence?			
Is the physical environment controlled in order for it to be appropriate for the tasks undertaken?			
Are all physical and chemical hazards subjected to risk assessment and measures put in place to adequately control the risks?			

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Is the risk of violence to staff assessed and measures put in place to adequately control the risks?	Develop and implement revised Violence and Aggression Policy (DQ/BT by ????)		
Are time and resources set aside to enable effective teambuilding opportunities and social interaction?			
Is support for staff provided to help them overcome their problems?			

Control

How much say the person has in the way they do their work

The HSE standard is that:

- Employees indicate that they are able to have a say about the way they do their work; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- Where possible, employees have control over their pace of work;
- Employees are encouraged to use their skills and initiative to do their work;
- Where possible, employees are encouraged to develop new skills to help them undertake new and challenging pieces of work;
- The organisation encourages employees to develop their skills;
- Employees have a say over when breaks can be taken; and
- Employees are consulted over their work patterns.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Do staff have flexibility and control over their work and the way they do it?			
Where shift working is required are staff involved in shift design and are shifts allocated fairly?	Develop and implement Corporate guidance (unallocated by ???)		
Are tasks varied to enable staff to use different skills and attributes?			
Is support for staff provided to help them overcome their problems?			

Support

Includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues

The HSE standard is that:

- Employees indicate that they receive adequate information and support from their colleagues and superiors; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation has policies and procedures to adequately support employees;
- Systems are in place to enable and encourage managers to support their staff;
- Systems are in place to enable and encourage employees to support their colleagues;
- Employees know what support is available and how and when to access it;
- Employees know how to access the required resources to do their job; and
- Employees receive regular and constructive feedback.
- Employees receive regular and constructive feedback.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Do staff take annual leave and breaks?			
Is a healthy work-life balance encouraged?			
Are staff supported with personal difficulties, where they may impact upon work?			
Are staff provided with sufficient training to do their job and to work safely?			

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Is additional training provided when jobs change?			
Is there an induction programme for new starters into the team, department and council?			
Do induction programmes provide information about flexible working options or the social support networks available?			
Are staff provided with training to help them identify and manage stress?			

Relationships

Includes promoting positive working to avoid conflict and dealing with unacceptable behaviour

The HSE standard is that:

- Employees indicate that they are not subjected to unacceptable behaviour, e.g. bullying at work; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation promotes positive behaviours at work to avoid conflict and ensures fairness;
- Employees share information relevant to their work;
- The organisation has agreed policies and procedures to prevent or resolve unacceptable behaviour;
- Systems are in place to enable and encourage managers to deal with unacceptable behaviour; and
- Systems are in place to enable and encourage employees to report unacceptable behaviour.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Is there a range of communication methods used at strategic and operational level, both to communicate messages downwards but also to enable effective feedback from staff?	Develop and implement Communication Strategy (JM/AA by January 2006) and Rewards and Recognition Policy (WS by March 2006)		
Is the effectiveness of communication methods evaluated and reviewed (for example through staff opinion surveys)?			

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Is a teamwork approach in place that recognises the contributions of individual team members and the importance of the effective communications and team relations?	Develop and implement Communication Strategy (JM/AA by January 2006) and Rewards and Recognition Policy (WS by March 2006)		
Is time set aside for teambuilding and other support activities?			
Are staff provided with training and support on customer relations and customer care?			
Are the potential risks of violence and aggression against staff assessed and action taken to alleviate such risks?	Develop and implement revised Violence and Aggression Policy (DQ/BT by ????)		
Are bullying and harassment seen as unacceptable?			
Is there commitment from senior management to develop in conjunction with unions and staff representatives policies and procedures to deal with bullying and harassment?	Develop and implement revised arrangements for dealing with bullying and harassment (unallocated by ????)		

Are policies in place to promote and value diversity?			
Are managers and employees clear about their roles and responsibilities in terms of fostering effective relationships?			

Role

Whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles.

The HSE standard is that:

- Employees indicate that they understand their role and responsibilities; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation ensures that, as far as possible, the different requirements it places upon employees are compatible;
- The organisation provides information to enable employees to understand their role and responsibilities;
- The organisation ensures that, as far as possible, the requirements it places upon employees are clear; and
- Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role and responsibilities.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Are job roles and requirements clearly defined as part of the initial job analysis process prior to recruitment?			
Is pre-employment screening, combined with generic risk assessment, used to identify support measures that may allow an individual to undertake a particular role?			

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Do selection criteria and selection methods take into account any particular requirements of the job that could potentially place individuals at risk of WRS?			
Are new staff properly inducted into the department and council as a whole?	Develop and implement revised Induction arrangements (KM/BT by ???)		
Is appropriate support provided to help individuals with any potentially stressful parts of their job?			
Are staff encouraged to discuss any confusion or misunderstanding regarding their role?			
Is a personal work plan jointly determined and agreed?			
Are jobs properly described in job descriptions and changing tasks taken into account?			
Are individual roles and relationships with co-workers regularly discussed?			
Do staff understand their new roles following restructures or other changes?			
Do staff understand where their work fits in with the aims of the team organisation?			
Is work monitored only when necessary?			

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Is there a framework for regular discussions about performance?			
Is there a blame-free culture?			
Are there regular discussions with staff about what is going well and are problems identified and attempts made to resolve them?			
Do staff understand their jobs and which tasks are important to enable work to be prioritised?			

Change

How organisational change (large or small) is managed and communicated in the organisation

The HSE standard is that:

- Employees indicate that the organisation engages them frequently when undergoing an organisational change; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation provides employees with timely information to enable them to understand the reasons for proposed changes;
- The organisation ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals;
- Employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs;
- Employees are aware of timetables for changes;
- Employees have access to relevant support during changes.

Issue	Corporate Action needed	Departmental Assessment	Evidence/Departmental Action needed
Would an organisational development strategy help with implementing the required change?	Develop and implement an Organisational Development Strategy (WS by June 2006)		
Would a workforce planning exercise help with the change process by identifying current and future job roles and skill needs?			

Are changes planned and is the process of change transparent?			
Is there a clear timetable with milestones?			
Are the purposes of the change and the effects explained?			
If jobs are changing are staff involved in deciding upon the new functions and job designs?			
Are managers approachable? Do they encourage dialogue and answer questions?			
Are staff and their representatives consulted when it is apparent that change is required and throughout the change process?			
Are staff informed of vacancies?			
Is there a transparent and equitable process for filling posts?			
Are staff provided with support through the change?			

Appendix C

DIVERSITY IMPACT ASSESSMENT UNDERTAKEN IN RESPECT OF THE MANAGING STRESS AT WORK POLICY

Strategy, policy, procedure or function being assessed	MANAGING STRESS AT WORK POLICY
Responsible Officer:	W Stagg
Start Date:	February 2005
Finish Date:	September 2005
Date Forwarded to Diversity Officer:	

Is Diversity Impact Assessment Required?	YES	NO
If yes please complete this form	<input checked="" type="checkbox"/>	
If no please give reasons below		

Process	Action Taken (Put 'x' in appropriate boxes)	YES	NO
Available data and research considered	Current work force data used	<input checked="" type="checkbox"/>	
	BVPI Data Used	<input checked="" type="checkbox"/>	
	Other Used (Give Details)		<input checked="" type="checkbox"/>

Process	Action Taken (Put 'x' in appropriate boxes)	YES	NO
Assessment of any differential impact on employees Will any group be affected differently by the policy?	Employee Groups		
	Male		<input checked="" type="checkbox"/>
	Female		<input checked="" type="checkbox"/>
	Ethnic minority background		<input checked="" type="checkbox"/>
	Disabled		<input checked="" type="checkbox"/>
	Religious background		<input checked="" type="checkbox"/>
	Sexual orientation issues		<input checked="" type="checkbox"/>
	Age		<input checked="" type="checkbox"/>
	Part-time		<input checked="" type="checkbox"/>
	Term-time		<input checked="" type="checkbox"/>
	Full-time		<input checked="" type="checkbox"/>
	Married		<input checked="" type="checkbox"/>
	Single		<input checked="" type="checkbox"/>
	Other (give details)		
Details of any adverse impact on any employee group(s) If any yes boxes have been ticked above, how is this group being adversely affected?	Give Details		
Measures that might mitigate any adverse impact or alternative policies <i>(is it lawful to affect that group differently, if not how has this issue been resolved)</i>	Give Details		

Process	Action Taken (Put 'x' in appropriate boxes)		
Consultation Process	Groups and Individual to be consulted:	INITIAL	FINAL
	Senior HR staff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Development and Diversity Section	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	CMT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Staff Consultation Group Representatives		
	HJTUC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	North Tees and Hartlepool NHS Trust Occupational Health Department		<input checked="" type="checkbox"/>
	Other (give details)		
	Consultation Methods to be used (give details) CMT/Senior HR staff/Development & Diversity Section - Written consultation HJTUC – Via Single Table Group		
Policy/function agreed by	Diversity Impact Assessment to be considered by:	YES	NO
	Chief Personnel Services Officer	<input checked="" type="checkbox"/>	
	Senior Personnel Staff	<input checked="" type="checkbox"/>	
	HJTUC	<input checked="" type="checkbox"/>	
	Portfolio Holder	<input checked="" type="checkbox"/>	
	Elected Members		<input checked="" type="checkbox"/>
	Other (give details)		
	Where is decision making process to be recorded:	YES	NO
	Notes of Single Table Group Meeting	<input checked="" type="checkbox"/>	
	Minutes of Performance Management Portfolio Holder Meeting	<input checked="" type="checkbox"/>	
	Other (give details)		<input checked="" type="checkbox"/>

Publishing Arrangements	Media to be used:	YES	NO
	Intranet	<input checked="" type="checkbox"/>	
	Internet	<input checked="" type="checkbox"/>	
	Copy to Directors	<input checked="" type="checkbox"/>	
	Copy to Key Staff	<input checked="" type="checkbox"/>	
	Notice Boards	<input checked="" type="checkbox"/>	
	Induction Process	<input checked="" type="checkbox"/>	
	Management Matters	<input checked="" type="checkbox"/>	
	Press Release		<input checked="" type="checkbox"/>
	Report available to the public		<input checked="" type="checkbox"/>
	Booklet		<input checked="" type="checkbox"/>
	Newsline	<input checked="" type="checkbox"/>	
	Other (give details)		<input checked="" type="checkbox"/>

**WORKFORCE AND BVPI DATA USED IN THE DIVERSITY
IMPACT ASSESSMENT FOR THE MANAGING STRESS AT
WORK POLICY**

<i>Workforce and BVPI Data Used</i>		
Definition	Actual Performance 2004/5	Updated information if available
BVPI 2a - The level (if any) of the Equality Standard for Local Government to which the authority conforms.	Level 1	N/A
BVPI 2b – The duty to promote race equality.	74%	N/A
BVPI 11a - The percentage of top 5% of earners that are women.	47.56%	N/A
BVPI 11b - The percentage of top 5% of earners from black and minority ethnic communities.	0%	N/A
BVPI 11c (Local) - The percentage of top 5% of earners declaring they meet the Disability Discrimination Act 1995 disability definition.	1.68%	N/A
BVPI 16 - The percentage of local authority employees declaring they meet the Disability Discrimination Act 1995 disability definition.	2.53%	2.61%
BVPI 17 - The percentage of local authority employees from minority ethnic communities.	0.60%	0.80%
Local – The percentage of all employees who are full time and female (based on position at 1.4.05).	32.67%	N/A
Local – The percentage of all employees who are full time and male (based on position at 1.4.05).	23.82%	N/A
Local – The percentage of all employees who are part time and female (based on position at 1.4.05).	40.48%	N/A
Local – The percentage of all employees who are part time and male (based on position at 1.4.05).	3.03%	N/A
Local – The percentage of all employees who are aged 18-24 (based on position at 1.4.05).	6.74%	N/A
Local – The percentage of all employees who are aged 25-34 (based on position at 1.4.05).	19.32%	N/A
Local – The percentage of all employees who are aged 35-44 (based on position at 1.4.05).	30.25%	N/A
Local – The percentage of all employees who are aged 45-54 (based on position at 1.4.05).	28.94%	N/A
Local – The percentage of all employees who are aged 55-64 (based on position at 1.4.05).	14.17%	N/A

**FINANCE AND PERFORMANCE MANAGEMENT
PORTFOLIO (HEALTH AND SAFETY
CONSULTATIVE GROUP)**

Report To Portfolio Holder
28th November 2005



Report of: Chief Personnel Services Officer

Subject: PREPARING FOR AN INFLUENZA PANDEMIC

SUMMARY

1. PURPOSE OF REPORT

To advise of the preparations being made by the authority for use in the event of an influenza pandemic, the work on which is being led by the Director of Neighbourhood Services.

2. SUMMARY OF CONTENTS

The report is confined to the reproduction of a presentation that is being used by the Director of Neighbourhood Services, together with an outline of the context in which presentation has been prepared.

3. RELEVANCE TO PORTFOLIO HOLDER

Corporate issues.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

Portfolio Holder only

6. DECISION(S) REQUIRED

That the report and its appendix are noted.

Report of: Chief Personnel Services Officer

Subject: PREPARING FOR AN INFLUENZA PANDEMIC

1. PURPOSE OF REPORT

To advise of the preparations being made by the authority for use in the event of an influenza pandemic, the work on which is being led by the Director of Neighbourhood Services.

2. BACKGROUND

It is widely forecast that a world-wide influenza pandemic is likely to occur during the next two years. Consequently, under the guidance of central government, this and all other local authorities is preparing plans to provide continuity of its essential services in the event of a pandemic in which it is quite possible that 25% of the workforce may be affected at one time.

There are clearly both health and safety implications in such circumstances, impacting on both the workforce itself and the wider community that it serves.

The Director of Neighbourhood Services' PowerPoint presentation forms the appendix to this report. The Director is presently using this presentation to update members and officers of the work in progress on preparation by the authority for an influenza pandemic.

3. RECOMMENDATION

That the report and its appendix are noted.

Preparing for an Influenza Pandemic

Ian Parker

Director of Neighbourhood Services

November 2005

Introduction

- The risk of a pandemic influenza outbreak is very real
- It is essential to have proper service continuity plans in place
- The plan is an evolving process as it includes development objectives and targets
- 25% of the workforce could be affected

An Evolving Plan

- The plan is produced in generations – 1st generation by November 2005
- The aim is to achieve 80% preparedness by March 2006 and 90% by March 2007
- The degree of preparedness could move up or down depending on external factors

Management and Control



- There is a Director responsible for plan development and implementation (currently Ian Parker)
- There are four states of alert:
 - **Green:** plan preparation/stand down
 - **Amber:** plan mobilisation/special post incident measures necessary
 - **Red:** detailed plan implementation – review meetings at least twice per week
 - **Red/Red:** extreme consequences requiring daily review of impact and actions
- An Incident Management Team (IMT) will be established once **amber** alert state is reached



Service Priorities and Resources



- Service hierarchy:
 - Critical Services – service must be maintained at all costs
 - Non Critical Service (Level 1) – essential services – maintain services until impossible to do so
 - Non Critical Service (Level 2) – default position – maintain service delivery if possible
 - Non Critical Service (Level 3) – early suspension if necessary
- Three levels of quality of assessment:
 - 1 – Initial
 - 2 – Interim
 - 3 – Final
- Consider alternative ways of delivering services:
 - Transferable skills, service adjustment, home working
- Strategic options:
 - Leisure facilities/libraries for child care/longer opening hours



Multi Agency Response



- Other key service providers identified
- Schools are considered as other providers
- A tactical approach to caring for vulnerable people?
- Analysis of preparedness, scope for joint working/mutual aid will be explored
- Council will promote plan sharing by sharing its own plan
- The Council will promote multi-agency plan sharing
- Three levels of plan sharing:
 - Level 1 – lead contact
 - Level 2 – plan knowledge
 - Level 3 – plan integration
- The Council will co-operate with and lead, if necessary, mutual aid arrangements in the event of an influenza pandemic



Information Systems



- Information for staff will be prepared and distributed in advance of an influenza pandemic, including a generic managers briefing
- At the establishment of an **amber** state of alert:
 - Staff will be briefed on absence reporting standards
 - Contact will be made with key service providers to confirm information sharing arrangements
- Each Department to establish numbers of people absent for IMT by 10:00 hrs during the **red** phase
- IMT will collect and consider international/national/regional guidance



Communications Strategy



- A specific communications strategy is being developed
- It will be capable of disseminating information into the community daily if necessary
- The communications strategy will develop arrangements for multi-agency information sharing dissemination



Post Incident Plan

- The IMT will consider the long term consequences of the pandemic and develop a Post Incident Plan
- In the event of extreme consequences, a Senior Manager will be identified to lead the implementation of the Post Incident Plan

Monitoring

- The percentage of preparedness will be assessed



HARTLEPOOL
BOROUGH COUNCIL

Hartlepool Borough Council Influenza Pandemic Plan	Department			Division	
Hierarchy of Services	Key Person	Direct/ external	No. of people	Level	Comments
Critical					
Non-Critical - Level 1 (Essential)					
Non Critical – Level 2 (default)					
Non Critical – Level 3 (Early Suspension)					

Department -		Person Responsible for Staff Resource Information
Service -		
Completed by -		
Delivery (Direct/External) – give details		
No. of people involved in front-line delivery (detailed breakdown if necessary)		
Dependencies (e.g on other services/partners)		
Any other specific vulnerabilities?		
Alternative ways of working		
Validated by CMT		Date

Agency -		Address (local base)
Lead Contact -		
Email address -		
State of Preparedness for Influenza Pandemic		
Potential Impact on Community of Service Failure/Reduction		
Potential Impact on Council Services of Service Failure/Reduction		
Potential Joint Working		
Potential Requests for Support From the Council to Maintain Service Delivery		
Information prepared by		Date

**FINANCE AND PERFORMANCE MANAGEMENT
PORTFOLIO (HEALTH AND SAFETY
CONSULTATIVE GROUP)**

Report To Portfolio Holder
28th November 2005



Report of: Chief Personnel Services Officer

Subject: HEALTH AND SAFETY PERFORMANCE
STATISTICS

SUMMARY

1. PURPOSE OF REPORT

To present the data obtained for the first and second quarters of 2005/6, for which newly developed statistical analyses have been used to indicate safety performance, using standard measures.

2. SUMMARY OF CONTENTS

The report outlines the standard measures of safety performance that are used to analyse the safety incidents reported to the Employee Wellbeing Team during the two quarters of 2005/6 and presents the data obtained.

3. RELEVANCE TO PORTFOLIO HOLDER

Corporate issues.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

Portfolio Holder only

6. DECISION(S) REQUIRED

To note the report and provide comments on the statistics presented.

Report of: Chief Personnel Services Offices

Subject: HEALTH AND SAFETY PERFORMANCE
STATISTICS

1. PURPOSE OF REPORT

To present the data obtained for the first and second quarters of 2005/6, for which newly developed statistical analyses have been used to indicate safety performance, using standard measures.

2. BACKGROUND

At its meeting during September, the group received a report that introduced newly developed analyses of the safety incident reports received by the Employee Wellbeing Team. This was facilitated by developments in the authority's IT system, which allows safety incident reports data and that derived from monitoring of sickness to be brought together. This permits the data to be used to produce analyses in standard forms that are used nationally and internationally.

These standard data based measures of safety performance are Incidence Rate, Frequency Rate and Severity Rate. Their use enables more informative comparisons to be made over periods of time. This is mainly because the number of employees and period of exposure to hazards is taken into account, as well as the number of reported safety incidents and injuries. The severity rate also provides useful analysis of the outcome of accidents, in terms of the duration of subsequent sickness absences.

3. THE STATISTICS

The statistical analyses that form the appendix to this report cover the first and second quarters of 2005/6, the months April to June and July, August to September. As with the first analyses, presented to the September meeting, the data is sorted into the new departmental structure, with further analysis of the Chief Executive's department and the separation of schools from the remainder of Children's Services.

Item 3 records the total number of safety incident reports received by the Employee Wellbeing Team during the two quarters. Items 1 and 2 analyse these into those which were reportable and non-reportable under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR).

Item 6 records the number of days of absence attributable to the safety incidents reported in item 3. Again the reportable, non-reportable figures are indicated separately, by items 4 and 5.

Items 7 to 15 then present the data on safety incident reports and the resulting absences in the standard measures:

- Incidence Rate;
- Severity Rate;
- and Frequency Rate.

Again there is differentiation between reportable and non-reportable incidents, as well the provision of totals.

Incidence rate refines the analysis of data by calculating the number reports per 1,000 full time equivalent employees over the period considered. This eliminates distortions that might result from a fluctuating number employees, as may be the case because of seasonal employment.

Frequency rate takes this refinement a stage further by calculating the number of reports per 100,000 hours worked. This should eliminate distortion caused by a varying number of hours being worked at different times of the year, as may be the case in grounds maintenance for instance.

Severity rate then provides an analysis of the average amount of time lost as a result of both reportable and non-reportable incidents. This should in turn provide a more informed approach to sickness absence management and in particular to the use of rehabilitation facilities.

4. ANALYSIS OF TRENDS

In due course, use of the standard measures will facilitate comparisons of safety performance over periods of time and comparisons with other organisations that carry out similar work. The standard measures will also be of value in directing effort and resources to hazards in the areas of work that are shown to be most in need of attention.

With results for only two quarters available, it is still too early to be able to identify performance trends within departments and divisions. But, as would be expected, it is evident that there are clear

differences between those departments and divisions where employees are mainly sedentary and office based and those where more manual and peripatetic work is undertaken. These differences are clear in both the number of incidents reported and the subsequent absences.

5. RECOMMENDATION

To note the report and provide comments on the statistics presented.

BASEDATA													APPENDIX				
No.	Ref	Definition	Annual Tar	ACE	No of mont	CFO	6	CS	CPSO	CEX Over	ε DACS	DChS	Schools	DNS	DRP	Whole year	
1		Number of HSE reportable occurrences involving employees															
		Apr - Jun	N/A			0		0	0	0	0	0	0	3	3	1	7
		Jul - Sep				0		0	0	0	0	0	0	0	3	0	3
		Oct - Dec								0							0
		Jan - Mar								0							0
		Whole Year				0		0	0	0	0	0	0	3	6	1	10
2		Number of HSE non reportable occurrences involving employees															
		Apr - Jun				4		0	0	0	4	34	2	18	11	1	70
		Jul - Sep				0		4	0	3	7	15	7	3	8	3	43
		Oct - Dec								0							0
		Jan - Mar								0							0
		Whole Year				4		4	0	3	11	49	9	21	19	4	113
3		Number of HSE reportable and non reportable occurrences involving employees															
		Apr - Jun				4		0	0	0	4	34	2	21	14	2	77
		Jul - Sep				0		4	0	3	7	15	7	3	11	3	46
		Oct - Dec				0		0	0	0	0	0	0	0	0	0	0
		Jan - Mar				0		0	0	0	0	0	0	0	0	0	0
		Whole Year				4		4	0	3	11	49	9	24	25	5	123
4		No of days absence associated with HSE reportable occurrences															
		Apr - Jun				0		0	0	0	0	0	0	81	62	3	146
		Jul - Sep				0		0	0	0	0	0	0	0	18	0	18
		Oct - Dec								0							0
		Jan - Mar								0							0
		Whole Year				0		0	0	0	0	0	0	81	80	3	164
5		No of days absence associated with HSE non reportable occurrences															
		Apr - Jun				0		0	0	0	0	0	0	1	0	0	1
		Jul - Sep				0		0	0	0	0	0	1	0	0	0	1
		Oct - Dec								0							0
		Jan - Mar								0							0

	Whole Year	0	0	0	0	0	0	1	1	0	0	2
6	No of days absence associated with HSE reportable and non reportable occurrences											
	Apr - Jun	0	0	0	0	0	0	0	82	62	3	147
	Jul - Sep	0	0	0	0	0	0	1	0	18	0	19
	Oct - Dec	0	0	0	0	0	0	0	0	0	0	0
	Jan - Mar	0	0	0	0	0	0	0	0	0	0	0
	Whole Year	0	0	0	0	0	0	1	82	80	3	166

CALCULATIONS

7 H&S 1a Annual Equivalent Incidence rate:HSE reportable occurrences per 1,000 FTE employees

Apr - Jun	N/A	0	0	0	0	0	0	0	54.31339	9.18091	5.719842	8.3951979
Jul - Sept		0	0	0	0	0	0	0	0	9.18091	0	3.597942
Oct - Dec												
Jan - Mar												
Apr - Sept												
Apr - Dec												
Apr - Mar												

8 H&S 1b Annual Equivalent Incidence rate:HSE non reportable occurrences per 1,000 FTE employees

Apr - Jun	N/A	501.7247	0	0	0	58.34731	495.356	66.66111	325.8803	33.66334	5.719842	83.951979
Jul - Sept		0	104.1057	0	157.4183	102.1078	218.5394	233.3139	54.31339	24.48243	17.15953	51.570502
Oct - Dec												
Jan - Mar												
Apr - Sept												
Apr - Dec												
Apr - Mar												

9 H&S 1c Annual equivalent Incidence rate:HSE reportable and non reportable occurrences per 1,000 FTE employees

Apr - Jun	N/A	501.7247	0	0	0	58.34731	495.356	66.66111	380.1937	42.84425	11.43968	92.347177
Jul - Sept	N/A	0	104.1057	0	157.4183	102.1078	218.5394	233.3139	54.31339	33.66334	17.15953	55.168444
Oct - Dec												
Jan - Mar												
Apr - Sept												

Apr - Dec

Apr - Mar

10 H&S 3a Annual Equivalent Severity Rate : Ave Time lost per HSE reportable occurrences

Apr - Jun	N/A	0	0	0	0	0	0	0	27	20.66667	3	20.857143
Jul - Sept		0	0	0	0	0	0	0	0	6	0	6
Oct - Dec												
Jan - Mar												
Apr - Sept												
Apr - Dec												
Apr - Mar												

11 H&S 3b Annual Equivalent Severity Rate : Ave Time lost per HSE non reportable occurrences

Apr - Jun	N/A	0	0	0	0	0	0	0	0.055556	0	0	0.0142857
Jul - Sept		0	0	0	0	0	0	0.142857	0	0	0	0.0232558
Oct - Dec												
Jan - Mar												
Apr - Sept												
Apr - Dec												
Apr - Mar												

12 H&S 3c Annual Equivalent Severity Rate : Ave Time lost per HSE reportable and non reportable occurrences

Apr - Jun	N/A	0	0	0	0	0	0	0	3.904762	4.428571	1.5	1.9090909
Jul - Sept		0	0	0	0	0	0	0.142857	0	1.636364	0	0.4130435
Oct - Dec												
Jan - Mar												
Apr - Sept												
Apr - Dec												
Apr - Mar												

13 H&S 2a Annual Eq	N/A	0	0	0	0	0	0	0	73.39647	12.40663	7.729516	11.344862
14 H&S 2b Annual Eq	N/A	678.0063	0	0	0	78.84772	669.4001	90.08258	440.3788	45.49099	7.729516	113.44862
15 H&S 2c Annual Eq	N/A	678.0063	0	0	0	78.84772	669.4001	90.08258	513.7753	57.89763	15.45903	124.79348

**FINANCE AND PERFORMANCE MANAGEMENT
PORTFOLIO (HEALTH AND SAFETY
CONSULTATIVE GROUP)**

Report To Portfolio Holder
28th November 2005



Report of: Chief Personnel Services Officer

Subject: POST RESTRUCTURE HEALTH AND SAFETY
QUESTIONNAIRE

SUMMARY

1. PURPOSE OF REPORT

To advise of an authority-wide check that is being carried out to ensure the continuity of basic health and safety arrangements, following the recent restructuring of the authority's departments.

2. SUMMARY OF CONTENTS

The report outlines the methodology by which the check of health and safety arrangements is being carried out, the purposes for which the information gathered will be used and plans for the subsequent updating.

3. RELEVANCE TO PORTFOLIO HOLDER

Corporate issues.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

Portfolio Holder only

6. DECISION(S) REQUIRED

To note the report and encourage the full and timely return of questionnaires.

Report of: Chief Personnel Services Officer

Subject: POST RESTRUCTURE HEALTH AND SAFETY
QUESTIONNAIRE

1. PURPOSE OF REPORT

To advise of an authority-wide check that is being carried out to ensure the continuity of basic health and safety arrangements, following the recent restructuring of the authority's departments.

2. BACKGROUND

The authority asks some of its employees to carry out certain essential roles in the interests of health and safety, which they do in addition to their normal work. Notably these extra roles cover fire procedures, action in the event of bomb threats, the provision of first aid treatments and operation of the asbestos management procedures.

These arrangements generally work well but are dependent for their continuity on new appointments being made, of fire wardens, bomb incident team members, first aiders and site asbestos checking officers, etc., when employees leave the authority or when they just change their workplaces. There are also training implications, both for employees newly appointed to carry out one of these roles and those who need retraining because of the passage of time.

However, there has never been a central corporate register of the employees who carry out these additional roles and of the training that they have received for these purposes.

3. OPPORTUNITY AND METHODOLOGY

It was clear that the recent restructuring would result in a significant number of employees changing their workplaces. Therefore some disruption in the continuity of fire and other arrangements was inevitable. As well as being a potential problem, the restructuring and establishment of two new departments provided an opportunity to construct a corporate register of fire wardens and others, which could then be kept up to date, thereby prompting new appointments when needed, and the training and retraining to support them.

Contact with departmental management teams indicated that they were well aware of the need to maintain the relevant appointments and the necessary actions appear already to have been taken, where necessary.

To confirm that this is the case and in order to establish a central register of the employees involved and of their training, a two-part questionnaire was devised and has been sent to each director and Chief Executive's Department Divisional Heads.

A copy of the questionnaire and the covering notes forms the appendix to this report.

The questionnaire recognises that where buildings are shared between departments, divisions and, in some cases external organisations, the appointments also need to be on a shared basis. And it is in such workplaces that it is particularly important that fire wardens, first aiders and other appointees should be clearly identified, as they may not be the immediate colleagues of those who need assistance in emergency situations.

The questionnaire also seeks to establish where each department's or division's employees are based. It is important for the Employee Wellbeing Team to know this for the planning of health and safety inspections, both so that all of the premises concerned are covered by periodic inspections and so that inspection reports are copied to all of the managers concerned.

Questionnaires are due to be completed and returned by the 30th November. Those already received appear to have been understood and completed fully and accurately, as was requested.

After initial processing of the information provided by the completed questionnaires, the Employee Wellbeing Team have plans for keeping the register up to date. This will allow the team to prompt the making of new appointments and arrangements for training or retraining where this is required.

4. RECOMMENDATION

To note the report and encourage the full and timely return of questionnaires.

Post Restructure Health and Safety Arrangements Check

25th October 2005

To Directors and Chief Executive's Department Divisional Heads:

Following the recent restructure of the authority, the Chief Executive has asked me to check that fire precautions and the other day-to-day but vital health and safety arrangements are still in place and that they would be fully functional in the event of there being urgent need to activate them. To facilitate this check and to collect some additional information, a two-part questionnaire is attached.

The basis of the arrangements to be checked is the appointment of employees to carry out health and safety related roles, in addition to their normal duties. These employees may be called upon to do this routinely, as is usually the case for Site Asbestos Checking Officers, or only in emergencies, as with fire and bomb threats procedures or the need for first aid. In all cases though, these additional roles are a significant and necessary contribution to our overall management of health and safety.

In most cases, and without any prompting from the members of Employee Wellbeing Team or myself, I expect that you and your staff will have ensured continuity of the required arrangements, despite the physical and organisational movement of some staff. But I would still appreciate your co-operation in having checks carried out in all of the buildings where you have any staff based.

As well as confirming that the appointments required for these health and safety arrangements are still properly in place, the information you provide with Part 1 of the questionnaire, including the identities of the appointed employees and their workplaces, will also help in other respects. These include the completion of a new corporate policy on first aid provision, the updating of the bomb procedures, a review of asbestos management procedures and some other elements of policy and planning on health and safety matters.

The other employees at the workplaces concerned should, of course, also know details of these appointments and appointees. So the completion of Part 1 of the questionnaire should also be used as an opportunity to reinforce this knowledge, via staff notice boards or other available means.

In addition, with the completion of Part 2 of the questionnaire (only a single Part 2 is required for the whole department or division) the Employee Wellbeing Team can check that all of the workplaces where your employees are based are included in their schedule of health and safety inspections. This will ensure that inspection visits are planned to take place at appropriate intervals in each case.

So please would you arrange for a copy of Part 1 of the attached questionnaire to be completed for each of the buildings where you have staff, or in the case of the Civic Centre for each level on which you may have staff. (The only exception to this is schools, from which information will be collected separately.) Would you also arrange for a copy of the Part 2 to be completed for the whole of your department or division.

I am asking for completed questionnaires to be returned not later than 30th November. I would appreciate your further assistance in ensuring that this is done by the required date and that your department's or division's returns are co-ordinated, so as to ensure that every workplace is covered.

If any assistance is needed with the completion of the questionnaires, your staff can contact me or any of the health and safety officer members of the Employee Wellbeing Team.

Thank you in anticipation of your help in this important matter.

David Quainton, Health and Safety Adviser

Post Restructure Health and Safety Check Questionnaire

Part 1 – Health and Safety Appointments

A completed questionnaire Part 1 is required for **each building or Civic Centre level** occupied wholly or partly by the department or Chief Executive's Department division concerned.

Please answer each of questions 1 to 16 that are applicable to the premises and return the completed forms to The Administrator, Employee Wellbeing Team, Civic Centre, no later than 30th November.

1. Department/CEX division:
2. Name of building or Civic Centre level:
3. Wholly occupied: Yes/No If No: Shared with: *(department, division or other organisation)*
.....
4. Number of department/division staff based there:

Note: Questions 5, 6, 7,8 and 9 need not be answered in relation to the Civic Centre.

5. Responsible Person for asbestos management procedures for the building *(please give details whether or not this person is a member of the department/division's staff)*:

Name: Dept./Div./other

6. Site Asbestos Checking Officer (SACO) *(please give details whether or not this person is a member of the department/division's staff)*:

Name: Dept./Div./other

7. Has the person named in 6 received SACO training? Yes/No

8. Deputy SACO *(please give details whether or not this person is a member of the department/division's staff)*:

Name: Dept./Div./other

9. Has the person named in 8 received SACO training? Yes/No

10. First Aiders for the premises or Civic Centre level *(please give details whether or not these persons are members of the department/division's staff- if none please write none)*:

Name of First Aider	Dept./Div./other	First Aid Cert. Expiry	Receiving HBC First Aider payment?
.....	Yes/No
.....	Yes/No
.....	Yes/No
.....	Yes/No
.....	Yes/No
.....	Yes/No
.....	Yes/No

11. Appointed Persons for the premises (please give details whether or not these persons are members of the department/division's staff – none please write none):

Name of Appointed Person	Dept./Div./other	Date of last emergency aid training
.....
.....
.....
.....
.....
.....

Note: There will normally be Appointed Persons only in workplaces where the very small number of employees and a low risk environment has led to an assessment that fully trained first aiders (i.e. holders of current First Aid at Work certificates) are not essential.

12. Fire Wardens and Deputy Fire Wardens for the premises or Civic Centre level (please give details whether or not these persons are members of the department/division's staff).

Name of Fire Warden or Deputy Fire Warden	Fire zone (if applicable)	Dept./Div./other
.....
.....
.....
.....
.....
.....
.....

Note: Question 13 need not be answered in relation to the Civic Centre.

13. Assembly Point Co-ordinator and Deputy Assembly Point Co-ordinators for the premises (please give details whether or not these persons are members of the department/division's staff).

Name of Assembly Point Co-ordinator and deputy/ies	Dept./Div./other
.....
.....
.....
.....

Note: Questions 14 and 15 should be answered **only in relation to:**

*Civic Centre;
Leadbitter Building and former archive store;
Municipal Buildings;
No. 1 Church Street Offices;
Aneurin Bevan House;
Bryan Hanson House*

14. Bomb Incident and Deputy Bomb Incident Co-ordinators for the premises or Civic Centre level area (*please give details whether or not these persons are members of the department/division's staff*).

Name of Bomb Incident Co-ordinator and deputy/ies	Dept./Div./other
.....
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.....
.....

15. Other Bomb Incident Team Members for the premises or Civic Centre level area (*please give details whether or not these persons are members of the department/division's staff*).

Name of Bomb Incident Team members	Dept./Div./other
.....
.....
.....
.....
.....
.....
.....
.....
.....

16. Name of person completing this questionnaire

Telephone No.

.....

**FINANCE AND PERFORMANCE MANAGEMENT
PORTFOLIO (HEALTH AND SAFETY
CONSULTATIVE GROUP)**

**Report to Portfolio Holder
28th November 2005**



Report of: Chief Personnel Services Officer

Subject: NO SMOKING MATTERS

SUMMARY

1.0 PURPOSE OF REPORT

To update the Portfolio Holder and Consultative Group members on the main smoking related provisions of the Health Bill 2005.

2.0 SUMMARY OF CONTENTS

The report provides details of the main smoking related provisions of the Health Bill 2005

3.0 RELEVANCE TO PORTFOLIO MEMBER

Corporate issues.

4.0 TYPE OF DECISION

Non-key decision.

5.0 DECISION MAKING ROUTE

Portfolio Holder only.

6.0 DECISION(S) REQUIRED

To note the report.

Report of: Chief Personnel Services Officer

Subject: NO SMOKING MATTERS

1. PURPOSE OF REPORT

- 1.1 To update the Portfolio Holder and Consultative Group members on the main smoking related provisions of the Health Bill 2005.

2. BACKGROUND

- 2.1 In November 2004, the government published its White Paper on Public Health in which it outlined its proposals regarding smoking in public places including bans on smoking

- in all government departments and the NHS by the end of 2006 (and that the public sector, led by local authorities and PCT's, was expected to play its part)
- in all enclosed public places and workplaces by the end of 2007
- in pubs and bars which serve food and restaurants by the end of 2008
- in all bar areas by the end of 2008

- 2.2 The government consulted widely on the proposals, including

- on the special arrangements needed for regulating smoking in establishments such as long stay residential care and
- with schools and other institutions on how best to give practical effect to the proposals.

- 2.3 In October 2005, the government presented its Health Bill 2005, which detailed the proposed legislative arrangements to deliver improvements in no smoking arrangements .

3. HEALTH BILL 2005

- 3.1 The Health Bill 2005 includes the following provisions, which are relevant to Council premises and employees.

- Ban on smoking in enclosed and substantially enclosed work areas and areas where members of the public obtain goods or services from employees working there
- Exemptions for
 - a) premises where a person has his home, or is living whether permanently or temporarily (including hotels, care homes and prisons and other places where a person may be detained),

- b) non food pubs and
 - c) private members clubs
 - Requirement for No Smoking signs which conform to requirements determined by regulation (penalty of £200 for failing to conform)
 - New offences of 'Smoking in Smoke Free Places' (penalty £50) and 'Failing to Prevent Smoking in Smoke Free Places' (penalty £200 – applies to managers of public buildings)
 - Enforcement by local authority enforcement officers
 - Provision for the Secretary of State to
 - a) declare vehicles occupied by more than one person to be 'Smoke Free'
 - b) determine the implementation date for the above arrangements
 - c) the Secretary of State to define 'enclosed' and 'substantially enclosed' if he/she so wishes
- 3.2 Patricia Hewitt, Secretary of State for Health indicated that the measures could come into effect in the summer of 2007 and that there could be a total ban on smoking when the legislation is reviewed after three years i.e. in 2010.
- 3.3 In many respects the Bill is very similar to the proposals detailed last year in the White Paper. Noticeably, the proposals regarding
- a) banning smoking in all government departments and the NHS by the end of 2006 (and how the public sector including local government PCT's are to play their part) and
 - b) how to give practical effect to the arrangements in schools
- have not been included in the Bill.
- 3.4 The Bill, in its current form, does not appear to have any significant implications for the Council's current arrangements and plans, although the extent employees could be liable to committing an offence of 'Failing to Prevent Smoking in Smoke Free Places' will need to be considered further when more details of how this might apply become available.

4. RECOMMENDATION

- 4.1 That the report be noted.