

## **Report of the Assistant Chief Fire Officer**

### **Health and Safety Committee Update: October to December 2023 (Quarter 3)**

#### **Purpose of report**

1. To provide a Health and Safety update on activities and items of significance.
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#### **Recommendation**

*It is recommended that the following, in particular, be noted:*

- (i) The involvement of the Service in Health and Safety initiatives;*
- (ii) Health and Safety performance information recorded during October to December 2023 (Quarter 3); and*
- (iii) Workforce Health & Wellbeing performance (Quarter 3).*

#### **Introduction and Background**

2. Hereford & Worcester Fire and Rescue Service (HWFRS) aims to ensure the safety and well-being of its employees and reduce and prevent accidents and injuries at work, as outlined in the People Strategy 2022-2025.
3. The Health and Safety Committee is established to provide effective arrangements for the liaison and review of matters of common interest concerning Health and Safety (H&S). The Committee provides the opportunity for the Service to discuss general H&S issues and consult with the workforce via employee representatives. The Committee is chaired by the Assistant Chief Fire Officer and last met on 20<sup>th</sup> March 2024.
4. The Committee has the facility to task work to the H&S Working Group, which sits beneath it and is chaired by the Group Commander responsible for Health and Safety. The group meets as and when required.

## **Health & Safety Initiatives Update**

### National Activities

5. The main focus at national level is the ongoing investigative work and data collection by NFCC and HSE to minimise the risk of Carcinogens to firefighters and support staff in their duties.

### Regional Activities

6. The regional group met on 4<sup>th</sup> March 2024 at Staffordshire FRS Headquarters.
7. Dr Julie Gandolfi delivered a presentation and demonstration on Driver Metrics to the regional committee.
8. West Midlands Regional Committee were asked to review KPIs for each service to align the West Midlands Region for more efficient data analysis.

### HWFRS Local Activities

9. Hereford and Worcester Fire and Rescue Service Peer Review Audit took place in November 2023 for 3 days led by West Midlands Fire Service. Topics audited were Breathing Apparatus (BA) and Personal Protective Equipment (PPE), which incorporated carcinogen contamination. The full report was submitted to SLB for review in December. An action plan has been generated from findings of the Peer Review for the Service to implement if reasonably practicable.
10. A new training provider has been identified to deliver Health and Safety courses via E-learning Platform to minimise the impact on staffing. The first block of courses commenced in January 2024.
11. HWFRS Resilience, Organisational, Intelligence & Learning System (ROIL) Safety Event Reporting Portal was launched in December as the first phase of the new Health and Safety Management system and provides a new, efficient method of reporting safety events and manages the investigations required of them.
12. HWFRS Contamination Working Group is now in its 3<sup>rd</sup> Quarter of the action plan. Progress has been made including:
  - LMS Contaminants Training Package
  - Contaminants Triple Play Video
13. There are 25 Health & Safety Policies in date and published.

14. The Risk Assessment Database (Figure 1) is owned and maintained by local managers and reviewed by the H&S Advisor. Each risk assessment has a review period, and managers are prompted to carry out reviews. Where risk assessments are no longer applicable, they are archived from the database. During Quarter 3, 324 risk assessments were reviewed, and 36 new risk assessments were created.

**Figure 1 – Risk Assessment Database**

	Quarter 4 (22/23)		Quarter 1 (23/24)		Quarter 2 (23/24)		Quarter 3 (23/24)	
<b>Location</b>	Reviewed	Created	Reviewed	Created	Reviewed	Created	Reviewed	Created
North District	105	5	94	10	89	10	72	11
South District	97	14	103	12	85	15	94	11
West District	78	15	113	15	78	12	91	10
Training Centre	47	1	39	2	45	0	52	3
Others	31	4	5	3	22	7	15	1
<b>Total</b>	<b>358</b>	<b>39</b>	<b>354</b>	<b>42</b>	<b>319</b>	<b>44</b>	<b>324</b>	<b>36</b>

#### Quarter 3 Performance Report

15. Appendix 1 provides details relating to all safety events reported and investigated during Quarter 3 of the 2023-24 reporting year (October to December).
16. The total number of safety events reported in Quarter 3 (49) has increased by 9 compared to the previous quarter (40). The most significant increases were in the Vehicle Collisions and Near Hit categories. All incidents were investigated at an appropriate level, with no significant findings identified.
17. Seven events have been reported to the Health & Safety Executive (HSE) under the RIDDOR regulations, due to a loss of over 7 days working days/dangerous occurrences. The majority of these reported incidents were minor muscle/soft tissue injuries resulting from operational activity or training.
18. Ten basic specialist investigations occurred.

## **Workforce Health & Wellbeing Update Quarter 3 2023-24**

### **Performance Overview – Quarter 3 2023-24**

#### **HWFRS Sickness Data and Activity Quarter 3 2023-24**

1. Appendix 2 (Performance Overview) provides data relating to all sickness absence by workforce group and main causes of sickness absence in Quarter 3.
2. In comparison to Quarter 2, there has been a slight decrease in the total days/shifts lost to sickness absence for all staff (Q2 at 2.29 versus Q3 at 2.27), with 851 day/shifts lost overall. The Service continues to monitor and review attendance levels in line with the updated Attendance Management Policy and supports managers in the timely resolution of absence cases.
3. There were 3 main causes of sickness absence; Mental Health (25%), Musculo-Skeletal (MSK) (19%) and Respiratory (15%).

#### **Mental Health**

4. There were 216 days/shifts lost due to Mental Health across all categories (Stress, Depression and Other), featuring a combination of perceived work-related factors and personal factors. Personal factors included bereavement and family issues. The work-related factors included management/workplace issues such as managing performance, workplace disputes, and workload. Overall, there were 6 long term sickness cases within this category (4 within the Wholetime workgroup, 1 within the Support workgroup and 1 within Fire Control) and 2 of the cases cited work related factors. Three of the individuals have now returned to work.

#### **MSK**

5. There were 164 days/shifts lost due to MSK absences. Long-term sickness absence cases have been supported to return to work via phased return to work plans. Some of the absences were due to surgical interventions to remedy existing injuries or injuries that had been acquired from recreational sports activities. Fifteen employees were off for short term periods in the Quarter. Of the 7 long term sickness cases in Quarter 3, all 7 of the individuals have now returned to work.
6. Individuals are encouraged to seek early support via The Fire Fighter's Charity or Occupational Health (OH) Physiotherapy for any MSK issues they may be experiencing.

## **Respiratory**

7. There were 130 days/shifts lost for Respiratory related absences, with the majority of days/shifts lost within the Cold/Cough/Influenza category (97 days/shifts lost). Some of the absences may be due to COVID-19 infections although testing is no longer a mandatory requirement. The Service regularly reminds employees to maintain infection control measures in the workplace to minimise Respiratory infections and during Quarter 3, the Service encouraged staff to book flu vaccinations.

## **Health Management data and activity**

8. Appendix 1 (Health Management) provides data relating to management referrals to OH in Quarter 3. There were 33 new management referrals in Quarter 3, compared to 30 management referrals made in Quarter 2.
9. The top reasons for referrals to OH related to Mental Health (11 referrals) and MSK disorders (10 referrals). This is consistent with previous quarters.
10. Of the 11 referrals for Mental Health, 5 employees cited work related factors. N.B. mental health is not included in work related reporting figures. Referrals for long term sickness absence cases may be reflected within the previous quarter, however, review appointments are carried out throughout the absence.

## **Mental Health at Work Commitment**

11. Good progress has been made on the Mental Health at Work Commitment action plan during Quarter 3. Achievements include collaboration with the Corporate Communications Team to produce a Triple Play video that highlights and promotes The Fire Fighters Charity's range of health and wellbeing programmes, and fundraising opportunities.
12. The Service is actively enhancing the content of the "Back Up Buddy" App and continuing to advocate for health and wellbeing campaigns via our SharePoint page and Wellbeing Champions. Additionally, a Triple Play video was developed in support of 'Time to Talk Day' in February 2024 which introduced the new Wellbeing Champions Group. The video also featured a short clip from the Norwich City Football Club's World Mental Health Day video "You Are Not Alone". The powerful video focuses on the critical issues of suicide prevention and mental health awareness.

## **Routine Medical Assessment Compliance and Outcomes**

13. Appendix 2 (Routine Medical Assessment) provides medical and fitness data from the Operational Assurance Report for Quarter 3 2023-2024.
14. The medical compliance rate for available operational staff for 3 yearly medicals in Quarter 3 is 100%. This figure includes 98% (482) of staff who have completed their medical and 2% (7 staff) who are temporarily unavailable due to sickness,

career break etc. Annual medicals are also 100%, including 95% (40 staff) who have completed their medical and 5% (2 staff) who are temporarily unavailable.

**Routine Fitness Assessment Compliance and Outcomes**

- 15. The fitness compliance rate of operational employees has remained the same in Quarter 3 compared to Quarter 2. 93% (496 staff) who are required to have an annual fitness test were in date in Quarter 3. Of the outstanding 7% (35 staff), 17 have a fitness test booked and 18 are temporarily unavailable.
- 16. 10% of currently tested staff are in the “Amber zone” – a slight decrease from Quarter 2 (11%). 86% of currently tested staff are in the “Green zone”. 4% of currently tested staff are in the “Red zone” (4 individuals) which is a decrease from Quarter 2 (7%). Of these, 1 individual who failed their fitness test at the start of Quarter 3 has been retested and now sits in the “Amber zone”. 1 individual was unable to complete a planned fitness assessment due to a high blood pressure reading prior to the test, and are included in the Red category figures. The individual is currently seeking medical advice before scheduling another test.
- 17. HR are closely monitoring the progress of these staff and are providing support where needed such as allocating individuals their own Service Personal Trainer (PTs). The final two fitness test failures pertain to a single individual who has been advised to improve both their physical fitness and cardiovascular capacity before attempting another assessment. They have been allocated a Service Personal Trainer who is working with them to develop a fitness improvement plan.

**Corporate Considerations**

<b>Resource Implications</b> (identify any financial, legal, property or human resources issues)	Contained within H&S budgets and departmental capacity.
<b>Strategic Policy Links &amp; Core Code of Ethics</b> (Identify how proposals link with current priorities & policy framework and align to the Core Code of Ethics)	Corporate Strategy: ensuring firefighter safety. In addition, develop and train in the People Strategy; and Community first and Leadership of the CCoE.
<b>Risk Management / Health &amp; Safety</b> (identify any risks, the proposed control measures and risk evaluation scores).	Reduces the overall impact for H&S management in the areas identified and safeguards the Services legal requirements.
<b>Consultation</b> (identify any public or other consultation that has been carried out on this matter)	Representative bodies attend H&S Committee and are fully consulted on H&S matters.

<b>Equalities</b> (has an Equalities Impact Assessment been completed? If not, why not?)	N/A
<b>Data Protection Impact Assessment</b> (where personal data is processed a DPIA must be completed to ensure compliant handling)	All personal data has been removed from the reports contained within Appendix 1 & 2.

### **Supporting Information**

Appendix 1: Quarter 3 (Oct 23 – Dec 23) Event Reporting and Summary

Appendix 2: Quarter 3 (Oct 23 – Dec 23) HR Data Reporting