

Report of the Deputy Chief Fire Officer

Health and Safety Committee Update: April to June 2022 (Quarter 1)

Purpose of report

1. To provide the Audit and Standards Committee with a Health & Safety update on activities and items of significance.
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Recommendation

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

- (i) The involvement of the Service in Health and Safety initiatives;*
- (ii) Health and Safety performance information recorded during April to June 2022 (Quarter 1); and*
- (iii) Workforce Health & Wellbeing performance (Quarter 1).*

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 Deputy Chief Fire Officer and last met on 22nd June 2022.
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.

The Working Group was formally tasked with the following:

- To implement the findings from the NFCC's Death in the Workplace report.
- To promote and improve fitness standards across the Service.

The Group are meeting regularly, ensuring actions are monitored and implemented at the earliest opportunity.

Health & Safety Initiatives Update

National Activities

5. The NFCC have issued minutes of a meeting held on 8th March which promoted a number of HWFRS local reviews listed below:
 - Removal of guidelines
 - PPE contaminants
 - H&S management system software
 - Working at height rope specifications
 - Living with Covid
 - Fitness Policies

In addition to these, West Midlands DCFO will be temporarily taking over chairing the NFCC H&S meetings.

Regional Activities

6. The next audit of Staffordshire FRS will continue as scheduled in Quarter 2 2022-23 with topics of working at height/ rope rescue and PPE and equipment. The H&S Advisor will disseminate any findings that may be relevant to HWFRS.

HWFRS Local Activities

7. During April the Covid Response Group came together, and managers planned the 'returning to normal' phase. The UK Government removed all restrictions during April 2022, this was communicated across the service. The Service is looking to continue with some control measures focusing on excellent cleaning and hygiene standards whilst ensuring good ventilation becomes standard working practices within risk assessments to ensure workplaces and work activities are assessed to prevent the transmission of Covid and other infections whilst at work. A further update will be planned for Quarter 2
8. The NFCC National H&S Group and the FBU have looked into the risks associated with contaminants at fire related incidents. The FBU have issued a report produced by UCLAN and HWFRS are undertaking a GAP analysis to ensure current best practices already in place remain up to date. The H&S Advisor has broken down the report into the sections listed below and is working with departmental managers to assure standards are met.
 - Personal Protective Equipment
 - Minimising Contamination at Fire Incidents
 - Returning from a Fire Incident
 - BA Workshops Contamination control
 - Training Centre Contamination Control
 - Vehicle Contamination
 - Health Screening
 - Training and Awareness

9. Following an increase of alternative fuelled vehicles on our roadways impacting on incidents that we attend, HWFRS has increased the level of information available to crews. Additional training, policy and handbook files updates are being created/reviewed to support operational assurance.
10. The national H&S NFCC Group met to discuss the use of guidelines. This item of equipment has been considered to be out of date with modern H&S working practices when linked to operational firefighting scenarios and there may be more suitable alternatives to retracing the direction of travel through a structure. HWFRS are now reviewing this item of equipment, along with its working practices, and an update will be provided at a future meeting.
11. Following a safety event in Devon & Somerset FRS, an issue identified that a number of ropes were marked up incorrectly. The lead working at height instructor from Training Centre and lead from Operational Logistics carried out an initial review of our equipment, update to follow.
12. Of the current 27 Health & Safety Policies there are 5 under scheduled review, which include:
 - Health & Safety Policy (minor amendment consultation phase)
 - Management of Contractors (minor amendment consultation phase)
 - The Production of H&S information (minor amendment consultation phase)
 - Major Event Response Protocol (Death in Workplace) (working group review) draft policy has been created to align HWFRS with Shropshire FRS which will be consulted on during Quarter 2
 - The Misuse of Alcohol and Substances (under review with HR)

These policies will be reviewed in line with legislative and sector best practices and will undergo formal consultation across the organisation, where required, prior to publication.

13. 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 1, 321 risk assessments were reviewed, and 37 new risk assessments were created.

Figure 1 – Risk Assessment Database

Location	Quarter 2 (21/22)		Quarter 3 (21/22)		Quarter 4 (21/22)		Quarter 1 (22/23)	
	Reviewed	Created	Reviewed	Created	Reviewed	Created	Reviewed	Created
North District	85	5	97	12	91	7	87	7
South District	109	18	78	4	79	8	75	6
West District	89	20	66	10	88	15	112	21
Training Centre	44	2	20	0	52	1	32	1
Others	24	2	18	1	4	0	15	2
Total	351	47	279	27	314	31	321	37

H&S Working Group activity updates

14. The group is progressing the identified action points against the Death in the Workplace analysis. Training of welfare officers is being provided throughout 2022. The final steps are now in progress including the review and updating of MERP.
15. The group has identified several areas of work required in order to implement the new Fitness policy, which is under development/consultation in order to promote fitness across the Service. During Quarter 3 the draft policy will be circulated for consultation. New equipment has been purchased for stations and will be delivered during Quarter 3.

Quarter 1 Performance Report

16. Appendix 1 provides details relating to all safety events reported and investigated during Quarter 1 of the 2022-23 reporting year (April to June).

The total number of safety events reported in Quarter 1 decreased by three compared to the previous quarter 40 to 37. The most significant decrease was in the vehicle collision category which decreased by five & exposure which decreased by three.

17. During the period, there has also been a slight increase in Personal Injury and Violence reported events (+1). The category with the largest increase this quarter is Near Hits/Cause for Concern (+5).
18. One injury has been reported to the Health & Safety Executive (HSE) under the RIDDOR regulations, due to it being a dangerous occurrence requiring a hospital visit.
19. Two basic specialist investigations occurred relating to a personal injury and a near hit/cause for concern.

20. The data and trend analysis will be continued to be reviewed by the H&S Department. A schedule training for the 2022-23 year with a focus on additional manual handling train the trainer courses.

Workforce Health & Wellbeing Update: Quarter 1 2022-23

National Sickness data

21. Information is unavailable at the time of writing as the Cleveland Report reporting timeframes do not consistently align with the Health and Safety Committee meeting schedule. This information will be considered when available.

HWFRS Sickness data and activity

22. Appendix 2 (Performance Overview) provides data relating to all sickness absence by workforce group and main causes of sickness absence in Quarter 1.
23. In comparison to Q4, there has been an increase in total days/shifts lost to sickness absence for all staff (Q4 at 1.34 versus Q1 at 2.02). This has been attributed to an increased number of reported cold/cough and influenza type sickness absences (Q4 at 20 occurrences verses Q1 at 40 occurrences). This increase may be attributed to the change in the Service's sickness reporting guidance (amended in May 2022), whereby Covid 19 related absences should be recorded under the 'Respiratory' category, which may explain the rise in occurrences. Previously, the Service reported Covid 19 absences separately.
24. There were 3 main causes of sickness absence:
- Respiratory – cold/cough/chest Infections;
 - Gastro-Intestinal; and
 - Musculo-Skeletal (MSK) – back.
25. Respiratory conditions accounted for 34% of total sickness absence reported during Q1 and mainly within the wholetime workforce group.
26. HR and Health and Safety continue to monitor absence rates and are working proactively with Line Managers to promote safe working/manual handling practices and work in accordance with the Service's Attendance Management Policy as appropriate. The Service will also be promoting the staff flu jab scheme as the autumn months approach.
27. Whilst the Service does not report on On-Call sickness absence for the purposes of the Cleveland Report, during Q1 there were 5 occurrences due to an accident at work, 2 relating to long-term sickness cases, 1 MSK case was offered support through Occupational Health (OH) and physiotherapy yet this support was declined, 1 received support through the CIST team, and 1 case

was an MSK injury that was self-certified, and the employee did not require any further support.

Health Management data and activity

28. Appendix 2 (Health Management) provides data relating to OH referrals in Q1. There were 33 new management referrals made to OH in Q1, compared to 35 management referrals made in Q4.
29. The top reasons for referrals to OH related to MSK disorders (14 referrals) and mental health (12 referrals) specifically for stress, anxiety and/or depression, which is consistent with previous reporting Quarters.
30. In respect to referrals for MSK disorders, 1 was work related and external treatment was provided. Where appropriate, treatment for MSK disorders includes referrals for physiotherapy via OH.
31. Of the 12 referrals for mental health, 6 employees cited work related reasons. N.B. mental health is not included in work related reporting figures. Overall however, Service data shows the majority of mental health referrals tend to be non-work related.
32. Support is offered for all mental health referrals, including stress risk assessments as part of return to work plans and/or counselling support both through OH and the Service's Welfare Support team. External psychotherapy support has also been explored via the NHS and The Fire Fighters Charity.
33. DCFO Guy Palmer signed The Mental Health at Work Commitment on behalf of the Service in February 2022. To fulfil our commitment, HR and the Welfare Support Team are currently producing an action plan to support the implementation of the six Standards from the Commitment. The deadline for the action plan is the end of October 2022.
34. To meet one of the Standards, the Service is required to produce a case study covering the mental health support provided to staff. The case study has been completed and submitted. It focuses on the tremendous work carried out by the Welfare Support and CIST teams, who provide mental health support and advice to those who are exposed to traumatic incidents and facing difficult situations.

Routine Medical Assessment Compliance and Outcomes

35. Appendix 2 (Routine Medical Assessment) provides medical and fitness data from the Operational Assurance Report for Q1 2022-2023.
36. The medical compliance rate of operational staff has decreased in Q1 compared to Q4. 60% of employees who are required to have an annual medical assessment were in date in Q1, compared to 57% in Q4. 75% of employees who are required to have a 3 yearly medical assessment were in date in Q1, compared to 82% in Q4. 62% of out of date 3 yearly medical

assessments for Q1 were within the 0-3 months category, which is consistent with previous reporting as OH aim to recapture medicals as impacted by Covid19; this 3-month buffer has been temporarily agreed by the Area Commander for Response. The Service is implementing a system to prioritise significantly out of date employees, and maximise the medical clinic bookings. This should result in an increase in the compliance rate in Q2.

Routine Fitness Assessment Compliance and Outcomes

37. The fitness compliance rate of operational employees has increased in Q1 compared to Q4. The Service's Fitness Advisor, HR team, and station local management have worked together to ensure staff with out of date tests attend scheduled fitness tests. This will continue to be monitored and instances of non-attendance escalated to Station Commanders for remedial action.
38. The data confirms that there is a total of 17% of currently tested staff in the 'amber zone' with 83% in the 'green zone'. This indicates a 3% decrease of staff in the amber zone from Q1.
39. A new Fitness Advisor has been appointed with the University of Worcester to provide dedicated support to the Service. Feedback from staff has been positive on the new provision and HR continue to conduct contract review meetings with the University of Worcester on a regular basis.

Corporate Considerations

Resource Implications (identify any financial, legal, property or human resources issues)	Contained within H&S budgets and departmental capacity.
Strategic Policy Links (identify how proposals link in with current priorities and policy framework and if they do not, identify any potential implications).	Corporate Strategy: ensuring firefighter safety.
Risk Management / Health & Safety (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.
Consultation (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.
Equalities (has an Equalities Impact Assessment been completed? If not, why not?)	N/A

Data Protection Impact Assessment (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.
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Supporting Information

Appendix 1: Quarter 1 Event Reporting and Summary

Appendix 2: Quarter 1 Workforce Health & Wellbeing Update