

Report of Deputy Chief Fire Officer

Health and Safety Committee Update: October to December 2022 (Quarter 3)

Purpose of report

1. To provide 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 October to December 2022 (Quarter 3)*
- (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 Deputy Chief Fire Officer and last met on 22 March 2023.
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 7th December 2022 which promoted a number of subjects listed below:
 - Slow manoeuvring vehicles – Scotland FRS will be making their package available in the coming months
 - PPE contaminants - The second review in relation to contaminants has been passed onto the National PPE and Contaminants Working Group to process and make recommendations to NFCC
 - The NFCC are aiming to produce a Health and Safety toolkit created to aid commonality across all Services.
 - Analytical Risk Assessment (ARA) - There is a new document from the National Command and Control user group concerning the ARA process that is being reviewed and recommendations to be circulated post March 2023.

Regional Activities

6. The regional group met on 7th February 2023.
 - The group has agreed to review the Scotland slow manoeuvring vehicles package when available and look to produce a regional poster campaign to raise awareness around the issues.
 - The next audit of Staffordshire FRS will take place in May 2023 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 are hosting the next regional meeting in June 2023.

HWFRS Local Activities

7. The Service appointed a new Health & Safety Advisor in December 2022 and he is due to start in April 2023.
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

HWFRS are undertaking a GAP analysis to ensure current best practices already in place remain up to date. The report is broken down into the sections listed below:

- 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

The GAP analysis shows that the Service is making significant progress with further work within the Service to develop our existing processes and procedures being developed as an action plan. An additional paper will be included in the next quarterly update.

9. Of the current 26 Health & Safety policies (1 has been removed as it is a guidance document) there are 12 under scheduled review. In preparation for the arrival of the new H&S Advisor the Operational Policy team are carrying out service change amendments to allow for an efficient review on his arrival.

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.

10. The Operational Policy team have reviewed the current Analytical Risk Assessment (ARA) policy and process in line with recommendations following the service HMICFRS report and have issued a minor amendment. Training will be issued to Service staff in Q4 2022/23 and an assurance process implemented in Q1 2023/24 to ensure the quality of ARAs carried out at operational incidents.
11. 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, 301 risk assessments were reviewed, and 50 new risk assessments were created.

Figure 1 – Risk Assessment Database

Location	Quarter 4 (21/22)		Quarter 1 (22/23)		Quarter 2 (22/23)		Quarter 3 (22/23)	
	Reviewed	Created	Reviewed	Created	Reviewed	Created	Reviewed	Created
North District	91	7	87	7	105	5	102	16
South District	79	8	75	6	80	7	53	13
West District	88	15	112	21	101	21	93	16
Training Centre	52	1	32	1	40	1	44	1
Others	4	0	15	2	22	1	9	4
Total	314	31	321	37	348	35	301	50

H&S Working Group activity updates

12. The Funeral SPI has been reviewed and issued. Death of an Employee Guidance has been published and made available to managers. The Service ran and exercise against the MERP and the exercise group is now feeding back their comments to allow for the reviewed document to be published. This is the final action to complete this area of work and will be complete Q4 2022/23.
13. The new Fitness Policy is undergoing formal consultation which closes on 24th March. Once all returns have been reviewed the new Policy will be issued with a bedding in period of up to 12 months to allow for support to those personnel currently not meeting the standard. New fitness equipment has been procured for each station and is arriving late March 2023.

The Service's personal trainers met for a standard setting day on 28th March in readiness for providing support for staff when the new policy is launched.

Quarter 3 Performance Report

14. Appendix 1 provides details relating to all safety events reported and investigated during Quarter 3 of the 2022-23 reporting year (October to December).

The total number of safety events reported in Quarter 3 (42) decreased by three compared to the previous quarter (45). The most significant decrease was in the personal injuries category which decreased by six.

15. No injuries have been reported to the Health & Safety Executive (HSE) under the RIDDOR regulations, due to a dangerous occurrence and a loss of working days.
16. Two basic specialist investigations occurred, one relating to Breathing Apparatus and one to member of staff having had a potential seizure.

Workforce Health & Wellbeing Update – Quarter 3 2022-23

National Sickness data

17. The Cleveland Report (1st April – 31st December 2022) allows comparison between contributing Fire & Rescue Services across the UK on sickness absence.
18. Nationally, there were 3 main causes of sickness absence for all Fire Services: Musculo-Skeletal (MSK) (32%), Mental Health (21%) and Respiratory (11%).
19. HWFRS lost 6.57 days to sickness per employee, which compares favourably with other Fire and Rescue Services. The lowest average was 4.68 days and the highest 15.54 days; the national average is 7.0 days.

HWFRS Sickness data and activity

20. Appendix 2 (Performance Overview) provides data relating to all sickness absence by workforce group and main causes of sickness absence in Quarter 3.
21. In comparison to Quarter 2, there has been an increase in the total days/shifts lost to sickness absence for all staff (Q2 at 2.02 versus Q3 at 2.52). This may be attributed to the number of absences within the Respiratory categories. As previously reported, COVID-19 is now classed as part of a range of respiratory illnesses and is recorded as such for sickness absence reporting purposes, and this is reflected within the Respiratory – Other data, whereas COVID-19 absences were previously recorded separately.
22. There has been an increase in the Hospital/Post-Operative figures, although the majority of absences were due to treatment that was pre-planned, rather than emergency procedures, and this may reflect that the NHS have resumed operations for minor injuries/conditions.
23. There has been an increase in the total days/shifts lost due to sickness within the Fire Control workgroup (8.23 in Q3, compared to 5.32 in Q2). Fire Control also reported higher figures compared to other workgroups within the last quarter, which may indicate a trend of higher sickness absence rates within this workgroup. The increase is largely attributable to long term sickness cases some of which have now been resolved, as reported in the most recent Performance Report considered by the P&R Committee earlier in March.
24. Respiratory conditions accounted for 52% of total sickness absence reported during Quarter 3, out of 73 sickness occurrences, and mainly within the Wholetime workforce group for Respiratory - Cold/Cough/Influenza absences.
25. An increase in Respiratory absences was anticipated for Quarter 3 due to seasonal flu and other seasonal respiratory illnesses. The Service continues to encourage good hygiene practices to prevent cross contamination of viruses as well as promotion of our Occupational Health (OH) Service, Health and Wellbeing Portal resources and information to promote healthy living.

Health Management data and activity

26. Appendix 2 (Health Management) provides data relating to OH referrals in Quarter 3. There were 20 new management referrals in Quarter 3, compared to 19 management referrals made in Quarter 2.
27. The top reasons for referrals to OH related to MSK disorders (6 referrals) and Mental Health (6 referrals). Referrals for Mental Health increased in Quarter 3 compared to previous reporting quarter (2 referrals in Q2). Mental Health concerns were also highlighted within other referral categories.
28. Where appropriate, treatment for MSK disorders includes referrals for physiotherapy via OH, and 1 referral was made in Quarter 3. Employees have

also been self-referring to The Fire Fighters Charity and seeking support via the NHS physiotherapy programmes. Additional DSE (Display Screen Equipment) has also been offered to individuals to support with MSK issues.

29. Of the 6 referrals for Mental Health, 5 employees cited work related reasons. **N.B. mental health is not included in work related reporting figures.**
30. 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. The HR team has been working with The Fire Fighters Charity to promote their health and wellbeing workshops within the Service including mindfulness and improving sleep, to promote strategies for improving Mental Health.
31. There has been an increase in referrals for Gynaecological/ Genitourinary/ Reproductive, with 2 referrals in Quarter 3 related to menopause. The Service has recently run a programme of 'Menopause & the Workplace' workshops, with a plan to roll out further sessions, to support staff with guidance and coping techniques, as well as providing mental wellness support. The staff network group, Women@HWFire, are currently updating the guidance document for Menopause in the Workplace.

Mental Health at Work Commitment

32. The Service signed The Mental Health at Work Commitment in February 2022 and submitted a high-level action plan in October 2022. The action plan outlines how the Service will embed the six Standards of the Commitment and has been developed for delivery over a two-year period, formally commencing in 2023-24.
33. Work is underway on the Mental Health at Work Commitment action plan, specifically working towards Q1 2023-24 objectives. HR will provide an update on the action plan at the next Health and Safety Committee meeting.

Routine Medical Assessment Compliance and Outcomes

34. Appendix 2 (Routine Medical Assessment) provides medical and fitness data from the Operational Assurance Report for Quarter 3 2022-2023.
35. The medical compliance rate of operational staff has increased overall in Quarter 3 compared to Quarter 2. 94% of employees who are required to have an annual medical assessment were in date in Quarter 3, compared to 73% in Quarter 2. There was a slight decrease in the compliance rate for 3 yearly medical assessments, with 85% of employees in Quarter 2, compared to 84% in Quarter 3. The remaining out of date medical assessments have been prioritised for Quarter 4.

Routine Fitness Assessment Compliance and Outcomes

36. The fitness compliance rate of operational employees has increased in Quarter 3 compared to Quarter 2. 93% of employees who are required to have an annual fitness test were in date in Quarter 3, compared to 92% in Quarter 2. This is the highest compliance rate for annual fitness assessments achieved since early 2019.
37. 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 assessments. Compliance rates will continue to be monitored and instances of non-attendance escalated to Station Commanders for remedial action.
38. The data confirms 24% of currently tested staff are in the "Amber zone" – a 6% increase from Quarter 2. The Service's Fitness Advisor has suggested this increase may be attributed to a number of factors including a general lack of cardiovascular exercise throughout the year, and a rise in overall BMI for operational staff. 76% of currently tested staff are in the "Green zone".
39. As part of the Fitness Standards policy work, the Service is exploring options for holistic support for those staff that may need support with their fitness levels, via our Occupational Health provider and the University of Worcester.

Corporate Considerations

Resource Implications (identify any financial, legal, property or human resources issues)	Contained within H&S budgets and departmental capacity.
Strategic Policy Links & Core Code of Ethics (Identify how proposals link with current priorities & policy framework and align to the Core Code of Ethics)	Matters considered directly link being able to deliver the CRMP and other Core Strategy: ensuring firefighter safety. In addition, the People Strategy underpins these work streams. Also accountable leadership in the CCoE.
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 relevant H&S matters and formal policies.
Equalities (has an Equalities Impact Assessment been completed? If not, why not?)	EIA are completed for relevant policy as required.

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 3 (October – December 2022) Event Reporting and Summary

Appendix 2: Quarter 3 (October – December 2022) Health & Wellbeing Data Reporting